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Mayor Timothy M. Keller

CITY OF ALBUQUERQUE

Albuquerque, New Mexico

Planning Department

INTER-OFFICE MEMORANDUM

December 15, 2021

TO: Cynthia Borrego, President, City Council

FROM: Alan Varela, Interim Planning Director Alan Varela
Alan Varela (Dec 14, 2021 12:46 MST)

SUBJECT: AC-21-16, Project-2021-005834, VA-2021-00317: Peter S. Kalitsis, Sandra Perea, Elder Homestead Neighborhood Association, appeals the Zoning Hearing Examiners decision to approve a conditional use to allow an overnight shelter for Lot 1, Swift Addn, located at 5006 Gibson BLVD SE, zoned MX-H [Section 14-16-4-2]

OVERVIEW

Consensus Planning, Agent for the City of Albuquerque Family and Community Services applied for a conditional use to allow an overnight shelter at 5006 Gibson Blvd SE. The request was scheduled and heard at the September 21, 2021 public hearing.

In the Notice of Decision dated October 06, 2021 the Zoning Hearing Examiner (ZHE) found that the matter should be continued to allow Applicant the opportunity to finalize and adopt the operations plan on which rests a significant portion of the justification. The item was continued to October 19, 2021.

October 19, 2021 the request was heard, the operations plan submitted and on November 3, 2021 the ZHE issued his decision of approval.

BASIS FOR APPEAL

Section 14-16-6-4(V)(4) outlines the applicable criteria for the appeal in determining whether the Zoning Hearing Examiner erred in their decision:

6-4(V)(4) Criteria for Decision

The criteria for review of an appeal shall be whether the decision-making body or the prior appeal body made 1 of the following mistakes:

6-4(V)(4)(a) The decision-making body or the prior appeal body acted fraudulently, arbitrarily, or capriciously.

6-4(V)(4)(b) The decision being appealed is not supported by substantial evidence.

6-4(V)(4)(c) The decision-making body or the prior appeal body erred in applying the requirements of this IDO (or a plan, policy, or regulation referenced in the review and decision-making criteria for the type of decision being appealed).

STAFF RESPONSE

The reasons for the appeal, excerpted from Appellant's letter, are listed below, with bulleted, italicized responses from the Planner for the ZHE. Please see the Appellant's letter and submittal packet for additional details.

Reasons for the appeal:

1. The requirements of Resolution R-21-141 have not been met by the City. The ZHE clearly erred in reaching Finding No. 10, 11, and 12. The City must follow the requirements of the Resolution before any Conditional Use Permit is issued.

- *The ZHE found that noticing and the requirements of R-21-141 were met.*
- *Finding 10. On March 15, 2021, the Albuquerque City Council approved Resolution R-21-141, which required two community input sessions within 45 days and advancement towards a Good Neighbor Agreement by the City with area residents and businesses to be in place for so long as the Gateway Center operates at the Gibson Health Hub site. The City held the two community input meetings on June 10 and June 12, 2021. The first meeting was held online and the second was held at the Gibson Health Hub Educational Building. Input from the meetings is posted on the City website at www.cabq.gov/gateway.*
- *Finding 11. Applicant provided evidence that all property owners and neighborhood associations entitled to notice were notified of the Application. Although a neighboring business owner complained that he did not receive notice, his business was not listed on the list of properties located within the required notice perimeter pursuant to the IDO, and it appears from evidence in the record, including without limitation the perimeter buffer map for the Subject Property, that the complainant's business is located outside the required notice perimeter. Further, the complainant clearly had notice, given that he submitted written evidence before the ZHE hearing and oral testimony at the ZHE hearing. Based on evidence in the record, Application provided the required timely notice to all property owners whose properties are within the required notice perimeter. Opponents submitted a petition signed by business owners who complained of inadequate notice. Nevertheless, based on evidence of mailings, emails, publication, and sign posting, the ZHE finds that the notice given by Applicant was compliant with the requirements of the IDO.*
- *Finding 12. Applicant timely mailed neighborhood meeting requests on June 4, 2021.*

2. We appeal the zoning hearing examiner's decision and request that this application be denied due to the IDO processes not being followed. This demonstrates that per IDO section 6-4(V)(4)(b) The decision being appealed is not supported by substantial evidence. (Finding No. 12)

- *Finding 12 is listed above.*

- *Pursuant to IDO Section 14-16-6-4(E)(3), the applicant bears the burden of providing a sound justification for the requested decision, based on substantial evidence.*
- *Findings 18, 20, 22, 25, 27 and 29, state that the ZHE found that on balance, the Applicant provided sound justifications showing compliance with IDO Section 14-16-6-6(A)(3) (Review and Decision Criteria– Conditional Use).*

3. This demonstrates that per IDO section 6-4(V)(4)(c) The decision-making body erred in applying the requirements of this IDO (or a plan, policy, or regulation referenced in the review and decision-making criteria for the type of decision being appealed). (Finding No. 13)

- *I do not understand the Appellant’s listing of Finding No. 13 to support an argument that the ZHE erred in applying IDO requirements, however, the referenced finding is included below.*
- *Finding 13. On June 22, 2021, the City Land Use Facilitation Program conducted a facilitated pre-application meeting with community members, online via Zoom, to which were invited representatives of the affected neighborhood associations and the community at large. According to the facilitated meeting report dated June 24, 2021, approximately 98 people registered for the meeting and as many as 80 participated in the meeting at the highest participation.*

4. By not either rejecting this application for conditional use permit or by not requiring condition required as part of the conditional use permit for the above reason, the ZHE demonstrates that per section 6-4(V)(4)(a) The decision-making body or the prior appeal body acted arbitrarily, or capriciously. (Finding No. 15)

- *Finding 15 lists evidence submittals by the Applicant, supporters of the Application, and Opponents of the Application regarding the requirement under IDO Section 14-16-6-6(A)(3)(a) that the requested conditional use be “consistent with the ABC Comp. Plan, as amended”.*
- *The ZHE found that on balance, the Applicant provided a sound justification showing compliance with IDO Section 14-16-6-6(A)(3)(a).*

5. By not either rejecting this application for conditional use permit or by not requiring condition required as part of the conditional use permit for the above reason, the ZHE demonstrates that per section 6-4(V)(4)(a) The decision-making body or the prior appeal body acted arbitrarily, or capriciously. (Finding No. 16, 17, 18).

- *Finding 16. Although opponents point out that homeless and behavioral health services are not spread equally throughout the City, the Comp Plan “uses the term ‘equity’ to describe ensuring that different people or places have the opportunities, access, and services they most need. Many people think ‘equity’ and ‘equality’ are interchangeable terms. ‘Equality’ aims to ensure that all people or places have the same opportunities, access, and services – a laudable goal. Distributing an equal amount to each would be fair if people and places had the same starting amounts. Discussions of “equity” acknowledge that people and places might need and want different things – and have different starting*

places. The equity approach involves assessing the different needs that people and places have and prioritizing resources and efforts to address them in the order of urgency that best matches those needs to move toward equality over time.” See Comp Plan at 4-2. Accordingly, the Comp Plan does not require distribution of resources and unwanted land uses equally throughout the City, but rather institutes the policy that resources and unwanted land uses be located equitably, in consideration of the totality of the circumstances.

- *Finding 17. Further, Comp Plan POLICY 5.3.7 states “Locally Unwanted Land Uses: Ensure that land uses that are objectionable to immediate neighbors but may be useful to society are located carefully and equitably to ensure that social assets are distributed evenly and social responsibilities are borne fairly across the Albuquerque area. (a) Minimize the impacts of locally unwanted land uses on surrounding areas through policies, regulations, and enforcement. (b) Ensure appropriate setbacks, buffers, and/or design standards to minimize offsite impacts.” Applicant has demonstrated, by the evidence cited in the Notification of Decision and other evidence in the record, its efforts to locate its proposed overnight shelter carefully and equitably in an area of need surrounded by social and governmental assets, and that its operations will benefit not only people suffering homelessness in the immediate area, but in the community as a whole. Also, Applicant has submitted that policies, regulations, enforcement, setbacks, buffers, and design standards will be implemented to minimize any negative impacts.*
- *Finding 18. On balance, the ZHE finds that Applicant has provided a sound justification showing compliance with IDO Section 14-16-6-6(A)(3)(a) based on substantial evidence.*

6. Use-specific Standards applicable to the use in Section 14-16-4-3; the DPM; other adopted City regulations were not followed and compliance with IDO Section 14-16-6-6(A)(3)(b) was not met. This demonstrates that per IDO section 6-4(V)(4)(c) The decision-making body erred in applying the requirements of this IDO (or a plan, policy, or regulation referenced in the review and decision-making criteria for the type of decision being appealed). For this reason, we appeal this Conditional Use Permit and request that the Conditional Use Application for Permit be rejected. (Finding No. 19, 20).

- *Finding 19. Regarding the requirement under IDO Section 14-16-6-6(A)(3)(b) that the requested conditional use comply “with all applicable provisions of this IDO, including but not limited to any Use-specific Standards applicable to the use in Section 14-16-4-3; the DPM; other adopted City regulations; and any conditions specifically applied to development of the property in a prior permit or approval affecting the property, or there is a condition of approval that any Variances or Waivers needed to comply with any of these provisions must be approved or the Conditional Use Approval will be invalidated pursuant to Subsection [14-16-6-6(A)(2)(c)2]”:*
 - a. *Applicant and supporters of the Application submitted, among other things, the following:*
 - i. *The proposed overnight shelter is allowed under the MX-H zone as a Conditional Use. There are ongoing functions at the Gibson Health Hub that fall under hospital use, which is permissive under the MX-H zone. The proposed Gateway Center overnight shelter will comply with the Use-Specific Standards contained in Section 4-3-(C)(6) Overnight Shelter.*
 - b. *Opponents of the Application submitted, among other things, the following:*

i. The intent of the MX-H zone is undermined because, in the estimation of opponents, the proposed use is not appropriately sited at the Subject Property.

- *Finding 20. On balance, the ZHE finds that Applicant has provided a sound justification showing compliance with IDO Section 14-16-6-6(A)(3)(b) based on substantial evidence.*

7. Due to the lack of good faith and the lack of beginning negotiations with the city as required by R-21-141, This demonstrates that Per section 6-4(V)(4)(a) The decision-making body or the prior appeal body acted arbitrarily, or capriciously by not enforcing this city council resolution and per IDO section 6-4(V)(4)(b) The decision being appealed is not supported by substantial evidence. (Finding No. 21, 22).

- *Finding 21 lists evidence submittals by the Applicant, supporters of the Application, and Opponents of the Application regarding the requirement under IDO Section 14-16-6-6(A)(3)(b) that the requested conditional use “will not create significant adverse impacts on adjacent properties, the surrounding neighborhood, or the larger community”.*
- *Finding 22. On balance, the ZHE finds that Applicant has provided a sound justification showing compliance with IDO Section 14-16-6-6(A)(3)(c) based on substantial evidence.*

8. This demonstrates that per IDO section 6-4(V)(4)(c) The decision-making body or the prior appeal body erred in applying the requirements of this IDO (or a plan, policy, or regulation referenced in the review and decision-making criteria for the type of decision being appealed) so therefore we request that the Conditional Use Permit be denied/revoked. (Finding No. 26, 26).

- *Finding 26. Regarding the requirement under IDO Section 14-16-6-6(A)(3)(e) that “on a project site with existing uses, [the requested conditional use] will not increase non-residential activity within 300 feet in any direction of a lot in any Residential zone district between the hours of 10:00 P.M. and 6:00 A.M.”:*
 - a. Applicant and supporters of the Application submitted, among other things, the following:*
 - i. The overnight shelter use at the Gibson Health Hub will not increase non-residential activity within 300 feet of a residential zone district between the hours of 10:00 P.M. and 6:00 A.M. The overnight shelter use will be a relatively small portion of the Gibson Health Hub premise. The initial phase of the Gateway Shelter is anticipated to limit intakes to between 8:00 A.M to 8:00 P.M. for most community partner referrals, but intakes will be conducted at all hours for referrals from hospitals, first responders, and law enforcement. The intake activity will be more than 500 feet from the R-ML zoned property to the east and buffered by a large parking lot. The closest apartment building within the R-ML site is setback approximately 67 feet east of its shared property line with the Gibson Health Hub. These existing physical conditions and separation between uses, and operating procedures will ensure the adjacent residential use will not impacted by the overnight shelter use at the Gibson Health Hub facility.*
 - b. Opponents of the Application submitted, among other things, the following:*
 - i. The proposed overnight shelter will operate 24 hours a day.*
- *Finding 27. On balance, the ZHE finds that Applicant has provided a sound justification showing compliance with IDO Section 14-16-6-6(A)(3)(e) based on substantial evidence.*

/ Lorena Patten-Quintana /
Lorena Patten-Quintana, ZHE Planner
Office of the Zoning Hearing Examiner
City of Albuquerque Planning Department





AC-21-16

Final Audit Report

2021-12-14

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By:	Lucinda Montoya (lucindamontoya@cabq.gov)
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CITY OF ALBUQUERQUE
OFFICE OF ADMINISTRATIVE HEARINGS
ZONING HEARING EXAMINER
NOTIFICATION OF DECISION

City of Albuquerque Family and Community Services (Agent, Consensus Planning) requests a conditional use to allow an overnight shelter for Lot A1A1A/Lovelace Hospital, Lovelace Hospital, located at 5400 Gibson BLVD SE, zoned MX-H [Section 14-16-4-2]

Special Exception No:..... **VA-2021-00316**
Project No: **Project#2021-005834**
Hearing Date: 10-19-21
Closing of Public Record: 10-19-21
Date of Decision: 11-03-21

On the 19th day of October, 2021, Consensus Planning, agent for property owner, City of Albuquerque Family and Community Services (“Applicant”) appeared before the Zoning Hearing Examiner (“ZHE”) requesting a conditional use to allow an overnight shelter (“Application”) upon the real property located at 5400 Gibson BLVD SE (“Subject Property”). Below are the ZHE’s finding of fact and decision:

FINDINGS:

1. Applicant is requesting a conditional use to allow an overnight shelter.
2. The City of Albuquerque City of Albuquerque Integrated Development Ordinance (“IDO”), Section 14-16-7-1 defines an overnight shelter as *“A facility that provides sleeping accommodations for 6 or more persons for a period of less than 24 hours with no charge or a charge substantially less than market value; it may provide meals and social services. Any such facility open to clients between 10:00 P.M. and 7:00 A.M. is considered an overnight shelter.”*
3. The Subject Property is zoned MX-H, the purpose of which under the IDO is to *“provide for large-scale destination retail and high-intensity commercial, residential, light industrial, and institutional uses, as well as high-density residential uses, particularly along Transit Corridors and in Urban Centers. The MX-H zone district is intended to allow higher-density infill development in appropriate locations.”*
4. Table 4-2-1 of the IDO states that an overnight shelter in the MX-H zone requires a conditional use approval.
5. IDO Section 14-16-6-6(A)(3) (Review and Decision Criteria– Conditional Use) reads: *“An application for a Conditional Use Approval shall be approved if it meets all of the following criteria:*
 - (a) *It is consistent with the ABC Comp. Plan, as amended;*
 - (b) *It complies with all applicable provisions of this IDO, including but not limited to any Use-specific Standards applicable to the use in Section 14-16-4-3; the DPM; other adopted City regulations; and any conditions specifically applied to development of the property in a prior permit or approval affecting the property, or there is a condition of approval that any Variances or Waivers needed to*

comply with any of these provisions must be approved or the Conditional Use Approval will be invalidated pursuant to Subsection (2)(c)2 above.

- (c) *It will not create significant adverse impacts on adjacent properties, the surrounding neighborhood, or the larger community.*
 - (d) *It will not create material adverse impacts on other land in the surrounding area through increases in traffic congestion, parking congestion, noise, or vibration without sufficient mitigation or civic or environmental benefits that outweigh the expected impacts.*
 - (e) *On a project site with existing uses, it will not increase non-residential activity within 300 feet in any direction of a lot in any Residential zone district between the hours of 10:00 P.M. and 6:00 A.M.*
 - (f) *It will not negatively impact pedestrian or transit connectivity without appropriate mitigation.*
6. The applicant bears the burden of providing a sound justification for the requested decision, based on substantial evidence, pursuant to IDO Section 14-16-6-4(E)(3).
 7. The applicant bears the burden of showing compliance with required standards through analysis, illustrations, or other exhibits as necessary, pursuant to IDO Section 14-16-6-4(E)(4).
 8. Applicant timely submitted a written authorization for Agent to act on Applicant's behalf.
 9. Applicant's community outreach regarding the proposed Gateway Center dates back to 2018, and that outreach utilized community input sessions, online surveys, focus groups with people experiencing homelessness, and neighborhood community meetings.
 10. On March 15, 2021, the Albuquerque City Council approved Resolution R-21-141, which required two community input sessions within 45 days and advancement towards a Good Neighbor Agreement by the City with area residents and businesses to be in place for so long as the Gateway Center operates at the Gibson Health Hub site. The City held the two community input meetings on June 10 and June 12, 2021. The first meeting was held online and the second was held at the Gibson Health Hub Educational Building. Input from the meetings is posted on the City website at www.cabq.gov/gateway.
 11. Applicant provided evidence that all property owners and neighborhood associations entitled to notice were notified of the Application. Although a neighboring business owner complained that he did not receive notice, his business was not listed on the list of properties located within the required notice perimeter pursuant to the IDO, and it appears from evidence in the record, including without limitation the perimeter buffer map for the Subject Property, that the complainant's business is located outside the required notice perimeter. Further, the complainant clearly had notice, given that he submitted written evidence before the ZHE hearing and oral testimony at the ZHE hearing. Based on evidence in the record, Application provided the required timely notice to all property owners whose properties are within the required notice perimeter. Opponents submitted a petition signed by business owners who complained of inadequate notice. Nevertheless, based on evidence of mailings, emails, publication, and sign porting, the ZHE finds that the notice given by Applicant was compliant with the requirements of the IDO.
 12. Applicant timely mailed neighborhood meeting requests on June 4, 2021.
 13. On June 22, 2021, the City Land Use Facilitation Program conducted a facilitated pre-application meeting with community members, online via Zoom, to which were invited representatives of the affected neighborhood associations and the community at large.

According to the facilitated meeting report dated June 24, 2021, approximately 98 people registered for the meeting and as many as 80 participated in the meeting at the highest participation.

14. Applicant attended a pre-application meeting with City staff on June 29, 2021.
15. Regarding the requirement under IDO Section 14-16-6-6(A)(3)(a) that the requested conditional use be “*consistent with the ABC Comp. Plan, as amended*”:
 - a. Applicant and supporters of the Application submitted, among other things, the following:
 - i. Goal 6.2 Multi-Modal System: Encourage walking, biking, and transit, especially at peak-hour commuting times, to enhance access and mobility for people of all ages and abilities. Applicant Response: The proposed Gateway Center overnight shelter at the Gibson Health Hub furthers Goal 6.2 Multi-Modal System by placing it in an area with excellent multi-modal access, including transit services, major street network, and pedestrian and bicycle access and connections. The subject property is along Gibson Boulevard, an Urban Principal Arterial, and designated as a Commuter Corridor by the Comprehensive Plan. It is within the designated San Mateo Boulevard Major Transit Corridor area and a 1/2-mile west of the Louisiana Boulevard Major Transit Corridor area.
 - ii. Goal 9.4 Homelessness: Make homelessness rare, short-term, and non-recurring. Applicant Response: The Gateway Center overnight shelter will further Goal 9.4 Homelessness by being a critical component of the City's comprehensive approach to making homelessness rare, short-term, and non-recurring. The City estimates that there are at least 1,525 people in shelters or on the streets in Albuquerque each night, and at least 5,000 households experienced homelessness in 2020. The Gateway Center will address chronic homelessness in Albuquerque by providing safe, dignified emergency shelter within a central, developed area of Albuquerque. In addition, clients will receive wraparound services that help them exit the overnight shelter into stable, permanent housing and other community resources.
 - iii. POLICY 9.4.1: Best Practices: Implement an appropriate and effective model to address chronic homelessness. Applicant Response: The Gateway Center overnight shelter furthers Policy 9.4.1 Best Practices by providing emergency shelter for those experiencing homelessness and work with them to transition into permanent housing. The proposed Gateway Center overnight shelter will function as a "gateway" to end chronic homelessness through the use of three models to effectively transition unhoused community members into housing
 - iv. POLICY 9.4.2 Services: Provide expanded options for shelters and services for people experiencing temporary homelessness. Applicant Response: The proposed Gateway Center overnight shelter will further Policy 9.4.2 Services by expanding options for temporary shelter and services for the City's unhoused populations. Although there are many service providers in Albuquerque that serve the unhoused populations, the City does not currently have a centralized 24/7 center that can connect

unhoused individuals to the support organizations they need, often creating a "gap" in services. By building strong partnerships with existing providers, the City's proposed Gateway Center can serve as a centralized center, allowing for a more efficient connection to essential services and reducing the potential gap in services.

- v. POLICY 9.4.3 Equitable Distribution: Support a network of service points that are easily accessible by residents and workers, geographically distributed throughout the City and County, and proximate to transit. Applicant Response: Locating the proposed Gateway Center overnight shelter at the Gibson Health Hub furthers Policy 9.4.3 Equitable Distribution as reflected in comments from the individuals experiencing homelessness focus groups. The Gateway Center location is accessible to trusted nearby service providers in the International District and is located within the San Mateo Major Transit Corridor area. The proposed Gateway Center is the City's first step towards a dispersed shelter model that will add more shelters and supportive services in other locations within Albuquerque.
- vi. Goal 9.5 Vulnerable Populations: Expand capacity to provide quality housing and services to vulnerable populations. Applicant Response: The proposed Gateway Center will expand the City's capacity to provide services and access to quality housing to vulnerable populations, thereby furthering Goal 9.5 Vulnerable Populations.
- vii. POLICY 9.5.1 Quality Housing: Ensure well maintained, safe transitional and permanent housing for the lowest income households that are most at risk of homelessness. Applicant Response: The proposed Gateway Center furthers Policy 9.5.1 Quality Housing by providing the first step to permanent housing for the most vulnerable in our community. The Time-Limited Model ensures that clients of the overnight shelter have secured permanent housing before they leave the shelter. Low-income clients will have Wraparound services, including case management and assistance securing financial support for housing expenses. The goal of the Gateway Center is to reduce the risk of homelessness by ensuring clients have the support to maintain stable, permanent housing.
- viii. POLICY 9.5.2 Transitional Services: Encourage on-site transitional services with culturally competent service delivery that respects the dignity of individuals and families and fosters self-determination and self-sufficiency, including job training, financial education, and behavioral health assistance. Applicant Response: The services provided at the Gateway Center will support Policy 9.5.2 Transitional Services by providing Wraparound services for individuals and families. The individual leads the team-based, collaborative Wraparound approach to case management. The program is flexible, comprehensive, and can involve a number of organizations. The City will partner with existing community organizations and service providers specializing in delivering culturally competent services that will respect the individual and prepare individualized transition plans.

- b. Opponents of the Application submitted, among other things, the following:
 - i. Under “A Vision for Albuquerque & Bernalillo County” page 3-3 “As the county and city grow in population over the next 20 years, neighborhoods will be safer and easier places to walk through and between. The positive characteristics that contribute to their unique identities will be protected and enhanced.” “The City and the County commit to analyzing the health of our communities and the geographic distribution of our public investments and assets. Where gaps are identified, governments will collaborate with communities, nonprofits, public agencies, and private enterprises to address them.” Opponent Response: This request does not help the positive characteristics of the neighborhood as it adds a further potential crime element to the area, (in an area with the highest overall crime in the City) increases the likelihood of encampments along Gibson Blvd, and fails to create a distribution of investments, and assets for the homeless throughout the City.
 - ii. Guiding Principles found on page 3-8 state the following:
 - 1. **STRONG NEIGHBORHOODS** New development creates desirable places to live and encourages diverse housing and amenities, while respecting the unique history and character of each neighborhood. Opponent Response: does not increase the quality of life as it adds another homeless shelter to Council District 6 which already has the highest number of homeless shelters. This does not increase the quality of life of the residents as the area is suffering from homeless encampments, public urination, defecation and other undesirable activities.
 - 2. **MOBILITY** Residents have improved options to move throughout Albuquerque for work, school, recreation, and services. Opponent Response: homeless encampments along Zuni make the area difficult to walk as there is extensive amounts of debris on the sidewalks, this particularly affects our residents with disabilities as it creates an additional hazard while they are attempting to get from their home to their destination and back again.
 - 3. **ECONOMIC VITALITY** The local economy supports a mix of market activities and promotes financial security for all residents. Opponent Response: Economic Vitality is suffering due to high crime in the area. Additionally homeless encampments would not help to encourage new businesses to open in the area.
 - 4. **EQUITY** All residents have access to good public services, a range of housing options, and healthy places to live, work, learn, and play. Opponent Response: Concentration of homeless services in this sector of the city does not balance negative impact equally across the City.
 - 5. **COMMUNITY HEALTH** All residents are protected from harm where they live, work, learn, and play. Everyone has convenient access to healthy food, parks and open space, and a wide range of

amenities and services. Opponent Response: Increasing homeless encampments would discourage use of parks and open space.

16. Although opponents point out that homeless and behavioral health services are not spread equally throughout the City, the Comp Plan *“uses the term ‘equity’ to describe ensuring that different people or places have the opportunities, access, and services they most need. Many people think ‘equity’ and ‘equality’ are interchangeable terms. ‘Equality’ aims to ensure that all people or places have the same opportunities, access, and services – a laudable goal. Distributing an equal amount to each would be fair if people and places had the same starting amounts. Discussions of “equity” acknowledge that people and places might need and want different things – and have different starting places. The equity approach involves assessing the different needs that people and places have and prioritizing resources and efforts to address them in the order of urgency that best matches those needs to move toward equality over time.”* See Comp Plan at 4-2. Accordingly, the Comp Plan does not require distribution of resources and unwanted land uses equally throughout the City, but rather institutes the policy that resources and unwanted land uses be located equitably, in consideration of the totality of the circumstances.
17. Further, Comp Plan POLICY 5.3.7 states *“Locally Unwanted Land Uses: Ensure that land uses that are objectionable to immediate neighbors but may be useful to society are located carefully and equitably to ensure that social assets are distributed evenly and social responsibilities are borne fairly across the Albuquerque area. (a) Minimize the impacts of locally unwanted land uses on surrounding areas through policies, regulations, and enforcement. (b) Ensure appropriate setbacks, buffers, and/or design standards to minimize offsite impacts.”* Applicant has demonstrated, by the evidence cited in the Notification of Decision and other evidence in the record, its efforts to locate its proposed overnight shelter carefully and equitably in an area of need surrounded by social and governmental assets, and that its operations will benefit not only people suffering homelessness in the immediate area, but in the community as a whole. Also, Applicant has submitted that policies, regulations, enforcement, setbacks, buffers, and design standards will be implemented to minimize any negative impacts.
18. On balance, the ZHE finds that Applicant has provided a sound justification showing compliance with IDO Section 14-16-6-6(A)(3)(a) based on substantial evidence.
19. Regarding the requirement under IDO Section 14-16-6-6(A)(3)(b) that the requested conditional use comply *“with all applicable provisions of this IDO, including but not limited to any Use-specific Standards applicable to the use in Section 14-16-4-3; the DPM; other adopted City regulations; and any conditions specifically applied to development of the property in a prior permit or approval affecting the property, or there is a condition of approval that any Variances or Waivers needed to comply with any of these provisions must be approved or the Conditional Use Approval will be invalidated pursuant to Subsection [14-16-6-6(A)(2)(c)2]”*:
 - a. Applicant and supporters of the Application submitted, among other things, the following:
 - i. The proposed overnight shelter is allowed under the MX-H zone as a Conditional Use. There are ongoing functions at the Gibson Health Hub that fall under hospital use, which is permissive under the MX-H zone. The proposed Gateway Center overnight shelter will comply with the Use-Specific Standards contained in Section 4-3-(C)(6) Overnight Shelter.

- b. Opponents of the Application submitted, among other things, the following:
 - i. The intent of the MX-H zone is undermined because, in the estimation of opponents, the proposed use is not appropriately sited at the Subject Property.
- 20. On balance, the ZHE finds that Applicant has provided a sound justification showing compliance with IDO Section 14-16-6-6(A)(3)(b) based on substantial evidence.
- 21. Regarding the requirement under IDO Section 14-16-6-6(A)(3)(c) that the requested conditional use “*will not create significant adverse impacts on adjacent properties, the surrounding neighborhood, or the larger community*”:
 - a. Applicant and supporters of the Application submitted, among other things, the following:
 - i. By providing secure shelter and services for individuals living in vulnerable situations, the Gateway Center will positively impact the adjacent properties, surrounding neighborhoods, and the larger community that are currently dealing with the unhoused population.
 - ii. Applicant has worked diligently on and adopted a final Operations Plan for the Gateway Center, which was attached in draft form to the Application and was posted on the City's website (www.cabq.gov/gateway) as of 7/3/2021. Because the Operations Plan before the ZHE at the September 21, 2021 ZHE hearing was still only in draft form, the ZHE continued the hearing on the Application from the September 21, 2021 ZHE hearing to be heard at the October 19, 2021 ZHE hearing. Prior to the October 19, 2021 ZHE hearing, Applicant finalized and adopted the Operations Plan and timely submitted it into the ZHE record on the Application, where it has been available for public inspection. The final Operations Plan addresses many community concerns, including impacts on adjacent properties, surrounding neighborhoods, and the larger community, and contains provisions concerning, among other things:
 - 1. Transportation -A shuttle system will be in place to transport referred guests for intake and assessment as well as transport guests to their exit destination, with pick-up and drop-off points at the Gateway Center.
 - 2. Secure entrance - The Gateway Center will have a secured entrance that is staffed 24 hours a day, 7 days a week, to ensure only enrolled guests, staff, and volunteers enter the facility.
 - 3. Physical design - The Gateway Center will utilize Trauma-informed Design and Crime Prevention through Environmental Design (CPTED) design principles. The City's intent is to upgrade all building-mounted lighting and parking lot lighting prior to opening the Gateway Center. Appropriate fencing, landscaping, and other design features will be incorporated to ensure curb appeal and low visual impact.
 - 4. Security - Onsite professional security is currently provided at the Gibson Health Hub and will continue to be once the Gateway Center is open.

5. Weapons - Weapons will not be allowed at the Gateway Center.
6. Entry and Exit - A team of intake officers and front desk staff will be stationed at the entrance, with only enrolled shelter guests, staff, program staff and volunteers, and registered partner agency staff and volunteers allowed to enter the facility.
7. Shelter capacity - If the Gateway Center reaches capacity, single adults seeking shelter will be referred to the Westside Emergency Housing Center or other appropriate shelter options. Transportation will be provided, if needed. Emergency overflow for families will be established in the community or through the use of motel vouchers.
8. Critical Incidence Response - Procedures addressing threats and assaults to clients and staff will be established. Guests that threaten or assault another client or staff will be exited from the Gateway Center and will receive transportation to their exit destination. In addition, de-escalation procedures will be established, with staff receiving training in conflict resolution and de-escalation techniques. The procedures will address the appropriate use of the Albuquerque Police Department resources to resolve safety issues at the Gateway Center.
9. Trash removal - The Solid Waste Department will clean and remove trash on a daily basis from surrounding areas, including sidewalks, bus stops, store fronts, and area parks.
10. Pedestrian safety - Pedestrian crosswalks in the vicinity of the Gateway Center will be improved to promote use, ease, and safety of crossing roadways. Roadway medians will be improved to prevent jaywalking.
11. Encampments - Encampments are expressly prohibited on the Gibson Health Hub property. The Family and Community Services public outreach team will monitor a 14-mile radius for encampments on public and private property. The public outreach team will refer encampments on private property to the City's Code Enforcement Division and a notice for encampments on public property will be posted by the public outreach team on the same day the encampment is observed.
12. Good Neighbor Agreement - The City intends to enter into a Good Neighbor Agreement with the Elder Homestead, Parkland Hills, Siesta Hills, South San Pedro, and Trumbull neighborhood associations. The following will be established through the Good Neighbor Agreement:
 - a. A phone number where residents can report any issues related to the Gateway Center.
 - b. A community dispute resolution process.
13. A Neighborhood Advisory Committee. The Agreement will set the membership of the Committee, which will include neighborhood representatives, City representatives from the organization(s)

operating the Gateway Center, and current or former guests of the Gateway Center. The Committee will meet at least quarterly and will issue an annual survey to community members. The Committee will review and update as needed the Good Neighbor Agreement annually. The Neighborhood Advisory Committee will review baseline data and information over time to provide feedback on high impact strategies to keep community, staff, and clients safe.

- b. Opponents of the Application submitted, among other things, the following:
 - i. The Good neighbor Agreement has not been finalized and signed, and the community has no guaranties as to what the final version, if any, will contain.
 - ii. Articles have shown that crime increases in the area of overnight shelters (however, the research cited was not done on permanent shelters).
- 22. On balance, the ZHE finds that Applicant has provided a sound justification showing compliance with IDO Section 14-16-6-6(A)(3)(c) based on substantial evidence.
- 23. Regarding the requirement under IDO Section 14-16-6-6(A)(3)(d) that the requested conditional use “*will not create material adverse impacts on other land in the surrounding area through increases in traffic congestion, parking congestion, noise, or vibration without sufficient mitigation or civic or environmental benefits that outweigh the expected impacts*”:
 - a. Applicant and supporters of the Application submitted, among other things, the following:
 - i. Development of the Gateway Center will focus on interior renovations. No increases in noise or vibrations will occur or create adverse impacts to the surrounding area. People utilizing the services at the Gateway Center will primarily be relying on shuttles from pick-up locations and service provider facilities, and public bus transit, which will decrease the potential for traffic congestion. The site contains large parking areas, which are more than adequate to support the parking needs of the Gateway Center and the existing tenants.
 - b. Opponents of the Application submitted, among other things, the following:
 - i. The Gateway Center will attract homeless and other pedestrians that will have an increased burden on traffic safety and congestion.
- 24. IDO Table 5-5-1 contains no off-street parking requirement for an overnight shelter.
- 25. On balance, the ZHE finds that Applicant has provided a sound justification showing compliance with IDO Section 14-16-6-6(A)(3)(d) based on substantial evidence.
- 26. Regarding the requirement under IDO Section 14-16-6-6(A)(3)(e) that “*on a project site with existing uses, [the requested conditional use] will not increase non-residential activity within 300 feet in any direction of a lot in any Residential zone district between the hours of 10:00 P.M. and 6:00 A.M.*”:
 - a. Applicant and supporters of the Application submitted, among other things, the following:
 - i. The overnight shelter use at the Gibson Health Hub will not increase non-residential activity within 300 feet of a residential zone district between the hours of 10:00 P.M. and 6:00 A.M. The overnight shelter use will be a

relatively small portion of the Gibson Health Hub premise. The initial phase of the Gateway Shelter is anticipated to limit intakes to between 8:00 A.M to 8:00 P.M. for most community partner referrals, but intakes will be conducted at all hours for referrals from hospitals, first responders, and law enforcement. The intake activity will be more than 500 feet from the R-ML zoned property to the east and buffered by a large parking lot. The closest apartment building within the R-ML site is setback approximately 67 feet east of its shared property line with the Gibson Health Hub. These existing physical conditions and separation between uses, and operating procedures will ensure the adjacent residential use will not impacted by the overnight shelter use at the Gibson Health Hub facility.

- b. Opponents of the Application submitted, among other things, the following:
 - i. The proposed overnight shelter will operate 24 hours a day.
- 27. On balance, the ZHE finds that Applicant has provided a sound justification showing compliance with IDO Section 14-16-6-6(A)(3)(e) based on substantial evidence.
- 28. Regarding the requirement under IDO Section 14-16-6-6(A)(3)(f) that the requested conditional use “*will not negatively impact pedestrian or transit connectivity without appropriate mitigation*”:
 - a. Applicant and supporters of the Application submitted, among other things, the following: The Gateway Center overnight shelter will draw pedestrians, transit riders, shuttles, and vehicles to the site. Impacts on pedestrian and transit connectivity will be appropriately mitigated by various City departments through services and actions that include:
 - i. Shuttle service to and from the site from designated pick-up sites and community partner organizations;
 - ii. Designated onsite pick-up and drop-off location;
 - iii. Evaluation and prioritization of improvements to sidewalks, pedestrian crossings, and medians in Gibson Boulevard and San Mateo by the Department of Municipal Development to ensure pedestrians, neighborhood residents, and visitors have a safe and comfortable walking experience in the area;
 - iv. Evaluation and potential modification to existing transit routes by the City Transit Department to accommodate a potential increase in ridership; and
 - v. Conducting a speed study of Gibson Boulevard and taking appropriate measures as determined by the study.
 - b. Opponents of the Application submitted, among other things, the following:
 - i. The Gateway Center will attract homeless and other pedestrians that will have an increased burden on traffic safety and congestion.
- 29. On balance, the ZHE finds that Applicant has provided a sound justification showing compliance with IDO Section 14-16-6-6(A)(3)(f) based on substantial evidence.
- 30. The City Traffic Engineering Division stated no objection to the Application.
- 31. IDO Section 14-16-4-3(C)(6) requires the following Use-Specific Standards for an Overnight Shelter: *This use is prohibited within 1,500 feet in any direction of any other overnight shelter.*

32. Applicant has satisfied the use specific criteria by establishing that no other overnight shelter is located within 1,500 feet in any direction of the Subject Property, as the closest overnight shelter to the Subject Property is located 2,308 feet away.

DECISION:

APPROVAL of a conditional use to allow an overnight shelter.

APPEAL:

If you wish to appeal this decision, you must do so by November 18, 2021 pursuant to Section 14-16-6-4(V), of the Integrated Development Ordinance, you must demonstrate that you have legal standing to file an appeal as defined.

Successful applicants are reminded that other regulations of the City must be complied with, even after approval of a special exception is secured. This decision does not constitute approval of plans for a building permit. If your application is approved, bring this decision with you when you apply for any related building permit or occupation tax number. Approval of a conditional use or a variance application is void after one year from date of approval if the rights and privileges are granted, thereby have not been executed, or utilized.



Robert Lucero, Esq.
Zoning Hearing Examiner

cc:

ZHE File
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CITY OF ALBUQUERQUE
OFFICE OF ADMINISTRATIVE HEARINGS
ZONING HEARING EXAMINER
NOTIFICATION OF DECISION

City of Albuquerque Family and Community Services (Agent, Consensus Planning) requests a conditional use to allow an overnight shelter for Lot A1A1A/Lovelace Hospital, Lovelace Hospital, located at 5400 Gibson BLVD SE, zoned MX-H [Section 14-16-4-2]

Special Exception No:..... **VA-2021-00316**
Project No: **Project#2021-005834**
Hearing Date: 09-21-21
Closing of Public Record: 09-21-21
Date of Decision: 10-06-21

On the 21st day of September, 2021, Consensus Planning, agent for property owner, City of Albuquerque Family and Community Services (“Applicant”) appeared before the Zoning Hearing Examiner (“ZHE”) requesting a conditional use to allow an overnight shelter (“Application”) upon the real property located at 5400 Gibson BLVD SE (“Subject Property”). Below are the ZHE’s finding of fact and decision:

FINDINGS:

1. Applicant is requesting a conditional use to allow an overnight shelter.
2. The City of Albuquerque City of Albuquerque Integrated Development Ordinance (“IDO”), Section 14-16-7-1 defines an overnight shelter as *“A facility that provides sleeping accommodations for 6 or more persons for a period of less than 24 hours with no charge or a charge substantially less than market value; it may provide meals and social services. Any such facility open to clients between 10:00 P.M. and 7:00 A.M. is considered an overnight shelter.”*
3. The Subject Property is zoned MX-H, the purpose of which under the IDO is to *“provide for large-scale destination retail and high-intensity commercial, residential, light industrial, and institutional uses, as well as high-density residential uses, particularly along Transit Corridors and in Urban Centers. The MX-H zone district is intended to allow higher-density infill development in appropriate locations.”*
4. Table 4-2-1 of the IDO states that an overnight shelter in the MX-H zone requires a conditional use approval.
5. IDO Section 14-16-6-6(A)(3) (Review and Decision Criteria– Conditional Use) reads: *“An application for a Conditional Use Approval shall be approved if it meets all of the following criteria:*
 - (a) *It is consistent with the ABC Comp. Plan, as amended;*
 - (b) *It complies with all applicable provisions of this IDO, including but not limited to any Use-specific Standards applicable to the use in Section 14-16-4-3; the DPM; other adopted City regulations; and any conditions specifically applied to development of the property in a prior permit or approval affecting the property, or there is a condition of approval that any Variances or Waivers needed to*

comply with any of these provisions must be approved or the Conditional Use Approval will be invalidated pursuant to Subsection (2)(c)2 above.

- (c) *It will not create significant adverse impacts on adjacent properties, the surrounding neighborhood, or the larger community.*
 - (d) *It will not create material adverse impacts on other land in the surrounding area through increases in traffic congestion, parking congestion, noise, or vibration without sufficient mitigation or civic or environmental benefits that outweigh the expected impacts.*
 - (e) *On a project site with existing uses, it will not increase non-residential activity within 300 feet in any direction of a lot in any Residential zone district between the hours of 10:00 P.M. and 6:00 A.M.*
 - (f) *It will not negatively impact pedestrian or transit connectivity without appropriate mitigation.*
6. The applicant bears the burden of providing a sound justification for the requested decision, based on substantial evidence, pursuant to IDO Section 14-16-6-4(E)(3).
 7. The applicant bears the burden of showing compliance with required standards through analysis, illustrations, or other exhibits as necessary, pursuant to IDO Section 14-16-6-4(E)(4).
 8. Applicant timely submitted a written authorization for Agent to act on Applicant's behalf.
 9. Applicant's community outreach regarding the proposed Gateway Center dates back to 2018, and that outreach utilized community input sessions, online surveys, focus groups with people experiencing homelessness, and neighborhood community meetings.
 10. On March 15, 2021, the Albuquerque City Council approved Resolution R-21-141, which required two community input sessions within 45 days and advancement towards a Good Neighbor Agreement by the City with area residents and businesses to be in place for so long as the Gateway Center operates at the Gibson Health Hub site. The City held the two community input meetings on June 10 and June 12, 2021. The first meeting was held online and the second was held at the Gibson Health Hub Educational Building. Input from the meetings is posted on the City website at www.cabq.gov/gateway.
 11. Applicant provided evidence that all property owners and neighborhood associations entitled to notice were notified of the Application. Although a neighboring business owner complained that he did not receive notice, his business was not listed on the list of properties located within the required notice perimeter pursuant to the IDO, and it appears from evidence in the record, including without limitation the perimeter buffer map for the Subject Property, that the complainant's business is located outside the required notice perimeter. Further, the complainant clearly had notice, given that he submitted written evidence before the ZHE hearing and oral testimony at the ZHE hearing. Based on evidence in the record, Application provided the required timely notice to all property owners whose properties are within the required notice perimeter. Opponents submitted a petition signed by business owners who complained of inadequate notice. Nevertheless, based on evidence of mailings, emails, publication, and sign porting, the ZHE finds that the notice given by Applicant was compliant with the requirements of the IDO.
 12. Applicant timely mailed neighborhood meeting requests on June 4, 2021.
 13. On June 22, 2021, the City Land Use Facilitation Program conducted a facilitated pre-application meeting with community members, online via Zoom, to which were invited representatives of the affected neighborhood associations and the community at large.

According to the facilitated meeting report dated June 24, 2021, approximately 98 people registered for the meeting and as many as 80 participated in the meeting at the highest participation.

14. Applicant attended a pre-application meeting with City staff on June 29, 2021.
15. Regarding the requirement under IDO Section 14-16-6-6(A)(3)(a) that the requested conditional use be “*consistent with the ABC Comp. Plan, as amended*”:
 - a. Applicant and supporters of the Application submitted, among other things, the following:
 - i. Goal 6.2 Multi-Modal System: Encourage walking, biking, and transit, especially at peak-hour commuting times, to enhance access and mobility for people of all ages and abilities. Applicant Response: The proposed Gateway Center overnight shelter at the Gibson Health Hub furthers Goal 6.2 Multi-Modal System by placing it in an area with excellent multi-modal access, including transit services, major street network, and pedestrian and bicycle access and connections. The subject property is along Gibson Boulevard, an Urban Principal Arterial, and designated as a Commuter Corridor by the Comprehensive Plan. It is within the designated San Mateo Boulevard Major Transit Corridor area and a 1/2-mile west of the Louisiana Boulevard Major Transit Corridor area.
 - ii. Goal 9.4 Homelessness: Make homelessness rare, short-term, and non-recurring. Applicant Response: The Gateway Center overnight shelter will further Goal 9.4 Homelessness by being a critical component of the City's comprehensive approach to making homelessness rare, short-term, and non-recurring. The City estimates that there are at least 1,525 people in shelters or on the streets in Albuquerque each night, and at least 5,000 households experienced homelessness in 2020. The Gateway Center will address chronic homelessness in Albuquerque by providing safe, dignified emergency shelter within a central, developed area of Albuquerque. In addition, clients will receive wraparound services that help them exit the overnight shelter into stable, permanent housing and other community resources.
 - iii. POLICY 9.4.1: Best Practices: Implement an appropriate and effective model to address chronic homelessness. Applicant Response: The Gateway Center overnight shelter furthers Policy 9.4.1 Best Practices by providing emergency shelter for those experiencing homelessness and work with them to transition into permanent housing. The proposed Gateway Center overnight shelter will function as a "gateway" to end chronic homelessness through the use of three models to effectively transition unhoused community members into housing
 - iv. POLICY 9.4.2 Services: Provide expanded options for shelters and services for people experiencing temporary homelessness. Applicant Response: The proposed Gateway Center overnight shelter will further Policy 9.4.2 Services by expanding options for temporary shelter and services for the City's unhoused populations. Although there are many service providers in Albuquerque that serve the unhoused populations, the City does not currently have a centralized 24/7 center that can connect

unhoused individuals to the support organizations they need, often creating a "gap" in services. By building strong partnerships with existing providers, the City's proposed Gateway Center can serve as a centralized center, allowing for a more efficient connection to essential services and reducing the potential gap in services.

- v. POLICY 9.4.3 Equitable Distribution: Support a network of service points that are easily accessible by residents and workers, geographically distributed throughout the City and County, and proximate to transit. Applicant Response: Locating the proposed Gateway Center overnight shelter at the Gibson Health Hub furthers Policy 9.4.3 Equitable Distribution as reflected in comments from the individuals experiencing homelessness focus groups. The Gateway Center location is accessible to trusted nearby service providers in the International District and is located within the San Mateo Major Transit Corridor area. The proposed Gateway Center is the City's first step towards a dispersed shelter model that will add more shelters and supportive services in other locations within Albuquerque.
- vi. Goal 9.5 Vulnerable Populations: Expand capacity to provide quality housing and services to vulnerable populations. Applicant Response: The proposed Gateway Center will expand the City's capacity to provide services and access to quality housing to vulnerable populations, thereby furthering Goal 9.5 Vulnerable Populations.
- vii. POLICY 9.5.1 Quality Housing: Ensure well maintained, safe transitional and permanent housing for the lowest income households that are most at risk of homelessness. Applicant Response: The proposed Gateway Center furthers Policy 9.5.1 Quality Housing by providing the first step to permanent housing for the most vulnerable in our community. The Time-Limited Model ensures that clients of the overnight shelter have secured permanent housing before they leave the shelter. Low-income clients will have Wraparound services, including case management and assistance securing financial support for housing expenses. The goal of the Gateway Center is to reduce the risk of homelessness by ensuring clients have the support to maintain stable, permanent housing.
- viii. POLICY 9.5.2 Transitional Services: Encourage on-site transitional services with culturally competent service delivery that respects the dignity of individuals and families and fosters self-determination and self-sufficiency, including job training, financial education, and behavioral health assistance. Applicant Response: The services provided at the Gateway Center will support Policy 9.5.2 Transitional Services by providing Wraparound services for individuals and families. The individual leads the team-based, collaborative Wraparound approach to case management. The program is flexible, comprehensive, and can involve a number of organizations. The City will partner with existing community organizations and service providers specializing in delivering culturally competent services that will respect the individual and prepare individualized transition plans.

- b. Opponents of the Application submitted, among other things, the following:
 - i. Under “A Vision for Albuquerque & Bernalillo County” page 3-3 “As the county and city grow in population over the next 20 years, neighborhoods will be safer and easier places to walk through and between. The positive characteristics that contribute to their unique identities will be protected and enhanced.” “The City and the County commit to analyzing the health of our communities and the geographic distribution of our public investments and assets. Where gaps are identified, governments will collaborate with communities, nonprofits, public agencies, and private enterprises to address them.” Opponent Response: This request does not help the positive characteristics of the neighborhood as it adds a further potential crime element to the area, (in an area with the highest overall crime in the City) increases the likelihood of encampments along Gibson Blvd, and fails to create a distribution of investments, and assets for the homeless throughout the City.
 - ii. Guiding Principles found on page 3-8 state the following:
 - 1. **STRONG NEIGHBORHOODS** New development creates desirable places to live and encourages diverse housing and amenities, while respecting the unique history and character of each neighborhood. Opponent Response: does not increase the quality of life as it adds another homeless shelter to Council District 6 which already has the highest number of homeless shelters. This does not increase the quality of life of the residents as the area is suffering from homeless encampments, public urination, defecation and other undesirable activities.
 - 2. **MOBILITY** Residents have improved options to move throughout Albuquerque for work, school, recreation, and services. Opponent Response: homeless encampments along Zuni make the area difficult to walk as there is extensive amounts of debris on the sidewalks, this particularly affects our residents with disabilities as it creates an additional hazard while they are attempting to get from their home to their destination and back again.
 - 3. **ECONOMIC VITALITY** The local economy supports a mix of market activities and promotes financial security for all residents. Opponent Response: Economic Vitality is suffering due to high crime in the area. Additionally homeless encampments would not help to encourage new businesses to open in the area.
 - 4. **EQUITY** All residents have access to good public services, a range of housing options, and healthy places to live, work, learn, and play. Opponent Response: Concentration of homeless services in this sector of the city does not balance negative impact equally across the City.
 - 5. **COMMUNITY HEALTH** All residents are protected from harm where they live, work, learn, and play. Everyone has convenient access to healthy food, parks and open space, and a wide range of

amenities and services. Opponent Response: Increasing homeless encampments would discourage use of parks and open space.

16. Although opponents point out that homeless and behavioral health services are not spread equally throughout the City, the Comp Plan *“uses the term ‘equity’ to describe ensuring that different people or places have the opportunities, access, and services they most need. Many people think ‘equity’ and ‘equality’ are interchangeable terms. ‘Equality’ aims to ensure that all people or places have the same opportunities, access, and services – a laudable goal. Distributing an equal amount to each would be fair if people and places had the same starting amounts. Discussions of “equity” acknowledge that people and places might need and want different things – and have different starting places. The equity approach involves assessing the different needs that people and places have and prioritizing resources and efforts to address them in the order of urgency that best matches those needs to move toward equality over time.”* See Comp Plan at 4-2. Accordingly, the Comp Plan does not require distribution of resources and unwanted land uses equally throughout the City, but rather institutes the policy that resources and unwanted land uses be located equitably, in consideration of the totality of the circumstances.
17. Further, Comp Plan POLICY 5.3.7 states *“Locally Unwanted Land Uses: Ensure that land uses that are objectionable to immediate neighbors but may be useful to society are located carefully and equitably to ensure that social assets are distributed evenly and social responsibilities are borne fairly across the Albuquerque area. (a) Minimize the impacts of locally unwanted land uses on surrounding areas through policies, regulations, and enforcement. (b) Ensure appropriate setbacks, buffers, and/or design standards to minimize offsite impacts.”* Applicant has demonstrated, by the evidence cited in the Notification of Decision and other evidence in the record, its efforts to locate its proposed overnight shelter carefully and equitably in an area of need surrounded by social and governmental assets, and that its operations will benefit not only people suffering homelessness in the immediate area, but in the community as a whole. Also, Applicant has submitted that policies, regulations, enforcement, setbacks, buffers, and design standards will be implemented to minimize any negative impacts.
18. On balance, the ZHE finds that Applicant has provided a sound justification showing compliance with IDO Section 14-16-6-6(A)(3)(a) based on substantial evidence.
19. Regarding the requirement under IDO Section 14-16-6-6(A)(3)(b) that the requested conditional use comply *“with all applicable provisions of this IDO, including but not limited to any Use-specific Standards applicable to the use in Section 14-16-4-3; the DPM; other adopted City regulations; and any conditions specifically applied to development of the property in a prior permit or approval affecting the property, or there is a condition of approval that any Variances or Waivers needed to comply with any of these provisions must be approved or the Conditional Use Approval will be invalidated pursuant to Subsection [14-16-6-6(A)(2)(c)2]”*:
 - a. Applicant and supporters of the Application submitted, among other things, the following:
 - i. The proposed overnight shelter is allowed under the MX-H zone as a Conditional Use. There are ongoing functions at the Gibson Health Hub that fall under hospital use, which is permissive under the MX-H zone. The proposed Gateway Center overnight shelter will comply with the Use-Specific Standards contained in Section 4-3-(C)(6) Overnight Shelter.

- b. Opponents of the Application submitted, among other things, the following:
 - i. The intent of the MX-H zone is undermined because, in the estimation of opponents, the proposed use is not appropriately sited at the Subject Property.
- 20. On balance, the ZHE finds that Applicant has provided a sound justification showing compliance with IDO Section 14-16-6-6(A)(3)(b) based on substantial evidence.
- 21. Regarding the requirement under IDO Section 14-16-6-6(A)(3)(c) that the requested conditional use “*will not create significant adverse impacts on adjacent properties, the surrounding neighborhood, or the larger community*”:
 - a. Applicant and supporters of the Application submitted, among other things, the following:
 - i. By providing secure shelter and services for individuals living in vulnerable situations, the Gateway Center will positively impact the adjacent properties, surrounding neighborhoods, and the larger community that are currently dealing with the unhoused population.
 - ii. The City has been working diligently on the draft Operations Plan for the Gateway Center, which is attached to the Application and posted on the City's website (www.cabq.gov/gateway) as of 7/3/2021. The draft Operations Plan addresses many community concerns, including impacts on adjacent properties, surrounding neighborhoods, and the larger community, and contains provisions concerning, among other things:
 - 1. Transportation - A shuttle system will be in place to transport referred guests for intake and assessment as well as transport guests to their exit destination, with pick-up and drop-off points at the Gateway Center.
 - 2. Secure entrance - The Gateway Center will have a secured entrance that is staffed 24 hours a day, 7 days a week, to ensure only enrolled guests, staff, and volunteers enter the facility.
 - 3. Physical design - The Gateway Center will utilize Trauma-informed Design and Crime Prevention through Environmental Design (CPTED) design principles. The City's intent is to upgrade all building-mounted lighting and parking lot lighting prior to opening the Gateway Center. Appropriate fencing, landscaping, and other design features will be incorporated to ensure curb appeal and low visual impact.
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 - 5. Weapons - Weapons will not be allowed at the Gateway Center.
 - 6. Entry and Exit - A team of intake officers and front desk staff will be stationed at the entrance, with only enrolled shelter guests, staff, program staff and volunteers, and registered partner agency staff and volunteers allowed to enter the facility.
 - 7. Shelter capacity - If the Gateway Center reaches capacity, single adults seeking shelter will be referred to the Westside Emergency Housing Center or other appropriate shelter options. Transportation

will be provided, if needed. Emergency overflow for families will be established in the community or through the use of motel vouchers.

8. Critical Incidence Response - Procedures addressing threats and assaults to clients and staff will be established. Guests that threaten or assault another client or staff will be exited from the Gateway Center and will receive transportation to their exit destination. In addition, de-escalation procedures will be established, with staff receiving training in conflict resolution and de-escalation techniques. The procedures will address the appropriate use of the Albuquerque Police Department resources to resolve safety issues at the Gateway Center.
9. Trash removal - The Solid Waste Department will clean and remove trash on a daily basis from surrounding areas, including sidewalks, bus stops, store fronts, and area parks.
10. Pedestrian safety - Pedestrian crosswalks in the vicinity of the Gateway Center will be improved to promote use, ease, and safety of crossing roadways. Roadway medians will be improved to prevent jaywalking.
11. Encampments - Encampments are expressly prohibited on the Gibson Health Hub property. The Family and Community Services public outreach team will monitor a 14-mile radius for encampments on public and private property. The public outreach team will refer encampments on private property to the City's Code Enforcement Division and a notice for encampments on public property will be posted by the public outreach team on the same day the encampment is observed.
12. Good Neighbor Agreement - The City intends to enter into a Good Neighbor Agreement with the Elder Homestead, Parkland Hills, Siesta Hills, South San Pedro, and Trumbull neighborhood associations. The following will be established through the Good Neighbor Agreement:
 - a. A phone number where residents can report any issues related to the Gateway Center.
 - b. A community dispute resolution process.
13. A Neighborhood Advisory Committee. The Agreement will set the membership of the Committee, which will include neighborhood representatives, City representatives from the organization(s) operating the Gateway Center, and current or former guests of the Gateway Center. The Committee will meet at least quarterly and will issue an annual survey to community members. The Committee will review and update as needed the Good Neighbor Agreement annually. The Neighborhood Advisory Committee will review baseline data and information over time to provide feedback on high impact strategies to keep community, staff, and clients safe.

- b. Opponents of the Application submitted, among other things, the following:
 - i. The operations plan is merely a draft and the community has no guaranties as to what the final version, if any, will contain.
 - ii. The Good neighbor Agreement has not been finalized and signed, and the community has no guaranties as to what the final version, if any, will contain.
 - iii. Articles have shown that crime increases in the area of overnight shelters (however, the research cited was not done on permanent shelters).
- 22. Applicant's justification showing compliance with IDO Section 14-16-6-6(A)(3)(c) is based largely on its draft operations plan.
- 23. Regarding the requirement under IDO Section 14-16-6-6(A)(3)(d) that the requested conditional use *"will not create material adverse impacts on other land in the surrounding area through increases in traffic congestion, parking congestion, noise, or vibration without sufficient mitigation or civic or environmental benefits that outweigh the expected impacts"*:
 - a. Applicant and supporters of the Application submitted, among other things, the following:
 - i. Development of the Gateway Center will focus on interior renovations. No increases in noise or vibrations will occur or create adverse impacts to the surrounding area. People utilizing the services at the Gateway Center will primarily be relying on shuttles from pick-up locations and service provider facilities, and public bus transit, which will decrease the potential for traffic congestion. The site contains large parking areas, which are more than adequate to support the parking needs of the Gateway Center and the existing tenants.
 - b. Opponents of the Application submitted, among other things, the following:
 - i. The Gateway Center will attract homeless and other pedestrians that will have an increased burden on traffic safety and congestion.
- 24. IDO Table 5-5-1 contains no off-street parking requirement for an overnight shelter.
- 25. On balance, the ZHE finds that Applicant has provided a sound justification showing compliance with IDO Section 14-16-6-6(A)(3)(d) based on substantial evidence.
- 26. Regarding the requirement under IDO Section 14-16-6-6(A)(3)(e) that *"on a project site with existing uses, [the requested conditional use] will not increase non-residential activity within 300 feet in any direction of a lot in any Residential zone district between the hours of 10:00 P.M. and 6:00 A.M."*:
 - a. Applicant and supporters of the Application submitted, among other things, the following:
 - i. The overnight shelter use at the Gibson Health Hub will not increase non-residential activity within 300 feet of a residential zone district between the hours of 10:00 P.M. and 6:00 A.M. The overnight shelter use will be a relatively small portion of the Gibson Health Hub premise. The initial phase of the Gateway Shelter is anticipated to limit intakes to between 8:00 A.M to 8:00 P.M. for most community partner referrals, but intakes will be conducted at all hours for referrals from hospitals, first responders, and law enforcement. The intake activity will be more than 500 feet from the R-ML zoned property to the east and buffered by a large parking lot.

The closest apartment building within the R-ML site is setback approximately 67 feet east of its shared property line with the Gibson Health Hub. These existing physical conditions and separation between uses, and operating procedures will ensure the adjacent residential use will not be impacted by the overnight shelter use at the Gibson Health Hub facility.

- b. Opponents of the Application submitted, among other things, the following:
 - i. The proposed overnight shelter will operate 24 hours a day.
- 27. On balance, the ZHE finds that Applicant has provided a sound justification showing compliance with IDO Section 14-16-6-6(A)(3)(e) based on substantial evidence.
- 28. Regarding the requirement under IDO Section 14-16-6-6(A)(3)(f) that the requested conditional use “*will not negatively impact pedestrian or transit connectivity without appropriate mitigation*”:
 - a. Applicant and supporters of the Application submitted, among other things, the following: The Gateway Center overnight shelter will draw pedestrians, transit riders, shuttles, and vehicles to the site. Impacts on pedestrian and transit connectivity will be appropriately mitigated by various City departments through services and actions that include:
 - i. Shuttle service to and from the site from designated pick-up sites and community partner organizations;
 - ii. Designated onsite pick-up and drop-off location;
 - iii. Evaluation and prioritization of improvements to sidewalks, pedestrian crossings, and medians in Gibson Boulevard and San Mateo by the Department of Municipal Development to ensure pedestrians, neighborhood residents, and visitors have a safe and comfortable walking experience in the area;
 - iv. Evaluation and potential modification to existing transit routes by the City Transit Department to accommodate a potential increase in ridership; and
 - v. Conducting a speed study of Gibson Boulevard and taking appropriate measures as determined by the study.
 - b. Opponents of the Application submitted, among other things, the following:
 - i. The Gateway Center will attract homeless and other pedestrians that will have an increased burden on traffic safety and congestion.
- 29. On balance, the ZHE finds that Applicant has provided a sound justification showing compliance with IDO Section 14-16-6-6(A)(3)(f) based on substantial evidence.
- 30. The City Traffic Engineering Division stated no objection to the Application.
- 31. IDO Section 14-16-4-3(C)(6) requires the following Use-Specific Standards for an Overnight Shelter: *This use is prohibited within 1,500 feet in any direction of any other overnight shelter.*
- 32. Applicant has satisfied the use specific criteria by establishing that no other overnight shelter is located within 1,500 feet in any direction of the Subject Property, as the closest overnight shelter to the Subject Property is located 2,308 feet away.
- 33. It would appear that Applicant has met its burdens of providing a sound justification for the requested decision, and of showing compliance with required standards, based on substantial evidence. However, Applicant’s justification showing compliance with IDO Section 14-16-6-6(A)(3)(c) (that the requested conditional use “*will not create significant*

adverse impacts on adjacent properties, the surrounding neighborhood, or the larger community”) is based largely on Applicant’s draft operations plan, which draft would appear subject to change until finalized.

34. This matter should be deferred to allow Applicant the opportunity to finalize and adopt the operations plan on which rests a significant portion of the justification of the Application.

DECISION:

CONTINUANCE of the Application to the ZHE hearing to take place on October 19, 2021, which begins at 9:00 a.m.

APPEAL:

If you wish to appeal this decision, you must do so by October 21, 2021 pursuant to Section 14-16-6-4(V), of the Integrated Development Ordinance, you must demonstrate that you have legal standing to file an appeal as defined.

Successful applicants are reminded that other regulations of the City must be complied with, even after approval of a special exception is secured. This decision does not constitute approval of plans for a building permit. If your application is approved, bring this decision with you when you apply for any related building permit or occupation tax number. Approval of a conditional use or a variance application is void after one year from date of approval if the rights and privileges are granted, thereby have not been executed, or utilized.



Robert Lucero, Esq.
Zoning Hearing Examiner

cc:

ZHE File
Zoning Enforcement
Consensus Planning, Jackie Fishman, fishman@consensusplanning.com
Family & Comm Services, Carol Pierce, cpierce@cabq.gov
Melinda Frame, phna.homelessness.solutions@gmail.com
Rachel Baca, siesta2na.pres@gmail.com
Enrique Cardiel, 420 Indiana SE, 87108, enrique@bchealthcouncil.org
Sandra Perea, sp-wonderwoman@comcast.net
Khadijah Bottom, khadijahasili@vizionz.org
Adriann Barboa, County Comm Dist 3, 1517 Cornell DR SE, 87106
Venice Ceballos, VCeballos@salud.unm.edu
Raven Del Rio, 808 Florida ST SE, 87108
Scott Benavidez, 1410 Valencia DR, 87108, scott@mrbsnm.com

Robert Pierson, 1324 Odium DR SE, 87108
Ben Fox, 1100 Richmond DR NE, 87106
Peter Kalitsis, peterkalitsis@gmail.com
Jeremy Lihte, 7236 Cascada RD NW, 87114
Jennifer Jones, 528 Torrance ST SE, 87108
Ryan Kious, 1108 Georgia ST SE, 87108
Myra Segal, msegal@cabq.gov
Sara Fitzgerald, sfitzgerald@greaterabq.com
Kate Matthews, kate.sonora@gmail.com
Lisa Huval, lisahuval@cabq.gov
Tim & Pricilla Roberts, t-p-w@comcast.net
Vera Watson vera.e.watson@gmail.com
Renee Chavez-Maes, rchavezmaes@lltraininginstitute.org
Tracy McDaniel, tmcdaniel@swwomenslaw.org
Rob Leming, phnapresident@gmail.com
Regina Mead mynmbrother@yahoo.com



Please check the appropriate box and refer to supplemental forms for submittal requirements. All fees must be paid at the time of application.

Administrative Decisions	Decisions Requiring a Public Meeting or Hearing	Policy Decisions
<input type="checkbox"/> Archaeological Certificate (Form P3)	<input type="checkbox"/> Site Plan – EPC including any Variances – EPC (Form P1)	<input type="checkbox"/> Adoption or Amendment of Comprehensive Plan or Facility Plan (Form Z)
<input type="checkbox"/> Historic Certificate of Appropriateness – Minor (Form L)	<input type="checkbox"/> Master Development Plan (Form P1)	<input type="checkbox"/> Adoption or Amendment of Historic Designation (Form L)
<input type="checkbox"/> Alternative Signage Plan (Form P3)	<input type="checkbox"/> Historic Certificate of Appropriateness – Major (Form L)	<input type="checkbox"/> Amendment of IDO Text (Form Z)
<input type="checkbox"/> Minor Amendment to Site Plan (Form P3)	<input type="checkbox"/> Demolition Outside of HPO (Form L)	<input type="checkbox"/> Annexation of Land (Form Z)
<input type="checkbox"/> WTF Approval (Form W1)	<input type="checkbox"/> Historic Design Standards and Guidelines (Form L)	<input type="checkbox"/> Amendment to Zoning Map – EPC (Form Z)
	<input type="checkbox"/> Wireless Telecommunications Facility Waiver (Form W2)	<input type="checkbox"/> Amendment to Zoning Map – Council (Form Z)
		Appeals
		<input checked="" type="checkbox"/> Decision by EPC, LC, ZHE, or City Staff (Form A)

APPLICATION INFORMATION

Applicant: <u>PETER S. KALITSIS FOR PARKLAND HILLS, SIGSA HILLS, ELBETH HILLS, STAD NA.</u>		Phone: <u>505-463-4356</u>
Address: <u>921 PAMPAS DR. SE.</u>		Email: <u>PETERKALITSIS@GMAIL.COM</u>
City: <u>ALBUQUERQUE</u>	State: <u>NM</u>	Zip: <u>87108-4418</u>
Professional/Agent (if any):		Phone:
Address:		Email:
City:	State: <u>NM</u>	Zip:
Proprietary Interest in Site:		List all owners:

BRIEF DESCRIPTION OF REQUEST

APPEAL OF CONDITIONAL USE ZONING APPROVAL

SITE INFORMATION (Accuracy of the existing legal description is crucial! Attach a separate sheet if necessary.)

Lot or Tract No.: <u>A1A1A/LOVELACE HOSPITAL</u>	Block: <u>0000</u>	Unit:
Subdivision/Addition: <u>LOVELACE HOSPITAL</u>	MRGCD Map No.:	UPC Code: <u>10180551325602014</u>
Zone Atlas Page(s): <u>M18</u>	Existing Zoning: <u>MX-H</u>	Proposed Zoning:
# of Existing Lots:	# of Proposed Lots:	Total Area of Site (acres):

LOCATION OF PROPERTY BY STREETS

Site Address/Street: 5400 GIBSON BLVD SE Between: SAN MATEO BLVD SE and: SAN PEDRO SE

CASE HISTORY (List any current or prior project and case number(s) that may be relevant to your request.)

VA# 2021-00316, PR# 2021-005834

Signature: <u>[Signature]</u>	Date: <u>4/17/2021</u>
Printed Name: <u>PETER S. KALITSIS-PHNA</u>	<input checked="" type="checkbox"/> Applicant or <input type="checkbox"/> Agent

FOR OFFICIAL USE ONLY

Case Numbers	Action	Fees	Case Numbers	Action	Fees

Meeting/Hearing Date:	Fee Total:
Staff Signature:	Date: Project #



Please check the appropriate box and refer to supplemental forms for submittal requirements. All fees must be paid at the time of application.

Administrative Decisions	Decisions Requiring a Public Meeting or Hearing	Policy Decisions
<input type="checkbox"/> Archaeological Certificate (Form P3)	<input type="checkbox"/> Site Plan – EPC including any Variances – EPC (Form P1)	<input type="checkbox"/> Adoption or Amendment of Comprehensive Plan or Facility Plan (Form Z)
<input type="checkbox"/> Historic Certificate of Appropriateness – Minor (Form L)	<input type="checkbox"/> Master Development Plan (Form P1)	<input type="checkbox"/> Adoption or Amendment of Historic Designation (Form L)
<input type="checkbox"/> Alternative Signage Plan (Form P3)	<input type="checkbox"/> Historic Certificate of Appropriateness – Major (Form L)	<input type="checkbox"/> Amendment of IDO Text (Form Z)
<input type="checkbox"/> Minor Amendment to Site Plan (Form P3)	<input type="checkbox"/> Demolition Outside of HPO (Form L)	<input type="checkbox"/> Annexation of Land (Form Z)
<input type="checkbox"/> WTF Approval (Form W1)	<input type="checkbox"/> Historic Design Standards and Guidelines (Form L)	<input type="checkbox"/> Amendment to Zoning Map – EPC (Form Z)
	<input type="checkbox"/> Wireless Telecommunications Facility Waiver (Form W2)	<input type="checkbox"/> Amendment to Zoning Map – Council (Form Z)
		Appeals
		<input checked="" type="checkbox"/> Decision by EPC, LC, ZHE, or City Staff (Form A)

APPLICATION INFORMATION

Applicant: <u>PETER S. KALITSIS FOR PARKLAND HILLS, SIESTA HILL, ELDER HOMESTEAD NA</u>		Phone: <u>505-463-4356</u>
Address: <u>921 PAMPAS DR. SE</u>		Email: <u>PETERKALITSIS@GMAIL.COM</u>
City: <u>ALBUQUERQUE</u>	State: <u>NM</u>	Zip: <u>87108-4418</u>
Professional/Agent (if any):		Phone:
Address:		Email:
City:	State:	Zip:
Proprietary Interest in Site:		List <u>all</u> owners:

BRIEF DESCRIPTION OF REQUEST

APPEAL OF CONDITIONAL USE ZONING APPROVAL

SITE INFORMATION (Accuracy of the existing legal description is crucial! Attach a separate sheet if necessary.)

Lot or Tract No.: <u>1</u>	Block: <u>0000</u>	Unit:
Subdivision/Addition: <u>SWIFT ADDITION</u>	MRGCD Map No.:	UPC Code: <u>161806504151520102</u>
Zone Atlas Page(s): <u>M18</u>	Existing Zoning: <u>MX-H</u>	Proposed Zoning:
# of Existing Lots:	# of Proposed Lots:	Total Area of Site (acres):

LOCATION OF PROPERTY BY STREETS

Site Address/Street: <u>5006 GIBSON BLVD SE</u>	Between: <u>SAN MATEO BLVD SE</u>	and: <u>SAN PEDRO SE</u>
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CASE HISTORY (List any current or prior project and case number(s) that may be relevant to your request.)

VA#2021-00317 PR#2021-005834

Signature: <u>[Signature]</u>	Date: <u>4/17/2021</u>
Printed Name: <u>PETER S KALITSIS</u>	<input checked="" type="checkbox"/> Applicant or <input type="checkbox"/> Agent

FOR OFFICIAL USE ONLY

Case Numbers	Action	Fees	Case Numbers	Action	Fees
Meeting/Hearing Date:			Fee Total:		
Staff Signature:			Date:		
			Project #		

FORM A: Appeals

Complete applications for appeals will only be accepted within 15 consecutive days, excluding holidays, after the decision being appealed was made.

- ☐ APPEAL OF A DECISION OF CITY PLANNING STAFF (HISTORIC PRESERVATION PLANNER) ON A HISTORIC CERTIFICATE OF APPROPRIATENESS – MINOR TO THE LANDMARKS COMMISSION (LC)
- ☐ APPEAL OF A DECISION OF CITY PLANNING STAFF ON AN IMPACT FEE ASSESSMENT TO THE ENVIRONMENTAL PLANNING COMMISSION (EPC)
- ☒ APPEAL TO CITY COUNCIL THROUGH THE LAND USE HEARING OFFICER (LUHO)

☐ Interpreter Needed for Hearing? ☐ if yes, indicate language: _____

☒ A Single PDF file of the complete application including all documents being submitted must be emailed to PLNDRS@cabq.gov prior to making a submittal. Zipped files or those over 9 MB cannot be delivered via email, in which case the PDF must be provided on a CD. PDF shall be organized with the Development Review Application and this Form A at the front followed by the remaining documents in the order provided on this form.

☒ Project number of the case being appealed, if applicable: # 2021-005834 & #

☒ Application number of the case being appealed, if applicable: VA 2021-0316 & VA 2021-0317

☒ Type of decision being appealed: APPROVAL OF CONDITIONAL USE

☒ Letter of authorization from the appellant if appeal is submitted by an agent

☒ Appellant's basis of standing in accordance with IDO Section 14-16-6-4(U)(2)

☒ Reason for the appeal identifying the section of the IDO, other City regulation, or condition attached to a decision that has not been interpreted or applied correctly, and further addressing the criteria in IDO Section 14-16-6-4(U)(4)

☒ Copy of the Official Notice of Decision regarding the matter being appealed

I, the applicant or agent, acknowledge that if any required information is not submitted with this application, the application will not be scheduled for a public meeting or hearing, if required, or otherwise processed until it is complete.

Signature: Peter S. Kalitsis

Date: 11/18/2021

Printed Name: PETER S. KALITSIS

☐ Applicant or ☐ Agent

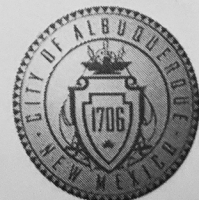
FOR OFFICIAL USE ONLY

Case Numbers:

Project Number:

Staff Signature:

Date:



P.O. Box 4690

Albuquerque, NM 87196

Elder Homestead Neighborhood Association

November 16, 2021

City of Albuquerque

Mr. Steven M. Chavez, Esq.

Land Use Hearing Officer

600 2nd St. NW

Albuquerque, NM 87102

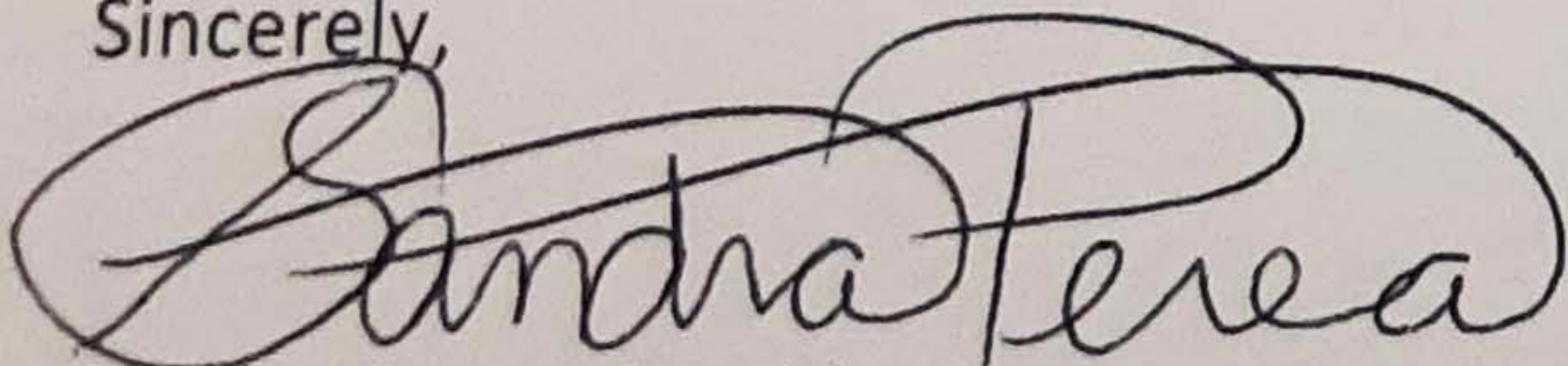
Re: Authorization to submit applications and additional related materials and documents on our behalf related to projects VA-2021-00316 NOD and VA-2021-0316 NOD.

To Whom It May Concern,

The Elder Homestead Neighborhood Association hereby authorizes Peter S. Kalitsis to act on our behalf pertaining to submit the appeals and additional related materials and documents to the City of Albuquerque regarding the above referenced Projects, VA-2021-00316 NOD and VA-2021-0316 NOD.

This authorization is valid until further written notice from any Board Member from Elder Homestead Neighborhood Association.

Sincerely,

A handwritten signature in black ink that reads "Sandra Perea". The signature is fluid and cursive, with the first name "Sandra" and last name "Perea" clearly distinguishable.

Sandra Perea, President

Elder Homestead Neighborhood Association

Inside Address

Parkland Hills Neighborhood Association

November 16, 2021

City of Albuquerque
Mr. Steven M. Chavez, Esq.
Land Use Hearing Officer
600 2nd St. NW
Albuquerque, NM 87102

Re: Authorization to submit applications and additional related materials and documents on our behalf related to projects VA-2021-00316 NOD and VA-2021-0316 NOD.

To Whom It May Concern,

Parkland Hills Neighborhood Association hereby authorize Peter S. Kalitsis to act on our behalf pertaining to submit the appeals and additional related materials and document to the City of Albuquerque regarding the above referenced Projects, VA-2021-00316 NOD and VA-2021-0316 NOD.

This authorization is valid until further written notice from Parkland Hills or

Sincerely,

A handwritten signature in cursive script, appearing to read "Robert Leming".

Rachel Conger Baca
1301 Odium Dr. SE
Albuquerque, NM 87108
Siesta Hills Neighborhood Association

November 16, 2021

City of Albuquerque
Mr. Steven M. Chavez, Esq.
Land Use Hearing Officer
600 2nd St. NW
Albuquerque, NM 87102

Re: Authorization to submit applications and additional related materials and documents on our behalf related to projects VA-2021-00316 NOD and VA-2021-0316 NOD.

To Whom It May Concern,

Siesta Hills Neighborhood Association hereby authorize Peter S. Kalitsis to act on our behalf pertaining to submit the appeals and additional related materials and document to the City of Albuquerque regarding the above referenced Projects, VA-2021-00316 NOD and VA-2021-0316 NOD.

This authorization is valid until further written notice from Siesta Hills Neighborhood Association or Rachel Conger Baca.

Sincerely,

A handwritten signature in cursive script that reads "Rachel Baca".

Rachel Conger Baca
President,
Siesta Hills Neighborhood Association

DEMONSTRATION OF STANDING /APPEARANCE OF RECORD

Associations of Standing/Appearance of Record for the following:

Siesta Hills Neighborhood Association.
Elder Homestead Neighborhood Association
Siesta Hills Neighborhood Association.

Conditional Use Approval Project being appealed:

Re: The following project sites, 5006 Gibson Blvd. SE and 5400 Gibson Blvd. SE (Former Lovelace Hospital Site)

VA-2021-00316 NOD , PR# 2021-005834, UPC 101805513250020114

VA-2021-0317 NOD, PR# 2021-005834, UPC 101805504151520102

We are submitting this appeal demonstration of standing/Appearance of Record to the City Council through the Land Use Hearing Officer regarding the ZHE approval of Conditional Use for the overnight shelter at City's property at 5006 and 5400 Gibson Blvd. SE, the Old Lovelace Hospital.

Summary of IDO Demonstration of Standing and Appearance of Record of the following:

Parkland Hills Neighborhood Association, written submittal and testimony by Melinda Frame and Peter S. Kalitsis, representing Parkland Hills Neighborhood Association
Elder Homestead Neighborhood Association, written submittal and testimony by Sandra Perea representing Elder Homestead Neighborhood Association
Siesta Hills Neighborhood Association written submittal and testimony by Rachel Baca representing Siesta Hills Neighborhood Association.

The three above Neighborhood Associations have performed both of the following:

b. The submittal of written comments that include the eventual appellant's name and contact information about the subject case submitted to the relevant decision making body during the review process within the deadline for written comments prior to the decision.

c. Verbal comments made by the eventual appellant or appellant's agent provided at a public meeting or hearing about the subject case during the review process before the relevant decision-making body.

IDO requirements for demonstration of standing and appearance of record as follows were met

IDO section required for demonstration of standing:

I. Demonstration of standing of parties appealing decision.

A. I.D.O. section 14-16-6-4(V)(2) Who May Appeal

6-4(V)(2)(a) Standing

1. Standing to appeal a final decision may be granted to any of the following parties.

4. Any other person or organization that can demonstrate that his/her/its property rights or other legal rights have been specially and adversely affected by the decision.

a. Such showing must be presented by the appellant as part of the appeal, and the LUHO or City Council shall enter a finding or findings as to whether this requirement has been met.

b. If it is found that the appellant cannot satisfy this standard, the appeal shall be denied

RESPONSE:

Elder Homestead Neighborhood Association and their residents, Siesta Hills Neighborhood Association and their residents, and Parkland Hills Neighborhood Association and their residents, demonstrate they are included in “Any other person or organization that can demonstrate that his/her/its property rights or other legal rights have been specially and adversely affected by the decision.” For the following reasons: The city has stated to monitor, clean up, and keep encampments ¼ mile (1320 feet) from shelter.

- a. Per the September 14, 2021, Homeless Solutions Committee of Parkland Hills Neighborhood Association submittal, Appendix T, in focusing on one quarter mile, instead of 1 ½ (one and one half mile, 9 out of 11 parks will be locations for displacement of these encampments. This is currently problematic at some of these locations, such as the newly renovated and fenced in Wilson Park, where homeless encampments appear to be present. (See Photos from hearing submittal). It is not reasonable to expect APD, which has not been able to keep up with the current encampments, never mind the likely increase with more homeless persons utilizing resources of the Gibson Health Hub.
- b. Police have the legal authority to regarding trespassing and other legal violation. Security at Gateway will not have any authority outside of the facility property, and even on the property will have to call on local law enforcement for detentions, relocation, and arrest for any legal violations. Therefore, all of the surrounding neighborhood association areas will be subject to people being displaced from ¼ mile to these neighborhoods. Even if the area for 1.5 miles is monitored, the neighborhoods and parks shall bear the burden and therefore are “adversely affected by the decision.” And therefore have “standing of parties appealing decision”.

*Demonstration of Standing of parties appealing decision, IDO TEXT:
6-4(V)(2)5. Property owners (other than the applicant) and Neighborhood Associations on the basis of proximity for decisions as specified in Table 6-4-2.*

a. Distances noted in feet in Table 6-4-2 are measured from the nearest lot line of the subject property. Where the edge of that area falls within a public right-of-way, adjacent properties shall be included.

b. Distances for Neighborhood Associations are based on the boundary on file with the ONC at the time the application for decision related to the subject property was accepted as complete.

c. Where proximity is noted as "Includes or Is Adjacent," the Neighborhood Association boundary includes or is adjacent to the subject property.

d. For application types with no distance specified, the final decision may be appealed pursuant to the Subsection indicated in Table 6-4-2.

RESPONSE:

Under "Table 6-4-2: Standing for Appeals Based on Proximity to Subject Property", Conditional Use Approval specified distance identifies Property owners within Distance specified of 330 ft. and Neighborhood Associations within Distance Specified of 660 ft. Parkland Hills Neighborhood Association and their residents, demonstrate they are included within this category as indicated in the acknowledgement letter from Consensus Planning in the PHNA September 14 evidentiary submittal, Appendix A.

IDO section required for demonstration of standing:

B. IDO section 6-4(V)(2)(b) Appearance of Record Required

1. For Decisions Requiring a Public Meeting or Hearing and Policy Decisions (per Table 6-1-1).

2. An appearance of record can be made through any of the following:

a. The initial submittal of an application for a decision listed in Table 6-1-1.

b. The submittal of written comments that include the eventual appellant's name and contact information about the subject case submitted to the relevant decision making body during the review process within the deadline for written comments prior to the decision.

c. Verbal comments made by the eventual appellant or appellant's agent provided at a public meeting or hearing about the subject case during the review process before the relevant decision-making body.

RESPONSE:

Elder Homestead Neighborhood Association, Siesta Hills Neighborhood, and Parkland Hills Neighborhood Association and their residents, have satisfied the requirements of the Appearance of Record with the following:

1. The above 3 neighborhood associations and residents submitted written comment per 2. b. above
2. The above 3 neighborhood associations and residents provided verbal comments per 2. c. above.

Based upon I.D.O. section 14-16-6-4(V)(2) The following parties have demonstrated the right of standing as Any other person or organization that can demonstrate that his/her/its property

rights or other legal rights have been specially and adversely affected by the decision and additionally based upon

Parkland Hills Neighborhood Association, written submittal and testimony by Melinda Frame and Peter S. Kalitsis, representing Parkland Hills Neighborhood Association
Elder Homestead Neighborhood Association, written submittal and testimony by Sandra Perea representing Elder Homestead Neighborhood Association
Siesta Hills Neighborhood Association written submittal and testimony by Rachel Baca representing Siesta Hills Neighborhood Association.

The 3 above Neighborhood Associations have performed both of the following:

b. The submittal of written comments that include the eventual appellant's name and contact information about the subject case submitted to the relevant decision making body during the review process within the deadline for written comments prior to the decision.

c. Verbal comments made by the eventual appellant or appellant's agent provided at a public meeting or hearing about the subject case during the review process before the relevant decision-making body.

SUMMATION: The above organizations have demonstrated Standing and Appearance of Record, therefore we request that you accept this **appeal** of the Zoning Hearing Examiners decision of Approval of a conditional use to allow an overnight shelter.

End of Demonstration of Standing and Appearance of Record

The following three Neighborhood Associations are submitting this Appeal jointly:

Siesta Hills Neighborhood Association.
Elder Homestead Neighborhood Association
Siesta Hills Neighborhood Association.

The above 3 Neighborhood Associations are submitting an appeal to the Approval of the Conditional Use for the following property.

INTRODUCTION

Re: The following project sites, 5006 Gibson Blvd. SE and 5400 Gibson Blvd. SE (Former Lovelace Hospital Site)

VA-2021-00316 NOD, PR# 2021-005834, UPC 101805513250020114

VA-2021-0317 NOD, PR# 2021-005834, UPC 101805504151520102

Project No.

We are submitting this appeal application to the City Council through the Land Use Hearing Officer regarding the ZHE approval of Conditional Use for the overnight shelter at City's recently purchased property at 5006 and 5400 Gibson Blvd. SE, the Old Lovelace Hospital.

Throughout this document we identify the grounds that we are appealing this Approval.

They include the following reasons:

1. The requirements of Resolution R-21-141 have not been met by the City. The ZHE clearly erred in reaching Finding No. 10, 11, and 12. The City must follow the requirements of the Resolution before any Conditional Use Permit is issued
2. We appeal the zoning hearing examiner's decision and request that this application be denied due to the IDO processes not being followed. This demonstrates that per IDO section 6-4(V)(4)(b) The decision being appealed is not supported by substantial evidence. (Finding No. 12)
3. This demonstrates that per IDO section 6-4(V)(4)(c) The decision-making body erred in applying the requirements of this IDO (or a plan, policy, or regulation referenced in the review and decision-making criteria for the type of decision being appealed). (Finding No. 13)
4. By not either rejecting this application for conditional use permit or by not requiring condition required as part of the conditional use permit for the above reason, the ZHE

demonstrates that per section 6-4(V)(4)(a) The decision-making body or the prior appeal body acted arbitrarily, or capriciously. (Finding No. 15)

5. By not either rejecting this application for conditional use permit or by not requiring condition required as part of the conditional use permit for the above reason, the ZHE demonstrates that per section 6-4(V)(4)(a) The decision-making body or the prior appeal body acted arbitrarily, or capriciously. (Finding No. 16, 17, 18).

6. Use-specific Standards applicable to the use in Section 14-16-4-3; the DPM; other adopted City regulations were not followed and compliance with IDO Section 14-16-6-6(A)(3)(b) was not met.

This demonstrates that per IDO section 6-4(V)(4)(c) The decision-making body erred in applying the requirements of this IDO (or a plan, policy, or regulation referenced in the review and decision-making criteria for the type of decision being appealed).

For this reason, we appeal this Conditional Use Permit and request that the Conditional Use Application for Permit be rejected. (Finding No. 19, 20).

7. Due to the lack of good faith and the lack of beginning negotiations with the city as required by R-21-141, This demonstrates that Per section 6-4(V)(4)(a) The decision-making body or the prior appeal body acted arbitrarily, or capriciously by not enforcing this city council resolution and per IDO section 6-4(V)(4)(b) The decision being appealed is not supported by substantial evidence. (Finding No. 21, 22).
8. This demonstrates that per IDO section 6-4(V)(4)(c) The decision-making body or the prior appeal body erred in applying the requirements of this IDO (or a plan, policy, or regulation referenced in the review and decision-making criteria for the type of decision being appealed) so therefore we request that the Conditional Use Permit be denied/revoked. (Finding No. 26, 26).

This application contains many of the supporting documents. Additional supporting documents and detailed evidentiary documentation and clarification shall be submitted by November 30, 2021.

PLEASE NOTE: APPENDICES TABLE OF CONTENTS OF EXHIBITS REFERENCED OR LOCATED IN EXHIBIT Z-PHNA EXHIBIT 9 14 (EXHIBIT A THROUGH M)

We oppose the Zoning Hearing Examiner's decision in that it did not follow the City Council resolution R-2021-021, P1-20. [SEE EXHIBIT #**T- R-21-141 RESOLUTION GATEWAY**] The requirements of the resolution requiring at least two community input sessions for neighbors, neighborhood associations, and businesses located within communities adjoining the Gateway Center were not met. The zoning hearing decision appeared to concluded that the notices were distributed **pursuant to the IDO**, that the requirement was met, but it was not. He ignored the resolution R-2021-021, P1-20 requiring input sessions for businesses within communities adjoining the Gateway Center.

The Zoning Hearing Examiner's Decision is as follows:

9. Applicant's community outreach regarding the proposed Gateway Center dates back to 2018, and that outreach utilized community input sessions, online surveys, focus groups with people experiencing homelessness, and neighborhood community meetings.

10. On March 15, 2021, the Albuquerque City Council approved Resolution R-21-141, which required two community input sessions within 45 days and advancement towards a Good Neighbor Agreement by the City with area residents and businesses to be in place for so long as the Gateway Center operates at the Gibson Health Hub site. The City held the two community input meetings on June 10 and June 12, 2021. The first meeting was held online and the second was held at the Gibson Health Hub Educational Building. Input from the meetings is posted on the City website at www.cabq.gov/gateway.

11. Applicant provided evidence that all property owners and neighborhood associations entitled to notice were notified of the Application. Although a neighboring business owner complained that he did not receive notice, his business was not listed on the list of properties located within the required notice perimeter pursuant to the IDO, and it appears from evidence in the record, including without limitation the perimeter buffer map for the Subject Property, that the complainant's business is located outside the required notice perimeter. Further, the complainant clearly had notice, given that he submitted written evidence before the ZHE hearing and oral testimony at the ZHE hearing. Based on evidence in the record, Application provided the required timely notice to all property owners whose properties are within the required notice perimeter. Opponents submitted a petition signed by business owners who complained of inadequate notice. Nevertheless, based on evidence of mailings, emails, publication, and sign porting, the ZHE finds that the notice given by Applicant was compliant with the requirements of the IDO.

APPELLANT ARGUMENT NO. 11:

1. THE ZHE’S DECISION APPEARS TO HAVE ERRONEOUSLY DETERMINED THAT THE REQUIREMENTS OF CITY COUNCIL RESOLUTION R-21-141 HAVE BEEN SATISFIED.

On May 3, 2021, City Council unanimously adopted Council Resolution R-21-141, which required additional community input and “Good Neighbor” measures by the City “*before the City takes any further steps towards development of the Gateway Center.*”¹ Section 2 of Resolution R-21-141 prohibits the City from issuing a certificate of occupancy or “any Conditional Use Permits” until the Resolution’s requirements are met.

The resolution required 1) at least two community input sessions for neighbors, neighborhood associations, and businesses located within communities adjoining the Gateway Center and 2) that a Good Neighbor Program be completed. The required community input sessions were specifically to include “neighbors, neighborhood associations, and businesses located within communities adjoining the Gateway Center.” The Good Neighbor Program was specifically required to address, at a minimum, “overnight capacity, security protocols, land use changes that will be required to authorize proposed uses at the site,” acceptable methods for the dissemination of project and programming, and a point of contact.

The ZHE’s decision appears to have concluded that the City met the requirements of Resolution R-2021-141. The ZHE’s finding related to Resolution R-21-141 is as follows:

10. On March 15, 2021, the Albuquerque City Council approved Resolution R-21-141, which required two community input sessions within 45 days and advancement towards a Good Neighbor Agreement by the City with area residents and businesses to be in place for so long as the Gateway Center operates at the Gibson Health Hub site. The City held the two community input meetings on June 10 and June 12, 2021. The first meeting was held online and the second was held at the Gibson Health Hub Educational Building. Input from the meetings is posted on the City website at www.cabq.gov/gateway.

This is an inadequate and incomplete analysis of the requirements of Resolution R-21-141.

First, the Resolution established that any “neighbors, neighborhood associations, and businesses located *within communities adjoining the Gateway Center*” be included in the community input sessions. There was no distance limitation imposed on the neighbors, associations and businesses to be included. However, it appears that the ZHE concluded from the testimony that the notices were distributed pursuant to the IDO’s requirement for notice, which is only 100 feet. Resolution R-21-141 did not include any such limitation. In fact, the Resolution clearly stated that “neighbors and businesses bearing the greatest impacts” should be included.

There is substantial evidence in the record that, at a minimum, the “greatest impacts” will extend to a quarter-mile. The Appellant Neighborhood Associations have demonstrated that

adverse impacts will be felt as far as 1.5 miles away. At the same time, there is substantial evidence that businesses within these distances were not invited to or notified of the required community input sessions.

Second, Section 2 of Resolution R-21-141 requires that the good neighbor program must be “completed.” Section 1 of the Resolution states that the City must “establish a good neighbor program” for the Gateway Center. While the City has taken cursory steps towards a Good Neighbor Agreement, it has made only minimal progress. The city has said that they are preparing the agreement and then will present it to the neighborhood associations for review. To be an acceptable good neighbor agreement, it must be agreed to by both the City and the affected neighborhood associations. This includes five neighborhood associations, not just one or two, for any conditional use permits or certificate of occupancy to be issued.

The requirements of Resolution R-21-141 have not been met by the City. The ZHE clearly erred in reaching Finding No. 10, 11, and 12. The City must follow the requirements of the Resolution before any Conditional Use Permit is issued.

For the above reasons, R-2021-021 requirements have not been met, the decision of the ZHE is erroneous and should be reversed. A conditional use permit cannot be issued until meetings with notifications per Resolution R-2021-021 have occurred, and this must include the five neighborhoods, not just the businesses per the IDO’s requirements. Furthermore, the good neighbor program described in Section 1 must be completed before a conditional use permit can be issued.

FINDINGS #12 & #13

We oppose the Zoning Hearing Examiner's decision because the specified requirements for Pre-Submittal Neighborhood Meeting per the Integrated Development Ordinance (IDO) were not fulfilled.

First, even after the applicant's representative and the zoning hearing examiner were made aware of this oversight, no correction of this error was attempted or completed to request a Pre-submittal neighborhood meeting with Parkland Hills Neighborhood Association as set forth in the IDO.

Second, the Pre-submittal Neighborhood Association meeting that was held, which included

"we are providing this notice and invite to the facilitated meeting as a courtesy to Elder Homestead, Parkland Hills, Trumbull Village, and Siesta Hills", neighborhood associations.", did not include the information specified in the IDO. The IDO identifies the information required in the following IDO section:

6-4(C)(6) At the pre-submittal neighborhood meeting, the applicant shall provide information about the proposed project, including but not limited to the scope of uses, approximate square footages for different uses, general site layout, design guidelines, architectural style, conceptual elevations, and conceptual landscaping plans.

The applicant failed to include the following information in the pre-submittal neighborhood meeting:

"approximate square footages for different uses, general site layout, design guidelines, and conceptual landscaping plans."

For this reason, we ask that the decision be overturned until this requirement has been completed to allow for resubmittal of this application for Conditional Use Permit.

The Zoning Hearing Examiner's Decision was as follows:

12. Applicant timely mailed neighborhood meeting requests on June 4, 2021.

13. On June 22, 2021, the City Land Use Facilitation Program conducted a facilitated pre-application meeting with community members, online via Zoom, to which were invited representatives of the affected neighborhood associations and the community at large. According to the facilitated meeting report dated June 24, 2021, approximately 98 people registered for the meeting and as many as 80 participated in the meeting at the highest participation.

APPELLANT ARGUMENT #12 and #13:

1. The applicant failed to meet the protocols set forth in the IDO for a pre-submittal meeting request with Parkland Hills Neighborhood Association as per IDO 6-4(C)(1) & IDO 6-4(C)(3) & IDO 6-4(C)(4)
2. Further details of these errors can be found in the written statement submitted by the Parkland Hills Neighborhood Association Homelessness Solutions Committee, **Appendix A** on pages 14 to 39.
3. The applicant failed to meet the protocols set forth in the IDO per IDO 6-4(C)(6) above. Though they abandoned proper protocol for the meeting, a meeting for South San Pedro Neighborhood Association and “District 6 Neighborhood Association” did occur, and the applicant failed to address questions and provide the information mandated in IDO 6-4(C)(6), above, including but not limited to, “scope of uses, approximate square footages for different uses, general site layout, design guidelines, etc.”

SUMMATION for Finding No. 12 and 13:

1. Though we brought this up multiple times, PHNA has provided evidence that the city’s agent acknowledged that PHNA should have been included as an affected neighborhood, thus the IDO regulations have been ignored.
2. With all the evidence submitted, even with the acknowledgement of Consensus Planning error, we never received a response to our concern. With the apparent ignoring of the IDO ordinance, with our Parkland Hills Association letter communicating to all of the above people in good faith, we question the impartiality/objectivity. The only response that we received was from Ms. Suzanna Sanchez acknowledging that this information has been added to the records... for the Zoning Hearing Examiner to consider. We understand that no one can comment on hearing agenda items in the zoning hearing examiner’s office, but the planning department and the legal department should be available to address issues on the following of the IDO legal requirements if they are not being followed. Requiring a hearing to occur that should address this evidence, and not ensuring that the ordinance is being followed, would appear to be grounds for full acceptance of this appeal and rejection of the Conditional Use Application.
3. The applicant failed to meet the protocols set forth in the IDO for a pre-submittal meeting with our neighborhood as per IDO 6-4(C)(3) & IDO 6-4(C)(4). Additionally, though they abandoned proper protocol for the meeting, a meeting did occur, and the applicant failed to address questions and provide the information mandated in IDO 6-4(C)(6), including but not limited to, “scope of uses, approximate square footages for different uses, general site layout, design guidelines, etc.” Further details of these errors can be found in the written statement submitted by the Parkland Hills Neighborhood Association Homeless Solutions Committee, **Appendix A**.
4. The City has not adequately addressed how they will mitigate adverse impacts to the community. In IDO 6-6(A)(3)(c), it stipulates the property “will not create significant adverse impacts on adjacent properties, the surrounding neighborhood, or the larger community.” The impact study being conducted by the University of New Mexico, which is to inform and guide the applicant’s

Operational Plan on mitigating adverse impacts to our neighborhoods, has not been completed. It is not projected to be complete until January of 2022.

5. Therefore: Due to the City's inability to fulfill the mandated procedures of the IDO, their ability to follow procedures are in doubt, making it critical that they complete the IDO mandated requirements prior to the approval of any conditional use permit for these project sites.

The occurrence of this pre-application neighborhood meeting without the required information negates this being a valid pre-application neighborhood meeting and therefore constitutes an incomplete application submittal for Conditional Use Permit

FOR THESE REASONS AND THE EVIDENCE PRESENTED ABOVE, We appeal the zoning hearing examiner's decision and request that this application be denied due to the IDO processes not being followed. This demonstrates that Per IDO section 6-4(V)(4)(b) The decision being appealed is not supported by substantial evidence.

This demonstrates that Per IDO section 6-4(V)(4)(c) The decision-making body erred in applying the requirements of this IDO (or a plan, policy, or regulation referenced in the review and decision-making criteria for the type of decision being appealed).

FINDING #15

The Zoning Hearing Examiner's decision at Finding No. 15 did not follow the IDO requirement that the requested conditional use be "consistent with the ABC Comprehensive Plan.

The Zoning Hearing Examiner's Decision is as follows:

15. Regarding the requirement under IDO Section 14-16-6-6(A)(3)(a) that the requested conditional use be "*consistent with the ABC Comp. Plan, as amended*":

- a. Applicant and supporters of the Application submitted, among other things, the following:
 - i. Goal 6.2 Multi-Modal System: Encourage walking, biking, and transit, especially at peak-hour commuting times, to enhance access and mobility for people of all ages and abilities. Applicant Response: The proposed Gateway Center overnight shelter at the Gibson Health Hub furthers Goal 6.2 Multi-Modal System by placing it in an area with excellent multi-modal access, including transit services, major street network, and pedestrian and bicycle access and connections. The subject property is along Gibson Boulevard, an Urban Principal Arterial, and designated as a Commuter Corridor by the Comprehensive Plan. It is within the designated San Mateo Boulevard Major Transit Corridor area and a 1/2-mile west of the Louisiana Boulevard Major Transit Corridor area.
 - ii. Goal 9.4 Homelessness: Make homelessness rare, short-term, and non-recurring. Applicant Response: The Gateway Center overnight shelter will further Goal 9.4 Homelessness by being a critical component of the City's comprehensive approach to making homelessness rare, short-term, and non-recurring. The City estimates that there are at least 1,525 people in shelters or on the streets in Albuquerque each night, and at least 5,000 households experienced homelessness in 2020. The Gateway Center will address chronic homelessness in Albuquerque by providing safe, dignified emergency shelter within a central, developed area of Albuquerque. In addition, clients will receive wraparound services that help them exit the overnight shelter into stable, permanent housing and other community resources.
 - iii. POLICY 9.4.1: Best Practices: Implement an appropriate and effective model to address chronic homelessness. Applicant Response: The Gateway Center overnight shelter furthers Policy 9.4.1 Best Practices by providing emergency shelter for those experiencing homelessness and work with them to transition into permanent housing. The proposed Gateway Center overnight shelter will function as a "gateway" to end chronic homelessness through the use of three models to effectively transition unhoused community members into housing
 - iv. POLICY 9.4.2 Services: Provide expanded options for shelters and services for people experiencing temporary homelessness. Applicant Response: The proposed Gateway Center overnight shelter will further Policy 9.4.2 Services by expanding options for temporary shelter and services for the City's unhoused populations. Although there are many service providers in Albuquerque that serve the unhoused populations, the City does not currently have a centralized 24/7 center that can connect unhoused individuals to the support organizations they need, often creating a "gap" in services. By building strong partnerships with existing providers, the City's proposed Gateway Center can serve as a centralized center, allowing for a more efficient connection to essential services and reducing the potential gap in services.

v. POLICY 9.4.3 Equitable Distribution: Support a network of service points that are easily accessible by residents and workers, geographically distributed throughout the City and County, and proximate to transit. Applicant Response: Locating the proposed Gateway Center overnight shelter at the Gibson Health Hub furthers Policy 9.4.3 Equitable Distribution as reflected in comments from the individuals experiencing homelessness focus groups. The Gateway Center location is accessible to trusted nearby service providers in the International District and is located within the San Mateo Major Transit Corridor area. The proposed Gateway Center is the City's first step towards a dispersed shelter model that will add more shelters and supportive services in other locations within Albuquerque.

vi. Goal 9.5 Vulnerable Populations: Expand capacity to provide quality housing and services to vulnerable populations. Applicant Response: The proposed Gateway Center will expand the City's capacity to provide services and access to quality housing to vulnerable populations, thereby furthering Goal 9.5 Vulnerable Populations.

vii. POLICY 9.5.1 Quality Housing: Ensure well maintained, safe transitional and permanent housing for the lowest income households that are most at risk of homelessness. Applicant Response: The proposed Gateway Center furthers Policy 9.5.1 Quality Housing by providing the first step to permanent housing for the most vulnerable in our community. The Time-Limited Model ensures that clients of the overnight shelter have secured permanent housing before they leave the shelter. Low-income clients will have Wraparound services, including case management and assistance securing financial support for housing expenses. The goal of the Gateway Center is to reduce the risk of homelessness by ensuring clients have the support to maintain stable, permanent housing.

viii. POLICY 9.5.2 Transitional Services: Encourage on-site transitional services with culturally competent service delivery that respects the dignity of individuals and families and fosters self-determination and self-sufficiency, including job training, financial education, and behavioral health assistance. Applicant Response: The services provided at the Gateway Center will support Policy 9.5.2 Transitional Services by providing Wraparound services for individuals and families. The individual leads the team-based, collaborative Wraparound approach to case management. The program is flexible, comprehensive, and can involve a number of organizations. The City will partner with existing community organizations and service providers specializing in delivering culturally competent services that will respect the individual and prepare individualized transition plans.

b. Opponents of the Application submitted, among other things, the following:

i. Under "A Vision for Albuquerque & Bernalillo County" page 3-3 "As the county and city grow in population over the next 20 years, neighborhoods will be safer and easier places to walk through and between. The positive characteristics that contribute to their unique identities will be protected and enhanced." "The City and the County commit to analyzing the health of our communities and the geographic distribution of our public investments and assets. Where gaps are identified, governments will collaborate with communities, nonprofits, public agencies, and private enterprises to address them." Opponent Response: This request does not help the positive characteristics of the neighborhood as it adds a further potential crime element to the area, (in an area with the highest overall crime in the City) increases the likelihood of

encampments along Gibson Blvd, and fails to create a distribution of investments, and assets for the homeless throughout the City.

ii. Guiding Principles found on page 3-8 state the following:

1. STRONG NEIGHBORHOODS New development creates desirable places to live and encourages diverse housing and amenities, while respecting the unique history and character of each neighborhood. Opponent Response: does not increase the quality of life as it adds another homeless shelter to Council District 6 which already has the highest number of homeless shelters. This does not increase the quality of life of the residents as the area is suffering from homeless encampments, public urination, defecation and other undesirable activities.

2. MOBILITY Residents have improved options to move throughout Albuquerque for work, school, recreation, and services. Opponent Response: homeless encampments along Zuni make the area difficult to walk as there is extensive amounts of debris on the sidewalks, this particularly affects our residents with disabilities as it creates an additional hazard while they are attempting to get from their home to their destination and back again.

3. ECONOMIC VITALITY The local economy supports a mix of market activities and promotes financial security for all residents. Opponent Response: Economic Vitality is suffering due to high crime in the area. Additionally homeless encampments would not help to encourage new businesses to open in the area.

4. EQUITY All residents have access to good public services, a range of housing options, and healthy places to live, work, learn, and play. Opponent Response: Concentration of homeless services in this sector of the city does not balance negative impact equally across the City.

5. COMMUNITY HEALTH All residents are protected from harm where they live, work, learn, and play. Everyone has convenient access to healthy food, parks and open space, and a wide range of amenities and services. Opponent Response: Increasing homeless encampments would discourage use of parks and open space.

1. SEE #16, #17, AND #18 FOR ADDITIONAL ARGUMENTS

2. APPELLANT ARGUMENT IN RESPONSE TO FINDING NO. #15:
NON-RECURRING and WRAPAROUND SERVICES

Non-recurring and wraparound services require planning. Adequate wraparound services to provide for transition of people experiencing homelessness into housing, and must consider the availability of permanent housing are required.

As the City has stated that that is their plan, they have failed to demonstrate they have adequately planned for implementation.

The city has not demonstrated that they have adequate housing into which to transition. Actually, the opposite has been demonstrated, They have provided no evidence of the availability of housing.

Per PHNA's September 14, 2021 submittal

3. APPELLANT'S ARGUMENT A: City's inability to provide adequate transitional housing

The sections talk about providing permanent housing for overnight homeless shelter residents to transition into from this facility.

Some of the problems include that the city has not demonstrated development of a plan to accomplish this. At so many committees of the homeless coordinating council they keep talking about the problems with lack of housing to transition to and the lack of a current solution. The City demonstrated, last year its inability to disburse housing vouchers, \$700,000, enough to provide for up to 51 households. Additionally, \$2 million dollars was mostly unspent due to the City's inability to disburse funds.

For these reasons, we are requesting that the bed capacity that Parkland Hills Neighborhood Association requested in its September 14, 2021 statement, 15 families and 30 individuals for a total of 90 persons, be included in the Conditions for conditional use permit.

The Zoning Hearing Decision did not take into consideration the inability of the city to complete their proposed task of transitioning those unhoused persons into permanent housing due to past inability to follow through when housing funds are available. The decision should have included conditions to ensure that the city be required to demonstrate that it could provide the transition to permanent housing with a lower number of residents of the overnight shelter. The Conditional Use Permit should have been denied as the City has clearly not demonstrated that it can mitigate significant adverse impact.

4. APPELLANT'S ARGUMENT B: City's inability to provide behavioral healthcare services as part of wraparound services.

- A. As stated in PHNA September 14, 2021 submittal at, page 8-9, the following were some of the reasons that were documented as to the need to mitigate significant adverse impacts due an 87% shortage of behavioral healthcare providers in New Mexico. For this reason, we have requested that limitations on the bed capacity be incorporated as a condition of the conditional use permit to ensure that the neighbors do not suffer from a facility abandoning people without providing the Behavioral Healthcare Services needed to successfully transition to permanent housing. As over 50% of people experiencing homelessness have behavioral health issues, this is crucial to transitioning chronically homeless persons into permanent housing, due to lack of behavioral health services, we will be just abandoning the unhoused who will be in District 6 and due to over 51% of services available, will stay in the district resulting in a significant adverse impact.

5. APPELLANT'S ARGUMENT D: Per the EPA **EXHIBIT X- EPA LOW INCOME/PUBLIC HOUSING MAP**, City's overburdened District 6.
6. APPELLANT'S ARGUMENT C: City's overburden of District 6 with 51 percent of providers of services to homeless persons, while being 11% of city council districts. Additionally, per the 2020 Area Command Comparison Crime Stats, the southeast command, which includes District 6, out of city's 6 total command areas, suffered the greatest crime in 7 percent of the 10 categories.
7. APPELLANT'S ARGUMENT D: Per the EPA **EXHIBIT X- EPA LOW INCOME/PUBLIC HOUSING MAP**, City's overburden of District 6 with the largest areas of any City Council district with the greatest percentile of residences (excluding commercial and industrial properties) with greatest percentile of Low Income Population (National Percentiles) **EXHIBIT X- LOW INCOME/PUBLIC HOUSING MAP**. Additionally, from that map, the largest percentage of Public Housing and subsidized housing located in these 95-100% Percentile Low Income Population occurs in District 6.

By not either rejecting this application for conditional use permit or by not requiring condition required as part of the conditional use permit for the above reason, the ZHE demonstrates that Per section 6-4(V)(4)(a) The decision-making body or the prior appeal body acted arbitrarily, or capriciously.

FINDING #16, #17, and #18

We oppose the Zoning Hearing Examiner's decision in that it did not follow the IDO because it failed to take into consideration Comp Plan POLICY 5.3.7 *"Locally Unwanted Land Uses: Ensure that land uses that are objectionable to immediate neighbors but may be useful to society are located carefully and equitably to ensure that social assets are distributed evenly and social responsibilities are borne fairly across the Albuquerque area."* We realize that equity and equality are not synonymous. 51% of providers in District 6 (11% of all district) is clearly not equitable and clearly does not "ensure that social assets are distributed evenly and social responsibilities borne fairly across the Albuquerque area." This does not even take into account that the City appears to be locating low income housing disproportionately in District 6, possibly at the site at San Mateo and Kathryn, which was supposed to house a police substation.

Additionally, the greatest percentile of low income census areas, not including commercial and industrial zones, are in District 6, having the largest percentage of Public Housing and subsidized housing located in these 95-100% Percentile Low Income Population occurs in District 6 and being part of the southeast command with the highest crimes in 70% of the crime categories.

For these reasons we request that all the conditions that were requested, including the capacities specified in the September 14, 2021 Parkland Neighborhood Association Zoning evidence submittal be Condition requirements for the granting of the Conditional Use Permit for the sites 5006 and 5400 Gibson Blvd. SE.

The Zoning Hearing Examiner's Decision is as follows:

16. Although opponents point out that homeless and behavioral health services are not spread equally throughout the City, the Comp Plan *"uses the term 'equity' to describe ensuring that different people or places have the opportunities, access, and services they most need. Many people think 'equity' and 'equality' are interchangeable terms. 'Equality' aims to ensure that all people or places have the same opportunities, access, and services – a laudable goal. Distributing an equal amount to each would be fair if people and places had the same starting amounts. Discussions of "equity" acknowledge that people and places might need and want different things – and have different starting places. The equity approach involves assessing the different needs that people and places have and prioritizing resources and efforts to address them in the order of urgency that best matches those needs to move toward equality over time."* See Comp Plan at 4-2. Accordingly, the Comp Plan does not require distribution of resources and unwanted land uses equally throughout the City, but rather institutes the policy that resources and unwanted land uses be located equitably, in consideration of the totality of the circumstances.

17. Further, Comp Plan POLICY 5.3.7 states *"Locally Unwanted Land Uses: Ensure that land uses that are objectionable to immediate neighbors but may be useful to society are located carefully and equitably to ensure that social assets are distributed evenly and social*

responsibilities are borne fairly across the Albuquerque area. (a) Minimize the impacts of locally unwanted land uses on surrounding areas through policies, regulations, and enforcement. (b) Ensure appropriate setbacks, buffers, and/or design standards to minimize offsite impacts.” Applicant has demonstrated, by the evidence cited in the Notification of Decision and other evidence in the record, its efforts to locate its proposed overnight shelter carefully and equitably in an area of need surrounded by social and governmental assets, and that its operations will benefit not only people suffering homelessness in the immediate area, but in the community as a whole. Also, Applicant has submitted that policies, regulations, enforcement, setbacks, buffers, and design standards will be implemented to minimize any negative impacts.

18. On balance, the ZHE finds that Applicant has provided a sound justification showing compliance with IDO Section 14-16-6-6(A)(3)(a) based on substantial evidence.

APPELLANT’S ARGUMENT A: Request for Conditions in Conditional Use Permit to mitigate significant adverse impact due to overburden of District 6, 11% of 9 districts, with 51 % or providers of services to people experiencing homelessness.

APPELLANT’S ARGUMENT B: City’s inability to provide behavioral healthcare services as part of wraparound services.

- A. As stated in PHNA September 14, 2021 submittal, page 8-9, the following were some of the reasons that were documented as to the need to mitigate significant adverse impacts due an 87% shortage of behavioral healthcare providers in New Mexico. For this reason, we have requested that limitations on the bed capacity be incorporated as a condition of the conditional use permit to ensure that the neighbors do not suffer from a facility of abandoning people without providing the needed Behavioral Healthcare Services needed to successfully transition to permanent housing. As over 50% of people experiencing homelessness have behavioral health issues, this is crucial to transitioning chronically homeless persons into permanent housing, instead of due to lack of behavioral health services, we will be just abandoning the unhoused who will be in District 6 and because over 51% of services available, they will stay in the district resulting in a significant adverse impact.
- B. As stated in PHNA September 14, 2021 submittal, page 6, the following were some of the reasons that were documented as to the need to mitigate significant adverse impacts due to over 51 percent of providers of services to people experiencing homelessness.
- C. As stated in PHNA September 14, 2021 submittal, pages 3-6 , the following were some of the reasons that were documented as to the need for Conditions to be required for the conditional use permit to mitigate significant adverse impacts. The city has demonstrated in the past its inability to mitigate significant adverse impacts in neighbors with homeless

services, beginning with the statement of Ms. Pierce, Director of FCS in communication with City Councilor Pat Davis saying they will evaluate the impacts of any emergency shelters within 5 miles of proposed locations... and will address community safety concerns for the area around any proposed emergency shelter locations. Further, the city's track record of its inability to mitigate significant adverse impacts is demonstrated by its inability to managing areas around homeless services.

- D. Per Testimony at September 21, 2021 hearing Peter S. Kalitsis included the following:
In the meeting on September 20th, Carol Pierce stated that CLINICAL COUNSELING WILL NOT BE PART OF CORE SERVICES. But may be in building, i.e., behavioral health such as Haven.

The majority of unhoused have behavioral health issues and the inclusion of these services when they are in the gateway are crucial for potential success. If these are not included as an integral part, this system is clearly not set up for success and the people who leave after 90 days or less will go back to the community, most conveniently into the surrounding neighborhoods of the Gateway center, thereby overburdening the neighborhood even more.

APPELLANT'S ARGUMENT C: City's overburden of District 6 with 51 percent of providers of services to the people experiencing homelessness. while being 11% of city council districts

Item APPELLANT'S ARGUMENT D: Per the EPA Map, the City's overburden of District 6 with the largest areas of any city council district with the greatest percentile of residences (excluding commercial and industrial properties) with greatest percentile of Low Income Population (National Percentiles) (SEE EXHIBIT X- LOW INCOME/PUBLIC HOUSING MAP). Additionally, from that map, the largest percentage of Public Housing and subsidized housing located in these 95-100% Percentile Low Income Population occurs in District 6.

The Zoning hearing examiners decision dismissing the fact that 51% of providers of services to the unhoused in District 6 is not equitable. Out of the 6 APD Area Commands, the Southeast Area, which includes District 6, has the highest crime rate in 7 out of the 10 categories of crime

This response demonstrates that this decision is arbitrary and capricious. Therefore, the inclusion of the overburden should be allowed in this appeal.

APPELLANT'S ARGUMENT D: (EXHIBIT Q- 9/21 SUBMITTAL- CRIME DATA ATTACHED) Request for Conditions in Conditional Use Permit to mitigate significant adverse impact due to overburden of District 6, 11% of 9 districts, with 2020 Area Command Comparison Crime Stats as submitted by for the September 21, 2021 Zoning hearing, the southeast command, out of city's 6 total command areas, showed the greatest crime in 7 out of the following 10 areas with the other 3 in second and third place.

1. Aggravated Offenses
2. Homicide Offenses
3. Burglary/Breaking & Entering
4. Motor Vehicle Theft
5. Stolen Property
6. Drugs/Narcotics
7. Weapons Violations.

Second and third placings

It shared top honors for Destruction/Damage/Vandalism with one other, was second place in Robbery, and just below second in Larceny/Theft offenses.

SUMMATION for FINDINGS No.16, 17 &18:

Not only does District 6 have

1. the greatest percentage of homeless service providers at 51% (prior to the opening of Gateway)
2. The greatest census area percentile of non-commercial and non-industrial lowest per capita in Albuquerque.
8. The greatest number of Subsidized and low income housing in the city located in census area percentile of non-commercial and non-industrial lowest per capita in Albuquerque.
9. The overburden of District 6 with 51 percent of providers of services to the homeless while being 11% of city council districts
10. Per the 2020 Area Command Comparison Crime Stats, the southeast command, which includes District 6, out of city's 6 total command areas, suffered the greatest crime in 7 percent of the 10 categories.
11. The lack of inclusion of Clinical Counseling Service demonstrates that the purpose of the Overnight shelter is to effectively provide short-term housing to people experiencing homelessness and not truly provide the goal to transition to permanent housing. Greater than 50% of people experiencing homelessness have behavioral health issues. Providing an overnight homeless shelter which states that it has wraparound services, and is intended, not to abandon people experiencing homelessness., but is intended to transition them into permanent housing, while not providing 'CLINICAL COUNSELING SERVICES', also known as Behavioral Health Services, clearly contradicts the operations manual that the final Zoning Hearing Decision was predicated on. Due to this contradiction, the operations manual is in error and therefore should be excluded. The eliminating of this evidence that was needed to change from a deferred decision of the September 21 hearing, waiting for the final operations manual, to the inclusion of the final operations manual, for the Approval from the October 19 hearing demonstrates that Per IDO section 6-4(V)(4)(b) The decision being appealed is not supported by substantial evidence.
12. Per the EPA **EXHIBIT X- EPA LOW INCOME/PUBLIC HOUSING MAP**, City's overburden of District 6 with the largest areas of any city council district with the greatest percentile of residences (excluding commercial and industrial properties) with greatest percentile of Low Income Population (National Percentiles).

13. The greatest percentage of Public Housing and subsidized housing located in these 95-100% Percentile Low Income Population occurs in District 6. **EXHIBIT X- LOW INCOME/PUBLIC HOUSING MAP.**
14. These last two items may appear to be additional information, but the Zoning hearing examiners decision allowing the fact that 51% of providers of services to the unhoused in District 6 is equitable, is arbitrary and capricious. This requires a response to demonstrate that this decision is arbitrary and capricious. Therefore, the inclusion of the overburden should be allowed in this appeal.

CONCLUSION

The Zoning Hearing concluded and found that

“Applicant has demonstrated, by the evidence cited in the Notification of Decision and other evidence in the record, its efforts to locate its proposed overnight shelter carefully and equitably in an area of need surrounded by social and governmental assets, and that its operations will benefit not only people suffering homelessness in the immediate area, but in the community as a whole.”

The Zoning Hearing Examiner’s decision ignored an important policy in the IDO. The zoning hearing examiner’s decision to not take into consideration 5.3.7 Comp Plan POLICY 5.3.7 “*Locally Unwanted Land Uses: Ensure that land uses that are objectionable to immediate neighbors but may be useful to society are located carefully and equitably to ensure that **social assets are distributed evenly and social responsibilities are borne fairly across the Albuquerque area.***”

We realize that equity is not the same thing as equality. Equity means ensuring that neighborhoods that are *already at a disadvantage* have a greater opportunity than more privileged neighborhoods to overcome their disadvantage. Placing the large burden of the Gateway Center on a neighborhood that is already shouldering much of the burden of accommodating the needs of people experiencing homelessness in Albuquerque is *not equitable*. 51% of providers of services to the homeless population in Albuquerque are located in District 6. When there are nine City Council districts, the fact that a single district already accommodates so many services, with their attendant adverse impacts, is clearly not equitable. There is no possible way to examine these facts and conclude, as required by the IDO, that “social responsibilities” are “borne fairly across the Albuquerque area.”

The ZHE’s decision to conclude that placement of the Gateway Center in District 6 through issuance of a conditional use permit is equitable ignores substantial evidence and is arbitrary and capricious.

FINDING #19 & #20

We oppose the Zoning Hearing Examiner's decision in that it did not follow the Integrated Development Ordinance (IDO). Though the information on the impact to the surrounding neighborhood and our request that this be addressed in the Conditions of the Conditional Use approval, the decision did not address these specific impacts. This is demonstrated through the examples of the burden of significant adverse impact to those locations near where providers of services to the unhoused are readily accessible.

The Zoning Hearing Examiner's Decision is as follows:

19. Regarding the requirement under IDO Section 14-16-6-6(A)(3)(b) that the requested conditional use comply “with all applicable provisions of this IDO, including but not limited to any Use-specific Standards applicable to the use in Section 14-16-4-3; the DPM; other adopted City regulations; and any conditions specifically applied to development of the property in a prior permit or approval affecting the property, or there is a condition of approval that any Variances or Waivers needed to comply with any of these provisions must be approved or the Conditional Use Approval will be invalidated pursuant to Subsection [14-16-6-6(A)(2)(c)2]”:

a. Applicant and supporters of the Application submitted, among other things, the following:

i. The proposed overnight shelter is allowed under the MX-H zone as a Conditional Use. There are ongoing functions at the Gibson Health Hub that fall under hospital use, which is permissive under the MX-H zone. The proposed Gateway Center overnight shelter will comply with the Use-Specific Standards contained in Section 4-3-(C)(6) Overnight Shelter.

b. Opponents of the Application submitted, among other things, the following:

i. The intent of the MX-H zone is undermined because, in the estimation of opponents, the proposed use is not appropriately sited at the Subject Property.

20. On balance, the ZHE finds that Applicant has provided a sound justification showing compliance with IDO Section 14-16-6-6(A)(3)(b) based on substantial evidence.

ARGUMENT

The following Exhibits included in **EXHIBIT N- PHNA 9 14 SUBMITTAL (complete) - SEE PHNA STATEMENT AND EVIDENCE ZHE 9 14 21**

The following articles referenced in PHNA's September 14, 2021 submittal to the ZHE included the following articles which will be briefly described as to their importance in this appeal. Without any reasonable conditions imposed with the conditional use permit, the City has demonstrated by its past actions inadequate ability to mitigate significant adverse impact.

APPENDICES C, D, and E demonstrate that the City throughout the years, and with crime, including an increasing murder rate, in a park that is legally closed at night, is incapable of being cleaned, policed, made safe, areas with significant unhoused at and around these locations, even though or because it has been a homeless shelter pickup/drop off point in Albuquerque.

For example, with Coronado Park, with multiple murders, rape, and assault, in a location where the law is being broken. Residents experiencing homelessness have been told that when a crime is committed against them, the City will not detain the perpetrator, therefore discouraging arrest and prosecution of criminals and endangering the already vulnerable unhoused population.

Albuquerque Homeless Residents

APPENDIX C - LOCAL VOICES: Albuquerque's homeless: Worse than you think

APPENDIX D - Police records depict pattern of problems, violence at Coronado Park

APPENDIX E - 'It's becoming increasingly dangerous': Albuquerque park sees 3rd homicide

APPENDICES F, G, and H demonstrate problems, including trash and violence, adjacent to homeless shelters. This shelter, in Santa Fe, has for years had worsening problems. There are problems adjacent to a homeless shelter in Phoenix. This demonstrates the need for maintaining parks, alleys, and streets in Albuquerque for a 1.5 mile radius from significant adverse impact, such as the owners adjacent to alleys who are legally responsible for their cleaning, which could include needles, feces, and trash left from unhoused persons who congregate near the overnight shelter and are pushed .25 miles away into parks and alleys outside this radius.

Santa Fe/Phoenix

APPENDIX F - The shelter next door can be a tough neighbor

APPENDIX G - Some request relocation of Pete's Place shelter at Santa Fe community meeting

APPENDIX H - 'We're really the dumping ground': Phoenix neighbors

The appendixes J and K demonstrates the Bernalillo County Metropolitan Detention Center in which Albuquerque is responsible for safety housing persons convicted of crimes, cannot provide adequate behavioral and medical care, in spite of lawsuits and deaths. The city has not demonstrated it has the capability to protect prisoners physical and mental health when they are in a controlled environment, how can the City be expected to mitigate significant adverse impact by instituting measures to protect neighbors for 1.5 miles without providing

services of trash removal and monitoring these surrounding areas without dedicated personnel, including the municipal waste division, the public police and safety departments.

Jail

APPENDIX J - Lawsuit filed in death of inmate at Bernalillo County Metropolitan Detention Center

APPENDIX K - Centurion Presence Coincidental In New Mexico Prison and Jail Deaths?

As seen in APPENDIX N, even with financial resources available, the city has demonstrated that without legal mandate of conditions of a Conditional Use Permit, the city may not implement available measures without Conditions required in the Conditional Use Permit.

APPENDIX N – CITY LEAVES \$700k IN HOUSING VOUCHER MONEY UNSPENT

As demonstrated in APPENDICES S, T AND U, with 51% of providers of services to the unhoused and multiple locations. With this the City has previously created congregation of people experiencing homelessness due to poor decisions such as locating pickups for transportation to homeless services next to middle schools and at a children’s park.

Even with financial resources available, the City has demonstrated that without legal mandate of conditions of a Conditional Use Permit, the City does not implement well planned measures without Conditions required in the Conditional Use Permit.

APPENDIX U identifies District 6 contains 51% percent of providers of services to people experiencing homelessness. There is the need to prevent transportation pickups and drop-offs from occurring at Parks, schools, and daycare within 1.5 miles.

As demonstrated by the City’s inability to protect its citizens, services of monitoring parks and alley and providing cleanup for 1.5 miles is necessary to mitigate significant adverse impact from the surrounding neighborhood.

APPENDIX S - Good Neighbor Agreement terms may include but will not be limited

APPENDIX T - PARKS, SCHOOLS, AND DAYCARES WITHIN 1.5 MILES OF PROPOSED GATEWAY FACILITY

APPENDIX U – PROVIDERS OF SERVICES TO THE HOMELESS

The following is taken from the Statement and information presented at October 19, 2021 Zoning hearing by Peter Kalitsis, a member of the Parkland Hills Homelessness Solutions Committee. I am representing our Neighborhood Association in presenting the included IDO

provisions that are included in the phrase “*all applicable provisions of this IDO, including but not limited to any Use-specific Standards applicable to the use in Section 14-16-4-3; the DPM; other adopted City regulations*”.

5. Overburden creating Significant Adverse Impact

6-6(A)(3)(c) It will not create significant adverse impacts on adjacent properties, the surrounding neighborhood, or the larger community.

RESPONSE:

Based upon sections

14-16-4-3(A)(2) nuisance conditions affecting other properties,

14-16-5-13(A) OPERATING STANDARDS,

14-16-6-9 (Violations, Enforcement, and Penalties) Property owner responsibilities under this Section.,

14-16-5-13(B) MAINTENANCE STANDARDS shall not create any public or private nuisance.,

and 5-13(B)(1) Alleys All alleys shall be maintained by the abutting property owner.

For 1 ½ miles, due to the increase in homelessness and encampment outside the quarter mile radius of the overnight shelter, the city is placing a burden on the residential and business neighbors within that area with the city requirement for the property owners to maintain the alley. As stated previously the city should not place that burden, including that of alleys, city parks with needles, trash, and feces on the surrounding neighborhoods, and as part of conditions for the Conditional Use Permit, the city should provide daily cleanup of the alleys and parks within 1 ½ miles rather than ¼ miles, rather than shifting this burden on residences and businesses. If this increase in activity is not clearly apparent, visits to parks and areas surrounding service providers such as the tiny home village clearly demonstrate these outcomes.

These are the specific referenced code sections cited above.

Based upon the following codes requirements that city ordinances regulating “other nuisance conditions” in 14-16-4-3(A)(2) and activities in any zone district... that would create adverse impacts... on neighboring properties.

14-16-4-3(A)(2) All uses shall comply with City ordinances regulating noise, odors, vibration, glare, heat, and other nuisance conditions affecting other properties, as well as the requirements of Section 14-16-5-13 (Operation and Maintenance) unless specifically exempted from one or more of those requirements.

14-16-5-13(A) OPERATING STANDARDS

All structures, uses, and activities in any zone district shall be used or occupied to avoid creating any dangerous, injurious, noxious, or otherwise objectionable condition that would create adverse impacts on the residents, employees, or visitors on the property itself or on neighboring properties. Uses and activities that operate in violation of applicable State or federal statutes or this IDO are

violations of this Section 14-16-5-13 and shall be subject to the penalties of Section

14-16-6-9 (Violations, Enforcement, and Penalties). Property owner responsibilities under this Section include, but are not limited to, compliance with the following standards.

14-16-5-13(B) MAINTENANCE STANDARDS

All property, buildings, and structures shall be maintained in a clean and safe condition and shall not create any public or private nuisance. When the standards and procedures of this IDO or the conditions attached to any permit, approval, or Variance require that any building or site feature be constructed or installed, the property owner is responsible for maintaining those buildings or site features in good repair as approved and for replacing required site features if they are damaged or destroyed or, in the case of living materials, if they become diseased or die after installation. Property owner obligations include, but are not limited to, the following.

5-13(B)(1) Alleys

All alleys shall be maintained by the abutting property owner.

RESPONSE: Parks that experience significant homelessness and surrounding neighborhoods have challenges of increased incidences of syringes, feces, and trash. As there are adjoining residential neighborhoods, with numerous parks within one mile of this facility, some of which have experienced problems with unhoused presence with needles, feces, and trash, this facility, with persons using the facility in a city council district that has had over 50 percent of the providers of services to people experiencing homelessness, prior to opening the overnight shelter facility at Gibson, should clearly be expected to dramatically increase these severe impacts on the surrounding neighborhoods and create a very potentially dangerous environment for the neighboring community and for the unhoused who will be utilizing these surrounding amenities.

As there are many alleys in the surrounding neighborhoods, we would like a condition of a conditional use permit to include daily cleanup by the city of parks, sidewalks, and alleys of needles, feces, weapons, and trash. If this is not done this would place significant adverse impacts on the residences whose properties abut these alleys, or are near these parks, and sidewalks.

If this increase in activity is not clearly apparent, visits to parks and areas surrounding service providers such as the tiny home village clearly demonstrate these outcomes.

For 1 ½ miles, due to the increase in unhoused and encampment outside the ¼ mile radius of the overnight shelter, the City is placing a burden on the residential and business neighbors within that area of the City requirement for the property owners to maintain the alley. As stated previously the City should not place that burden, including that of city parks with needles, trash, and feces on the surrounding neighborhoods. As part of conditions for the Conditional Use Permit, the City should be required to provide daily cleanup of the alleys and parks within 1.5 miles rather than a quarter mile.

End of Testimony

CONCLUSION

We appeal the Zoning Hearing Decision based upon the evidence presented in Finding No. 19

1. This testimony identifies the requirements in other sections of the IDO that need to be followed to counteract any private and public nuisance as indicated in 14-16-5-13(B). Though a 1.5 mile zone is clearly stated as part of the IDO testimony, the Zoning Hearing Decision ignored addressing and inclusion of 1.5 miles.
2. The evidence demonstrates, in the areas surrounding parks and locations of people experiencing homelessness, the City has been incapable of cleaning, policing, and making safe, areas with significant number of people experiencing homelessness at and around these locations including pickup and drop-off locations.
3. As demonstrated at the jail, where Albuquerque is legally responsible for safely housing persons, the City is unable to provide adequate behavioral and medical care. It is therefore doubtful that the city will be able to mitigate significant adverse impact by instituting measures to protect neighbors for 1.5 miles without providing adequate behavioral healthcare services. It is likely doubtful that the City can perform, trash removal and monitoring these surrounding areas without dedicated personnel, including the municipal waste division, the public police and safety departments.
4. Even with financial resources available , as occurred last year, the city had to return \$700,000 to the Federal Government, that had been available to provide housing vouchers due to not performing required tasks. 50 families were not provided with the means to obtain housing due to this action. Without a well-developed plan, the city demonstrated their inability to complete critical housing tasks for the unhoused. Mandated Conditions for the Conditional Use Permit are required to try to prevent failure to provide of services and resources, including permanent housing, to the unhoused.
5. District 6, contains 51 percent of providers of services to the people experiencing homelessness. and is already overburdened. As demonstrated by the City's past use of 3 parks in District 6, two adjacent to schools where shelter pickup locations were, District 6 is the only district that had 3 out of 4 parks in the city with pickup locations. Due to the city's frequent burden on District 6, we requested that included prevention of transportation pickups and drop-offs from occurring at Parks, schools, and daycare within 1.5 miles. This was ignored in the Zoning Hearing Decision.

There was substantial evidence that a 1.5 mile zone is needed in order to avoid significant adverse impacts. The ZHE's exclusion of the needs for daily cleanup for 1.5 miles of parks,

alleys and streets surrounding the overnight shelter for policing, waste pickup and cleaning is erroneous.

Use-specific Standards applicable to the use in Section 14-16-4-3; the DPM; other adopted City regulations were not followed and compliance with IDO Section 14-16-6-6(A)(3)(b) was not met.

This demonstrates that Per IDO section 6-4(V)(4)(c) The decision-making body erred in applying the requirements of this IDO (or a plan, policy, or regulation referenced in the review and decision-making criteria for the type of decision being appealed).

For this reason, we appeal this Conditional Use Permit and request that the Conditional Use Application for Permit be rejected.

END OF APPEAL RESPONSE NO. 19 & 20

FINDING #21

The Zoning Hearing Examiner's Findings Nos. 21 and 22 are not supported by substantial evidence and ignore evidence in the record that the Gateway Center is not consistent with the Integrated Development Ordinance (IDO).

The Zoning Hearing Examiner's Decision is as follows:

21. Regarding the requirement under IDO Section 14-16-6-6(A)(3)(c) that the requested conditional use "*will not create significant adverse impacts on adjacent properties, the surrounding neighborhood, or the larger community*":

a. Applicant and supporters of the Application submitted, among other things, the following:

i. By providing secure shelter and services for individuals living in vulnerable situations, the Gateway Center will positively impact the adjacent properties, surrounding neighborhoods, and the larger community that are currently dealing with the unhoused population.

ii. Applicant has worked diligently on and adopted a final Operations Plan for the Gateway Center, which was attached in draft form to the Application and was posted on the City's website (www.cabq.gov/gateway) as of 7/3/2021. Because the Operations Plan before the ZHE at the September 21, 2021 ZHE hearing was still only in draft form, the ZHE continued the hearing on the Application from the September 21, 2021 ZHE hearing to be heard at the October 19, 2021 ZHE hearing. Prior to the October 19, 2021 ZHE hearing, Applicant finalized and adopted the Operations Plan and timely submitted it into the ZHE record on the Application, where it has been available for public inspection. The final Operations Plan addresses many community concerns, including impacts on adjacent properties, surrounding neighborhoods, and the larger community, and contains provisions concerning, among other things:

1. Transportation -A shuttle system will be in place to transport referred guests for intake and assessment as well as transport guests to their exit destination, with pick-up and drop-off points at the Gateway Center.

PHNA had requested the following Conditions for Conditional Use to mitigate significant adverse impact:

1. A detailed Operational Plan and budget for a comprehensive 24/7 transportation service system to/from Gateway has not been well developed. (Appendix C,D,E). The City has yet to develop a plan for a fully operational 24-hour transportation system to transport people to/ from services to where they seek shelter. There was talk earlier about transporting persons with pets and with carts, and then it changed to utilizing the city bus system which does not appear to have the capability to transport people. This will ensure both the unhoused and the surrounding neighborhoods do not experience significant adverse impact due to incomplete services being provided the City have a fully developed

transportation plan of service in place and implemented This request to mitigate significant adverse impact, as requested in the Sept 14, PHNA submittal, did not occur as written evidence.

2. Prior to opening Gateway to ensure both the unhoused and the surrounding neighborhoods do not experience significant adverse impact due to incomplete services being provided. The city could have taken the opportunity to demonstrate, contrary to past actions, that they can mitigate significant adverse impact by waiting to incorporate the UNM study, which was planned to allow successful operation of the overnight shelter. The city has demonstrated by not waiting to incorporate this in their planning, they have disregarded the surrounding neighborhoods.
3. Though the city has had the opportunity, the city has not demonstrated that they are able to develop comprehensive transportation for the unhoused. In the last year they provided transportation to the existing Westside Emergency Shelter with 5 out of the 8 pickup locations in District 6, with 2 located at parks located adjacent to middle schools, and locating one at a young children's park. These 5 sites were located in across the street from the greatest low income percentile (95-100%) in Albuquerque, in a district that, excluding commercial and industrial zones, has the largest area of greatest low income percentile in Albuquerque. .
4. All schools and public parks should be excluded as pickup and drop-off locations for the City shelters, as demonstrated by the problems occurring at Wilson Park and Phil Chacon Park which coincided with their being pickup locations for the Westside emergency shelter.
5. Though the city began discussing a transportation system of shuttles, they have changed to projecting the use of a combination of shuttle and city busses, with the addition to more frequent time schedule
6. A Transportation plan, taking into account the UNM study, and the needs of the community, including frequent transportation off site including to locations outside District
7. Adequate and reasonably scheduled Transportation be equipped to accommodate persons with carts and pets to give greater mobility to other parts of the city. If this is not city busses, a plan needs to be provided to provide reasonable services.
8. As the city, with no more than 8 shuttle pickup stops going to the Westside Emergency Shelter, had great concern regarding the cost of transportation of over 1 million dollars, there needs to be a plan in place that operates in conjunction with the opening of the overnight shelter, for those who need to go to other shelters, work, medical and behavioral health services, job services, education resources, or to the Westside Emergency Shelter, if needed. As the city has said that they will develop a comprehensive transportation plan, how they will do that while they currently have a severe shortage of drivers of Albuquerque's public transportation system.

Because the city has demonstrated they were not capable of performing these actions, we requested that the Conditional Use Permit be issued with conditions with stops excluded from parks and schools.

As the city has not indicated any attempts to mitigate significant adverse impacts described. Without a developed plan to ensure successful operations, there is not commitment to providing their everchanging preliminary plans.

As virtually none of these concerns have been addressed, even with a murder at Phil Chacon Park recently, the ZHE approval This demonstrates that Per IDO section 6-4(V)(4)(c) The decision-making body or the prior appeal body erred in applying the requirements of this IDO (or a plan, policy, or regulation referenced in the review and decision-making criteria for the type of decision being appealed).

For this reason, we request that the conditional use permit be denied.

2. Secure entrance - The Gateway Center will have a secured entrance that is staffed 24 hours a day, 7 days a week, to ensure only enrolled guests, staff, and volunteers enter the facility.

3. Physical design - The Gateway Center will utilize Trauma-informed Design and Crime Prevention through Environmental Design (CPTED) design principles. The City's intent is to upgrade all building-mounted lighting and parking lot lighting prior to opening the Gateway Center. Appropriate fencing, landscaping, and other design features will be incorporated to ensure curb appeal and low visual impact.

4. Security - Onsite professional security is currently provided at the Gibson Health Hub and will continue to be once the Gateway Center is open.

1. Area Command Comparison Crime Stats, 2020:

Demonstrates that for most crime activities, the southeast area, out of 6 areas of town, has the highest crime rates in the city. By not taking that into account in the zoning hearing decision, which includes the conditional conditions that include additional services, not redistributed services, as a part of the conditional use, this area of significantly higher crime that other parts of the city, will suffer significant adverse impact without the proper mitigation that has not been included in this proposal. See **EXHIBIT Q- 9/21 CRIME DATA SUBMITTAL**

5. Weapons - Weapons will not be allowed at the Gateway Center.

6. Entry and Exit - A team of intake officers and front desk staff will be stationed at the entrance, with only enrolled shelter guests, staff, program staff and volunteers, and registered partner agency staff and volunteers allowed to enter the facility.

7. Shelter capacity - If the Gateway Center reaches capacity, single adults seeking shelter will be referred to the Westside Emergency Housing Center or other appropriate shelter options. Transportation will be provided, if needed. Emergency overflow for families will be established in the community or through the use of motel vouchers.

See FINDING 21, #1, Transportation for Transportation comments.

1. Bed Capacity

- a. The capacity that the City is proposing is inconsistent with the accommodation of the neighborhood until the city demonstrates that they will provide the facility and neighborhood services we have requested.
- b. Additionally, with the approval of this Conditional Use Permit, without any cap, the city is able to increase the capacity at any time. Though they have indicated maximum capacities and that they will ramp up as they begin operations and they have an operational plan, at any time in the future they can modify it to an unlimited capacity, especially if and when they close the Westside Emergency Shelter which housed up to 450 people or even 1000 more.
- c. The city is proposing 100 persons minimum every 90 days plus 25 families, 4 persons each assumed= 200 and additionally 50 people experiencing homelessness respite for a stated maximum of 30 days. Every 90 days 150 persons shall be provided respite services making a minimum total of 350 every 90 days to whom services need to be provided for overnight residents of the entire facility, which is above the original capacity that was proposed and was reduced due to vast community opposition.
- d. To help mitigate adverse impacts in an area already struggling with an overwhelming amount of existing homeless services, we propose an initial bed capacity limit at Gateway of 90 beds – providing for up to 15 families and 30 individuals. This bed capacity limit would be in place for Phase 1 of the City’s opening of Gateway. Family & Community Services personnel have intended they would like to “start small” and phase in the numbers of people served.
- e. We proposed that after 2 years, when the City has proven they can effectively serve our unhoused population at Gateway and prevent adverse impacts to the surrounding communities, they may submit an application to increase their bed capacity numbers. We believed this is the best approach to ensure success and had asked for the inclusion of this bed capacity limit as part of their Conditional Use Permit approval.
- f. Bed Capacity is related to housing. The city has stated they will be placing most people in permanent housing. That is part of the 90 day program that they are anticipating most people to use. These persons will be competing with the 150 respite persons every 3 months, for the same housing units. There is already a shortage, and existing case managers have difficulty placing clients. By sheltering these people at the Gateway without availability for permanent

housing, a situation is being created where people will be forced on the street every 90 days due to extremely large caseload, thereby creating more unhoused living within District 6, opposite of the intent.

- g. We requested the applicant to provide supporting evidence on how a shelter with mixed demographics and an excess of 100 residents better serves the unhoused population than a system of small shelters serving specific demographics, accompanied by an explanation of why existing resources are not already being utilized.
- h. Given the size of the overnight shelter the City intends to have at Gateway **(Appendix O)**, we would like to request the applicant provide real data on the implications to the surrounding neighborhoods of an overnight shelter exceeding 100 residents.
- i. We request the applicant provide supporting evidence on how they will be able to serve an excess of 100 residents given the shortage of Behavioral Health Providers in our state **(Appendices I, P)**.
- j. We request the applicant provide a strategic plan on transitioning residents of the shelter into housing with the limited availability of housing options in our city.

As the Zoning Hearing Decision not only ignored Appellants' valid concern, it provided an opportunity for an unlimited overnight bed capacity. This creates a significant adverse impact on the neighborhoods. The ZHE's demonstrates that Per Section 6-4(V)(4)(a) The decision-making body or the prior appeal body acted fraudulently, arbitrarily, or capriciously and we appeal the approval of this Conditional Use Permit and request that it be denied.

See FINDING 21, #1, Transportation for Transportation comments.

8. Critical Incident Response - Procedures addressing threats and assaults to clients and staff will be established. Guests that threaten or assault another client or staff will be exited from the Gateway Center and will receive transportation to their exit destination. In addition, de-escalation procedures will be established, with staff receiving training in conflict resolution and de-escalation techniques. The procedures will address the appropriate use of the Albuquerque Police Department resources to resolve safety issues at the Gateway Center.

9. Trash removal - The Solid Waste Department will clean and remove trash on a daily basis from surrounding areas, including sidewalks, bus stops, store fronts, and area parks.

SEE COMBINED RESPONSE TO FINDING #11 FOR APPLICABLE RESPONSE

11. Encampments - Encampments are expressly prohibited on the Gibson Health Hub property. The Family and Community Services public outreach team will monitor a 1/4-mile radius for encampments on public and private property. The public outreach team will refer encampments on private property to the City's Code Enforcement Division and a notice for encampments on public property will be posted by the public outreach team on the same day the encampment is observed.

The PHNA submittal of September 14, 2021, Appendix T explained that the number of parks, schools and childcare centers and preschool within 1.5 miles from the Gateway is 27 to 30, with at least 16 such facilities within one mile. The City's use of a distance of a quarter mile to assess adverse impacts is not reasonable. In an area of many parks and schools, some of which are adjacent to each other, monitoring and clearing encampments is necessary. This is especially important as people can legally stay at parks all day, one of the many benefits of our great city, but some of those will create unsafe environments, similar to Wilson Park, and need to be cleaned daily and monitored for encampments daily.

For the October 21 hearing, PHNA testimony, No. 5, explained clearly that quarter mile encampments less than 1.5 miles would be convenient to the Gateway. Many of them will be on their way to Central, (with many parks and alleys along the route), a heavily travelled route. If the quarter mile is the patrolled and monitored and, not providing a 1.5 mile safety zone and monitoring only quarter mile, will definitely create a significant adverse impact.

Additionally, as described in Finding No. 5, IDO 14-16-4-3(A)(2) nuisance conditions affecting other properties, **14-16-5-13(A) OPERATING STANDARDS**, 14-16-6-9 (Violations, Enforcement, and Penalties) Property owner responsibilities under this Section., and **14-16-5-13(B) MAINTENANCE STANDARDS** shall not create any public or private nuisance., and **5-13(B)(1) Alleys, responsibilities of the owner adjacent to alleys.** By requiring the owners to clean feces, trash and syringes, not only are you placing an undue burden on the property owners, you are placing them in a potential life threatening situation both to their health and to their safety in confronting perpetrators. This is an extreme hazardous condition that the IDO discusses and therefore places an extreme adverse impact on the neighborhoods.

For these reasons, This demonstrates that Per IDO section 6-4(V)(4)(c) The decision-making body or the prior appeal body erred in applying the requirements of this IDO .

12. Good Neighbor Agreement - The City intends to enter into a Good Neighbor Agreement with the Elder Homestead, Parkland Hills, Siesta Hills, South San Pedro, and Trumbull neighborhood associations. The following will be established through the Good Neighbor Agreement:

a. A phone number where residents can report any issues related to the Gateway Center.

SEE RESPONSE TO FINDING #9, #10, and #11 FOR APPLICABLE RESPONSE

b. A community dispute resolution process.

13. A Neighborhood Advisory Committee. The Agreement will set the membership of the Committee, which will include neighborhood representatives, City representatives from the organization(s) operating the Gateway Center, and current or former guests of the Gateway Center. The Committee will meet at least quarterly and will issue an annual survey to community members. The Committee will review and update as needed the Good Neighbor Agreement annually. The Neighborhood Advisory Committee will review baseline data and information over time to provide feedback on high impact strategies to keep community, staff, and clients safe.

b. Opponents of the Application submitted, among other things, the following:

- i. The Good neighbor Agreement has not been finalized and signed, and the community has no guaranties as to what the final version, if any, will contain.
- ii. Articles have shown that crime increases in the area of overnight shelters (however, the research cited was not done on permanent shelters).

SEE PHNA SEPT 14 SUBMITTAL, APPENDIX S FOR GOOD NEIGHBORHOOD ASSOCIATION PROPOSAL INCLUDING THIS ADVISORY COMMITTEE.

Though this is indicated, without a requirement for this as a condition requirement as part of the conditional use permit, there is not required commitment. The city has said that they are preparing the agreement and then will present it to the neighborhood associations for review. To be an acceptable good neighbor agreement, it must be collaborated on by both the City and the affected neighborhood associations. This includes working with neighborhood associations, not just preparing and handing it to them. This does not constitute advancing towards a Good Neighborhood Agreement which is required for a conditional use permits or certificate of occupancy to be issued.

See FINDINGS 9, 10, 11 for additional response

ADDITIONAL INFORMATION FOR FINDING NO. 21

Additional information regarding the requirement under IDO Section 14-16-6-6(A)(3)(c) that the requested conditional use “*will not create significant adverse impacts on adjacent properties, the surrounding neighborhood, or the larger community*”:

1. UNM Study

The importance of the UNM study, which is mentioned under other findings, is critical to understanding problems created in Developing the overnight shelter without waiting for this to be completed. There is even a disagreement in the Family and Community Services Staff as to the purpose of this study, as demonstrated by the testimony of Lisa Huval from FCS, though the Ms. Reeves from UNM did a presentation on the study at the June 1, HSS meeting with this info included in PHNA Sept 14 ZHE submittal.

Her testimony at the Conditional Use hearing on the purpose of the UNM study conflicted with discussions and presentation at various meetings. Ms. Huval's response to the Zoning Hearing Examiners question regarding the importance of the UNM study, if the purpose was related to the Gateway or if it was more general. Ms. Huval responded that it was general.

EXHIBIT Y- HSS JUNE 1 MEETING

Based upon the June 1st presentation by Ms. Reeves, this appears to be incorrect. It has been brought up at meetings with neighborhoods the importance of this study, being conducted by UNM.

1. The city has reached this point without the UNM Study which **was to inform and guide FCS in employing best practices to serve the homeless, and to mitigate adverse impacts to surrounding neighborhoods and** was part of the original plan to mitigate significant adverse impact for the neighborhoods surrounding the Gateway overnight shelter. This was presented during the following meeting:
the Homeless Services System committee meeting on June 1, 2021 in which Janet Page Reeves from UNM discussed this study and presented the following attached slides: **EXHIBIT Y- HSS JUNE 1 MEETING**
2. The attached document titled "HRT_Scope with Timeline 6-1-21" is the slide presentation shared by Janet Page Reeves, and clearly states that the purpose of this study is to:
 - a. navigate concerns and opportunities related to the construction of the Gateway Center shelter in addition to inform future research directions**Evaluate impacts and benefits: People served, neighborhoods, community.**
See EXHIBIT W- 10/19 PHNA UNM STUDY PURPOSE (HRT Scope with Timeline 6-1-21)

This meeting of record identifies Ms. Huval's error when Mr. Lucero asked if the UNM study was looking generally at emergency shelters or is it specifically to the subject matter of today's hearing, Ms. Huval stated that it was "LOOKING GENERALLY AT EMERGENCY SHELTERS." We request the applicant provide a strategic plan on transitioning residents of the shelter into permanent housing.

The Gateway operations plan is submitted without any input from the study that UNM is performing, whose stated purpose presented at the June 1 Homeless Services System meeting by Ms. Reeves, who is performing the study, was to be used for included the following:

navigate concerns and opportunities related to the construction of the Gateway Center shelter in addition to inform future research directions and **Evaluate impacts and benefits: People served, neighborhoods, community.**

Due to the lack of good faith and the lack of beginning negotiations with the city as required by R-21-141, This demonstrates that Per section 6-4(V)(4)(a) The decision-making body or the prior appeal body acted arbitrarily, or capriciously by not enforcing this city council resolution and Per IDO section 6-4(V)(4)(b) The decision being appealed is not supported by substantial evidence.

We oppose the Zoning Hearing Examiner's decision in that it did not follow the Integrated Development Ordinance (IDO).

The Zoning Hearing Examiner's Decision is as follows:

26. Regarding the requirement under IDO Section 14-16-6-6(A)(3)(e) that “*on a project site with existing uses, [the requested conditional use] will not increase non-residential activity within 300 feet in any direction of a lot in any Residential zone district between the hours of 10:00 P.M. and 6:00 A.M.*”:

a. Applicant and supporters of the Application submitted, among other things, the following:

i. The overnight shelter use at the Gibson Health Hub will not increase non-residential activity within 300 feet of a residential zone district between the hours of 10:00 P.M. and 6:00 A.M. The overnight shelter use will be a relatively small portion of the Gibson Health Hub premise. The initial phase of the Gateway Shelter is anticipated to limit intakes to between 8:00 A.M. to 8:00 P.M. for most community partner referrals, but intakes will be conducted at all hours for referrals from hospitals, first responders, and law enforcement. The intake activity will be more than 500 feet from the R-ML zoned property to the east and buffered by a large parking lot. The closest apartment building within the R-ML site is setback approximately 67 feet east of its shared property line with the Gibson Health Hub. These existing physical conditions and separation between uses, and operating procedures will ensure the adjacent residential use will not be impacted by the overnight shelter use at the Gibson Health Hub facility.

b. Opponents of the Application submitted, among other things, the following:

i. The proposed overnight shelter will operate 24 hours a day.

27. On balance, the ZHE finds that Applicant has provided a sound justification showing compliance with IDO Section 14-16-6-6(A)(3)(e) based on substantial evidence.

APPELLANT RESPONSE TO FINDINGS No. 26 AND 27

1. There are apartments zoned, residential zone R-ML, along the east edge of the proposed conditional use site.

a. In the written submittal referenced at the Zoning Hearing on September 21, 2021, The applicant response is as follows:

“Applicant Response: The overnight shelter use at the Gibson Health Hub will not increase non-residential activity within 300 feet of a residential zone district between the hours of 10:00 P.M. and 6:00 A.M. The overnight shelter use will be a relatively small portion of the Gibson Health Hub premise. The initial phase of the Gateway Shelter is anticipated to limit intakes to between 8:00 A.M. to 8:00 P.M. for most community

partner referrals, but intakes will be conducted at all hours for referrals from hospitals, first responders, and law enforcement. The intake activity will be more than 500 feet from the R-ML zoned property to the east and buffered by a large parking lot. The closest apartment building within the R-ML site is setback approximately 67 feet east of its shared property line with the Gibson Health Hub. These existing physical conditions and separation between uses, and operating procedures will ensure the adjacent residential use will not be impacted by the overnight shelter use at the Gibson Health Hub facility.”

- b. During the Zoning hearing, Ms. Fishman referred to this submittal and said the following: Our understanding was the criteria was not increased non-residential activity within 300 feet of a residential zone between p.m. and 6 am. And again, our well, I wasn't able to explain those but normally the intakes will occur from 8 am to 8 am for most community partner referrals, but will be conducted in all hours for referrals from hospitals, first responders, and law enforcement, however, intakes will occur more than 500' from the “Aramale” property to the east and will be buffered by the large parking field.
 - c. This would imply that the location and the functions related to the overnight shelter can never change as to the location. The conditional zoning use is related to the property and not the specific entrance to be used. The property with the apartments is abutting the project site and therefore is less than 300 feet from the conditional zoning site.
 - d. If Ms. Fishman is proposing that the locations of the intake shall not be moved any further east than is proposed, and the parking east of that shall not be used for the overnight shelter functions, and that shall be part of the conditional use, then as this has not been clarified, the examination of this requirement has not been satisfactorily undertaken. Without this proposal of conditions to the conditional use to the site, the applicant has not demonstrated that “On a project site with existing uses, it will not increase nonresidential activity within 300 feet in any direction of a lot in any Residential zone district between the hours of 10:00 P.M. and 6:00 A.M.”
 - e. As the applicant has stated, “The initial phase of the Gateway Shelter is anticipated to limit intakes to between 8:00 A.M. to 8:00 P.M.” That would satisfy the IDO, but as this is stated as only the initial phase, we request that the locations of the entrance and parking as stated in item c. above be included in the conditions of conditional use.
2. This demonstrates that Per IDO section 6-4(V)(4)(c) The decision-making body or the prior appeal body erred in applying the requirements of this IDO (or a plan, policy, or regulation referenced in the review and decision-making criteria for the type of decision being appealed) so therefore we request that the Conditional Use Permit be denied/revoked.

END OF APPELLANT RESPONSE FOR NO. 26 AND 27

SUMMATION ON APPEAL REQUEST

Based upon the documentation, we have demonstrated that the ZHE Conditional Use determination was in error and we request that you overturn that decision.



CITY OF ALBUQUERQUE
OFFICE OF ADMINISTRATIVE HEARINGS
ZONING HEARING EXAMINER
NOTIFICATION OF DECISION
AMENDED

City of Albuquerque Family and Community Services (Agent, Consensus Planning) requests a conditional use to allow an overnight shelter for Lot A1A1A/Lovelace Hospital, Lovelace Hospital, located at 5400 Gibson BLVD SE, zoned MX-H [Section 14-16-4-2]

Special Exception No:..... **VA-2021-00316**
Project No: **Project#2021-005834**
Hearing Date: 10-19-21
Closing of Public Record: 10-19-21
Date of Decision: 11-03-21

On the 19th day of October, 2021, Consensus Planning, agent for property owner, City of Albuquerque Family and Community Services (“Applicant”) appeared before the Zoning Hearing Examiner (“ZHE”) requesting a conditional use to allow an overnight shelter (“Application”) upon the real property located at 5400 Gibson BLVD SE (“Subject Property”). Below are the ZHE’s finding of fact and decision:

FINDINGS:

1. Applicant is requesting a conditional use to allow an overnight shelter.
2. The City of Albuquerque City of Albuquerque Integrated Development Ordinance (“IDO”), Section 14-16-7-1 defines an overnight shelter as “*A facility that provides sleeping accommodations for 6 or more persons for a period of less than 24 hours with no charge or a charge substantially less than market value; it may provide meals and social services. Any such facility open to clients between 10:00 P.M. and 7:00 A.M. is considered an overnight shelter.*”
3. The Subject Property is zoned MX-H, the purpose of which under the IDO is to “*provide for large-scale destination retail and high-intensity commercial, residential, light industrial, and institutional uses, as well as high-density residential uses, particularly along Transit Corridors and in Urban Centers. The MX-H zone district is intended to allow higher-density infill development in appropriate locations.*”
4. Table 4-2-1 of the IDO states that an overnight shelter in the MX-H zone requires a conditional use approval.
5. IDO Section 14-16-6-6(A)(3) (Review and Decision Criteria– Conditional Use) reads: “*An application for a Conditional Use Approval shall be approved if it meets all of the following criteria:*
 - (a) *It is consistent with the ABC Comp. Plan, as amended;*
 - (b) *It complies with all applicable provisions of this IDO, including but not limited to any Use-specific Standards applicable to the use in Section 14-16-4-3; the DPM; other adopted City regulations; and any conditions specifically applied to development of the property in a prior permit or approval affecting the property, or there is a condition of approval that any Variances or Waivers needed to*

comply with any of these provisions must be approved or the Conditional Use Approval will be invalidated pursuant to Subsection (2)(c)2 above.

- (c) *It will not create significant adverse impacts on adjacent properties, the surrounding neighborhood, or the larger community.*
 - (d) *It will not create material adverse impacts on other land in the surrounding area through increases in traffic congestion, parking congestion, noise, or vibration without sufficient mitigation or civic or environmental benefits that outweigh the expected impacts.*
 - (e) *On a project site with existing uses, it will not increase non-residential activity within 300 feet in any direction of a lot in any Residential zone district between the hours of 10:00 P.M. and 6:00 A.M.*
 - (f) *It will not negatively impact pedestrian or transit connectivity without appropriate mitigation.*
6. The applicant bears the burden of providing a sound justification for the requested decision, based on substantial evidence, pursuant to IDO Section 14-16-6-4(E)(3).
 7. The applicant bears the burden of showing compliance with required standards through analysis, illustrations, or other exhibits as necessary, pursuant to IDO Section 14-16-6-4(E)(4).
 8. Applicant timely submitted a written authorization for Agent to act on Applicant's behalf.
 9. Applicant's community outreach regarding the proposed Gateway Center dates back to 2018, and that outreach utilized community input sessions, online surveys, focus groups with people experiencing homelessness, and neighborhood community meetings.
 10. On March 15, 2021, the Albuquerque City Council approved Resolution R-21-141, which required two community input sessions within 45 days and advancement towards a Good Neighbor Agreement by the City with area residents and businesses to be in place for so long as the Gateway Center operates at the Gibson Health Hub site. The City held the two community input meetings on June 10 and June 12, 2021. The first meeting was held online and the second was held at the Gibson Health Hub Educational Building. Input from the meetings is posted on the City website at www.cabq.gov/gateway.
 11. Applicant provided evidence that all property owners and neighborhood associations entitled to notice were notified of the Application. Although a neighboring business owner complained that he did not receive notice, his business was not listed on the list of properties located within the required notice perimeter pursuant to the IDO, and it appears from evidence in the record, including without limitation the perimeter buffer map for the Subject Property, that the complainant's business is located outside the required notice perimeter. Further, the complainant clearly had notice, given that he submitted written evidence before the ZHE hearing and oral testimony at the ZHE hearing. Based on evidence in the record, Application provided the required timely notice to all property owners whose properties are within the required notice perimeter. Opponents submitted a petition signed by business owners who complained of inadequate notice. Nevertheless, based on evidence of mailings, emails, publication, and sign porting, the ZHE finds that the notice given by Applicant was compliant with the requirements of the IDO.
 12. Applicant timely mailed neighborhood meeting requests on June 4, 2021.
 13. On June 22, 2021, the City Land Use Facilitation Program conducted a facilitated pre-application meeting with community members, online via Zoom, to which were invited representatives of the affected neighborhood associations and the community at large.

According to the facilitated meeting report dated June 24, 2021, approximately 98 people registered for the meeting and as many as 80 participated in the meeting at the highest participation.

14. Applicant attended a pre-application meeting with City staff on June 29, 2021.
15. Regarding the requirement under IDO Section 14-16-6-6(A)(3)(a) that the requested conditional use be “*consistent with the ABC Comp. Plan, as amended*”:
 - a. Applicant and supporters of the Application submitted, among other things, the following:
 - i. Goal 6.2 Multi-Modal System: Encourage walking, biking, and transit, especially at peak-hour commuting times, to enhance access and mobility for people of all ages and abilities. Applicant Response: The proposed Gateway Center overnight shelter at the Gibson Health Hub furthers Goal 6.2 Multi-Modal System by placing it in an area with excellent multi-modal access, including transit services, major street network, and pedestrian and bicycle access and connections. The subject property is along Gibson Boulevard, an Urban Principal Arterial, and designated as a Commuter Corridor by the Comprehensive Plan. It is within the designated San Mateo Boulevard Major Transit Corridor area and a 1/2-mile west of the Louisiana Boulevard Major Transit Corridor area.
 - ii. Goal 9.4 Homelessness: Make homelessness rare, short-term, and non-recurring. Applicant Response: The Gateway Center overnight shelter will further Goal 9.4 Homelessness by being a critical component of the City's comprehensive approach to making homelessness rare, short-term, and non-recurring. The City estimates that there are at least 1,525 people in shelters or on the streets in Albuquerque each night, and at least 5,000 households experienced homelessness in 2020. The Gateway Center will address chronic homelessness in Albuquerque by providing safe, dignified emergency shelter within a central, developed area of Albuquerque. In addition, clients will receive wraparound services that help them exit the overnight shelter into stable, permanent housing and other community resources.
 - iii. POLICY 9.4.1: Best Practices: Implement an appropriate and effective model to address chronic homelessness. Applicant Response: The Gateway Center overnight shelter furthers Policy 9.4.1 Best Practices by providing emergency shelter for those experiencing homelessness and work with them to transition into permanent housing. The proposed Gateway Center overnight shelter will function as a "gateway" to end chronic homelessness through the use of three models to effectively transition unhoused community members into housing
 - iv. POLICY 9.4.2 Services: Provide expanded options for shelters and services for people experiencing temporary homelessness. Applicant Response: The proposed Gateway Center overnight shelter will further Policy 9.4.2 Services by expanding options for temporary shelter and services for the City's unhoused populations. Although there are many service providers in Albuquerque that serve the unhoused populations, the City does not currently have a centralized 24/7 center that can connect

unhoused individuals to the support organizations they need, often creating a "gap" in services. By building strong partnerships with existing providers, the City's proposed Gateway Center can serve as a centralized center, allowing for a more efficient connection to essential services and reducing the potential gap in services.

- v. POLICY 9.4.3 Equitable Distribution: Support a network of service points that are easily accessible by residents and workers, geographically distributed throughout the City and County, and proximate to transit. Applicant Response: Locating the proposed Gateway Center overnight shelter at the Gibson Health Hub furthers Policy 9.4.3 Equitable Distribution as reflected in comments from the individuals experiencing homelessness focus groups. The Gateway Center location is accessible to trusted nearby service providers in the International District and is located within the San Mateo Major Transit Corridor area. The proposed Gateway Center is the City's first step towards a dispersed shelter model that will add more shelters and supportive services in other locations within Albuquerque.
- vi. Goal 9.5 Vulnerable Populations: Expand capacity to provide quality housing and services to vulnerable populations. Applicant Response: The proposed Gateway Center will expand the City's capacity to provide services and access to quality housing to vulnerable populations, thereby furthering Goal 9.5 Vulnerable Populations.
- vii. POLICY 9.5.1 Quality Housing: Ensure well maintained, safe transitional and permanent housing for the lowest income households that are most at risk of homelessness. Applicant Response: The proposed Gateway Center furthers Policy 9.5.1 Quality Housing by providing the first step to permanent housing for the most vulnerable in our community. The Time-Limited Model ensures that clients of the overnight shelter have secured permanent housing before they leave the shelter. Low-income clients will have Wraparound services, including case management and assistance securing financial support for housing expenses. The goal of the Gateway Center is to reduce the risk of homelessness by ensuring clients have the support to maintain stable, permanent housing.
- viii. POLICY 9.5.2 Transitional Services: Encourage on-site transitional services with culturally competent service delivery that respects the dignity of individuals and families and fosters self-determination and self-sufficiency, including job training, financial education, and behavioral health assistance. Applicant Response: The services provided at the Gateway Center will support Policy 9.5.2 Transitional Services by providing Wraparound services for individuals and families. The individual leads the team-based, collaborative Wraparound approach to case management. The program is flexible, comprehensive, and can involve a number of organizations. The City will partner with existing community organizations and service providers specializing in delivering culturally competent services that will respect the individual and prepare individualized transition plans.

- b. Opponents of the Application submitted, among other things, the following:
- i. Under “A Vision for Albuquerque & Bernalillo County” page 3-3 “As the county and city grow in population over the next 20 years, neighborhoods will be safer and easier places to walk through and between. The positive characteristics that contribute to their unique identities will be protected and enhanced.” “The City and the County commit to analyzing the health of our communities and the geographic distribution of our public investments and assets. Where gaps are identified, governments will collaborate with communities, nonprofits, public agencies, and private enterprises to address them.” Opponent Response: This request does not help the positive characteristics of the neighborhood as it adds a further potential crime element to the area, (in an area with the highest overall crime in the City) increases the likelihood of encampments along Gibson Blvd, and fails to create a distribution of investments, and assets for the homeless throughout the City.
 - ii. Guiding Principles found on page 3-8 state the following:
 1. **STRONG NEIGHBORHOODS** New development creates desirable places to live and encourages diverse housing and amenities, while respecting the unique history and character of each neighborhood. Opponent Response: does not increase the quality of life as it adds another homeless shelter to Council District 6 which already has the highest number of homeless shelters. This does not increase the quality of life of the residents as the area is suffering from homeless encampments, public urination, defecation and other undesirable activities.
 2. **MOBILITY** Residents have improved options to move throughout Albuquerque for work, school, recreation, and services. Opponent Response: homeless encampments along Zuni make the area difficult to walk as there is extensive amounts of debris on the sidewalks, this particularly affects our residents with disabilities as it creates an additional hazard while they are attempting to get from their home to their destination and back again.
 3. **ECONOMIC VITALITY** The local economy supports a mix of market activities and promotes financial security for all residents. Opponent Response: Economic Vitality is suffering due to high crime in the area. Additionally homeless encampments would not help to encourage new businesses to open in the area.
 4. **EQUITY** All residents have access to good public services, a range of housing options, and healthy places to live, work, learn, and play. Opponent Response: Concentration of homeless services in this sector of the city does not balance negative impact equally across the City.
 5. **COMMUNITY HEALTH** All residents are protected from harm where they live, work, learn, and play. Everyone has convenient access to healthy food, parks and open space, and a wide range of

amenities and services. Opponent Response: Increasing homeless encampments would discourage use of parks and open space.

16. Although opponents point out that homeless and behavioral health services are not spread equally throughout the City, the Comp Plan *“uses the term ‘equity’ to describe ensuring that different people or places have the opportunities, access, and services they most need. Many people think ‘equity’ and ‘equality’ are interchangeable terms. ‘Equality’ aims to ensure that all people or places have the same opportunities, access, and services – a laudable goal. Distributing an equal amount to each would be fair if people and places had the same starting amounts. Discussions of “equity” acknowledge that people and places might need and want different things – and have different starting places. The equity approach involves assessing the different needs that people and places have and prioritizing resources and efforts to address them in the order of urgency that best matches those needs to move toward equality over time.”* See Comp Plan at 4-2. Accordingly, the Comp Plan does not require distribution of resources and unwanted land uses equally throughout the City, but rather institutes the policy that resources and unwanted land uses be located equitably, in consideration of the totality of the circumstances.
17. Further, Comp Plan POLICY 5.3.7 states *“Locally Unwanted Land Uses: Ensure that land uses that are objectionable to immediate neighbors but may be useful to society are located carefully and equitably to ensure that social assets are distributed evenly and social responsibilities are borne fairly across the Albuquerque area. (a) Minimize the impacts of locally unwanted land uses on surrounding areas through policies, regulations, and enforcement. (b) Ensure appropriate setbacks, buffers, and/or design standards to minimize offsite impacts.”* Applicant has demonstrated, by the evidence cited in the Notification of Decision and other evidence in the record, its efforts to locate its proposed overnight shelter carefully and equitably in an area of need surrounded by social and governmental assets, and that its operations will benefit not only people suffering homelessness in the immediate area, but in the community as a whole. Also, Applicant has submitted that policies, regulations, enforcement, setbacks, buffers, and design standards will be implemented to minimize any negative impacts.
18. On balance, the ZHE finds that Applicant has provided a sound justification showing compliance with IDO Section 14-16-6-6(A)(3)(a) based on substantial evidence.
19. Regarding the requirement under IDO Section 14-16-6-6(A)(3)(b) that the requested conditional use comply *“with all applicable provisions of this IDO, including but not limited to any Use-specific Standards applicable to the use in Section 14-16-4-3; the DPM; other adopted City regulations; and any conditions specifically applied to development of the property in a prior permit or approval affecting the property, or there is a condition of approval that any Variances or Waivers needed to comply with any of these provisions must be approved or the Conditional Use Approval will be invalidated pursuant to Subsection [14-16-6-6(A)(2)(c)2]”*:
 - a. Applicant and supporters of the Application submitted, among other things, the following:
 - i. The proposed overnight shelter is allowed under the MX-H zone as a Conditional Use. There are ongoing functions at the Gibson Health Hub that fall under hospital use, which is permissive under the MX-H zone. The proposed Gateway Center overnight shelter will comply with the Use-Specific Standards contained in Section 4-3-(C)(6) Overnight Shelter.

- b. Opponents of the Application submitted, among other things, the following:
 - i. The intent of the MX-H zone is undermined because, in the estimation of opponents, the proposed use is not appropriately sited at the Subject Property.
- 20. On balance, the ZHE finds that Applicant has provided a sound justification showing compliance with IDO Section 14-16-6-6(A)(3)(b) based on substantial evidence.
- 21. Regarding the requirement under IDO Section 14-16-6-6(A)(3)(c) that the requested conditional use “*will not create significant adverse impacts on adjacent properties, the surrounding neighborhood, or the larger community*”:
 - a. Applicant and supporters of the Application submitted, among other things, the following:
 - i. By providing secure shelter and services for individuals living in vulnerable situations, the Gateway Center will positively impact the adjacent properties, surrounding neighborhoods, and the larger community that are currently dealing with the unhoused population.
 - ii. Applicant has worked diligently on and adopted a final Operations Plan for the Gateway Center, which was attached in draft form to the Application and was posted on the City's website (www.cabq.gov/gateway) as of 7/3/2021. Because the Operations Plan before the ZHE at the September 21, 2021 ZHE hearing was still only in draft form, the ZHE continued the hearing on the Application from the September 21, 2021 ZHE hearing to be heard at the October 19, 2021 ZHE hearing. Prior to the October 19, 2021 ZHE hearing, Applicant finalized and adopted the Operations Plan and timely submitted it into the ZHE record on the Application, where it has been available for public inspection. The final Operations Plan addresses many community concerns, including impacts on adjacent properties, surrounding neighborhoods, and the larger community, and contains provisions concerning, among other things:
 - 1. Transportation -A shuttle system will be in place to transport referred guests for intake and assessment as well as transport guests to their exit destination, with pick-up and drop-off points at the Gateway Center.
 - 2. Secure entrance - The Gateway Center will have a secured entrance that is staffed 24 hours a day, 7 days a week, to ensure only enrolled guests, staff, and volunteers enter the facility.
 - 3. Physical design - The Gateway Center will utilize Trauma-informed Design and Crime Prevention through Environmental Design (CPTED) design principles. The City's intent is to upgrade all building-mounted lighting and parking lot lighting prior to opening the Gateway Center. Appropriate fencing, landscaping, and other design features will be incorporated to ensure curb appeal and low visual impact.
 - 4. Security - Onsite professional security is currently provided at the Gibson Health Hub and will continue to be once the Gateway Center is open.

5. Weapons - Weapons will not be allowed at the Gateway Center.
6. Entry and Exit - A team of intake officers and front desk staff will be stationed at the entrance, with only enrolled shelter guests, staff, program staff and volunteers, and registered partner agency staff and volunteers allowed to enter the facility.
7. Shelter capacity - If the Gateway Center reaches capacity, single adults seeking shelter will be referred to the Westside Emergency Housing Center or other appropriate shelter options. Transportation will be provided, if needed. Emergency overflow for families will be established in the community or through the use of motel vouchers.
8. Critical Incidence Response - Procedures addressing threats and assaults to clients and staff will be established. Guests that threaten or assault another client or staff will be exited from the Gateway Center and will receive transportation to their exit destination. In addition, de-escalation procedures will be established, with staff receiving training in conflict resolution and de-escalation techniques. The procedures will address the appropriate use of the Albuquerque Police Department resources to resolve safety issues at the Gateway Center.
9. Trash removal - The Solid Waste Department will clean and remove trash on a daily basis from surrounding areas, including sidewalks, bus stops, store fronts, and area parks.
10. Pedestrian safety - Pedestrian crosswalks in the vicinity of the Gateway Center will be improved to promote use, ease, and safety of crossing roadways. Roadway medians will be improved to prevent jaywalking.
11. Encampments - Encampments are expressly prohibited on the Gibson Health Hub property. The Family and Community Services public outreach team will monitor a 1/4-mile radius for encampments on public and private property. The public outreach team will refer encampments on private property to the City's Code Enforcement Division and a notice for encampments on public property will be posted by the public outreach team on the same day the encampment is observed.
12. Good Neighbor Agreement - The City intends to enter into a Good Neighbor Agreement with the Elder Homestead, Parkland Hills, Siesta Hills, South San Pedro, and Trumbull neighborhood associations. The following will be established through the Good Neighbor Agreement:
 - a. A phone number where residents can report any issues related to the Gateway Center.
 - b. A community dispute resolution process.
13. A Neighborhood Advisory Committee. The Agreement will set the membership of the Committee, which will include neighborhood representatives, City representatives from the organization(s)

operating the Gateway Center, and current or former guests of the Gateway Center. The Committee will meet at least quarterly and will issue an annual survey to community members. The Committee will review and update as needed the Good Neighbor Agreement annually. The Neighborhood Advisory Committee will review baseline data and information over time to provide feedback on high impact strategies to keep community, staff, and clients safe.

- b. Opponents of the Application submitted, among other things, the following:
 - i. The Good neighbor Agreement has not been finalized and signed, and the community has no guaranties as to what the final version, if any, will contain.
 - ii. Articles have shown that crime increases in the area of overnight shelters (however, the research cited was not done on permanent shelters).
- 22. On balance, the ZHE finds that Applicant has provided a sound justification showing compliance with IDO Section 14-16-6-6(A)(3)(c) based on substantial evidence.
- 23. Regarding the requirement under IDO Section 14-16-6-6(A)(3)(d) that the requested conditional use “*will not create material adverse impacts on other land in the surrounding area through increases in traffic congestion, parking congestion, noise, or vibration without sufficient mitigation or civic or environmental benefits that outweigh the expected impacts*”:
 - a. Applicant and supporters of the Application submitted, among other things, the following:
 - i. Development of the Gateway Center will focus on interior renovations. No increases in noise or vibrations will occur or create adverse impacts to the surrounding area. People utilizing the services at the Gateway Center will primarily be relying on shuttles from pick-up locations and service provider facilities, and public bus transit, which will decrease the potential for traffic congestion. The site contains large parking areas, which are more than adequate to support the parking needs of the Gateway Center and the existing tenants.
 - b. Opponents of the Application submitted, among other things, the following:
 - i. The Gateway Center will attract homeless and other pedestrians that will have an increased burden on traffic safety and congestion.
- 24. IDO Table 5-5-1 contains no off-street parking requirement for an overnight shelter.
- 25. On balance, the ZHE finds that Applicant has provided a sound justification showing compliance with IDO Section 14-16-6-6(A)(3)(d) based on substantial evidence.
- 26. Regarding the requirement under IDO Section 14-16-6-6(A)(3)(e) that “*on a project site with existing uses, [the requested conditional use] will not increase non-residential activity within 300 feet in any direction of a lot in any Residential zone district between the hours of 10:00 P.M. and 6:00 A.M.*”:
 - a. Applicant and supporters of the Application submitted, among other things, the following:
 - i. The overnight shelter use at the Gibson Health Hub will not increase non-residential activity within 300 feet of a residential zone district between the hours of 10:00 P.M. and 6:00 A.M. The overnight shelter use will be a

relatively small portion of the Gibson Health Hub premise. The initial phase of the Gateway Shelter is anticipated to limit intakes to between 8:00 A.M to 8:00 P.M. for most community partner referrals, but intakes will be conducted at all hours for referrals from hospitals, first responders, and law enforcement. The intake activity will be more than 500 feet from the R-ML zoned property to the east and buffered by a large parking lot. The closest apartment building within the R-ML site is setback approximately 67 feet east of its shared property line with the Gibson Health Hub. These existing physical conditions and separation between uses, and operating procedures will ensure the adjacent residential use will not impacted by the overnight shelter use at the Gibson Health Hub facility.

- b. Opponents of the Application submitted, among other things, the following:
 - i. The proposed overnight shelter will operate 24 hours a day.
- 27. On balance, the ZHE finds that Applicant has provided a sound justification showing compliance with IDO Section 14-16-6-6(A)(3)(e) based on substantial evidence.
- 28. Regarding the requirement under IDO Section 14-16-6-6(A)(3)(f) that the requested conditional use “*will not negatively impact pedestrian or transit connectivity without appropriate mitigation*”:
 - a. Applicant and supporters of the Application submitted, among other things, the following: The Gateway Center overnight shelter will draw pedestrians, transit riders, shuttles, and vehicles to the site. Impacts on pedestrian and transit connectivity will be appropriately mitigated by various City departments through services and actions that include:
 - i. Shuttle service to and from the site from designated pick-up sites and community partner organizations;
 - ii. Designated onsite pick-up and drop-off location;
 - iii. Evaluation and prioritization of improvements to sidewalks, pedestrian crossings, and medians in Gibson Boulevard and San Mateo by the Department of Municipal Development to ensure pedestrians, neighborhood residents, and visitors have a safe and comfortable walking experience in the area;
 - iv. Evaluation and potential modification to existing transit routes by the City Transit Department to accommodate a potential increase in ridership; and
 - v. Conducting a speed study of Gibson Boulevard and taking appropriate measures as determined by the study.
 - b. Opponents of the Application submitted, among other things, the following:
 - i. The Gateway Center will attract homeless and other pedestrians that will have an increased burden on traffic safety and congestion.
- 29. On balance, the ZHE finds that Applicant has provided a sound justification showing compliance with IDO Section 14-16-6-6(A)(3)(f) based on substantial evidence.
- 30. The City Traffic Engineering Division stated no objection to the Application.
- 31. IDO Section 14-16-4-3(C)(6) requires the following Use-Specific Standards for an Overnight Shelter: *This use is prohibited within 1,500 feet in any direction of any other overnight shelter.*

32. Applicant has satisfied the use specific criteria by establishing that no other overnight shelter is located within 1,500 feet in any direction of the Subject Property, as the closest overnight shelter to the Subject Property is located 2,308 feet away.

DECISION:

APPROVAL of a conditional use to allow an overnight shelter.

APPEAL:

If you wish to appeal this decision, you must do so by November 18, 2021 pursuant to Section 14-16-6-4(V), of the Integrated Development Ordinance, you must demonstrate that you have legal standing to file an appeal as defined.

Successful applicants are reminded that other regulations of the City must be complied with, even after approval of a special exception is secured. This decision does not constitute approval of plans for a building permit. If your application is approved, bring this decision with you when you apply for any related building permit or occupation tax number. Approval of a conditional use or a variance application is void after one year from date of approval if the rights and privileges are granted, thereby have not been executed, or utilized.



Robert Lucero, Esq.
Zoning Hearing Examiner

cc:

ZHE File
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CITY OF ALBUQUERQUE
OFFICE OF ADMINISTRATIVE HEARINGS
ZONING HEARING EXAMINER
NOTIFICATION OF DECISION

City of Albuquerque Family and Community Services (Agent, Consensus Planning) requests a conditional use to allow an overnight shelter for Lot A1A1A/Lovelace Hospital, Lovelace Hospital, located at 5400 Gibson BLVD SE, zoned MX-H [Section 14-16-4-2]

Special Exception No:..... **VA-2021-00316**
Project No: **Project#2021-005834**
Hearing Date: 09-21-21
Closing of Public Record: 09-21-21
Date of Decision: 10-06-21

On the 21st day of September, 2021, Consensus Planning, agent for property owner, City of Albuquerque Family and Community Services (“Applicant”) appeared before the Zoning Hearing Examiner (“ZHE”) requesting a conditional use to allow an overnight shelter (“Application”) upon the real property located at 5400 Gibson BLVD SE (“Subject Property”). Below are the ZHE’s finding of fact and decision:

FINDINGS:

1. Applicant is requesting a conditional use to allow an overnight shelter.
2. The City of Albuquerque City of Albuquerque Integrated Development Ordinance (“IDO”), Section 14-16-7-1 defines an overnight shelter as “*A facility that provides sleeping accommodations for 6 or more persons for a period of less than 24 hours with no charge or a charge substantially less than market value; it may provide meals and social services. Any such facility open to clients between 10:00 P.M. and 7:00 A.M. is considered an overnight shelter.*”
3. The Subject Property is zoned MX-H, the purpose of which under the IDO is to “*provide for large-scale destination retail and high-intensity commercial, residential, light industrial, and institutional uses, as well as high-density residential uses, particularly along Transit Corridors and in Urban Centers. The MX-H zone district is intended to allow higher-density infill development in appropriate locations.*”
4. Table 4-2-1 of the IDO states that an overnight shelter in the MX-H zone requires a conditional use approval.
5. IDO Section 14-16-6-6(A)(3) (Review and Decision Criteria– Conditional Use) reads: “*An application for a Conditional Use Approval shall be approved if it meets all of the following criteria:*
 - (a) *It is consistent with the ABC Comp. Plan, as amended;*
 - (b) *It complies with all applicable provisions of this IDO, including but not limited to any Use-specific Standards applicable to the use in Section 14-16-4-3; the DPM; other adopted City regulations; and any conditions specifically applied to development of the property in a prior permit or approval affecting the property, or there is a condition of approval that any Variances or Waivers needed to*

comply with any of these provisions must be approved or the Conditional Use Approval will be invalidated pursuant to Subsection (2)(c)2 above.

- (c) *It will not create significant adverse impacts on adjacent properties, the surrounding neighborhood, or the larger community.*
 - (d) *It will not create material adverse impacts on other land in the surrounding area through increases in traffic congestion, parking congestion, noise, or vibration without sufficient mitigation or civic or environmental benefits that outweigh the expected impacts.*
 - (e) *On a project site with existing uses, it will not increase non-residential activity within 300 feet in any direction of a lot in any Residential zone district between the hours of 10:00 P.M. and 6:00 A.M.*
 - (f) *It will not negatively impact pedestrian or transit connectivity without appropriate mitigation.*
6. The applicant bears the burden of providing a sound justification for the requested decision, based on substantial evidence, pursuant to IDO Section 14-16-6-4(E)(3).
 7. The applicant bears the burden of showing compliance with required standards through analysis, illustrations, or other exhibits as necessary, pursuant to IDO Section 14-16-6-4(E)(4).
 8. Applicant timely submitted a written authorization for Agent to act on Applicant's behalf.
 9. Applicant's community outreach regarding the proposed Gateway Center dates back to 2018, and that outreach utilized community input sessions, online surveys, focus groups with people experiencing homelessness, and neighborhood community meetings.
 10. On March 15, 2021, the Albuquerque City Council approved Resolution R-21-141, which required two community input sessions within 45 days and advancement towards a Good Neighbor Agreement by the City with area residents and businesses to be in place for so long as the Gateway Center operates at the Gibson Health Hub site. The City held the two community input meetings on June 10 and June 12, 2021. The first meeting was held online and the second was held at the Gibson Health Hub Educational Building. Input from the meetings is posted on the City website at www.cabq.gov/gateway.
 11. Applicant provided evidence that all property owners and neighborhood associations entitled to notice were notified of the Application. Although a neighboring business owner complained that he did not receive notice, his business was not listed on the list of properties located within the required notice perimeter pursuant to the IDO, and it appears from evidence in the record, including without limitation the perimeter buffer map for the Subject Property, that the complainant's business is located outside the required notice perimeter. Further, the complainant clearly had notice, given that he submitted written evidence before the ZHE hearing and oral testimony at the ZHE hearing. Based on evidence in the record, Application provided the required timely notice to all property owners whose properties are within the required notice perimeter. Opponents submitted a petition signed by business owners who complained of inadequate notice. Nevertheless, based on evidence of mailings, emails, publication, and sign porting, the ZHE finds that the notice given by Applicant was compliant with the requirements of the IDO.
 12. Applicant timely mailed neighborhood meeting requests on June 4, 2021.
 13. On June 22, 2021, the City Land Use Facilitation Program conducted a facilitated pre-application meeting with community members, online via Zoom, to which were invited representatives of the affected neighborhood associations and the community at large.

According to the facilitated meeting report dated June 24, 2021, approximately 98 people registered for the meeting and as many as 80 participated in the meeting at the highest participation.

14. Applicant attended a pre-application meeting with City staff on June 29, 2021.
15. Regarding the requirement under IDO Section 14-16-6-6(A)(3)(a) that the requested conditional use be “*consistent with the ABC Comp. Plan, as amended*”:
 - a. Applicant and supporters of the Application submitted, among other things, the following:
 - i. Goal 6.2 Multi-Modal System: Encourage walking, biking, and transit, especially at peak-hour commuting times, to enhance access and mobility for people of all ages and abilities. Applicant Response: The proposed Gateway Center overnight shelter at the Gibson Health Hub furthers Goal 6.2 Multi-Modal System by placing it in an area with excellent multi-modal access, including transit services, major street network, and pedestrian and bicycle access and connections. The subject property is along Gibson Boulevard, an Urban Principal Arterial, and designated as a Commuter Corridor by the Comprehensive Plan. It is within the designated San Mateo Boulevard Major Transit Corridor area and a 1/2-mile west of the Louisiana Boulevard Major Transit Corridor area.
 - ii. Goal 9.4 Homelessness: Make homelessness rare, short-term, and non-recurring. Applicant Response: The Gateway Center overnight shelter will further Goal 9.4 Homelessness by being a critical component of the City's comprehensive approach to making homelessness rare, short-term, and non-recurring. The City estimates that there are at least 1,525 people in shelters or on the streets in Albuquerque each night, and at least 5,000 households experienced homelessness in 2020. The Gateway Center will address chronic homelessness in Albuquerque by providing safe, dignified emergency shelter within a central, developed area of Albuquerque. In addition, clients will receive wraparound services that help them exit the overnight shelter into stable, permanent housing and other community resources.
 - iii. POLICY 9.4.1: Best Practices: Implement an appropriate and effective model to address chronic homelessness. Applicant Response: The Gateway Center overnight shelter furthers Policy 9.4.1 Best Practices by providing emergency shelter for those experiencing homelessness and work with them to transition into permanent housing. The proposed Gateway Center overnight shelter will function as a "gateway" to end chronic homelessness through the use of three models to effectively transition unhoused community members into housing
 - iv. POLICY 9.4.2 Services: Provide expanded options for shelters and services for people experiencing temporary homelessness. Applicant Response: The proposed Gateway Center overnight shelter will further Policy 9.4.2 Services by expanding options for temporary shelter and services for the City's unhoused populations. Although there are many service providers in Albuquerque that serve the unhoused populations, the City does not currently have a centralized 24/7 center that can connect

unhoused individuals to the support organizations they need, often creating a "gap" in services. By building strong partnerships with existing providers, the City's proposed Gateway Center can serve as a centralized center, allowing for a more efficient connection to essential services and reducing the potential gap in services.

- v. POLICY 9.4.3 Equitable Distribution: Support a network of service points that are easily accessible by residents and workers, geographically distributed throughout the City and County, and proximate to transit. Applicant Response: Locating the proposed Gateway Center overnight shelter at the Gibson Health Hub furthers Policy 9.4.3 Equitable Distribution as reflected in comments from the individuals experiencing homelessness focus groups. The Gateway Center location is accessible to trusted nearby service providers in the International District and is located within the San Mateo Major Transit Corridor area. The proposed Gateway Center is the City's first step towards a dispersed shelter model that will add more shelters and supportive services in other locations within Albuquerque.
- vi. Goal 9.5 Vulnerable Populations: Expand capacity to provide quality housing and services to vulnerable populations. Applicant Response: The proposed Gateway Center will expand the City's capacity to provide services and access to quality housing to vulnerable populations, thereby furthering Goal 9.5 Vulnerable Populations.
- vii. POLICY 9.5.1 Quality Housing: Ensure well maintained, safe transitional and permanent housing for the lowest income households that are most at risk of homelessness. Applicant Response: The proposed Gateway Center furthers Policy 9.5.1 Quality Housing by providing the first step to permanent housing for the most vulnerable in our community. The Time-Limited Model ensures that clients of the overnight shelter have secured permanent housing before they leave the shelter. Low-income clients will have Wraparound services, including case management and assistance securing financial support for housing expenses. The goal of the Gateway Center is to reduce the risk of homelessness by ensuring clients have the support to maintain stable, permanent housing.
- viii. POLICY 9.5.2 Transitional Services: Encourage on-site transitional services with culturally competent service delivery that respects the dignity of individuals and families and fosters self-determination and self-sufficiency, including job training, financial education, and behavioral health assistance. Applicant Response: The services provided at the Gateway Center will support Policy 9.5.2 Transitional Services by providing Wraparound services for individuals and families. The individual leads the team-based, collaborative Wraparound approach to case management. The program is flexible, comprehensive, and can involve a number of organizations. The City will partner with existing community organizations and service providers specializing in delivering culturally competent services that will respect the individual and prepare individualized transition plans.

- b. Opponents of the Application submitted, among other things, the following:
 - i. Under “A Vision for Albuquerque & Bernalillo County” page 3-3 “As the county and city grow in population over the next 20 years, neighborhoods will be safer and easier places to walk through and between. The positive characteristics that contribute to their unique identities will be protected and enhanced.” “The City and the County commit to analyzing the health of our communities and the geographic distribution of our public investments and assets. Where gaps are identified, governments will collaborate with communities, nonprofits, public agencies, and private enterprises to address them.” Opponent Response: This request does not help the positive characteristics of the neighborhood as it adds a further potential crime element to the area, (in an area with the highest overall crime in the City) increases the likelihood of encampments along Gibson Blvd, and fails to create a distribution of investments, and assets for the homeless throughout the City.
 - ii. Guiding Principles found on page 3-8 state the following:
 - 1. **STRONG NEIGHBORHOODS** New development creates desirable places to live and encourages diverse housing and amenities, while respecting the unique history and character of each neighborhood. Opponent Response: does not increase the quality of life as it adds another homeless shelter to Council District 6 which already has the highest number of homeless shelters. This does not increase the quality of life of the residents as the area is suffering from homeless encampments, public urination, defecation and other undesirable activities.
 - 2. **MOBILITY** Residents have improved options to move throughout Albuquerque for work, school, recreation, and services. Opponent Response: homeless encampments along Zuni make the area difficult to walk as there is extensive amounts of debris on the sidewalks, this particularly affects our residents with disabilities as it creates an additional hazard while they are attempting to get from their home to their destination and back again.
 - 3. **ECONOMIC VITALITY** The local economy supports a mix of market activities and promotes financial security for all residents. Opponent Response: Economic Vitality is suffering due to high crime in the area. Additionally homeless encampments would not help to encourage new businesses to open in the area.
 - 4. **EQUITY** All residents have access to good public services, a range of housing options, and healthy places to live, work, learn, and play. Opponent Response: Concentration of homeless services in this sector of the city does not balance negative impact equally across the City.
 - 5. **COMMUNITY HEALTH** All residents are protected from harm where they live, work, learn, and play. Everyone has convenient access to healthy food, parks and open space, and a wide range of

amenities and services. Opponent Response: Increasing homeless encampments would discourage use of parks and open space.

16. Although opponents point out that homeless and behavioral health services are not spread equally throughout the City, the Comp Plan *“uses the term ‘equity’ to describe ensuring that different people or places have the opportunities, access, and services they most need. Many people think ‘equity’ and ‘equality’ are interchangeable terms. ‘Equality’ aims to ensure that all people or places have the same opportunities, access, and services – a laudable goal. Distributing an equal amount to each would be fair if people and places had the same starting amounts. Discussions of “equity” acknowledge that people and places might need and want different things – and have different starting places. The equity approach involves assessing the different needs that people and places have and prioritizing resources and efforts to address them in the order of urgency that best matches those needs to move toward equality over time.”* See Comp Plan at 4-2. Accordingly, the Comp Plan does not require distribution of resources and unwanted land uses equally throughout the City, but rather institutes the policy that resources and unwanted land uses be located equitably, in consideration of the totality of the circumstances.
17. Further, Comp Plan POLICY 5.3.7 states *“Locally Unwanted Land Uses: Ensure that land uses that are objectionable to immediate neighbors but may be useful to society are located carefully and equitably to ensure that social assets are distributed evenly and social responsibilities are borne fairly across the Albuquerque area. (a) Minimize the impacts of locally unwanted land uses on surrounding areas through policies, regulations, and enforcement. (b) Ensure appropriate setbacks, buffers, and/or design standards to minimize offsite impacts.”* Applicant has demonstrated, by the evidence cited in the Notification of Decision and other evidence in the record, its efforts to locate its proposed overnight shelter carefully and equitably in an area of need surrounded by social and governmental assets, and that its operations will benefit not only people suffering homelessness in the immediate area, but in the community as a whole. Also, Applicant has submitted that policies, regulations, enforcement, setbacks, buffers, and design standards will be implemented to minimize any negative impacts.
18. On balance, the ZHE finds that Applicant has provided a sound justification showing compliance with IDO Section 14-16-6-6(A)(3)(a) based on substantial evidence.
19. Regarding the requirement under IDO Section 14-16-6-6(A)(3)(b) that the requested conditional use comply *“with all applicable provisions of this IDO, including but not limited to any Use-specific Standards applicable to the use in Section 14-16-4-3; the DPM; other adopted City regulations; and any conditions specifically applied to development of the property in a prior permit or approval affecting the property, or there is a condition of approval that any Variances or Waivers needed to comply with any of these provisions must be approved or the Conditional Use Approval will be invalidated pursuant to Subsection [14-16-6-6(A)(2)(c)2]”*:
 - a. Applicant and supporters of the Application submitted, among other things, the following:
 - i. The proposed overnight shelter is allowed under the MX-H zone as a Conditional Use. There are ongoing functions at the Gibson Health Hub that fall under hospital use, which is permissive under the MX-H zone. The proposed Gateway Center overnight shelter will comply with the Use-Specific Standards contained in Section 4-3-(C)(6) Overnight Shelter.

- b. Opponents of the Application submitted, among other things, the following:
 - i. The intent of the MX-H zone is undermined because, in the estimation of opponents, the proposed use is not appropriately sited at the Subject Property.
- 20. On balance, the ZHE finds that Applicant has provided a sound justification showing compliance with IDO Section 14-16-6-6(A)(3)(b) based on substantial evidence.
- 21. Regarding the requirement under IDO Section 14-16-6-6(A)(3)(c) that the requested conditional use “*will not create significant adverse impacts on adjacent properties, the surrounding neighborhood, or the larger community*”:
 - a. Applicant and supporters of the Application submitted, among other things, the following:
 - i. By providing secure shelter and services for individuals living in vulnerable situations, the Gateway Center will positively impact the adjacent properties, surrounding neighborhoods, and the larger community that are currently dealing with the unhoused population.
 - ii. The City has been working diligently on the draft Operations Plan for the Gateway Center, which is attached to the Application and posted on the City's website (www.cabq.gov/gateway) as of 7/3/2021. The draft Operations Plan addresses many community concerns, including impacts on adjacent properties, surrounding neighborhoods, and the larger community, and contains provisions concerning, among other things:
 - 1. Transportation - A shuttle system will be in place to transport referred guests for intake and assessment as well as transport guests to their exit destination, with pick-up and drop-off points at the Gateway Center.
 - 2. Secure entrance - The Gateway Center will have a secured entrance that is staffed 24 hours a day, 7 days a week, to ensure only enrolled guests, staff, and volunteers enter the facility.
 - 3. Physical design - The Gateway Center will utilize Trauma-informed Design and Crime Prevention through Environmental Design (CPTED) design principles. The City's intent is to upgrade all building-mounted lighting and parking lot lighting prior to opening the Gateway Center. Appropriate fencing, landscaping, and other design features will be incorporated to ensure curb appeal and low visual impact.
 - 4. Security - Onsite professional security is currently provided at the Gibson Health Hub and will continue to be once the Gateway Center is open.
 - 5. Weapons - Weapons will not be allowed at the Gateway Center.
 - 6. Entry and Exit - A team of intake officers and front desk staff will be stationed at the entrance, with only enrolled shelter guests, staff, program staff and volunteers, and registered partner agency staff and volunteers allowed to enter the facility.
 - 7. Shelter capacity - If the Gateway Center reaches capacity, single adults seeking shelter will be referred to the Westside Emergency Housing Center or other appropriate shelter options. Transportation

will be provided, if needed. Emergency overflow for families will be established in the community or through the use of motel vouchers.

8. Critical Incident Response - Procedures addressing threats and assaults to clients and staff will be established. Guests that threaten or assault another client or staff will be exited from the Gateway Center and will receive transportation to their exit destination. In addition, de-escalation procedures will be established, with staff receiving training in conflict resolution and de-escalation techniques. The procedures will address the appropriate use of the Albuquerque Police Department resources to resolve safety issues at the Gateway Center.
9. Trash removal - The Solid Waste Department will clean and remove trash on a daily basis from surrounding areas, including sidewalks, bus stops, store fronts, and area parks.
10. Pedestrian safety - Pedestrian crosswalks in the vicinity of the Gateway Center will be improved to promote use, ease, and safety of crossing roadways. Roadway medians will be improved to prevent jaywalking.
11. Encampments - Encampments are expressly prohibited on the Gibson Health Hub property. The Family and Community Services public outreach team will monitor a 14-mile radius for encampments on public and private property. The public outreach team will refer encampments on private property to the City's Code Enforcement Division and a notice for encampments on public property will be posted by the public outreach team on the same day the encampment is observed.
12. Good Neighbor Agreement - The City intends to enter into a Good Neighbor Agreement with the Elder Homestead, Parkland Hills, Siesta Hills, South San Pedro, and Trumbull neighborhood associations. The following will be established through the Good Neighbor Agreement:
 - a. A phone number where residents can report any issues related to the Gateway Center.
 - b. A community dispute resolution process.
13. A Neighborhood Advisory Committee. The Agreement will set the membership of the Committee, which will include neighborhood representatives, City representatives from the organization(s) operating the Gateway Center, and current or former guests of the Gateway Center. The Committee will meet at least quarterly and will issue an annual survey to community members. The Committee will review and update as needed the Good Neighbor Agreement annually. The Neighborhood Advisory Committee will review baseline data and information over time to provide feedback on high impact strategies to keep community, staff, and clients safe.

- b. Opponents of the Application submitted, among other things, the following:
 - i. The operations plan is merely a draft and the community has no guaranties as to what the final version, if any, will contain.
 - ii. The Good neighbor Agreement has not been finalized and signed, and the community has no guaranties as to what the final version, if any, will contain.
 - iii. Articles have shown that crime increases in the area of overnight shelters (however, the research cited was not done on permanent shelters).
- 22. Applicant's justification showing compliance with IDO Section 14-16-6-6(A)(3)(c) is based largely on its draft operations plan.
- 23. Regarding the requirement under IDO Section 14-16-6-6(A)(3)(d) that the requested conditional use *"will not create material adverse impacts on other land in the surrounding area through increases in traffic congestion, parking congestion, noise, or vibration without sufficient mitigation or civic or environmental benefits that outweigh the expected impacts"*:
 - a. Applicant and supporters of the Application submitted, among other things, the following:
 - i. Development of the Gateway Center will focus on interior renovations. No increases in noise or vibrations will occur or create adverse impacts to the surrounding area. People utilizing the services at the Gateway Center will primarily be relying on shuttles from pick-up locations and service provider facilities, and public bus transit, which will decrease the potential for traffic congestion. The site contains large parking areas, which are more than adequate to support the parking needs of the Gateway Center and the existing tenants.
 - b. Opponents of the Application submitted, among other things, the following:
 - i. The Gateway Center will attract homeless and other pedestrians that will have an increased burden on traffic safety and congestion.
- 24. IDO Table 5-5-1 contains no off-street parking requirement for an overnight shelter.
- 25. On balance, the ZHE finds that Applicant has provided a sound justification showing compliance with IDO Section 14-16-6-6(A)(3)(d) based on substantial evidence.
- 26. Regarding the requirement under IDO Section 14-16-6-6(A)(3)(e) that *"on a project site with existing uses, [the requested conditional use] will not increase non-residential activity within 300 feet in any direction of a lot in any Residential zone district between the hours of 10:00 P.M. and 6:00 A.M."*:
 - a. Applicant and supporters of the Application submitted, among other things, the following:
 - i. The overnight shelter use at the Gibson Health Hub will not increase non-residential activity within 300 feet of a residential zone district between the hours of 10:00 P.M. and 6:00 A.M. The overnight shelter use will be a relatively small portion of the Gibson Health Hub premise. The initial phase of the Gateway Shelter is anticipated to limit intakes to between 8:00 A.M to 8:00 P.M. for most community partner referrals, but intakes will be conducted at all hours for referrals from hospitals, first responders, and law enforcement. The intake activity will be more than 500 feet from the R-ML zoned property to the east and buffered by a large parking lot.

The closest apartment building within the R-ML site is setback approximately 67 feet east of its shared property line with the Gibson Health Hub. These existing physical conditions and separation between uses, and operating procedures will ensure the adjacent residential use will not be impacted by the overnight shelter use at the Gibson Health Hub facility.

- b. Opponents of the Application submitted, among other things, the following:
 - i. The proposed overnight shelter will operate 24 hours a day.
- 27. On balance, the ZHE finds that Applicant has provided a sound justification showing compliance with IDO Section 14-16-6-6(A)(3)(e) based on substantial evidence.
- 28. Regarding the requirement under IDO Section 14-16-6-6(A)(3)(f) that the requested conditional use “*will not negatively impact pedestrian or transit connectivity without appropriate mitigation*”:
 - a. Applicant and supporters of the Application submitted, among other things, the following: The Gateway Center overnight shelter will draw pedestrians, transit riders, shuttles, and vehicles to the site. Impacts on pedestrian and transit connectivity will be appropriately mitigated by various City departments through services and actions that include:
 - i. Shuttle service to and from the site from designated pick-up sites and community partner organizations;
 - ii. Designated onsite pick-up and drop-off location;
 - iii. Evaluation and prioritization of improvements to sidewalks, pedestrian crossings, and medians in Gibson Boulevard and San Mateo by the Department of Municipal Development to ensure pedestrians, neighborhood residents, and visitors have a safe and comfortable walking experience in the area;
 - iv. Evaluation and potential modification to existing transit routes by the City Transit Department to accommodate a potential increase in ridership; and
 - v. Conducting a speed study of Gibson Boulevard and taking appropriate measures as determined by the study.
 - b. Opponents of the Application submitted, among other things, the following:
 - i. The Gateway Center will attract homeless and other pedestrians that will have an increased burden on traffic safety and congestion.
- 29. On balance, the ZHE finds that Applicant has provided a sound justification showing compliance with IDO Section 14-16-6-6(A)(3)(f) based on substantial evidence.
- 30. The City Traffic Engineering Division stated no objection to the Application.
- 31. IDO Section 14-16-4-3(C)(6) requires the following Use-Specific Standards for an Overnight Shelter: *This use is prohibited within 1,500 feet in any direction of any other overnight shelter.*
- 32. Applicant has satisfied the use specific criteria by establishing that no other overnight shelter is located within 1,500 feet in any direction of the Subject Property, as the closest overnight shelter to the Subject Property is located 2,308 feet away.
- 33. It would appear that Applicant has met its burdens of providing a sound justification for the requested decision, and of showing compliance with required standards, based on substantial evidence. However, Applicant’s justification showing compliance with IDO Section 14-16-6-6(A)(3)(c) (that the requested conditional use “*will not create significant*

adverse impacts on adjacent properties, the surrounding neighborhood, or the larger community”) is based largely on Applicant’s draft operations plan, which draft would appear subject to change until finalized.

34. This matter should be deferred to allow Applicant the opportunity to finalize and adopt the operations plan on which rests a significant portion of the justification of the Application.

DECISION:

CONTINUANCE of the Application to the ZHE hearing to take place on October 19, 2021, which begins at 9:00 a.m.

APPEAL:

If you wish to appeal this decision, you must do so by October 21, 2021 pursuant to Section 14-16-6-4(V), of the Integrated Development Ordinance, you must demonstrate that you have legal standing to file an appeal as defined.

Successful applicants are reminded that other regulations of the City must be complied with, even after approval of a special exception is secured. This decision does not constitute approval of plans for a building permit. If your application is approved, bring this decision with you when you apply for any related building permit or occupation tax number. Approval of a conditional use or a variance application is void after one year from date of approval if the rights and privileges are granted, thereby have not been executed, or utilized.



Robert Lucero, Esq.
Zoning Hearing Examiner

cc:

ZHE File
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CITY OF ALBUQUERQUE
OFFICE OF ADMINISTRATIVE HEARINGS
ZONING HEARING EXAMINER
NOTIFICATION OF DECISION

City of Albuquerque Family and Community Services (Agent, Consensus Planning) requests a conditional use to allow an overnight shelter for Lot 1, Swift Addn, located at 5006 Gibson BLVD SE, zoned MX-H [Section 14-16-4-2]

Special Exception No:..... **VA-2021-00317**
Project No: **Project#2021-005834**
Hearing Date: 09-21-21
Closing of Public Record: 09-21-21
Date of Decision: 10-06-21

On the 21st day of September, 2021, Consensus Planning, agent for property owner, City of Albuquerque Family and Community Services (“Applicant”) appeared before the Zoning Hearing Examiner (“ZHE”) requesting a conditional use to allow an overnight shelter (“Application”) upon the real property located at 5006 Gibson BLVD SE (“Subject Property”). Below are the ZHE’s finding of fact and decision:

FINDINGS:

1. Applicant is requesting a conditional use to allow an overnight shelter.
2. The City of Albuquerque City of Albuquerque Integrated Development Ordinance (“IDO”), Section 14-16-7-1 defines an overnight shelter as “*A facility that provides sleeping accommodations for 6 or more persons for a period of less than 24 hours with no charge or a charge substantially less than market value; it may provide meals and social services. Any such facility open to clients between 10:00 P.M. and 7:00 A.M. is considered an overnight shelter.*”
3. The Subject Property is zoned MX-H, the purpose of which under the IDO is to “*provide for large-scale destination retail and high-intensity commercial, residential, light industrial, and institutional uses, as well as high-density residential uses, particularly along Transit Corridors and in Urban Centers. The MX-H zone district is intended to allow higher-density infill development in appropriate locations.*”
4. Table 4-2-1 of the IDO states that an overnight shelter in the MX-H zone requires a conditional use approval.
5. IDO Section 14-16-6-6(A)(3) (Review and Decision Criteria– Conditional Use) reads: “*An application for a Conditional Use Approval shall be approved if it meets all of the following criteria:*
 - (a) *It is consistent with the ABC Comp. Plan, as amended;*
 - (b) *It complies with all applicable provisions of this IDO, including but not limited to any Use-specific Standards applicable to the use in Section 14-16-4-3; the DPM; other adopted City regulations; and any conditions specifically applied to development of the property in a prior permit or approval affecting the property, or there is a condition of approval that any Variances or Waivers needed to*

comply with any of these provisions must be approved or the Conditional Use Approval will be invalidated pursuant to Subsection (2)(c)2 above.

- (c) *It will not create significant adverse impacts on adjacent properties, the surrounding neighborhood, or the larger community.*
 - (d) *It will not create material adverse impacts on other land in the surrounding area through increases in traffic congestion, parking congestion, noise, or vibration without sufficient mitigation or civic or environmental benefits that outweigh the expected impacts.*
 - (e) *On a project site with existing uses, it will not increase non-residential activity within 300 feet in any direction of a lot in any Residential zone district between the hours of 10:00 P.M. and 6:00 A.M.*
 - (f) *It will not negatively impact pedestrian or transit connectivity without appropriate mitigation.*
6. The applicant bears the burden of providing a sound justification for the requested decision, based on substantial evidence, pursuant to IDO Section 14-16-6-4(E)(3).
 7. The applicant bears the burden of showing compliance with required standards through analysis, illustrations, or other exhibits as necessary, pursuant to IDO Section 14-16-6-4(E)(4).
 8. Applicant timely submitted a written authorization for Agent to act on Applicant's behalf.
 9. Applicant's community outreach regarding the proposed Gateway Center dates back to 2018, and that outreach utilized community input sessions, online surveys, focus groups with people experiencing homelessness, and neighborhood community meetings.
 10. On March 15, 2021, the Albuquerque City Council approved Resolution R-21-141, which required two community input sessions within 45 days and advancement towards a Good Neighbor Agreement by the City with area residents and businesses to be in place for so long as the Gateway Center operates at the Gibson Health Hub site. The City held the two community input meetings on June 10 and June 12, 2021. The first meeting was held online and the second was held at the Gibson Health Hub Educational Building. Input from the meetings is posted on the City website at www.cabq.gov/gateway.
 11. Applicant provided evidence that all property owners and neighborhood associations entitled to notice were notified of the Application. Although a neighboring business owner complained that he did not receive notice, his business was not listed on the list of properties located within the required notice perimeter pursuant to the IDO, and it appears from evidence in the record, including without limitation the perimeter buffer map for the Subject Property, that the complainant's business is located outside the required notice perimeter. Further, the complainant clearly had notice, given that he submitted written evidence before the ZHE hearing and oral testimony at the ZHE hearing. Based on evidence in the record, Application provided the required timely notice to all property owners whose properties are within the required notice perimeter. Opponents submitted a petition signed by business owners who complained of inadequate notice. Nevertheless, based on evidence of mailings, emails, publication, and sign posting, the ZHE finds that the notice given by Applicant was compliant with the requirements of the IDO.
 12. Applicant timely mailed neighborhood meeting requests on June 4, 2021.
 13. On June 22, 2021, the City Land Use Facilitation Program conducted a facilitated pre-application meeting with community members, online via Zoom, to which were invited representatives of the affected neighborhood associations and the community at large.

According to the facilitated meeting report dated June 24, 2021, approximately 98 people registered for the meeting and as many as 80 participated in the meeting at the highest participation.

14. Applicant attended a pre-application meeting with City staff on June 29, 2021.
15. Regarding the requirement under IDO Section 14-16-6-6(A)(3)(a) that the requested conditional use be “*consistent with the ABC Comp. Plan, as amended*”:
 - a. Applicant and supporters of the Application submitted, among other things, the following:
 - i. Goal 6.2 Multi-Modal System: Encourage walking, biking, and transit, especially at peak-hour commuting times, to enhance access and mobility for people of all ages and abilities. Applicant Response: The proposed Gateway Center overnight shelter at the Gibson Health Hub furthers Goal 6.2 Multi-Modal System by placing it in an area with excellent multi-modal access, including transit services, major street network, and pedestrian and bicycle access and connections. The subject property is along Gibson Boulevard, an Urban Principal Arterial, and designated as a Commuter Corridor by the Comprehensive Plan. It is within the designated San Mateo Boulevard Major Transit Corridor area and a 1/2-mile west of the Louisiana Boulevard Major Transit Corridor area.
 - ii. Goal 9.4 Homelessness: Make homelessness rare, short-term, and non-recurring. Applicant Response: The Gateway Center overnight shelter will further Goal 9.4 Homelessness by being a critical component of the City's comprehensive approach to making homelessness rare, short-term, and non-recurring. The City estimates that there are at least 1,525 people in shelters or on the streets in Albuquerque each night, and at least 5,000 households experienced homelessness in 2020. The Gateway Center will address chronic homelessness in Albuquerque by providing safe, dignified emergency shelter within a central, developed area of Albuquerque. In addition, clients will receive wraparound services that help them exit the overnight shelter into stable, permanent housing and other community resources.
 - iii. POLICY 9.4.1: Best Practices: Implement an appropriate and effective model to address chronic homelessness. Applicant Response: The Gateway Center overnight shelter furthers Policy 9.4.1 Best Practices by providing emergency shelter for those experiencing homelessness and work with them to transition into permanent housing. The proposed Gateway Center overnight shelter will function as a "gateway" to end chronic homelessness through the use of three models to effectively transition unhoused community members into housing
 - iv. POLICY 9.4.2 Services: Provide expanded options for shelters and services for people experiencing temporary homelessness. Applicant Response: The proposed Gateway Center overnight shelter will further Policy 9.4.2 Services by expanding options for temporary shelter and services for the City's unhoused populations. Although there are many service providers in Albuquerque that serve the unhoused populations, the City does not currently have a centralized 24/7 center that can connect

unhoused individuals to the support organizations they need, often creating a "gap" in services. By building strong partnerships with existing providers, the City's proposed Gateway Center can serve as a centralized center, allowing for a more efficient connection to essential services and reducing the potential gap in services.

- v. POLICY 9.4.3 Equitable Distribution: Support a network of service points that are easily accessible by residents and workers, geographically distributed throughout the City and County, and proximate to transit. Applicant Response: Locating the proposed Gateway Center overnight shelter at the Gibson Health Hub furthers Policy 9.4.3 Equitable Distribution as reflected in comments from the individuals experiencing homelessness focus groups. The Gateway Center location is accessible to trusted nearby service providers in the International District and is located within the San Mateo Major Transit Corridor area. The proposed Gateway Center is the City's first step towards a dispersed shelter model that will add more shelters and supportive services in other locations within Albuquerque.
- vi. Goal 9.5 Vulnerable Populations: Expand capacity to provide quality housing and services to vulnerable populations. Applicant Response: The proposed Gateway Center will expand the City's capacity to provide services and access to quality housing to vulnerable populations, thereby furthering Goal 9.5 Vulnerable Populations.
- vii. POLICY 9.5.1 Quality Housing: Ensure well maintained, safe transitional and permanent housing for the lowest income households that are most at risk of homelessness. Applicant Response: The proposed Gateway Center furthers Policy 9.5.1 Quality Housing by providing the first step to permanent housing for the most vulnerable in our community. The Time-Limited Model ensures that clients of the overnight shelter have secured permanent housing before they leave the shelter. Low-income clients will have Wraparound services, including case management and assistance securing financial support for housing expenses. The goal of the Gateway Center is to reduce the risk of homelessness by ensuring clients have the support to maintain stable, permanent housing.
- viii. POLICY 9.5.2 Transitional Services: Encourage on-site transitional services with culturally competent service delivery that respects the dignity of individuals and families and fosters self-determination and self-sufficiency, including job training, financial education, and behavioral health assistance. Applicant Response: The services provided at the Gateway Center will support Policy 9.5.2 Transitional Services by providing Wraparound services for individuals and families. The individual leads the team-based, collaborative Wraparound approach to case management. The program is flexible, comprehensive, and can involve a number of organizations. The City will partner with existing community organizations and service providers specializing in delivering culturally competent services that will respect the individual and prepare individualized transition plans.

- b. Opponents of the Application submitted, among other things, the following:
- i. Under “A Vision for Albuquerque & Bernalillo County” page 3-3 “As the county and city grow in population over the next 20 years, neighborhoods will be safer and easier places to walk through and between. The positive characteristics that contribute to their unique identities will be protected and enhanced.” “The City and the County commit to analyzing the health of our communities and the geographic distribution of our public investments and assets. Where gaps are identified, governments will collaborate with communities, nonprofits, public agencies, and private enterprises to address them.” Opponent Response: This request does not help the positive characteristics of the neighborhood as it adds a further potential crime element to the area, (in an area with the highest overall crime in the City) increases the likelihood of encampments along Gibson Blvd, and fails to create a distribution of investments, and assets for the homeless throughout the City.
 - ii. Guiding Principles found on page 3-8 state the following:
 1. **STRONG NEIGHBORHOODS** New development creates desirable places to live and encourages diverse housing and amenities, while respecting the unique history and character of each neighborhood. Opponent Response: does not increase the quality of life as it adds another homeless shelter to Council District 6 which already has the highest number of homeless shelters. This does not increase the quality of life of the residents as the area is suffering from homeless encampments, public urination, defecation and other undesirable activities.
 2. **MOBILITY** Residents have improved options to move throughout Albuquerque for work, school, recreation, and services. Opponent Response: homeless encampments along Zuni make the area difficult to walk as there is extensive amounts of debris on the sidewalks, this particularly affects our residents with disabilities as it creates an additional hazard while they are attempting to get from their home to their destination and back again.
 3. **ECONOMIC VITALITY** The local economy supports a mix of market activities and promotes financial security for all residents. Opponent Response: Economic Vitality is suffering due to high crime in the area. Additionally homeless encampments would not help to encourage new businesses to open in the area.
 4. **EQUITY** All residents have access to good public services, a range of housing options, and healthy places to live, work, learn, and play. Opponent Response: Concentration of homeless services in this sector of the city does not balance negative impact equally across the City.
 5. **COMMUNITY HEALTH** All residents are protected from harm where they live, work, learn, and play. Everyone has convenient access to healthy food, parks and open space, and a wide range of

amenities and services. Opponent Response: Increasing homeless encampments would discourage use of parks and open space.

16. Although opponents point out that homeless and behavioral health services are not spread equally throughout the City, the Comp Plan *“uses the term ‘equity’ to describe ensuring that different people or places have the opportunities, access, and services they most need. Many people think ‘equity’ and ‘equality’ are interchangeable terms. ‘Equality’ aims to ensure that all people or places have the same opportunities, access, and services – a laudable goal. Distributing an equal amount to each would be fair if people and places had the same starting amounts. Discussions of “equity” acknowledge that people and places might need and want different things – and have different starting places. The equity approach involves assessing the different needs that people and places have and prioritizing resources and efforts to address them in the order of urgency that best matches those needs to move toward equality over time.”* See Comp Plan at 4-2. Accordingly, the Comp Plan does not require distribution of resources and unwanted land uses equally throughout the City, but rather institutes the policy that resources and unwanted land uses be located equitably, in consideration of the totality of the circumstances.
17. Further, Comp Plan POLICY 5.3.7 states *“Locally Unwanted Land Uses: Ensure that land uses that are objectionable to immediate neighbors but may be useful to society are located carefully and equitably to ensure that social assets are distributed evenly and social responsibilities are borne fairly across the Albuquerque area. (a) Minimize the impacts of locally unwanted land uses on surrounding areas through policies, regulations, and enforcement. (b) Ensure appropriate setbacks, buffers, and/or design standards to minimize offsite impacts.”* Applicant has demonstrated, by the evidence cited in the Notification of Decision and other evidence in the record, its efforts to locate its proposed overnight shelter carefully and equitably in an area of need surrounded by social and governmental assets, and that its operations will benefit not only people suffering homelessness in the immediate area, but in the community as a whole. Also, Applicant has submitted that policies, regulations, enforcement, setbacks, buffers, and design standards will be implemented to minimize any negative impacts.
18. On balance, the ZHE finds that Applicant has provided a sound justification showing compliance with IDO Section 14-16-6-6(A)(3)(a) based on substantial evidence.
19. Regarding the requirement under IDO Section 14-16-6-6(A)(3)(b) that the requested conditional use comply *“with all applicable provisions of this IDO, including but not limited to any Use-specific Standards applicable to the use in Section 14-16-4-3; the DPM; other adopted City regulations; and any conditions specifically applied to development of the property in a prior permit or approval affecting the property, or there is a condition of approval that any Variances or Waivers needed to comply with any of these provisions must be approved or the Conditional Use Approval will be invalidated pursuant to Subsection [14-16-6-6(A)(2)(c)2]”*:
 - a. Applicant and supporters of the Application submitted, among other things, the following:
 - i. The proposed overnight shelter is allowed under the MX-H zone as a Conditional Use. There are ongoing functions at the Gibson Health Hub that fall under hospital use, which is permissive under the MX-H zone. The proposed Gateway Center overnight shelter will comply with the Use-Specific Standards contained in Section 4-3-(C)(6) Overnight Shelter.

- b. Opponents of the Application submitted, among other things, the following:
 - i. The intent of the MX-H zone is undermined because, in the estimation of opponents, the proposed use is not appropriately sited at the Subject Property.
- 20. On balance, the ZHE finds that Applicant has provided a sound justification showing compliance with IDO Section 14-16-6-6(A)(3)(b) based on substantial evidence.
- 21. Regarding the requirement under IDO Section 14-16-6-6(A)(3)(c) that the requested conditional use “*will not create significant adverse impacts on adjacent properties, the surrounding neighborhood, or the larger community*”:
 - a. Applicant and supporters of the Application submitted, among other things, the following:
 - i. By providing secure shelter and services for individuals living in vulnerable situations, the Gateway Center will positively impact the adjacent properties, surrounding neighborhoods, and the larger community that are currently dealing with the unhoused population.
 - ii. The City has been working diligently on the draft Operations Plan for the Gateway Center, which is attached to the Application and posted on the City's website (www.cabq.gov/gateway) as of 7/3/2021. The draft Operations Plan addresses many community concerns, including impacts on adjacent properties, surrounding neighborhoods, and the larger community, and contains provisions concerning, among other things:
 - 1. Transportation - A shuttle system will be in place to transport referred guests for intake and assessment as well as transport guests to their exit destination, with pick-up and drop-off points at the Gateway Center.
 - 2. Secure entrance - The Gateway Center will have a secured entrance that is staffed 24 hours a day, 7 days a week, to ensure only enrolled guests, staff, and volunteers enter the facility.
 - 3. Physical design - The Gateway Center will utilize Trauma-informed Design and Crime Prevention through Environmental Design (CPTED) design principles. The City's intent is to upgrade all building-mounted lighting and parking lot lighting prior to opening the Gateway Center. Appropriate fencing, landscaping, and other design features will be incorporated to ensure curb appeal and low visual impact.
 - 4. Security - Onsite professional security is currently provided at the Gibson Health Hub and will continue to be once the Gateway Center is open.
 - 5. Weapons - Weapons will not be allowed at the Gateway Center.
 - 6. Entry and Exit - A team of intake officers and front desk staff will be stationed at the entrance, with only enrolled shelter guests, staff, program staff and volunteers, and registered partner agency staff and volunteers allowed to enter the facility.
 - 7. Shelter capacity - If the Gateway Center reaches capacity, single adults seeking shelter will be referred to the Westside Emergency Housing Center or other appropriate shelter options. Transportation

will be provided, if needed. Emergency overflow for families will be established in the community or through the use of motel vouchers.

8. Critical Incidence Response - Procedures addressing threats and assaults to clients and staff will be established. Guests that threaten or assault another client or staff will be exited from the Gateway Center and will receive transportation to their exit destination. In addition, de-escalation procedures will be established, with staff receiving training in conflict resolution and de-escalation techniques. The procedures will address the appropriate use of the Albuquerque Police Department resources to resolve safety issues at the Gateway Center.
9. Trash removal - The Solid Waste Department will clean and remove trash on a daily basis from surrounding areas, including sidewalks, bus stops, store fronts, and area parks.
10. Pedestrian safety - Pedestrian crosswalks in the vicinity of the Gateway Center will be improved to promote use, ease, and safety of crossing roadways. Roadway medians will be improved to prevent jaywalking.
11. Encampments - Encampments are expressly prohibited on the Gibson Health Hub property. The Family and Community Services public outreach team will monitor a 14-mile radius for encampments on public and private property. The public outreach team will refer encampments on private property to the City's Code Enforcement Division and a notice for encampments on public property will be posted by the public outreach team on the same day the encampment is observed.
12. Good Neighbor Agreement - The City intends to enter into a Good Neighbor Agreement with the Elder Homestead, Parkland Hills, Siesta Hills, South San Pedro, and Trumbull neighborhood associations. The following will be established through the Good Neighbor Agreement:
 - a. A phone number where residents can report any issues related to the Gateway Center.
 - b. A community dispute resolution process.
13. A Neighborhood Advisory Committee. The Agreement will set the membership of the Committee, which will include neighborhood representatives, City representatives from the organization(s) operating the Gateway Center, and current or former guests of the Gateway Center. The Committee will meet at least quarterly and will issue an annual survey to community members. The Committee will review and update as needed the Good Neighbor Agreement annually. The Neighborhood Advisory Committee will review baseline data and information over time to provide feedback on high impact strategies to keep community, staff, and clients safe.

- b. Opponents of the Application submitted, among other things, the following:
 - i. The operations plan is merely a draft and the community has no guaranties as to what the final version, if any, will contain.
 - ii. The Good neighbor Agreement has not been finalized and signed, and the community has no guaranties as to what the final version, if any, will contain.
 - iii. Articles have shown that crime increases in the area of overnight shelters (however, the research cited was not done on permanent shelters).
- 22. Applicant's justification showing compliance with IDO Section 14-16-6-6(A)(3)(c) is based largely on its draft operations plan.
- 23. Regarding the requirement under IDO Section 14-16-6-6(A)(3)(d) that the requested conditional use *"will not create material adverse impacts on other land in the surrounding area through increases in traffic congestion, parking congestion, noise, or vibration without sufficient mitigation or civic or environmental benefits that outweigh the expected impacts"*:
 - a. Applicant and supporters of the Application submitted, among other things, the following:
 - i. Development of the Gateway Center will focus on interior renovations. No increases in noise or vibrations will occur or create adverse impacts to the surrounding area. People utilizing the services at the Gateway Center will primarily be relying on shuttles from pick-up locations and service provider facilities, and public bus transit, which will decrease the potential for traffic congestion. The site contains large parking areas, which are more than adequate to support the parking needs of the Gateway Center and the existing tenants.
 - b. Opponents of the Application submitted, among other things, the following:
 - i. The Gateway Center will attract homeless and other pedestrians that will have an increased burden on traffic safety and congestion.
- 24. IDO Table 5-5-1 contains no off-street parking requirement for an overnight shelter.
- 25. On balance, the ZHE finds that Applicant has provided a sound justification showing compliance with IDO Section 14-16-6-6(A)(3)(d) based on substantial evidence.
- 26. Regarding the requirement under IDO Section 14-16-6-6(A)(3)(e) that *"on a project site with existing uses, [the requested conditional use] will not increase non-residential activity within 300 feet in any direction of a lot in any Residential zone district between the hours of 10:00 P.M. and 6:00 A.M."*:
 - a. Applicant and supporters of the Application submitted, among other things, the following:
 - i. The overnight shelter use at the Gibson Health Hub will not increase non-residential activity within 300 feet of a residential zone district between the hours of 10:00 P.M. and 6:00 A.M. The overnight shelter use will be a relatively small portion of the Gibson Health Hub premise. The initial phase of the Gateway Shelter is anticipated to limit intakes to between 8:00 A.M to 8:00 P.M. for most community partner referrals, but intakes will be conducted at all hours for referrals from hospitals, first responders, and law enforcement. The intake activity will be more than 500 feet from the R-ML zoned property to the east and buffered by a large parking lot.

The closest apartment building within the R-ML site is setback approximately 67 feet east of its shared property line with the Gibson Health Hub. These existing physical conditions and separation between uses, and operating procedures will ensure the adjacent residential use will not be impacted by the overnight shelter use at the Gibson Health Hub facility.

- b. Opponents of the Application submitted, among other things, the following:
 - i. The proposed overnight shelter will operate 24 hours a day.
- 27. On balance, the ZHE finds that Applicant has provided a sound justification showing compliance with IDO Section 14-16-6-6(A)(3)(e) based on substantial evidence.
- 28. Regarding the requirement under IDO Section 14-16-6-6(A)(3)(f) that the requested conditional use “*will not negatively impact pedestrian or transit connectivity without appropriate mitigation*”:
 - a. Applicant and supporters of the Application submitted, among other things, the following: The Gateway Center overnight shelter will draw pedestrians, transit riders, shuttles, and vehicles to the site. Impacts on pedestrian and transit connectivity will be appropriately mitigated by various City departments through services and actions that include:
 - i. Shuttle service to and from the site from designated pick-up sites and community partner organizations;
 - ii. Designated onsite pick-up and drop-off location;
 - iii. Evaluation and prioritization of improvements to sidewalks, pedestrian crossings, and medians in Gibson Boulevard and San Mateo by the Department of Municipal Development to ensure pedestrians, neighborhood residents, and visitors have a safe and comfortable walking experience in the area;
 - iv. Evaluation and potential modification to existing transit routes by the City Transit Department to accommodate a potential increase in ridership; and
 - v. Conducting a speed study of Gibson Boulevard and taking appropriate measures as determined by the study.
 - b. Opponents of the Application submitted, among other things, the following:
 - i. The Gateway Center will attract homeless and other pedestrians that will have an increased burden on traffic safety and congestion.
- 29. On balance, the ZHE finds that Applicant has provided a sound justification showing compliance with IDO Section 14-16-6-6(A)(3)(f) based on substantial evidence.
- 30. The City Traffic Engineering Division stated no objection to the Application.
- 31. IDO Section 14-16-4-3(C)(6) requires the following Use-Specific Standards for an Overnight Shelter: *This use is prohibited within 1,500 feet in any direction of any other overnight shelter.*
- 32. Applicant has satisfied the use specific criteria by establishing that no other overnight shelter is located within 1,500 feet in any direction of the Subject Property, as the closest overnight shelter to the Subject Property is located 2,308 feet away.
- 33. It would appear that Applicant has met its burdens of providing a sound justification for the requested decision, and of showing compliance with required standards, based on substantial evidence. However, Applicant’s justification showing compliance with IDO Section 14-16-6-6(A)(3)(c) (that the requested conditional use “*will not create significant*

adverse impacts on adjacent properties, the surrounding neighborhood, or the larger community”) is based largely on Applicant’s draft operations plan, which draft would appear subject to change until finalized.

34. This matter should be deferred to allow Applicant the opportunity to finalize and adopt the operations plan on which rests a significant portion of the justification of the Application.

DECISION:

CONTINUANCE of the Application to the ZHE hearing to take place on October 19, 2021, which begins at 9:00 a.m.

APPEAL:

If you wish to appeal this decision, you must do so by October 21, 2021 pursuant to Section 14-16-6-4(V), of the Integrated Development Ordinance, you must demonstrate that you have legal standing to file an appeal as defined.

Successful applicants are reminded that other regulations of the City must be complied with, even after approval of a special exception is secured. This decision does not constitute approval of plans for a building permit. If your application is approved, bring this decision with you when you apply for any related building permit or occupation tax number. Approval of a conditional use or a variance application is void after one year from date of approval if the rights and privileges are granted, thereby have not been executed, or utilized.



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CITY OF ALBUQUERQUE
OFFICE OF ADMINISTRATIVE HEARINGS
ZONING HEARING EXAMINER
NOTIFICATION OF DECISION
AMENDED

City of Albuquerque Family and Community Services (Agent, Consensus Planning) requests a conditional use to allow an overnight shelter for Lot 1, Swift Addn, located at 5006 Gibson BLVD SE, zoned MX-H [Section 14-16-4-2]

Special Exception No:..... **VA-2021-00317**
Project No: **Project#2021-005834**
Hearing Date: 10-19-21
Closing of Public Record: 10-19-21
Date of Decision: 11-03-21

On the 19th day of October, 2021, Consensus Planning, agent for property owner, City of Albuquerque Family and Community Services (“Applicant”) appeared before the Zoning Hearing Examiner (“ZHE”) requesting a conditional use to allow an overnight shelter (“Application”) upon the real property located at 5006 Gibson BLVD SE (“Subject Property”). Below are the ZHE’s finding of fact and decision:

FINDINGS:

1. Applicant is requesting a conditional use to allow an overnight shelter.
2. The City of Albuquerque City of Albuquerque Integrated Development Ordinance (“IDO”), Section 14-16-7-1 defines an overnight shelter as “*A facility that provides sleeping accommodations for 6 or more persons for a period of less than 24 hours with no charge or a charge substantially less than market value; it may provide meals and social services. Any such facility open to clients between 10:00 P.M. and 7:00 A.M. is considered an overnight shelter.*”
3. The Subject Property is zoned MX-H, the purpose of which under the IDO is to “*provide for large-scale destination retail and high-intensity commercial, residential, light industrial, and institutional uses, as well as high-density residential uses, particularly along Transit Corridors and in Urban Centers. The MX-H zone district is intended to allow higher-density infill development in appropriate locations.*”
4. Table 4-2-1 of the IDO states that an overnight shelter in the MX-H zone requires a conditional use approval.
5. IDO Section 14-16-6-6(A)(3) (Review and Decision Criteria– Conditional Use) reads: “*An application for a Conditional Use Approval shall be approved if it meets all of the following criteria:*
 - (a) *It is consistent with the ABC Comp. Plan, as amended;*
 - (b) *It complies with all applicable provisions of this IDO, including but not limited to any Use-specific Standards applicable to the use in Section 14-16-4-3; the DPM; other adopted City regulations; and any conditions specifically applied to development of the property in a prior permit or approval affecting the property, or there is a condition of approval that any Variances or Waivers needed to*

comply with any of these provisions must be approved or the Conditional Use Approval will be invalidated pursuant to Subsection (2)(c)2 above.

- (c) *It will not create significant adverse impacts on adjacent properties, the surrounding neighborhood, or the larger community.*
 - (d) *It will not create material adverse impacts on other land in the surrounding area through increases in traffic congestion, parking congestion, noise, or vibration without sufficient mitigation or civic or environmental benefits that outweigh the expected impacts.*
 - (e) *On a project site with existing uses, it will not increase non-residential activity within 300 feet in any direction of a lot in any Residential zone district between the hours of 10:00 P.M. and 6:00 A.M.*
 - (f) *It will not negatively impact pedestrian or transit connectivity without appropriate mitigation.*
6. The applicant bears the burden of providing a sound justification for the requested decision, based on substantial evidence, pursuant to IDO Section 14-16-6-4(E)(3).
 7. The applicant bears the burden of showing compliance with required standards through analysis, illustrations, or other exhibits as necessary, pursuant to IDO Section 14-16-6-4(E)(4).
 8. Applicant timely submitted a written authorization for Agent to act on Applicant's behalf.
 9. Applicant's community outreach regarding the proposed Gateway Center dates back to 2018, and that outreach utilized community input sessions, online surveys, focus groups with people experiencing homelessness, and neighborhood community meetings.
 10. On March 15, 2021, the Albuquerque City Council approved Resolution R-21-141, which required two community input sessions within 45 days and advancement towards a Good Neighbor Agreement by the City with area residents and businesses to be in place for so long as the Gateway Center operates at the Gibson Health Hub site. The City held the two community input meetings on June 10 and June 12, 2021. The first meeting was held online and the second was held at the Gibson Health Hub Educational Building. Input from the meetings is posted on the City website at www.cabq.gov/gateway.
 11. Applicant provided evidence that all property owners and neighborhood associations entitled to notice were notified of the Application. Although a neighboring business owner complained that he did not receive notice, his business was not listed on the list of properties located within the required notice perimeter pursuant to the IDO, and it appears from evidence in the record, including without limitation the perimeter buffer map for the Subject Property, that the complainant's business is located outside the required notice perimeter. Further, the complainant clearly had notice, given that he submitted written evidence before the ZHE hearing and oral testimony at the ZHE hearing. Based on evidence in the record, Application provided the required timely notice to all property owners whose properties are within the required notice perimeter. Opponents submitted a petition signed by business owners who complained of inadequate notice. Nevertheless, based on evidence of mailings, emails, publication, and sign porting, the ZHE finds that the notice given by Applicant was compliant with the requirements of the IDO.
 12. Applicant timely mailed neighborhood meeting requests on June 4, 2021.
 13. On June 22, 2021, the City Land Use Facilitation Program conducted a facilitated pre-application meeting with community members, online via Zoom, to which were invited representatives of the affected neighborhood associations and the community at large.

According to the facilitated meeting report dated June 24, 2021, approximately 98 people registered for the meeting and as many as 80 participated in the meeting at the highest participation.

14. Applicant attended a pre-application meeting with City staff on June 29, 2021.
15. Regarding the requirement under IDO Section 14-16-6-6(A)(3)(a) that the requested conditional use be “*consistent with the ABC Comp. Plan, as amended*”:
 - a. Applicant and supporters of the Application submitted, among other things, the following:
 - i. Goal 6.2 Multi-Modal System: Encourage walking, biking, and transit, especially at peak-hour commuting times, to enhance access and mobility for people of all ages and abilities. Applicant Response: The proposed Gateway Center overnight shelter at the Gibson Health Hub furthers Goal 6.2 Multi-Modal System by placing it in an area with excellent multi-modal access, including transit services, major street network, and pedestrian and bicycle access and connections. The subject property is along Gibson Boulevard, an Urban Principal Arterial, and designated as a Commuter Corridor by the Comprehensive Plan. It is within the designated San Mateo Boulevard Major Transit Corridor area and a 1/2-mile west of the Louisiana Boulevard Major Transit Corridor area.
 - ii. Goal 9.4 Homelessness: Make homelessness rare, short-term, and non-recurring. Applicant Response: The Gateway Center overnight shelter will further Goal 9.4 Homelessness by being a critical component of the City's comprehensive approach to making homelessness rare, short-term, and non-recurring. The City estimates that there are at least 1,525 people in shelters or on the streets in Albuquerque each night, and at least 5,000 households experienced homelessness in 2020. The Gateway Center will address chronic homelessness in Albuquerque by providing safe, dignified emergency shelter within a central, developed area of Albuquerque. In addition, clients will receive wraparound services that help them exit the overnight shelter into stable, permanent housing and other community resources.
 - iii. POLICY 9.4.1: Best Practices: Implement an appropriate and effective model to address chronic homelessness. Applicant Response: The Gateway Center overnight shelter furthers Policy 9.4.1 Best Practices by providing emergency shelter for those experiencing homelessness and work with them to transition into permanent housing. The proposed Gateway Center overnight shelter will function as a "gateway" to end chronic homelessness through the use of three models to effectively transition unhoused community members into housing
 - iv. POLICY 9.4.2 Services: Provide expanded options for shelters and services for people experiencing temporary homelessness. Applicant Response: The proposed Gateway Center overnight shelter will further Policy 9.4.2 Services by expanding options for temporary shelter and services for the City's unhoused populations. Although there are many service providers in Albuquerque that serve the unhoused populations, the City does not currently have a centralized 24/7 center that can connect

unhoused individuals to the support organizations they need, often creating a "gap" in services. By building strong partnerships with existing providers, the City's proposed Gateway Center can serve as a centralized center, allowing for a more efficient connection to essential services and reducing the potential gap in services.

- v. POLICY 9.4.3 Equitable Distribution: Support a network of service points that are easily accessible by residents and workers, geographically distributed throughout the City and County, and proximate to transit. Applicant Response: Locating the proposed Gateway Center overnight shelter at the Gibson Health Hub furthers Policy 9.4.3 Equitable Distribution as reflected in comments from the individuals experiencing homelessness focus groups. The Gateway Center location is accessible to trusted nearby service providers in the International District and is located within the San Mateo Major Transit Corridor area. The proposed Gateway Center is the City's first step towards a dispersed shelter model that will add more shelters and supportive services in other locations within Albuquerque.
- vi. Goal 9.5 Vulnerable Populations: Expand capacity to provide quality housing and services to vulnerable populations. Applicant Response: The proposed Gateway Center will expand the City's capacity to provide services and access to quality housing to vulnerable populations, thereby furthering Goal 9.5 Vulnerable Populations.
- vii. POLICY 9.5.1 Quality Housing: Ensure well maintained, safe transitional and permanent housing for the lowest income households that are most at risk of homelessness. Applicant Response: The proposed Gateway Center furthers Policy 9.5.1 Quality Housing by providing the first step to permanent housing for the most vulnerable in our community. The Time-Limited Model ensures that clients of the overnight shelter have secured permanent housing before they leave the shelter. Low-income clients will have Wraparound services, including case management and assistance securing financial support for housing expenses. The goal of the Gateway Center is to reduce the risk of homelessness by ensuring clients have the support to maintain stable, permanent housing.
- viii. POLICY 9.5.2 Transitional Services: Encourage on-site transitional services with culturally competent service delivery that respects the dignity of individuals and families and fosters self-determination and self-sufficiency, including job training, financial education, and behavioral health assistance. Applicant Response: The services provided at the Gateway Center will support Policy 9.5.2 Transitional Services by providing Wraparound services for individuals and families. The individual leads the team-based, collaborative Wraparound approach to case management. The program is flexible, comprehensive, and can involve a number of organizations. The City will partner with existing community organizations and service providers specializing in delivering culturally competent services that will respect the individual and prepare individualized transition plans.

- b. Opponents of the Application submitted, among other things, the following:
- i. Under “A Vision for Albuquerque & Bernalillo County” page 3-3 “As the county and city grow in population over the next 20 years, neighborhoods will be safer and easier places to walk through and between. The positive characteristics that contribute to their unique identities will be protected and enhanced.” “The City and the County commit to analyzing the health of our communities and the geographic distribution of our public investments and assets. Where gaps are identified, governments will collaborate with communities, nonprofits, public agencies, and private enterprises to address them.” Opponent Response: This request does not help the positive characteristics of the neighborhood as it adds a further potential crime element to the area, (in an area with the highest overall crime in the City) increases the likelihood of encampments along Gibson Blvd, and fails to create a distribution of investments, and assets for the homeless throughout the City.
 - ii. Guiding Principles found on page 3-8 state the following:
 1. **STRONG NEIGHBORHOODS** New development creates desirable places to live and encourages diverse housing and amenities, while respecting the unique history and character of each neighborhood. Opponent Response: does not increase the quality of life as it adds another homeless shelter to Council District 6 which already has the highest number of homeless shelters. This does not increase the quality of life of the residents as the area is suffering from homeless encampments, public urination, defecation and other undesirable activities.
 2. **MOBILITY** Residents have improved options to move throughout Albuquerque for work, school, recreation, and services. Opponent Response: homeless encampments along Zuni make the area difficult to walk as there is extensive amounts of debris on the sidewalks, this particularly affects our residents with disabilities as it creates an additional hazard while they are attempting to get from their home to their destination and back again.
 3. **ECONOMIC VITALITY** The local economy supports a mix of market activities and promotes financial security for all residents. Opponent Response: Economic Vitality is suffering due to high crime in the area. Additionally homeless encampments would not help to encourage new businesses to open in the area.
 4. **EQUITY** All residents have access to good public services, a range of housing options, and healthy places to live, work, learn, and play. Opponent Response: Concentration of homeless services in this sector of the city does not balance negative impact equally across the City.
 5. **COMMUNITY HEALTH** All residents are protected from harm where they live, work, learn, and play. Everyone has convenient access to healthy food, parks and open space, and a wide range of

amenities and services. Opponent Response: Increasing homeless encampments would discourage use of parks and open space.

16. Although opponents point out that homeless and behavioral health services are not spread equally throughout the City, the Comp Plan *“uses the term ‘equity’ to describe ensuring that different people or places have the opportunities, access, and services they most need. Many people think ‘equity’ and ‘equality’ are interchangeable terms. ‘Equality’ aims to ensure that all people or places have the same opportunities, access, and services – a laudable goal. Distributing an equal amount to each would be fair if people and places had the same starting amounts. Discussions of “equity” acknowledge that people and places might need and want different things – and have different starting places. The equity approach involves assessing the different needs that people and places have and prioritizing resources and efforts to address them in the order of urgency that best matches those needs to move toward equality over time.”* See Comp Plan at 4-2. Accordingly, the Comp Plan does not require distribution of resources and unwanted land uses equally throughout the City, but rather institutes the policy that resources and unwanted land uses be located equitably, in consideration of the totality of the circumstances.
17. Further, Comp Plan POLICY 5.3.7 states *“Locally Unwanted Land Uses: Ensure that land uses that are objectionable to immediate neighbors but may be useful to society are located carefully and equitably to ensure that social assets are distributed evenly and social responsibilities are borne fairly across the Albuquerque area. (a) Minimize the impacts of locally unwanted land uses on surrounding areas through policies, regulations, and enforcement. (b) Ensure appropriate setbacks, buffers, and/or design standards to minimize offsite impacts.”* Applicant has demonstrated, by the evidence cited in the Notification of Decision and other evidence in the record, its efforts to locate its proposed overnight shelter carefully and equitably in an area of need surrounded by social and governmental assets, and that its operations will benefit not only people suffering homelessness in the immediate area, but in the community as a whole. Also, Applicant has submitted that policies, regulations, enforcement, setbacks, buffers, and design standards will be implemented to minimize any negative impacts.
18. On balance, the ZHE finds that Applicant has provided a sound justification showing compliance with IDO Section 14-16-6-6(A)(3)(a) based on substantial evidence.
19. Regarding the requirement under IDO Section 14-16-6-6(A)(3)(b) that the requested conditional use comply *“with all applicable provisions of this IDO, including but not limited to any Use-specific Standards applicable to the use in Section 14-16-4-3; the DPM; other adopted City regulations; and any conditions specifically applied to development of the property in a prior permit or approval affecting the property, or there is a condition of approval that any Variances or Waivers needed to comply with any of these provisions must be approved or the Conditional Use Approval will be invalidated pursuant to Subsection [14-16-6-6(A)(2)(c)2]”*:
 - a. Applicant and supporters of the Application submitted, among other things, the following:
 - i. The proposed overnight shelter is allowed under the MX-H zone as a Conditional Use. There are ongoing functions at the Gibson Health Hub that fall under hospital use, which is permissive under the MX-H zone. The proposed Gateway Center overnight shelter will comply with the Use-Specific Standards contained in Section 4-3-(C)(6) Overnight Shelter.

- b. Opponents of the Application submitted, among other things, the following:
 - i. The intent of the MX-H zone is undermined because, in the estimation of opponents, the proposed use is not appropriately sited at the Subject Property.
- 20. On balance, the ZHE finds that Applicant has provided a sound justification showing compliance with IDO Section 14-16-6-6(A)(3)(b) based on substantial evidence.
- 21. Regarding the requirement under IDO Section 14-16-6-6(A)(3)(c) that the requested conditional use “*will not create significant adverse impacts on adjacent properties, the surrounding neighborhood, or the larger community*”:
 - a. Applicant and supporters of the Application submitted, among other things, the following:
 - i. By providing secure shelter and services for individuals living in vulnerable situations, the Gateway Center will positively impact the adjacent properties, surrounding neighborhoods, and the larger community that are currently dealing with the unhoused population.
 - ii. Applicant has worked diligently on and adopted a final Operations Plan for the Gateway Center, which was attached in draft form to the Application and was posted on the City's website (www.cabq.gov/gateway) as of 7/3/2021. Because the Operations Plan before the ZHE at the September 21, 2021 ZHE hearing was still only in draft form, the ZHE continued the hearing on the Application from the September 21, 2021 ZHE hearing to be heard at the October 19, 2021 ZHE hearing. Prior to the October 19, 2021 ZHE hearing, Applicant finalized and adopted the Operations Plan and timely submitted it into the ZHE record on the Application, where it has been available for public inspection. The final Operations Plan addresses many community concerns, including impacts on adjacent properties, surrounding neighborhoods, and the larger community, and contains provisions concerning, among other things:
 - 1. Transportation -A shuttle system will be in place to transport referred guests for intake and assessment as well as transport guests to their exit destination, with pick-up and drop-off points at the Gateway Center.
 - 2. Secure entrance - The Gateway Center will have a secured entrance that is staffed 24 hours a day, 7 days a week, to ensure only enrolled guests, staff, and volunteers enter the facility.
 - 3. Physical design - The Gateway Center will utilize Trauma-informed Design and Crime Prevention through Environmental Design (CPTED) design principles. The City's intent is to upgrade all building-mounted lighting and parking lot lighting prior to opening the Gateway Center. Appropriate fencing, landscaping, and other design features will be incorporated to ensure curb appeal and low visual impact.
 - 4. Security - Onsite professional security is currently provided at the Gibson Health Hub and will continue to be once the Gateway Center is open.

5. Weapons - Weapons will not be allowed at the Gateway Center.
6. Entry and Exit - A team of intake officers and front desk staff will be stationed at the entrance, with only enrolled shelter guests, staff, program staff and volunteers, and registered partner agency staff and volunteers allowed to enter the facility.
7. Shelter capacity - If the Gateway Center reaches capacity, single adults seeking shelter will be referred to the Westside Emergency Housing Center or other appropriate shelter options. Transportation will be provided, if needed. Emergency overflow for families will be established in the community or through the use of motel vouchers.
8. Critical Incidence Response - Procedures addressing threats and assaults to clients and staff will be established. Guests that threaten or assault another client or staff will be exited from the Gateway Center and will receive transportation to their exit destination. In addition, de-escalation procedures will be established, with staff receiving training in conflict resolution and de-escalation techniques. The procedures will address the appropriate use of the Albuquerque Police Department resources to resolve safety issues at the Gateway Center.
9. Trash removal - The Solid Waste Department will clean and remove trash on a daily basis from surrounding areas, including sidewalks, bus stops, store fronts, and area parks.
10. Pedestrian safety - Pedestrian crosswalks in the vicinity of the Gateway Center will be improved to promote use, ease, and safety of crossing roadways. Roadway medians will be improved to prevent jaywalking.
11. Encampments - Encampments are expressly prohibited on the Gibson Health Hub property. The Family and Community Services public outreach team will monitor a 1/4-mile radius for encampments on public and private property. The public outreach team will refer encampments on private property to the City's Code Enforcement Division and a notice for encampments on public property will be posted by the public outreach team on the same day the encampment is observed.
12. Good Neighbor Agreement - The City intends to enter into a Good Neighbor Agreement with the Elder Homestead, Parkland Hills, Siesta Hills, South San Pedro, and Trumbull neighborhood associations. The following will be established through the Good Neighbor Agreement:
 - a. A phone number where residents can report any issues related to the Gateway Center.
 - b. A community dispute resolution process.
13. A Neighborhood Advisory Committee. The Agreement will set the membership of the Committee, which will include neighborhood representatives, City representatives from the organization(s)

operating the Gateway Center, and current or former guests of the Gateway Center. The Committee will meet at least quarterly and will issue an annual survey to community members. The Committee will review and update as needed the Good Neighbor Agreement annually. The Neighborhood Advisory Committee will review baseline data and information over time to provide feedback on high impact strategies to keep community, staff, and clients safe.

- b. Opponents of the Application submitted, among other things, the following:
 - i. The Good neighbor Agreement has not been finalized and signed, and the community has no guaranties as to what the final version, if any, will contain.
 - ii. Articles have shown that crime increases in the area of overnight shelters (however, the research cited was not done on permanent shelters).
- 22. On balance, the ZHE finds that Applicant has provided a sound justification showing compliance with IDO Section 14-16-6-6(A)(3)(c) based on substantial evidence.
- 23. Regarding the requirement under IDO Section 14-16-6-6(A)(3)(d) that the requested conditional use “*will not create material adverse impacts on other land in the surrounding area through increases in traffic congestion, parking congestion, noise, or vibration without sufficient mitigation or civic or environmental benefits that outweigh the expected impacts*”:
 - a. Applicant and supporters of the Application submitted, among other things, the following:
 - i. Development of the Gateway Center will focus on interior renovations. No increases in noise or vibrations will occur or create adverse impacts to the surrounding area. People utilizing the services at the Gateway Center will primarily be relying on shuttles from pick-up locations and service provider facilities, and public bus transit, which will decrease the potential for traffic congestion. The site contains large parking areas, which are more than adequate to support the parking needs of the Gateway Center and the existing tenants.
 - b. Opponents of the Application submitted, among other things, the following:
 - i. The Gateway Center will attract homeless and other pedestrians that will have an increased burden on traffic safety and congestion.
- 24. IDO Table 5-5-1 contains no off-street parking requirement for an overnight shelter.
- 25. On balance, the ZHE finds that Applicant has provided a sound justification showing compliance with IDO Section 14-16-6-6(A)(3)(d) based on substantial evidence.
- 26. Regarding the requirement under IDO Section 14-16-6-6(A)(3)(e) that “*on a project site with existing uses, [the requested conditional use] will not increase non-residential activity within 300 feet in any direction of a lot in any Residential zone district between the hours of 10:00 P.M. and 6:00 A.M.*”:
 - a. Applicant and supporters of the Application submitted, among other things, the following:
 - i. The overnight shelter use at the Gibson Health Hub will not increase non-residential activity within 300 feet of a residential zone district between the hours of 10:00 P.M. and 6:00 A.M. The overnight shelter use will be a

relatively small portion of the Gibson Health Hub premise. The initial phase of the Gateway Shelter is anticipated to limit intakes to between 8:00 A.M to 8:00 P.M. for most community partner referrals, but intakes will be conducted at all hours for referrals from hospitals, first responders, and law enforcement. The intake activity will be more than 500 feet from the R-ML zoned property to the east and buffered by a large parking lot. The closest apartment building within the R-ML site is setback approximately 67 feet east of its shared property line with the Gibson Health Hub. These existing physical conditions and separation between uses, and operating procedures will ensure the adjacent residential use will not impacted by the overnight shelter use at the Gibson Health Hub facility.

- b. Opponents of the Application submitted, among other things, the following:
 - i. The proposed overnight shelter will operate 24 hours a day.
- 27. On balance, the ZHE finds that Applicant has provided a sound justification showing compliance with IDO Section 14-16-6-6(A)(3)(e) based on substantial evidence.
- 28. Regarding the requirement under IDO Section 14-16-6-6(A)(3)(f) that the requested conditional use “*will not negatively impact pedestrian or transit connectivity without appropriate mitigation*”:
 - a. Applicant and supporters of the Application submitted, among other things, the following: The Gateway Center overnight shelter will draw pedestrians, transit riders, shuttles, and vehicles to the site. Impacts on pedestrian and transit connectivity will be appropriately mitigated by various City departments through services and actions that include:
 - i. Shuttle service to and from the site from designated pick-up sites and community partner organizations;
 - ii. Designated onsite pick-up and drop-off location;
 - iii. Evaluation and prioritization of improvements to sidewalks, pedestrian crossings, and medians in Gibson Boulevard and San Mateo by the Department of Municipal Development to ensure pedestrians, neighborhood residents, and visitors have a safe and comfortable walking experience in the area;
 - iv. Evaluation and potential modification to existing transit routes by the City Transit Department to accommodate a potential increase in ridership; and
 - v. Conducting a speed study of Gibson Boulevard and taking appropriate measures as determined by the study.
 - b. Opponents of the Application submitted, among other things, the following:
 - i. The Gateway Center will attract homeless and other pedestrians that will have an increased burden on traffic safety and congestion.
- 29. On balance, the ZHE finds that Applicant has provided a sound justification showing compliance with IDO Section 14-16-6-6(A)(3)(f) based on substantial evidence.
- 30. The City Traffic Engineering Division stated no objection to the Application.
- 31. IDO Section 14-16-4-3(C)(6) requires the following Use-Specific Standards for an Overnight Shelter: *This use is prohibited within 1,500 feet in any direction of any other overnight shelter.*

32. Applicant has satisfied the use specific criteria by establishing that no other overnight shelter is located within 1,500 feet in any direction of the Subject Property, as the closest overnight shelter to the Subject Property is located 2,308 feet away.

DECISION:

APPROVAL of a conditional use to allow an overnight shelter.

APPEAL:

If you wish to appeal this decision, you must do so by November 18, 2021 pursuant to Section 14-16-6-4(V), of the Integrated Development Ordinance, you must demonstrate that you have legal standing to file an appeal as defined.

Successful applicants are reminded that other regulations of the City must be complied with, even after approval of a special exception is secured. This decision does not constitute approval of plans for a building permit. If your application is approved, bring this decision with you when you apply for any related building permit or occupation tax number. Approval of a conditional use or a variance application is void after one year from date of approval if the rights and privileges are granted, thereby have not been executed, or utilized.



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EXHIBIT N

Date: September 14, 2021

Attn: Robert Lucero, Zoning Hearing Examiner

Please find enclosed the Written Statement (pg. 1 – 13) and Supporting Evidence (pg. 14 – 218) submitted by the Homelessness Solutions Committee of Parkland Hills Neighborhood Association regarding the Family & Community Services' application for a Conditional Use Permit for the City of Albuquerque's proposed Gateway Center at 5400 and 5006 Gibson Blvd SE

WRITTEN STATEMENT: SUMMARY

As an adjoining neighborhood to the proposed Gateway facility, we stand behind the ideals of the Gateway center to help the unhoused of our community. We see the need for more facilities to help those experiencing homelessness in our City, and believe these facilities are needed throughout our City. That said, we do feel the process to apply for the Conditional Use Permit at 5400 and 5006 Gibson Blvd SE has been rushed – many details for an adequate Operational Plan ensuring Gateway is impactful for the homeless population, along with strategies for mitigating significant adverse impacts to the surrounding community, are still undeveloped. Furthermore, the applicant failed to meet the requirements outlined in the IDO for submission of a Conditional Use Permit application. Therefore, though we understand the need and the desire to help our unhoused neighbors, Parkland Hills requests that you reject the City of Albuquerque Family & Community Service's Conditional Use Permit application for 5400 and 5006 Gibson Blvd on the grounds that the applicant did not adequately complete the IDO's submission process.

The applicant failed to meet the protocols set forth in the IDO for a pre-submittal meeting with our neighborhood as per IDO 6-4(C)(3) & IDO 6-4(C)(4). As an adjoining neighborhood, Parkland Hills did not receive "a meeting request," as mandated in IDO 6-4(C)(3), but rather, received a meeting notice "as a courtesy." Additionally, Parkland Hills was not involved in selecting the date for a pre-submittal meeting; the date was not "agreed upon" (IDO 6-4(C)(4), but rather, was determined by the applicant. Parkland Hills Neighborhood Association [PHNA] President Rob Leming wrote a letter to Consensus Planning and the City addressing this error, to which Jacqueline Fishman of Consensus Planning responded on June 18, 2021, stating Leming was correct and "that Parkland Hills should be considered an 'affected neighborhood association' to be notified." **[All correspondence found in Appendix A]**

Additionally, though they abandoned proper protocol for the pre-submittal meeting, a meeting did occur on June 22, 2021, and the applicant failed to address questions and provide the information mandated in IDO 6-4(C)(6), including but not limited to, "scope of uses, approximate square footages for different uses, general site layout, design guidelines, etc," which is reflected in the Facilitated Meeting Report **[First item within Appendix A]** under Question no. 2b, pg. 4 of the report, and Question 2i, pg 7 of the report. Further details of these errors are outlined in a letter and attachments Parkland Hills Neighborhood Association President Rob Leming submitted to the City Planning Department on August 10, 2021, receipt of which was confirmed and added to the records VA-2021-00316 and VA-2021-00317. They are also attached to this document **following the complete Facilitated Meeting Report in Appendix A.**

Additionally, the City has not addressed how they will mitigate adverse impacts to the community. In IDO 6-6(A)(3)(c), it mandates the property "will not create significant adverse impacts on adjacent properties, the surrounding neighborhood, or the larger community." The impact study being conducted by the University of New Mexico, which is to inform and guide the applicant's Operational Plan on mitigating adverse impacts to our neighborhoods, has not been completed – it is not projected to be complete until January of 2022.

Though the study and report by UNM are not yet complete, there is much public documentation of the adverse impacts generated by the unhoused population, especially in areas with greater saturation of people experiencing homelessness. We will be referencing many of these articles in this letter, and they

are adjoined here as **Appendix B - H**. Within these articles, we will also demonstrate the City's lackluster track record with managing the adverse impacts of the homeless.

Due to the City's inability to fulfill the mandated procedures of the IDO, and out of concern for the unforeseen damages which may occur without a comprehensive Operational Plan informed by a high-impact study to serve the homeless and protect the surrounding communities from adverse impacts, we ask that you deny this application at this time. The city is free to come back once it has met the necessary requirements and offered adequate assurances.

Once the City has followed the protocols set forth in the IDO, and rectified the errors listed above, we would like you to consider adding the following terms as conditions for approval of their Conditional Use Permit:

To help mitigate adverse impacts to our communities, we request:

1. **A mandated Public Safety District encompassing the neighborhoods of Siesta Hills, Elder Homestead, South San Pedro, and Parkland Hills.** Budgeting for this public safety district would include added, designated resources and personnel for dispatch and patrol within the district, including ACS (Albuquerque Community Safety Department) and APD officers; added, designated personnel for street outreach teams; and added, designated personnel for daily cleanup of our parks and alleyways. **Additionally, all schools and public parks are to be excluded from being City shelter pickup/drop-off locations** (articles documenting the negative impacts and dangers at our City parks heavily trafficked and inhabited by the homeless have been submitted as written evidence, **Appendices C,D,E**).
2. **The implementation of a legally-binding Good Neighbor Agreement between the City as the property owner, and the four neighborhoods within the Public Safety District.** The conditions of the agreement must include the creation of a Community Oversight Committee. A list of items which should be incorporated into a Good Neighbor Agreement is attached **(Appendix S)**. "Legally-binding" means "disputes, after initial mediation, shall be settled in district court" and not a city hearing officer.
3. **A detailed Operational Plan and budget for a comprehensive 24/7 transportation service system to/from Gateway** – including but not limited to, locations and schedule for pick-up and drop-offs for the shelter's shuttle system; how the City will be expanding the public bus system and routes to/from Gateway to accommodate clients and residents; details and schedule on van services. (documentation supporting public safety concerns surrounding pick-up and drop-off locations for the City's shelters have also been submitted as written evidence, **Appendices C,D,E**).
4. **Bed capacity limits** – due to the lack of behavioral health providers in our state, and the City's track record with moving people out of the shelter system into transitional or permanent housing, and to help prevent additional adverse impacts to a district already saturated with more than 51% of the City's homeless services, we request an overnight shelter bed capacity limit at the property as a condition of approval. Initially, we would request the City be granted Conditional Use for 15 families and 30 individuals. After demonstrating the successful implementation of these numbers, whereby the City shows they can adequately meet the needs of residents, and move them into housing within 90 days, while simultaneously proving the facility can operate without significant adverse impact to the surrounding communities, we would recommend in 2 years they request an increase in the number of beds at this facility.

We have requested these terms be added to the applicant's Conditional Use Permit to help ensure minimal adverse impacts to our communities. Below we will be outlining and presenting evidence supporting the implementation of these terms. The evidence will speak to adverse impacts in communities with large populations of people experiencing homelessness, the City's lack of success in

mitigating these adverse impacts, as well as evidence supporting bed capacity limits in regard to the numbers of people the City will be able to adequately serve within Gateway, and how lesser numbers can help lessen adverse impacts.

Additional concerns and requests for data with the submission of a new application for a Conditional Use Permit are outlined below:

- Given the size of the overnight shelter the City intends to have at Gateway **(Appendix O)**, we would like to request the applicant provide real data on the implications to the surrounding neighborhoods of an overnight shelter exceeding 100 residents.
- We request the applicant provide supporting evidence on how they will be able to serve an excess of 100 residents given the shortage of Behavioral Health Providers in our state **(Appendix I, P)**.
- We request the applicant to provide supporting evidence on how a shelter with mixed demographics and an excess of 100 residents better serves the homeless population than a system of small shelters serving specific demographics, accompanied by an explanation of why existing resources are not already being utilized.
- We request the applicant provide a strategic plan on transitioning residents of the shelter into housing with the limited availability of housing options in our city.

EVIDENCE: ADVERSE IMPACTS

1. Commitments from Family & Community Services [FCS] have not been met: Evaluation of Impact

Below are communications dated March 25, 2021, 6:43 PM from Carol Pierce, Director, to Councilor Davis. Carol Pierce is responding to Councilor Davis' question re: operation and oversight at Gateway on pg. 3 (excerpt of communications appears below; full communications attached as **Appendix M**)

Councilor Davis, Question 5: Who does FACS intend to operate the center, how will they be paid and what oversight will be put in place to ensure neighborhood issues and unintended consequences are adequately addressed better than current FACS homeless provider contractors downtown?

*Ms. Pierce's response: "FCS will disseminate a Request for Proposal to select an entity that will operate the center. Once that entity is chosen, we will enter into a contract with them and oversee and monitor the contract to ensure it is in compliance with our standards. FCS will also be working with this entity and service providers at this location on Good Neighbor Agreements. **As referenced in the draft Housing Services Framework** (<https://www.cabq.gov/family/documents/housing-services-framework>) **document sent to the HCC, we will evaluate the impacts of any emergency shelters within 5 miles of the proposed location including the possible impacts of proposed services (e.g., food, medical care, case management, substance abuse, drop-in access, 24/7 access) and the population to be served. That evaluation of impact will take into consideration the impact of existing services within the area as well and will inform the creation of a detailed plan to address community safety concerns for the area around any proposed emergency shelter locations.***

A study is currently being done by the University of New Mexico for the City of Albuquerque to collect data on high-impact strategies for addressing homelessness, and to survey adverse impacts to communities surrounding overnight shelters. **This study was to inform and guide FCS in employing**

best practices to serve the homeless, and to mitigate adverse impacts to surrounding neighborhoods. This study has yet to be completed – its completion is currently projected for early 2022.

By not waiting for the completion of the UNM report regarding mitigating negative impacts on surrounding neighborhoods, and by not performing an evaluation of impact for a large-scale facility, the City of Albuquerque is not following the procedures they indicated they would enlist to mitigate significant adverse impacts on the area neighborhoods. This demonstrates the City's Operational Plan is not based on data from the study they are having performed, and thereby demonstrates they are not sincerely attempting to mitigate severe impacts. These should be executed to determine shelter needs and requirements before the Conditional Use Permit is approved.

2. City's Track Record in Mitigating Adverse Impacts in Neighborhoods with Homeless Services

The City has demonstrated they are unable to rectify problems within the parks sitting in close proximity to homeless services, as well as those issues found at pickup and drop-off locations for transportation to/from homeless service providers. This is another reason we request that there be a cap of 15 families and 30 individuals at the Gateway shelter, to provide the city with the time and opportunity to develop better systems to alleviate these problems occurring at other locations, and to prevent similar adverse impacts on the neighborhoods surrounding Gateway.

The following reports provide evidence of the lack of success the City has had over the last two years in mitigating significant adverse impact on neighborhoods surrounding homeless service providers. Excerpts from reports appear below:

1. "Wells Park business owners file lawsuit over ongoing homeless problem," by Jeannie Nguyen, KRQE, Posted Oct 4, 2020, updated Oct. 5, 2020 (Appendix B)

"There's threats of violence against the people that are there, the residents that have property around that, destruction of property," says Blair Dunn. Jeannie Nguyen: "Back in July, attorney Blair Dunn sent a letter on behalf of business owners threatening to sue the city if the Mayor didn't fix the problem. Now, they are keeping their word by suing the St. Martin's Hospitality Center off Third and Mountain...With this lawsuit Dunn hopes St. Martin's and the city figure out a solution that works for both homeless people and the long-term residents of the Wells Park neighborhood."

2. "LOCAL VOICES: Albuquerque's homeless: Worse than you think" By Carl Dipalma, Albuquerque resident / Bruce M. Thomson, District 5 Director, board of Directors Chair, Albuquerque Metropolitan Arroyo Flood Control Authority, Sunday, August 8, 2021, 12:02am (Appendix C)

Neighbors' pleas for help to fight crime, drug trafficking, homelessness have long been ignored by the city

While spending the nights in Coronado Park this past year I became completely convinced the neighborhood has become as dangerous as anyplace in town.

The illegal and life-threatening drug trafficking continues on bicycles throughout the dark hours, and there are between 20 and 30 of these stolen two-wheelers there at any given time. The playground has become a home for used syringes, empty alcohol containers, broken glass, human waste, used condoms, discarded bike parts and filthy clothing and all kinds of throwaway weapons and other trash. The number of repeat offenders during the night is more than it has

ever been because this park is being used as a pickup and drop-off location by the city-funded night shelter. Those people who are rejected by the yellow bus operators stay there after being told they cannot be given an empty bed and are now overflowing onto the surrounding taxpayers' doorways. The property managers for the surrounding locations and their helpers have made about 4,000 calls for assistance to Albuquerque Police Department and to those who direct city law enforcement during the past five or six years, explaining that no one is allowed in the park after dark according to the city ordinance. They have written certified letters to the mayor. They have repeatedly asked their city councilor's office for help in the most serious and respectful way. They have also been ignored at many city-dominated community meetings. They have established the periodical watch with Valley Command between midnight and 4 a.m. month after month after month. They also continue to put their lives on the line every night by making eyewitness reports to APD with their cellphones while on foot. But they and the genuine homeless persons still remain in an increasingly dangerous situation. The spotlights, loudspeakers and warning tickets disappeared long ago into the distance with the patrol car.

Homeless people sleep on the sidewalk in front of a facility called HopeWorks located on 3rd Street in downtown Albuquerque. (Roberto E. Rosales/Albuquerque Journal)

Yes the truly homeless persons are in fear of calling APD because they are then left alone as ongoing unprotected victims of the unpenalized repeat offenders. Last year the Mayor's Office told those calling for help that "they are not going to be put in jail because putting the offender behind bars does not do any good." As a result there has been a growing number of assaults with primitive throwaway weapons, robberies and thefts, rapes every night, drunken and verbal and physical arguments in and around Coronado.

3. "Police records depict pattern of problems, violence at Coronado Park," by Nathan O'Neal, KOB4, Created October 11, 2020 10:48pm; Updated October 11, 2020 10:50pm (Appendix D)

ALBUQUERQUE, N.M. — Coronado Park is considered the heart of Albuquerque's homeless problem. Located near I-40 and 2nd street, it comes with a lot of other problems too – including drug use, violence and mental health issues.

More than two years of police records reveal at least 120 times police, fire and other emergency services were needed at Coronado Park between January 2018 and June 2020.

"That park is not safe. It's not safe for the people experiencing homelessness, it's certainly not safe for any other neighborhood residents to go there," said Doreen McKnight who is president of the Wells Park Neighborhood Association and has lived in the area for 10 years.

"This year alone in 2020 there were three homicides at Coronado Park. In 2019, a disabled woman was raped there and in 2018 there was a murder," said McKnight.

Police 911 logs reveal a variety of other issues.

In February 2019, police investigated a stabbing after a fight broke out at the park.

One month before the stabbing, police responded to a call after a woman said she was suicidal, telling police on lapel camera video that she had previously made attempts to overdose on meth. Officers then took her to get help.

In 2018, the KOB 4 Investigates team used undercover cameras at Coronado Park which revealed illegal drinking, drug deals and people shooting up drugs in broad daylight.

4. "It's becoming increasingly dangerous: Albuquerque park sees 3rd homicide," by Ryan Laughlin, KOB4, Created July 14, 2020, 6:15pm; Updated July 14, 2020 6:24pm (Appendix E)

ALBUQUERQUE, NM-Coronado Park in Albuquerque saw its third homicide this year after a man was beaten to death Monday evening

Ralph DiPalma, a volunteer minister, said issues at the park have only been growing worse.

"Instead of straightening out the problem, it's becoming increasingly dangerous." DiPalma said.

There are many homicides among the homeless unreported, deliberate drug overdoses and missing persons," he added.

3. Reasonable Limitations to Help Mitigate Impacts in a District with an Abundance of Homeless Services

Out of nine districts in the City of Albuquerque, District 6 is home to 51.25% of homeless service providers **(Appendix U)**. With a saturation of providers serving the homeless population of Albuquerque, our district struggles with adverse impacts on a daily basis – a basic summary of these impacts may be found on page 5 of the 2019 Homeless ABQ Report, generated by homeless service provider Steelbridge Ministries **(Appendix V)**. Among the impacts are panhandling and trespassing, the closure of businesses, minor and/or violent altercations with homeless who are mentally ill or inebriated, and criminal activity ranging from minor theft to drug trafficking, prostitution, and human trafficking; as well as public safety issues such as hazardous waste, including feces and needles, being left in our neighborhoods and public parks. There are 11 parks, 9 schools, and 7 daycare and pre-schools within 1.5 miles of the proposed Gateway facility **(Appendix T)**, many of which already suffer the adverse impacts of a saturation of homeless providers in our communities.

A study by the University of Pennsylvania **(Appendix Q)** found a 56% increase in most property crimes (car burglary, car thefts) within about a two-block radius of emergency shelters. This same study found these crimes could be mitigated with sufficient presence of security and law enforcement. Additionally, according to the National Health Care for the Homeless Council **(Appendix R)**, people experiencing homelessness are nearly 20 times as likely as the general population to be the victims of violent crime, supporting the community's concerns that an increase in the overall presence of homeless going in/out of Gateway will also lead to an increase in adverse impacts.

To help mitigate adverse impacts in an area already struggling with an overwhelming amount of existing homeless services, we propose an initial bed capacity limit at Gateway of 90 beds – providing for up to 15 families and 30 individuals. This bed capacity limit would be in place for Phase 1 of the City's opening of Gateway. Family & Community Services personnel have intended they would like to "start small" and phase in the numbers of people served. We believe this is the best approach to ensure success. We ask you to implement this bed capacity limit as part of their Conditional Use Permit approval. We propose that after 2 years, when the City has proven they can effectively serve our homeless population at Gateway and prevent adverse impacts to the surrounding communities, they may submit an application to increase their bed capacity numbers.

EVIDENCE: NEEDED IMPROVEMENTS TO THE OPERATIONAL PLAN

There are concerns the City does not currently have an adequate and developed Operational Plan, and we would request they have this in place when they apply for an increase in bed capacity.

1. Lack of an Established Operating Budget for the facility

Currently the City has what they refer to as a “placeholder” budget – this has been quoted as both 4.7 million ([at the Mayor's Press Conference on April 6, 2021](https://www.youtube.com/watch?v=0RvhP7JPZEU)) <https://www.youtube.com/watch?v=0RvhP7JPZEU>, and then more recently quoted by FCS director Carol Pierce as \$4 million (at a panel hosted by Indivisible Nob Hill on August 30, 2021). Both estimated budgets were quoted in relation to the current Operating Budget for the City's Westside Emergency Housing Center, aka the Westside Shelter, which does not provide the ‘wraparound services,’ resources, or personnel proposed for Gateway. Currently, the Westside Shelter provides limited services two days per week. It does not have a commercial kitchen or many of the amenities the Gateway intends to provide.

From Indivisible Nob Hill meeting held on 8/30/2021 with a panel of City representatives and Neighborhood Association representatives, the question on the budget was presented by moderator, Rayellen Smith:

Smith: “What is the operational budget and where is the money coming from?”

Carol Pierce, Director of FCS, responded with the following: “We needed to put a Placeholder in this year fy 22 city budget. We used our budget from the westside for what that includes,....replicating west side budget That was the best model we had the west has its own budget and then we were replicating that number to have something in the fy 22 budget”.

Smith confirmed the following: “There is 4.7 westside and 4.7 gateway” Carol responded “Yes, and that does not include... capital money...But primarily for operations the answer question it is federal fund dollars.”

As a significant portion of the operations appear to depend on federal funding, what happens if these funds are not renewed every year? What are the City's plans to secure more funding? What contingency plans is in place?

Given the unforeseeable changes to access to federal funds, we feel the city needs the opportunity to plan a budget, not just a placeholder, and needs the time to develop future funding sources for this facility.

2. Shortage of Providers in NM

There is an extreme shortage of providers in behavioral health, medical health, and case managers/social workers in the state of New Mexico.

Recently a [Kaiser Family Foundation study](https://www.kff.org/other/state-indicator/mental-health-care-health-professional-shortage-areas-hpsas/?currentTimeframe=0&selectedRows=%7B%22states%22:%7B%22new-mexico%22:%7B%7D%7D%7D&sortModel=%7B%22colId%22:%22Location%22,%22sort%22:%22desc%22%7D#notes), <https://www.kff.org/other/state-indicator/mental-health-care-health-professional-shortage-areas-hpsas/?currentTimeframe=0&selectedRows=%7B%22states%22:%7B%22new-mexico%22:%7B%7D%7D%7D&sortModel=%7B%22colId%22:%22Location%22,%22sort%22:%22desc%22%7D#notes> **(Appendix I)** indicated that New Mexico has an **87% deficit in mental health professionals, and a 76% percent shortage for primary healthcare professionals**. The 2019 report “Provider Shortages and Limited Availability of Behavioral Health Services in new Mexico's Medicaid Managed Care” by the Office of Inspector General of the U.S. Department of Health and Human Services also details our provider shortages **(Appendix P)**. When asked about obtaining enough providers in this deficit environment, both the Mayor and FCS Director Carol Pierce have stated that an RFP would be put out. This does not provide an adequate answer to the very real issue that the providers simply *do not exist*.

Since 2019, the City's Westside Shelter has experienced changes that include being open year-round and operating 24/7, providing behavioral healthcare and medical healthcare *only two days per week*, in addition to case management and with NM Workforce Connections providing career counseling. Given the City's inability to provide more care at their current emergency shelter facility, there is serious concern they will be able to provide the care they are promising at Gateway.

In addition to the Behavioral Health services the City has stated they intend to provide at Gateway, another component of the Gibson Health Hub that will be feeding into the shelter services of Gateway is the medical respite program. FCS is currently slating 50 beds for medical respite, though based upon current zoning, the allowable number of homeless respite beds is unlimited. The unhoused respite care patients will need be supplied with supportive care once they are able to leave the respite setting, and it is anticipated they will require the services of the Gateway center. Due to the limited behavioral health, medical, and casework providers, having a large capacity of residents would lead to a shelter that cannot provide adequate services, and would result in a dangerous environment for the City's most vulnerable.

The severe and potentially dangerous deficit of medical providers in the state, along with the state's track record of contracting out lower-tier providers through their RFP process, is demonstrated by the deaths of nine inmates at Bernalillo County Metropolitan Detention Center (MDC) from August 2020 to January 2021. Six of these nine deaths occurred during detox, all while under the medical care of contracted provider Centurion. Centurion is currently facing 18 lawsuits and has vacated their 4-year contract 2.5 years early. Negligence and understaffing have both been reported as contributing to preventable deaths. **(Appendix J, K)**

Lawsuit filed in death of inmate at Bernalillo County Metropolitan Detention Center, By Elise Kaplan / Journal Staff Writer, Published: Friday, July 23rd, 2021 at 6:50pm; Updated: Friday, July 23rd, 2021 at 9:54pm

...The family of one of the people who died while in custody of the Metropolitan Detention Center last year has filed a lawsuit against Bernalillo County, the jail and the medical provider and staff alleging medical malpractice and negligence led to his death.

He was one of nine people in jail custody to die in the course of a year – a dramatic spike over previous years. While the causes of death varied, six appear to have occurred while inmates were detoxing from drugs or alcohol or in medical units – all under the care of medical contractor Centurion Detention Health Care.

*... Last spring, after the Journal published an article on the increase in deaths at the jail, **the county said it “expressed concern to Centurion over staff vacancies and continuity of care”** and asked the company to respond. Instead, Centurion terminated its contract more than a year early.*

...“I think there’s definitely a pattern, it’s more than just (deaths while in) detox or any of that,” Collins said. “It’s a pattern of gross neglect, gross medical neglect.

Shortages of behavioral health providers are not a new problem in New Mexico. Lisa Huval, deputy director for Housing and Homelessness for FCS has stated the “dismantling” of our behavioral health infrastructure can be traced back to 2013 **(Appendix L):**

“NM’s rise in homelessness highest in the nation,” by Rick Nathanson / Journal Staff Writer Thursday, January 9th, 2020 at 9:41PM

“One of the driving factors in the increase in chronically homeless people in New Mexico is what happened to our behavioral health system under the previous governor, with the dismantling of the behavioral health infrastructure as we knew it amid accusations of Medicaid fraud,” Huval said. “This forced a number of providers to close their doors and caused lots of people to lose access to services. In many ways, we’re still recovering from that.”

In 2013, 15 behavioral health providers were shut down by the state Human Services Department after an audit alleged fraud. After a lengthy investigation, Attorney General Hector Balderas' office eventually cleared all 15 providers of any wrongdoing.

Another part of the story, said Huval, "is our state's struggle with funding and supporting behavioral health programs at the scale they're needed, and with folks being able to get into housing and being able to stay in housing."

As the state has not been able to increase the numbers of behavioral healthcare providers to sufficient levels over the last eight years, there is no indication there will be an adequate number of providers to administer the necessary care for a large-scale overnight shelter. Therefore, in addition to our concerns re: mitigating adverse impacts, we strongly feel the shortage of providers in our state presents strong evidence to support limiting bed capacities at this facility.

3. Transportation to/from Gateway

Transportation services for the homeless do not appear to be well developed. The City has stated it takes over one million dollars to transport people to/ from the Westside Shelter, which includes both residents and various providers. Even with this budget, the Westside Shelter has limited transportation times and abilities, reducing residents' access to services at the Westside Shelter and with other providers. **The City has yet to develop a fully operational 24-hour transportation system** to transport people to/ from services to where they seek shelter.

While the city has had ample opportunity to provide comprehensive transportation for the homeless to be able to access services and housing in a safe manner, they have not demonstrated they are able or willing to provide these necessary services, which will be especially important to the success of the Gateway Center.

The City has stated they intend to utilize the current shuttle system, partner van carriers, and expand the public bus routes to provide more transportation options for Gateway residents. **But given the shuttle system's current limitations, and with no detailed plan for added bus routes and expansion, this presents concern for how adequately transportation systems will serve the homeless.** Without a reliable and easily accessible transportation system in place, residents and prospective residents of Gateway will more likely be left to their own devices, leading to harmful outcomes given the traffic dangers of Gibson Blvd, and the probability of overflow into surrounding neighborhoods.

We request that the City have a fully developed transportation plan of service in place and implemented prior to opening Gateway. This will ensure both the homeless and the surrounding neighborhoods do not experience significant adverse impact due to incomplete services being provided.

Background:

Prior to the COVID Pandemic in 2019, the shuttle to the Westside Shelter picked up people at Coronado Park (near 3rd St. and I-40) and Hope Works Day Shelter at 1301 3rd St NW (District 2); and in the latter part of 2019 additionally began picking up people at God's Warehouse at 8011 East Central Ave. NE in the International District (District 6).

During the COVID Pandemic, the number of pickup locations were increased to include five additional locations, four of which are in District 6, specifically in the International District. Three of these four additional locations in the Int'l District (listed below) are all at public parks, two of which are directly adjacent to Middle Schools, and one that is four blocks from an elementary school. All of these are within 1.5 miles of proposed Gateway Center **(Appendix T).**

1. Steelbridge (for women and disabled guests only) at 2021 2nd St NW (District 2)
2. First Nations Community Healthsource at 5608 Zuni Rd. SE (District 6)
3. Wilson Park, 6000 Andersen Ave. SE, located next to Wilson Middle School (District 6)
4. Phil Chacon Park, 7600 Southern AVE SE., located next to Van Buren Middle School and 5 blocks from Emerson Elementary School (District 6)
5. Jack and Jill Park, 433 Arizona St. SE, located 5 blocks from Emerson Elementary School (District 6)

Therefore, during the COVID Pandemic, for transportation pickup to the Westside shelter, the pickup locations statistics were as follows:

Three pickup locations were in District 2. Of those locations:

- One was at a public park
- Two were at a day shelter or food/supply pantry and soup kitchen: Hope Works Day Shelter, 1301 Third Street St NW, and Steelbridge, 2021 2nd St. NW (also located near The Rock, 2400 Second Street NW, which provides meals or similar service).

Five pickup locations were in District 6. Of these locations:

- Two are located at parks next to middle schools
- One was located at what is apparently a children's park being called Jack and Jill Park located 5 blocks from an elementary school.
- One is located at a soup kitchen/day shelter
- One is a healthcare services provider

Current pickup locations are not totally clear. The pickup locations described above changed after a neighborhood input meeting in June, in which FCS Director Carol Pierce was surprised to hear from a participant that all these pickup locations were still active – she responded that she would look into it. Subsequently, it appears that the number of stops have been reduced, though it is not necessarily clear where the new pickup locations are.

Furthermore, given the public safety issues already detailed in **Section 2: City's Track Record in Mitigating Adverse Impacts in Neighborhoods with Homeless Services (Item #s 2-4) pg. 4**, and further detailed in **Appendices B, D, E**, we request that all schools and public parks be excluded as pickup and drop-off locations for the City shelters.

4. Transition of Residents from Gateway Shelter Into Housing

Below is a question presented by Councilor Davis to Carol Pierce, dated March 25, 2021, 6:43 PM re: the need for housing units (excerpt of communications appears below; full communications attached as **Appendix M**)

Councilor Davis, Question 6: I have continually asked FACS to develop a long-term housing plan, with funding options, to meet our need for more than 800 new supportive housing units. During

our most recent council meeting, Deputy Director Huval told the council that FACS could spend more money if allocated. CAO Nair quickly added that the administration did not believe it could.

An example of the city's challenges with getting existing providers to agree to take on more housing obligations – even with funding provided – is revealed in this Albuquerque Journal article from October 7, 2020 **(Appendix N)**:

“City leaves \$700K in housing voucher money unspent” ALBUQUERQUE JOURNAL By Jessica Dyer / Journal Staff Writer, Wednesday, October 7th, 2020 at 6:26PM

...Bottom, executive director of Vizionz-Sankofa, has been working with the homeless population in her area, including trying to get them housing. She said she cried when she heard the city finished the last budget year without spending \$700,000 it had available for housing vouchers.

...Bottom learned about a city-funded housing voucher program and went through special training required to get people on the waiting list. Working last fall and winter – often out of a Southeast Albuquerque soup kitchen – she helped an estimated 35 people complete the survey needed to get onto the ‘coordinated entry list.’

...To this day, Bottom said no one she helped has obtained a housing voucher.

So she was particularly rankled to learn recently that the city ended the 2020 fiscal year on June 30 with about \$700,000 in unspent housing voucher money. By city calculations, that is enough to support 51 different households for a full year.

...And Albuquerque city councilors are also raising questions about another \$2 million they had allocated last year for additional housing vouchers. The council approved the appropriation in the spring of 2019 at Mayor Tim Keller's request.

Less than \$100,000 of that money was spent during fiscal year 2020, in part because the city could not find contractors to distribute the vouchers that quickly.

Lisa Huval, deputy director of housing and homelessness inside the city's Family and Community Services Department, said there are multiple factors at play.

The unspent \$700,000 was due largely to understaffing within one of the 10 different organizations the city uses to administer the vouchers. Huval declined to identify the vendor...

This additionally demonstrates the city's need to develop a working budget and plan to demonstrate they can properly administer this facility and transition people out of the shelter and into housing before they are given the opportunity to have an overnight shelter capacity of more than 15 families and 30 individuals.

EVIDENCE SUPPORTING LIMITS ON BED CAPACITY

On September 4, 2021 it was announced via the Albuquerque Journal that the City is looking to accommodate up to 100 individuals and 25 families (upwards of 200 people). District 6 Councilor Pat Davis shares the concerns of his constituents, and has persistently asked FCS how they will adequately serve the proposed number of Gateway residents given the City's track record thus far:

From communications dated March 25, 2021, 6:43 PM from Carol Pierce, Director, to Councilor Davis: **(Appendix M)**:

*Councilor Davis Question 2: ... According to the City's own powerpoint presentations given by FACS to community groups and the city council, the "gateway model" is designed to serve as a "no wrong door" entry to services where an individual is matched to a social worker and services to address their issues, assist with eligibility for programs (including housing) and place that person into long-term supportive housing. While FACS has publicly said this would take anywhere from 14-30 days per person, a gateway center with 175 on-site residents would require **more than 20 social workers** and 175 housing units to be available when the center opens. FACS is not prepared to offer either (as you recall, FACS had problems getting existing providers to agree to take on more housing obligations as recently as last December).*

1. The only way I see serving 175 people at Gibson is by serving 175 per year, or about 15 per month. That is a doable load for a gateway model. Beyond that, we appear to be designing a system for warehousing people without providing services. Please explain how FACS will support the persons it intends to serve and how they will guarantee those services and lengths-of-stay will meet the gateway standards the public voted for when they approved funding for building this type of center.

Ms. Pierce's response: "We are still committed to the "no wrong door" strategy and to connecting each person who enters seeking emergency shelter beds with supports and services. More discussion is needed; however, all of our studies and input concur we need a mix of services that will help people stabilize, including case management services, housing navigation, assistance applying for disability, and connection to the workforce. Every person who come into this Gateway Center will be unique and will need their own, individualized exit plan into housing. Some people will need a rapid rehousing or a permanent housing voucher, but there also are other affordable housing options in our community. In an exit plan into housing, the goal will be to determine the mix of support that will serve that person the best. For example, some people will have a job or be able to start a job quickly and only need a security deposit and first month's rent. Some people may need to be referred to a residential treatment program. Some people are not going to be a good fit for a housing voucher and will need long-term care. We have a goal that every individual who comes to the Gateway Center will exit to a more stable housing destination within 90 days."

In order to accommodate the intentions outlined above by Ms. Pierce, there needs to be adequate case managers, behavioral health providers, treatment options, and housing resources. Without the City having a realistic and comprehensive Operational Plan and budget, this is not attainable. Currently the city/county government has demonstrated they are not equipped to provide adequate health and behavioral healthcare to persons in need

LEGALLY-BINDING AND ENFORCEABLE GOOD NEIGHBOR AGREEMENT

One of the most critical terms the neighborhoods surrounding Gateway have requested as part of the applicant's Conditional Use Permit approval is a legally-binding Good Neighbor Agreement. When discussing and addressing questions re: what the Good Neighbor Agreement will look like and how it will work, FCS Director Carol Pierce has repeatedly referenced the existing Good Neighbor Agreement between Wells Park Neighborhood Association and Hope Works downtown. The problem with this, though, is that it is not a legally-binding document – there is nothing to hold the provider accountable.. And its lack of effectiveness is revealed in the severe adverse impacts Wells Park suffers as cited in the crime and violence which regularly Coronado Park and the surrounding area. Given that the facility in which Gateway will be housed will also house multiple other providers, and that the adjoining neighborhoods exceed one NA, the very nature of the Good Neighbor Agreement will need to differ from the agreement Pierce references.

Furthermore, given the propensity for overnight shelters and homeless service providers to create adverse impacts in the surrounding neighborhoods, and given the City's track record on mitigating these

adverse impacts (cited previously), it is necessary for the neighborhoods surrounding Gateway to have legal recourse which will hold the City as property owner accountable.

Residents of the communities surrounding the proposed Gateway site have already shared with the City most of the terms they would like to see incorporated into a Good Neighbor Agreement **(Appendix S)**.

It is also critical that outlined within the terms of the Good Neighbor Agreement that any legal fees or costs for mediation (not a city hearing officer) and district court shall be the responsibility of the City of Albuquerque so as not to exclude neighborhoods from participating in their government due to lack of financial resources and abilities.

CONCLUSION

In closing, as an adjoining neighborhood of the proposed Gateway center, we understand the ideals behind its conception and want to ensure its success. Our objective is to work with the City so that our neighborhoods do not experience significant adverse impacts due to insufficient mitigation from the operation of Gateway as it provides the services our unhoused citizens so desperately need. In the body of this document, we have outlined evidence and suggestions to work toward this end, and our key requests in granting approval of their Conditional Use Permit (after they have rectified their errors of IDO protocols and procedures and complete the submission process adequately) are as following:

- Given their track record in mitigating significant adverse impacts of the unhoused, we request for the City to wait and apply for their Conditional Use Permit once the UNM Study and evaluation of adverse impacts is completed so it may guide the FCS in employing best practices to mitigate adverse impacts to our neighborhoods.
- We request additional necessary improvements to their Operating Plan – including an established budget which is in line with the intended services and staffing for the facility, and which also takes into account the shortage of providers in our state and creates realistic plans for personnel and treatment; we also request the development of a comprehensive 24/7 transportation system to get residents to/from Gateway, and a budget and strategy with enlisted providers to transition residents of Gateway into housing.
- We request reasonable limitations on bed capacities to help ensure the City phases in the number of people they can realistically and adequately serve at Gateway, while also minimizing the significant adverse impacts to our neighborhoods.
- We request a Good Neighbor Agreement that is legally binding and holds the City accountable, and for which any legal fees and mediation will be the financial responsibility of the City. To ensure the terms of the Good Neighbor Agreement are adequately followed, we also want to mandate a Community Oversight Committee as part of the Agreement.

APPENDIX A

CITY OF ALBUQUERQUE LAND USE FACILITATION PROGRAM PROJECT MEETING REPORT

Project Number: N/A – Pre-Application Meeting
Property Description: 5400 & 5006 Gibson SE; Tract A-1-A-1-A Plat of Tract A-1-A-1-A Lovelace Hospital (being a replat of Tract A-1-A-1 & a portion of vacated Ridgcrest Drive SE), containing 20.4232 Acres
Date Submitted: June 24, 2021
Submitted by: Jessie Lawrence and Jocelyn Torres
Meeting Date and Time: June 22, 2021, 5:30 PM
Meeting Location: Online via Zoom
Facilitator: Jessie Lawrence
Co-facilitator: Jocelyn Torres

Parties:

- **Applicant:**
 - City of Albuquerque Department of Family and Community Services
- **Agent:**
 - Consensus Planning
- **Affected Neighborhood Associations (per City of Albuquerque notification requirements):**
 - District 6 Coalition of Neighborhood Associations
 - South San Pedro NA

Background/Meeting Summary:

Applicant requests Zoning Hearing Examiner approval of a conditional use to allow an overnight shelter in a portion of the Gibson Medical Center at 5400 Gibson Blvd. SE, part of the Gateway Center at the Gibson Health Hub (referred to as the Gateway Center throughout this report). This was a pre-application meeting.

At the meeting, participants expressed a number of concerns about the planned project, and also expressed frustration and a lack of trust with the planning, process, and communication so far. Some participants said that they did not want the Gateway Center in this area or that this center should serve only the local area, and other areas of the city should have to support a greater share of the homeless services. Others said that they needed more information and discussed the need for more data, the complete operations plan in writing, information in writing about the number of people to be served, and information about the planned providers. Others expressed concerns about crime, security, bathrooms, pedestrian traffic, and vehicular traffic. Others requested more information about how individuals would transition out of the Gateway Center and where the transitional housing would come from. Others expressed concern about the Gateway Center being a magnet drawing homeless people to the community, and also asked about homeless people who might seek services but not want shelter. One person pointed out the need to work with the VA Hospital and veterans, and one person suggested a written Good Neighbor Agreement between the neighborhoods and the City.

City staff answered questions and responded to the concerns during the meeting. See Meeting Specifics and the Zoom Chat Appendix for a summary of all of the questions and comments discussed.

As follow-up items, the applicant and agent agreed to share the slide presentation, to provide information about the locations of the 19 public restrooms throughout the community, and to look into the question about what would happen with the conditional use if other tenants wanted to add overnight uses. They also said that the operations plan would be ready before the planned August 17 ZHE hearing, and the conditional use request materials would be sent to the neighborhood associations when they are submitted.

Outcomes:

- **Areas of Agreement:**
 - None noted among all meeting participants.
- **Unresolved Issues and Concerns:**
 - Several participants discussed frustration and a lack of trust in the City, in particular because of the lack of written plans and commitments and changing information about who the Gateway Center would serve.
 - Some participants said that they did not want the Gateway Center in this area or that this center should serve only the local area, and other areas of the city should have to support a greater share of the homeless services.
 - Some participants said there should be more data and information shared with the local residents in writing, including the operations plan, before a conditional use request is submitted.
 - Concerns discussed about the operations of the Gateway Center included:
 - Crime
 - Security and adequate police service
 - Public defecation and the number of available public restrooms
 - Pedestrian traffic
 - Vehicular traffic
 - Some participants asked about the available transitional housing and suggested that there is not enough for the Gateway Center's plans, and noted that there needs to be planning for a limited time of services and a transition out of homelessness.
 - Some participants expressed concerns about the Gateway Center making the neighborhood a magnet for homeless individuals, and also asked about homeless people who might seek services but not want shelter.
 - One person pointed out the need for better coordination with the VA Hospital and veterans.
 - One person suggested a written Good Neighbor Agreement between the neighborhoods and the City; others said that such agreements have been hard to enforce in other places.

Meeting Specifics:

Proposed Meeting Agenda:

Topic	Person	Approximate Time
1. Welcome/introduction	Facilitator	5:30 – 5:40

2. Overview of the Gateway Center at GMC, with a focus on the conditional use request	Project team	5:40 – 6:00
3. Clarifying questions about the overview presentation	All	6:00 – 6:10
4. Questions/comments: Gateway Center operations	All	6:10 – 6:40
5. Questions/comments: Gateway Center coordination/communication with neighbors	All	6:40 – 7:00
6. Questions/comments: Conditional use process, timeline, and criteria	All	7:00 – 7:15
7. Other questions and concerns	All	7:15 – 7:25
8. Brief summary and next steps	Facilitator	7:25 – 7:30

1. Overview of the Gateway Center:

- a. Carol Pierce, Director of CABQ Family & Community Services, provided an overview of the planned Gateway Center. (The term Applicant throughout the report refers to the Family & Community Services staff.)
 - i. The Gibson Medical Center was purchased on April 1, 2021 by the City of Albuquerque and is being referred to as the Gibson Health Hub.
 - ii. It is about 572,000 square feet.
 - iii. The vision is to provide health services to the surrounding community that promote healing and recovery, including but not limited to primary care services, inpatient treatment, behavioral health services, and shelter and services for people without homes.
 - iv. There are about 10 tenants there currently, in behavioral health services, employment, medical care, and other uses.
 - v. In Albuquerque, at least 1,525 people are in shelters or on the street each night, and at least 5,000 households experienced homelessness in 2020.
 - vi. Chronic health conditions are more prevalent with people who are unhoused. Typically their life expectancy is 12 years less than those who are housed.
 - vii. Medical respite is an important component of the health hub; it will provide short-term medical care for patients without homes who are too ill to recover in a shelter or on the streets, but who are not sick enough to be in a hospital.
 1. Respite beds are very limited in the community.
 - viii. The Gateway Center will be one part of the Gibson Health Hub, for people who are unhoused and need wraparound services to have a planned exit to services and stable housing.
 1. The Gateway Center will be part of a comprehensive system of services to link individuals with health care, employment, and permanent housing.
 2. It will be trauma-informed, which means that it is safe for people who want to secure a safe bed, and people are met where they're at so they can be connected with what they need.
 3. On site supportive services will be important, including peer support services, people with lived experience.
 4. There will be individualized transition plans to resources and stable housing.
 - ix. The operational plan, which is in development, includes services, policies, neighborhood, and other operational components. [The components of the operational plan were shared in the slide presentation.]

- b. Jackie Fishman, Principal at Consensus Planning, the agent for the conditional use (Agent throughout this report), explained the conditional use request and criteria.
 - i. The property is at 5400 Gibson Ave. SE and 5006 Gibson Ave. SE.
 - ii. The application will be submitted on July 6, and neighborhood association contacts will receive an email from Agent's office when that application is submitted.
 - iii. The property is comprised of two parcels totaling 20.84 acres.
 - iv. The existing zoning is MX-H, which allows an overnight shelter as a conditional primary use.
 - v. There are six criteria in the Integrated Development Ordinance for a conditional use. [The criteria were shared in the slide presentation.]
 - vi. There was pre-application notice on June 4, 2021.
 - vii. Application notice will be provided to the city-provided list of neighborhood associations and the District 6 Coalition, and notice will also be provided to other neighborhood associations in the area that have been receiving communication.
 - viii. The hearing will be on August 17, probably on Zoom.
 - 1. The ZHE planner is Lorena Patten-Quintana, lpatten-quintana@cabq.gov.

2. Questions and Concerns Asked During the Meeting

- a. Participant (P): My elderly parents were in their backyard when a man came and robbed them. If the mayor and others really want to house people, why not set up a facility in their neighborhood, and let them see how safe they feel? I'm not happy that my elderly parents were robbed in their own home.
 - i. Applicant: I'm sorry to hear that, and I hear how horrifying that is. I understand the concern about crime, but I want to decouple the idea of crime from homelessness. They are not one and the same. There are shelters in a variety of parts of town, and we have examples of it working. Barrett House, the Albuquerque Opportunity Center, the Brothers of the Good Shelter.
 - 1. P: I'm happy that works, so let's close the idea here, and let's move people into other communities where it works.
- b. P: We keep hearing the Gateway will be a slice of the Gibson Health Hub. How much space will be allotted for the Gateway Center compared to the rest of the health hub, and how much space will be leased out? How much space for the 50 respite beds?
 - i. A: The City has contracted with an architect and evaluation has begun, so I don't have an answer on the specific square footage. The analysis is occurring. There is space that could be ready for medical respite, maybe about 50 beds. With the existing tenants, about 25% of the overall piece, but other people are also inquiring about complementing the health hub. There is not a set square footage, but the analysis is underway.
 - ii. P: Do you know at this point how many beds you're planning on having? Do you have any maximum capacity in mind?
 - 1. A: We don't have a specific number in mind. It's not 500 beds, it's not that large, because we know that's not trauma-informed. We know we need to right-size this and work with local providers and those with expertise so people feel safe and have support.

- c. P: I hear a lot of talk about beds, but what about public restrooms in the neighborhood? We've already twice found human waste in our backyard, in one case someone who walked through while we were looking out our window. There's a dearth of publicly accessible restrooms and increased foot traffic will make it worse, and I wonder what your plan is.
 - i. A: There are about 19 restrooms that have been put up all over the community, added when facilities weren't open. I know that doesn't always address every need. There have been concerns about heat and water that have come in, too. That's what exists right now.
 - ii. P: Where are the 19 restrooms located?
 - 1. A: We can provide a map or list of locations. That can be a follow-up item.
 - iii. P: My other question is why is this focus entirely on services like jobs, health, and housing, and not about meaningful daytime activities? I recommend gardening. It's healing, it's trauma-informed, and I think it would heal rifts between the Gateway and the neighborhood.
 - 1. A: Thank you for that. We know the need for outdoor space. There will be services on site for people to access, and also part of what people will need to do is work on the pieces that are needed with the support of their case manager so they can ultimately transition to housing.
- d. P: The conditional use is granted based on a review of the potential adverse impacts to the use and any appropriate mitigations on nearby properties. I propose that it's premature to grant a conditional use because no adverse impact study has been completed. A shelter and housing services, especially one of this size adjacent to dense residential neighborhoods, should be required to consider specific impacts to neighborhoods and businesses. To date, the City has not requested a list of impacts, and I haven't seen any documentation that lists any adverse impacts. The City can't address issues they haven't found. The only adverse impact review is currently being conducted by UNM students, not professionals in the field, and isn't expected to be complete until 2022. Director Pierce has said she hopes to have the shelter operating in under a year. These are substandard requirements for such a project. The City has not requested concerns and no one conducting the research and UNM has shared the parameters of their study. This is not due diligence. The current information is not enough to allow the conditional use without the City and UNM providing details and operational plans needed and required for such a change in use.
 - i. A: The initial list of neighborhood impacts, on the website, came from the Homeless Coordinating Council and that group does have neighborhood involvement. We're adding additional people who want to be part of the neighborhood piece.
 - ii. P: We have had less than four or five neighborhood representatives in the entire three-year process. One person does not report out information to the rest of the neighborhoods, even though it has been requested. This is not enough community contact and input to say that the neighborhood is connected enough to these committees to actually have a voice.
- e. P: I have concerns about walk-in services and the increase in pedestrian traffic. Are you anticipating an increase in pedestrian traffic? With that, I have concerns about how you are going to address pedestrian traffic and its impact on our neighborhood, including toileting, encampments, and trash. As a suggestion, have you evaluated fencing the

facility and eliminating pedestrian traffic, and having people transported into the Gateway Center to eliminate the pedestrian traffic and the impact and burden on our neighborhoods that comes with that?

- i. A: We think access will be two ways. One will be referral by different partners, and they could have transportation to get there. There could also be someone who wants to come and access a service. We've heard from the neighbors about traffic on Gibson and pedestrian safety, and we will work with DMD and APD to work on that. The Gateway won't be a day shelter, where people come, get a meal, and then leave again. People will come and stay and get the services they need.
 - ii. A: Transportation is a key part of making this a success, making sure that people who want services have transportation right to the front door. There are other shelters in the community set up that way, and that works well for those neighborhoods. We also want to make sure that homeless people in the International District can access a shelter bed, which is good for them and for the neighborhood.
- f. P: Will the submittal on July 6 include the neighborhood associations?
- i. Agent: Yes, it will go to the ZHE and to the neighborhood associations.
 - ii. P: At that time, will we receive an operational plan in writing? One of the requirements is that it will not create significant adverse impacts on adjacent properties or surrounding communities. I don't know how we could have that without an operational plan in writing, something that could serve as a written commitment.
 - iii. Applicant: We do have an operations plan that we are working on. The elements that are relevant to the conditional use will be included in the application.
 - iv. Agent: It won't be the complete operations plan, but it will be the parameters.
 - v. P: Will there be a final plan by August 17, the hearing?
 1. Applicant: I think we will have a fleshed-out operational plan that we will share with the neighborhoods.
- g. P: I saw that other locations were considered. But what was considered in Albuquerque Acres or High Desert or far northwest Albuquerque? HUD requires that you spread this around. There's a homeless shelter on Zuni, low-income housing, how many more of these do we get? What is the cap before the City says it needs to be other places to be fair and equitable?
- i. A: The City wants to continue to have a disbursed system, which is what we have now. We don't want one location, we want to continue to build multiple locations.
 - ii. P: How many are north of Menaul vs. south of Menaul? I bet they are disproportionately south of Lomas.
 1. A: Offhand, we have the Westside Emergency Housing Center, Joy Junction, AOC, Barrett House, New Day. Our shelter system is really disbursed in many locations throughout the city.
- h. P: The only reason why we have disbursed shelters is because a church can open a shelter, and most shelters are religious-run. The only one that's run by the City is the Westside shelter, so the City cannot control where they are. It's been said at previous meetings that it's not going to be 500 people, but the original model was 300, and then 100-150. In a meeting in April, it was mentioned that there would be 175 people, 50 males, 50 females, 75 family members, plus 50 respite beds, so 225 people was planned

a month ago. UNM is doing research, but we're going to have the decision put in five or six months before we have that research.

- i. A: Not all of the shelters cited are faith-based, but you're right, faith-based partners have some abilities. City-run shelters are the Westside and what we're proposing with the Gateway. We know that we have to start small, and we've thought through what it means for a certain number of families or a certain number of individuals. Originally, when there was a single Gateway proposed at 300 beds, we got strong feedback about the importance of a dispersed system, so we backed off. We want to start small and know that whatever we do has to work on the impact.
- ii. P: Starting small is an issue because at this point, people keep talking about the Westside shelter, and when it closes, where are those 400 people going?
 - 1. A: We have no plans to close the Westside. On any given night we have about 500 people who need shelter beds, that was the study done. We don't want all of those at Gibson. The Westside is expensive, but that will be with us for the foreseeable future, because we need that capacity.
- i. P: I hear this site has 572,000 square feet, and we don't know how much of that is going to be devoted to tenants, to beds, to transitional vs. family, and without those numbers, I don't understand how there can be a conditional use proposal. It doesn't seem like the City has their proposal ready, they're just throwing a proposal out to the ZHE without the data. You do not have the data. I hear that tenants are interested, but we're not getting the data on who they are. Another reason I don't believe the City is ready to make this proposal is because of the statement that said there will be no adverse effect on surrounding communities. We do not have that data, and to put that in a report is a lie, to say there will be no negative effect. We have real life experience that says the complete opposite. We have people shitting in yards, breaking into property, but we don't care about personal experiences, and we have so many homeless people we're trying to take care of. Another reason I don't think the proposal is ready is because I heard there will be no negative impact on traffic. This is not true, and there is not data to support this. You're telling me the homeless are not traffic, and they are a lot of pedestrian traffic. Tenants are also traffic. When all of the components of the hub are in, the people that will provide services, every one of them is traffic. I think again that the proposal is not ready, you don't know who the tenants will be, you don't know how much traffic you're bringing in. In the end, what is going to happen is there will be 572,000 square feet, the tenants will drop out, and it will be used as a straight homeless shelter. I don't think this is fair to the homeless or to the community. Other things are the number of parking space, the pedestrian traffic trying to cross Gibson, the vehicular traffic trying to leave, knowing where public restrooms will be. The research needs to be there. There are these statements about dispelling myths, but it's not a myth if you don't have the data. You can say that crime doesn't follow homelessness, but you don't have the data, and real life experience says differently. You can say that if you give people a home that it will address their health issues, but I don't think that's true either and I'd like the research done. You should do the research before this proposal is submitted on July 6.
 - i. A: On the safety aspects, Albuquerque Community Safety, we're addressing the safety and outreach components. We have a variety of outreach teams, and this

is part of what is critical to connecting people to the services they need, and out of the neighborhood to the services.

- ii. P: "Meet them where they're at" doesn't necessarily mean bring them in to meet them. We can provide these services where they are.
- j. P: I want to speak to the 500 number. For the three years that I've been following this, the 500 number has never been bandied about until recently. 300 was what we heard, then dropped to 30, then back to 175 plus respite beds, which is inching back up toward 300. It seems like by saying, "It's not 500!", we're supposed to say, "Great!" That's a concern. Mayor Keller also said this would never be a walk-up shelter or a meal site, and I can't help but notice that's creeping in more; if people walk up with a cart, they won't be turned away. There's a magnetizing effect, and when you put this in, people will be coming from other areas of the city to avail themselves of it. What will the parameters be to know if people are just there for a meal and a bed or for the other services? It doesn't sound like there's a way to pin them down. It seems like every meeting is a different story, that tells me that no one really knows what they're doing.
 - i. A: We plan on the people that are referred will be referred by other providers, and there will be transportation for them to the Gateway. We know that we will have to figure out if someone comes up with a cart, what we will have to do to get them out of the neighborhood and see what services they need and how we can connect with them. We want this to be referral, and we are also that people could walk up. We also want to take care of the pedestrian safety and concern mentioned. There will be food at the Gateway, for the people who are part of the Gateway program. It's not a day shelter, where everyone can come for food and then go back out in the neighborhood.
 - ii. A: I think we are working through what the right balance is. We want to reduce the impact on the neighborhood, like the pedestrian impact. But it's also not good for the neighborhood that people are living outside in public spaces, and we want to create opportunity and a path for those folks. That is good for the community.
 - iii. P: I love the idea that we'll be able to relieve the neighborhood of burdens, but we still haven't addressed what will be done about the people magnetized in who don't want to be part of the program or services, who want to stay on the streets or in the parks. We have a magnetization effect here in the International District. I've worked on a map and through my research, in District 6, not including the Gateway, there are 37 services, not including Oxford House and federal halfway houses. The nearest to us is District 2 at 15 services. District 8, 4, and 1 only have one service, and Districts 3 and 5 have zero. This is magnetizing, redlining a district, and overburdening one place. This is our neighborhood and we are getting shit on. It's hard to think that this is going to be a solution to our problem. District 2 is in a lawsuit with the City. Is that our future, too?
 - 1. A: We want to get more people into shelter beds. I understand that people in the neighborhoods are concerned. We have to start somewhere, and we do need to get people off the streets and connected to what they need. I don't think it's a magic bullet, but it's a piece of the solution. We know that we need to start small.
 - 2. P: We all agree we need assistance for the homeless. But you are targeting one area to the benefit of other areas of town. I can't figure out why we couldn't start small somewhere else, rather than starting

small on top of all of the services and programs that are already here. It's hard to have faith when there are two prime examples of city failures with trying to help the homeless. I'm afraid that's going to be what happens here, especially since we don't have real studies, impact studies, an alternate to the police force. We're talking about things that are coming, but we feel like we have a target on our back. How much is too much before we get overwhelmed and become a barrio by city design?

- k. P: I've participated in about everyone one of these input opportunities. I represent the Parkland Hills neighborhood association, and can just about throw a stone from by property to this facility. I represent 1600 households, more than the number of individuals in need of a bed throughout the city on a given night. Tonight, you've been hearing a strong undercurrent that we do not trust you to carry out an effective and impactful plan that protects the surrounding neighborhoods. What I have seen tonight is an iteration of the same presentation I've seen several times before, even after other input sessions. We still do not have an operational plan in place, which tells me the public input hasn't been compiled or incorporated into an operational plan, which is supposed to be submitted in 2 weeks as part of the conditional use. This is putting the cart before the horse, and we don't have any idea what to expect from this facility. It is time for answers, time for written operational plans that show us that we can trust you to implement and execute an effective and impactful plan. There are unsheltered individuals in my neighborhood and I consider them my neighbors, and I want to see them helped. Thus far, we've been given verbal assurances, sometimes contradictory, which does not inspire confidence, and that's why you're hearing such strong opposition. It's not the theory and the principle, but it's the putting the cart before the horse. We need answers and we need them now in order to have community buy-in. My suggestion is a legally binding Good Neighbor Agreement with the City of Albuquerque, and the enforcing organization for that needs to be a community oversight council including the health care providers in the facility, residents of the surrounding neighborhoods, and potentially graduates of the facility, operating where the executive director will report to the council and if certain metrics are not being met, there will be corrective actions. And this needs to be put in writing now, because the feeling is this is being rammed down our throats. I appreciate this public input, but we can't take it seriously or trust you when we don't have concrete results shown, unless we have something in writing. Unless we get a positive response and statements in writing, we have no choice but to oppose.
 - i. A: I agree, and that's what the operational plan will include. We will have that plan including input by the August 17 date.
- l. P: One of the things we haven't done at these meetings is write down the proportion of people who are actually living in this neighborhood. My concern is overinflated numbers; don't say there were 75 neighborhood members at this meeting, because the number is not actually reflective of the number of people in the neighborhood who participate, and I don't want you to misuse those numbers. That gets to the trust issue. You've discussed the local area, but you haven't discussed how to decamp from that area. Where will the affordable housing be? Where will the transitional housing be? How will you get people to those places in a timely and reasonable fashion? What are we going to do about the people who don't want housing, who don't want to be part of the community in a civilized manner but want to live their lives as they choose, in

homelessness? That's an uncomfortable thing that no one has been willing to talk about except David Sisneros. I worry that as you build more, people will come and hang out, and then what will happen? I need to know about the decamping strategies. That should be central in the operational plan, not just beds and services, but where people will go next.

- i. A: The vast majority of people experiencing homelessness want a home, and we know that different things work for different people. The main issue is not that people want to be homeless, but that there's not enough housing with supportive services to meet those needs, which is why the strategy is not just the Gateway, but also in supportive housing as well, and the City has increased its investment in supportive housing by 45% since FY18. We may focus in the wrong place when we focus on the small portion of homeless folks who want to be homeless.
 - 1. P: That is condescending to me, that is not addressing a reality that many of us see every day.
- ii. A: What we're talking about is, there will be people that no matter what we do as a community, no matter how we work to meet people where they're at, we won't succeed with everyone. I appreciate you raising that. Safe outdoor space is one strategy. I appreciate the comment.
- m. P: I want to address that multiple neighborhoods are affected here. At one of these meetings I said, please keep our parks safe, and the moderator asked which park. It's not one specific park. We need our neighborhoods to be safe. I don't think the City understands how many neighborhoods are affected by the proposal and how much crime we're already subjected to. That's an important point for the people who sit downtown, who don't seem to know the area very well sometimes. I work at a library a few blocks from a homeless shelter, and it's not homelessness per se that's the problem, it's the substance abuse, mental health problems, there's an ecosystem around the shelters involving the sale of drugs and people who prey on the homeless. The City has to acknowledge that. Some people do have kind of a hobo lifestyle, they want to live that way. I hear "our homeless neighbors," but the truth is this shelter will bring people from all over the city. They're humans who need help and we need to find a way to help people as a city, but I hate the spin that we're hearing, the lack of plans, and how the story keeps changing. That's why people are so frustrated.
 - i. A: Thank you for that comment. We do understand that it's neighborhoods, and that it's parks.
- n. P: About public safety in and around the center – is APD or a private security firm going to be doing that security?
 - i. A: Right now, there is 24-7 security on a team there, and that will continue. APD is part of our conversation for the operational plan, as is the Albuquerque Community Safety Department.
 - ii. P: Currently, the southeast APD are understaffed already. Is there a plan in place to hire more officers, equivalent with the population that will be coming? Also, what is the training level involved for this current security that will be in and around the center? Any person on the street has already had to make the choice about self-defense and protecting themselves, and when they get contacted to receive services and brought to the center, what kind of process would be in place to ensure the safety of the residents inside, the safety of the individuals, and the safety of the surrounding communities? You're going to

have families coming in. Is there a process to screen sex offenders who are not currently on supervision?

1. A: APD is working with us on the safety and security. I don't have an answer about an added number of police. There will be pieces in the plan. In other facilities, we've focused on de-escalation training as a key piece. About the sex offender question, families will not be in the same place and single women or single men. We want to keep people safe.
 2. A: We want to make sure we have a trauma informed care approach, mental health first aid, suicide training, and motivational interviewing as part of meeting people where they are.
- o. P: The proposal should not be submitted until operational plan for security is formalized into plan. And the statement that there is going to be no increased traffic effects nor adverse effects on neighborhoods is corrected.
- i. Agent: The slides that I went through are the criteria from the IDO. I wasn't saying we have addressed those yet, but those are the criteria that we have to meet for a conditional use to be approved by the ZHE.
 - ii. P: How are you going to have that data by July 6? How will you know there are no adverse effects on neighborhoods and no increased traffic?
 1. Agent: Where it talks about pedestrian and transit, that's about connectivity, that it won't negatively impact that connectivity. We are working hard to address those criteria by July 6. That letter will be shared with the neighborhoods when we send out the notification.
- p. P: The problem is that the City has a credibility problem with this district. I can go down Central and see the shuttered businesses because of ART. They said it would be great and everyone would love it and there would be nothing to worry about, and that's how I feel here tonight. We've been mischaracterized as folks who might be anti-homeless or against solving the problem of homelessness, and we're not. But we want to do our share, not everyone else's share. We're doing our share. The other thing that scares me is you saying you're going to start off small; I don't want you to start small, I don't want you to start at all. Can you guarantee us that the homeless population we're going to serve is going to be from this district? If we're serving families and homeless in this district, I think we could all get behind that. But if we're importing the homeless in to this facility, I think a lot of us are going to have a problem with it and do everything we can to make sure that whoever is elected is held accountable for that. The lack of planning and organization – I'm the vice chair of the state Democratic Party and you keep giving me more work to do. Also, I'm a veteran, and I use the VA Hospital, and a lot of my brother and sister veterans travel from around the state to go to appointments there, and often have to get there early. If we have a homeless shelter a stone's throw away from veterans who are dealing with PTSD, with substance abuse, how is that helping them? I thought last time we had a meeting, we had an agreement that the shelter would serve our district, but now I'm hearing something different again. I thought we were calling it the Southeast Gateway Center, but I'm not hearing that anymore. It's like building a plane while you're flying it, and that worries me. Will you also guarantee us a beginning and an end, that when someone arrives, a clock starts? I don't want a band-aid for this social problem, I want a cure, and I need the City's assurance that we're not just increasing the homeless population of this district.

- i. A: We don't think anyone's anti-homeless. The thinking that we had has been roughly 90 days, based on experience working with other providers. We think there needs to be a beginning and an end.
 - 1. P: Other parts of this are job training, CNM, Goodwill Industries. You've got the infrastructure in place, but I haven't heard anything about linking those things.
 - 2. A: Those are key. I wish but cannot guarantee that only homeless individuals in the neighborhoods are going to be served, but I do think there will be a positive impact for those who can get connected, get services, get off the street.
 - a. P: We need something guaranteed from the City that makes them a priority, that we solve homelessness in our neighborhood first. Or it's going to be ugly. We need something that's a guarantee that our district is going to be a priority.
- ii. P: I also have my question about veterans. I want to know that veterans will be addressed, or we'll be asking some very uncomfortable questions. What coordination has been done with the VA?
 - 1. A: There has been some coordination with the hospital, and we have to do more. You are absolutely right. Veterans are key.
- q. P: I too have very little confidence that the operational plan will be ready, and if it is ready, it won't be sufficient because of the lack of due diligence by the City. Who are the service providers? When can we see the agreements you have with some of the providers? In other meetings, we were told that services would be provided by agencies already leasing space in the GMC. These places are often full and have waitlists for people with court orders to enter, so I have a hard time believing they will just have open beds for the Gateway Center.
 - i. A: A list of service providers hasn't been identified yet. When the architect completes the assessment and space is identified, we will use a RFP process and put the specifications that we need. We're far away from that step. In terms of the existing tenants, we think there's the potential to connect people, and some providers have expressed interest in potentially expanding their footprint.
 - ii. P: I'd like to see the actual providers who are ready to go on this and what their plan will be, as soon as possible. I believe some of the frustration and anger is building because we lack a plan, and we know that once we get that plan, we still won't have the specifics, a real idea of how someone moves through the facility and who will be accountable and who we need to call.
- r. P: What other entitlement processes will this project undergo?
 - i. Agent: This is the main entitlement process. You normally go to DRB if you're building new square footage or have major public infrastructure. At a minimum, we will do a site plan administrative, a site plan approval process through building permit that will require notification of the neighborhood associations.
 - ii. P: I also wanted to clarify – I know who the partner providers will be is still a question mark, but how many other providers might there be in the facility that might also have overnight shelter beds? We see that with a couple of the current tenants. I'm wondering if that's something that's expected.
 - 1. A: There are about 100-120 folks getting overnight services with the existing tenants.

2. P: Because we don't know who the partner providers will be, it's an open question whether there might be more overnight shelter components? Will those beds be factored in to how many beds the Gateway Center is serving?
 - a. A: There are overnight beds with medical respite. When we do an RFP, we will be clear about the specific services. It's a question about the conditional use, if another tenant came in and wanted to do an overnight component with services, how that would relate to our process.
 - b. Agent: The conditional use process has its criteria and doesn't use a number of beds, though the IDO does have a distance between overnight shelters. If it's all part of the Gibson hub, it would all be part of the one overnight shelter. I can do some additional research where another tenant might also want to do overnight services.
- s. P: I'm a resident of Siesta Hills, a former board president of Siesta Hills, and the current chair of the Homelessness Solutions Committee. I'm also a One ABQ Ambassador. I think that's important; I love this city and I'm not trying to tear it down, but we need answers here. At the moment, we do not have enough transitional housing units to accommodate the number of people that the Gateway is supposedly supposed to serve. The City has not identified enough new housing units to serve those that they're proposing in this shelter. Director Pierce said that most folks will be approximately 90-day programs. If there are 350 beds in this facility turning over every 90 days, that means you would need transitional housing for 1400 residents per year, just from this shelter. That also means that the Gateway Center would serve almost every homeless resident in Albuquerque, just in District 6. If we don't have enough transitional housing in place prior to providing the services, the Gateway shelter will fail before it begins. We would be taking people in, but not having anywhere to place them when they complete their plan, and they will end up back on the streets with money and time wasted. Since this is not supposed to be the only Gateway in the city, I feel that much of the 572,000 square feet should be reserved for coordinated services, and District 6 should not have to shoulder more than 100 beds, especially considering how many indigent services and shelters the southeast already holds. I would ask that the transitional housing needed be set up in all other city council districts, outside District 6.
 - i. A: We do need the housing. We know that part of the \$14 million in the next budget year for transitional housing will be used for Gateway individuals. Addressing the housing options throughout our community is critical to this.

Application Hearing Details:

1. This is a pre-application meeting. Applicant plans to submit an application to the ZHE for the conditional use for the August 17 hearing.
2. Hearing Details:
 - a. The Zoning Hearing Examiner (ZHE) conducts monthly quasi-judicial public hearings regarding special exceptions to the Integrated Development Ordinance.
 - b. A special exception allows a property to develop in a way that is different from what the zoning of the property allows. Special exceptions include variances, conditional uses, and expansions of nonconforming uses or structures. After a special exception is filed,

all interested parties are given the opportunity to participate in a public hearing. All requests are given due consideration.

3. Hearing Process:
 - a. Comments from facilitated meetings will go into a report which goes to the Hearing Examiner.
 - b. All interested parties may appear at the hearing and voice their opinions or submit written comments prior to the day of public hearing.
 - c. The Zoning Hearing Examiner will render a determination of approval, approval with conditions, or denial within 15 days after the close of the public hearing. Determinations can be appealed to City Council through the Land Use Hearing Officer.
4. Any further questions or comments can be referred to:

Lorena Patten-Quintana
ZHE Planner
lpatten-quintana@cabq.gov

Names of Registered Attendees:

[Note: Approximately 98 people registered for the meeting, and as many as 75-80 participated in the meeting at the highest participation. This list reflects everyone who registered for the meeting.]

Julie Fulcher	William White	Steve Sacco
Raven DelRio	Jim Summers	Karen C.
Mary Collins	Kathy Summers	Brittany Costello
David Montoya	Candy Nartonis	Bernadette Hardy
Kristina Yu	Jackie Fishman	Reyna Juarez
Rita Giomi	Sonora Rodriguez	William Burleigh
Katy Fuchs	Bridget Llanes	Jeff DeBellis
Bobby Ehrig	Paula Metzner	Glory Juarez
Alexandra Paisano	Peter Kalitsis	
Aaron Moore	Melinda Frame	
Tamaya Toulouse	Vera Watson	
Julie Hinzman	Colleen Woods	
Sandra Perea	Maggie Silva	
Ruthie Bailon	Kathleen Pierson	
Mary Toponce	Karen Bonime	
Linda Schilling	Rachel Baca	
Patricia Saul	Carol Pierce	
Khadijah Bottom	Erin Engelbrecht	
Nicky Ovitt	Virginia Kotler	
Craig Ebersbach	Taylor Cook	
Eliza Martin	Sharon Wirth	
Greg Steiner	June Sutton	
Douglas Heller	Mary Rodriguez	
Ryan Kamm	John and Bernice Comstock	
Myles Padilla	Vincent Lavolpa	
Regina Mead	Jacquelyn Robins	
Calenda Wooten	Tony Johnson	
Christina Martin	Kenneth Sherrell	

Janet Benson	Janet Youngberg	
Dee Whitfield	Marit Tully	
Robert Pierson	M. Connolly	
Wallace Payne	Robyn Cruz	
Michael and Kathleen McBride	Kate Matthews	
Ruth Haest	Rob Leming	
Barbara Jay VeeVee	Michelle Meaders	
Rich Weiner	Patricia Willson	
Gilbert Ramirez	Janet Simon	
Lisa Huval	Aaron Nieto	
Myra Segal	Mandy Warr	
Bobby Sisneros	Frances Davis	
Gary and Lydia Rieg	Laura Calderone	
Debbie Purdy	Daniel McLaughlin	
Rod Reay	Catherine Farmer	
Jennifer Jones	Ryan Kious	
Tim Roberts	Valerie Wolf	

Appendix: Zoom Chat Comments

- Is anyone from the city of ABQ. attending this meeting?
- Can we please ensure to get a recording link for this meeting?
- Please let us know now, at the top of the meeting, whether a link to the recording will be made available either at request or on the City's website or otherwise. Thank you.
- Is the mayor attending this meeting?
- Please display screen with contact info for planner and yourself...Or place that in chat...or a link..thanks
- Do Not agree with Mayor's Plan to purchase facility and seek zoning change later.
- No - rammed down our throats, just like ART!!
- Nice job of changing name to change focus on fact that the bulk of this "hub" will be a homeless shelter...How many of the 572,000 will be devoted to tenants and how much to shelters.
- Can attendees please get a copy of this powerpoint? Thank you.
- I don't believe research supports that housing is the crux of the matter of why the disparity exists... Changing the housing is NOT going to necessarily change the disparity. Ask anyone in "inner city housing"
- Wow. At least double for all these problems and much more than that for most! must cost a lot more to the public to provide healthcare to unhoused than even it would be to provide housing.
- How many square feet would be to "medical respite?"
- That's wild. Just in the price for healthcare we are already paying to help unhoused it makes sense to provide housing! That graph makes it crazy clear
- How many square feet and personnel would be housed to provide employment services, behavioral health services, medical care, permanent housing?
- I do not believe respite use is compatible with family use. There is no clear end game/plan to achieve housing.
- I have not heard a plan...only a vision of "what we want" ..there is NO plan1
- It's the same powerpoint presentation over and over with no answers after three years.

- Good evening. Thank you for having this meeting and letting us participate. I live in the Downtown area. The downtown area is bearing the brunt of the homeless population ills, although this issue is a social issue that needs to be addressed and borne by all areas of the City. The homeless need medical, health, and daily living attention. I am in favor of this project and believe it is well-planned and the area of town in which it is located is great. Bus service is available to this facility. Medical services are there already, and it seems like the supportive services would be very well utilized.
- Operational components needs to be resolved before further movement.
- Do we have permission to record?
- This is a one party state Craig, you don't need permission, just FYI.
- Good evening... I disagree that there is a plan...there is no plan...just an uninformed purchase of property and money pit.
- I thought this was a meeting for the neighborhoods surrounding GMC to give their input - not downtown. I understood it was Elder Homestead, South San Pedro, Siesta Hills, Parkland Hills, and Trumbull Village that were invited to participate.
- While I am sympathetic to the city-wide impacts of the unsheltered population, there are local concerns that need to be addressed that local residents are keenly aware of and willing to share helpful ideas. This facility/operational plan needs A LOT of work until it is acceptable.
- Where can I find a copy of the comprehensive plan??
- Standards are not set yet...specific use standards...Adverse impacts-cannot be yet declared that there will be no significant adverse impact to surrounding community.
- Who will assess the adverse effect to the surrounding neighborhood?
- There will be new cars because you are going to have personnel for those citizens you serve.
- I agree Barbara.
- It will also have a negative impact on pedestrian and transit connectivity.
- Family and community services needs to have a plan with transit BEFORE this conditional use app is approved
- What case worker-to-client ratio are you targeting to determine how many social workers you need?
- WHY is there an application being submitted on July 6, when there are issues on the conditional use.
- I think we need an in-person hearing on this.
- There is NOT research on the declaration that there will be no negative impact.
- 300 feet is inadequate. The effects on surrounding areas should be addressed for at least a mile.
- Each have a date except notice to NAs. Why no date for that?
- Why are they submitting a conditional use permit request BEFORE the planned site use plan is in place? It seems to be putting the cart before the horse
- UNM's own studies show a 56% increase in crime within I believe a mile of a shelter.
- How does this hub comply with HUD requirements to deconcentrate low income housing across the city, which includes homeless shelters?
- There should be a link to the recording, we don't need a large file. We are requesting a recording because specific details that are shared by officials are needed to follow up on. If you cannot share a recording, we should be able to get a PDF of a transcript.
- Not sharing a link to a recording nullifies the claim to transparency.
- Agreed...a recording should be available.

- A report is only going to highlight what one person who is writing the report wants to highlight or remembers to highlight.
- You can really slant a meeting report when you're the one writing it.
- Was the site assessed as to level of low income housing in the area vs say North Albuquerque Acres.
- Did unhoused people rob your parents?
- Where is the research that says unhoused people are not linked to higher crime rates? I think research shows differently.
- Once the permit is granted, is there any further avenue for neighbors to have input in this process?
- Will it be documented how many people on this meeting were from neighborhoods affected versus not in neighborhoods affected?
- Barrett House has 30 beds
- My research shows 37 homeless/drug and alcohol/behavioral health/faith-based services in District 6, There are only 17 in D2, 13 in D7, 2 in D9, 1 in D1, 4. and 8, and ZERO in D3 and D5. This is NOT "evenly spread out" like the City claims.
- Without knowing how much square foot is being devoted to beds, there is no idea of how many beds there will be
- You don't have a number in mind. That's unbelievable
- How can we get the input of the houseless population? What they need? What is their voice? Online meetings are great. They are not ideal for the target population. Is there anything I can do to support the effort to give a voice to the voiceless?
- I read a number of articles where some unhoused were interviewed. They requested to be placed far away from Central and temptations or the downtrodden environment. Guess how that went.
- HEAR her!!
- Thank you Tamaya!!!! Completely Agree!!!!
- Thank you, Tamaya.
- Tamaya nailed it.
- Thank you, Tamaya!!!
- I'm sorry but Carol's response is woefully inadequate to address Tamaya's comments.
- Agreed with Rob.
- That's it, Tamaya. Spot on.
- Agreed with Rob and Tamaya!
- None of their responses address our concerns
- Tamaya is correct
- So in other words you are moving forward no matter what we say?
- I'm trying to get on board with some version of Gateway, but I'm having trouble moving in that direction. There are way too many issues to address that have not been addressed or in process of being addressed. There are excellent questions unfortunately not clear answers.
- It boils down to Tim Keller and a fistful of Councilors wanting a reelection. Ramming this through with be a coup...
- What exactly does "referral" mean?
- YES Ryan, thank you!!!

- I agree with the comments by Tamaya. We are getting generalized answers to specific questions. Until we get specific answers, I do not see how the rezoning can be approved without written plans.
- Do the NA's get a copy of the application, or does it just go straight to the Zoning Examiner?
- Good questions
- So will you answer his question please
- Heading home
- We need a map showing number of beds, SE has many more beds than other areas. Shelter
- I agree. We need a report on where shelters are and what percentage are here in SE.
- I built the map.
- These shelters are not proposed to hold 300+ beds like Gateway!!!
- THIS IS CORRECT.
- Barrett house is located south of Indian School. That is always trotted out as the "dispersed" shelter in the NE heights.
- Westside shelter /Emergency Housing Center has 300 beds
- City has said they plan to close west side - please do not go back and forth on what you say Carol, Lisa, all of you at City
- The have claimed the West side will close repeatedly.
- Go Barbara!
- Phoenix has a similar "center" called Human Service Campus, with 15 organizations providing services and their surrounding neighborhoods are "Overwhelmed and overburdened by the sheer volume of homelessness" <https://amp.azcentral.com/amp/5967262002>
- Point for point for point, Barbara, you are spot on.
- These are excellent points!!
- Excellent points. Let her continue.
- The westside shelter previously had a couple of years ago had a capacity of 450 not 300.
- She is bringing up detailed excellent points.
- Instead of interrupting her, why don't you answer her questions!
- Thank you Barbara!
- Great point providing services where they are
- We need to go to zoning meeting. To slow down this project.
- If they show up with a cart from a business (smiths cart) they should be arrested. Stolen property.
- No, that is not a sound plan.
- When you get your operational plan solidified is when the proposal should go to zoning committee!!
- What plan? At present there are no studies or a clearly laid out plan. What about the impact to local businesses?
- Go Raven! You have given us more information than the City to date!
- Exactly, Raven. Thank you!!!
- There it is.
- Thank you for those numbers, Raven.
- Excellent points, Raven!!!
- Yay Raven
- Amen

- Based on data presented by Raven, and lack of data ...this proposal IS NOT ready for submittal on July 6
- Thank you Raven. Spot on.
- "We want to get more people into shelter beds."
- District 6 residents are not 'concerned', we are OVERWHELMED with indigent services.
- Problematic phrasing there, we need clarity on numbers.
- The proposal is not remotely ready. Lots more work needed.
- HOW big a slice will be shelter and how much will be tenant services??!!!
- They don't care you get hurt. They want re-election
- AND starting small still needs a cap!!!
- Raven is speaking the harsh truth. No it is not going to help us getting them in the shelter from our neighborhood, if you are bringing more into the neighborhood by busing them in from all over.
- Raven and many of us have done homework for months. City doesn't give us anything concrete, just maneuvering and we're not disposable citizens here – we've built homes here. Starting small is what we asked city council to do w/ Davis amendment last week
- We are also hosting a "safety center" at San Mateo and Kathryn
- No, the city is now planning to build housing there.
- The Kathryn San Mateo plan is still quite a ways from being finalized. It's my understanding that a public input meeting regarding that location is scheduled for the upcoming weeks and months. Please check the d6 Facebook page or website for more information as it becomes available.
- NO PLAN
- No zoning change
- Rob is right. We need real, binding answers.
- Yes we do.
- Yes yes yes Zoning meeting needs canceled until real plans and data are presented to neighborhoods.
- Agreed, the conditional use proposal should be cancelled for July 6
- Hear! Hear! Thanks Rob Leming
- A red-lined document that shows that Plan A existed, and then gives us a clue as to what has been changed after public input!
- Right on, Rob!
- Thanks Rob, Raven, Tamaya et al.
- This I why there won't be a video link...they don't want this out there.
- Thank you Rob.
- IF august is when operational plan will be written than that is when proposal to city zoning should be made
- Thank you Rob!
- We need to start voting no on the bond funds for proposals with no details
- Good point, Mario in them inflating numbers of how many participants are actually from the affected neighborhoods.
- Yes Agreed, no conditional use request without an operational plan that is neighborhood reviewed
- Thank you Rob! Well, if you are going to have the operational plan in August, then the rezoning should not be approved until then.
- Thanks for that point Mario, I live in District 6 but further west in Victory Hills.

- The tent facilities that the housing committee is looking should be located in other areas other than district 2 and 4
- Decamping strategies need to be in place..YES!!!
- Yes.
- I refuse to vote yes on bonds now for just this reason...just seniors and parks get my ok. I voted yes on streets for ever, but quit after they repaved west side sidewalks and streets twice in 2 years, but Elder Homestead still has original 1954 sidewalks.
- They are already camping out at the small house village.
- There is no data saying that most people that are homeless want a home
- Where is the data to support that most folks that are homeless want a home???
- There is no data to support that most folks that are homeless want a home...why does Lisa keep saying that!!!
- There is NO data supporting that claim. I have friends in Social Security that quit due to getting overwhelmed by the number of homeless that will not quit their lifestyle.
- I strongly disagree was meant for all
- I agree with Raven...that is my data as well!
- And yes, magnetization is clearly in effect with the number of people who have moved in to the streets and neighborhoods near Tiny Homes.
- Seems Carol and Lisa dance around they issues. Don't answer directly
- Please limit the city response time tnx
- I never got a response from the lady that presented the proposal bullets in which the proposal stated that there is no effect on traffic or adverse effects on neighborhoods.
- The city is still using our parks as pick up/drop off for the shelter system. That wouldn't fly in the far northeast.
- Why can't homeless people be temporarily allowed to stay in the old Galles on Lomas or KMart, which are air-conditioned?
- Good points Laura!
- There is no security plan once they leave the premises.. Albuquerque police have no plans for increased patrols, and yes; we are currently understaffed.
- How is the Gibson Center going to separate out the people who truly want help/services verse the people who want to be homeless? The ones who don't want help will need to be redirected somewhere else to avoid congesting services for those who want help.
- We have asked for transparency on crime statistics currently around this area, and APD presence based on crime stats, not necessarily populations.
- Medical care is to be provided to the homeless presumably at city expense due to inability of the clients to pay. Would a poor person who has a home get the same support?
- There is no screening process, including abusers/sex offenders/ violent criminals, etc.
- Are they wanting our neighborhoods to form vigilante groups?
- Not to beat a dead horse...but Jackie Fishman, the proposal should not be submitted until operational plan for security is formalized into plan. And the statements that there is going to be no increased traffic effects nor adverse effects on neighborhoods is corrected.
- Funny, but one person involved in this City-side suggested neighborhoods be proactive. Not my circus, not my job
- Whatever information the city comes up with on adverse affects also needs to be shared with neighbors and businesses and discussed BEFORE decisions are made, and with ample time.
- Agreed, Tamaya!

- The conditional use meeting for July 6 should be canceled until more data is gathered. Why is the city rushing this? Is this strictly a political move by Keller?
- None of the people involved in this project live here, so they do not care what happens.
- Agreed, the conditional use proposal for July 6 should be cancelled until the data and the operational plan is in writing - and good neighbor plan is in place.
- For the record, here is the link to my services map. There are 4 more homeless services to add courtesy of collaborators, but my connection is tenuous, so I'll be adding them post-meeting.
<https://www.google.com/maps/d/edit?mid=1UY2rBBJvh4sJwsmQwN0ieemwGcaivFPT&usp=sharing>
- And neighborhoods affected will have time to respond to the proposal that is drawn up that will supposedly address include data on traffic and adverse effects
- Awesome Raven, thank you!
- Agreed that this item should be removed from the upcoming conditional use permit hearing. Is there a way for us to request that this be bumped forward rather than allowing this item to be on the meeting's agenda?
- Good neighbor agreements have NO TEETH. They are not legally binding. The GNA's I have seen do not even list CABQ as liable parties, they only list the neighborhood and the non-profit the city pawns the responsibility off to.
- This is not the First of Many, rather it is the Only of None.
- ..." trying to build this plane while you're flying it..."
- To say start small is what city Council voted against in the proposal made by Pat Davis
- *Only of One. Stupid fingers!
- This is District 6, not 5. But your point is well taken.
- District 6, David, District 5 is on west side of river
- At least I think that is what our City Councilman was asking
- Yes, thank you David!
- Sorry for getting districts mixed up...I'm rather perturbed at moment.
- I can't help but wonder who was promised what to vote against Pat Davis if "starting small" is really in the City plan.
- We are not solving this together...this is being pushed down our throat...
- Bravo David, I hesitated to bring up the obligation of the participants have some terms of compliance. The "Low barrier" concept really concerns me. This must be quid pro quo!
- city not credible.
- If people will not meet halfway to ascend from homelessness, then the ship has already sunk.
- There are no solutions being proposed to neighborhood concerns...only talk of visions...and when you look back on the mountains, the Landslide will bring you down
- There will be a positive impact no matter where they are served at.
- Go, David! let's get the delegation involved!!!
- If we were in this together.....
- Barbara...give me about 3 hours, and I can draft you a powerpoint about the new railway bridge I'm going to build you downtown. I'm not saying I can lay a single brick, mind you, but I can make you one helluva presentation!
- We need a legally enforceable documents that hold the city accountable.
- Patricia, please do!
- I want to thank all neighbor residents for attending and staying on this . And to Jessie and your group, please note all the unanswered questions tonight and the trust issue we spoke to. I am

still waiting on answers to my sign up for homeless newsletter, and my gateway input question - I haven't received any responses except from Jessie - no transparency so they don't mean it.

- I second Vera. I've not gotten a single thing from the City other than Jessie's emails.
- We need another meeting to address all of the points brought up tonight
- DO THE RIGHT THING. PERMIT HEARING NEEDS CANCELLED UNTIL THERE IS MORE DATA PROVIDED AND WE ARE GIVEN AN OPERATIONAL PLAN.
- Thank you David. Great points.
- David, thank you! You were great as so many have been tonight!
- Oops sorry district 6
- When will that architect review be complete...that is the least that should be complete BEFORE the zoning proposal is made!!!
- Thank you, David
- Agreed...that was one of my questions too...to know who the actual tenants/ providers will be AND how much square foot will be allotted to ancillary providers!!!
- No conditional permit should be issued now. We need answers.
- If nothing has been decided yet why is the city proceeding with any future decision regarding the Gateway. Please GET a plan and then proceed. The city is not giving ANY concrete answer to any of the issues. Everything has been said to be in the future. The future is July 6th????
- Barbara...YES! How do we know what goes where and how much of it when NOTHING EXISTS.
- I wonder who the architect is. How do we express our concerns about numbers to that person or organization?
- NO conditional permit should be asked for!!!! NOT on July 6 and not in Augustnot until operational plans, architectural review is completed!!!
- What is the appeal process for ZHE?
- We should request that the review board decline to open this process
- What is the appeal process for a "site plan administrative" decision?
- Kate- agreed.
- The city should not approach the zoning examiner with a ghost proposal on July 6!!!
- Agree, there should be no permit without a credible, transparent and thought out plan.
- So....the City wants respite beds, shelter beds, then overnight beds from God-knows-how-many tenants?????
- Yikes.
- Will there be daycare for families with children onsite?
- This right here is why that amendment from Pat Davis was so important. All bets are off for bed caps.
- "It's not going to be 500 beds" Puts in 500 beds.
- Why are we asking approval for use when we don't have an operations plan?!!!
- Rachel , I mentioned that in chat, let's look for it
- Will the current homeless shelters still be in operation along with the Gateway Center?
- Already holds....with a crap track record.
- YAAAAAAS Queen
- 70 maximum is more sustainable than 100. A cap of 70 total individuals or 30 families maximum would be supportable by the neighborhoods.
- Let Districts 1, 3, 4, 5, 8, and 9 take their "Fair Share"
- Who else would agree with a CAP OF 70 INDIVIDUALS OR 30 FAMILIES?
- Peter, I would

- Only 100 if they were all Veterans
- Can we please get the budget and timeline for additional transitional housing listed in the plan before July 6th? Thank you everyone for your time.
- Tamaya has done her homework, which is more than I can say for the city. Great job Tamaya.
- Thank you Jessie for facilitating what we knew would be challenging meeting.
- I would
- We definitely need a reasonable cap. 70 maximum.
- Thank you Jessie for facilitating a hard meeting.
- From all the community partners in place now, there should be data for a graduation rate from services and maintaining stability?
- Thank you Jessica! You did a fabulous job with an emotionally charged topic.
- good job Jessie
- Thanks Tamaya. Good questions.
- Recording is trusted thnx
- 100 VETERANS WOULD BE GOOD AS THEY HAVE ADJACENT SUPPORT SERVICES NEXT DOOR
- Thank you Jocelyn
- A big sarcastic Thaaaaaaanks to every City Councilor but Pat
- I saved the chat and audio recorded if anyone needs it

APPENDIX A CONT'D, PHNA ITEMS

Date: August 10, 2021

To: City of Albuquerque, Planning Department; City of Albuquerque, Legal Department

Re: Request for immediate rejection of the application by the City of Albuquerque, Family and Community Services, and their agent, Consensus Planning, Inc. for a Conditional Use Permit for an Overnight Shelter at 5400 Gibson Blvd SE and 5006 Gibson Blvd SE as the applicant's submission does not meet the requirements for application per the IDO

Attn: Brennon Williams, Planning Department Director

Our Neighborhood Association, Parkland Hills, would like to inform you that the City of Albuquerque Family & Community Services, and their representative, Consensus Planning, have not adequately completed the submission process in applying for their Conditional Use Permit for the Overnight Shelter at 5400 Gibson Blvd. SE and 5006 Gibson Blvd. SE.

As an adjoining neighborhood, Parkland Hills did not receive "a meeting request," as mandated in IDO 6-4(C)(3), but rather, received a meeting notice "as a courtesy." Additionally, Parkland Hills was not involved in selecting the date for a pre-submittal meeting; the date was not "agreed upon" (IDO 6-4(C)(4), but determined by the applicant.

Though the applicant failed to follow IDO protocols and procedures for scheduling a pre-submittal meeting, a meeting was scheduled by the applicant, for which notice was sent to South San Pedro NA and District 6 Coalition, and sent to additional NA's as a "courtesy." This meeting was held on June 22, 2021. At this meeting, the applicant failed to provide the information required by IDO 6-4(C)(6):

"At the pre-submittal neighborhood meeting, the applicant shall provide information about the proposed project, including but not limited to the scope of uses, approximate square footages for different uses, general site layout, design guidelines, architectural style, conceptual elevations, and conceptual landscaping plans."

Not only was this information not presented, but specific questions regarding the approximate amount of space and square footage devoted to different uses went unanswered, as you will see in the Facilitated Meeting Report under Question no. 2b, pg. 4, and Question 2i, pg 7. (See attached file – 5 2021-6-22 Facilitated Meeting Report). The damage done by lack of information and opportunity to participate leading up to the meeting remains to be seen.

Because of the applicant's failure to comply with IDO requirements in IDO 6-4(C)(3), (IDO 6-4(C)(4) and IDO 6-4(C)(6), we are requesting that you reject this application immediately.

To clarify the sequence of events, and Parkland Hills' due diligence in informing Consensus Planning of this error, we would like to explain the following:

Parkland Hills Neighborhood Association [PHNA] received an email from Jacqueline Fishman AICP, Principal, Consensus Planning, Inc. on June 4, 2021 notifying the NA of a meeting scheduled for June 22, 2021 "for the two affected neighborhood associations, District 6 and South San Pedro." It went on to state that they were providing this notice "as a courtesy to...Parkland Hills..." (See attached file - 1 PREAPP FACIL MTG COURTESY dated June 4, 2021 communication from Jacqueline Fishman, page 2).

PHNA President, Rob Leming, informed Ms. Fishman that PHNA did not receive a request for a meeting as mandated by the IDO (See attached file – 2 OFFICE NEIGHBOR COORDINATOR PARKLAND

INCLUSION- Please note that his letter is included attachment 3, CORRECTION OF INFORMATION dated June 22, page 2, From Rob Leming to Jackie, as attachment 2).

Ms. Fishman acknowledged in a subsequent email to Mr. Leming that Parkland Hills should be considered an "affected neighborhood association" to be notified. (See attached file – 3 CONSENSUS PARKLAND INCLUDED referenced correspondence from Ms. Fishman dated June 18/17, 2021. Attached file 3A Addresses exhibit_PARKLAND INCLUDED is attachment 1 of 2). 3, 3A

In Ms. Fishman's response email to Mr. Leming, the error of the applicant to meet the requirements of IDO 6-4(C)(3), (IDO 6-4(C)(4) is acknowledged by Consensus Planning. In the Facilitated Meeting Report from 6/22/21, the inability of the applicant to address IDO requirements IDO 6-4(C)(6) is revealed in the questions and comments in Question #2, pages 4-7.

We also want to make note of the error in their Official Public Notification Form, under Part I – Process, where "Neighborhood meeting required" with an option to check "yes" or "no," both boxes are checked.

We appreciate your consideration and response to this request.

Sincerely,



President, Parkland Hills Neighborhood Association

See attachments 1, 2, 3, 3A, 4, June 4 neighborhood notification packet

Referenced IDO sections:

Per the IDO section **Part 14-16-6: Administration and Enforcement**

6-4: General Procedures

6-4(C) PRE-SUBMITTAL NEIGHBORHOOD MEETING

6-4(C)(1) For those types of applications where Table 6-1-1 requires a meeting with a neighborhood to be offered, the applicant shall offer at least 1 meeting to all Neighborhood Associations whose boundaries include or are adjacent to the subject before filing the application. In such cases, project applications will not be accepted until a pre-submittal neighborhood meeting has been held, or the requirements for a reasonable attempt in Subsection (3) below have been met.

6-4(C)(3) A meeting request shall be sent to the 2 representatives on file at the ONC for all applicable Neighborhood Associations via Certified Mail, return receipt requested, or via email. Either method constitutes a reasonable attempt to notify a Neighborhood Association of a meeting request. The requirements of Subsection 14-16-6-4(K)(7) (Documentation of Good Faith Effort Required) also apply.

6-4(C)(4) If the Neighborhood Association chooses to meet, the Neighborhood Association must respond within 15 calendar days of the request (Certified Mail or email) being sent. The meeting must be scheduled for a date within 30 calendar days but no fewer than 15 calendar days after the Neighborhood Association accepts the meeting request, unless an earlier date is agreed upon. If the Neighborhood Association declines the meeting, the applicant may proceed pursuant to Subsection (9) below.

6-4(C)(6) At the pre-submittal neighborhood meeting, the applicant shall provide

information about the proposed project, including but not limited to the scope of uses, approximate square footages for different uses, general site layout, design guidelines, architectural style, conceptual elevations, and conceptual landscaping plans.

6-4(C)(7) A summary of the meeting shall be prepared and emailed to the representatives of the Neighborhood Association(s) that requested the meeting and any other meeting participants who signed in and provided an email address.

6-4(C)(9) Where Table 6-1-1 requires that a pre-submittal neighborhood meeting be held, and a meeting was not held, the requirement for a pre-submittal neighborhood meeting shall be waived if the applicant can demonstrate that reasonable attempts were made to notify a Neighborhood Association as required by Subsections (1) through (4) above, and either no response was received within 15 calendar days of the notice being sent, or the notified Neighborhood Association declined the meeting.

6-4(G)(4) No development application shall be reviewed for compliance with this IDO or scheduled for a public meeting or hearing by any decision-making body until it is determined to be complete.

End of referenced IDO sections.

Fwd: Preapplication Facilitated Meeting - Gateway Center

Melinda Frame <phna.homelessness.solutions@gmail.com>
To: peter kalitsis <peterkalitsis@gmail.com>

Wed, Jun 9, 2021 at 3:59 PM

----- Forwarded message -----

From: **Rob Leming** <phnapresident@gmail.com>
Date: Tue, Jun 8, 2021 at 6:13 PM
Subject: Fwd: Preapplication Facilitated Meeting - Gateway Center
To: Janet Simon <phnacomunications@gmail.com>, Melinda Frame <phna.homelessness.solutions@gmail.com>

----- Forwarded message -----

From: **Jessie Lawrence** <jessie@lawrencemeetingresources.com>
Date: Mon, Jun 7, 2021 at 4:59 PM
Subject: Re: Preapplication Facilitated Meeting - Gateway Center
To: Jackie Fishman <fishman@consensusplanning.com>
CC: info@willsonstudio.com <info@willsonstudio.com>, mandy@theremedyspa.com <mandy@theremedyspa.com>, zabdiel505@gmail.com <zabdiel505@gmail.com>, khadijahasili@vizionz.org <khadijahasili@vizionz.org>, sp-wonderwoman@comcast.net <sp-wonderwoman@comcast.net>, mrkious@aol.com <mrkious@aol.com>, mldarling56@yahoo.com <mldarling56@yahoo.com>, phnapresident@gmail.com <phnapresident@gmail.com>, alyceice@gmail.com <alyceice@gmail.com>, landry54@msn.com <landry54@msn.com>, rbaca@bizjournals.com <rbaca@bizjournals.com>, kp-shna@centurylink.net <kp-shna@centurylink.net>, Chaplin, Doug H. <dchaplin@cabq.gov>, Cooper, Kinsey <kcooper@cabq.gov>, Tyson Hummell <thummell@cabq.gov>, Shannon Triplett <striplett@cabq.gov>, Charlene Johnson <Johnson@consensusplanning.com>, Jocelyn M Torres <nmlawyer09@comcast.net>

Thank you for sharing this information, Jackie. I wanted to reiterate that if any neighbors have any questions for me as the facilitator about this meeting, please feel free to contact me in advance by email or phone. I also welcome input about discussion topics for the meeting. That will help me make this the most useful and productive meeting possible.

Also, if there are other neighbors that may be interested in this meeting, please help share the information. As a reminder, attendees need to use the link below to register, and they'll then receive the meeting connection information.

I'll look forward to our meeting on June 22.

Jessie Lawrence
CABQ Contract Meeting Facilitator

On Jun 4, 2021, at 3:13 PM, Jackie Fishman <fishman@consensusplanning.com> wrote:

Dear Neighbors,

This email is notification that Consensus Planning is preparing an application for a Conditional use for Overnight Shelter to the City of Albuquerque Zoning Hearing Examiner (ZHE) on behalf of the City of Albuquerque Department of Family and Community Services. The property is located at [5400 Gibson SE](#) the site of the existing Gibson Medical Center. The property is zoned MX-H and is legally described as *Tract A-1-A-1-A Plat of Tract A-1-A-1-A Lovelace Hospital (being a replat of Tract A-1-A-1 & a*

portion of vacated Ridgecrest Drive SE) containing 20.4232 Acres. The request is for the City's Gateway Center project, an overnight shelter proposed for a portion of the Gibson Medical Center. Please see the attached neighborhood notification packet.

The City is providing an opportunity to discuss this request at a scheduled facilitated meeting on Tuesday, June 22, 2021 from 5:30 – 7:30 PM via Zoom using the following link:

<https://bit.ly/2SVSXxt>

The Office of Neighborhood Coordination provided contacts for the two affected neighborhood associations, District 6 and South San Pedro. Given the City has reached out to other neighborhood associations in the area, we are providing this notice and invite to the facilitated meeting as a courtesy to Elder Homestead, Parkland Hills, Trumbull Village, and Siesta Hills neighborhood associations.

Jessie Lawrence, an independent contractor with the City's ADR program, will be facilitating the meeting. Attendees must use the link above to register for the meeting prior to attending. Attendees need to enter name and email address to receive the meeting connection link. For more information about the facilitated meeting, please contact Jessie Lawrence at jessie@lawrencemeetingresources.com or (505) 603-4351.

For more information about the conditional use application and request, please contact Jackie Fishman, Principal at Consensus Planning, at fishman@consensusplanning.com or (505) 764-9801.

Thanks,

Jacqueline Fishman, AICP

Principal

Consensus Planning, Inc.

302 Eighth Street NW

Albuquerque, NM 87102

P: 505.764.9801

<Neighborhood Notification Packet - 5400 Gibson Blvd SE.pdf>

--

Rob Leming

President

Parkland Hills Neighborhood Association

505-750-7672

To: Jacqueline Fishman AICP, Principal, Consensus Planning, Inc,
Office of Neighborhood Coordinator

Re: Correction of information in email letter and Neighborhood Meeting Request for Conditional Use for overnight Shelter at 5400 Gibson Blvd. SE, Albuquerque, New Mexico.

Dear Jacqueline,

Our Neighborhood Association, Parkland Hills, would like to clarify informational errors on the Official Notification Form for the above project, and on the letter sent to some of the adjacent neighborhood associations.

On the Neighborhood Meeting Request Form under "Neighborhood Association" there is a listing of two neighborhood associations, though only one is in fact a neighborhood association. It lists South San Pedro Neighborhood Association, which is one of the adjacent neighborhood associations. The letter also addresses the District 6 Coalition of Neighborhood Associations as the second neighborhood association. To be very clear – **District 6 Coalition is not a Neighborhood Association** and therefore does not qualify as an official party to be notified. It is generous to include the District 6 Coalition to be more inclusive, but our Neighborhood Association, Parkland Hills, along with others, **have been excluded**. Parkland Hills is indeed adjacent to the Gibson Medical Center property line, and so too is Siesta Hills. Elder Homestead and Southeast Heights are in very close proximity as well.

Our Neighborhood Association is additionally writing to clarify the Pre-Submittal Neighborhood Meeting requirement as outlined in the IDO (and referenced at the bottom of this letter). Our neighborhood association was sent an email from you, Jacqueline Fishman AICP, Principal, Consensus Planning, Inc, which stated the following:

"The Office of Neighborhood Coordination provided contacts for the two affected neighborhood associations, District 6 and South San Pedro. Given the City has reached out to other neighborhood associations in the area, we are providing this notice and invite to the facilitated meeting as a courtesy to Elder Homestead, Parkland Hills, Trumbull Village, and Siesta Hills neighborhood associations."

We would like to clarify the statement "invite to the facilitated meeting as a courtesy": per IDO Section 14-16-6-4(C), a meeting with the neighborhood is to be offered, and that the applicant "shall offer at least 1 meeting to all Neighborhood Associations whose boundaries include or are adjacent to the subject before filing the application" (see IDO paragraph at the bottom of this letter for reference). The above statement stating this notice is a "courtesy" is in error, unless there are plans to do future invite to Parkland Hills, as our neighborhood is adjacent to the property.

As section 6-4(C)(3) states a "meeting request shall be sent to the 2 representatives on file at the ONC for all applicable Neighborhood Associations via Certified Mail, return receipt requested, or via email" (see IDO paragraph at the bottom of this letter), we request that the Office of Neighborhood Coordination corrects Consensus Planning's error.

Our Neighborhood Association would appreciate a follow-up to verify that this misinformation has been corrected.

Pertinent Sections Extracted from the IDO:

Part 14-16-6: Administration and Enforcement

6-4: General Procedures

6-4(C) PRE-SUBMITTAL NEIGHBORHOOD MEETING

6-4(C)(1) For those types of applications where Table 6-1-1 requires a meeting with a neighborhood to be offered, the applicant shall offer at least 1 meeting to all Neighborhood Associations whose boundaries include or are adjacent to the

subject before filing the application. In such cases, project applications will not be accepted until a pre-submittal neighborhood meeting has been held, or the requirements for a reasonable attempt in Subsection (3) below have been met.

6-4(C)(3) A meeting request shall be sent to the 2 representatives on file at the ONC for all applicable Neighborhood Associations via Certified Mail, return receipt requested, or via email. Either method constitutes a reasonable attempt to notify a Neighborhood Association of a meeting request. The requirements of Subsection 14-16-6-4(K)(7) (Documentation of Good Faith Effort Required) also apply.

If you have any questions, please do not hesitate to contact us.

Sincerely,

Robert Leming (digital signature), President Parkland Hills Neighborhood Association

Email: phnapresident@gmail.com

Address: 1609 Ridgecrest Drive. SE, Albuquerque, NM 87108



peter kalitsis <peterkalitsis@gmail.com>

Fwd: Correction of Information

Melinda Frame <phna.homelessness.solutions@gmail.com>

Tue, Jun 22, 2021 at 3:31 PM

To: peter kalitsis <peterkalitsis@gmail.com>

----- Forwarded message -----

From: **Jackie Fishman** <fishman@consensusplanning.com>

Date: Fri, Jun 18, 2021 at 12:34 PM

Subject: RE: Correction of Information

To: Rob Leming <phnapresident@gmail.com>, dlcarmona@cabq.gov <dlcarmona@cabq.gov>, Sanchez, Suzanna A. <suzannasanchez@cabq.gov>, Patten-Quintana, Lorena <lpatten-quintana@cabq.gov>

CC: Baca, Vanessa <vanessabaca@cabq.gov>, Melinda Frame <phna.homelessness.solutions@gmail.com>, Charlene Johnson <Johnson@consensusplanning.com>, Carol Pierce <cpierce@cabq.gov>

Hi Rob –

Thanks for reaching out to me regarding your concerns regarding the Official Neighborhood Form provided by the Office of Neighborhood Coordination and the Zoning Hearing Examiner. I've copied the City staff from both departments on this email.

Regarding contacting District 6 Coalition, the City's IDO process does require us to notify the coalitions even though they technically are not neighborhood associations.

Since receiving your email last night, I've been working to clarify the project address, which we understood to be [5400 Gibson Boulevard SE](#). Using this City address, there are only two associations (South San Pedro and District 6 Coalition) that the project site falls within or adjacent to (adjacent is defined by the IDO as excluding public rights-of-way). Those are the two associations that were provided to my staff by ONC and ZHE staff. In looking at the site map with Carol Pierce this morning, and confirming with City Legal, the City's purchase of the property did include [5006 Gibson SE](#), which is the small .4226 acre parcel at the corner of Gibson/Ridgecrest NE. When we include [5006 Gibson SE, Parkland Hills](#) NA is adjacent to the project site. Therefore, you are correct that Parkland Hills should be considered an "affected neighborhood association" to be notified.

As you quoted from my email, I did include Elder Homestead, Parkland Hills, Trumbull Village, and Siesta Hills neighborhood associations as a "courtesy" in the notice and invite to the facilitated meeting on Tuesday, June 22nd at 5:30 pm. I apologize for the confusion on this issue. I will ensure that my office will send Parkland Hills all information related to the conditional use request to the Zoning Hearing Examiner and we will include both addresses ([5400 Gibson SE](#) and [5006 Gibson SE](#)) from this point forward. Elder Homestead, Trumbull Village, and Siesta Hills NAs are not within the expanded ONC boundary, but we will also continue to provide information as a courtesy.

Thank you and feel free to contact me or Carol Pierce if you have any questions.

Jacqueline Fishman, AICP

Principal

Consensus Planning, Inc.

302 Eighth Street NW

Albuquerque, NM 87102

P: 505.764.9801

From: Rob Leming <phnapresident@gmail.com>

Sent: Thursday, June 17, 2021 4:57 PM

To: Jackie Fishman <fishman@consensusplanning.com>

Cc: Baca, Vanessa <vanessabaca@cabq.gov>; Melinda Frame <phna.homelessness.solutions@gmail.com>

Subject: Correction of Information

Dear Jackie,

Please see the attached letter advising corrections to meeting notices and communiques. Thank you.

Best,

--

Rob Leming

President

Parkland Hills Neighborhood Association

505-750-7672

2 attachments



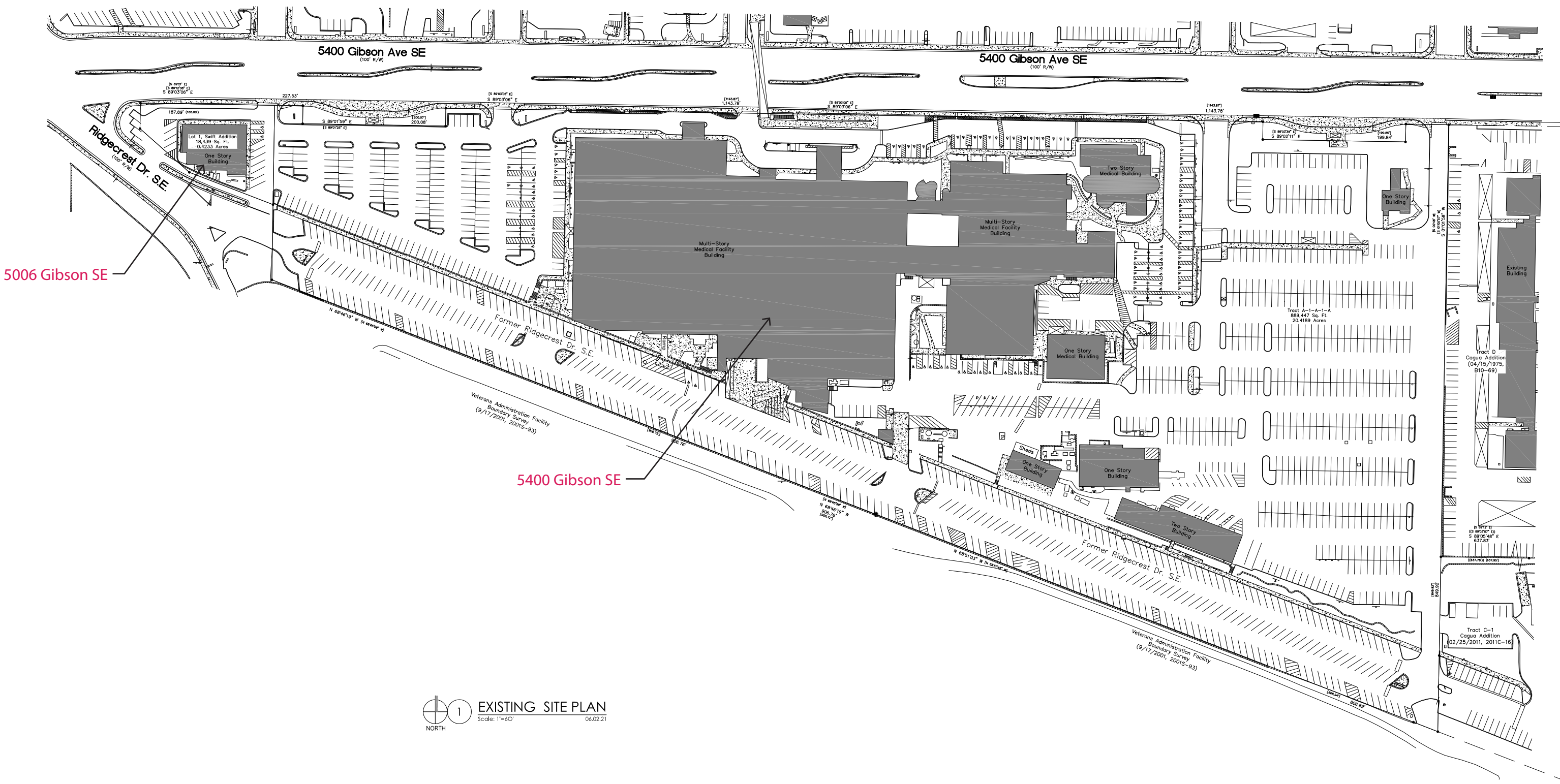
Addresses exhibit.pdf

1003K



OFFICE NEIGHBOR COORDINATOR JUNE 9 LETTER.docx

17K



 1 EXISTING SITE PLAN
Scale: 1"=60' 06.02.21



peter kalitsis <peterkalitsis@gmail.com>

Fwd: Application notification - Gateway Center CU

1 message

Melinda Frame <phna.homelessness.solutions@gmail.com>

Thu, Aug 5, 2021 at 10:08 AM

To: peter kalitsis <peterkalitsis@gmail.com>

----- Forwarded message -----

From: **Rob Leming** <phnapresident@gmail.com>

Date: Thu, Aug 5, 2021 at 9:50 AM

Subject: Fwd: Application notification - Gateway Center CU

To: Melinda Frame <phna.homelessness.solutions@gmail.com>

----- Forwarded message -----

From: **Jackie Fishman** <fishman@consensusplanning.com>

Date: Tue, Aug 3, 2021 at 10:34 AM

Subject: Application notification - Gateway Center CU

To: info@willsonstudio.com <info@willsonstudio.com>, mandy@theremedydayspa.com <mandy@theremedydayspa.com>, zabdiel505@gmail.com <zabdiel505@gmail.com>, khadijahasili@vizionz.org <khadijahasili@vizionz.org>, mldarling56@yahoo.com <mldarling56@yahoo.com>, phnapresident@gmail.com <phnapresident@gmail.com>, SEAreaOrganizers@gmail.com <SEAreaOrganizers@gmail.com>, rbaca@bizjournals.com <rbaca@bizjournals.com>, kp-shna@centurylink.net <kp-shna@centurylink.net>, sp-wonderwoman@comcast.net <sp-wonderwoman@comcast.net>, mrkious@aol.com <mrkious@aol.com>, alyceice@gmail.com <alyceice@gmail.com>, landry54@msn.com <landry54@msn.com>
CC: Charlene Johnson <Johnson@consensusplanning.com>, Pierce, Carol M. <cpierce@cabq.gov>, Huval, Lisa L. <lisahuval@cabq.gov>

Dear Neighbors,

This email is notification that Consensus Planning has submitted an application for a Conditional Primary Use for Overnight Shelter to the City of Albuquerque Zoning Hearing Examiner (ZHE) on behalf of the City of Albuquerque Department of Family and Community Services. The request is for the Gateway Center project, an overnight shelter proposed for a portion of the Gibson Health Hub. The property consists of two lots at 5006 and [5400 Gibson SE](#) the site of the existing Gibson Medical Center. The property is zoned MX-H. The legal descriptions for the two sites are as follows:

- Lot 1 Swift Addition containing 0.4226 acres ([5006 Gibson Boulevard SE](#))
- Tract A-1-A-1-A Plat of Tract A-1-A-1-A Lovelace Hospital (being a replat of Tract A-1-A-1 & A portion of vacated Ridgcrest Drive SE) containing 20.4232 acres ([5400 Gibson Boulevard](#))

SE)

A facilitated meeting was held on June 22, 2021 to discuss the conditional use application. In response to input from that meeting, the City delayed the submittal of the Conditional Use application until the draft Operations Plan for the Gateway Center was ready. You can review the draft Operations Plan posted on the City's website at www.cabq.gov/gateway.

The hearing for this application is scheduled for **Tuesday, September 21, 2021** starting at **9:00 A.M.** At this time the hearing is scheduled to be heard on Zoom using the following link.

Join Zoom Meeting <https://cabq.zoom.us/j/7044490999>

Meeting ID: 704 449 0999

One tap mobile +16699006833,,7044490999# US (San Jose)
+12532158782,,7044490999# US (Tacoma)

Dial by your location

+1 669 900 6833 US (San Jose) +1 253 215 8782 US (Tacoma) +1 346 248 7799 US (Houston)

+1 646 558 8656 US (New York) +1 301 715 8592 US (Germantown)

+1 312 626 6799 US (Chicago)

Find your local number: <https://cabq.zoom.us/j/7044490999>

Depending on public health orders, the hearing may also be scheduled in-person. Please call (505) 924-3894 for details and updates regarding an in-person hearing. If an in-person hearing is available, it will occur in the Plaza del Sol hearing Room at [600 Second Street NW](#), Basement Level.

For more information about the conditional use application and request, please contact Jackie Fishman, Principal at Consensus Planning, at fishman@consensusplanning.com or (505) 764-9801. You may also contact the ZHE Administrative Assistant, Suzie Sanchez at (505) 924-3894 or suzannasanchez@cabq.gov.

Please note: You may submit written comments to the Zoning Hearing Examiner up to 6 days before the hearing (5pm on the Wednesday before the hearing). Written comments received after that deadline will not be taken into consideration for this application.

Attached: Neighborhood Notification Packet

Jacqueline Fishman, AICP

Principal

Consensus Planning, Inc.

[302 Eighth Street NW](#)

[Albuquerque, NM 87102](#)

P: 505.764.9801

--

Rob Leming

President

Parkland Hills Neighborhood Association

505-750-7672



Neighborhood Association Public Hearing Notification Packet.pdf

1798K

**OFFICIAL PUBLIC NOTIFICATION FORM
FOR MAILED OR ELECTRONIC MAIL NOTICE
CITY OF ALBUQUERQUE PLANNING DEPARTMENT**



PART I - PROCESS

Use [Table 6-1-1](#) in the Integrated Development Ordinance (IDO) to answer the following:

Application Type: Conditional-use for Overnight Shelter

Decision-making Body: Zoning Hearing Examiner (ZHE)

Pre-Application meeting required: ☒ Yes ☐ No

Neighborhood meeting required: ☒ Yes ☒ No

Mailed Notice required: ☒ Yes ☐ No

Electronic Mail required: ☒ Yes ☐ No

Is this a Site Plan Application: ☐ Yes ☒ No **Note: if yes, see second page**

PART II – DETAILS OF REQUEST

Address of property listed in application: 5006 and 5400 Gibson Blvd. SE

Name of property owner: City of Albuquerque

Name of applicant: City of Albuquerque, Family and Community Services

Date, time, and place of public meeting or hearing, if applicable: Tuesday, September 21, 2021 at 9:00 AM via Zoom or In-Person.

Contact Suzie Sanchez at suzannasanchez@cabq.gov or (505) 924-3894 for more information.

Address, phone number, or website for additional information:

Jacqueline Fishman, Principal, Consensus Planning, Inc. (505) 764-9801, fishman@consensusplanning.com

PART III - ATTACHMENTS REQUIRED WITH THIS NOTICE

☒ Zone Atlas page indicating subject property.

☒ Drawings, elevations, or other illustrations of this request.

☒ Summary of pre-submittal neighborhood meeting, if applicable.

☒ Summary of request, including explanations of deviations, variances, or waivers.

IMPORTANT: PUBLIC NOTICE MUST BE MADE IN A TIMELY MANNER PURSUANT TO [SUBSECTION 14-16-6-4\(K\)](#) OF THE INTEGRATED DEVELOPMENT ORDINANCE (IDO). PROOF OF NOTICE WITH ALL REQUIRED ATTACHMENTS MUST BE PRESENTED UPON APPLICATION.

I certify that the information I have included here and sent in the required notice was complete, true, and accurate to the extent of my knowledge.

(Applicant signature)

August 03, 2021

(Date)

Note: Providing incomplete information may require re-sending public notice. Providing false or misleading information is a violation of the IDO pursuant to IDO Subsection 14-16-6-9(B)(3) and may lead to a denial of your application.

**OFFICIAL PUBLIC NOTIFICATION FORM
FOR MAILED OR ELECTRONIC MAIL NOTICE
CITY OF ALBUQUERQUE PLANNING DEPARTMENT**



PART IV – ATTACHMENTS REQUIRED FOR SITE PLAN APPLICATIONS ONLY

Provide a site plan that shows, at a minimum, the following:

N/A a. Location of proposed buildings and landscape areas.

N/A b. Access and circulation for vehicles and pedestrians.

N/A c. Maximum height of any proposed structures, with building elevations.

N/A d. For residential development: Maximum number of proposed dwelling units.

N/A e. For non-residential development:

- ☐ Total gross floor area of proposed project.
- ☐ Gross floor area for each proposed use.

[Note: Items with an asterisk (*) are required.]

**Public Notice of a Proposed Project in the City of Albuquerque
for Decisions Requiring a Meeting or Hearing
Mailed/Emailed to a Neighborhood Association**

Date of Notice*: August 03, 2021

This notice of an application for a proposed project is provided as required by Integrated Development Ordinance (IDO) [Subsection 14-16-6-4\(K\) Public Notice](#) to:

Neighborhood Association (NA)*: See attached neighborhood contacts from Office of Neighborhood Coordination.

Name of NA Representative*: See attached neighborhood contacts from Office of Neighborhood Coordination.

Email Address* or Mailing Address* of NA Representative¹: See attached from Office of Neighborhood Coordination

Information Required by [IDO Subsection 14-16-6-4\(K\)\(1\)\(a\)](#)

1. Subject Property Address* 5006 and 5400 Gibson Blvd. SE
Location Description Southwest corner of Gibson Boulevard and San Mateo Boulevard.
2. Property Owner* City of Albuquerque
3. Agent/Applicant* *[if applicable]* Consensus Planning, Inc.
4. Application(s) Type* per IDO [Table 6-1-1](#) *[mark all that apply]*

☒ Conditional Use Approval

- ☐ Permit _____ (Carport or Wall/Fence – Major)
- ☐ Site Plan
- ☐ Subdivision _____ (Minor or Major)
- ☐ Vacation _____ (Easement/Private Way or Public Right-of-way)
- ☐ Variance
- ☐ Waiver
- ☐ Other: _____

Summary of project/request²*:

Conditional use for an overnight shelter in a portion of the Gibson Health Hub Building.

The overnight shelter is for the City's Gateway Project.

¹ Pursuant to [IDO Subsection 14-16-6-4\(K\)\(5\)\(a\)](#), email is sufficient if on file with the Office of Neighborhood Coordination. If no email address is on file for a particular NA representative, notice must be mailed to the mailing address on file for that representative.

² Attach additional information, as needed to explain the project/request.

[Note: Items with an asterisk (*) are required.]

5. This application will be decided at a public meeting or hearing by*:

☒ Zoning Hearing Examiner (ZHE)

☐ Development Review Board (DRB)

☐ Landmarks Commission (LC)

☐ Environmental Planning Commission (EPC)

Date/Time*: Tuesday, September 21, 2021 at 9:00 AM via Zoom or In-Person.

Location*³: Please call (505) 924-3894 for details and updated regarding an in person hearing.

Agenda/meeting materials: <http://www.cabq.gov/planning/boards-commissions>

To contact staff, email devhelp@cabq.gov or call the Planning Department at 505-924-3860.

6. Where more information about the project can be found*⁴:

Please contact Jacqueline Fishman at fishman@consensusplanning.com or 505-764-9801.

Information on the Gateway Center Project is also available the City's website at cabq.gov/gateway.

Information Required for Mail/Email Notice by [IDO Subsection 6-4\(K\)\(1\)\(b\)](#):

1. Zone Atlas Page(s)*⁵ M-18-Z
2. Architectural drawings, elevations of the proposed building(s) or other illustrations of the proposed application, as relevant*: Attached to notice or provided via website noted above
3. The following exceptions to IDO standards have been requested for this project*:

☐ Deviation(s)

☐ Variance(s)

☐ Waiver(s)

Explanation*:

None requested.

4. A Pre-submittal Neighborhood Meeting was required by [Table 6-1-1](#): ☒ Yes ☐ No

Summary of the Pre-submittal Neighborhood Meeting, if one occurred:

A facilitated meeting occurred on June 22, 2021. Please see attached Facilitated Meeting Report Summary.

³ Physical address or Zoom link

⁴ Address (mailing or email), phone number, or website to be provided by the applicant

⁵ Available online here: <http://data.cabq.gov/business/zoneatlas/>

[Note: Items with an asterisk (*) are required.]

5. **For Site Plan Applications only***, attach site plan showing, at a minimum:

N/A a. Location of proposed buildings and landscape areas.*

N/A b. Access and circulation for vehicles and pedestrians.*

N/A c. Maximum height of any proposed structures, with building elevations.*

N/A d. **For residential development***: Maximum number of proposed dwelling units.

N/A e. **For non-residential development***:

☐ Total gross floor area of proposed project.

☐ Gross floor area for each proposed use.

Additional Information [Optional]:

From the IDO Zoning Map⁶:

1. Area of Property [typically in acres] 20.4 acres
 2. IDO Zone District Mixed-use High Intensity (MX-H)
 3. Overlay Zone(s) [if applicable] Airport Protection Overlay Zone (APO)
 4. Center or Corridor Area [if applicable] Center: Lovelace/VA Employment Center
- Current Land Use(s) [vacant, if none] Institutional / Medical

NOTE: Pursuant to [IDO Subsection 14-16-6-4\(L\)](#), property owners within 330 feet and Neighborhood Associations within 660 feet may request a post-submittal facilitated meeting. If requested at least 15 calendar days before the public meeting/hearing date noted above, the facilitated meeting will be required. To request a facilitated meeting regarding this project, contact the Planning Department at devhelp@cabq.gov or 505-924-3955.

Useful Links

Integrated Development Ordinance (IDO):

<https://ido.abc-zone.com/>

IDO Interactive Map

<https://tinyurl.com/IDOzoningmap>

Cc: Elder Homestead Neighborhood Association [Other Neighborhood Associations, if any]
Parkland Hills Neighborhood Association
Trumbull Village Association
Siesta Hills Neighborhood Association

⁶ Available here: <https://tinyurl.com/idozoningmap>

**CITY OF ALBUQUERQUE
LAND USE FACILITATION PROGRAM
PROJECT MEETING REPORT**

Project Number: N/A – Pre-Application Meeting
Property Description: 5400 & 5006 Gibson SE; Tract A-1-A-1-A Plat of Tract A-1-A-1-A Lovelace Hospital (being a replat of Tract A-1-A-1 & a portion of vacated Ridgecrest Drive SE), containing 20.4232 Acres
Date Submitted: June 24, 2021
Submitted by: Jessie Lawrence and Jocelyn Torres
Meeting Date and Time: June 22, 2021, 5:30 PM
Meeting Location: Online via Zoom
Facilitator: Jessie Lawrence
Co-facilitator: Jocelyn Torres

Parties:

- **Applicant:**
 - City of Albuquerque Department of Family and Community Services
- **Agent:**
 - Consensus Planning
- **Affected Neighborhood Associations (per City of Albuquerque notification requirements):**
 - District 6 Coalition of Neighborhood Associations
 - South San Pedro NA

Background/Meeting Summary:

Applicant requests Zoning Hearing Examiner approval of a conditional use to allow an overnight shelter in a portion of the Gibson Medical Center at 5400 Gibson Blvd. SE, part of the Gateway Center at the Gibson Health Hub (referred to as the Gateway Center throughout this report). This was a pre-application meeting.

At the meeting, participants expressed a number of concerns about the planned project, and also expressed frustration and a lack of trust with the planning, process, and communication so far. Some participants said that they did not want the Gateway Center in this area or that this center should serve only the local area, and other areas of the city should have to support a greater share of the homeless services. Others said that they needed more information and discussed the need for more data, the complete operations plan in writing, information in writing about the number of people to be served, and information about the planned providers. Others expressed concerns about crime, security, bathrooms, pedestrian traffic, and vehicular traffic. Others requested more information about how individuals would transition out of the Gateway Center and where the transitional housing would come from. Others expressed concern about the Gateway Center being a magnet drawing homeless people to the community, and also asked about homeless people who might seek services but not want shelter. One person pointed out the need to work with the VA Hospital and veterans, and one person suggested a written Good Neighbor Agreement between the neighborhoods and the City.

City staff answered questions and responded to the concerns during the meeting. See Meeting Specifics and the Zoom Chat Appendix for a summary of all of the questions and comments discussed.

As follow-up items, the applicant and agent agreed to share the slide presentation, to provide information about the locations of the 19 public restrooms throughout the community, and to look into the question about what would happen with the conditional use if other tenants wanted to add overnight uses. They also said that the operations plan would be ready before the planned August 17 ZHE hearing, and the conditional use request materials would be sent to the neighborhood associations when they are submitted.

Outcomes:

- **Areas of Agreement:**
 - None noted among all meeting participants.
- **Unresolved Issues and Concerns:**
 - Several participants discussed frustration and a lack of trust in the City, in particular because of the lack of written plans and commitments and changing information about who the Gateway Center would serve.
 - Some participants said that they did not want the Gateway Center in this area or that this center should serve only the local area, and other areas of the city should have to support a greater share of the homeless services.
 - Some participants said there should be more data and information shared with the local residents in writing, including the operations plan, before a conditional use request is submitted.
 - Concerns discussed about the operations of the Gateway Center included:
 - Crime
 - Security and adequate police service
 - Public defecation and the number of available public restrooms
 - Pedestrian traffic
 - Vehicular traffic
 - Some participants asked about the available transitional housing and suggested that there is not enough for the Gateway Center's plans, and noted that there needs to be planning for a limited time of services and a transition out of homelessness.
 - Some participants expressed concerns about the Gateway Center making the neighborhood a magnet for homeless individuals, and also asked about homeless people who might seek services but not want shelter.
 - One person pointed out the need for better coordination with the VA Hospital and veterans.
 - One person suggested a written Good Neighbor Agreement between the neighborhoods and the City; others said that such agreements have been hard to enforce in other places.

From: Sanchez, Suzanna A. <suzannasanchez@cabq.gov>
Sent: Tuesday, August 3, 2021 9:02 AM
To: Aranda, James M. <jmaranda@cabq.gov>; Jackie Fishman <jfishman@consensusplanning.com>
Cc: Patten-Quintana, Lorena <lpatten-quintana@cabq.gov>; Charlene Johnson <Johnson@consensusplanning.com>
Subject: RE: Public Notice Inquiry Sheet Submission

Good morning Jackie,

In order to get Parkland Hills on the list I went out 200 feet rather than the 100+ feet.

Association Name	First Name	Last Name	Email	Address Line 1	Address Line 2	City	State	Zip
Parkland Hills NA	Mary	Darling	mldarling56@yahoo.com	650 Monroe Street SE		Albuquerque	NM	87108
Parkland Hills NA	Robert	Leming	phnapresident@gmail.com	712 Truman Street SE		Albuquerque	NM	87108
District 6 Coalition of Neighborhood Associations	Mandy	Warr	mandy@theremedydyspa.com	119 Vassar Drive SE		Albuquerque	NM	87106
District 6 Coalition of Neighborhood Associations	Patricia	Willson	info@willsonstudio.com	505 Dartmouth Drive SE		Albuquerque	NM	87106
South San Pedro NA	Zabdiel	Aldaz	zabdiel505@gmail.com	735 Alvarado SE		Albuquerque	NM	87108
South San Pedro NA	Khadjah	Bottom	khadjahasilivizionz.org	1200 Madeira SE	#130	Albuquerque	NM	87108

Thank you,

Suzie

Below is the list of property owners to notify for 5400 and 5006 Gibson.

Owner	Complete Owner Address
GIBSON MEDICAL CENTER LLC	6300 JEFFERSON ST NE ALBUQUERQUE NM 87109
LOS POLLOS HERMANOS 5211 GIBSON LLC	105 JEFFERSON ST NE ALBUQUERQUE NM 87108-1216
RAVANO ROBERT J TRUSTEE RAVANO RVT & RAVANO STEPHEN R & THOMPSON SUZANNE M	1460 CRESTVIEW DR SAN CARLOS CA 94070-4255
HAJJAR CHARLES C TRUSTEE SIESTA HILLS REALTY TRUST C/O HAJJAR MGT CO INC	30 ADAMS ST MILTON MA 02186
RABADI SHARIF A & SAMIA S TR STAR TRUST	11201 SAN ANTONIO DR NE ALBUQUERQUE NM 87122-1049
PALM DIANE & PADILLA DEBORAH	1104 W BAY AVE NEWPORT BEACH CA 92661-1017
U S GOVERNMENT 377 CEG/CERR	2050 WYOMING BLVD SE KIRTLAND AFB NM 87117-5663
HAJJAR CHARLES C TRUSTEE SIESTA HILLS REALTY TRUST C/O HAJJAR MGMT CO INC	30 ADAMS ST MILTON MA 02186-3412
PEARL SPRING CREEK LLC	5600 GIBSON BLVD SE ALBUQUERQUE NM 87108-4840
ALBUQUERQUE HOUSING AUTHORITY	1840 UNIVERSITY BLVD SE ALBUQUERQUE NM 87106-3919
BHC ENTERPRISES LC	5844 AVONMORE CIR HIGHLAND UT 84003-3442
MCDONALDS REAL ESTATE COMPANY	ONE MCDONALDS PLAZA OAK BROOK IL 60523-1928
B & B MERRITT REAL ESTATE LLC	750 N 17TH ST LAS CRUCES NM 88005-4153
USA C/O DEPT OF VET AFFAIRS MED CENT	1501 SAN PEDRO DR SE 138 ALBUQUERQUE NM 87108-5138
GIBSON MEDICAL CENTER LLC	6300 JEFFERSON ST NE ALBUQUERQUE NM 87109-3482
LOVELACE BIOMEDICAL RESEARCH INSTITUTE	2425 RIDGECREST DR SE ALBUQUERQUE NM 87108-5129

Public Notice Inquiry For:

Zoning Hearing Examiner

If you selected "Other" in the question above, please describe what you are seeking a Public Notice Inquiry for below:

Contact Name

Charlene Johnson

Telephone Number

5057649801

Email Address

johnson@consensusplanning.com

Company Name

Consensus Planning

Company Address

302 8th Street NW, 3rd Street and Lomas, Universe St. and Paseo del Norte Blvd.

City

Albuquerque

State

NM

ZIP

87102

Legal description of the subject site for this project:

TR A-1-A-1-A PLAT OF TR A-1-A-1-A LOVELACE HOSPITAL (BEING AREPL OF TR A-1-A-1 & A PORTION OF VACATED RIDGECREST DRIVESE) CONT 20.4232 AC

LOT 1 SWIFT ADD'N CONT 0.4226 AC

Acres: 0.4226

Physical address of subject site:

5006 Gibson Blvd. SE and 5400 Gibson Blvd SE

Subject site cross streets:

Gibson Boulevard and San Mateo Boulevard

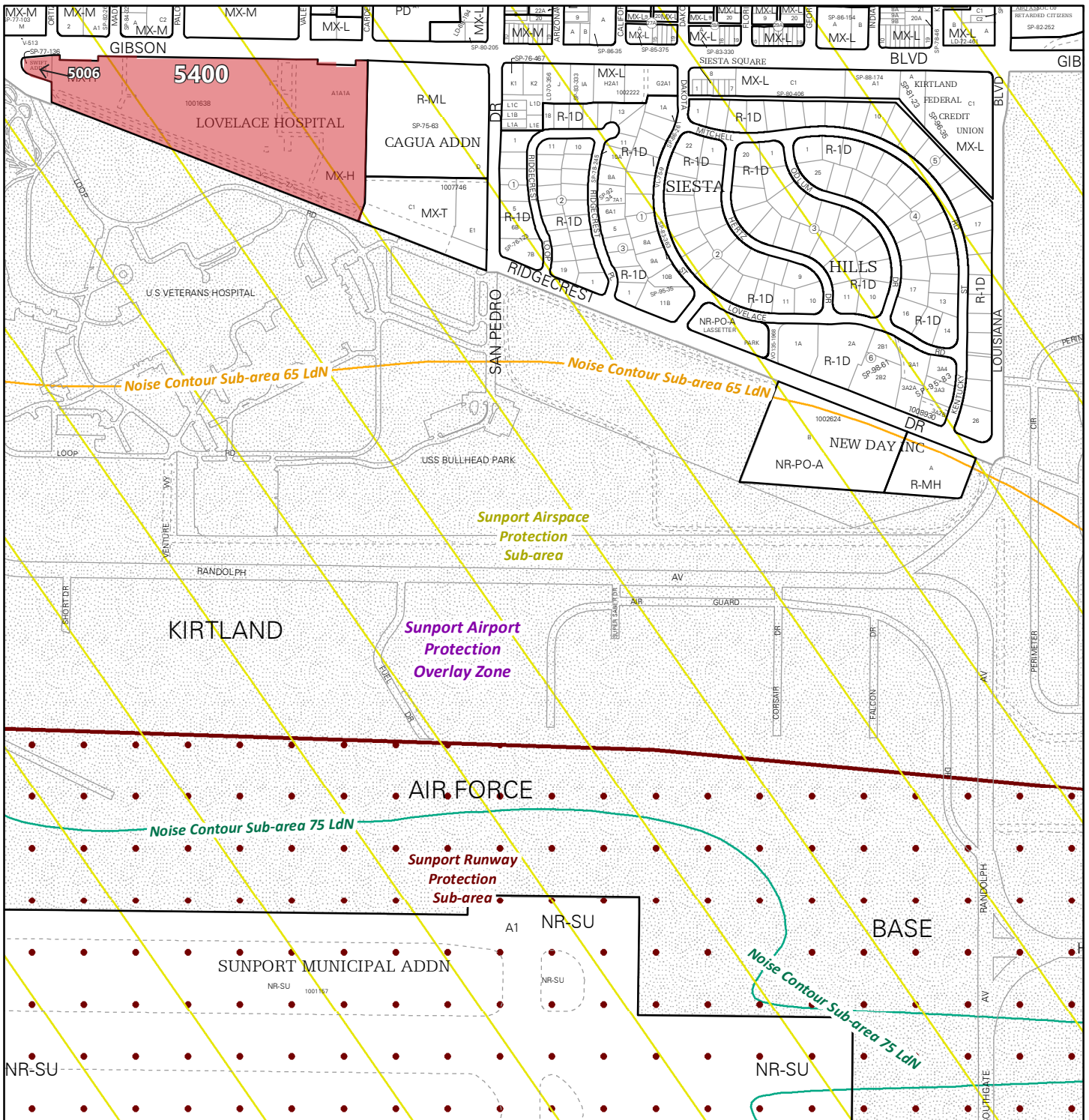
Other subject site identifiers:

Old Lovelace Hospital Site

This site is located on the following zone atlas page:

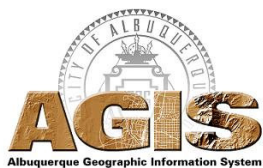
M-18-Z

<2. Letter to Property Owners-September.pdf>

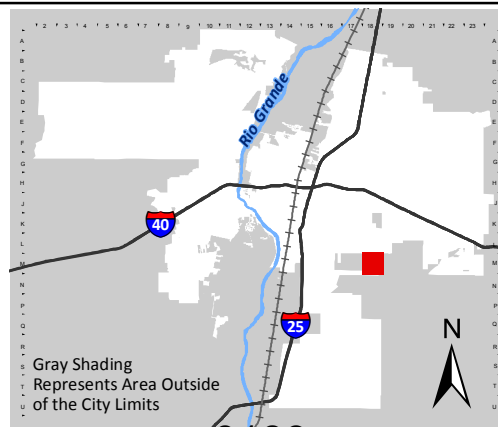


For more details about the Integrated Development Ordinance visit: <http://www.cabq.gov/planning/codes-policies-regulations/integrated-development-ordinance>

IDO Zone Atlas May 2018



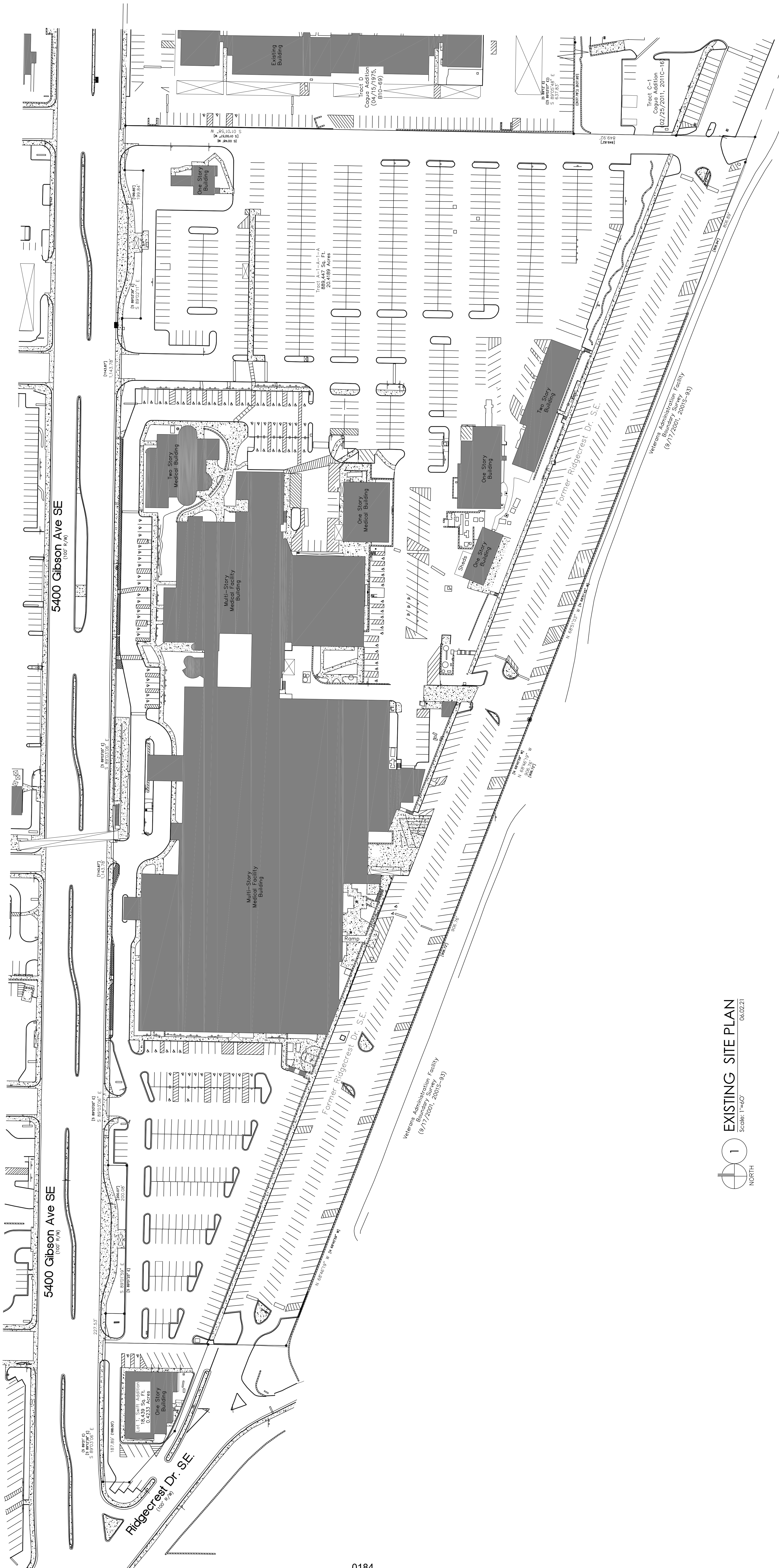
IDO Zoning information as of May 17, 2018
The Zone Districts and Overlay Zones
are established by the
Integrated Development Ordinance (IDO).



Zone Atlas Page:
M-18-Z

- Easement
- Escarpment
- Petroglyph National Monument
- Areas Outside of City Limits
- Airport Protection Overlay (APO) Zone
- Character Protection Overlay (CPO) Zone
- Historic Protection Overlay (HPO) Zone
- View Protection Overlay (VPO) Zone

0 250 500 1,000 Feet



APPENDIX B

Source: KRQE News

Report by Jeannie Nguyen “Wells Park business owners file lawsuit over ongoing homeless problem,” Posted Oct 4, 2020, updated Oct. 5, 2020 (from pg. 4)

News Broadcast Video:

<https://www.krqe.com/news/albuquerque-metro/wells-park-business-owners-file-lawsuit-over-ongoing-homeless-problem/>

Written report: [ALBUQUERQUE, N.M.](#) (KRQE) – People living and working near Albuquerque’s Wells Park neighborhood are fed up with the growing homeless problem. They believe a local shelter is to blame.

“There’s threats of violence against the people that are there. The residents that have the property around that. There’s destruction of property,” says Attorney Blair Dunn.

Back in July, [Dunn sent a letter on behalf of the nearby business owners](#) threatening to sue the city if the mayor didn’t fix the problem. Now, they are keeping their word by suing the St. Martin’s Hospitality Center off Third St. and Mountain.

“This isn’t to knock St. Martin’s completely. They are trying to do good, but sometimes you do more harm than good. You draw these people down and you’re not giving them what they need,” he says.

While St. Martin’s provides services for the homeless, Dunn says their help is only temporary and doesn’t give long term solutions to the problem. “St. Martin’s needs to be more cognizant of the fact that they are imposing a burden on their neighbors,” he says.

With this lawsuit, Dunn hopes St. Martin’s and the city figure out a solution that works for both homeless people and the long-term residents of the Wells Park neighborhood. “They probably need to re-locate some place where they’re not imposing. That becomes an issue the city needs to weigh in on,” he says.

Back in July, the city told KRQE News 13 business owners should support Mayor Tim Keller’s plan on building a new homeless shelter, rather than threatening a lawsuit. The city and St. Martin’s did not respond to our request for comment.

Earlier this year, [Albuquerque Police started to crack down on homeless people](#) being in places they shouldn’t be by giving them citations. APD has said that is their last resort and they prefer to point them to services instead.

APPENDIX C

Source: Albuquerque Journal

LOCAL VOICES: Albuquerque's homeless: Worse than you think

By [Carl Dipalma, Albuquerque resident / Bruce M. Thomson, District 5 Director, board of Directors Chair, Albuquerque Metropolitan Arroyo Flood Control Authority](#)

Sunday, August 8th, 2021 at 12:02AM

Neighbors' pleas for help to fight crime, drug trafficking, homelessness have long been ignored by the city

By Carl Dipalma, Albuquerque resident

While spending the nights in Coronado Park this past year I became completely convinced the neighborhood has become as dangerous as anyplace in town.



A group of homeless people gathers at Coronado Park near 2nd Street and I40, January 2020. (Adolphe Pierre-Louis/Albuquerque Journal)

The illegal and life-threatening drug trafficking continues on bicycles throughout the dark hours, and there are between 20 and 30 of these stolen two-wheelers there at any given time. The grass has been destroyed. The playground has become a home for used syringes, empty alcohol containers, broken glass, human waste, used condoms, discarded bike parts and filthy clothing and all kinds of throwaway weapons and other trash.

The number of repeat offenders during the night is more than it has ever been because this park is being used as a pickup and drop-off location by the city-funded night shelter. Those people who are rejected by the yellow bus operators stay there after being told they cannot be given an empty bed and are now overflowing onto the surrounding taxpayers' doorways.

The property managers for the surrounding locations and their helpers have made about 4,000 calls for assistance to Albuquerque Police Department and to those who direct city law enforcement during the past five or six years, explaining that no one is allowed in the park after dark according to the city ordinance. They have written certified letters to the mayor. They have repeatedly asked their city councilor's office for help in the most serious and respectful way. They have also been ignored at many city-dominated community meetings. They have established the periodical watch with Valley Command between midnight and 4 a.m. month after month after month. They also continue to put their lives on the line every night by making eyewitness reports to APD with their cellphones while on foot. But they and the genuine homeless persons still remain in an increasingly dangerous situation. The spotlights, loudspeakers and warning tickets disappeared long ago into the distance with the patrol car.



Homeless people sleep on the sidewalk in front of a facility called HopeWorks located on 3rd Street in downtown Albuquerque. (Roberto E. Rosales/Albuquerque Journal)

Yes the truly homeless persons are in fear of calling APD because they are then left alone as ongoing unprotected victims of the unpenalized repeat offenders. Last year the Mayor's Office told those calling for help that "they are not going to be put in jail because putting the offender behind bars does not do any good." As a result there has been a growing number of assaults with primitive throwaway weapons, robberies and thefts, rapes every night, drunken and verbal and physical arguments in and around Coronado. We expect another homicide in the immediate area.

In short we are asking why do the contractor's yellow bus operators, who are unanswerable to the taxpayers, turn away their undesirable people on our property rather than use their own taxpayer-paid-for property to conduct their profitable businesses?

APPENDIX D

Police records depict pattern of problems, violence at Coronado Park

Nathan O'Neal

Updated: October 11, 2020 10:50 PM

Created: October 11, 2020 10:48 PM



ALBUQUERQUE, N.M. — Coronado Park is considered the heart of Albuquerque’s homeless problem. Located near I-40 and 2nd street, it comes with a lot of other problems too – including drug use, violence and mental health issues.

More than two years of police records reveal at least 120 times police, fire and other emergency services were needed at Coronado Park between January 2018 and June 2020.

“That park is not safe. It’s not safe for the people experiencing homelessness, it’s certainly not safe for any other neighborhood residents to go there,” said Doreen McKnight who is president of the Wells Park Neighborhood Association and has lived in the area for 10 years.

“This year alone in 2020 there were three homicides at Coronado Park. In 2019, a disabled woman was raped there and in 2018 there was a murder,” said McKnight.



Police 911 logs reveal a variety of other issues.

In February 2019, police investigated a stabbing after a fight broke out at the park.

One month before the stabbing, police responded to a call after a woman said she was suicidal, telling police on lapel camera video that she had previously made attempts to overdose on meth. Officers then took her to get help.

In 2018, the KOB 4 Investigates team used undercover cameras at Coronado Park which revealed illegal drinking, drug deals and people shooting up drugs in broad daylight.

The City of Albuquerque sees similar problems in other areas – in some cases, the city has taken legal action, even demolishing homes and building that have been deemed a nuisance problem.

McKnight wonders why the city hasn't treated Coronado Park the same way they've treated those other problem areas.

"If there was a private property that was picking up these kinds of 911 call numbers and these kinds of 311 call numbers and the types of criminal activity that's going on there, there's no way that the city would put up with that," said McKnight.

City councilor Isaac Benton who represents the area said "in the past, legal action has been taken against the city when we did try to remove street people from, for instance, the 4th street mall downtown."

“I think in general there’s a reluctance and it’s understandable... not just going after an individual homeless person who are in the park, even if they’ve set up some kind of small shelter or something,” said Benton. “But it’s a fine line between that and getting out of control.”

4 Investigator Nathan O’Neal: Do you believe that the city is doing as much as they can to address that problem?

Councilor Benton: “Yes, I do. We’re doing as much as we can but that’s not enough. So that sounds like a contradiction but it’s not. As a community, we have to accept that we’re going to have to spend a lot of money to tackle this problem and a lot of effort – and we’re in the midst of that right now.”

Coronado Park is a central hub for the homeless – a designated pick up and drop off site for the West Side Shelter. McKnight wants that to change.

“I think that the city really needs to make an effort to invest in that park... re-evaluate what the parks purposes, reengage people in that property, really activate the property,” said McKnight.

The problems at Coronado Park are complex and layered – and many city leaders concede, there is no simple fix.

“I think we need to do more,” said Carol Pierce, the director for Albuquerque’s Family and Community Services department, adding that stakeholders are working to develop a long-term plan for the area.

“There’s no question that we need more emergency shelter beds that are centrally located and what we know works and the community is asking for is smaller shelters,” said Pierce, adding later: “We’re not talking a 300-bed facility, we’re talking smaller shelters.”

“I remain optimistic because of who Albuquerque is and the neighbors and the businesses -- because together we can do this and we can do better,” said Pierce.

However, some are still skeptical.

“I don't know what the city's long term plan is but it definitely can't be just kicking people out of the park every day,” said McKnight of the neighborhood association.

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APPENDIX E

'It's becoming increasingly dangerous': Albuquerque park sees 3rd homicide

[Ryan Laughlin](#)

Updated: July 14, 2020 06:24 PM

Created: July 14, 2020 06:15 PM



ALBUQUERQUE, N.M. — Coronado Park in Albuquerque saw its third homicide this year after a [man was beaten to death Monday evening](#).

Ralph DiPalma, a volunteer minister, said issues at the park have only been growing worse.

"Instead of straightening out the problem, it's becoming increasingly dangerous," DiPalma said.

"There are many homicides among the homeless unreported, deliberate drug overdoses and missing persons," he added.



DiPalma has dedicated most of his life trying to serve the homeless almost every night at Coronado Park.

A spokesperson for APD said the department was cleaning out the park right before the latest homicide occurred. The victim was identified as 49-year-old Randy Hillard. DiPalma said he knew him well.

"We talk to Randy all the time. We bought him a bus ticket back to Texas. He didn't stay in Texas, he came back here because Albuquerque has become a sanctuary city for the repeat offender, homeless men and women," he said.

DiPalma said Hillard was a known drug addict that got himself into trouble.

"We have a lot invested in Randy. We got him into drug and alcohol programs, and he refused to stay," he said.

DiPalma said they've tried to engage with the mayor and wrote him a letter with more than a dozen business signatures asking for help.

"Ten months, no real answer—just a makeshift response," he said.

Mayor Keller sent KOB 4 the following response to the latest Coronado murder:

"It isn't about whether the park will become an issue at some point--it already is and has been. We have already taken steps to improve the park including gating, lighting, regular cleanup and patrol. Until we get the Gateway Center built we are worried about continued violence and challenges with our homeless community. The Gateway Center will get vulnerable people off the streets and into permanent housing even as we tackle violent crime from the APD side with both enforcement and prevention. Improving Coronado Park means tackling the underlying public safety issues, and that's our focus."

An APD spokesperson said the new APD Valley Commander is focusing police resources on the park and that they're clearing it out every night to prevent people from sleeping there.

"You know, I'm not sure what you mean by a public nuisance, but it is a focal point for the department. We want to prevent violence and I think we've been doing a pretty good job lately, but we've had these homicides that are concerning," said APD spokesman Gilbert Gallegos.

APD said they're continuing to do undercover drug operations, outreach for the homeless and working with neighborhood partners.

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APPENDIX F

https://www.santafenewmexican.com/opinion/editorials/the-shelter-next-door-can-be-a-tough-neighbor/article_79ffa0b8-ebea-11eb-8ea8-4b85fd3cc2eo.html

The shelter next door can be a tough neighbor

The New Mexican

Jul 23, 2021



People gather in October on Harrison Road outside the Interfaith Community Shelter at Pete's Place.

Luis Sánchez Saturno/New Mexican file photo

Loving your neighbor is easier when the homeless shelter is not next door.

Just ask the residents along Harrison Road by the Interfaith Community Shelter at Pete's Place, or the people living close to nearby Franklin E. Miles Park, or the long-suffering folks near St. Elizabeth Shelters & Supportive Housing on Alarid Street.

This reaction is not a simple case of not-in-my-backyard, a cruel refusal to help the stranger or those who struggle. It is an understandable frustration of homeowners, renters, businessmen and women — all concerned about their safety, their children's safety, their surrounding environments and, yes, their property values.

Everyone wants to help people without shelter — or at least most people, except perhaps for the very cruel. But most people who help the shelter, whether with good wishes, cash, donations or in-person volunteering, aren't living next door.

It is the neighbors who must deal with petty thefts, people defecating on their sidewalks, needles left after addicts shoot up and the never-ending supply of empty alcohol bottles or beer cans. There are fights, drug deals and other altercations that interrupt otherwise quiet residential neighborhoods.

Much of the commotion is not caused by people who live on the streets; other, darker forces prey on them, whether selling drugs or robbing those who can't defend themselves.

To fail to succor people who need assistance is cruel, unworthy of Santa Fe.

The Interfaith Community Shelter at Pete's Place came into being for the best of reasons — to protect people who were dying because of the cold. St. Elizabeth Shelter, with its long history of helping the vulnerable, was established only after a lawsuit and much controversy back in the late 1980s.

A few weeks ago, residents near the interfaith shelter once again went to the city for relief. They want Pete's moved. They want to be able to walk down the sidewalk without having to step over a tent or avoid human waste. They want their children to be able to play in safety, and their businesses to operate without customers being harassed.

They want the same quiet that nearly every other Santa Fe neighborhood enjoys.

That is not so much to ask.

During the pandemic, the city began putting up shelter guests in motels or in the dorms at the abandoned Santa Fe University of Art and Design campus. Santa Fe can and should be proud that COVID-19 did not spread rapidly among people without homes.

Further, the city used \$2 million in CARES Act money — the federal aid to relieve effects of the pandemic — to assist a nonprofit in the purchase of a hotel with suites, establishing a place where more people who need homes can get a fresh start.

But the problem of people living on the streets is not going away, not with the price of rentals skyrocketing and a shortage not just of affordable housing, but all housing. Supply and demand is off-kilter, not just in Santa Fe, but the country.

Just this month, workers from Santa Fe Public Schools cleared a homeless camp in open space by the La Farge Branch Library. Close to Nava Elementary, Milagro Middle School and Santa Fe High, the camp also was located in a waterway. It was both unsightly and unsanitary, but home to the people who slept there. It needed to be removed, but where will its residents, as well as the many people sleeping in arroyos, parks or benches, go?

City of Santa Fe officials, now that the pandemic has eased, say they will begin breaking up more such settlements. Camping on public property is restricted by city ordinance, although that prohibition was eased during the pandemic because of limits on shelter capacities.

Cleaning up camps fixes one problem. But people still need shelter. What we are doing is not working. That doesn't mean private foundations, city and county officials, experts on homelessness and others are not developing better ways to meet the needs of our community. A document written during the pandemic — Santa Fe Homeless and Housing Needs — succinctly outlined problems and solutions, including what such groups as The Life Link or Esperanza Shelter are doing. Many smart people are working on this issue.

As they work, keep in mind both the people who need help and neighbors who need relief. Kids should be able to play in the park without seeing grown men urinate or two strangers having sex on the grass. And no human should fear being swept away in a flash flood because the only safe place to sleep is in an arroyo. Santa Fe needs to address both challenges.

Neighbors of Pete's Place have asked the city to consider relocating the shelter — and city leaders should listen, not because "those people" should be hidden away but because individuals who need shelter deserve better. Shelter staff and volunteers do incredible work, but the building is a former pet store, hardly an optimal location for sheltering humans.

A more expansive shelter, close to bus routes but with room on the grounds for showers,

restrooms, camping sites and services — counseling, job advice, health care, substance abuse treatment — is a more humane approach. Pete's has a four-year lease, approved by the City Council late last year. Use those years to plan a better solution for helping transients or providing emergency care, and at the same time, keep focusing on housing for families, young people and working adults.

Our hearts are in the right place — now, to get people in homes, support them in their search back to self-sufficiency and ensure dignity and safety to all residents as they go about their lives.

APPENDIX G

https://www.santafenewmexican.com/news/local_news/some-request-relocation-of-pete-s-place-shelter-at-santa-fe-community-meeting/article_a5a67ada-e365-11eb-b66a-2fd59f8fo8f3.html

Some request relocation of Pete's Place shelter at Santa Fe community meeting

By Sean P. Thomas sthoams@sfnewmexican.com

Jul 13, 2021

Drug abuse and safety concerns near the Interfaith Community Shelter at Pete's Place dominated a community discussion held by the city Tuesday evening.

Much of the discussion surrounded deteriorating conditions around the shelter, located at the corner of Cerrillos and Harrison roads.

Residents and business owners painted a picture that included drug dealing, aggressive behavior and sexual assault, particularly along Harrison Road.

Those problems led some to call for the shelter's relocation.

Santa Fe resident Susan Guevara said the situation has only spiraled in the 14 years she has lived near the facility.

"The situation has gone from 'Aw, gee, this is a drag' to absolutely frightening," Guevara said. "I told the City Council and Mayor [Alan] Webber that we have already had assaults there; we are going to see batteries soon. That is one of the biggest reasons why this shelter needs to be in a more appropriate area."

George Lyon, announced as the shelter's new executive director in May, said that regardless of where the facility is located, the underlying problem will persist.

"We will resolve the situation with your help," Lyon said. "It's not just Pete's Place. If you move Pete's, you're just moving it to another area. The problem is a disease that is hurting our community, and without concerted effort, it is not going to change."

Police Chief Andrew Padilla said the community needs to unite to find a solution to the issues.

"The location it is in, it is there," Padilla said. "Until we come together as a city, a county and a state and identify a better location, unfortunately, we have to deal with this situation as a community and as a group."

The city approved a new four-year lease with the shelter in October. The meeting, held virtually via Zoom, was a requirement of the city's agreement with Pete's Place.

Capt. Matthew Champlin said the police department typically receives complaints about loitering, which affects the quality of life for business owners and residents in the area.

The city does not have an ordinance against loitering.

There were 118 dispatched calls for service on Harrison Road from June 1 to July 13, according to the police department.

During that same time, Champlin said the department completed 140 drive-bys in the area, also known as proactive close patrols.

"That is the highest amount of close patrols I have seen in that time period in one area," Champlin said.

Community Health and Safety Director Kyra Ochoa outlined actions taken by the city to mitigate safety concerns, including adding \$90,000 to an Allied Security contract for Harrison Street during the past fiscal year.

City officials also detailed a budding plan to increase sidewalk access along Harrison Road, often impeded by tents, according to residents.

Improvements to spotty street lighting along the road to help address safety issues in the corridor also were proposed.

Mark Edwards, owner of Z Pets Hotel and Spa on Harrison Road, said he felt it currently was more dangerous during the day than at night and didn't believe infrastructure improvements would help with safety.

“I have a 13-year-old volunteer who lives in the Homewise project who doesn’t feel safe enough to walk to my business to volunteer there,” Edwards said. “She is not even allowed to come out of my business until her mother is in the parking lot.”

Santa Fe resident Miguel Gabaldon said if the city did widen the sidewalk, it would result in more sidewalk camping and need for enforcement.

City Councilor Renee Villarreal, who spearheaded the sidewalk-widening effort with Councilor Signe Lindell, said that while she didn’t believe it was a fix for issues swirling around Harrison Road, it helped meet a constituent’s request.

“I don’t want to disregard the folks who do want that,” Villarreal said.

Villarreal said while she is concerned about homelessness, she receives more complaints about drug dealers, drug use and gangs.

“The complaints we get are not complaints against the homeless populations,” she said. “It’s really about the people who prey on these folks.”

Champlin said arresting away a drug problem was not a solution, adding better alternative was providing support services.

Mayor Alan Webber agreed.

“You can’t arrest someone for being homeless,” Webber said. “That is not a crime in our city. It is a crime to be a drug dealer, to threaten someone with violence, to be a gang member throwing rocks and intimidating people and blocking them into their cars.”

Sean Thomas

Reporter

APPENDIX H

'We're really the dumping ground': Phoenix neighbors, service providers clash after decades of inaction on homelessness

Jessica Boehm | Arizona Republic | 2:15 pm MST October 13, 2020



[Surviving summer in a Phoenix homeless encampment](#)

[View | 12 Photos](#)

Andre House provides water, food and relief from heat

About 500 people sleep every night in sleeping bags, tents and makeshift tarp shelters on the streets around the Human Services Campus south of downtown Phoenix.

They either can't get — or don't want — one of the roughly 450 shelter spaces on the campus, which are full virtually every night.

The large encampment, which temporarily has been moved to nearby parking lots because of the COVID-19 pandemic, has created severe public health and safety issues for the people sleeping on the streets and nearby businesses and residents.

The Human Services Campus has asked Phoenix for permission to increase the number of people who can sleep on the campus by about 500. The leadership at the campus believes this will both save lives of people living in the harsh elements and unsafe conditions on the street while easing the burden on the neighborhoods.

Neighbors aren't sold. They're fearful that the people who move onto the campus will just be replaced by more people experiencing homelessness, which will further increase the issues they have with [trash and crime in the area](#).

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For more than 30 years, these working-class, minority neighborhoods has shouldered most of the burden of caring for people experiencing homelessness in Maricopa County.

The current debate over whether to increase beds at the Human Services Campus comes after decades of inaction in every level of government in Arizona to successfully address a homelessness problem that has reached unprecedented levels.

And because of the economic consequences of COVID-19, the suffering could become even more acute.

Neighbors and service providers agree that the state, county and metro-Phoenix cities need to create more shelters and more services in other parts of the region so that fewer people are concentrated in the neighborhoods around the Human Services Campus.

But after decades of broken promises and a lack of leadership, it's hard for anyone to believe that change is possible.

Bill Morlan, president of Electric Supply Inc., said he feels like "we're having the same conversations we've had for as long as we can remember." Morlan's been working at the business, which is almost next door to the Human Services Campus, since 1985 when his family bought it.

For the past year, the massive encampment on Madison Street dotted his property line, and he'd find trash and human feces on his property daily.

Morlan recently came across a transcript of a city meeting from decades ago where his father was listing the same concerns that he has now.

"The city and the county and the state have not really worked together with a good long-term approach on how to handle the problem of homelessness. They just try to hide it by sending it down to this neighborhood. We're really the dumping ground," Morlan said.



Homeless tents are erected in lots west of downtown Phoenix on May 27, 2020.
Michael Chow, Emmanuel Lozano/The Republic

The failure of the government to adequately address the problem has led to a single homeless campus that's absorbing a large portion of the homeless population and neighborhoods whose concerns about their health and safety are frequently brushed aside.

Both are overwhelmed and overburdened by the sheer volume of the homelessness problem in the region, which has been placed squarely on their shoulders because of decades of government inaction.

"We should have seen some of this coming a long time ago and been ready for this," Morlan said.

Only one large service provider

The Human Services Campus includes 15 organizations that provide services to the region's homeless population, including a shelter run by Central Arizona Shelter Services.

Some smaller homeless shelters are scattered across metro Phoenix, but the Human Services Campus is the major provider of shelter and services for all of Maricopa County.

Plans for other large shelters in the region were scrapped in past decades because of neighborhood pushback and a lack of political will. Meanwhile, the demand for shelter has increased.

Unsheltered homelessness has increased in Maricopa County for the past six years. According to [the most recent point-in-time count](#), there are at least 3,767 people living in places not meant for human habitation.

Maricopa County, the state of Arizona and the metro Phoenix cities share the responsibility of address homelessness in the region.

Each entity often blames the others for not doing their part. In actuality, no level of government has adequately addressed the issues of housing affordability and homeless services, what is evident in the increasing numbers of people experiencing homelessness across the county.

Phoenix leaders say their city and constituents have carried the most weight because the Human Services Campus is in the city. Phoenix Mayor Kate Gallego and other leaders have called on the county, state and suburban cities to pitch in and create their own shelters.

Those calls have gone largely unanswered.

A bill that would have allocated \$5 million from Arizona's general fund to build a new 200-bed emergency shelter for people age 55 and older in the West Valley got some traction earlier this year but was derailed after the COVID-19 pandemic took hold in Arizona.

What would zoning change do?

The Human Services Campus believes adding more shelter space on the campus will provide some relief for both the people experiencing homelessness and the surrounding neighborhoods that are impacted by people currently sleeping on the street.

Executive Director Amy Schwabenlender said the additional shelter beds will not solve the homelessness crisis for the whole county. But it's one thing her organization can do now to move people off the streets and into a bed.

"We do know that a shelter bed is the step to housing, and a shelter bed is the way out of homelessness," Schwabenlender told the Central City Village Planning Committee on Monday night.

The Human Services Campus zoning currently allows for 425 shelter beds, but the campus received approval to add 45 beds through a grant in past years, bringing the total number of beds to 470.

During extreme heat, the campus allows an additional 275 people to sleep indoors in the St. Vincent de Paul dining room.

So there can be as many as 745 people sleeping on the Human Services Campus.

That number was lower this summer because of physical distancing requirements associated with COVID-19, but was the case last summer and in recent past years.

About two years ago, Maricopa County closed the overflow shelter outside of the campus where about 500 people slept nightly and did not provide another option or additional shelter beds. Many believe that the closure led to the large number of people sleeping outside.

The zoning change the Human Services Campus is requesting would add 275 beds to the main shelter on the campus, operated by CASS, bringing the year-round total to 700.

It would also allow 100 new beds to be operated at an existing building owned by Andre House, a Catholic service organization across the street from the Human Services Campus.

[View | 19 Photos](#)

Coronavirus pandemic: Homeless camps in Phoenix brace for heat wave

The Andre House shelter would be a "lower-barrier shelter," meaning it would be more accepting of people with substance abuse issues, pets or excess personal belongings than a traditional shelter.

This type of shelter is meant to appeal to the people who have been living on the streets for long periods of time and may not be comfortable with the rules and crowds in a traditional shelter, said Ash Uss, advocacy and partnership coordinator for Andre House.

Uss interviewed people experiencing homelessness in the area and found that 90 out of 100 people who chose not to stay at CASS would feel comfortable staying in the Andre House shelter.

"We have evidence to believe that this kind of unique shelter model will capture those folks," Uss said.

The zoning change would also allow for 200 "weather relief" beds, which would allow an additional 200 people to sleep on the campus during extreme weather.

"I fundamentally believe it is inhumane that we have buildings, we have capital and we have resources to shelter more people but we don't have permit to shelter more people," Uss said.

The Phoenix Planning and Development Department staff recommended approval of the bed increase, subject to 22 requirements that include daily cleaning around the property, a reservation of beds for police officers who encounter vulnerable people in need of a bed and mandatory community and city meetings to try to alleviate neighborhood issues.

The zoning change went before the Central City Village Planning Committee on Monday night.

The committee voted 6-3 to recommend approval of the bed increase, after about four hours of heated public comment.

The case is expected to go before the Planning Commission in November and to the Phoenix City Council for a final decision in December.

Decades of 'disrespect'

"The things that this community wants are no different than what any community wants: to have a healthy, environmentally safe neighborhood full of opportunity and to have neighbors and business bring quality to life to the neighborhood and are not detrimental," said Eva Olivas, executive director and CEO of the Phoenix Revitalization Corporation.

Olivas has led the charge against the expansion of beds at the Human Services Campus and for more than a decade has been asking city, county and state officials to intervene and reduce the campus' impact on neighborhoods.

Olivas said people experiencing homelessness leave the shelter during the day and walk through their neighborhoods, often leaving behind trash and sometimes engaging in criminal activity. Parents won't let their kids go to parks or walk the neighborhood unattended out of fear, and some elementary schools have had issues with people experiencing homelessness coming onto their campuses, she said.



A woman experiencing homelessness moves her belongings during an intensive street cleanup near the Human Services Campus on Feb. 5, 2020, in Phoenix.
Sean Logan/The Republic

She said the neighborhood groups have been shuffled around from the city, to the county, to the Human Services Campus — and she doesn't believe any entity takes their concerns seriously.

Olivas said the shelter's neighbors have no faith that the Human Services Campus adding beds will lessen the burden on neighborhoods. They believe it will just draw more people to the area and give the rest of Maricopa County an excuse to not develop other shelters, she said.

The neighborhoods surrounding the Human Services Campus are extremely low-income and largely Latino. Olivas said she believes this is why the city ignores their concerns.

She recalled a news story from last year about a Dutch Bros. coffee shop on Central and Camelback avenues that drew ire from neighbors because of the amount of traffic. [The city revoked the coffee chain's permits.](#) effectively forcing it to close.

The neighborhood impact near the Human Services Campus is far worse than traffic congestion, but communities in the area are brushed aside, Olivas said.

"Are you serious? I don't understand. Is it because people in that neighborhood said it?" she said.

Olivas said every time her neighborhood group speaks about their concerns, service providers and government officials say they have "no humanity" and don't care about people experiencing homelessness.

This isn't true, and the comments are hurtful and isolating, she said.

"They're not asking for the Taj Mahal, they're asking for a clean and safe environment," Olivas said. "(The neighbors have) been so disrespected, so dismissed, so discarded."

She said until neighborhoods are taken seriously by the Human Services Campus, "there's no way for us to coexist."

Schwabenlender said she recently read a transcript from a city meeting in 1990, shortly after CASS opened.

The concerns from the neighborhoods about trash, crime and oversaturation were nearly identical to those of today.

"After reading that, I have probably more empathy for some of the people who've lived here so long. They've been saying things for 30 years and no one's heard them. That's really disappointing," Schwabenlender said.

She said the rules the city attached to the bed increase, including enhanced cleaning and more frequent conversations with the community, will create a better relationship with the neighborhoods and address their valid concerns about negative impacts.

Schwabenlender has been the executive director of Human Services Campus for about two years. Before her, there were several other executive directors over a short period of time and that could have led to a fractured relationship with the neighborhoods, she said.

She wants to change that, and she wants the neighborhoods to hold her and the campus accountable. Schwabenlender said she know that neighborhood trust is something that will take time to win.

"They have to have enough experience to know I'm going to do what I say I'm going to do," Schwabenlender said. "I can't speed up time to show them."

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APPENDIX I

KFF Mental Health Care Health Professional Shortage Areas (HPSAs) | KFF

Timeframe: as of September 30, 2020

Location	Total Mental Health Care HPSA Designations	Population of Designated HPSAs	Percent of Need Met	Practitioners Needed to Remove HPSA Designation
New Mexico	80	1,366,095	12.9%	78

NOTES

Notes

Health Professional Shortage Area (HPSA) designations are used to identify areas and population groups within the United States that are experiencing a shortage of health professionals. There are three categories of HPSA designation based on the health discipline that is experiencing a shortage: 1) primary medical; 2) dental; and 3) mental health. The primary factor used to determine a HPSA designation is the number of health professionals relative to the population with consideration of high need. Federal regulations stipulate that, in order to be considered as having a shortage of providers, an area must have a population-to-provider ratio of a certain threshold. For mental health, the population to provider ratio must be at least 30,000 to 1 (20,000 to 1 if there are unusually high needs in the community).

The number of mental health care HPSA designations includes HPSAs that are proposed for withdrawal and HPSAs that have no data. By statute, designations are not withdrawn until a Federal Register Notice is published, generally once a year on or around July 1.

Sources

Bureau of Health Workforce, Health Resources and Services Administration (HRSA), U.S. Department of Health & Human Services, [Designated Health Professional Shortage Areas Statistics: Designated HPSA Quarterly Summary, as of September 30, 2020](https://data.hrsa.gov/topics/health-workforce/shortage-areas) available at <https://data.hrsa.gov/topics/health-workforce/shortage-areas>.

Definitions

Percent of Need Met is computed by dividing the number of psychiatrists available to serve the population of the area, group, or facility by the number of psychiatrists that would be necessary to eliminate the mental health HPSA (based on a ratio of 30,000 to 1 (20,000 to 1 where high needs are indicated)).

Practitioners Needed to Remove HPSA Designation is the number of additional psychiatrists needed to achieve a population-to-psychiatrist ratio of 30,000 to 1 (20,000 to 1 where high needs are indicated) in all designated mental health HPSAs, resulting in their removal from designation. While mental health HPSA designations can include core mental health providers in addition to psychiatrists, most mental health HPSA designations are currently based on the psychiatrists only to population ratio. HPSA designations based on psychiatrists only do not take into account the availability of additional mental health services provided by other mental health providers in the area, such as clinical psychologists, clinical social workers, psychiatric nurse specialists, and marriage and family therapists.

N/A: Data not available.

APPENDIX J

Lawsuit filed in death of inmate at Bernalillo County Metropolitan Detention Center

By Elise Kaplan / Journal Staff Writer

Published: Friday, July 23rd, 2021 at 6:50pm

Updated: Friday, July 23rd, 2021 at 9:54pm

Metropolitan Detention Center. (AP file)

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The family of one of the people who died while in custody of the Metropolitan Detention Center last year has filed a lawsuit against Bernalillo County, the jail and the medical provider and staff alleging medical malpractice and negligence led to his death.

Samuel Bryant, 46, died from the toxic effects of methamphetamine with contributing factors of opiate withdrawal, according to an autopsy report. The Office of the Medical Investigator determined his death was an accident.

He was one of nine people in jail custody to die in the course of a year – a dramatic spike over previous years. While the causes of death varied, six appear to have occurred while inmates were detoxing from drugs or alcohol or in medical units – all under the care of medical contractor Centurion Detention Health Care. None of the deaths were from COVID-19.

Bryant's death is similar to that of 38-year-old Joleen Nez, who also died from the toxic effects of methamphetamine, according to an autopsy report recently released to the Journal. OMI determined her death also was an accident.

A jail spokeswoman did not answer questions about whether anyone was disciplined regarding either death or whether any jail policies have since been changed.

In an email, spokeswoman Julia Rivera said "MDC will not provide a comments on any pending litigation." An attorney for Centurion did not respond to a call or email from the Journal seeking comment on the lawsuit.

Last spring, after the Journal published an article on the increase in deaths at the jail, the county said it "expressed concern to Centurion over staff vacancies and continuity of care" and asked the company to respond. Instead, Centurion terminated its contract more than a year early.

Parrish Collins, the attorney representing Bryant's estate, has filed numerous lawsuits against Centurion, the state Department of Corrections and county jails regarding medical malpractice behind bars. "I think there's definitely a pattern, it's more than just (deaths while in) detox or any of that," Collins said. "It's a pattern of gross neglect, gross medical neglect. I think it runs throughout the state, the jails and prisons." He said in Bryant's case the medical and jail staff should have taken care of him. "He was on therapeutic watch but they weren't watching him despite the fact that he was screaming in pain," Collins said. "The fact that they documented that he was screaming and they did nothing, I don't even know how to describe that level of callousness."

Bryant was arrested on a warrant for failing to appear in a domestic violence case on Sept. 22 and housed in a single occupancy cell in the jail's detox unit. His stepmother told the Journal in March that he had a "heart

of gold” and was a very good man who got “hooked on drugs.” She said he had visited her hours before he was arrested.

Correctional officers checked on him around 11:30 p.m. and saw that he had vomited on the floor, according to incident reports released to the Journal in response to an Inspection of Public Records Act request. The guards said they asked if he needed anything and he said, “I’m just detoxing.” For the next couple of hours he could be heard banging on the wall and yelling. Around 2:30 a.m. he was seen lying on his stomach. About 50 minutes later when a detox nurse went to check his vitals he was unresponsive.

At 4:06 a.m. Bryant was declared dead.

According to the lawsuit filed against Bernalillo County, the jail, Centurion and individual employees, staff “knew of Bryant’s history of heroin usage and that he was in withdrawal and with wanton, willful and deliberate indifference to his severe and emergent medical condition failed to take action within its authority to protect the health of Mr. Bryant.” The lawsuit also alleges that the defendants “ignored Mr. Bryant’s screams throughout the night leaving him to suffer severe physical and psychological pain.”

The suit asks for compensatory and punitive damages.

Nez, who died on Jan. 31, had been arrested on a warrant for failing to appear in a littering case. She had been charged with littering after an officer saw her kick over a cup and bowl and then – after the officer asked her to pick it up – she only picked up the bowl.

She was booked into a detox unit on Jan. 29 and, according to incident reports, another inmate found her unconscious and not breathing around noon.

She was brought to the hospital, where she died. OMI said her brain and kidney were damaged due to her organs not getting enough blood and oxygen over a period of time.

The Journal could not reach Nez’s family.

APPENDIX K

Centurion Presence Coincidental In New Mexico Prison and Jail Deaths?

By: [Collins & Collins, P.C.](#)

July 29th, 2021 in [Civil Rights](#), [Medical Malpractice](#), [New Mexico Injury Attorney Blog](#), [Prison Medical Neglect](#)
<https://www.collinsattorneys.com/centurion-presence-coincidental-in-new-mexico-prison-and-jail-deaths/>

[A report from the Albuquerque Journal](#) indicates that nine inmates died while in the custody of the Bernalillo County Metropolitan Detention Center (MDC) during the prior August 2020 to January 2021. At least 72 inmates died in the custody of NMCD from June 2016 to November 2019.

What is the common denominator in all these deaths? Centurion Correctional Healthcare of New Mexico (Centurion) was the medical contractor providing medical care to those deceased inmates. The question is whether or not this is purely coincidental?

Centurion Lawsuits

As of the writing of this article, [Collins & Collins, P.C.](#) has filed 18 lawsuits against Centurion. The most recent lawsuit filed by the firm, [Estate of Samuel Bryant v. Centurion, Bernalillo County, et al](#), involved a detox death at MDC. Sadly, again according to the Albuquerque Journal, Samuel was one of six MDC inmates that died during detox. One detox death is inexcusable. Six approaches criminality. Until that lawsuit, the firm had not filed any lawsuits against MDC. Rather, the lawsuits were limited to New Mexico Corrections Department (NMCD).

Centurion according to the contract with MDC took over medical care at the facility on January 1, 2020 with a first year compensation base of \$13 million. These 18 lawsuits will by no means be the last. It is expected that there will be additional lawsuits arising out of Centurion's medical services at MDC. Likewise, there will likely be additional lawsuits arising out of NMCD medical care despite the fact that Centurion vacated the contract in November 2019.

Centurion Vacated NMCD Contract Early

The original contract between NMCD and Centurion was for 3 years. The term had been extended for one year so the contract should have ended around June of 2020. However, Centurion as mentioned above vacated early in November 2019.

Centurion Vacating MDC Contract Early

According to [press reports](#), Centurion will be vacating the MDC early as well. The contract with MDC was for 4 years. Assuming the press reports are accurate, Centurion will be leaving about 2.5 years early on its 4 year contract. It is not known yet why Centurion is leaving but that is certainly something that Collins & Collins, P.C. will be exploring in its most recent lawsuit against MDC and Centurion.

Centurion Cannot Exit New Mexico Soon Enough

Centurion's performance in New Mexico prisons and jails is appalling to say the least. This can be judged purely on the basis of the number of deaths at NMCD and MDC under Centurion's medical watch. However, it is much worse than that. The clients of Collins & Collins, P.C. have suffered severe and permanent injuries at best while a number have died under the care of Centurion. Keep in mind that Collins & Collins, P.C. is a small firm among many law firms in New Mexico. There have been many other suits filed by other firms with equally devastating and avoidable injuries arising out of the callous medical neglect of New Mexico inmates. Likewise, there have been other

deaths. Worse still, the true toll of Centurion's tenure in New Mexico is not known as few inmates actually file suits for many reasons which are beyond the scope of this article. In addition, NMCD deaths resulting from Centurion's gross incompetence are likely far higher than the 72 identified since deaths that occur outside NMCD premises do not show up in Office the Medical Investigator reports.

The toll on inmates and their families is incomprehensible. The [toll on New Mexico taxpayers has not been measured but the costs associated with medical neglect in NMCD facilities is enormous.](#)

Prison and Jail Medical Care Unlikely to Improve

Even if Centurion leaves the state completely, the medical care for New Mexico prison and jail inmates will not improve as things stand now. With regard to the state's prisons, the big problem is NMCD itself. NMCD is a renegade agency, chocked full of corruption, incompetence, and deliberate cruelty. NMCD simply does not care about constitutionally adequate medical care. If it did, why would it keep the same medical providers as the medical contractors come and go. That's right, the individual medical providers, including doctors, physicians assistant, nurses and others, remain the same after one contractor leaves and the next takes over. It is not a change in medical care, it is simply a change in payee on the checks written by the taxpayers of New Mexico. Even worse, the contractors are on a revolving plan. One contractor gets fired or leaves, the next one steps in. This would not be so bad, but NMCD simply fills the slot with medical contractors that had already failed in the State. This will likely be the same with MDC which is illustrated by the fact that MDC hired Centurion to begin with despite the large number of suits filed against Centurion both in New Mexico and other states.

Centurion Involvement Coincidental?

Perhaps coincidental is not the right word. Centurion just happens to be the payee on the checks now written by MDC and formerly the checks written by NMCD. It is not coincidence. It is standard operating procedure on the part of New Mexico prison and jails. They rotate the same bad actor medical contractors from one contract term to the next. At the same time, the same incompetent and too often deliberately cruel individual medical providers stay in place from one medical contractor to the next.

This is unfortunately the state of prison and jail medical care in New Mexico for the foreseeable future. This is certainly the case at the present with the successor to Centurion, Wexford, performing as poorly and arguably worse than Centurion. The beat goes on and this will continue until NMCD is completely overhauled beginning with its contracting practices.

APPENDIX L

NM's rise in homelessness highest in the nation

By [Rick Nathanson / Journal Staff Writer](#)

Thursday, January 9th, 2020 at 9:41PM



Anthony Lucero, 56, who has been living on the streets for a decade, pulls two shopping carts containing his belongings from the parking lot at The Rock At Noon Day, after having lunch there. (Adolphe Pierre-Louis, Albuquerque Journal)

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When Albuquerque Mayor Tim Keller goes before the state Legislature seeking a \$14 million state match to build a homeless shelter, he will be armed with additional ammunition from a U.S. Department of Housing and Urban Development report showing New Mexico had the nation's largest percentage increase in homelessness from 2018 to 2019.

That increase of 27% is detailed in the 2019 Annual Homeless Assessment Report to Congress, released Thursday.

In addition, the report shows that the state had a 57.6% increase in chronic homelessness last year, also the highest in the nation.

Lisa Huval, deputy director for Housing and Homelessness for the Albuquerque Family and Community Services Department, said the New Mexico numbers used by HUD were taken from the annual Point-in-Time Count conducted in Albuquerque and around the state last January, in both urban and rural areas, and counting both sheltered and unsheltered homeless people.

The percentage increase in Albuquerque's homeless population alone rose by 15%, she said.

HUD defines homelessness as an individual or family who lacks a fixed, regular and adequate nighttime residence, or has a primary nighttime residence that is a public or private place not meant for human habitation, or is living in a publicly or privately operated shelter, Huval said.

“Chronic homelessness is defined by HUD as a person who has been homeless for one year, or has had four episodes of homelessness over three years with the combined episodes adding up to one year, and has a disabling condition that makes it difficult to obtain housing,” Huval said.

In New Mexico, according to the report, there were 2,464 homeless people in 2019. Of that total, 1,283 persons, or about 52%, were chronically homeless.

The New Mexico Coalition to End Homelessness, which is contracted by the city to conduct the annual count, puts the number of homeless people in Albuquerque at 1,524 sheltered and unsheltered individuals – 206 more than were counted in 2017, when 1,318 homeless people were counted in the city limits.

In even-numbered years, only homeless people who stay in shelters are counted; in odd-numbered years, both sheltered and unsheltered homeless people are counted.

Only those homeless people who can be located are counted, either sheltered or unsheltered, as well as only those who agree to participate in the survey.

Albuquerque Public Schools spokeswoman Johanna King said about 3,000 children enrolled in APS are considered homeless at any given time over the course of a school year. But that number includes people who live in motels or who are doubled up with family or friends.

Danny Whatley, executive director of the Rock At Noon Day, a day shelter and meal site, said that based on his observations, the number of homeless people in Albuquerque is likely between 4,000 and 4,500.



Jesus Hernandez, 44, folds a blanket so it will fit into a shopping cart with the rest of his belongings in the parking lot at The Rock At Noon Day. He has been homeless for seven years.(Adolphe Pierre-Louis, Albuquerque Journal)

“One of the driving factors in the increase in chronically homeless people in New Mexico is what happened to our behavioral health system under the previous governor, with the dismantling of the behavioral health infrastructure as we knew it amid accusations of Medicaid fraud,” Huval said. “This forced a number of providers to close their doors and caused lots of people to lose access to services. In many ways, we’re still recovering from that.”

In 2013, 15 behavioral health providers were shut down by the state Human Services Department after an audit alleged fraud. After a lengthy investigation, Attorney General Hector Balderas’ office eventually cleared all 15 providers of any wrongdoing.

Another part of the story, said Huval, “is our state’s struggle with funding and supporting behavioral health programs at the scale they’re needed, and with folks being able to get into housing and being able to stay in housing.”

In raw numbers, the HUD report reveals that an estimated 567,715 people nationwide, both sheltered and unsheltered, were identified as homeless on the single night of the 2019 count. That represents a 2.7% increase over 2018.

Homelessness overall declined in 29 states and the District of Columbia, but increased in 21 states.

Nationwide, 396,045 people experienced homelessness as individuals, meaning they did not have children with them.

Individuals made up 70% of the total homeless population. And half of those who experienced homelessness as individuals were staying in sheltered locations.

According to the report, the number of unsheltered homeless people nationally rose by 8.7%, which includes increases of 15% among unsheltered women and 43% among people who identify as transgender.

California has 53% of all unsheltered homeless people in the country, with 108,432 people living on the streets.

That figure is nearly nine times higher than the number of unsheltered homeless people in Florida, the state with the next highest count at 12,476. California’s population is twice that of Florida’s.

In an introduction to the report, HUD Secretary Ben Carson noted that there remains “deep and persistent racial inequities among the people who experience homelessness.”

African Americans, he said, “accounted for 40% of all people experiencing homelessness in 2019, despite being 13% of the U.S. population.”

Veterans represented a bright spot in the report.

Compared to 2009 numbers there were 40% fewer homeless veterans nationwide during 2019.

The number of homeless veterans in 2019 shows a 2% decline from 2018. In raw numbers that means 36,282 fewer homeless veterans than there were in 2009.

That decline, according to the report, was a result of partnerships between HUD and the Department of Veterans Affairs in funding supportive housing programs.



Homeless people gather daily at Coronado Park in the shadow of Interstate 40 near Second Street. (Adolphe Pierre-Louis, Albuquerque Journal)



APPENDIX M

peter kalitsis <peterkalitsis@gmail.com>

Video of March 16, homeless coordinating council meeting

Rob Leming <phnapresident@gmail.com>
 To: peter kalitsis <peterkalitsis@gmail.com>

Fri, Mar 26, 2021 at 2:48 PM

I have been in close contact with Councilor Davis about some of the questions you are asking and in preparation for tomorrow's meeting, he and I agreed to share the information he received from FACS who will be administering this project. The PHNA will be sharing this information in a modified format shortly. Please see the information below:

From: Pierce, Carol M.
Sent: Thursday, March 25, 2021 6:43 PM
To: Davis, Pat
Cc: Foran, Sean M.
Subject: RE: Questions about plans for Gibson Gateway Center

Hello Councilor Davis,

Thank you for reaching out with your questions. I understand you weren't able to attend the last Homelessness Coordinating Council meeting and I appreciate the opportunity to share our thinking with you. Thanks for your patience. You stated in your email you are having a community meeting this Saturday. I would like to attend with you. What neighborhood are you having a meeting?

First, let me say that the Homeless Coordinating Council (HCC) is a valuable convening of partners and we are committed to sharing timely updates as the project moves forward. This discussion about the number of beds was brought to this group first because we value their input and expertise. However, it is an open meeting and reporters do attend it.

The HCC and its subcommittees is the latest addition to a robust public input process that included 13 HCC meetings and 3395 survey responses that produced the siting report (<http://www.cabq.gov/family/documents/gateway-center-analysis-of-public-input-on-location-preferences-02272020.pdf>) ; a focus group of people experiencing homelessness specifically on their needs from the Gateway model (<http://www.cabq.gov/family/documents/focus-group-pehia.pdf>); the Homeless Advisory Group <https://www.cabq.gov/family/partner-resources/meeting-minutes-agendas/one-albuquerque-homeless-advisory-council-and-its-subcommittees-that-have-been-meeting-regularly-for-over-two-years>; the Point in Time count (<http://www.cabq.gov/family/documents/2019-albuquerque-pit-count-final.pdf>) ; the comprehensive study by the Urban Institute (<http://www.cabq.gov/family/documents/albuquerque-affordable-housing-and-homelessness-needs-assessment.pdf>); months of additional outreach and participation related to the possible siting of a Gateway facility near UNM; and deep and sustained conversations with our partner providers whose input we value and is recommended in all we do.

Our vision for this project has always been to create trauma-informed, centrally located emergency shelter beds in Albuquerque with supports and services to help move those who enter into housing, which best addresses their needs. Community and partner input have and will continue to play a key role in shaping where we are on this project but these are the central principles we will return to when moving forward and will continue to work to achieve.

In response to your questions:

1. How did FACS arrive at the overnight capacity number? In all of our public data analysis, we have seen that single men outnumber women and children by 4 or 5-to-one. This 1/3, 1/3, 1/3 design does not seem to be guided by data or need. Please explain how you determined this is the appropriate mix.

We see the acquisition of GMC as being in alignment with our original goal and as an opportunity to increase the number of safe, dignified and centrally located shelter beds for all populations experiencing homelessness in our community. The 2019 Point in Time Count and 2019 *Assessing Shelter Capacity and Dynamics for Accommodating the Homeless Population in Albuquerque NM* report commissioned by the City identified need for additional emergency shelter beds for single men, single women and families with children. While our data does show that there are more men than women and families, we also know that women and families with young children are particularly vulnerable. Data all shows that the impact of traveling back and forth to the Westside Emergency Housing Center is particularly difficult for families with school-age children. Numerous studies agree that a trauma-centered approach requires having separate spaces for people of different genders. We specified a proposed division of space in HCC discussion. We will continue to work with the community and providers to find the right balance, and with the team involved in space planning to give us maximum flexibility.

2. 175 is far far too many for a gateway model. According to the City's own powerpoint presentations given by FACS to community groups and the city council, the "gateway model" is designed to serve as a "no wrong door" entry to services where an individual is matched to a social worker and services to address their issues, assist with eligibility for programs (including housing) and place that person into long-term supportive housing. While FACS has publicly said this would take anywhere from 14-30 days per person, a gateway center with 175 on-site residents would require more than 20 social workers and 175 housing units to be available when the center opens. FACS is not prepared to offer either (as you recall, FACS had problems getting existing providers to agree to take on more housing obligations as recently as last December).

1. The only way I see serving 175 people at Gibson is by serving 175 per year, or about 15 per month. That is a doable load for a gateway model. Beyond that, we appear to be designing a system for warehousing people without providing services. Please explain how FACS will support the persons it intends to serve and how they will guarantee those services and lengths-of-stay will meet the gateway standards the public voted for when they approved funding for building this type of center.

We are still committed to the "no wrong door" strategy and to connecting each person who enters seeking emergency shelter beds with supports and services. More discussion is needed; however, all of our studies and input concur we need a mix of services that will help people stabilize, including case management services, housing navigation, assistance applying for disability, and connection to the workforce.

Every person who comes into this Gateway Center will be unique and will need their own, individualized exit plan into housing. Some people will need a rapid rehousing or a permanent housing voucher, but there also are other affordable housing options in our community. In an exit plan into housing, the goal will be to determine the mix of support that will serve that person the best. For example, some people will have a job or be able to start a job quickly and only need a security deposit and first month's rent. Some people may need to be referred to a residential treatment program. Some people are not going to be a good fit for a housing voucher and will need long-term care. We have a goal that every individual who comes to the Gateway Center will exit to a more stable housing destination within 90 days.

Additionally, our commitment is to examine the full system of care-our community partners are part of the solution. We also intend to continue to work with providers to find the right balance of partner presence at the Gateway, contracted management and staff, and City staffing. We have heard loud and clear that we do not need to duplicate services.

3. Please explain the administration's intent to seek land use changes, including what changes it will seek and when you intend to apply.

The current analysis, based on the fact that the Gibson Medical Center already houses a number of service providers, suggests the need for a conditional use permit. That process takes several months and we intend to begin it as soon as possible within the next couple of months.

4. Please explain why the administration has not yet met with any of the neighborhood association leaders surrounding the property before determining the neighborhood capacity to care for additional persons in need.

We agree that meeting with the neighborhood around the site is important; however, your assumption that we have not begun is incorrect. Community input is something we have taken seriously throughout this project and we will continue to engage stakeholders, including those that live and work in the area. Various in-person, online and lived experience input opportunities not only informed decisions to lower bed counts and shift to a multi-site model, they also helped guide the location. Throughout the process, we have shared updates and continued conversations with the neighborhood. This has included District 6 Coalition whose Vice President is an active member of the HCC Services Committee. After the City closes on the purchase of the facility, we will continue to ramp up additional community engagement work.

5. Who does FACS intend to operate the center, how will they be paid and what oversight will be put in place to ensure neighborhood issues and unintended consequences are adequately addressed better than current FACS homeless provider contractors downtown?

FCS will disseminate a Request for Proposal to select an entity that will operate the center. Once that entity is chosen, we will enter into a contract with them and oversee and monitor the contract to ensure it is in compliance with our standards. FCS will also be working with this entity and service providers at this location on Good Neighbor Agreements. As referenced in the draft Housing Services Framework (<https://www.cabq.gov/family/documents/housing-services-framework>) document sent to the HCC, we will evaluate the impacts of any emergency shelters within 5 miles of the proposed location including the possible impacts of proposed services (e.g., food, medical care, case management, substance abuse, drop-in access, 24/7 access) and the population to be served. That evaluation of impact will take into consideration the impact of existing services within the area as well and will inform the creation of a detailed plan to address community safety concerns for the area around any proposed emergency shelter locations.

6. I have continually asked FACS to develop a long-term housing plan, with funding options, to meet our need for more than 800 new supportive housing units. During our most recent council meeting, Deputy Director Huval told the council that FACS could spend more money if allocated. CAO Nair quickly added that the administration did not believe it could. Given the administration's skepticism of its ability to quickly meet the housing need, even if fully funded, how will FACS create the housing units needed to support 175 persons receiving gateway services?

In the experience of the City and our partners, it is not accurate to assume that each person who enters the Gateway Center will need a unit of affordable housing because of the unique circumstance for each individual that the City must construct or fund. The City took an important first step toward creating long-term housing plan by commissioning the *City's 2020 Albuquerque Affordable Housing and Homelessness Needs Assessment* from the *Urban Institute* that showed the city needs to add 15,500 rental units that are affordable for those with a very low income. The Urban Institute also estimated that we need 2,200 new permanent supportive housing units and 800 new Rapid ReHousing units in order to fully address the need for supportive housing in Albuquerque. Based on the findings in that report, the HCC Housing Committee has developed a list of high-impact strategies and is now working on measurable five year and annual targets. Some of the shorter-term, high-impact strategies that are covered in more detail in the draft Housing Services Framework at <https://www.cabq.gov/family/documents/housing-services-framework>

Housing Services Framework document includes these high-impact strategies:

- Increasing the supply of permanent supportive housing vouchers
- Increasing the supply of housing vouchers for low-income tenants
- Pair affordable housing development with ongoing rental assistance
- Collaborate with the Albuquerque Housing Authority to ensure that the existing limited preference for Section 8 vouchers for supportive housing tenants is fully utilized
- Act aggressively to preserve existing subsidized and market-rate affordable units
- Develop more affordable housing through regulatory, infrastructure and funding support for affordable housing development
- Increase development of market-rate housing development targeted for low-income families
- Develop site-based permanent supportive housing, for those who need onsite supportive services to maintain housing stability
- Increase tenant protections
- Increase connection to social service supports & community

In addition to the money contained in the GO Bond cycle, the administration successfully advocated at the legislature for state funding for additional affordable housing. If the community is able to partner with the City and expend the \$17.5 million that will be in the Workforce Housing Trust, together with any of the additional state funds that make it through the veto process, we will be the first ones to ask Council for additional funding. In the meantime, other projects that can be completed in the near term – many of which will benefit the same parts of town where Gateway Centers will be – can proceed and contribute to the overall success of our homelessness and public safety strategy.

As this project progresses, we will continue to get input from and provide updates to City Council, the HCC, the neighborhoods directly surrounding this location, the public, and other key stakeholders and there will be opportunities for input and questions.

Councilor Davis, please let me know if you have any additional questions.

Carol

[Quoted text hidden]

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Rob Leming
President
Parkland Hills Neighborhood Association
505-750-7672

City leaves \$700K in housing voucher money unspent

BY JESSICA DYER / JOURNAL STAFF WRITER

WEDNESDAY, OCTOBER 7TH, 2020 AT 6:26PM



Khadijah Bottom, right, hands a mask to Live Free, a man who has been homeless for 17 years, during a food giveaway Sunday in the International District. Bottom, executive director of Vizionz-Sankofa, has been working with the homeless population in her area, including trying to get them housing. She said she cried when she heard the city finished the last budget year without spending \$700,000 it had available for housing vouchers. (Adolphe Pierre-Louis/Albuquerque Journal)

Khadijah Bottom has for several years run an organization devoted to helping African immigrants and refugees in Albuquerque but broadened her focus last year after an

encounter with an elderly man sleeping in her neighborhood park.

Bottom, executive director of Vizionz-Sankofa, felt compelled to help him, and others in similar circumstances, find a place to live.

“(He) was too frail to be sleeping under a tree,” she said.

Bottom learned about a city-funded housing voucher program and went through special training required to get people onto the waiting list. Working last fall and winter – often out of a Southeast Albuquerque soup kitchen – she helped an estimated 35 people complete the survey needed to get onto the “coordinated entry list.” It’s a vulnerability index that many city contractors and other providers use when determining who gets new vouchers when they become available.

To this day, Bottom said no one she helped has obtained a housing voucher.

So she was particularly rankled to learn recently that the city ended the 2020 fiscal year on June 30 with about \$700,000 in unspent housing voucher money. By city calculations, that is enough to support 51 different households for a full year.

“That was heartbreaking – 51!” Bottom said in a recent interview, recalling that she cried when she first heard about the leftover funds. “I could’ve housed everybody (sleeping) in Wilson Park.”

And Albuquerque city councilors are also raising questions about another \$2 million they had allocated last year for additional housing vouchers. The council approved the appropriation in the spring of 2019 at Mayor Tim Keller’s request.

Less than \$100,000 of that money was spent during fiscal year 2020, in part because the city couldn’t find contractors to

distribute the vouchers that quickly.

Council President Pat Davis said he is frustrated, and the public likely is, too. An official count last year identified 1,524 people as homeless on a single night in Albuquerque, and there are usually thousands of people at any given time seeking housing support on the local coordinated entry list.

“I think people are going to drive past their park or drive down Central and see people sleeping (outside) who need a place to be, and they’re not going to accept an excuse that money is literally sitting in the bank but the vouchers to put these people into housing who want them just can’t be done because of paperwork,” Davis said. “That’s just not going to be an acceptable answer.”

Lisa Huval, deputy director of housing and homelessness inside the city’s Family and Community Services Department, said there are multiple factors at play.

The unspent \$700,000 was due largely to understaffing within one of the 10 different organizations the city uses to administer the vouchers. Huval declined to identify the vendor, but said it has recently filled several open positions and should be better able to handle the workload this year.

The city, she said, ultimately bears the responsibility monitoring contract activity and performance.

“When I saw that number (of unused vouchers), I definitely felt we need to do better,” she said. “We need to work with our contractors to ensure they are fully expending these funds.”

While the city retained some of that \$700,000, it lost about a third of it, as \$235,000 reverted back to the federal government, according to Huval.

Despite its failure to spend all available money last year, the city

still issued a total of 720 vouchers in fiscal year 2020, about equal to the year before, worth about \$6 million total. That includes “rapid rehousing” vouchers for those seeking temporary rental support and “permanent supportive housing” vouchers for those who need more intensive, longer-term support, often due to a disability.

As for the \$2 million for additional vouchers approved over a year ago, Huval said it is reaching the community, albeit on a longer timeline than originally anticipated. When the city issued a request for vendors to administer the vouchers, it did not get proposals large enough to account for all \$2 million. Huval said the city decided to extend the \$2 million appropriation into a three-year program and contracted with two nonprofits – the Barrett Foundation and HopeWorks – to issue a combined 145 vouchers over that span.

The contracts ultimately took effect Dec. 1, 2019. As of June 30 – a year after the council’s appropriation was available – Barrett had issued six, while HopeWorks had issued 32, Huval said, accounting for \$99,710 in total expenditures.

New vouchers continue going out; Barrett Executive Director Heather Hoffman said this week that the nonprofit has now issued a total of 15.

Huval said launching any new program takes time – both for the city but also for the vendors who need to add staff – and that COVID-19 created some hurdles as well, but that the \$2 million is being used effectively.

“I’m proud of what we’ve done; we’ve contracted with two very experienced providers that have an excellent track record of providing rapid rehousing to people in our community and over the next two to three years they will help close to 150 homeless households obtain and maintain permanent housing,” she said.

“I think what we have structured is very sound and is going to make a huge impact for those families.”

But some city councilors say they are frustrated, in part because they expected the \$2 million to have flowed into the community already.

Councilor Isaac Benton, who represents Downtown, said he did not know until recently that city staff had executed contracts to expend the money over a three-year period instead of one. He said the council – the city’s appropriating body – should have had a role in that decision.

“I’m not going to blame the present leadership, but this department has a history of problems as far as just effectively getting work out and money out on the streets where it’s needed,” he said.

The administration included information about the three-year rollout plan in a fiscal year-end status report sent to council last month. Such communication would normally have occurred earlier in the year, but COVID-19 altered the budget timelines, a spokeswoman for Mayor Tim Keller’s office told the Journal.

Davis, whose district includes Nob Hill and the International District, said he never understood the allocation as a multi-year expenditure and expected that Keller’s budget request for the funding last year reflected a ready program.

“I feel like when they make the request of money from the council to put a program in place, it assumes they’ve developed the capacity to do it in the field,” he said, adding that the way the city handled the voucher money raises questions about other new initiatives. That includes the mayor’s proposed “Community Safety” department, which gives the city a third option – beyond police and fire – for responding to 911 calls and addressing issues like homelessness and behavioral health. The mayor’s

proposed 2021 budget includes \$7.5 million for the new department, primarily moved from other departments in the city.

“People are going to look at that plan ... in the same way and say, ‘You’re asking us for a big commitment to get something new started, but there’s no indication they’ve got a good track record of putting money into the systemic issues in a significant way even when they have the funds,’ ” Davis said.

Jessica Campbell, a spokeswoman for Keller’s office, cited both COVID-19 and limited provider capacity for the challenges of getting money out the door.

“This city has historically contracted with outside service providers to get people into housing in exchange for this funding, and we are equally frustrated that the money wasn’t spent. While we do believe this stems from pandemic related challenges around the inability to physically find housing and place candidates, it’s not something we ever want to see happen. We have instructed the department to work with the providers to make sure there is more capacity going forward to deliver on what the city needs when it comes to getting people housed, and if it’s not there, we’re going to help build out additional partnerships,” Campbell said.

Bottom said she has temporarily stopped trying to get people on the housing waiting list but has not forgotten about those living on the streets in her area. She tries to maintain regular contact and help when she can.

“Even though I’m not able to put them in housing, I still go feed them; I will just take off a couple days out of the week and either go buy 10 boxes of pizza or sometimes I’ll cook in my house and go feed them on the weekend just to let them know I still think about them,” she said.

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APPENDIX O

Gateway Center shelter could hold 25 families, 100 others

By [Jessica Dyer / Journal Staff Writer](#)

Published: Friday, September 3rd, 2021 at 7:08PM

Updated: Friday, September 3rd, 2021 at 11:33PM



The city of Albuquerque is currently expecting to accommodate up to 100 individuals and 25 families at the forthcoming Gateway Center on Gibson. (Liam DeBonis/for the Albuquerque Journal)

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As it seeks permission to establish an overnight shelter in the old Lovelace hospital, the city of Albuquerque now says it is looking to accommodate up to 100 individuals and 25 families on-site.

The details come ahead of the city's Sept. 21 hearing to obtain a "conditional use" permit for the project. The numbers appear to address a lingering question about the eventual size of the Gateway Center's emergency shelter operation, though one neighborhood leader said they are not precise enough, and the city acknowledges they are not necessarily final.

"I think that's the community's best thinking and our best thinking now in terms of setting some sort of marker. It's a scenario that has gained the most traction as we've been doing community meetings," said Alicia Manzano, the city's liaison for strategic partnerships.

The city's first Gateway Center has been years in the making and one of the highest-profile initiatives of Mayor Tim Keller's first term.

His administration at one time envisioned a 24/7 shelter with 300 beds to serve all populations and link people to services and programs. Voters approved \$14 million for the project as part of a 2019 general obligation bond package.

But officials moved away from the 300-bed model last year after losing out on their top location choice – University of New Mexico land north of Lomas Boulevard – and amid criticism that such scale might negatively impact the clients and the surrounding neighborhood.

Questions about capacity have continued swirling since the city this spring closed on the purchase of the old Lovelace hospital – a 572,000-square-foot building on Gibson Boulevard, which still has some on-site health care providers.

While city officials said earlier this year they were contemplating incorporating 150 to 175 emergency shelter beds into what they're now calling the Gateway Center at Gibson Health Hub, some neighbors along the Gibson corridor had advocated for a cap of 30.

When the city last month released a draft operations plan, it did not address shelter capacity. Officials said they planned to have that information by the end of August.

In response to Journal inquiries this week, the city said in a statement that it is now considering an operation that gradually ramps up to 100 individuals and 25 families.

“We are still meeting with neighborhood groups and various stakeholders on the best scenario for bed capacity at Gibson Gateway Center. The scenario that seems to be getting the most traction is a phased approach which would accommodate about 25 families and 100 individuals when fully phased in. The phased approach will allow us to evaluate effectiveness and efficiency so we can adjust as needed,” Family and Community Services Department planning manager Bobby Sisneros said in a written statement.

Rachel Conger Baca, president of the nearby Siesta Hills Neighborhood Association, said “family” is not clear-cut, as it could mean anything from a single mother with one child to extended family units that would push the shelter’s total capacity to 200-plus.

“That still doesn’t sound too far off from a 300-bed facility,” said Baca, adding that she wants the city to set a specific capacity limit on the shelter prior to the Sept. 21 hearing.

She said the scale does not seem to jibe with the city’s goal of having a “trauma-informed” facility.

“We are convinced that the City keeps taking steps that will ensure trauma will be inflicted on the people using the shelter and those who live, work and go to school near it,” she said.

APPENDIX P

U.S. Department of Health and Human Services
Office of Inspector General

Provider Shortages and Limited Availability of Behavioral Health Services in New Mexico's Medicaid Managed Care

OEI-02-17-00490

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Joanne M. Chiedi
Acting Inspector General





Provider Shortages and Limited Availability of Behavioral Health Services in New Mexico's Medicaid Managed Care

What OIG Found

Despite the need for behavioral health services—which includes treatments and services for mental health and substance use disorders—many counties in New Mexico have few licensed behavioral health providers serving Medicaid managed care enrollees. These behavioral health providers are unevenly distributed across the State, with rural and frontier counties having fewer providers and prescribers per 1,000 Medicaid managed care enrollees. Further, a significant number of New Mexico's licensed behavioral health providers do not provide services to Medicaid managed care enrollees.

In addition, most of the State's licensed behavioral health providers serving Medicaid managed care enrollees work in behavioral health organizations (BHOs), which include federally qualified health centers and community mental health centers; however, BHOs report challenges with finding and retaining staff, as well as ensuring transportation for enrollees. As a result, these organizations cannot always ensure timely access for enrollees seeking behavioral health services. These organizations also report difficulty arranging or making referrals for services that they do not provide largely because of the lack of providers. In addition, they report challenges with continuity of care for enrollees, citing limited care coordination and lack of integration of primary and behavioral healthcare, provider shortages, and barriers to sharing health information, such as a lack of access to broadband. Nonetheless, BHOs highlight promising initiatives to increase the availability of behavioral health services, including open-access scheduling, treatment first, care integration, and telehealth.

What OIG Recommends

Although this report focuses on New Mexico, it provides insights into challenges that are likely shared by other States providing behavioral health services to Medicaid enrollees, especially in rural and frontier counties. In addition, because of the breadth and depth of these issues, additional support at the national level is needed. Therefore, we recommend that the Centers for Medicare & Medicaid Services (CMS) identify States that have limited availability of behavioral health services and develop strategies and share information with them to ensure that Medicaid managed care enrollees have timely access to these services. We also recommend that the New Mexico Human Services Department expand New Mexico's behavioral health workforce that serves Medicaid managed care enrollees. It should also improve access to services by reviewing its access to care standards and by increasing access to transportation, access to broadband, and the use of telehealth. Lastly, it should improve the effectiveness of services by increasing adoption of electronic health records, identifying and sharing information about strategies to improve care coordination, expanding initiatives to integrate behavioral and primary healthcare, and sharing information about open-access scheduling and the Treat First Clinical Model. Both CMS and the New Mexico Human Services Department concurred with our recommendations.

Key Takeaway

The challenges faced by New Mexico—including provider shortages and limited availability of behavioral health services—are likely shared by other States and will require both State and national attention.

Why OIG Did This Review

The need for behavioral health services is particularly pronounced in New Mexico—a State that has among the highest rates for suicide and deaths from overdose in the Nation. The Office of Inspector General (OIG) received a congressional request to look into concerns about behavioral health provider shortages and the availability of care for Medicaid managed care enrollees; these enrollees account for most of New Mexico's Medicaid population.

How OIG Did This Review

We analyzed State Medicaid managed care data on the number of behavioral health providers and the number of managed care enrollees by county. We also conducted a survey of selected BHOs that play a critical role in providing services to the State's Medicaid enrollees as well as to uninsured residents. In addition, we interviewed selected providers, State Medicaid agency officials, and key stakeholders.

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Improve access to transportation for Medicaid managed care enrollees needing behavioral health services	25
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BACKGROUND

Objectives

1. To determine the number of behavioral health providers that serve New Mexico's Medicaid managed care enrollees in each county.
2. To determine the extent to which behavioral health organizations are able to meet the needs of the State's Medicaid managed care enrollees.
3. To identify challenges and promising initiatives for improving the availability of behavioral health services for the State's Medicaid managed care enrollees.

Research has shown that Medicaid enrollees experience a higher rate of behavioral health disorders—which include both mental health disorders and substance use disorders—than the general population.¹ In spite of the importance of treating such disorders, many Medicaid enrollees encounter significant barriers when accessing behavioral health treatment. These barriers include an overall shortage of behavioral health providers in the United States, combined with a relatively small number of behavioral health providers who accept Medicaid.² Such barriers can impede access to necessary services, resulting in untreated addiction and mental health conditions, worsening health, and increased medical costs.³

¹ Government Accountability Office (GAO), *Medicaid Expansion: Behavioral Health Treatment Use in Selected States in 2014*, (GAO-17-529), June 2017. Accessed at <https://www.gao.gov/assets/690/685415.pdf> on April 4, 2019.

² Substance Abuse and Mental Health Services Administration (SAMHSA), *Report to Congress on the Nation's Substance Abuse and Mental Health Workforce Issues*, January 24, 2013. Accessed at https://www.cibhs.org/sites/main/files/file-attachments/samhsa_bhwork_0.pdf on April 5, 2019. See also Medicaid and CHIP Payment and Access Commission (MACPAC), *Physician Acceptance of New Medicaid Patients*, January 24, 2019. Accessed at <https://www.macpac.gov/wp-content/uploads/2019/01/Physician-Acceptance-of-New-Medicaid-Patients.pdf> on April 5, 2019.

³ GAO, *Medicaid Expansion: Behavioral Health Treatment Use in Selected States in 2014*, June 2017. Accessed at <https://www.gao.gov/assets/690/685415.pdf> on April 4, 2019.

Improving access to behavioral healthcare is essential in New Mexico, where 56 percent of adults with mental illness do not receive treatment.⁴ Further, the State has among the highest rates for suicide and deaths from overdose in the Nation.⁵ New Mexico also ranks as one of the poorest States in the Nation, with more than half of the population either covered by public health insurance or uninsured.⁶

Behavioral health includes:

- promotion of emotional health,
- prevention of mental illnesses and substance use disorders, and
- treatment and services for mental and substance use disorders.

In 2013, New Mexico experienced major disruptions in services, with the closure and replacement of many of its largest behavioral health organizations (see text box below). The Office of Inspector General (OIG) received a congressional request to look into concerns about behavioral health provider shortages in Medicaid managed care. In response, OIG agreed to conduct a review to determine the number of behavioral health providers that serve the State's Medicaid managed care enrollees and the availability of care to meet the needs of this population. OIG also agreed to look at the extent to which providers have waiting lists, the extent to which providers have difficulty making referrals, and any challenges with continuity of care.

Historical perspective of behavioral health in New Mexico

The behavioral health system in New Mexico experienced major disruptions in the provision of care that affected Medicaid managed care enrollees. In 2013, the New Mexico Human Services Department suspended Medicaid payments to 15 behavioral health organizations due to an accusation of fraud; these 15 organizations provided about 85 percent of all behavioral health services to enrollees. Although all of these organizations were eventually cleared of wrongdoing in subsequent years, 13 of them went out of business. These organizations were initially replaced by Arizona-based organizations; however, all but two of these replacement organizations are no longer practicing in the State.

⁴ SAMHSA, *Behavioral Health Barometer: New Mexico, Volume 4: Indicators as Measure Through the 2015 National Survey on Drug Use and Health, the National Survey of Substance Abuse Treatment Services, and the Uniform Reporting System*, 2017. Accessed at https://www.samhsa.gov/data/sites/default/files/NewMexico_BHBarometer_Volume_4.pdf on June 10, 2019.

⁵ New Mexico Health Care Workforce Committee, *2017 Annual Report*, October 1, 2017. Accessed at http://www.hsd.state.nm.us/uploads/PressRelease/2f473c14ee654f868b5a25b3cfd15a6d/NMHCFW 2017Report_eDist_LoRes.pdf on April 3, 2019.

⁶ U.S. Census Bureau, *2013–2017 American Community Survey 5-Year Estimates, Selected Economic Characteristics*. Accessed at <https://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?src=bkmk> on June 10, 2019.

Medicaid managed care in New Mexico

Medicaid plays a critical role in providing behavioral healthcare. Nationally, Medicaid is the single largest payor for behavioral healthcare, accounting for approximately 11 percent of all Medicaid spending.⁷

Most States, including New Mexico, provide a portion—if not all—of their behavioral health services through Medicaid managed care plans. These plans typically provide behavioral health services through a network of participating providers in exchange for a fixed monthly fee per enrollee (often referred to as capitation).

New Mexico's Medicaid managed care program, Centennial Care, was implemented in 2014 and requires managed care plans to cover services for physical health, behavioral health, and long-term care.⁸ Most (80 percent) of New Mexico's Medicaid population is enrolled in one of New Mexico's three managed care plans.⁹ These plans provide services to enrollees throughout the State, and most of the behavioral health providers that participate in Medicaid managed care participate in all of the State's managed care plans.

Federal regulations require States to develop standards for access to care that all managed care plans must meet.¹⁰ These standards are intended to ensure that each plan maintains an adequate network to provide access to covered Medicaid services.¹¹ New Mexico's standards for behavioral health require that appointments for non-urgent behavioral healthcare be

⁷ This analysis is based on 2009 Medicaid data. Mark et al., *Insurance Financing Increased for Mental Health Conditions But Not for Substance Use Disorders 1986-2014*, June 2016. Accessed at <https://www.healthaffairs.org/doi/pdf/10.1377/hlthaff.2016.0002> on June 10, 2019.

⁸ The New Mexico Human Services Department oversees the Medical Assistance Division and the Behavioral Health Services Division. The Medical Assistance Division is responsible for contracting with Medicaid managed care organizations and the Behavioral Health Services Division oversees SAMHSA-funded behavioral health block grants.

⁹ These data were provided by the New Mexico Human Services Department. Note that the Native American population is typically exempt from the requirement to enroll in a managed care plan. See New Mexico Administrative Code (NMAC) 8.308.7.9(A). Also note that for most of the study period, there were four Medicaid managed care plans in the State.

¹⁰ 42 CFR § 438.206(a).

¹¹ 42 CFR § 438.206(b)(1).

available within 14 days and behavioral health outpatient appointments for urgent conditions be available within 24 hours.¹²

Licensed behavioral health providers

Licensed behavioral health providers have a range of education and training in specialties that address substance use and mental health needs. These behavioral health providers are able to engage in a broad range of interventions, including assessment, psychotherapy, and crisis intervention services.

Independently licensed providers may be directly reimbursed by Medicaid for their services. Such providers include psychiatrists, psychologists, and licensed clinical social workers.¹³ Certain independently licensed behavioral health professionals are also authorized to diagnose mental illness and substance use disorders, and in some cases, can prescribe medication as part of an enrollee's treatment plan.¹⁴

The next level of licensure consists of non-independently licensed providers. These providers typically work under the supervision of an independently licensed provider and generally cannot be directly reimbursed for their services. These providers include licensed master's level social workers, licensed mental health counselors, and licensed associate marriage and family therapists.¹⁵

Behavioral health organizations

Although outpatient behavioral health services can be provided by individuals (and by individuals who form group practices), behavioral health organizations (BHOs) are core providers that play a critical role in providing

¹² NMAC 8.308.2.12 (E), (F). The standard governing request-to-appointment time, for non-urgent behavioral healthcare, can be waived if the enrollee requests a later time. New Mexico also requires that appointments for behavioral health crisis services be available within two hours. See NMAC 8.308.2.12 (R). In addition, New Mexico requires its managed care organizations to comply with standards that address distance and travel time between enrollees and contracted providers. See NMAC 8.308.2.9 (A)(11)(c).

¹³ NMAC, 8.321.2.9 (H).

¹⁴ New Mexico Health Care Workforce Committee, *2017 Annual Report*, October 1, 2017. Accessed at http://www.hsd.state.nm.us/uploads/PressRelease/2f473c14ee654f868b5a25b3cfd15a6d/NMHCWF_2017Report_eDist_LoRes.pdf on April 25, 2019.

¹⁵ NMAC 8.321.2.9 (J). Some behavioral health services may be provided by non-licensed providers who are not able to prescribe medication and are not able to practice without supervision. These include master's level behavioral health interns, certified peer support workers, and pre-licensure psychology post-doctorate students. New Mexico Network of Care, *Behavioral Health in New Mexico: Challenges, Medicaid Contributions, New Opportunities*. Accessed at <http://newmexico.networkofcare.org/content/client/1446/3Centennial%20Care%20Update-Final.pdf> on June 10, 2019.

services to the State’s Medicaid enrollees as well as to uninsured residents. BHOs include federally qualified health centers, community mental health centers, behavioral health agencies, rural health clinics, and core service agencies.¹⁶

In addition to outpatient services, a number of behavioral health services are delivered in inpatient or residential settings. These include psychiatric hospitals, residential treatment centers, as well as facilities that provide inpatient treatment for substance use disorders.

Methodology

We used several data sources to address the study’s objectives. We first analyzed State Medicaid managed care data to determine the number of behavioral health providers serving New Mexico’s managed care enrollees by county. We focused this part of the study on licensed behavioral health providers who render outpatient services to Medicaid managed care enrollees. Licensed behavioral health providers have the specific education and training needed to address a broad range of mental health and substance use disorders. We did not include non-licensed behavioral health workers and other physical health workers who may provide only limited behavioral health services such as diagnostic screening.¹⁷

Next, we conducted a survey of 53 selected BHOs to determine the extent to which these organizations are able to meet the needs of the State’s Medicaid managed care enrollees. In addition, we interviewed selected behavioral health providers, State Medicaid agency officials, and key stakeholders. We analyzed these data to identify challenges and promising initiatives for improving the availability of behavioral health services for Medicaid managed care enrollees.

See Appendix A for the detailed methodology.

Standards

We conducted this study in accordance with the *Quality Standards for Inspection and Evaluation* issued by the Council of the Inspectors General on Integrity and Efficiency.

¹⁶ New Mexico may designate a BHO as a core service agency if it provides and coordinates certain core services, such as psychiatric services, medication management, crisis services, and treatments that support an enrollee’s recovery goals.

¹⁷ This study also does not include out-of-State behavioral health providers licensed by New Mexico who provide services remotely.

FINDINGS

Many counties have few behavioral health providers serving Medicaid managed care enrollees

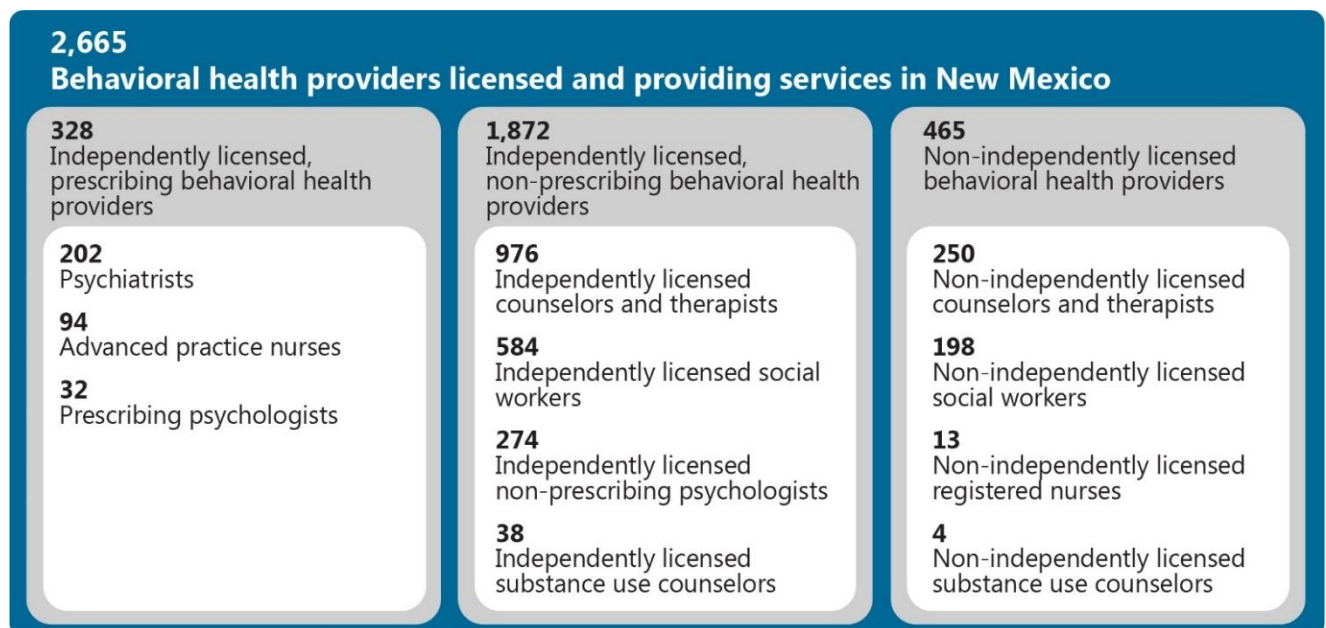
New Mexico has about 2,700 licensed behavioral health providers that serve its Medicaid managed care enrollees. These behavioral health providers are distributed unevenly across the State. As a result, many counties have few providers that serve Medicaid managed care enrollees.

New Mexico has 2,665 licensed behavioral health providers that serve nearly 670,000 Medicaid managed care enrollees

Licensed providers are essential to meeting the behavioral health needs of enrollees. Enrollees with serious mental illnesses or substance use disorders often require a team of providers that consist of several different types of licensed providers. These providers include prescribing providers such as psychiatrists and advance practice nurses. They also include other independently licensed providers, such as professional clinical counselors, clinical social workers, and marriage and family therapists. Additionally, there are non-independently licensed providers that include social workers, registered nurses, and substance use counselors. These providers generally cannot be directly reimbursed for their services and typically work under the supervision of an independently licensed provider.

In total, New Mexico has 2,665 licensed behavioral health providers that serve its Medicaid managed care enrollees in 2017. See Exhibit 1 for more detailed information about the number of licensed providers in New Mexico.

Exhibit 1: Licensed behavioral health providers in New Mexico.



Source: OIG analysis of State Medicaid data, 2019.

Many of the State's licensed behavioral health providers do not serve Medicaid managed care enrollees

Shortages of behavioral health providers are a problem that affects behavioral healthcare for all populations, not just for its managed care enrollees.¹⁸ A study of the New Mexico healthcare workforce found that 9,528 behavioral health providers had active licenses in the State in 2016.¹⁹ The smaller number of providers that we identified—just 2,665 providers or 30 percent—indicates that many behavioral health providers in New Mexico do not provide services to Medicaid managed care enrollees. If only a small proportion of that workforce serves Medicaid enrollees, enrollees' access to critical services can be impeded.

More than half of New Mexico's counties have fewer than 2 licensed providers per 1,000 enrollees; all of these counties are rural or frontier

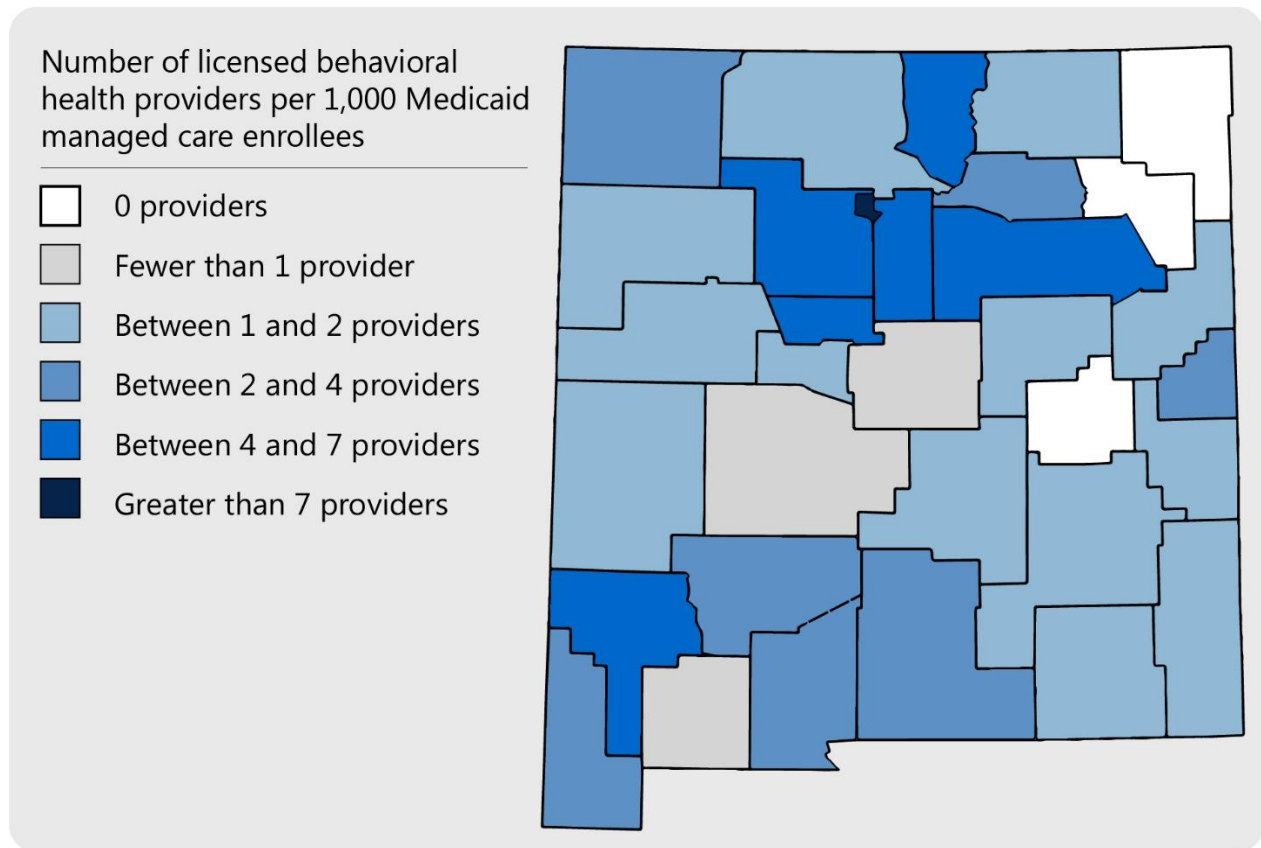
The 2,665 licensed behavioral health providers are distributed unevenly across the State. Notably, 19 of the State's 33 counties have fewer than 2 licensed behavioral health providers for every 1,000 Medicaid managed care enrollees. All 19 of these counties are rural or frontier.²⁰ This includes 13 counties that have between 1 and 2 providers per 1,000 enrollees; 3 counties that have fewer than 1 provider per 1,000 enrollees; and 3 counties that have no providers at all. In contrast, four counties—most of them urban—have much larger numbers of licensed providers per 1,000 enrollees. These 4 counties ranged from 6 to 19 providers per 1,000 enrollees. See Exhibit 2 and Appendix B for the number of licensed behavioral health providers by county.

¹⁸ Almost all of New Mexico's counties have a "health professional shortage area" for mental health. For more information see Health Resources and Services Administration, *Health Professional Shortage Areas Find*. Accessed at <https://data.hrsa.gov/tools/shortage-area/hpsa-find> on May 24, 2019.

¹⁹ Note that this analysis was mandated by the State of New Mexico's Legislature. The 9,528 providers identified in the study are the same types of providers that are included in our report. See New Mexico Health Care Workforce Committee, *2017 Annual Report*, October 1, 2017. Accessed at http://www.hsd.state.nm.us/uploads/PressRelease/2f473c14ee654f868b5a25b3cfd15a6d/NMHCWF_2017Report_eDist_LoRes.pdf on April 25, 2019.

²⁰ New Mexico designates counties as urban, rural, or frontier. Note that frontier counties have an average of 2.8 people per square mile, and rural counties have an average of 13.7 people per square mile.

Exhibit 2: Distribution of licensed behavioral health providers in New Mexico.



Source: OIG analysis of State Medicaid data, 2019.

Rural and frontier counties have disproportionately fewer licensed providers than urban counties. Only 29 percent of licensed providers are located in rural and frontier counties, even though nearly half of the State's Medicaid managed care enrollees reside in these counties. Further, rural and frontier counties have a median of 1.8 providers and 1.5 providers per 1,000 Medicaid managed care enrollees, respectively. In contrast, urban counties have a median of 6.4 providers. See Exhibit 3.

Similarly, rural and frontier counties have disproportionately fewer behavioral health prescribers. Ten frontier counties—with a total of 27,000 Medicaid managed care enrollees—have no prescribers. Further, rural and frontier counties have a median of 0.2 prescribers and 0.0 prescribers per 1,000 Medicaid managed care enrollees, while urban counties have a median of 0.7 prescribers.

Exhibit 3: Rural and frontier counties have a lower median number of providers and prescribers.

County Type	Median Number of Behavioral Health Providers per 1,000 Enrollees	Median Number of Prescribing Behavioral Health Providers per 1,000 Enrollees
Urban	6.4	0.7
Rural	1.8	0.2
Frontier	1.5	0.0

Source: OIG analysis of State Medicaid data, 2019.

Most behavioral health providers work in behavioral health organizations; however, these organizations report challenges with finding and retaining staff

Sixty-two percent of the State’s licensed behavioral health providers serving Medicaid enrollees work in BHOs.²¹ These organizations play a unique role in the State’s behavioral health system because they are responsible for coordinating care and providing essential services to managed care enrollees who have serious mental illnesses, severe emotional disturbances, or dependence on alcohol or drugs. BHOs are core providers typically offering behavioral health services to the State’s Medicaid enrollees as well as uninsured residents.²²

62% of licensed behavioral health providers work in BHOs.

Notably, 38 of the 53 selected BHOs report that they need additional staff to meet the needs of Medicaid managed care enrollees in their area. They report particularly needing prescribing providers and providers that specialize in treating substance use disorders. Of these BHOs, one in three did not have a prescriber on staff. Additionally, two in three BHOs did not have a provider specializing in substance use disorders on staff. Most of the BHOs in need of additional staff are located in rural and frontier areas. BHOs further note that staffing challenges affect enrollees with all types of diagnoses. As one BHO states, “there are far more requests for services beyond staff capacity.”

BHOs also highlight challenges with finding and retaining qualified staff to meet the needs of enrollees. Several cite an overall lack of licensed providers in the State or their area to meet the demands of the population,

²¹ The remaining providers work in group or independent practices, other outpatient settings, or inpatient facilities.

²² As noted earlier, BHOs include federally qualified health centers, core service agencies, community mental health centers, behavioral health agencies, and rural health clinics.

as well as challenges maintaining a highly trained workforce. According to several BHOs, there is an extremely limited pool of qualified candidates, and when they do find qualified candidates, it can be difficult to retain them. This challenge particularly affects rural and frontier BHOs. As one BHO explains, “It is difficult to find and hire therapists in [rural] New Mexico...it is really difficult work with a high burnout rate. Therapists from other areas, [who are not familiar with the specific needs of the community], do not last.”

Behavioral health organizations cannot always ensure timely access for enrollees seeking behavioral health services

BHOs provide essential behavioral health services to Medicaid managed care enrollees. Yet, many BHOs report that Medicaid managed care enrollees have difficulty accessing the full range of behavioral health services at the frequency they need. BHOs further report difficulty providing

timely appointments for enrollees, and some BHOs maintain wait lists for certain services. Providing timely access to behavioral health services is important to ensuring positive health outcomes and to ensuring that patients’ behavioral health conditions do not go untreated.

43% of BHOs report that **enrollees have difficulty accessing the full range of behavioral health services at the frequency they need.**

More than half of BHOs are not able to offer timely appointments for enrollees

Most BHOs (29 of 53) report that they do not have urgent appointments available within 24 hours or routine appointments available within 14 days with providers in their BHO for Medicaid managed care enrollees. According to New Mexico’s standards, appointments for urgent conditions must be available within 24 hours and appointments for routine behavioral healthcare must be available within 14 days.²³ See Appendix C for more detailed information about the number of BHOs that are not able to offer timely urgent or timely routine appointments.

²³ NMAC 8.308.2.12 (E), (F).

More than 40% of BHOs are **unable** to provide:



urgent appointments with prescribers in their BHOs **within 24 hours.**



routine appointments with prescribers in their BHOs **within 14 days.**

Notably, 23 of 53 BHOs are unable to provide urgent appointments with prescribers in their BHOs within 24 hours. Twenty of these BHOs do not have prescribers on staff.²⁴ The other three have wait times for urgent appointments with prescribers that range from 2 days to 21 days. At the same time, four BHOs are unable to provide urgent appointments with non-prescribers in their BHO within 24 hours. For these BHOs, wait times with non-prescribers range from 2 days to 7 days.

In addition, 25 of 53 BHOs are unable to provide routine appointments with prescribers in their BHOs within the 14 days as established by New Mexico's standards. For the BHOs with prescribers on staff, wait times for routine appointments range from 20 days to 90 days. Four BHOs are unable to provide routine appointments with non-prescribers in their BHO within 14 days. For these BHOs, wait times for non-prescribers range from 30 days to 75 days.

Some BHOs maintain wait lists for certain behavioral health services

If the BHO is at capacity, it may have to maintain a wait list until services become available. Fourteen BHOs report having maintained a wait list in the past year for at least one of

the services they provide. Most commonly, they had wait lists for certain outpatient services such as substance abuse treatment or counseling and therapy. Four BHOs had a wait list for up to one month; an additional six BHOs had a wait list for longer. BHOs report that wait lists particularly affect services for beneficiaries with autism spectrum disorder, depression, and substance use disorder.

“**We are not supposed to have a wait list, but the reality is that at different times providers have had to use a wait list because of workforce issues.**”

-BHO Administrator

²⁴ BHOs may provide appointments by arranging services with other providers who are not on their staff.

BHOs report that transportation is a challenge to ensuring access to timely services

A number of BHOs (9 of 53) highlight challenges with accessing nonemergency medical transportation, despite New Mexico's requirement that its Medicaid managed care organizations provide such transportation to enrollees who need it.²⁵ For example, one stakeholder notes that there are no nonemergency medical transportation providers in the area that offer service in the evening, making it particularly difficult for enrollees to access intensive outpatient substance abuse counseling services, which are often held in the evening. A few BHOs also note that difficulty accessing nonemergency medical transportation causes delays in care. For example, one BHOs notes, "[non-emergency medical transportation] has to be scheduled, and sometimes that takes a few days for approval. The patient is then seen a week after their initial scheduled appointment."

Behavioral health organizations report difficulty arranging or making referrals for services that they do not provide

BHOs arrange services or make referrals for services that enrollees need but that BHOs do not—or currently cannot—provide. Enrollees with mental health and substance use issues need a range of services that include: recovery and support services; non-intensive outpatient services; intensive outpatient services; and inpatient and residential services. BHOs report difficulty arranging behavioral health services in each category to meet the needs of Medicaid managed care enrollees. See Exhibit 4 for a description of the different service categories and Appendix D for the number of BHOs that report having difficulty arranging each service.

²⁵ New Mexico requires that Medicaid managed care organizations provide nonemergency medical transportation for enrollees who have no other means of transportation and need to get to and from medical services, including behavioral health services. NMAC 8.308.2.12 (P). New Mexico's managed care organizations contract with providers to offer nonemergency medical transportation services to enrollees. New Mexico Human Services Department, *Centennial Care Waiver Demonstration: Section 1115 Quarterly Report*, March 2, 2018. Accessed at [http://www.hsd.state.nm.us/uploads/files/Public%20Information/Centennial%20Care/Quarterly%20Reports/2017%20Quarterly%20Progress%20Reports/Final%20Report\(2\).pdf](http://www.hsd.state.nm.us/uploads/files/Public%20Information/Centennial%20Care/Quarterly%20Reports/2017%20Quarterly%20Progress%20Reports/Final%20Report(2).pdf) on February 15, 2019.

Exhibit 4: Behavioral health services includes a variety of services that are generally organized into four categories.

Recovery and support services

include a range of educational, psychosocial rehabilitation, and supported employment services.

Non-intensive outpatient services

is the broadest category and includes assessments and therapy for behavioral health conditions and medication assisted treatment for opioid use disorder.

Intensive outpatient services

are sometimes used as an alternative to inpatient psychiatric care, such as applied behavior analysis and intensive outpatient programs for substance use disorder.

Inpatient and residential services

are the most intensive level of treatment, often requiring 24-hour care in a hospital or group living environment.

Source: OIG analysis of State documentation on behavioral health services, 2019.

BHOs most commonly (43 of 53) report having difficulty arranging recovery and support services for Medicaid managed care enrollees. BHOs explain that provider shortages make it difficult to make referrals and can result in enrollees not receiving the support and services that they need. Notably, BHOs report difficulty arranging psychosocial rehabilitation services that help enrollees develop coping strategies, as well as respite care that provides short-term relief for primary caregivers. As one BHO notes, these services are “already provided by an extremely limited number of providers, which is continually shrinking.”

Most BHOs (42 of 53) also report having difficulty arranging intensive outpatient services. This includes arranging applied behavior analysis—a type of therapy that focuses on improving social skills and adaptive learning skills for enrollees with autism spectrum disorder. As one rural BHO explains, there are no providers that offer this type of therapy in the five neighboring counties, making it extremely difficult to arrange these services for enrollees. As a result, enrollees may need to travel long distances to the nearest provider. Another rural BHO adds that its nearest autism care provider is 4 hours away.

Similarly, most BHOs (39 of 53) report difficulty arranging inpatient and residential services. In particular, some BHOs note that there are a lack of inpatient psychiatric facilities and detox facilities. One stakeholder notes that, as a result, “it is a long, long wait to get enrollees into inpatient

psychiatric treatment, and it is even more difficult to secure inpatient psychiatric treatment for a child.” Further, these facilities may be far away. According to this stakeholder, the nearest child inpatient psychiatric treatment facility is 200 miles away. Another stakeholder notes that many of the inpatient facilities for substance use disorders “will not accept enrollees on any medication, often only accept men, and [will] not accept anyone with mental health diagnoses. This clearly leaves many enrollees without care.”

Further, many BHOs (33 of 53) report having difficulty arranging non-intensive outpatient services. Nearly half have difficulty arranging medication assisted treatment to treat opioid addiction, such as buprenorphine. BHOs also attribute this difficulty to the lack of providers. As one provider notes, the number of medication assisted treatment providers in one of the larger urban areas needs to double in size in order to meet current enrollee needs. BHOs also highlight difficulty arranging day treatment—services that focus on improving functional and behavioral deficits—and note a lack of providers offering these services.

Behavioral health organizations report challenges with continuity of care, citing limited care coordination, provider shortages, and barriers to sharing health information

Continuity of care is particularly important for patients with behavioral health diagnoses because they may require treatment from a number of providers for extended periods of time.²⁶ Continuity of care includes maintaining care when transferring from one setting to another, seeing the same provider each visit at the BHO, and exchanging health information throughout the continuum of care. BHOs report a number of concerns about continuity of care for Medicaid managed care enrollees.

Enrollees' care is not always maintained during transitions, due in part to limited coordination among providers

More than half of BHOs (29 of 53) report that enrollees' care is not always maintained when they are transferred from one level of care to another. Breakdowns during transitions of care can cause confusion regarding treatment plans, duplicative testing, discrepancies in medications, and missed appointments.²⁷

A number of BHOs report difficulties with coordinating enrollees' care during transitions. One BHO notes that constant provider turnover results in enrollees not effectively transitioning to other care providers, causing a significant proportion of these enrollees to leave care altogether. Another stakeholder notes that there is a lack of coordinated care for enrollees who need both mental health services and services for substance use disorders. Many of these enrollees must see multiple behavioral health providers to meet their needs, and those providers do not always coordinate patients' care.

A few BHOs use warm handoffs to promote continuity of care

Warm handoffs occur between two healthcare providers when a patient is being transferred from one setting to another. In addition to in-person communication between providers, the patient is also included in the discussion about his or her plan of care. This helps to build relationships between care coordinators, providers, patients, and their families and provide opportunities to clarify or correct information.

²⁶ Institute of Medicine Committee on Crossing the Quality Chasm, *Coordinating Care for Better Mental, Substance-Use, and General Health*, 2006. Accessed at <https://www.ncbi.nlm.nih.gov/books/NBK19833/> on March 27, 2019. See also Biringer et al., *Continuity of Care as Experienced by Mental Health Service Users: A Qualitative Study*, November 21, 2017. Accessed at <https://bmchealthservres.biomedcentral.com/articles/10.1186/s12913-017-2719-9> on March 27, 2019.

²⁷ Although BHOs strive to provide coordinated care, some types of BHOs are required to do so. See CareLink NM, *CareLink NM Health Homes: Provider Policy Manual*, 2018. Accessed at https://www.hsd.state.nm.us/uploads/files/Providers/Manuals%20and%20Guides/Managed%20Care%20Policy%20Manual/CLNM%20Pol%20Manual%2012_28_18.pdf on June 11, 2019.

A few BHOs also note that the lack of integration between primary and behavioral healthcare acts as a barrier to coordination efforts. Integrating primary and behavioral healthcare—which typically involves close collaboration of both physical and behavioral health providers in the same location—can be critical, since certain behavioral health disorders carry higher incidences of physical issues, including obesity, diabetes, asthma, migraines, heart disease and cancers.²⁸

Enrollees are not always able to see the same providers, often because of a lack of providers or high turnover

One-third of BHOs (17 of 53) report that enrollees cannot always see the same provider as the previous visit for the same service. Ongoing relationships with the same provider create stable conditions for enrollees; changes in providers can often create setbacks in treatment, and can sometimes give rise to anxiety, frustration, and a sense of being rejected.²⁹

A few BHOs highlight the importance of engaging in and maintaining such relationships to improve health outcomes. As one provider notes, “enrollees are scheduled with the same provider...which ensures sustained recovery.”

“Part of [ensuring continuity of care] is you have to keep people in the workforce. You can see a provider more than once—that is really critical—it can be done.”

- Key Stakeholder

BHOs find that a lack of providers limits their ability to keep

enrollees with the same provider. For example, according to one BHO, “more patients are being seen in psychiatric emergency services because of the lack of community providers, resulting in continuity of care issues.” Some BHOs also state that staff turnover results in some enrollees being unable to continue with the same provider, which affects enrollees’ health outcomes. For example, a rural provider, who focuses on treatment for autism spectrum disorder, notes that turnover impacts a child’s long-term outcomes since each new provider has to build a rapport with the child and learn the child’s complex treatment plan.

Enrollee health information is not always communicated because of barriers to sharing enrollee health information across providers

Half of BHOs (26 of 53) report that enrollees’ health information is not always communicated in an effective and timely manner throughout their

²⁸ The Colorado Health Foundation, *The Colorado Blueprint for Promoting Integrated Care Sustainability*, March 2012. Accessed at https://www.integration.samhsa.gov/TCHF_IntegratedCareReport.pdf on January 8, 2019.

²⁹ Biringer et al., *Continuity of Care as Experienced by Mental Health Service Users: A Qualitative Study*, November 21, 2017. Accessed at <https://bmchealthservres.biomedcentral.com/articles/10.1186/s12913-017-2719-9> on March 27, 2019.

continuum of care. Sharing health information helps coordinate care among different providers and across different settings. It also helps providers reduce unnecessary testing, avoid medication errors, and decrease administrative costs.³⁰ Electronic health record (EHR) systems can be a critical tool for supporting seamless and instantaneous health information exchanges across providers when those providers' EHR systems are interoperable (able to exchange information).

Many BHOs (26 of 53) use EHRs, and find that using EHRs helps them to improve services for enrollees. According to one BHO, its EHRs provide quicker access to health information and improves its ability to share records with providers and ensure continuity of care. Some BHOs further note that their EHRs enable providers to collaborate across behavioral health disciplines and with primary healthcare providers.

“ [EHRs] improve continuity of care for patients with multiple providers, maintain updated information, document patients' past records, and track patients' recovery goals and interventions. ”

- BHO Administrator

Despite the advantages of EHRs, some BHOs (13 of 52) have not adopted EHRs.³¹ Nearly all of these BHOs are rural. Rural providers face a unique set of barriers to implementing EHRs, such as difficulty connecting to broadband service. Broadband is high-speed internet access, and is needed to support EHRs and other health information technology services such as telehealth.³² In New Mexico, only 47 percent of people in rural areas have access to advanced broadband, compared to 95 percent of people in urban areas.³³ Other barriers to implementing EHRs include a lack of expertise on how to use such technology and what some BHOs perceive to be prohibitive startup costs. One stakeholder further explains, “it is difficult for provider organizations, unless they are very large and have sufficient scale, to afford the cost of an EHR.”

³⁰ Office of National Coordinator for Health Information Technology (ONC), *Why is health information exchange important?*, March 21, 2018. Accessed at <https://www.healthit.gov/fag/why-health-information-exchange-important> on March 18, 2019.

³¹ For information on nationwide BHO adoption of health information technology, see National Council for Community Behavioral Healthcare, *HIT Adoption and Readiness for Meaningful Use in Community Behavioral Health*, June 2012. Accessed at <https://www.thenationalcouncil.org/wp-content/uploads/2012/10/HIT-Survey-Full-Report.pdf> on May 3, 2019.

³² ONC, *Federal Health IT Strategic Plan: 2015-2020*. Accessed at https://www.healthit.gov/sites/default/files/9-5-federalhealthitstratplanfinal_0.pdf on May 3, 2019.

³³ Federal Communications Commission, *2018 Communications Marketplace Report: Broadband Deployment Appendices*, December 31, 2017. Accessed at <https://docs.fcc.gov/public/attachments/FCC-18-181A9.pdf> on March 21, 2019.

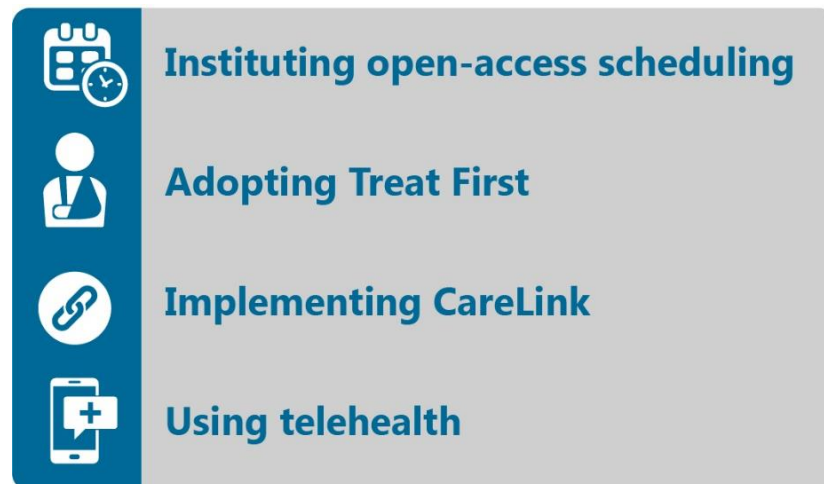
Other BHOs note that the lack of interoperability between their EHR systems and other providers' systems presents problems. Interoperability allows unrelated records systems to exchange electronic health information. As one BHO explains, not enough providers in the area can accept and share information with other providers' EHR systems. Such barriers to interoperability can constrain BHOs' ability to share health information and coordinate care among different providers and across different settings.

Several BHOs also note difficulty with getting enrollee health information from certain types of providers. New Mexico operates a health information exchange (HIE)—a platform through which participating providers can share health information. The HIE has the potential to enable providers to share information about enrollees' demographics, diagnoses, medications, encounter history, procedures, and even clinical notes. However, there are only a small number of behavioral health providers that participate in the State's HIE. While the HIE is available to all providers, as one stakeholder notes, providers without EHRs are unable to participate in the HIE.

Behavioral health organizations highlight promising initiatives to increase the availability of services, including open-access scheduling, treatment first, care integration, and telehealth

Although BHOs report a number of challenges with the availability of behavioral health services, they also cite a number of promising initiatives. BHOs have adopted these initiatives to varying degrees. These initiatives increase the availability of services by improving access to providers, better coordinating enrollee care, and expanding the use of technology to deliver services.

Exhibit 5: Initiatives to increase the availability of behavioral health services.



Many BHOs find that open-access scheduling improves the availability of services

Many BHOs (34 of 53) have implemented open-access scheduling or walk-in availability. Open-access—also known as advanced access and same-day scheduling—is a method of scheduling in which patients can receive an appointment on the day they call. Rather than booking each provider’s full

“We can see 90 percent of our clients within 24 hours of placing a call.”

block of time weeks or even months in advance, this model leaves part of the day open for unscheduled visits. Another part of the schedule is booked only with clinically necessary follow-up visits and appointments for patients who chose not to come on the day they called. BHOs implement open-access scheduling in a variety of ways. For example, one BHO

reserves a few same-day appointments throughout the week, whereas another reserves one day per week for same-day appointments.

All 34 BHOs that have implemented this type of scheduling report that it has improved the availability of services for managed care enrollees. These BHOs commonly note that such initiatives immediately address crisis situations, with one BHO noting that “anything urgent or emergency can be seen immediately, or on the same day.” Several BHOs further note that these initiatives can potentially decrease the need for higher levels of care or hospitalization, as well as improve enrollee health outcomes. Another BHO notes that open-access not only increases access to services, it also decreases the number of no-show appointments.

The Treat First Clinical Model allows faster access to services

About half of the BHOs (25 of 53) have adopted the clinical model referred to as Treat First. Developed for New Mexico in March 2016, Treat First is designed to improve access to care by prioritizing treatment and reducing State assessment requirements.³⁴ Previously, the State required that the results of a comprehensive assessment and treatment plan for each new patient be submitted within 30 days of the first visit, emphasizing the assessment over treatment. Treat First allows for up to four encounters with a provisional diagnosis without a comprehensive assessment and treatment plan.

Almost all BHOs that have adopted this model of care (21 of 25 BHOs) report that it has improved the availability of services for managed care enrollees. According to one BHO, Treat First enrollees have easier and more immediate access to services, leading to increased patient satisfaction and

³⁴ Medical Assistance Division, *Letter of Direction #57: “Treat First” Model Extension*, August 25, 2016. Accessed at https://www.hsd.state.nm.us/uploads/FileLinks/c06b4701fbc84ea3938e646301d8c950/LOD_%2357_Treat_First_Model_Extension_08.25.2016.pdf on June 10, 2019.

better rapport with the clinicians as well as reduced paperwork and less staff burnout among providers. In addition, stakeholders report that Treat First has resulted in a decrease in the number of enrollees that are no-shows for the next scheduled appointment, which they attribute to being able to begin treatment during the enrollee's first visit.

CareLink Health Homes Program helps to integrate physical and behavioral healthcare

In total, eight BHOs participate in New Mexico's CareLink Health Homes Program, which is an integrated healthcare service program.³⁵ The program provides a monthly capitated payment per eligible enrollee to each participating BHO. Each BHO agrees to serve as a health home and is responsible for providing and coordinating the physical and behavioral healthcare for the enrollee. The health home is also required to provide additional services, including comprehensive care management and referrals to community and social support services. Each health home must also measure and report on specific quality indicators.

According to one BHO that currently participates in CareLink, it is "better able to connect enrollees with services outside their agency and address conditions causing hospitalization." Other BHOs add that coordination of care between behavioral health and primary care is improved by more frequent contact between enrollees and providers. This coordination increases access to services and improves medication compliance, which can improve overall health outcomes.

Many BHOs find that telehealth improves availability of services

Telehealth uses internet and communications technologies such as videoconferencing, chat, and text messaging, to provide health information and treatments in real time.

Thirty BHOs report having implemented telehealth in some way. Several BHOs report using telehealth for assessments, and many BHOs report also providing medication management and

psychiatric services through telehealth. All 30 BHOs note that implementing telehealth has improved the availability of services for Medicaid managed care enrollees. According to one BHO that implemented telepsychiatry, this

“ We would not be able to serve 90% of the families we currently serve without telehealth. ”
- BHO Administrator

³⁵ Four additional BHOs that are not in our sample also participate in CareLink. CareLink is for Medicaid behavioral health beneficiaries with a *primary condition* of Serious Mental Illness and/or Severe Emotional Disturbance. See New Mexico Human Services Department, *CareLink NM Health Homes*. Accessed at <http://www.hsd.state.nm.us/health-homes.aspx> on April 5, 2019.

initiative increases its ability to offer more stable outpatient medication management because of an increased pool of qualified staff.³⁶ Another BHO highlights the value of using telehealth for assessments, noting that it “has opened up time for our therapists to provide more time for individual therapy and group therapy, reducing wait times and increasing access to services.”

Telehealth can offer particular benefits for enrollees located in remote locations. According to one BHO, its telehealth initiative has allowed it to spend less time and resources recruiting local providers in rural and frontier clinic sites, allowing for better continuity of care and increased access to psychiatric and counseling services. One provider adds that “telehealth has been critical in establishing care for families in rural and underserved areas.”

At the same time, several BHOs note the limitations of telehealth. First, enrollees sometimes have limited receptiveness to telehealth. As one stakeholder points out, some enrollees do not feel comfortable with sharing their problems openly through technology.

Second, many rural and frontier areas have limited broadband connectivity. As one BHO explains, the internet service for enrollees that live in remote areas is sometimes not capable of sustaining a good connection for telehealth. Another provider further comments: “Telehealth has improved access tremendously. However, many communities in need of services either do not have internet access in their rural area or cannot afford to pay for the service.” Research indicates that internet access remains a challenge to rural telehealth; as mentioned earlier, rural areas in New Mexico have less

Project ECHO: Extension for Community Healthcare Outcomes

In addition to providing services to enrollees, telehealth can also be used to train and supervise providers. New Mexico’s Project ECHO uses teleconferencing to increase the availability of specialty care in behavioral health. The model links specialist teams with behavioral health providers in the community. Behavioral health providers become part of a learning community, where they receive mentoring and feedback from specialists. This model is now used in both urban and rural areas, and includes training on how to treat both mental and substance use disorders.

³⁶ New Mexico is one of nine States as of 2017 where medical boards issue telehealth-specific licenses or certificates that allow out-of-State providers to furnish telehealth services in a State that they are not located. See University of Michigan: Behavioral Health Workforce Research Center, *The Use of Telehealth Within Behavioral Health Settings: Utilization, Opportunities, and Challenges*, March 2018. Accessed at http://www.behavioralhealthworkforce.org/wp-content/uploads/2018/05/Telehealth-Full-Paper_5.17.18-clean.pdf on April 3, 2018.

access to broadband—a factor that limits the types of telehealth services available to them via a home internet connection.

CONCLUSION AND RECOMMENDATIONS

Concerns exist about the availability of behavioral health services—which includes treatments and services for mental health and substance use disorders—for enrollees in Medicaid managed care. The need for such services is particularly pronounced in New Mexico—a State that has among the highest rates for suicide and deaths from overdose in the Nation.

Many counties in New Mexico have few licensed behavioral health providers serving Medicaid managed care enrollees. These behavioral health providers are unevenly distributed across the State, with rural and frontier counties having disproportionately fewer providers and prescribers. Notably, only 29 percent of the State’s licensed providers are in rural and frontier counties, despite nearly half of the State’s Medicaid managed care enrollees residing in these counties. Further, a significant number of New Mexico’s licensed behavioral health providers do not provide services to Medicaid managed care enrollees.

Additionally, most of the State’s licensed behavioral health providers work in BHOs—which include federally qualified health centers and community mental health centers; however, BHOs report challenges with finding and retaining staff, as well as ensuring transportation for enrollees. As a result, these organizations cannot always ensure timely access for enrollees seeking behavioral health services. These organizations also report difficulty arranging or making referrals for services that they do not—or currently cannot—provide. In addition, they report challenges with continuity of care for enrollees, citing limited care coordination, provider shortages, and barriers to sharing health information.

Nonetheless, BHOs highlight promising initiatives that increase the availability of behavioral health services for Medicaid managed care enrollees, including open-access scheduling, treatment first, care integration, and telehealth. These initiatives increase the availability of behavioral health services by improving access to providers, coordinating enrollee care, and expanding the use of technology. In addition, New Mexico recently announced its intention to raise certain provider payment rates.³⁷

Although this report focuses on New Mexico, it provides insights into challenges that are likely shared by other States providing behavioral health services to Medicaid enrollees, especially in rural and frontier counties. These challenges—including provider shortages and limited availability of behavioral health—require attention not only at the State level, but at the

³⁷ New Mexico Human Services Department. Accessed at https://www.hsd.state.nm.us/uploads/PressRelease/2f473c14ee654f868b5a25b3cfd15a6d/FY20_RateIncrease_PubNotice_FINAL.pdf on July 3, 2019.

national level as well. These challenges are particularly heightened as Medicaid agencies continue to be on the front lines of fighting opioid abuse and in ensuring that appropriate behavioral health services are available.

On the basis of the findings of this report, we recommend that the Centers for Medicare & Medicaid Services (CMS):

Identify States that have limited availability of behavioral health services and develop strategies and share information to ensure that Medicaid managed care enrollees have timely access to these services

CMS should identify States—in addition to New Mexico—that have limited availability of behavioral health services for Medicaid managed care enrollees. CMS should work with these States to develop strategies to ensure that enrollees have timely access to behavioral health services. CMS should particularly focus on these challenges in rural and frontier areas. CMS should build on its existing efforts to provide technical assistance and share best practices and lessons learned from States’ experiences. As a part of its efforts, CMS should work to ensure that States are monitoring the numbers and locations of behavioral health providers and that States are identifying any barriers that impede access to behavioral healthcare. For example, CMS could encourage States to monitor whether there are shortages of specific types of behavioral health providers, such as substance use counselors or psychiatrists. To encourage information sharing, CMS could identify any promising practices that other States have developed. CMS could then share this information with States—such as through case studies, tool kits, and other methods.

We also recommend that the New Mexico Human Services Department:

Expand New Mexico’s behavioral health workforce that serves Medicaid managed care enrollees

Having a sufficient number of behavioral health providers that serve Medicaid managed care enrollees in New Mexico is essential to improving the availability of services to this population. To achieve this, the New Mexico Human Services Department should:

- **Take steps to expand New Mexico’s overall behavioral health workforce.** To address workforce shortages of behavioral health providers, New Mexico should implement initiatives to recruit and retain additional behavioral health providers. For example, New Mexico could look to other States’ initiatives, including internship opportunities in behavioral health fields and market to both in-State and out-of-State candidates. New Mexico could also encourage non-licensed providers to pursue licensure. New Mexico should particularly target these

efforts towards developing its behavioral health workforce in rural and frontier counties.

- **Increase behavioral health providers' participation in Medicaid managed care.** A significant number of New Mexico's licensed behavioral health providers do not provide services to Medicaid managed care enrollees. New Mexico should develop initiatives to encourage more of its existing behavioral health workforce to serve Medicaid managed care enrollees. Such initiatives could include initiatives implemented by other States, such as periodic reviews of licensure requirements and reimbursement rates, direct outreach to providers, and simplification of administrative requirements.

Improve access to behavioral health services

Improving access to services is another essential element for bolstering services for Medicaid managed care enrollees. To achieve this, the New Mexico Human Services Department should:

- **Review its standards governing access to care and determine whether additional standards are needed for behavioral health providers.** New Mexico should determine whether its managed care organizations are meeting the existing State standards that apply to behavioral health providers. It should also evaluate whether any changes to its existing standards are needed in order to better meet the behavioral health needs of their Medicaid managed care enrollees.
- **Improve access to transportation for Medicaid managed care enrollees needing behavioral health services.** Transportation to medical care is essential for Medicaid managed care enrollees who have limited means of transport to and from needed behavioral health services. New Mexico should first take steps to determine if managed care organizations are meeting their contractual obligations and to identify any challenges with nonemergency medical transportation. It should then work with its managed care organizations to develop initiatives to provide improved nonemergency medical transportation to enrollees. It should identify these initiatives and effective practices by reviewing the approaches taken by other States to improve the availability of

transportation services.³⁸ These initiatives should include working with the managed care organizations to review their networks of nonemergency medical transportation providers and looking for ways to expand the number of providers, such as coordinating with local organizations.

- **Work with State partners to strengthen access to high-speed, reliable, and secure communications technologies in rural and frontier counties.** High-speed, reliable, and secure communications technology is needed for healthcare providers and enrollees to benefit from EHRs and other health information technology services such as telehealth. A lack of access to connectivity with sufficient bandwidth speeds—such as broadband connectivity—remains a significant barrier faced by rural providers. New Mexico should strengthen broadband access, particularly in rural and frontier counties. New Mexico should work with other State partners to look for opportunities to attract additional broadband service providers to communities that are currently without access to broadband. New Mexico should also pursue additional funding opportunities for broadband-related projects, including Federal programs that can fund projects related to broadband planning, public access, digital literacy, and deployment.³⁹
- **Expand the use of telehealth to increase the availability of behavioral health services.** BHOs note that telehealth has improved the availability of services for Medicaid managed care enrollees, particularly those in rural and frontier areas. New Mexico should expand the use of telehealth, as appropriate, to further increase the availability of services, particularly in rural and frontier areas. To do this, the State should encourage adoption of telehealth, expand participation in Project Echo, and

³⁸ CMS and the National Academies of Sciences, Engineering, and Medicine provide effective practices used by other States to address transportation issues. See National Academies of Sciences, Engineering, and Medicine, *Handbook for Examining the Effects of Non-Emergency Medical Transportation Brokerages on Transportation Coordination*, October 22, 2018. Accessed at <https://www.nap.edu/download/25184> on February 25, 2019; CMS, *Medicaid State Plan Amendments*. Accessed at <https://www.medicaid.gov/state-resource-center/medicaid-state-plan-amendments/index.html> on February 26, 2019; and, GAO, *Nonemergency Medical Transportation: Updated Medicaid Guidance Could Help States*, GAO-16-238, February 2, 2016. Accessed at <https://www.gao.gov/assets/680/674934.pdf> on February 7, 2019.

³⁹ For a list of Federal funding sources, including grants funded by the United States Department of Health and Human Services, see the Federal Communications Commission, *Funding Broadband-Enabled Health Care*. Accessed at <https://www.fcc.gov/general/funding-broadband-enabled-health-care> on May 6, 2019.

strengthen access to broadband to expand telehealth accessibility.

Improve the effectiveness of behavioral health services

Another key element of strengthening services for Medicaid managed care enrollees is to improve their effectiveness. To achieve this, the New Mexico Human Services Department should:

- **Take steps to increase adoption of electronic health records (EHRs) and participation in the State Health Information Exchange (HIE) by behavioral health providers.** BHOs report that EHRs improve care for enrollees and enable providers to collaborate across behavioral health settings and with primary healthcare providers. EHRs also allow providers to easily access patient information and in some cases to share that information with other providers. EHRs are also needed to participate in the State's HIE, which can provide information about enrollees' diagnoses, medications, procedures, and—in some cases—clinical notes. Some providers face challenges in adopting EHRs and participating in the State HIE including the prohibitive cost of many EHR systems and limited expertise on how to use such technology. To address these challenges, New Mexico should work with providers in accessing assistance and resources that support behavioral health providers' adoption and use of EHRs and encourage participation in the State's HIE.⁴⁰
- **Identify and share information about strategies to improve care coordination.** Coordination among behavioral health and other providers is especially important since certain behavioral disorders carry higher incidences of chronic physical illnesses. BHOs report some challenges with finding providers and coordinating among providers, particularly when enrollees are transferred from one level of care to another. New Mexico should identify and share information on strategies for improved care coordination among behavioral health and other providers. For example, New Mexico should review other States' strategies to promote coordinated care across various

⁴⁰ An example of a resource that may be helpful is the Regional Extension Centers, which provide on-the-ground technical assistance for individual and small provider practices that lack resources to adopt and maintain EHRs. Services include health information technology education and training, vendor selection consultation, and partnering with the State health information exchange. For more information, see ONC, *Regional Extension Centers (RECs)*, November 7, 2018. Accessed at <https://www.healthit.gov/topic/regional-extension-centers-recs> on March 7, 2019.

settings. New Mexico should facilitate information sharing among its providers—through the development of case studies, tool kits, and other methods—to encourage providers to use these strategies.

- **Expand initiatives to integrate behavioral and primary healthcare.** BHOs report that the increased integration between behavioral and primary healthcare can improve patient outcomes. For example, CareLink health homes is New Mexico's integrated care model. The goal of this model is to enhance the integration of behavioral and primary healthcare as well as other services. New Mexico should assess the implementation of CareLink health homes and the value of integrating care. On the basis of the results, it should refine and expand this model or consider other models of integrated care, if appropriate.
- **Share information about open-access scheduling and the Treat First Clinical Model and promote expansion.** BHOs report that open-access scheduling and the Treat First Clinical Model help increase the availability of behavioral health services for Medicaid managed care enrollees. New Mexico should share information with the BHOs that do not use these tools about the benefits identified by the BHOs that do use them. New Mexico could also convene forums for BHOs to share strategies and technical assistance for successful implementation of these tools.

AGENCY AND STATE COMMENTS AND OIG RESPONSE

Both CMS and the New Mexico Human Services Department (the State) concurred with our recommendations. We made one recommendation to CMS and 10 recommendations to the State.

CMS concurred with our recommendation to identify States that have limited availability of behavioral health services and develop strategies and share information. CMS stated that it will work with States that identify themselves as having behavioral health shortages and States that have managed care plans that do not meet the State defined standards of network adequacy. CMS stated that it will provide technical assistance to those States by developing strategies and sharing information to ensure that Medicaid managed care enrollees have timely access to behavioral health services.

The State concurred with our 10 recommendations that seek to expand the State's behavioral health workforce, improve access to behavioral health services, and improve the effectiveness of behavioral health services.

In response to the two recommendations that seek to expand the State's behavioral health workforce, the State noted that it plans to, among other things, use Federal grants to increase behavioral health services provided in rural and frontier counties, while also implementing a Graduate Medical Education program for providers. The State also implemented an increase of Medicaid rates for behavioral health providers and will continue to meet with the Regulation and Licensing Department to discuss the streamlining of licensing requirements and implementation of reciprocity for out-of-state providers who move to New Mexico.

In response to the four recommendations that seek to improve access to behavioral health services, the State noted that it is in the process of promulgating a new rule for behavioral health. It also stated that it plans to provide additional non-emergency medical transportation for the justice-involved population upon their release. To strengthen access to communication technologies, it stated that it plans to pursue additional funding for broadband coverage and work with other State agencies to endorse increased funding for broadband efforts. It also stated that it will continue working with the State telehealth network to expand telehealth coverage.

In response to the four recommendations that seek to improve the effectiveness of behavioral health services, the State plans to explore funding for connectivity and data transmission to increase behavioral health

provider data sharing. It also noted that it is currently in discussions with the State's HIE to include behavioral health providers on the HIE. The State also noted that it recently expanded the number of health homes to better integrate behavioral and primary healthcare. Finally, the State added that it plans to collaborate with the New Mexico Behavioral Health Provider Association to increase the number of providers who are trained in the Treat First model.

We appreciate CMS's and the State's steps to address these important issues. OIG urges both CMS and the State to continue their work in this area to ensure timely access to behavioral health services for Medicaid managed care enrollees.

For the full text of CMS's comments, see Appendix E. For the full text of the New Mexico Human Services Department's comments, see Appendix F.

APPENDIX A: Detailed Methodology

We based this study on analyses of Medicaid managed care data from the State and on survey data from selected BHOs. We also conducted interviews with selected behavioral health providers, State Medicaid agency officials, and key stakeholders.

State Medicaid managed care data

We requested data from the State Medicaid Agency to determine the number and type of licensed behavioral health providers that serve the State's managed care enrollees. Using these data, we developed a list of all unique providers listed on at least one behavioral health claim during the period of January 1, 2017, through December 31, 2017.

For each of these providers, we requested information about their behavioral health specialty, their current enrollment status (i.e., "active"), and the primary county in which they provide services—and whether that county was urban, rural, or frontier.⁴¹ We also requested information about the organizations where each of the providers work. We then identified all unique active licensed behavioral health providers in the State, by county.⁴² We included providers in the following three categories:⁴³

- Independently licensed, prescribing behavioral health providers consist of psychiatrists (MD or DO with a psychiatric specialty), advanced practice nurses (i.e., clinical nurse specialists or clinical nurse practitioners with a psychiatric specialty), and licensed clinical psychologists (Ph.D., Psy.D. or Ed.D.) certified for prescribing.
- Independently licensed, non-prescribing behavioral health providers consist of licensed clinical psychologists (Ph.D., Psy.D. or Ed.D.) not certified for prescribing, licensed independent or clinical social workers (LISW or LCSW), licensed professional clinical mental health counselors (LPCC), licensed professional mental health counselors

⁴¹ Note that providers may practice at multiple locations, including locations outside of their primary service county. Further, we based our analysis on New Mexico's designation of urban, rural, and frontier counties. Note that frontier counties have an average of 2.8 people per square mile, and rural counties have an average of 13.7 people per square mile.

⁴² This analysis does not include out-of-State providers.

⁴³ In addition to the types of providers listed above, the State licenses other behavioral health providers, such as certified alcohol and drug abuse counselors (CADAC) and licensed physician assistants (PA) with a psychiatric specialty. Note that if types of behavioral health providers are not included in the bullets above, there were no providers of these types in the 2017 data.

(LPC), licensed marriage and family therapists (LMFT), licensed professional art therapists (LPAT), and licensed alcohol and drug abuse counselors (LADAC).

- Non-independently licensed behavioral health providers consist of licensed masters of social work (LMSW), licensed baccalaureates of social work (LBSW), licensed mental health counselors (LMHC), licensed associate marriage and family therapists (LAMFT), licensed substance abuse associates (LSAA), and registered nurses (RN) with a with a psychiatric specialty.

We also requested the total number of Medicaid managed care enrollees by county in 2017. Using these data, we determined the ratio of providers per 1,000 Medicaid managed care enrollees for each county. We also calculated the median ratio of providers and prescribers per 1,000 Medicaid managed care enrollees for urban, rural, and frontier counties.

Finally, we identified the number of licensed behavioral health providers that work in BHOs. Using the State data, we identified 351 BHOs that provide services to Medicaid managed care enrollees. These included all BHOs that provided outpatient behavioral health services to Medicaid managed care enrollees from January 1, 2017, through December 31, 2017.

Survey of behavioral health organizations

We selected a purposive sample of BHOs to survey. We included all BHOs designated as core service agencies because they are primary sources for comprehensive medical and support services for many Medicaid managed care enrollees in New Mexico. We then selected up to two additional BHOs with the largest behavioral health expenditures in each county to ensure geographic representation.⁴⁴ Finally, we included any additional BHOs that billed for more than \$1 million in 2017. In total, we selected 78 BHOs throughout the State.

Next, we conducted a survey of each of the selected BHOs. Our questions focused on the availability of behavioral health services for Medicaid managed care enrollees. We asked about the availability of both urgent and routine appointments for enrollees seeking services at the BHO from both prescribing and non-prescribing providers. We also asked about the extent to which BHOs maintain wait lists. Additionally, we asked about the extent to which they have difficulty arranging services that they do not or currently cannot provide. We also asked about any challenges with ensuring continuity of care, including maintaining care when transferring from one setting to another, seeing the same provider each visit, and exchanging health information throughout the continuum of care. Lastly, we asked about challenges and promising initiatives for improving the

⁴⁴ Five counties only had one BHO, and one county did not have a BHO.

availability of behavioral health services. We conducted the survey from August through November 2018. We received responses from a total of 53 BHOs in 27 of the 32 counties in New Mexico with a BHO. Of these BHOs, 16 were in urban counties, 20 were in rural counties, and 17 were in frontier counties.⁴⁵

Interviews with selected providers, State Medicaid officials and key stakeholders

We conducted interviews with selected providers from the BHOs, officials from the State's Medicaid managed care program, and key stakeholders.⁴⁶ We asked the behavioral health providers about their experience working with Medicaid managed care enrollees and the availability of behavioral health services. We conducted structured interviews with State Medicaid officials responsible for behavioral health services in the State and specific initiatives such as the Treat First Clinical Model. Lastly, we conducted structured interviews with key stakeholders, including representatives from the Local Collaborative Alliance New Mexico, a group of organizations that support community participation in behavioral health services. We focused our questions on the availability of behavioral health services for Medicaid managed care enrollees and on challenges and opportunities for improving the availability of behavioral health services in the State.

⁴⁵ The 53 BHOs received more than \$61 million in Medicaid managed care behavioral health expenditures in 2017. This amounts to 50 percent of the expenditures received by all BHOs in that year.

⁴⁶ We asked each BHO to identify at least one provider who had the most experience working with Medicaid managed care enrollees.

APPENDIX B: Number of Licensed Behavioral Health Providers That Serve Medicaid Managed Care Enrollees in New Mexico

Exhibit B-1: Number of licensed behavioral health providers, by provider type, 2017

	Total	Urban		Rural		Frontier	
Independently Licensed Prescribing Behavioral Health Providers	328	227	69%	83	25%	18	6%
Psychiatrists	202	151	75%	40	20%	11	5%
Advanced Practice Nurses*	94	52	55%	38	40%	4	4%
Prescribing Psychologists	32	24	75%	5	16%	3	9%
Independently Licensed Non-Prescribing Behavioral Health Providers	1,872	1,346	72%	449	24%	77	4%
Counselors and Therapists	976	682	70%	255	26%	39	4%
Social Workers	584	426	73%	131	22%	27	5%
Psychologists, Non-Prescribing	274	220	80%	45	16%	9	3%
Substance Use Counselors	38	18	47%	18	47%	2	5%
Non-Independently Licensed Behavioral Health Providers	465	325	70%	115	25%	25	5%
Counselors and Therapists	250	184	74%	58	23%	8	3%
Social Workers	198	131	66%	51	26%	16	8%
Registered Nurses	13	9	69%	4	31%	0	0%
Substance Use Counselors	4	1	25%	2	50%	1	25%
Total	2,665	1,898	71%	647	24%	120	5%

* Includes certified nurse practitioners with a psychiatric specialty and certified nurse specialists with a psychiatric specialty.

Rows may not total 100 percent due to rounding.

Source: OIG analysis of State Medicaid data, 2019.

Exhibit B-2: Number of licensed behavioral health providers, by county, 2017

County	Type	Total Medicaid Managed Care Enrollees*	Independently Licensed, Prescribing Providers	Independently Licensed, Non-Prescribing Providers	Non-Independently Licensed Providers	Total Licensed Providers	Licensed Providers per 1,000 Enrollees
Bernalillo	Urban	187,932	149	911	230	1,290	6.9
Catron	Frontier	654	-	1	-	1	1.5
Chaves	Rural	25,574	3	22	8	33	1.3
Cibola	Frontier	7,353	2	7	2	11	1.5
Colfax	Frontier	4,448	-	4	2	6	1.3
Curry	Rural	16,123	2	37	14	53	3.3
De Baca	Frontier	902	-	-	-	-	-
Dona Ana	Urban	92,905	48	157	46	251	2.7
Eddy	Rural	18,215	7	14	5	26	1.4
Grant	Rural	9,472	3	33	5	41	4.3
Guadalupe	Frontier	1,910	-	3	-	3	1.6
Harding	Frontier	67	-	-	-	-	-
Hidalgo	Frontier	1,677	1	1	2	4	2.4
Lea	Rural	24,730	4	14	7	25	1.0
Lincoln	Frontier	6,117	-	8	-	8	1.3
Los Alamos	Urban	775	1	11	3	15	19.4
Luna	Rural	13,544	2	6	3	11	0.8

Exhibit B-2: Number of licensed behavioral health providers, by county, 2017 (continued)

County	Type	Total Medicaid Managed Care Enrollees*	Independently Licensed, Prescribing Providers	Independently Licensed, Non-Prescribing Providers	Non-Independently Licensed Providers	Total Licensed Providers	Licensed Providers per 1,000 Enrollees
McKinley	Rural	17,377	10	17	3	30	1.7
Mora	Frontier	1,295	-	4	-	4	3.1
Otero	Rural	16,798	13	32	4	49	2.9
Quay	Frontier	3,513	-	4	2	6	1.7
Rio Arriba	Rural	17,449	2	21	9	32	1.8
Roosevelt	Rural	6,444	1	6	-	7	1.1
San Juan	Rural	32,683	16	45	9	70	2.1
San Miguel	Frontier	11,315	12	25	16	53	4.7
Sandoval	Rural	33,006	15	111	33	159	4.8
Santa Fe	Urban	56,777	29	267	46	342	6.0
Sierra	Frontier	6,435	2	10	1	13	2.0
Socorro	Frontier	6,414	1	3	-	4	0.6
Taos	Rural	12,064	4	64	12	80	6.6
Torrance	Frontier	7,986	-	7	-	7	0.9
Union	Frontier	576	-	-	-	-	-
Valencia	Rural	26,852	1	27	3	31	1.2
Total		669,705*	328	1,872	465	2,665	4.0

* This includes an additional 323 enrollees in which the county was unknown.

Source: OIG analysis of State Medicaid data, 2019.

APPENDIX C: Number of Selected Behavioral Health Organizations That Report Having Difficulty Providing Timely Appointments

Urgent Appointments		
	Number of BHOs	Percentage of BHOs
With a prescriber in their BHO		
Within 24 Hours	30	56.6%
After 24 Hours	23	43.4%
With a non-prescriber in their BHO		
Within 24 Hours	49	92.5%
After 24 Hours*	4	7.5%
Routine Appointments		
	Number of BHOs	Percentage of BHOs
With a prescriber in their BHO		
Within 14 Days	28	52.8%
After 14 Days	25	47.2%
With a non-prescriber in their BHO		
Within 14 Days	49	92.5%
After 14 Days**	4	7.5%

* Three of the four BHOs are unable to provide urgent appointments with prescribers and non-prescribers in their BHOs within 24 hours.

** All four BHOs are unable to provide routine appointments with prescribers and non-prescribers in their BHOs within 14 days.

Source: OIG analysis of BHO survey data, 2019.

Appendix D: Number of Selected Behavioral Health Organizations That Report Having Difficulty Arranging Each Service

	Number of BHOs	Percentage of BHOs
Recovery and Support Services		
Behavioral Health Respite Care	27	50.9%
Family Support Services	22	41.5%
Psychosocial Rehabilitation Services	22	41.5%
Supportive Housing Pre-Tenancy and Tenancy Services	22	41.5%
Behavior Management Skills Development Services	17	32.1%
Comprehensive Community Support Services (CCSS)	15	28.3%
Non-Intensive Outpatient Services		
Day Treatment	24	45.3%
Medication Assisted Treatment (MAT): Buprenorphine Treatment for Opioid Use Disorder	24	45.3%
Screening, Brief Intervention & Referral to Treatment (SBIRT)	16	30.2%
Crisis Intervention Services	12	22.6%
Behavioral Health Professional Services for Screenings, Evaluations, Assessments and Therapy	4	7.5%
Intensive Outpatient Services		
Opioid Treatment Program (OTP)	22	41.5%
Applied Behavior Analysis (ABA)	28	52.8%
Intensive Outpatient Program for Substance Use Disorders or Mental Health Conditions (IOP)	21	39.6%
Cognitive Enhancement Therapy (CET)	20	37.7%
Assertive Community Treatment Services	19	35.8%
Multi-Systemic Therapy (MST)	17	32.1%

	Number of BHOs	Percentage of BHOs
Inpatient and Residential Services		
Accredited/ Non-accredited Residential Treatment Center (ARTC, RTC) or Group Home	30	56.6%
Institution for Mental Diseases (IMD)	30	56.6%
Treatment Foster Care I and II	18	34.0%

Source: OIG analysis of BHO survey data, 2019.

APPENDIX E: Centers for Medicare & Medicaid Services Comments



DEPARTMENT OF HEALTH & HUMAN SERVICES

Centers for Medicare & Medicaid Services

Administrator
Washington, DC 20201

DATE: August 16, 2019

TO: Joanne Chiedi
Acting Inspector General
Office of Inspector General

FROM: Seema Verma
Administrator
Centers for Medicare & Medicaid Services

SUBJECT: Office of Inspector General (OIG) Draft Report: Provider Shortages and Limited Availability of Behavioral Health Services in New Mexico's Medicaid Managed Care (OEI-02-17-00490)

The Centers for Medicare & Medicaid Services (CMS) appreciates the opportunity to review and comment on the Office of Inspector General's (OIG) draft report. CMS is committed to working with states to provide Medicaid managed care enrollees with high quality behavioral health services.

CMS recognizes the importance of collaborating with states to increase the availability of behavioral health services for Medicaid beneficiaries. CMS also believes that states are in the best position to develop meaningful and appropriate network adequacy and service availability standards that reflect the scope of their programs, the populations served, and the unique demographics and characteristics of each state. To assist states in developing their network adequacy and service availability standards, CMS formed a working group of states to discuss common access challenges and goals, as well as to create a forum for states to present their successful techniques for establishing and monitoring network adequacy in their programs. In April 2017, CMS published the Network Adequacy Toolkit, which provides technical assistance to states in the development and oversight of Medicaid managed care plan networks including mental health providers.¹

CMS also has a section 1115 demonstration initiative focused on improving access to substance use disorder treatment, which is designed to incentivize states to ensure Medicaid beneficiaries have access to a full continuum of care to treat substance use disorder, while also implementing standards and processes to improve the quality of care being provided.² As part of these demonstrations, participating states are expected to take actions to improve provider capacity across a continuum of care including outpatient, intensive outpatient, and residential settings and ensure access to medication assisted treatment at all of these levels of care.

¹ <https://www.medicare.gov/medicaid/managed-care/downloads/guidance/adequacy-and-access-toolkit.pdf>

² <https://www.medicare.gov/federal-policy-guidance/downloads/smd17003.pdf>

In addition, in November 2018, CMS issued a letter to State Medicaid Directors that outlines both existing and new opportunities for states to design innovative service delivery systems for adults with serious mental illness and children with serious emotional disturbance.³ The letter includes a new opportunity for states to receive authority to pay for short-term residential treatment services in an institution for mental disease for these patients. As a part of this new opportunity, participating states will be expected to conduct a thorough assessment of the availability of mental health providers at different levels of care across their state and develop strategies and take actions to fill gaps in provider availability and participation in Medicaid. CMS believes these opportunities offer states the flexibility to make significant improvements on access to quality behavioral health care.

Recognizing the unique challenges faced by rural communities in accessing care, in May 2018, CMS launched the agency's first Rural Health Strategy to help improve access to high quality, affordable healthcare in rural communities.⁴ As part of this initiative, CMS is working with state Medicaid agencies to improve access to care through provider engagement and support, focusing particularly on behavioral health. In addition, the initiative includes forming a council of experts tasked with addressing rural health issues, engaging stakeholders in rural communities, and partnering with health organizations to raise awareness.

Aligning with these efforts, the Substance Use-Disorder Prevention that Promotes Opioid Recovery and Treatment (SUPPORT) for Patients and Communities Act (Pub. L. 115-271), enacted in October 2018, includes a number of significant Medicaid provisions aimed at improving access to behavioral health care for Medicaid beneficiaries, including those in managed care.⁵ Specifically, the SUPPORT Act includes a provision that requires CMS to issue guidance to states regarding federal reimbursement for services and treatment for substance use disorders under Medicaid delivered via telehealth. It also requires CMS to issue a Report to Congress identifying best practices and potential solutions for reducing barriers to using services delivered via telehealth for substance use disorders among pediatric populations under Medicaid. The SUPPORT Act also includes a number of other significant Medicaid provisions, such as a new mandatory benefit covering all forms of medication assisted treatment, a new optional benefit to cover specialized inpatient and residential substance use disorder treatment, and a demonstration program providing planning funding to up to ten states to increase the capacity of Medicaid providers to deliver substance use disorder treatment. CMS is in the process of developing guidance on several of these statutory requirements in the SUPPORT Act, and is working to implement the benefit changes and opportunities aimed at improving access to behavioral health care in Medicaid.

Lastly, in July 2019, CMS issued a notice of proposed rulemaking designed to help streamline federal oversight of access to care requirements that protect Medicaid beneficiaries.⁶ If the proposed rule is finalized, CMS would replace the ongoing access reviews required by current regulations with a more comprehensive and outcomes-driven approach to monitoring access across delivery systems, developed through workgroups and technical expert panels that include key state and federal stakeholders.

³ <https://www.medicaid.gov/federal-policy-guidance/downloads/smd18011.pdf>

⁴ <https://www.cms.gov/About-CMS/Agency-Information/OMH/Downloads/Rural-Strategy-2018.pdf>

⁵ <https://www.congress.gov/bills/115/congress/house-bill/6>

⁶ <https://www.cms.gov/newsroom/press-releases/cms-launches-comprehensive-effort-strengthen-monitoring-medicare-beneficiary-access-patients-while>

CMS is committed to providing opportunities for states to improve access to behavioral health care and through the efforts described above, we are assisting states and other stakeholders in meeting this goal.

OIG's recommendation and CMS' response are below.

OIG Recommendation

Identify States that have limited availability of behavioral health services and develop strategies and share information to ensure that Medicaid managed care enrollees have timely access to these services.

CMS Response

CMS concurs with this recommendation. CMS will work with states who identify themselves as having behavioral health shortages, or through the course of their network monitoring, consistently have managed care plans that do not meet state defined standards of network adequacy. CMS will utilize our robust efforts described above to provide technical assistance to those states by developing strategies and sharing information to ensure that Medicaid managed care enrollees have timely access to behavioral health services.

APPENDIX F: New Mexico Human Services Department Comments



Michelle Lujan Grisham, Governor
David R. Scrase, M.D., Secretary

August 16, 2019

Ms. Suzanne Murrin
Deputy Inspector General
Department of Health and Human Services
Office of Inspector General
Washington, DC 20201

Dear Deputy Inspector Murrin:

Thank you for granting New Mexico the opportunity to comment on the draft report entitled *Provider Shortages and Limited Availability of Behavioral Health Services in New Mexico's Medicaid Managed Care*, OEI-02-17-00490.

Attached are New Mexico Human Services Department's comments and specific actions related to each of the ten recommendations. Included are draft timelines for the actions outlined for each recommendation.

If you have any questions about this report, please do not hesitate to email me at David.scrase@state.nm.us or call me at 505-827-7750.

Sincerely,

A handwritten signature in dark ink, appearing to read "David R. Scrase".

David Scrase, M.D.
Secretary

Office of the Secretary | PO Box 2348 – Santa Fe, NM 87504 | Phone: (505) 827-7750 Fax: (505) 827-6286

New Mexico's Comments
Provider Shortages and Limited Availability of Behavioral Health Services in New Mexico's Medicaid Managed Care
OEI-02-17-00490

1. Expand NM's behavioral health workforce that serves Medicaid managed care enrollees

a. Take Steps to expand NM's overall BH workforce

- i. The Human Services Department (HSD) concurs with this recommendation.
 - 1. Since January 1, 2019, HSD has implemented a multiprong strategy to expand NM's overall BH workforce including but not limited to:
 - a. BH provider rate increase in July 2019 and October 2019 totaling \$50M;
 - b. Utilization of federal grants (\$27.5M) to increase BH services provided in rural and frontier counties;
 - c. Dedicated staff to serve as support for BH providers regarding new services, Medicaid enrollment, certification, etc.
 - d. Submission of an application for the CMS SUD Medicaid Workforce grant on 8/9/2019; and
 - e. Implementation of a Graduate Medical Education program for providers in 2020.
 - 2. NM's Behavioral Health Collaborative (BHC) is comprised of Secretaries for various state agencies. The BHC developed four strategic goals, one of which is the Expansion of the Behavioral Health Network. The BHC will be requesting \$25M for next fiscal year in an effort to accomplish the objectives of all four goals.

b. Increase BH providers' participation in Medicaid managed care

- i. HSD concurs with this recommendation.
 - 1. HSD's managed care program, Centennial Care, included new BH services with the implementation of its 1115 waiver renewal on January 1, 2019. New Medicaid reimbursable BH services include: Screening, Brief Intervention & Referral to Treatment; Accredited Residential Treatment Centers for Adults; and Supportive Housing.
 - 2. Since 2017, HSD has reduced the departmental administrative requirements for BH providers who render specialty services.
 - 3. HSD continues to meet with the Regulation and Licensing Department to discuss the streamlining of licensing requirements and implementation of reciprocity for out of state providers moving to NM.
 - 4. HSD will conduct a BH provider network analysis over the next six months.

2. Improve access to BH services

a. Review its standards governing access to care and determine whether additional standards are needed for behavioral health providers.

- i. HSD concurs with this recommendation.
 - 1. On January 14, 2019, HSD released a Medicaid Supplement to BH providers and the MCOs regarding BH service updates.
 - 2. In January 2019, HSD release the BH Billing and Policy Manual.

New Mexico's Comments
Provider Shortages and Limited Availability of Behavioral Health Services in New Mexico's Medicaid
Managed Care
OEI-02-17-00490

3. On December 1, 2019, HSD will complete the BH rule promulgation process.
- b. Improve access to transportation for Medicaid managed care enrollees needing behavioral health services.**
 - i. HSD concurs with this recommendation.
 1. NM Medicaid covers non-emergency medical transportation for members with physical health (PH) and BH appointments.
 2. Within the next six months, HSD will implement non-medical transportation for the justice involved population upon release to ensure access to pharmacy and other services.
- c. Work with State partners to strengthen access to high-speed, reliable, and secure communications technologies in rural and frontier counties.**
 - i. HSD concurs with this recommendation.
 1. Since 2014, NM Medicaid has reimbursed for BH and physical health services provided via telehealth. BH providers have the highest utilization of telehealth.
 2. HSD is pursuing funding for broadband coverage and is working with other state agencies to endorse increased funding for these efforts.
- d. Expand the use of telehealth to increase the availability of behavioral health services.**
 - i. HSD concurs with this recommendation.
 1. With the implementation of Centennial Care in 2014, HSD identified telemedicine as a focus area for improving health outcomes by addressing barriers to physical and behavioral health care needs in our rural and frontier areas.
 2. Beginning in 2019, HSD included telemedicine as a contractually required Delivery System Improvement Performance Target for the MCOs.
 3. In 2018, HSD included the use of telemedicine for the provision of Applied Behavior Analysis (ABA) services, Medication Assisted Treatment (MAT) and Opioid Treatment Program (OTP).
 4. HSD is working with the State telehealth network to expand coverage.
- 3. Improve the effectiveness of behavioral health services.**
 - a. Take steps to increase adoption of EHRs and participation in the HIE by behavioral health providers.**
 - i. HSD concurs with this recommendation.
 1. HSD is exploring funding for connectivity and data transmission to increase data sharing.
 2. HSD is in discussions with NM's HIE to include BH providers on the HIE.
 - b. Identify and share information about strategies to improve care coordination.**
 - i. HSD concurs with this recommendation.
 1. Effective January 1, 2019, the Medicaid Centennial Care MCOs are able to fully or partially delegate care coordination functions to providers.

New Mexico's Comments
Provider Shortages and Limited Availability of Behavioral Health Services in New Mexico's Medicaid Managed Care
OEI-02-17-00490

This includes PH and BH providers who know their communities and are able to link members to services.

- c. Expand initiatives to integrate behavioral and primary healthcare.**
 - i. HSD concurs with this recommendation.
 - 1. Since April 1, 2016 CareLink NM allowed 2 pilot Health Homes to coordinate care for members with Serious Mental Illness and/or Severe Emotional Disturbance. In 2018, HSD expanded the number of health homes to 12.
- d. Share information about open-access scheduling and the Treat First Clinical Model and promote expansion.**
 - i. HSD concurs with this recommendation.
 - 1. The Treat First model was piloted in Spring of 2016 with 8 BH agencies in 21 clinics across the state. As of April 2019, 18 BH agencies have been Certified as a Treat First Agency in 69 clinics. HSD continues to collaborate with the NM Behavioral Health Provider Association to train provider in the Treat First model to increase the number of qualified providers. The following is the link to the NM Treat First website:
<https://treatfirst.org/>
 - 2. HSD conducts several learning collaboratives with BH providers regarding open access scheduling. Each BH agency has shared its customized approach to implementation, how they improve access, reduce "No Show" rates and improve client satisfaction. The agencies that use an Open Access model have shared how Treat First has improved client engagement when used in conjunction with Open Access.

ACKNOWLEDGMENTS

Vincent Greiber served as the team leader for this study. Others in the Office of Evaluation and Inspections who conducted the study include Grant Conway. Office of Evaluation and Inspections staff who provided support include Clarence Arnold and Kevin Manley.

We would also like to acknowledge the contributions of other Office of Inspector General staff, including Marissa Baron and Jessica Swanstrom.

This report was prepared under the direction of Jodi Nudelman, Regional Inspector General for Evaluation and Inspections in the New York regional office, and Nancy Harrison and Meridith Seife, Deputy Regional Inspectors General.

To obtain additional information concerning this report or to obtain copies, contact the Office of Public Affairs at Public.Affairs@oig.hhs.gov.

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The Office of Audit Services (OAS) provides auditing services for HHS, either by conducting audits with its own audit resources or by overseeing audit work done by others. Audits examine the performance of HHS programs and/or its grantees and contractors in carrying out their respective responsibilities and are intended to provide independent assessments of HHS programs and operations. These assessments help reduce waste, abuse, and mismanagement and promote economy and efficiency throughout HHS.

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APPENDIX Q

This is a pre-print of an article published in the *Journal of Experimental Criminology*. The final authenticated version is available online at <https://doi.org/10.1007/s11292-017-9320-4>.

Effect of Emergency Winter Homeless Shelters on Property Crime

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1 Abstract

Objectives. We evaluate the effect of emergency winter homeless shelters on property crimes in the nearby communities.

Methods. Every winter between 2009 and 2016, the City of Vancouver, Canada opened shelters to protect the homeless from harsh winter conditions. The city opened 19 shelters, but only five to nine of them were open in any one winter. Using the variation in timing and placement of the shelters, we contrast crime rates in the surrounding areas when the shelters are open and closed.

Results. The presence of a shelter appears to cause property crime to increase by 56% within 100m of that shelter, with thefts from vehicles, other thefts, and vandalism driving the increase. However, when a homeless shelter opened, rates of breaking and entering commercial establishments were 34% lower within 100m of that shelter. The observed effects are concentrated close to shelters, within 400 meters, and dissipate beyond 400 meters. Consistent with a causal effect, we find a decreasing effect of shelters with increasing distance from the shelter.

Conclusions. While homeless shelters are a critical social service, in Vancouver they appear to impact property crime in the surrounding community. Shelters may warrant greater security to control property crime, but the data suggest any increase in security need not extend beyond 400 meters, about 2 to 3 blocks, from the shelters.

Keywords: community design, homeless shelters, property crime, Vancouver

2 Introduction

Homeless shelters offer temporary accommodations and social services to those lacking permanent housing. Studies suggest that the benefits of this type of public health intervention on its target population and surrounding community are numerous. Comparative evaluations of homeless populations reveal that both, sheltered youth and women, have better health outcomes than their unsheltered counterparts, with these sheltered populations respectively reporting fewer serious health issues, and better physical and mental health (Klein, et al., 2000; Nyamathi, Leake, & Gelberg, 2000).

Unsurprisingly, occupants of homeless shelters also report greater access to food than their peers on the streets (Regional Steering Committee on Homelessness, 2012). While compared to the general population sheltered homeless people have a greater mortality rate (Barrow, Herman, Cordova, & Struening, 1999; Hwang, 2000), sheltered homeless populations seem to have fewer risk factors for mortality in comparison to unsheltered homeless individuals (Montgomery, Szymkowiak, Marcus, Howard, & Culhane, 2016).

Despite the potential benefits of sheltering the homeless, neighborhood stakeholders such as property owners, business owners, and residents often oppose the establishment of such shelters in their neighborhoods. In addition to concerns about property values and business disruption, the risk that shelters might increase crime rates is a primary driver of their reticence. This study addresses this issue, providing empirical evidence for the effect of emergency homeless shelters on crime. This paper begins with an overview of the existing literature related to homeless shelters and crime. The following sections discuss the data used in the study, the difference-in-differences analysis method employed, the results, and the conclusions drawn based upon the results.

3 Prior Literature

Criminological theories support the possibility of crime increasing after the implementation of homeless shelters. Specifically, routine activity and lifestyle victimization theories both propose mechanisms for how homeless individuals affect crime rates whereas broken windows theory proposes mechanisms for how the built environment of a neighborhood, such as shelters, could influence crime. In accordance with routine activity theory, crime might increase after a shelter opening due to the convergence of motivated offenders, suitable targets, and the absence of capable guardians (Cohen & Felson, 1979). For example, homeless individuals may commit acquisitive crimes due to a lack of basic necessities, be suitable targets due to their vulnerability, and may frequent areas with an absence of security. Shelters may vary in the degree of police and security presence. Lifestyle victimization theory suggests that the opening of homeless shelters could lead to more crime, as homeless individuals tend to experience high-risk lifestyles that make them easier targets for crimes (Anderson, 2014). High rates of victimization (Fitzpatrick, La Gory, & Ritchey, 1993; Kushel, Evans, Perry, Robertson, & Moss, 2003) and offending (Redburn & Buss, 1986; Snow, Baker, & Anderson, 1989) among the homeless support these theories. Although congruent with the notion that shelters could increase crime, broken windows theory proposes that the increase could be due to the social disorder signaled by the existence of a shelter and the presence of homeless people in proximity of shelters. According to the theory, crimes can occur anywhere once communal barriers, the sense of mutual regard and the obligations of civility, are lowered by physical signs of social disorder that seem to signal that “no one cares” (Wilson & Kelling, 1982). Therefore, because of its anonymity, the high population turnover, and the past experience of “no one caring”, homeless shelters could signal the presence of the breakdown of community controls, indicating to potential criminals that the surrounding area is not preoccupied with or has lost control of those locations.

Depending on design and implementation, shelters could reduce crime and the reduction could still be consistent with routine activity, lifestyle victimization, and broken windows theories. Routine activity

theory suggests that crime could decrease after shelters open as this infrastructure might make homeless people less vulnerable and less likely to be motivated to commit crimes out of necessity. This theory also proposes that homeless shelters could be linked to a decline in crime rates when paired with increased security and/or police presence, as adequate police and security planning could offset the risk of any increase in crime or reduce crime altogether. Likewise, lifestyle victimization supports the possibility that the opening of homeless shelters could lead to less crime, as the shelter may directly address the aspects of a high-risk lifestyle that puts the homeless at greatest risk. Broken windows theory also posits that crime could decrease near homeless shelters since these structures could remove signs of social disorder and may signal to potential offenders that stakeholders care about their community. Altogether, criminological theories suggest that homeless shelters could affect crime, but it is unclear in what direction the change would be.

While prior empirical research has shown that certain features of the built environment affect incidences of crime in its surrounding community, it has not extensively covered the effect of homeless shelters on crime. Instead, most studies have greatly focused on the topic of abandoned housing, transit, business improvement districts, and indigent housing (MacDonald, 2015). Although the topic of indigent housing is closely related to that of homeless shelters, indigent housing provides long-term stays to those in need and does not provide the same resources as homeless shelters. Thus, applying conclusions from indigent housing studies to the topic of homeless shelters would be speculative.

Since prior research has neither confirmed nor disproven the influence of homeless shelter on crime in either direction, our analysis will examine the roll out of emergency winter shelters in Vancouver and assess the effect of the activation of these shelters on crime in the surrounding community.

4 Emergency Winter Shelters in Vancouver

In 2008, Vancouver's homeless population numbered 1,570 people, with more than 50% unsheltered (Thomson, 2016). That same year, Dawn Bergman, a homeless Vancouver woman, died when her shopping cart caught fire. Shelters at the time did not allow shopping carts and, fearing her possessions would be stolen, Ms. Bergman refused the efforts of Vancouver police officers encouraging her to stay at a shelter during an unusually cold winter night. As a result of her death, Vancouver created a Winter Response Strategy to better manage the city's emergency winter shelter needs. Every year from 2009 to 2016, as part of its Winter Response Strategy program, the city of Vancouver opened seasonal shelters to protect the homeless from the harsh winter conditions. Consequently, although the homeless population grew 17% between 2008 and 2016, the percentage of the homeless population who were unsheltered declined to 29%.

Since the start of the program, numerous news articles have discussed the openings of emergency winter shelters. In combination with homeless counts conducted on seven occasions between 2008 and 2016, inclusively, these articles provide details on these facilities and their operation. From the end of 2008 to 2016, Vancouver opened winter shelters in 19 different locations. The city commissioned seven operators to manage the shelters with RainCity Housing and Support Society managing more than half of the homeless shelters. The shelters generally operate at or near capacity with the number of beds ranging between 30 and 200. In addition, many also offered services such as access to showers and

connections to housing options. Although nearly all shelters catered towards a clientele of all gender and ages, in practice shelters served a predominantly male and adult population; roughly 70% of shelter stays involved homeless men. At the time of their stay in these shelters, an estimated 83% of homeless shelter occupants had been homeless for over a month. Approximately 38% of Vancouver's sheltered homeless population reported suffering from mental illness and 53% from an addiction.

Shelters were mostly located within or in close proximity to Vancouver's Central Business District, although some were in more commercial areas than others. Table 1 shows the timing and locations of the shelters. Table 1 shows that several shelters were operational by January 2009, the winter following Ms. Bergman's death, though one had been operational for the winters of 2007 and 2008. For logistical and political reasons that are not always clear, the majority of the 19 locations in which shelters were opened only hosted a shelter for three or fewer winters. Most shelters typically started operating in December prior to the year listed in the column headings in Table 1 and closed towards the end of the following April. However, sometimes shelters would not open until late December or January. As a result, we focus our attention on January to March when all emergency shelters were operational.

Table 1: Timing and Placement of Emergency Winter Homeless Shelters in Vancouver

Shelter Address	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
134 East Cordova Street		✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
51B W Cordova Street				✓	✓	✓	✓	✓	✓	✓	✓
320 Hastings Street				✓	✓	✓	✓	✓	✓	✓	✓
201 Central Street				✓	✓	✓	✓	✓	✓	✓	✓
1442 Howe Street				✓		✓	✓				
1435 Granville Street				✓	✓						
1642 West 4th Avenue					✓	✓					
747 Cardero Street					✓	✓					
677 East Broadway Street					✓	✓					
1648 East 1st Avenue					✓	✓					✓
518 Richards Street							✓				
2950 Prince Edward Street							✓				
119 East Cordova Street							✓			✓	✓
1210 Seymour Street								✓			
2610 Victoria Drive								✓			
21 East 5th Avenue								✓	✓		
862 Richards Street								✓	✓		
1647 East Pender Street										✓	
900 Pacific Street											✓

The timing and placement of the shelters was not random. The placement often was a result of availability and suitability of space and an organization capable of managing the shelter. While current crime conditions were not an overt ingredient in the decision to place a shelter, crime could have

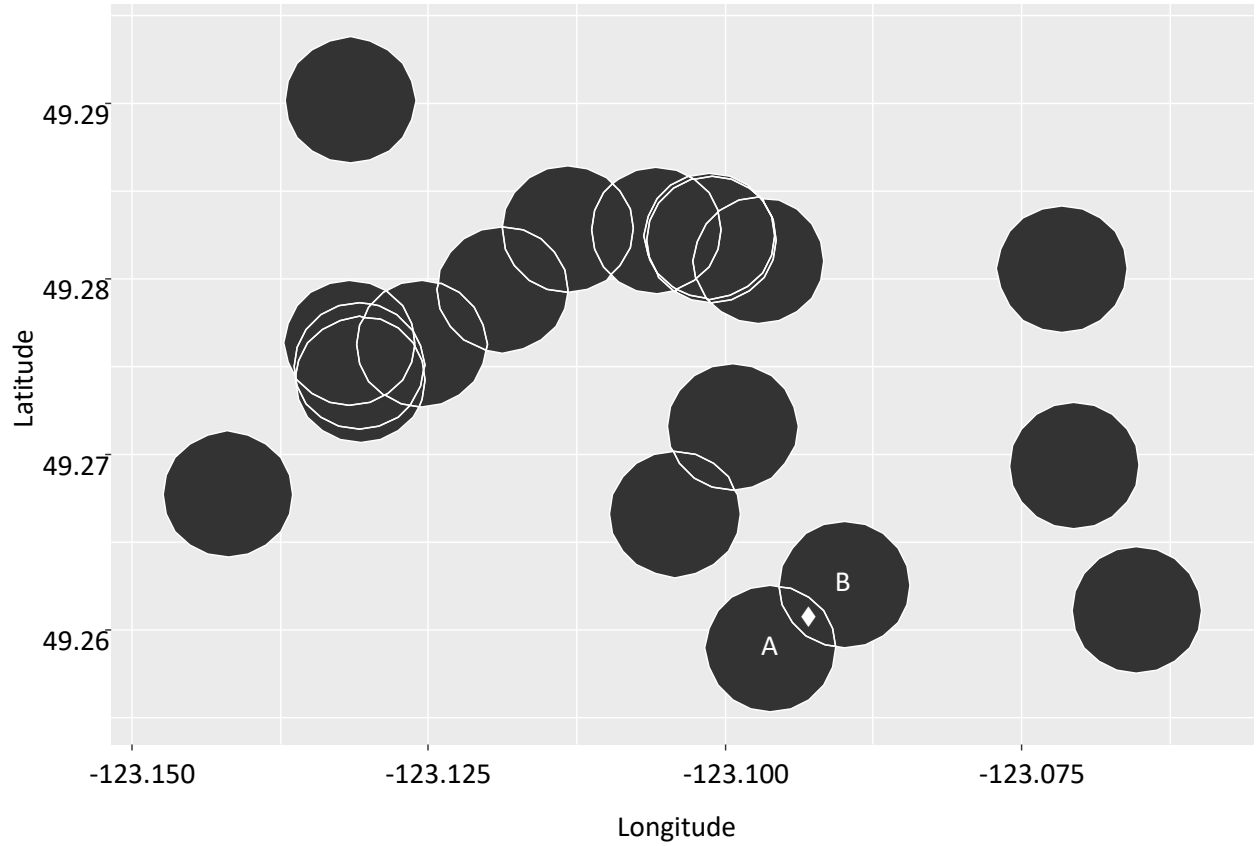
created conditions conducive to the opening of a shelter. For example, an office building may have closed down due to crime, thus providing available space for a shelter to move in. Consequently, in our analyses, we treat the shelter openings and closings as exogenous shocks to the community, but we also check for signals of crime trends in advance of the shelter openings.

5 Data and Methods

Vancouver publishes data on crimes reported to the Vancouver Police Department (VPD) (City of Vancouver, Canada, 2017). For every crime incident, the data indicate the type of offense as well as the year and the month in which it occurred. The reported crimes fall into eight categories: Commercial breaking and entering, residential breaking and entering, homicide, mischief (vandalism or property destruction), attacks against a person, theft from vehicle, theft of vehicle, and non-vehicle related theft. The dataset also included the geographic location of each property crime by indicating its approximate address and geographic coordinates. For privacy concerns, VPD does not make publicly available the location of offenses against a person. Therefore, our analysis focuses on property crimes. We included data from 2006 through 2016. We started with 2006 to provide three years of data before the start of the emergency winter shelter program.

Combining the crime timing and locations with the shelter openings and locations shown in Table 1, we aim to discern whether having an active homeless shelter influences crime in the surrounding community. Because shelters open and close at various times and places, we can use each area as its own control and contrast crime in an area when the shelter is open and when it is closed. We considered an area to have a shelter if it was within a given radius around an active shelter. We used radii of 100m, 200m, 300m, 400m, and 500m and report the results for each of these. We included a crime in the analysis only if it occurred between January and March (when the shelter program was active) and occurred in an area that was within the buffer radius of a location that had a shelter at some time during the study period. Figure 1 shows the geography for a 400m buffer radius. These are the buffers for all 19 shelters that were active between 2009 and 2016, but not all of them were active in every year.

Figure 1: Shelter buffers for a 400m buffer radius. White outlines mark areas where shelter buffers overlap.



Buffers around each shelter can overlap and occurs to a greater extent when considering larger radii. To accommodate the overlap in the analysis we carved the collection of circles into the set of non-overlapping regions. In Figure 1 this produced 41 non-overlapping regions. A crime occurring in the location marked with a diamond in Figure 1 will be labeled as a crime near an open shelter if shelter A is open, shelter B is open, or both shelter A and shelter B are open (and not near a shelter if both shelter A and B are closed).

We organized the data so that for each year, for each of the 41 regions, we had an indicator of whether there was an active shelter within the buffer radius and the number of crimes reported within the region. We used a Poisson regression model to model the crime counts

$$y_{it} \sim \text{Poisson}(\lambda_{it})$$

$$\log(\lambda_{it}) = \beta_1 \text{shelter}_{it} + \alpha_i + \gamma_t \quad (1)$$

where y_{it} is the number of crimes reported in region i at time t , shelter_{it} is a 0/1 indicator of whether there was an active shelter within the buffer radius for region i at time t , α_i is a fixed effect for region i , and γ_t is a fixed effect for year t , with γ_1 fixed at 0 making 2006 the reference year. Since α_i captures the crime rate for region i and γ_t captures the crime trends, $\exp(\beta_1)$ measures how many times larger the crime rate is with an active shelter nearby. We used a sandwich estimator for the standard errors to

account for overdispersion in the crime count outcome, but not to account for spatial or temporal correlation. We used a Poisson model with robust standard errors instead of a negative binomial model because the former is more efficient and robust (Wooldridge, 2010). We relied on a permutation test to address spatial and temporal correlation.

We conducted a permutation test of $\beta_1 = 0$. Confidently estimating the correct null distribution for $\hat{\beta}_1$ using traditional statistical theory is challenging. The null distribution would need to address correlation in space and time while also addressing areas that multiple shelters overlap. Permutation tests sidestep these issues by simulating the reference distribution under the null hypothesis that shelter timing and placement are uncorrelated with crime. Fisher's exact test for testing the independence of two categorical variables is the best known permutation test (Fisher, 1935). In this special case, Fisher showed that, rather than having to simulate or enumerate all the possible permutations of the observed categories yielding a contingency table matching the observed table margins, the hypergeometric distribution could compute tail probabilities over the permutation distribution.

We cannot enumerate all possible permutations of the timing and locations of shelters. Instead to simulate the reference distribution we randomly shuffled the timing and locations of the active shelters, effectively randomly shuffling the checkmarks in Table 1. We fixed the marginal distribution of the number of open shelters in each year to match the observed number of open shelters that year and permuted the shelter openings using Patefield's algorithm (Patefield, 1981). This restricts the permutation test from considering implausible scenarios, such as having all shelters open or all shelters closed in a given year. For each permutation, we relabeled all of the regions (like those shown in Figure 1) as having an active shelter or no shelter. Then we refit the model (1), storing the estimated coefficient $\hat{\beta}_1$ from each model fit. We repeated this 2,000 times and used the collection of 2,000 estimates of $\hat{\beta}_1$ as the null distribution. This process generates the null distribution showing us the distribution of $\hat{\beta}_1$ we should expect when shelter timing and locations are random and unrelated to crime (Figure 2 in the results shows an example).

Permutation tests can be underpowered in designs such as equation (1) when the error structure is complex, so permutation test p-values will be conservative (Wang & DeGruttola, 2016). While most traditional tests provide a test that the average treatment effect is 0, the permutation test described here (as with Fisher's exact test) provides a test of the sharp null hypothesis that there is no effect on crime for any of the shelters (Imbens & Rubin, 2015).

We conducted these analyses for total property and mischief crime as well as separately for each individual crime type.

6 Results

We found strong evidence that the presence of a shelter is associated with an increase in property and mischief crime, with a decreasing effect with increasing distance from the shelter. When shelters open we find that within 100 meters of the shelter total property and mischief crimes increase by 56.3%. The permutation test assures us that an effect of this magnitude is outside of what we should expect from chance variation. Figure 2 shows the permutation test null distribution for what the model in (1) would

estimate to be the percent increase in property crime attributable to a shelter opening if in fact shelters and crime were unrelated. When we randomly shuffle the shelter openings (and break any relationship between crime and shelters) the histogram in Figure 2 shows the estimates that we should expect if shelters have no effect. Estimated effects between a decrease of 30% or an increase of 30% in property crime could reasonably occur by random chance. However, our estimate was an increase of 56.3%, marked in Figure 2 by a vertical line, well outside the normal random variation we would expect by chance. Because we generated the null distribution through simulation, the histogram's spread properly accounts for spatial and temporal correlation and for multiple shelters operating within the same areas.

Figure 2: Null distribution for the effect of shelters on total property crime within 100m

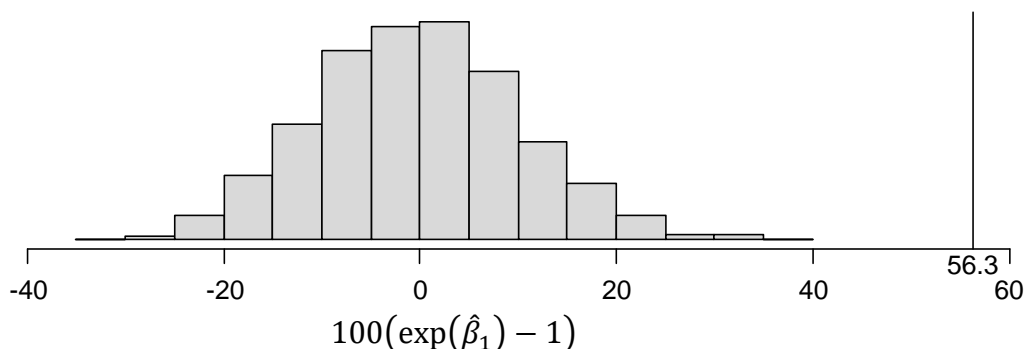


Table 2 shows the percent increase in crime attributable to the opening of an emergency winter homeless shelter for each of the property crime categories. We varied the size of the radius around each homeless shelter in order to assess the range of the shelter's effect. The primary drivers of the increase were thefts from vehicles, other thefts, and mischief to some degree. Other thefts appear to double after the opening of a shelter compared to years when the shelters are not open.

Shelters did not affect all crime categories in the same direction. We find strong evidence that rates of breaking and entering commercial buildings was substantially lower when a homeless shelter was nearby. Within 200 meters of a shelter, the percentage of break-ins of commercial establishments declined by 27%.

Table 2: Percent increase in crime for areas within a given radius of an open homeless shelters

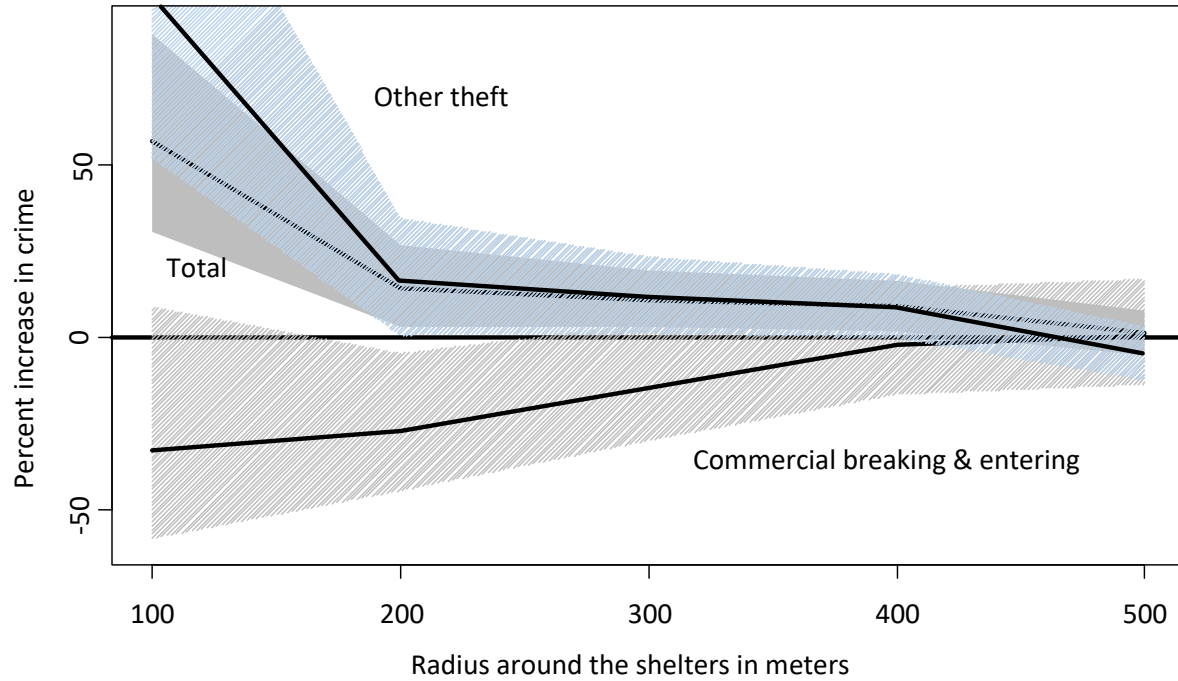
	Average crime count per year within 300m of shelters	Radius around shelters				
		100m	200m	300m	400m	500m
Total Property and Mischief Crime	1780	56.3 (30.2, 87.7) <0.001*	14.0 (2.9, 26.4) 0.005*	10.8 (2.9, 19.3) 0.007*	8.7 (1.5, 16.5) 0.009*	0.9 (-5.3, 7.6) 0.444
Break and Enter Residential	75	82.5 (-13.8, 286.3) 0.009*	9.4 (-22.0, 53.4) 0.295	-0.7 (-21.6, 25.9) 0.430	-1.4 (-18.4, 19.1) 0.444	2.5 (-14.4, 22.9) 0.433
Break and Enter Commercial	137	-33.5 (-58.9, 7.5) 0.035	-27.1 (-44.4, -4.5) 0.001*	-14.9 (-30.1, 3.7) 0.040	-2.5 (-16.7, 14.1) 0.467	0.3 (-13.8, 16.7) 0.397
Theft from Vehicle	538	42.9 (2.2, 99.9) 0.007*	15.8 (-1.5, 36.1) 0.024	20.7 (7.3, 35.8) <0.001*	15.1 (2.0, 29.9) 0.012*	12.0 (0.6, 24.7) 0.053
Theft of Vehicle	57	-39.9 (-72.2, 29.8) 0.059	-19.8 (-47.7, 23.1) 0.088	-2.4 (-26.6, 29.9) 0.376	-11.0 (-29.7, 12.6) 0.099	-9.5 (-26.2, 11.0) 0.157
Other Theft	709	98.1 (51.0, 159.7) <0.001*	16.4 (0.7, 34.6) 0.023	11.5 (1.0, 23.1) 0.015*	8.5 (-0.3, 18.0) 0.040	-5.1 (-12.5, 2.9) 0.104
Mischief	264	26.3 (-9.7, 76.7) 0.033	28.3 (8.2, 52.1) <0.001*	8.5 (-4.8, 23.7) 0.097	7.8 (-4.0, 21.0) 0.060	2.3 (-7.9, 13.6) 0.428

Note: For each crime type and for each radius we show the estimated percent change in crime ($100(\exp(\hat{\beta}_1) - 1)$), a 95% confidence interval accounting for overdispersion (but are not valid since they do not account for spatial/temporal correlation or shelter overlap), and the permutation test p-value (without any adjustment for multiple comparisons). The p-values marked with * remain significant after a Benjamini-Hochberg adjustment for multiple comparisons. The second column shows the average number of crimes per year within 300 meters of the shelter areas to give the reader an idea of the additional number of crimes that occur when shelters open.

When arguing for cause of an observed effect, the gradient criterion, one of the Hill criteria for providing evidence of a causal relationship, suggests that higher doses of a treatment should result in a larger corresponding response (Hill, 1965). In the case of shelters, we should see a stronger effect of the shelters in areas closest to them and a smaller effect as we expand the radius to include areas farther away from the shelters. Indeed, Table 2 demonstrates a decreasing effect with increasing radius. Figure

3 shows graphically the Table 2 results for other theft, commercial breaking and entering, and in the background, total property and mischief crime. All of these crime categories show that near the shelter the effect is strong, but converges toward a null effect once we consider a radius of 500 meters, further supporting the conclusion that shelters are causing the changes in crime.

Figure 3: Percent change in crime as a function of the shelter buffer radius



Note: The figure shows the point estimate and the pointwise 95% confidence intervals

The observed effects potentially could be attributable to city officials placing shelters in areas that are already experiencing crime changes. If this is the case, then the opening of a shelter should be correlated with the crime in the *prior* year. As a falsification test we dropped the data from 2006 and replaced the model (1) with a model predicting crime the year prior as shown in (2).

$$\log(\lambda_{i,t-1}) = \beta_0 + \beta_1 \text{shelter}_{it} + \alpha_i + \gamma_{t-1} \quad (2)$$

For almost all crime types and at all radii around shelters we find shelters not to be predictive of crime levels in the prior year. The one exception might be mischief crimes at 100 meters (p-value = 0.01, but Benjamini-Hochberg adjusted p-value = 0.19). That is, increases in vandalism and property damage may precede the placement of shelters. Though not statistically significant after accounting for multiple comparisons, there is a decreasing relationship with the prior year's mischief crimes with an increasing radius, indicating that disorder already may be developing in places where shelters open. For other crime types we see no trend by distance from shelter in the relationship between shelter openings and the prior year's crime, with point estimates equally likely to be positive or negative and generally large p-values.

7 Discussion

This study aimed to examine the effect of homeless shelters on crime in Vancouver. The opening of a shelter appears to be linked with a significant increase in property crime in the shelter's immediate vicinity. An exception to this finding was that incidences of commercial breaking and entering decreased. The effect of the shelter decreases with distance from the shelter offering further support that the observed effect is causal.

In an attempt to further explore the commercial environment and the relationship with commercial breaking and entering, we gathered data on the number of business licenses within 200m of each shelter location. All but three shelters were in heavily commercial areas with 50 or more businesses licensed within 200m of the shelter. While we are interested in uncovering more about the impact of siting shelters in different kinds of neighborhoods and how this moderates the treatment effect, the lack of variation in Vancouver makes this infeasible.

Routine activity theory may offer an explanation for the observed decrease in the occurrences of commercial breaking and entering. Local businesses may increase security, such as using roll-up sheet doors, cameras, and security personnel. It is also possible that by providing shelter to homeless people, these individuals may be less motivated to seek shelter in empty businesses during the night. Indeed, the CEO of the Downtown Vancouver Business Improvement Association noted that many fewer homeless were sleeping in the alcoves of retail storefronts and the downtown had a sharp decline in trespassing after the shelters opened (Gauthier, 2017).

The increase in property crimes could be explained by one or a combination of three mechanisms. First, these results may provide support for the broken windows theory. The presence of homeless shelters and the potential increase of the homeless population could increase social disorder, which could consequently increase crime committed by the homeless and non-homeless. Second, it is possible that homeless shelters encourage the convergence of suitable targets, motivated offenders, and a lack of guardians, therefore resulting in crime. Third, there is a possibility that homeless shelters generate crime by attracting a homeless population whose lifestyle choices put them at risk of being victimized. However, because we do not have data on the circumstances leading to each crime, we are not able to identify which of these three mechanisms contributed to these changes in crime.

It is possible that these results do not reflect an increase in new crime. Indeed, crime that would have been committed elsewhere in the city might have been displaced to the area surrounding homeless shelters. Moreover, crime might have been affected by increased detection associated with changes in police presence and in the behavior of the people present in the area near shelters.

Regardless of the reason for the increase in crime rates, these findings indicate that greater security or policing intervention may be necessary to minimize the potential negative effects shelters have on the surrounding community and to address crime that was committed, but had remained undetected until the implementation of homeless shelters. Police interventions such as place-based interventions focusing on crime and disorders associated with the homeless could potentially reduce crime, as it appears to have done in Los Angeles (Berk & MacDonald, 2010). Since our research demonstrates a rapidly decreasing effect with increasing radius away from the shelters, security measures and police

interventions need not be extensive and may be confined to a small area within 400 meters (2 to 3 blocks in Vancouver) of the shelters.

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Violence and Victims

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Exploring the Experiences of Violence Among Individuals Who Are Homeless Using a Consumer-Led Approach

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Homelessness increases vulnerability to violence victimization; however, the precise factors associated with victimization and injury are not clearly understood. Thus, this study explores the prevalence of and characteristics associated with violence victimization among homeless individuals by surveying approximately 500 individuals experiencing homelessness in 5 cities across the United States. Our findings reveal that nearly one-half of our sample reported experiencing violence and that prolonged duration of homelessness (greater than 2 years) and being older increased the risk of experiencing a violent attack. In addition, increased length of homelessness and female gender predicted experiencing rape. Women were also significantly more likely to know one's perpetrator and experience continued suffering after a violent attack. We conclude that certain subpopulations within the homeless population are at an increased risk for victimization and, subsequently,

require added protective services; implications for health care and policy recommendations are also discussed.

Keywords: homeless; homelessness; violence; victimization; rape

Individuals who are homeless have an increased risk of experiencing myriad social problems including victimization and violence (Centers for Disease Control and Prevention, 2010; D'Ercole & Struening, 1990; Fazel, Khosl, Doll, & Geddes, 2008; Fitzpatrick, LaGory, & Ritchey, 1999; Kerker et al., 2011; Kushel, Evans, Perry, Robertson, & Moss, 2003; Lee & Schreck, 2005; Raoult, Foucault, & Brouqui, 2001; Simons, Whitbeck, & Bales, 1989; Tsai & Rosenheck, 2012; Welsh et al., 2012; Wright, 1990). The prevalence of violence victimization in the homeless population has been estimated to range from 14% to 21% and approximately one-third report having witnessed a physical attack on another person who was homeless (Fitzpatrick, LaGory, & Ritchey, 1999; Lee & Schreck, 2005). This rate of violence is highly disparate when compared to the general population in which only 2% report experiencing a violent crime (Truman, 2011). In addition, research has demonstrated that some subpopulations of homeless individuals are at even increased risk of experiencing violence. For instance, those who experience longer bouts of homelessness have increased risk of victimization (Kipke, Montgomery, Simon, & Palmer, 1997; Lee & Schreck, 2005; Simons & Whitbeck, 1991). Those who have been previously turned away from a shelter or reported committing a crime since becoming homeless are also significantly more likely to experience victimization (Garland, Richards, & Clooney, 2010).

Research has also shown that experiencing violence can have serious prolonged effects (Lindhorst & Beadnell, 2011; Sousa, Herrenkohl, & Moylan, 2011). Physical assault on individuals experiencing homelessness has the potential to cause physical and psychological injuries, extend homelessness, and may require considerable medical treatment that most homeless individuals are unable to afford. The aftereffects of violence also include lower levels of perceived safety and an exacerbation of preexisting mental health issues (Kilpatrick & Acierno, 2003; Perron, Alexander-Eitzman, Gillespie, & Pollio, 2008; Sorenson & Golding, 1990).

Given these increased risks of experiencing violence and the understanding that violence can have long-term prolonged consequences, this study specifically aims to (a) describe the experiences of violence among individuals who are homeless, (b) create a sociodemographic profile of individuals who have experienced violence, (c) identify the factors that predict increased risk of experiencing violence and suffering consequences after an attack, and (d) to craft health practice and policy recommendations that illuminate solutions to addressing and stemming the increased rate of violence experienced and the related negative effects both at the macro and micro individual level.

In contrast to previous research, this study takes a consumer-led approach in which currently or formerly homeless individuals were integrally involved in each stage of research (design, administration of the survey, and data analysis and interpretation). This sets our study apart in that the critical perspectives of individuals who have experienced homelessness helped to illuminate not only the issues that are of importance but what the results of this study mean and how they can be incorporated into applied practice and affect relevant policy change.

METHODS

The data used in this study draw on a survey regarding experiences of violence by individuals who were homeless in five cities across the United States (Detroit, Fort Lauderdale, Nashville, Houston, and Worcester). This study was originally conceptualized, designed, and administered by the National Consumer Advisory Board (NCAB) of the National Health Care for the Homeless Council. NCAB comprises individuals who are currently and formerly homeless, many of whom participate in the governance of their local Healthcare for the Homeless (HCH) projects. HCH projects are grantees or subcontractors of the federally funded community health center program. Some are stand-alone sites, whereas others are housed within community health centers, public health departments, or hospitals. Many HCH projects have multiple sites in one community and mobile units or outreach workers travelling to different parts of a community to provide health care services. For example, the HCH project in Nashville is part of a network of primary care clinics with community, school, and mobile clinics. This project provides medical, dental, and behavioral health services to men, women, and children who are homeless through their Downtown Clinic (a brick and mortar clinic located in an impoverished neighborhood), a mobile medical van, evening clinics at a local shelter, and other community health center facilities. NCAB exists to voice the needs of the people who are homeless on a national level, assist new projects in developing local consumer advisory boards, and provide support to individuals who are currently homeless (National Health Care for the Homeless Council, 2009).

Data Collection

The interviewers associated with NCAB recruited individuals at their local HCH projects and sites where health care services relevant to homeless populations are provided. Eligibility to participate in the study was met if individuals were currently homeless, older than the age of 18 years, and self-reported that they were an enrolled patient of the specified HCH project. If an individual met all three eligibility criteria, the interviewer read the informed consent aloud, answered any questions or concerns about the study, and asked for verbal consent from the potential participant. Research interviewers informed individuals that participation in the study was voluntary and that they could discontinue participation at any time.

The institutional review board of the Metro Public Health Department of Nashville and Davidson County approved this study and allowed use of a verbal consent because of the sensitive nature of the survey content and the vulnerable population being surveyed. If an individual did not understand the informed consent for any reason, then interviewers did not continue with the survey and documented the event. If an individual did not wish to participate, interviewers recorded the refusal on a tracking form, including specific reasons why. If a participant knew the interviewer or felt uncomfortable with a specific interviewer, given the sensitivity of the survey questions, attempts were made to find a different individual to administer the survey. All participants were offered a copy of the consent form for future reference. Most surveys were administered in English. However, when non-English, Spanish-speaking individuals were eligible to participate, attempts were made to find a Spanish-speaking interviewer to administer the survey.

Because of the possibility that participants could become emotionally distressed and retraumatized recalling violent experiences, research interviewers provided a list of local

resources after participants completed their surveys. Each site developed a list of resources tailored to the specific services offered by the local community and HCH project (e.g., domestic violence shelters, legal assistance, and mental health services). Interviewers received research training from the National Health Care for the Homeless Council, which included topics such as research with human subjects, informed consent, data collection, and confidentiality. One of the NCAB interviewers was principal investigator of the study and received Collaborative Institutional Training Initiative (CITI) certification as well. Personally identifiable information was not collected through the survey and all responses were anonymous.

The total number of participants in the final sample was 516. This number represents roughly 100 participants from each city. Fifty-eight percent of participants required the assistance of the survey administrator to complete the survey and 89% completed the survey in English.

Analytic Plan

Descriptive statistics were computed on all study variables. Three dependent variables were used: experience of violence, experience of rape, and suffering after an attack. Bivariate analysis was conducted to evaluate the associations between the three dependent variables and myriad sociodemographic characteristics. Because the three dependent variables were dichotomous indicators, four multivariate logistic regressions were conducted to evaluate whether certain characteristics increased the odds of violence, knowing one's perpetrator, and suffering after an attack. A series of logistic regression analyses were then performed using groups of conceptually related independent variables (e.g., regressing experience of violence on gender and race). These exploratory models were used to guide selection of variables for inclusion into the final regression models. The following variables were selected as independent variables: race, sex, length of homelessness, place of attack, and knowing the perpetrator. Evidence of significant predictors (p values) was derived using chi-square. All data analysis was conducted using SPSS 19.0.

RESULTS

Of the total sample, 64% of participants were male, 35% female, and 1% transgender. Nearly one-half (49%) of the participants self-reported as African American, 36% as White, 12% as Hispanic/Latin American, and 3% reported they fell into the category of Other. The median age of participants was 43 years old, with a range of 18–87 years. The median length of homelessness reported by participants was 1.75 years, with a range of 1 day to 47 years.

Witnessing Violence

Participants were asked if they had ever witnessed a violent attack on another homeless individual. For the purpose of this survey, a *violent attack* was defined as an event in which one individual uses force to intentionally harm another individual physically, sexually, or psychologically. Sixty-two percent of respondents reported witnessing an attack. Of those, 32% witnessed an attack in the 30 days prior to the survey and 81% witnessed an attack within the past year. More than half (56%), who responded that they had witnessed a violent attack, reported witnessing an attack on another homeless individual 1–3 times.

TABLE 1. Time Elapsed Since Most Recent Attack and Number of Times Victimized

	Frequency	Percentage (Cumulative) ^a
Most recent attack		
Within past 30 days	71	30%
Within past 6 months	65	27% (56%)
Within past year	39	16% (73%)
More than 1 year ago	60	25% (98%)
Number of times victimized		
1–3 times	179	72%
4–6 times	26	11%
7–9 times	7	3%
10 or more times	14	6%

^aPercentages do not add up to 100 because response categories were created based on open-ended responses. Responses that could not be categorized are not presented.

Personal Experience of Violent Attack

Participants were also asked if they had ever been the *victim* of a violent attack while homeless. Forty-nine percent of respondents reported being the victim of an attack. When victims were asked about the most recent time they were attacked, 30% reported being attacked within 30 days of the survey and 73% within the past year (this percentage is cumulative and includes those who reported being attacked with 30 days of the survey). Seventy-two percent of victims reported being attacked 1–3 times while homeless (see Table 1).

Males and females experienced violence at virtually the same rate (49% and 48%, respectively), whereas African American participants experienced violence more (51%) than White participants (46%). However, White participants reported experiencing more violence than Hispanic/Latino participants (46% and 44%, respectively). When experience of violence was stratified by age and length of homelessness, the average age for victims was 4 years higher than that for nonvictims (44 vs. 40 years old, respectively) and the average length of homelessness for victims was 1.6 times greater than for nonvictims (4.5 vs. 2.9 years, respectively). In addition, there was a statistically significant difference in median age and length of homelessness between those participants who reported experiencing violence while homeless and those who did not (see Table 2).

Characteristics of Violent Attacks

More than half of victims (58%) reported that they were attacked in a street or alley, whereas 16% reported being attacked in a public park and 13% reported being attacked in a homeless shelter. Victims were also asked to provide the types of injuries they incurred as a result of their most recent attack from a predetermined list of injuries. Although

TABLE 2. Demographic Characteristics of Those Who Have and Have Not Experienced Violence

	Experienced Violence (n = 253)	Never Experienced Violence (n = 287)	χ^2
Race			3.70
African American	127 (51%)	124 (49%)	
Latino	27 (44%)	34 (56%)	
White	85 (46%)	101 (54%)	
Gender			2.67
Male	161 (49%)	167 (51%)	
Female	87 (48%)	94 (52%)	
Age (years)	Median age: 43		11.09**
≥ 43 Years	144 (56%)	115 (44%)	
<43 Years	103 (41%)	149 (59%)	
Number of years homeless	Median length of homelessness: 2 years		11.63**
≥ 2 Years	139 (57%)	107 (43%)	
<2 Years	103 (41%)	147 (59%)	

** $p < .01$.

16% of victims were not injured, more than half of respondents (56%) reported bruising. Approximately 30% were mentally traumatized, 15% were raped or sexually assaulted, and 13% incurred a head or brain injury. Victims also reported broken bones, broken teeth, being stabbed, and being shot (see Table 3). In addition, victims were asked if they were robbed during their most recent attack and, if so, what specific items were stolen. Forty-nine percent of victims reported that they were, in fact, robbed during the attack. Commonly reported items stolen were money (75%), personal identification documents (28%), medication (21%), and clothing (21%).

Victims were also asked to list reasons why they thought they were attacked. Again, the responses came from a predetermined list, which included space for participants to report additional reasons. The top four reasons victims thought they were attacked included the following: robbery (32%), attacker was under the influence of alcohol or drugs (28%), hate crime (15%), attacker had a mental illness (12%), and competition for space (5%). The following explanations were additional qualitative responses provided by victims and each reported by less than 5% of the sample: sexual assault, because of an argument, racially motivated, and to prevent victim from helping another person. Almost a quarter of the victims (24%) were not sure why they were attacked.

In addition, 31% of victims reported that they knew their attackers. Of those, a substantial minority (40%) identified the attacker as a friend; a small minority reported their attacker was an intimate partner; and a very small minority reported that their attacker was a family member (see Table 4). Victims were also asked about the housing status of their

TABLE 3. Locations Where Violent Attacks Occurred and Injuries Incurred as a Result of Attacks

	Frequency	Percentage ^a
Location of attacks		
Street or alley	141	58%
Public park	38	16%
Shelter	32	13%
Abandoned building	18	7%
House ^b	10	4%
Jail	7	3%
Parking lot ^b	6	2%
Bus station ^b	4	2%
Clinic	3	1%
Other	13	5%
Injuries from attacks		
Bruises	137	56%
Mental trauma	76	31%
Raped/sexually assaulted	36	15%
Concussion/head injury	32	13%
Broken bones	32	13%
Tooth/teeth broken	22	9%
Stabbed	20	8%
Scraped or cut ^b	8	3%
Shot ^b	2	1%
Other	12	5%
Not injured	38	16%

^aPercentages do not add up to 100 because participants could choose more than one response.

^bThese responses arose from themes found in the qualitative data.

TABLE 4. Relationships of Attackers to Victims—Out of Those Who Reported Knowing Their Attackers (*n* = 72)

	Frequency	Percentage
Friend	29	40%
Intimate partner	11	15%
Family member	4	6%
Other	4	6%
No formal relationship ^a	24	33%

^aThis response arose from a theme found in the qualitative data.

TABLE 5. Where Victims Sought Assistance Sought After Attacks (*n* = 105)

	Frequency	Percentage ^a
Emergency room	63	60%
Police	35	33%
Community clinic	11	11%
Friend/family member	10	10%
Health care for the homeless clinic	9	9%
Shelter ^b	3	3%
Other	12	11%

^aPercentages do not add up to 100 because participants could choose more than one response.

^bThis response arose from themes found in the qualitative data.

attackers. Thirty-two percent reported that the attacker was also homeless and 30% reported the attacker was housed, a quarter of whom were reported to be police officers.

Assistance After the Attack

Forty-six percent of victims sought help after their most recently reported attack. More than half of victims (60%) who sought assistance used the emergency room, more than 30% went to the police, and 30% went to a friend/family member or clinic (see Table 5). Eighty-two percent of those individuals who reported seeking assistance stated that they were successful in receiving assistance.

Sixty-eight percent of those who sought and received help were unable to pay the associated medical bills. We asked victims if they were currently (at the time of the survey) suffering consequences from a violent attack. Half of the victims (49%) reported that they were still suffering. Choosing from a predetermined list, 73% of those reported suffering from psychological trauma, 32% from resultant physical disability, and 28% from burdensome financial debt.

Finally, we asked victims if they were familiar with the Crime Victims Fund, which is a federal program to assist victims of violent crime (and sometimes family members of victims) with resulting medical bills, mental health services, and lost wages. However, only 14% of victims were aware of the Crime Victims Fund—9% of which had actually attempted to receive funds. None were successful.

Multivariate Modeling

Four multivariate logistic regressions were conducted on the study sample to estimate the risk factors for experiencing violence, experiencing rape, knowing the perpetrator, and suffering after an attack. Table 6 shows the results of these multivariate logistic regressions. The results demonstrate that being homeless for a long time (more than 2 years) and older age led to an increased risk of experiencing violence. Moreover, increased length of homelessness and female gender predicted experiencing rape specifically. Finally, only female gender was a significant predictor of knowing one's perpetrator and suffering consequences after an attack.

TABLE 6. Multivariate Logistic Regression Models for Predicting Violence, Experiencing Rape, Knowing the Perpetrator, and Experiencing Suffering After an Attack

Characteristic	Violent Victimization		Experiencing Rape		Knowing the Perpetrator		Suffering After Attack	
	Regression Coefficient	SE	Regression Coefficient	SE	Regression Coefficient	SE	Regression Coefficient	SE
African American (<i>n</i> = 127)	.994	0.188	.549	0.488	0.870	0.306	1.424	0.287
Female (<i>n</i> = 87)	1.131	0.197	89.770***	0.814	2.122*	0.313	2.138*	0.309
≥43 years (<i>n</i> = 144)	1.650**	0.194	1.374	0.503	0.841	0.275	1.680	0.317
Homeless ≥2 years (<i>n</i> = 139)	1.676**	0.189	3.308*	0.517	1.740	0.325	1.087	0.303
Knowing the attacker (<i>n</i> = 75)			0.166**	0.586			−1.796	0.586
Sheltered during attack (<i>n</i> = 55)			0.618	0.596	0.370	0.108	1.521	0.354

p* < .05. *p* < .01. ****p* < .001.

DISCUSSION

The results from this study provide a national picture of the prevalence of violence among individuals who are homeless and the particular characteristics that predict increased risk of experiencing a violent attack, experiencing rape, knowing one's attacker, and suffering consequences after an attack. Half of the participants in this study reported being the victim of a violent attack while homeless. This corroborates findings from previous research demonstrating that homeless individuals may be at increased risk of experiencing violence (Hwang, Orav, O'Connell, Lebow, & Brennan, 1997; National Coalition for the Homeless, 2012). Our results also demonstrate that specific populations within the homeless community are at increased risk to experience violence. Those who have been homeless for a longer time and are older in age were most likely to experience violence. This highlights the importance of targeted outreach and violence prevention efforts for specific populations such as those experiencing chronic homelessness. Thus, our findings indicate that homeless health care providers may need to increase screening for experiences of violence during primary care visits. Screening tools have been developed that can be used during intake assessments by providers or social service agencies that ask about various experiences, health, or social conditions that may be plaguing individuals or families (Helfrich & Beer, 2007; Martinez, Hosek, & Carleton, 2009). The development of a screener that

specifically asks about the incidence of violence and associated characteristics would aid health care practitioners in identifying those who are at increased risk.

Relatedly, research has found that social support is associated with a lower likelihood of victimization (Hwang et al., 2009; McCarthy, Hagan, & Martin, 2002; Wenzel, Tucker, Elliott, Marshall, & Williamson, 2004). This may indicate a need to provide victimization prevention programs and interventions that focus on developing and harnessing social or familial support to aid in a reduction in the rate of violence among individuals who are experiencing homelessness. Social support based interventions have been successful in increasing physical activity, improving diabetes self-management, and bettering health outcomes for domestic violence shelter residents (Constantino, Kim, & Crane, 2005; Kahn et al., 2002; McEwen, Pasvogel, Gallegos, & Barrera, 2010). These interventions can take the form of support groups, risk-factor screening counseling, and group education sessions at community events (Kahn et al., 2002). Based on our results, these types of preventative programs should be aimed at those who have been homeless for a considerable amount of time, those who are older, and women who are at increased risk of experiencing rape, knowing one's attacker, and to suffer consequences after an attack.

Individuals who are chronically homeless are less likely to engage in primary care and mental health services; therefore, clinic directors should ensure dedicated staff time to conduct outreach to identify those individuals who are chronically homeless (Caton, Wilkins, & Anderson, 2007). These outreach workers should be aware of the high likelihood for victimization and use trauma-informed approaches to assess and refer individuals to treatment. Trauma-informed care is a valuable health care delivery technique that can be used to create a safe environment and avoid retraumatization for patients who have been victims to adverse events. This might include first screening for trauma among those who are known to be at increased risk and then providing educational materials, a sense of safety, and support to aid in mobilization and realization of their own strength and resources. In addition, providers can provide guidance to aid in development of positive coping mechanisms for those who report violence victimization. A large portion of the chronically homeless population has mental health issues and previous research has found that persons with severe mental illnesses are more likely to be victimized than the general population (Caton et al., 2007, Teplin, McClelland, Abram, & Weiner, 2005). Although we did not ask about mental health diagnoses, this could explain the higher rate of victimization in our study among those who were chronically homeless.

Our findings also revealed that homeless women should also be targeted by preventive and treatment interventions. The results of this study demonstrate that women are more likely to experience rape. Relatedly, to our knowledge, this is the first study to examine whether rape within homeless populations is related to knowing your attacker. Seventy-nine percent of women who reported a rape in the United States in 2009 indicated that they knew their attacker and only 21% of all rapes and sexual assaults were committed by strangers (Rand & Truman, 2010). This is strikingly different from our findings that 21% of the female victims reported knowing their attacker and 78% of all rapes were committed by strangers, indicating that rape committed by strangers is much more prevalent in homeless populations (Catalano, Smith, Snyder, & Rand, 2009). This difference could be explained by the fact that women who are homeless are unsheltered and lacking a private residence to protect them from perpetrators who otherwise would not have access to them. Thus, management personnel of shelters and clinical providers serving females and families should look for signs that their residents have been victims of sexual assault and be prepared to

connect victims to medical care and mental health services. Mental health consequences of violence victimization include posttraumatic stress disorder (PTSD), depression, anxiety, substance abuse, and panic disorders, with females at a much higher risk for PTSD and depression than males (Kilpatrick & Acierno, 2003). In addition, health care providers should increase access to STD and pregnancy screening for victims of sexual assault and rape. Cross-sector collaboration between public health agencies, homeless service providers, and women and family service entities is needed to address and stem the prevalence of rape against individuals experiencing homelessness. Interdisciplinary partnerships of this kind have been demonstrated to promote health on various levels (individual *and* community) long term (Gillies, 1998). Accordingly, agencies that serve homeless women should provide wraparound, comprehensive services that can help prevent and, if necessary, identify and treat sexual assault and the long-term suffering associated (e.g., resultant mental health issues) with victimization.

Finally, providers and clinics frequented by individuals who are homeless may need to increase support for victims of violence who are seeking medical and wage reimbursement from state victim compensation programs (Office of Justice Programs, Office for Victims of Crime, 2004). This study found that almost 70% of victims who received medical help were unable to pay their medical bills and only 14% were aware of the victim compensation fund and none were successful in receiving funds from it. This indicates a need for education-related outreach that brings awareness to the existence of programs that are available to assist individuals who have experienced violence. The Office for Victims of Crime provides educational materials for providers regarding the Crime Victims Fund and may be a possible resource for providers to increase awareness of violence and victim-related programs and outreach. In addition, many police departments have crime victim advocates whose sole mission is to provide support to victims of crime. Partnerships between homeless service providers may aid in increased awareness of victim financial assistance.

Macro Level Implications

It has long been recognized that providing health insurance and access to health services to individuals in need would aid in the treatment of physical and psychological injuries (Andrulis, 1998; Bernstein, Chollet, & Peterson, 2010). Ongoing treatment, appropriate referrals, and appropriate use of medical services without fear of large medical bills would improve access to health care and, subsequently, the health outcomes for victims of violence. The 2014 Medicaid expansion provided for in the Affordable Care Act will result in health insurance eligibility for persons experiencing homelessness, but adequate outreach, education, and benefit design will be required to address the extensive health care needs of victims of violence (Kaiser Commission on Medicaid and the Underinsured, 2011). Treatment for psychological disorders associated with violence, physical therapy, recuperative care, and other services are needed to eliminate extended suffering of those who have experienced violence and should be more widely available for vulnerable and at-risk populations to access.

In the last several decades, laws have been passed that criminalize homelessness. This trend may have led to decreased use of public spaces, forced homeless individuals to the edges of society where they may be more likely to be victimized, and created a more antagonistic relationship between homeless populations and law enforcement. Moreover, previous research reports that individuals who are homeless may be less likely to report

acts of violence because of strained law enforcement relationships or fear of imprisonment (Murray, 1996; Zakrison, Hamel, & Hwang, 2004). Our findings corroborate these findings in that only 33% of victims who sought help after their attacks went to the police, and 30% of those who were attacked by a nonhomeless individual reported being attacked by a police officer. This implies that efforts are needed to strengthen relationships between local law enforcement officers and individuals who are homeless. This could take the shape of organizing around initiatives that attempt to decriminalize homelessness and sensitize law enforcement officers. For instance, Maine and California have implemented police training protocols specifically geared toward ameliorating the strained relationship between law enforcement officials and homeless populations, and Los Angeles has implemented the tracking and reporting of crimes that are specifically aimed toward individuals who are homeless (National Coalition for the Homeless, 2012). More organizing of this kind is needed.

Limitations of the Current Study and Future Research Needed

There are various limitations to this study. All data was self-reported by participants, meaning injuries and suffering could not be verified by clinical diagnosis. Also, we limited eligibility to individuals who were enrolled patients within local Health Care for the Homeless projects. Therefore, we did not get an accurate rate of victimization within the homeless population for each community sampled. Surveying outside of this patient population would provide a better understanding of the experiences of violence of individuals who are homeless and not currently engaged in care. In addition, the survey did not include a follow-up question on why those who reported being victimized did not seek treatment if they reported not doing so. This information could have helped us to better understand the barriers that individuals who are homeless face in trying to seek care when victimized. The biggest strength of this study was that its design and data collection were led by individuals who have experienced homelessness. The NCAB members initiated this project, developed the survey questions, recruited participants, and administered surveys. NCAB strives to provide a voice to those who are marginalized because of their housing status. Leading a study to explore the experiences of violence among those who are homeless has enabled NCAB to teach others about the vulnerability of this population and potentially make an impact on the health care and policy practices that affect it.

Future research is needed to better understand the root causes of violence against individuals who are homeless and to investigate the circumstances and motivators of perpetrators. In addition, the implementation of programs that are targeted toward those who are at increased risk is needed and program efficacy evaluation must be carried out to understand what specific prevention strategies are most effective.

CONCLUSION

In combination, the findings from this study identify that certain individuals are at an increased risk of experiencing violence, knowing one's attacker, and experiencing consequences after an attack. Results from this study should be used to develop health practice and policy recommendations to reduce the incidence of violence against people who are homeless and to promote just and humane recourse for victims of violence. The potential

programmatic, policy, and intervention implications for this study include the need for the following: development of screening tools to aid in the identification of those most at risk of experiencing violence; increased awareness of crime victim funding; creation and maintenance of cross-sector relationships to aid in the prevention of violence; and, finally, amelioration of the relationship between law enforcement agencies and homeless populations.

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APPENDIX S

Good Neighbor Agreement terms may include but will not be limited to the following:

1. **Designated 24-hr. dispatch line**
2. **Added resources and personnel (from APD, ACS, and FCS Street Outreach) will be designated to the Public Safety District encompassing Siesta Hills, Elder Homestead, South San Pedro, and Parkland Hills neighborhoods to patrol, conduct outreach, and do daily cleanup of the neighborhoods. The Public Safety District will be prioritized in terms of FCS Street Outreach.**
3. **There will be a comprehensive 24-hr. shuttle service in place upon the opening and throughout the operation of the Gateway Center** - this is not just for bringing people to Gateway and to the westside shelter, but to take them off-site to other services OR if they leave/choose not to accept services at Gateway - must be put on shuttle. Must run frequently and be easy to access.
4. **People must be referred to get into Gateway - it is not just a walk-up/first-come first-serve operation** (esp. in the case it could fill up, people can't get in, where do they go?). This center is not for people not checked into a program. There must be a designated intake officer or team of intake officers onsite. This includes referral by other homeless support providers and law enforcement.
5. **Residents will engage in sustained programming - this is not just a bed to sleep in, clients are there to engage in services** (i.e. job/workforce training, trauma mitigation, parenting classes, financial education, service learning - structured environment). There should be provisions for daycare to provide for residents.
6. **No daily services - i.e. food service/meal site except for persons who are residents of Gateway**
7. **Relationships of partner providers must be clearly defined in writing, including responsibilities and expectations.**
8. **Implementation of a Community Oversight Committee - serves as guidance/advisory/oversight council** (can establish guidelines/standards; outline what we hope to achieve; establish Corrective Action Plans, etc.) This should include the following:
 - Should have two spots for reps from each neighborhood - South San Pedro, Parkland Hills, Siesta Hills, Elder Homestead, Trumbull Village. Open/standing slots that cannot be replaced by others
 - City designated Manager of or Contracted Provider manager of Overnight Shelter Services,
 - Liaison for Providers in Building
 - Liaison for Neighborhood Businesses
 - City, County, State reps
 - Gateway graduate or resident in program
 - Exec Director of Gateway
9. **TRANSPARENCY of population being served, and how people are receiving treatment - via HCC or CABQ website.** Shows numbers of people coming in, what services they are being provided, where they get referred, their timeline of services, etc. (no identifying info such as names, but basic demographic information - age, sex, homeless status, addiction y/n). Data that shows the effectiveness of the Gateway model. This will help to quantify part of the success rate when the population is to be increased, allowing for assessment of the effectiveness of the overnight shelter.
10. **Provide 24/7 onsite, non-resident professional staff for the front desk for the overnight shelter.**
11. **Provide 24/7 on-site trained mental health professionals.**
12. **Secure Fencing for the overnight shelter resident's exterior area to maintain safety and security of current and incoming residents.**
13. **Provide 24/7 on-site professional security including exterior "centrally monitored" security cameras for the full perimeter of the facility.**
14. **Property Maintenance** - Property shall be kept maintained, clean, and in good condition; no personal property of tenants or guests shall be permitted outside the gated property boundaries; public sidewalks and pathways to property will be monitored and remain clear of debris

APPENDIX T

PARKS, SCHOOLS, AND DAYCARES WITHIN 1.5 MILES OF PROPOSED GATEWAY FACILITY

CITY PARKS

1. Ross Park	.24 miles
2. Wilson Park (next to Wilson Middle School)	.29 miles
3. Siesta Hills Lassetter Park(near New Day youth Shelter)	.34 miles
4. New Day Park (next to New Day youth Shelter)	.44 miles
5. Eunice Kalloch Park (across Whittier Elem School)	.48 miles
6. Vail Park	.51 miles
7. Park@ Ross Pl, Pampas Dr., Monroe Intersection	.54 miles
8. Phil Chacon Park (nest to Van Buren Middle School)	.72 miles
9. Jack and Jill Park (past Westside pickup)	1.03 miles
10. Bullhead Park	.24 miles
11. John Carillo Park (next to Emerson)	1.25 miles

SCHOOLS

1. Cesar Chavez Community School -	500 feet
2. Wilson Middle School -	.14 miles
3. Holy Ghost Catholic school -	.4 miles
4. Whittier Elementary School -	.47 miles
5. Kirtland Elementary School -	1.04 miles
6. Emerson Elementary School -	1.07 miles
7. Van Buren Middle School -	1.2 miles
8. Highland High School -	1.21 miles
9. The Church Christian Childrens Academy	1.3 miles

CHILDCARE AND PRESCHOOLS (might include after school care)

1. Eastern Childhood Development Center -	.1 mile
2. Happy Feet Daycare –	.5 miles
3. La Petite Academy of Albuquerque	.6 miles
4. Little Flower Learning Center -	1.2 miles
5. Alvarado Day School Day Care	1.2 miles
6. Head Start Center – 3530 Gibson SE -	1.4 miles
7. Mary Francis School	1.5 miles

Not included due to on base or at base entrance

1. Abq Bear Middle School	.4 miles at Truman Gate
2. Wherry Elementary School	1.3 miles at Louisiana Base Pass
3. AFRL Stem Outreach	ON BASE

APPENDIX U

PROVIDERS OF SERVICES TO THE HOMELESS BY CITY COUNCIL DISTRICT

Refer to Google Map at the bottom of this document and also found at this link:

<https://www.google.com/maps/d/edit?mid=1UY2rBBJvh4sJwsmQwN0ieemwGcaivFPT&usp=sharing>

Code Key (each map entry was designated to the category it best fit to avoid multiple listings. Each number correlates to that category:

- 1: Men's Shelter
- 2: Women's Shelter
- 3: Youth Shelter
- 4: Behavioral & Mental Health Services
- 5: Drug/Alcohol Treatment
- 6: Health Centers
- 7: Social Services

DISTRICT 1- Lan Sena: 1 Service

Westside Emergency Shelter (1)

DISTRICT 2- Isaac Benton: 17 Services

Albuquerque Center for Hope and Recovery (5)
Albuquerque Opportunity Center (1)
Albuquerque Healthcare for the Homeless: Harm Reduction Outreach (6)
Central New Mexico Treatment Center (5)
Child & Family Development Division (7)
Coronado Park Homeless Ministry: Meal Site (7)
Crossroads for Women (2)
Family Promise of Albuquerque (2)
Good Shepherd Center (1)
John Marshall Health and Social Services Center: Meal Site (7)
NM Human Services Department (7)
S.A.F.E. House (2)
St. Martin's Hospitality Center (1)
Steelbridge (1)
Steelbridge Resource Center (1)
The Rock at NoonDay (1)
UNM Psychiatric Center (4)

DISTRICT 3- Klarissa Pena: 1 Service

Catholic Charities of New Mexico (7)

DISTRICT 4- Brook Bassan: 1 Service

Central Desert Behavioral Health Hospital (4)

DISTRICT 5- Cynthia D. Borrego: 0 Services

DISTRICT 6- Pat Davis: 41 Services

Addiction Solutions (5)

Albuquerque Family Mental Health Clinic (4)

Albuquerque Heath Services (5)

Albuquerque Indian Center (6)

All Nations Wellness and Healing Center (6)

Bernalillo County Department of Behavioral Health Services (4)

Calamus Center for Integrative Mental Health (4)

CARE Detox (5)

Compassion Center with Rev. Joanne Landry (7)

Conciencia Mental Health LLC (4)

County Abuse Programs (5)

County Social Services (7)

Department of Veterans Affairs (7)

East Central Health and Social Service Center (6)

East Central Multi Services Center (4)

First Nations Community Health Source (6)

First Nations Community Healthsource- Zuni Clinic (6)

Food Distribution Center- Fray Antonio Kitchen: Meal Site (7)

Gateway Gibson Heath Hub (coming soon) (1)

God's Warehouse: Meal Site (7)

Haven Behavioral Hospital of Albuquerque (4)

Hopeworks (1)

La Mesa Presbyterian Church: Meal Site (7)

Maya's Place (2)

New Creation Church: Meal Site (7)

New Day & Drop In Outreach (7)

New Day Youth & Family Services (3)

One Hope Centro de Vida Health Center (6)

Perfectly Imperfect LLC NM (4)

Public Health Department (4)

Restorations Ministry Church: Meal Site (7)

Shadow Mountain Recovery at Albuquerque (5)

St. Martin's Hospitality Center- Yale Campus (1)

Therapeutic Living Services Inc. (4)

Transgender Resource Center of New Mexico (7)

Turquoise Lodge Hospital (5)

UNM Women's Resource Center (2)

VA Hospital- Healthcare for Homeless Veterans (6)

Vocational Rehabilitation (7)
Young Children's Health Center (6)
Zia Community Cares LLC (7)

DISTRICT 7- Diane Gibson: 15

ABQ Behavioral Services/ABQ Psychiatric Services LLC (4)
Albuquerque Behavioral Health (4)
Bernalillo County Wellesley Health Center (6)
Child Protective Services (7)
Coalition to Stop Violence Against Native Women (2)
Family Promise (2)
First Nations Community Healthsource Truman Clinic (6)
Focused Recovery of New Mexico (5)
Heights Mental Health (4)
New Mexico Coalition to End Homelessness (7)
NMAIMH (4)
NM Income Support Division- Human Services Department (7)
Recovery Based Solutions (5)
Shadow Mountain Recovery Intensive Outpatient Center (5)
Women's Housing Coalition (2)

DISTRICT 8- Trudy E. Jones: 1 Service

Turning Point Recovery Center (5)

DISTRICT 9- Don Harris: 3 Services

Barrett House (2)
Catholic Community Services (7)
Veterans Integration Centers (VIC) (1)

UNINCORPORATED/No Council Representation (South Valley): 5 Services

Amistad Runaway Facility (3)
First Choice Community Healthcare South Valley Medical Center (6)
Joy Junction Shelter (1)
Recovery Services of New Mexico Five Points Clinic (5)
Recovery Services of New Mexico Isleta (5)

DISTRICT 1- Lan Sena: 1 Service	1.25% of Providers
DISTRICT 2- Isaac Benton: 17 Services	21.25% of Providers
DISTRICT 3- Klarissa Pena: 1 Service	1.25% of Providers
DISTRICT 4- Brook Bassan: 1 Service	1.25% of Providers
DISTRICT 5- Cynthia D. Borrego: 0 Services	0.0 % of Providers
DISTRICT 6- Pat Davis: 41 Services	51.25% of Providers
DISTRICT 7- Diane Gibson: 15	18.75% of Providers
DISTRICT 8- Trudy E. Jones: 1 Service	1.25% of Providers

DISTRICT 9- Don Harris: 3 Services

3.75% of Providers

Total providers of Homeless services = 80

Percentage of Providers located in District 6 = 68.3%

OTHER FACILITIES OF NOTE: Halfway Homes, recovery homes, pickup-dropoff sites

DISTRICT 1: 0

DISTRICT 2:

La Posada Halfway House

Oxford House Hazeldine

DISTRICT 3: 0

DISTRICT 4: 0

DISTRICT 5:

Oxford House Oasis

Oxford House Oasis Hills

DISTRICT 6:

Crossroads for Women (Maya's Place & The Pavillions)

Oxford House Pennsylvania

Oxford House Tahiti

Oxford House Turquoise

Tiny Home Village

Transitional Living Services- Central

Transition for Living Federal Halfway House

Wainwright Manor

Jack and Jill Park Shelter Transfer Point

Phil Chacon Shelter Transfer Point

Wilson Park Shelter Transfer Point (It should be noted that the City claims that these shelter PU/DO points are now closed. However, residents of the area report no cessation in the frequency of homeless camping in these parks, and that the damage due to magnetization has not been mitigated by the City)

DISTRICT 7:

Oxford House Candelaria

Oxford House Fair Heights

Oxford House Indian School

Oxford House Montgomery Park

Oxford House Mountain Vista

Oxford House Palomas
Oxford House Zimmerman

DISTRICT 8: 0

DISTRICT 9:
Oxford House Constitution
Oxford House Elizabeth
Oxford House Ponderosa
Oxford House Snowheights

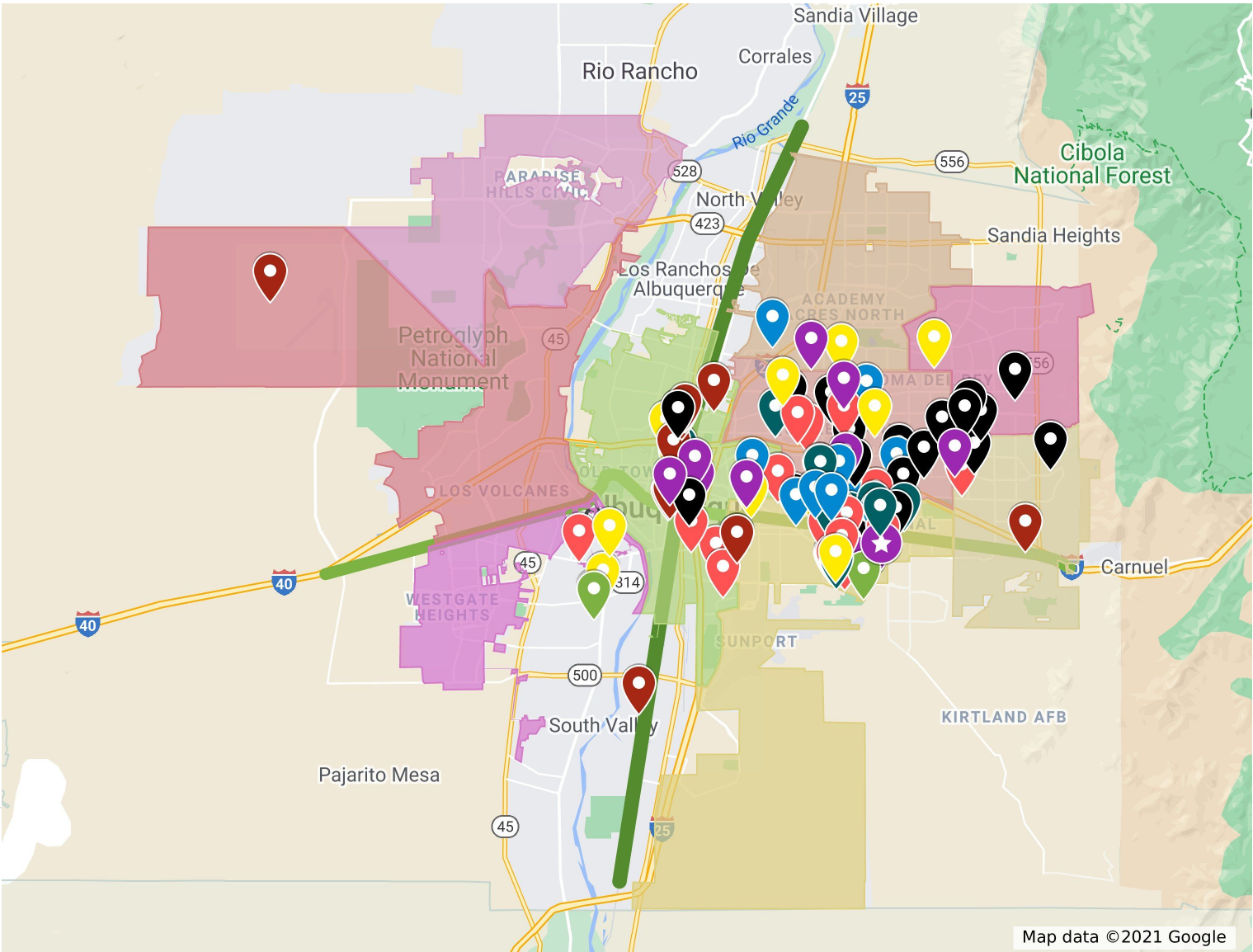
City-wide Services Map

Men's Shelter

- Albuquerque Opportunity Center
- Gateway Shelter
- Good Shepherd Center
- HopeWorks
- Joy Junction Shelter
- St Martin's Hospitality Center
- St. Martin's Hospitality Center - Yale Campus
- SteelBridge
- Steelbridge Resource Center
- The Rock at NoonDay
- Veterans Integration Centers (VIC)
- Westside Emergency Shelter

Women's Shelter

- Barrett House
- Coalition To Stop Violence Against Native Women
- Crossroads for Women



Locations of City, County, Federal, private, and faith-based services for the unhoused population of Albuquerque. To avoid confusion or double-counting, each site is assigned to only one category, which is best suited to the service based on description or website

Family Promise of
Albuquerque



Family Promise of
Albuquerque



Maya's Place



S.A.F.E. House



UNM Women's Resource
Center



Women's Housing Coalition

information.

Current Breakdown, # of Misc Services and # of Transitional homes, public & private:

D1- 1,0

D2- 15,2

D3- 0,0

D4- 1,0

D6- 37,7

D7- 13, 7

D8- 1,2

D9- 2,5

Youth Shelters



Amistad Runaway Facility



New Day Youth & Family
Services

Behavioral & Mental Health Services



Albuquerque Behavioral
Health



ABQ Behavioral Services/ABQ
Psychiatric Services, LLC



Albuquerque Family Mental
Health Clinic



Bernalillo County Department
of Behavioral Health Services



Calamus Center for Integrative
Mental Health



Central Desert Behavioral
Health Hospital



Conciencia Mental Health LLC



East Central Multi Services
Center



Haven Behavioral Hospital of
Albuquerque



Heights Mental Health



NMAIMH



Perfectly Imperfect LLC, NM



Public Health Department



Therapeutic Living Services
Inc



UNM Psychiatric Center

Drug/Alcohol Treatment



Addiction Solutions



Albuquerque Center for Hope
and Recovery



Albuquerque Health Services



CARE Detox




Central New Mexico
Treatment Center



County Abuse Programs



Focused Recovery of New
Mexico

 Recovery Based Solutions



Recovery Services of New
Mexico Isleta



Shadow Mountain Recovery at
Albuquerque



Shadow Mountain Recovery
Intensive Outpatient Center



Turning Point Recovery Center



Turquoise Lodge Hospital



Recovery Services of New
Mexico Five Points Clinic

Halfway Houses/Transitional Housing



ABQ Indian Center/Tiny Home
Village



Crossroads for Women
Transitional Living



Wainwright Manor



Oxford House Montgomery
Park
















Transition For Living






Transitional Living Services
Inc







Oxford House Fair Heights

-  Oxford House Palomas
-  Oxford House Constitution
-  Oxford House Snowheights
-  Oxford House Morris
-  Oxford House Pennsylvania
-  Oxford House Turquoise
-  Oxford House Candelaria
-  Oxford House Indian School
-  Oxford House Zimmerman
-  Oxford House Elizabeth
-  La Pasada Halfway House
-  Oxford House Tahiti
- 

Oxford House Mountain Vista

-  Oxford House Ponderosa
-  Oxford House Hazeldine
-  Oxford House Oasis Hills
-  Tiny Home Village
-  La Pasada Halfway House

Health Centers

- 
Albuquerque Healthcare for
the Homeless: Harm
Reduction Outreach
-  Albuquerque Indian Center
- 
All Nations Wellness and
Healing Center
- 
Bernalillo County Wellesley
Health Center



East Central Health and Social
Service Center



First Choice Community
Healthcare - South Valley
Medical Center



First Nations Community
HealthSource



First Nations Community
HealthSource (Zuni Clinic)



First Nations Community
Healthsource Truman Clinic



One Hope Centro de Vida
Health Center



Young Children's Health
Center



VA Hospital- Health Care for
Homeless Veterans

Social Services



Catholic Charities of Central
New Mexico





Catholic Community Services




Child & Family Development
Division


 Child Protective Services



Compassion Center w/Rev.
Joanne Landry



Coronado Park Homeless
Ministry: Meal Site


 County Social Services



Department-Veteran Affairs
Lib



Food Distribution Center - Fray
Antonio Kitchen: Meal Site


 God's Warehouse: Meals



John Marshall Health and
Social Services Center: Meal
Site


La Mesa Presbyterian Church:
Meal Site


New Creation Church: Meal
Site


New Day and Drop In Outreach


New Mexico Coalition to End
Homelessness


NM Human Services
Department



NM Income Support Division -
Human Services Department



Restoration Ministries Church:
Meal Site



Transgender Resource Center
of New Mexico



Vocational Rehabilitation



Zia Community Cares LLC



Jack and Jill Park: Shelter
Pickup Point



Phil Chacon Park: Pick-up
point for shelters



Wilson Park: Shelter Pickup
Point

Districts & Quadrants



Lan Sena



Isaac Benton



Klarissa Peña



Brook Bassan



Cynthia D. Borrego



Pat Davis



Diane G. Gibson



Trudy E. Jones



Don Harris




NW/NE Line




NW/SW Line

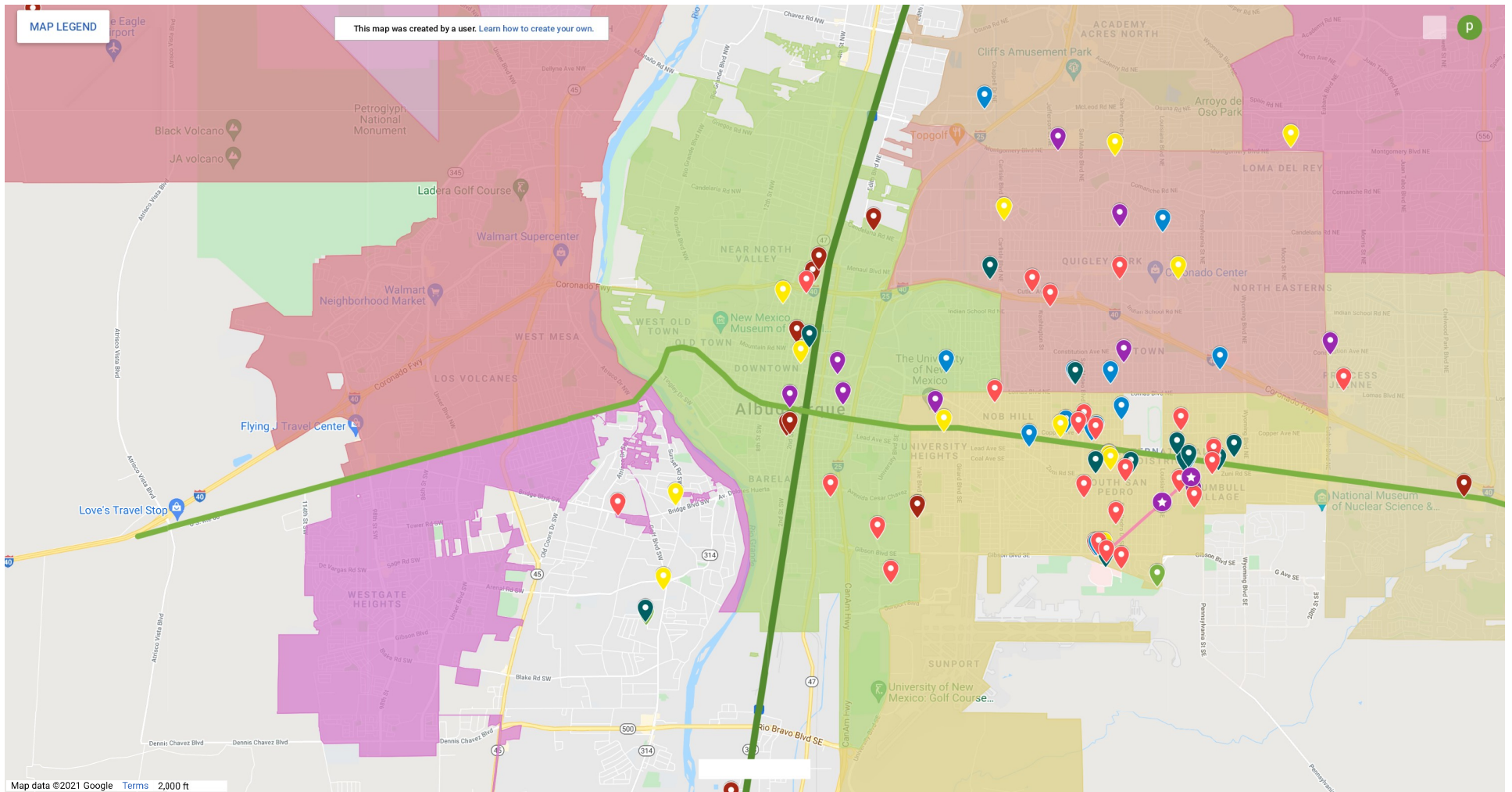


One Mile

 One Mile

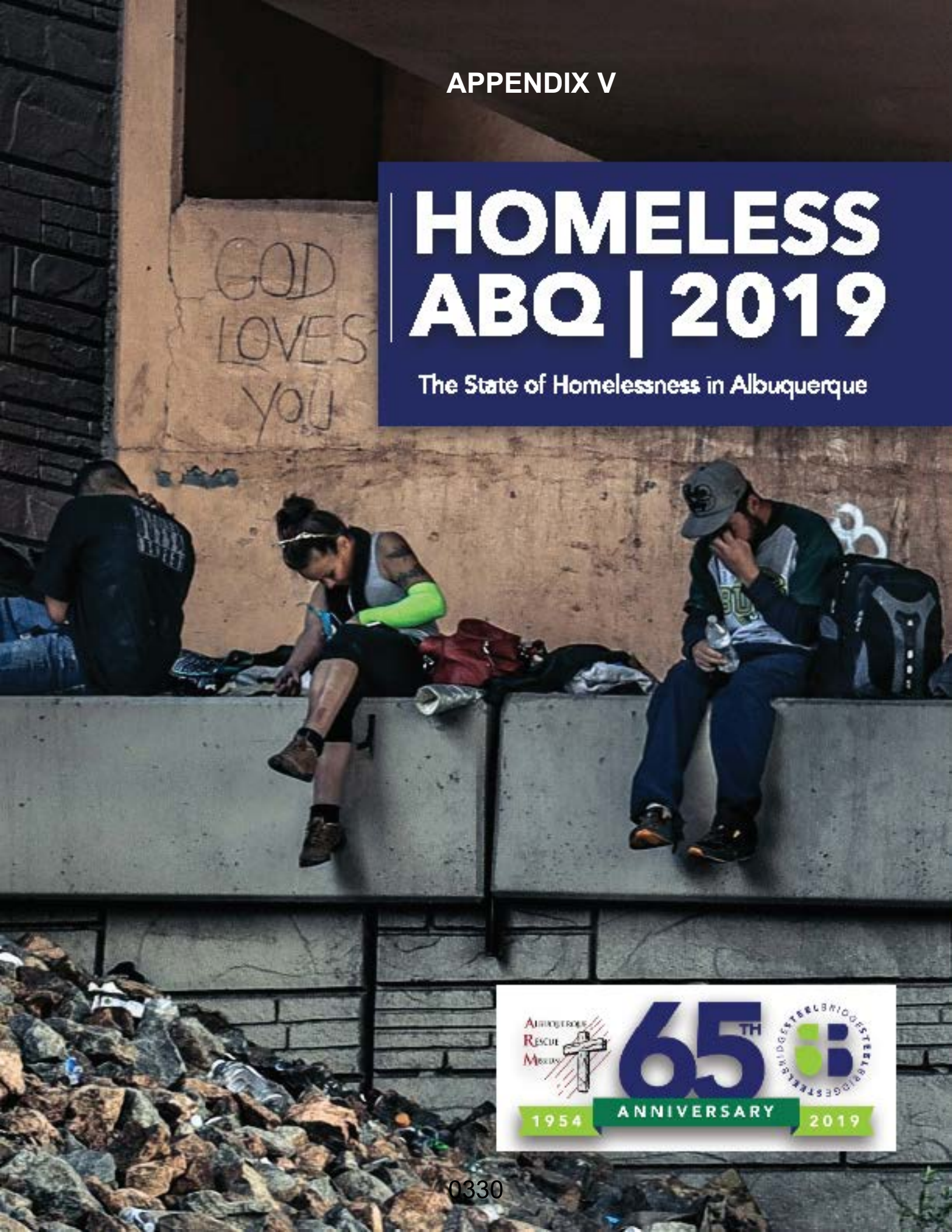
 1.5 mile

 1.5 mile



HOMELESS ABQ | 2019

The State of Homelessness in Albuquerque



Homeless people are moving into areas of Albuquerque they've never been before. Many residents feel like homelessness is worse than it's ever been before. So, is homelessness really increasing?

Encampments are cropping up in parking lots, city parks, the bosque and in vacant plots of land from the far West Side to east of Tramway. Panhandlers at busy intersections and along interstates are part of the landscape just about everywhere.

"Is homelessness worse now?"



Coronado Park, just south of I-40 between 2nd and 4th streets, may be the most severe example of what happens when a neighborhood park is taken over by homeless people, but

sizeable homeless populations regularly hang out at Downtown's Robinson Park at 8th Street and Central, and at Los Altos Park at Lomas and Eubank NE, among others.

People facing homelessness are also especially visible walking daily along Central Avenue, with large concentrations Downtown, in the university area and east of Louisiana.

The Albuquerque Indian Center provides services to more than 18,000 people a year, 92 percent of whom are Native American. Many of the homeless people seen east of Louisiana are Native Americans, who get services and free meals offered at the center, located in the area east of the International District, and for medical, dental, and other social services from First Nations Community HealthSource on Zuni SE.

Service providers generally agree that the number of homeless people in Albuquerque is increasing.

Chronically Homeless

There are an estimated 5,000 to 8,000 individuals that are homeless in Albuquerque.

New Mexico is at the top nationally when it comes to the percentage of people who are chronically homeless.

The findings are based on surveys done in shelters and on the street during a single night in January.

In New Mexico, about 12 of every 10,000 people were experiencing homelessness, an increase of 2.8 percent from 2017. About 42 percent of them had been continuously homeless for a year or more.

Only the District of Columbia had as high of a percentage of chronically homeless people.

Veterans

Trailing only Montana, New Mexico had the second highest percentage of homeless adults who were veterans at 15 percent.

Families

Some non-profits report seeing more families in its shelters – families who have come to Albuquerque from elsewhere after experiencing an economic or personal crisis.

Children

When it comes to homeless children, Albuquerque Public Schools keeps their own count. In 2018, APS counted roughly 2,000 homeless students – that's down from about 4,000 the previous year. If a child lives in a home with 2 or more families, without a home of their own, they are counted homeless. Or living in a car. Or renting a motel a few nights a week.

**"NEW MEXICO HAD
THE 2ND HIGHEST
PERCENTAGE OF
HOMELESS ADULTS
WHO WERE
VETERANS"**



"BECAUSE HOMELESS PEOPLE MUST CONSENT TO BE COUNTED, THE COUNT IS MUCH LOWER THAN REALITY."

Under-Reported

Because homeless people must **consent** to be counted, the count is much lower than reality. Several nonprofits and government agencies keep track of the homeless but not all their numbers add up because keeping an accurate count of the homeless population can be challenging given their transient nature.

Dr. Jeremy Reynolds, the late founder of Joy Junction, the state's largest homeless shelter, said that it is difficult to get a handle on how many people are homeless, in part because of differing definitions. He raised the question of whether people are homeless if they sleep on a friend's couch, live out of their car, rent a motel room for part of each month or are in a long-term rehab program at a shelter?

2008 Recession

New Mexico Coalition to End Homelessness conducts the "point-in-time" count of the homeless. Data from 2007 shows the nonprofit counted 1,276 homeless people in Albuquerque. The numbers **peaked** at 2,002 homeless persons in 2009 – the same year New Mexico experienced the Great Recession.

The numbers dropped in the following years but went up slightly again in 2017 with 1,318 homeless people counted.

The national count showed 552,800 people without homes across the U.S., marking the second consecutive increase after seven straight years of declines.

According to the data collected by the Department of Housing and Urban Development, there were 2,551 people counted in New Mexico as part of the annual homeless survey. That included 290 veterans, 182 unaccompanied youth and more than 600 people in families with children.

While the Point-in-Time count may be the "official" number used by the U.S. Department of Housing and Urban Development, it falls **far short of painting an accurate picture.**



Panhandling, Parks, and Shopping Carts

They panhandle along busy streets, push shopping carts with all their worldly possessions, and sleep in parks, under bridges and other places not intended for human habitation. Albuquerque's homeless can be seen in all parts of the city.

Customers Leaving, Businesses Closing

Businesses that survive on walk-in clientele are negatively impacted because of homeless people sleeping or camping out on private property or living out of their cars parked in their parking lot.

Many business owners and individuals report that no matter how many times they call the police to chase off unwanted trespassers, homeless people seem to always return.

Consumers Pay Cost

Some businesses have to put up fences all around their property. Panhandlers can be a constant presence in the parking lot, and many of them can be aggressive and chase away shoppers. Businesses then hire full-time security during the day because of loitering and people being inebriated or under the influence of other substances. Employees face people who are passed out on the sidewalk and have to wake them and up and nudge them along.

Customers end up having to pay the extra costs incurred by the business. Businesses end up closing or moving. Buildings then become vacant and property values fall.

Ordinary People

Some of us witness or are involved in altercations, sometimes violent, involving people who are clearly drunk, on drugs or mentally ill.

Crime

Other criminal issues are: drug trafficking; prostitution; human trafficking; the preying on the homeless by criminal elements; graffiti; panhandling; vandalism; theft; and increased danger as impaired homeless people fall into the street or carelessly walk into traffic.



Jails, Courts, and the ER

Homeless individuals with higher needs cycle through the criminal justice system - including limited law enforcement resources - and hospital emergency rooms.

Neighborhoods

Property values fall when homeless people begin to camp in parks and near schools, residents get concerned about the safety of their children. Residents worry about crime and how it would change the character of a neighborhood.

Environment

There is the debris left behind – trash, empty booze bottles, used syringes and walls and sidewalks smelling of urine and fecal matter.

What Causes Homelessness?

Perhaps one of the reasons there are so many different organizations working to end homelessness in different ways is because they **differ** in what they believe are the root causes.

Is It The System?

Regardless of where people identify on the political spectrum, Right or Left, Democrat, Republican, Capitalist or Socialist, they will lay some of the blame for homelessness on the current political, economic, and **government** system.

Some of the listed systemic causes or reasons for homelessness are:

- **Poverty** - lack of financial resources, not enough jobs, wages are too low
- **Housing** - not enough safe, high quality and affordable housing
- **Health Care** - lack of access to health care, including behavioral and mental health



A "system" homeless advocate usually seeks to influence and use the **government's legislative powers** to **require** businesses to pay higher wages and use **taxpayer funds** to provide jobs, housing, and health care for homeless individuals.

Basically, when the system does it's job, homelessness will end.

Is It The Individual?

"For many people living on the streets, homelessness is not an issue of a access to a meal or four walls and a roof - it's an issue of the heart" says a former homeless person at Steelbridge Ministries.

Some organizations believe the root cause of homelessness goes far deeper than material things like wages, health care, and housing.

They would list the following as some of the root causes:

- **Spiritual** - emotional pain, feeling unfulfilled and restless, lacking purpose
- **Family** - unsafe, abusive home life
- **Mental** - mental illness (either biological or developed as a survival mechanism to cope with trauma from living on the streets - drug or sexual abuse, for example)
- **Self Destructive Choices** - selfish and irresponsible decision making
- **Social** - never equipped with the tools to thrive independently

Some homeless people are highly educated and once held executive level positions in corporate America with six figure salaries, beautiful homes, and nice cars but used drugs to numb the pain of emptiness, disappointment, and the pressure to succeed.

Those who focus on addressing individual causes believe that taxpayer funding can provide a house but **not** a home. That public policy can require a higher wage but for a job but **cannot** inspire a person to work creatively, faithfully, and with excellence.

Their belief is that the problem of homelessness can be only be solved through connecting to a **loving community** and **spiritual renewal**, in addition to providing for all of the material and physical needs of a homeless person.



0336

Why Do Transient Homeless People Choose ABQ?

Homeless people have been drawn to Albuquerque's warm climate and many social services for decades, they're not going away. They either connect with local social service providers that can help them break the cycle of homelessness or will figure out their own way to survive.

Some homeless persons have been in Albuquerque their whole lives, others have recently moved to town.

Years ago, parts of downtown Albuquerque were home to large groups of homeless people living on the streets. However, many homeless people have spread out all over the city.

Why? One possible answer: some homeless service providers have moved out of downtown Albuquerque.

Solutions: What's Being Done?

Homeless Service Providers

Over the years, many homeless service providers have opened and expanded to provide care for homeless persons in Albuquerque.

The largest concentration of homeless service providers is located along a corridor running across the eastern portion of the Baretas neighborhood, through Downtown and into Wells Park and the Near North Valley Neighborhoods – an area bounded roughly by Avenida César Chávez on the south, Menaul on the north, 1st Street to the east and 12th Street to the west.

Do We Just Need More Shelters?

Not always. For example, many homeless service providers report having safe, clean, easily accessible bathrooms - and still have people who urinate outside behind the building.

Homelessness is a complex issue. Are addiction and mental illness solved with more toilets and housing alone?

What About Tents?

One reason homeless providers do not allow tents is because there are no portable **toilets** provided for the sidewalk campers. Those who have provided public toilets report some homeless individuals locking the door and using it as a place for shooting up and not let anybody else in. Ultimately, the toilets are destroyed and rendered unusable unless they are constantly monitored.



Non-Profit Service Providers

The **housing first** model is how most non-profit organizations are serving homeless people in Albuquerque. Their priority is to get persons experiencing homelessness into shelter and housing first, before any treatment begins. **Ending homelessness, for them, means getting homeless people off the streets and into shelter and housing.** Most, if not all, of these organizations receive taxpayer funding through various government agencies.

Below are a few of these organizations.

ABQ Health Care for the Homeless

Barrett Foundation

Crossroads for Women

Heading Home

HopeWorks

New Day

SAFE House

Supportive Housing Coalition

Therapeutic Living Services

Family Promise

Taxpayer Funded - Government Solutions

The City of Albuquerque and Bernalillo County are getting ready to spend millions of dollars on a project they hope can help get the most chronically homeless people off the streets for good.

It is a homeless housing project - 40-unit, apartment-style complex - that offers permanent housing alongside on-site professional medical and social help for its tenants.

Taxpayer Funded Facilities (continued)

It will provide housing and care for people who experience:

- homelessness or severe housing instability
- frequent admission to Metropolitan Detention Center's psychiatric unit
- frequent utilization of detox services
- frequent use of emergency medical services for behavioral health needs

All the money for the project comes from taxpayers. The county's \$2 million share is from the voter approved sales tax increase for behavioral health programs. The city's \$1.97 million share came from existing city funds.

City of Albuquerque

Albuquerque's mayor has highlighted homelessness as one of the city's legislative priorities. The Mayor's office has several programs in place. One, is the ECHO project is a data-driven project that brings together organizations and agencies that interface with homeless people to identify solutions. Another is a staff member who responds to calls about homeless encampments to provide support and clean up.

24/7 Solution

City officials believe Albuquerque needs a place where anyone could go 24/7 with no questions asked, regardless of state of mind or condition.

The City of Albuquerque will be working with the University of New Mexico and UNM's Health Sciences Center to explore the potential development of a 24/7 emergency shelter with supportive services - health care and social services via nonprofits and charities represented there.

Temporary Band Aid?

Currently, the West Side emergency shelter - located about 20 miles from Downtown – provides overnight shelter for more than 300 homeless individuals. Some believe the shelter could keep some people healthy, safe, even alive. But the Mayor believes this solution is temporary until a shelter or shelters are built closer to or in the city.

Voters Get To Decide

Albuquerque voters will have a say in whether the city builds a centralized, 24/7 shelter (or smaller satellite shelters spread out in several sites around the city). It's phase one of the project, expected to cost **\$14 million**. The entire project could end up costing **\$28 million**.

Bernalillo County

County Commissioners are considering approval of a tiny homes village to provide transitional housing. They are implementing multiple mental health programs for members of the homeless population, including veterans and those with behavioral health challenges. Some of the vouchers for the program are available to veterans through taxpayer-funded federal programs.



Faith Based Service Providers

The highest expression of humanity, for faith based agencies, is **more than material**. Many of the homeless persons on Albuquerque's streets - addicted and suffering mental illness - **have experienced the success associated with the American Dream** - an educated mind, hands with vocational skills, a full stomach, and being sheltered in four walls with a roof. They found that the promise of financial prosperity was **not** enough to satisfy the deepest longings of their souls.



Spiritual renewal and restoration is what every story of a life saved from the streets is based on for faith-based agencies. For them, the root cause of the various maladies and pathologies experienced by homeless persons, including addiction, is being disconnected from love and a life without purpose.

All of their services - food to residential programs - is built upon the belief that when the human spirit comes to life, the mind and the body will follow. For them, the universe is more than random scientific data and mankind more than a machine. To them, the universe is intentional and relational and it's greatest force is love. The highest expression of their faith means loving people - especially the most vulnerable.

They are mostly funded through private donations from individuals, foundations, and churches.

Below are a few of these organizations.

Steelbridge Ministries

Joy Junction

Catholic Charities

Good Shepherd Center

The Rock at Noonday

Expect A Miracle

U Turn For Christ

Victory Outreach

God's Warehouse

For more information on Homeless Service Providers -

Homeless Service Directory for Men, Women, Children, and Families:

<https://www.cabq.gov/family/services/homeless-services>

How to Use This Report

This report does not contain new research or information. It is a **guide** - a summary of public information. It is anecdotal. It is **not** comprehensive.

The report is a snapshot of the complex issue of homelessness in Albuquerque simplified for the ordinary resident seeking to understand the issue.

It has been compiled by [Steelbridge Ministries](#), formerly the Albuquerque Rescue Mission. Steelbridge has been working to feed, house, clothe, care for, and rescue the homeless in Albuquerque since 1954.

Some information for this report was pulled together from the following sources:

Video: KOB TV News Investigative Story

<https://www.kob.com/albuquerque-news/4-investigates-is-homelessness-getting-worse-in-albuquerque/5164918/>

Homelessness Up in NM by Susan Montoya/ABQ Journal

<https://www.abqjournal.com/1258672/new-mexico-sees-uptick-in-homelessness.html>

City, UNM Unite to Take On Homelessness by Jessica Dyer/ABQ Journal

<https://www.abqjournal.com/1280483/city-unm-unite-to-tackle-homelessness.html>

Ground zero for the homeless by Rick Nathanson/ABQ Journal

<https://www.abqjournal.com/1213425/ground-zero-for-the-homeless-issue-a-constant-struggle-for-residents-businesses.html>

People without housing visible throughout the city by Rick Nathanson/ABQ Journal

<https://www.abqjournal.com/1213426/people-without-housing-visible-throughout-city.html>



65TH



1954

ANNIVERSARY

2019



214 Coal Ave SW
Albuquerque, NM 87102
505.346.4673
www.mysteelbridge.org
0343

EXHIBIT O

September 15, 2021

Attn: Robert Lucero, Zoning Hearing Examiner

As the President of Elder Homestead Neighborhood Association, and a representative of residents and businesses in my community, I am writing to ask you to reject Family & Community Services' application for a Conditional Use Permit at 5400 and 5006 Gibson Blvd SE as they have not met the requirements for issuance of the permit as mandated by City Council Bill No. R-21-141, Enactment No. R-2021-021

[APPENDIX A]:

WHEREAS, those neighbors and businesses bearing the greatest impacts should be offered additional avenues for information sharing and gathering, on-going updates, and an ongoing point of contact for presenting concerns that might be reasonably addressed by the City; and

WHEREAS, a good neighbor program should be established for these purposes before the City takes any further steps toward development of the Gateway Center.

BE IT RESOLVED BY THE COUNCIL, THE GOVERNING BODY OF THE CITY OF ALBUQUERQUE:

Section 1: The City shall establish a good neighbor program for the Gateway Center that:

- Offers at least two community input sessions within the next 45 days specifically for neighbors, neighborhood associations, **and businesses** located within communities adjoining the Gateway Center; and
- Kicks off or advances discussions towards additional components of a Good Neighbor Agreement by the City with area residents **and businesses** to be in place for so long as the Gateway Center operates at this location. This discussion will, at a minimum, address:
 - Overnight capacity;
 - Security protocols;
 - Land use changes that will be required to authorize proposed uses at the site;
 - Acceptable methods for the dissemination of project programming updates for interested persons within communities adjoining the Gateway Center for the duration of its operation; and
 - A point of contact where persons can direct their concerns and have questions answered about the Gateway Center.

Section 2: the City shall not issue a certificate of occupancy or any Conditional Use Permits for the Gateway Center until the two community input sessions have occurred and the good neighbor program described in Section 1, above, has been completed.

The City failed to communicate and engage the businesses surrounding the property, and the City did not notify or invite neighborhood businesses to partake in input meetings mandated by this Resolution. Due to the City's lack of communication, community businesses were not notified of the two input meetings mandated by R-21-141, and therefore were unable to participate in the two input sessions. All businesses in the attached petition **[APPENDIX B]** have received minimal to no communication from the City regarding on-going updates, information sharing and gathering, and notification of input meetings. They have received minimal to no information regarding a point of contact at the City for presenting their concerns.

I ask that you reject the application of Family & Community Services for their Conditional Use Permit for the Gateway Center at 5400 and 5006 Gibson Blvd SE on these grounds.

Thank you for your consideration of this request.

Sandra Perea
President, Elder Homestead Neighborhood Association

APPENDIX A

CITY of ALBUQUERQUE TWENTY FOURTH COUNCIL

COUNCIL BILL NO. R-21-141 ENACTMENT NO. R-2021-021

SPONSORED BY: Pat Davis

1 RESOLUTION

2 CALLING FOR ADDITIONAL COMMUNITY INPUT AND GOOD NEIGHBOR
3 MEASURES BY THE CITY FOR THE PROPOSED GATEWAY CENTER AT THE
4 FORMER LOVELACE HOSPITAL SITE.

5 WHEREAS, the City of Albuquerque is acquiring or has acquired the former
6 Lovelace Hospital site at 5400 Gibson Boulevard SE with intent that it house
7 the City's anticipated Gateway Center for Homeless Services (the "Gateway
8 Center"); and

9 WHEREAS, a Gateway Center will offer much needed support and services
10 to assist the homeless and promote the health and welfare of the City; and

11 WHEREAS, notwithstanding the need for homeless resources and services,
12 the City recognizes that the Gateway Center will present new land use and
13 community impacts within the City; and

14 WHEREAS, the City has previously collected online comment and held an
15 input session for the project on December 14, 2020, in order to gather general
16 feedback about the project; and

17 WHEREAS, notwithstanding the prior input session, the City has not yet
18 offered individualized attention to the neighborhoods and businesses in
19 closest proximity to the Gateway Center; and

20 WHEREAS, those neighbors and businesses bearing the greatest impacts
21 should be offered additional avenues for information sharing and gathering,
22 on-going updates, and an ongoing point of contact for presenting concerns
23 that might be reasonably addressed by the City; and

24 WHEREAS, a good neighbor program should be established for these
25 purposes before the City takes any further steps toward development of the
26 Gateway Center.

1 BE IT RESOLVED BY THE COUNCIL, THE GOVERNING BODY OF THE CITY OF
2 ALBUQUERQUE:

3 SECTION 1. The City shall establish a good neighbor program for the
4 Gateway Center that:

5 • Offers at least two community input sessions within the next 45 days
6 specifically for neighbors, neighborhood associations, and businesses
7 located within communities adjoining the Gateway Center; and
8 • Kicks off or advances discussions towards additional components of
9 a Good Neighbor Agreement by the City with area residents and businesses to
10 be in place for so long as the Gateway Center operates at this location. This
11 discussion will, at a minimum, address:

- 12 ○ Overnight capacity;
- 13 ○ Security protocols;
- 14 ○ Land use changes that will be required to authorize proposed
15 uses at the site;
- 16 ○ Acceptable methods for the dissemination of project and
17 programming updates for interested persons within communities adjoining
18 the Gateway Center for the duration of its operation; and
- 19 ○ A point of contact where persons can direct their concerns
20 and have questions answered about the Gateway Center.

21 SECTION 2. The City shall not issue a certificate of occupancy or any
22 Conditional Use Permits for the Gateway Center until the two community input
23 sessions have occurred and the good neighbor program described in Section
24 1, above, has been completed.

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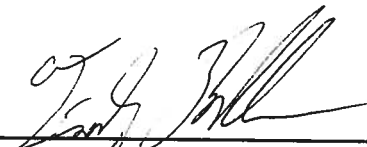
1 PASSED AND ADOPTED THIS 3rd DAY OF May, 2021
2 BY A VOTE OF: 9 FOR 0 AGAINST.

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9
10 Cynthia D. Borrego, President
11 City Council

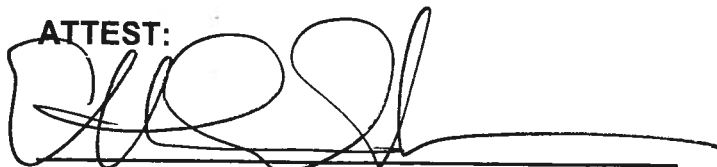
12
13
14 APPROVED THIS 13 DAY OF May, 2021

15
16 

17 Bill No. R-21-141

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24 Timothy M. Keller, Mayor
25 City of Albuquerque
26

27
28 ATTEST:

29 
30

31 Ethan Watson, City Clerk
32
33
34

APPENDIX B

Re: City's insufficient communication with local area businesses regarding Family & Community Services' application for a Conditional Use Permit for the City of Albuquerque's proposed Gateway Center at 5400 and 5006 Gibson Blvd

Please take into consideration deferring Conditional Use Application for the above referenced project. Our area business have received minimal to no communications regarding this project by the City of Albuquerque regarding this project.

For this reason, we are requesting deferring the application for conditional use until such time that The City of Albuquerque has demonstrated that they have acted in good faith in communicating and addressing our concerns about this project and making sure that does not create significant adverse impacts to the surrounding neighborhood businesses.

Name of Business	Business Representative	Business Address	Phone #	Signature
Starbucks	Lex C.	5301 Gibson Blvd	505-255-6773	AC
Edwards Gibson Mort		5501 Gibson Blvd	505-850-0186	ETH
Subway	Mark Smith	5525 Gibson Blvd	505 239-9002	MS
Mr. B's Pain & Body	Scott Benavidez	1410 Valencia Dr SE	505-255-7022	SES
Cervantes Restaurant	Iris Metzgar	5801 Gibson Blvd SE	505-262-2253	IM
Copper Canyon Cafe	Mickale Raus	5455 Gibson Blvd SE	505 266-6318	MR
Global Beauty	Sinh Nguyen	5311 Gibson Blvd	505 266 3459	SN
Bird of Paradise	Peter Kees	5409 GIBSON	505 268 1424	PK
AMERICAN PRIDE CLEANERS	ALEX. ALCAHA	1349 SAN MATEO	(505) 256 5140	AA
Raymond Lamora Hair & Beauty	Wanda Brey	1201 SAN MATEO SE	505 688 6640	WB

Name of Business	Business Representative	Business Address	Phone #	Signature
SACCO Automotive	STEVE SACCO	6461 GIBSON SE	255-3248	SS
La Petite Academy	Rhannon Antonio	6240 Gibson SE	265-5116	RA
DAVE CYCLES	Daniel Godwin	6121 GIBSON SE	256-7230	DG
Pollito Con Papas	Rene Coronado	6105 Gibson SE	765-5486	RC
CHELITO LINDO	GERMAN PERA	4116 SAN PEDRO SE	505 266 1800	GP
Happy Feet Children	Rosa Mondragon	1133 Dakota St SE	505 508-5409	RM
Good Eggs	Donald Lynne	5910 Gibson SE	255 2929	DL
La Cocinita Mexican Food	Israel Ortega	5401 Gibson Blvd SE	200 0391	IO
WASH BRITE	Antonette Otero	901 San Pedro SE	331-6697	AO
GIOVANNI S	ROSARIO ZITO	921 SAN PEDRO SE	255-1233	RZ

Name of Business	Business Representative	Business Address	Phone #	Signature
AHL Garden Supply	Brian Baca	1051 San Mateo SE	970-799-3608	BB
A Plus Auto	Robert Robinson	1408 San Mateo St	505 266 6070	RR
Emotional Parlor	John Campbell	1021 San Mateo St	505-255-0546	JC
Acapulco Taco	Cindy Darnell	840 San Mateo SE	505-379-1496	CD

092121 Rachel Baca: ZHE testimony from SHNA

My name is Rachel Baca, I am president of the Siesta Hills Neighborhood Association, Siesta Hills is located between the old Lovelace Hospital and the Kirtland Airforce Base. Thank you for letting me speak today.

Our belief the committee should reject the conditional use permit for the use of this facility as an overnight shelter because this submission is incomplete, lacks input from the surrounding residents and businesses and lacks the good faith studies of adverse impact to surrounding neighborhoods and mitigation of those impacts. The one study that we were counting on to show the data about how this overnight shelter could impact our community is being conducted by the University of New Mexico for the City, and it isn't projected to be completed until January of 2022. The study promises to collect data on high impact strategies for addressing homelessness and to survey adverse impacts to communities surrounding overnight shelters. That could be a lot of good information to have on hand in devising an operation plan. How can this committee, the City, or we as residents near the proposed facility have any kind of real discussion of installation and operation of an overnight shelter without that data?

The businesses along the Gibson corridor have been left out of the input meetings conducted by the City, either through intentional stonewalling or just sloppy planning through inadequate notice and outreach. In the many input meetings I have attended, this subject was raised many times with the City. We asked "when will you be inviting the businesses to give their input?" But we saw no results until just last night, six months after the purchase of the old Lovelace Hospital, one night before this hearing this morning. The City did finally have a presentation before the Gibson businesses. The flyer for the meeting was circulated roughly six hours before the meeting happened. How does this show the City has a real interest in taking input from the people most likely to be impacted from an overnight shelter next to their business? How does the City incorporate any of the concerns raised by them, in an operational plan already submitted?

The plan submitted offers no assurance that the City has a real plan for how to deal with the magnetization effect we know an overnight shelter can have. The City has said there will be efforts to clean up the quarter mile around the property, but we've seen how these efforts work elsewhere. We see it happening around the new Tiny Homes Village on Zuni, which is a much more restricted facility, than the proposed "low-barrier" Gibson center. Encampments surround the tiny houses, and they have multiplied over the summer. >> photo evidence submitted << As members of the community, we are left with calling 311, and 242-COPS as the only means for voicing our concerns. We see very few efforts from the City or APD to discourage or deal with the litter or safety issues that come with encampments. The plan before the committee doesn't propose a different strategy for these encampments. In fact, this plan emphasizes reallocating existing resources in an already overburdened District 6. How can we expect any different results when the encampments and the crime ramp up in the community surrounding the Gibson facility? If a private entity brought such an aspirational,

incomplete plan, lacking hard evidence of mitigating adverse impact before this examiner, I trust the proposal would be rejected. I now trust that this examiner will reject this plan for an overnight shelter from the City, on the grounds that it is incomplete, and does not adhere to the City's own vision for creating sustainable neighborhoods.

Rachel Conger Baca
President,
Siesta Hills Neighborhood Association

Zuni and Louisiana-Pennsylvania



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Zuni and Louisiana-Pennsylvania



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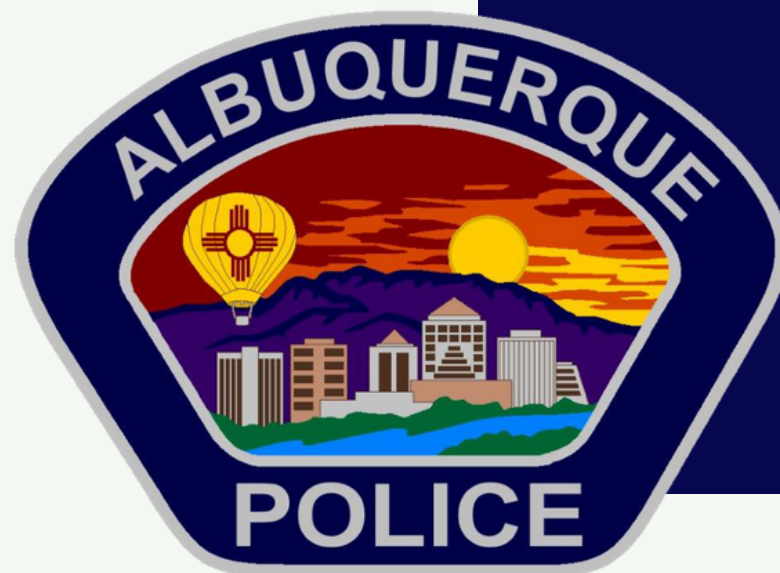
Zuni and Louisiana-Pennsylvania



2020

Area Command Comparison

Crime Stats



Information About Albuquerque Crime Stats

In 2018, the Albuquerque Police Department began reporting crime statistics using the Federal Bureau of Investigation's National Incident-Based Reporting System (NIBRS). NIBRS is the most current national framework for reporting crime and replaces the FBI's Summary Reporting System (SRS). This change is important because NIBRS provides more comprehensive and detailed information about crimes against person, crimes against property and crimes against society occurring in law enforcement jurisdictions across the country.

The data in this report is based on the official data that APD sends to the FBI. But it is important to note that the numbers in this report differ slightly from the numbers published in the FBI reports. APD sends NIBRS data to the FBI on a semiannual basis and this data is based on the reports available at that point in time. The APD's crime data system is dynamic and additional information may be added or refined after the data are sent to the FBI. Although the FBI updates its data bases regularly it does not update published reports.

The data in this report were obtained from APD's Tiburon RMS computer system on Oct. 16, 2020. Crime statistics in future reports will differ somewhat from these statistics because this report is also based on a fixed point in time.

Crime Definitions

Source: FBI Uniform Crime Reporting Program, National Incident-Based Reporting System

Aggravated Assault: An unlawful attack by one person upon another wherein the offender uses a weapon or displays it in a threatening manner, or the victim suffers obvious severe or aggravated bodily injury involving apparent broken bones, loss of teeth, possible internal injury, severe laceration, or loss of consciousness. In the definition above, a weapon is a commonly known weapon (a gun, knife, club, etc.) or any other item becoming one, although not usually thought of as a weapon, when used in a manner which could cause the types of severe bodily injury described.

Murder and Nonnegligent Manslaughter: The willful (nonnegligent) killing of one human being by another. As a general rule, agencies should classify in this category any death due to injuries received in a fight, argument, quarrel, assault, or commission of a crime. Although LEAs may charge offenders with lesser offenses, e.g., Negligent Manslaughter, agencies should report the offense as Murder and Nonnegligent Manslaughter if the killing was willful or intentional.

Burglary/Breaking & Entering: The unlawful entry into a building or other structure with the intent to commit a felony or a theft. LEAs should classify offenses locally known as Burglary (any degree), unlawful entry with intent to commit a larceny or felony, breaking and entering with intent to commit a larceny, housebreaking, and safecracking as burglary. However, because Larceny/Theft is an element of Burglary, agencies should not report the Larceny as a separate offense if it is associated with the unlawful entry of a structure. The element of trespass is essential to the offense of Burglary/ Breaking and Entering.

Larceny/Theft Offenses: The unlawful taking, carrying, leading, or riding away of property from the possession or constructive possession of another person.

Crime Definitions

Source: FBI Uniform Crime Reporting Program, National Incident-Based Reporting System

Motor Vehicle Theft: The theft of a motor vehicle.

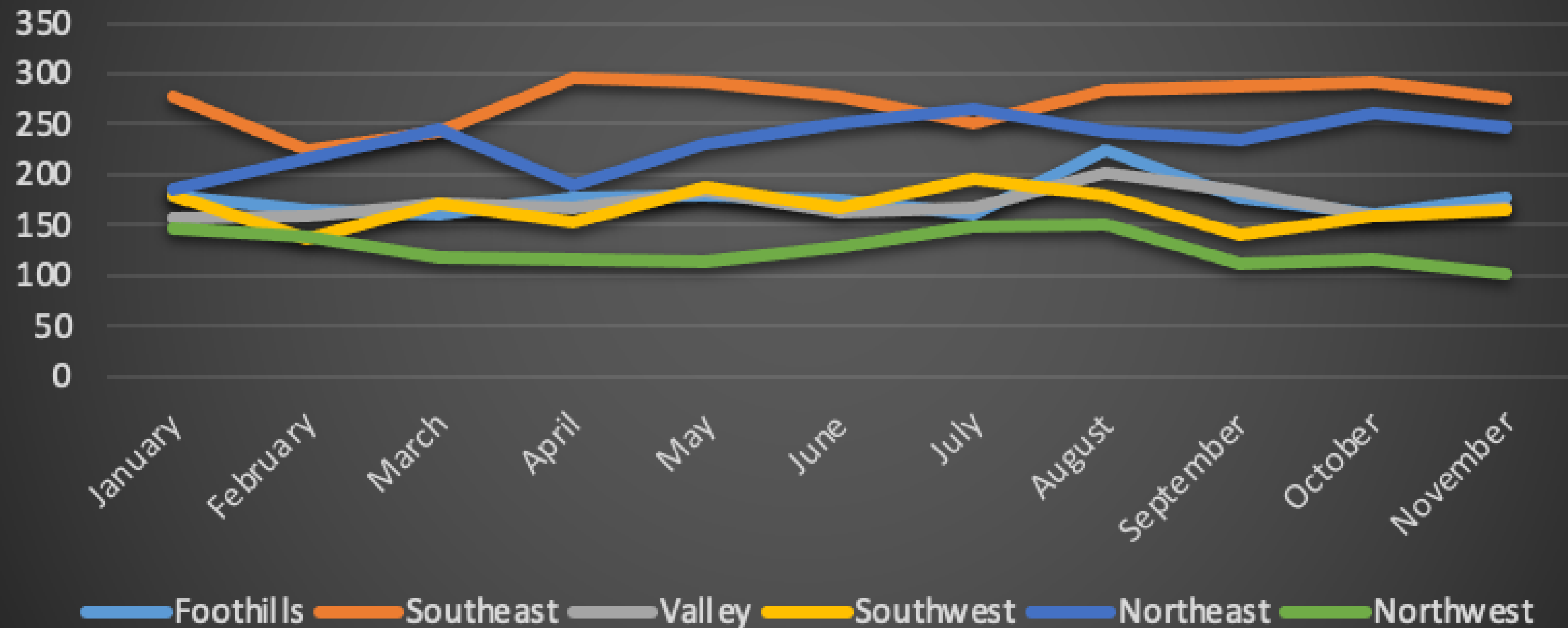
The national UCR Program defines motor vehicle as a motor vehicle is a self-propelled vehicle that runs on the surface of land and not on rails and that fits one of the following descriptions:

- Automobiles—sedans, coupes, station wagons, convertibles, taxicabs, or other similar motor vehicles serving the primary purpose of transporting people

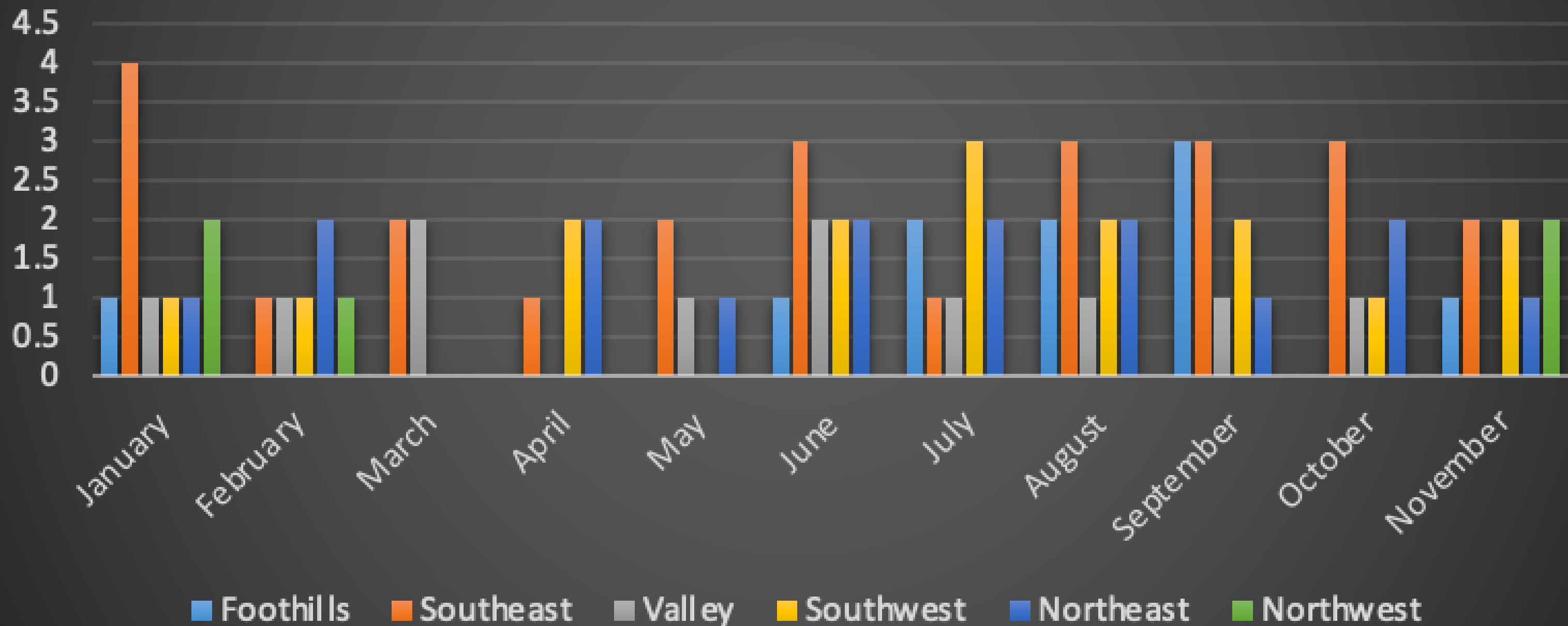
Robbery: The taking or attempting to take anything of value under confrontational circumstances from the control, custody, or care of another person by force or threat of force or violence and/or by putting the victim in fear of immediate harm

Robbery involves the offender taking or attempting to take something of value from a victim, usually the property owner or custodian, by the use of force or threat of force. (The victim must be present.) If there is no direct confrontation and the victim is not in fear of immediate harm, LE should report Extortion. Though direct confrontation occurs in Pocket-pickings or Purse-snatchings, force or threat of force is absent. However, if during a Purse-snatching or other such crime, the offender uses force or threat of force to overcome the active resistance of the victim, LE should classify the offense as Robbery.

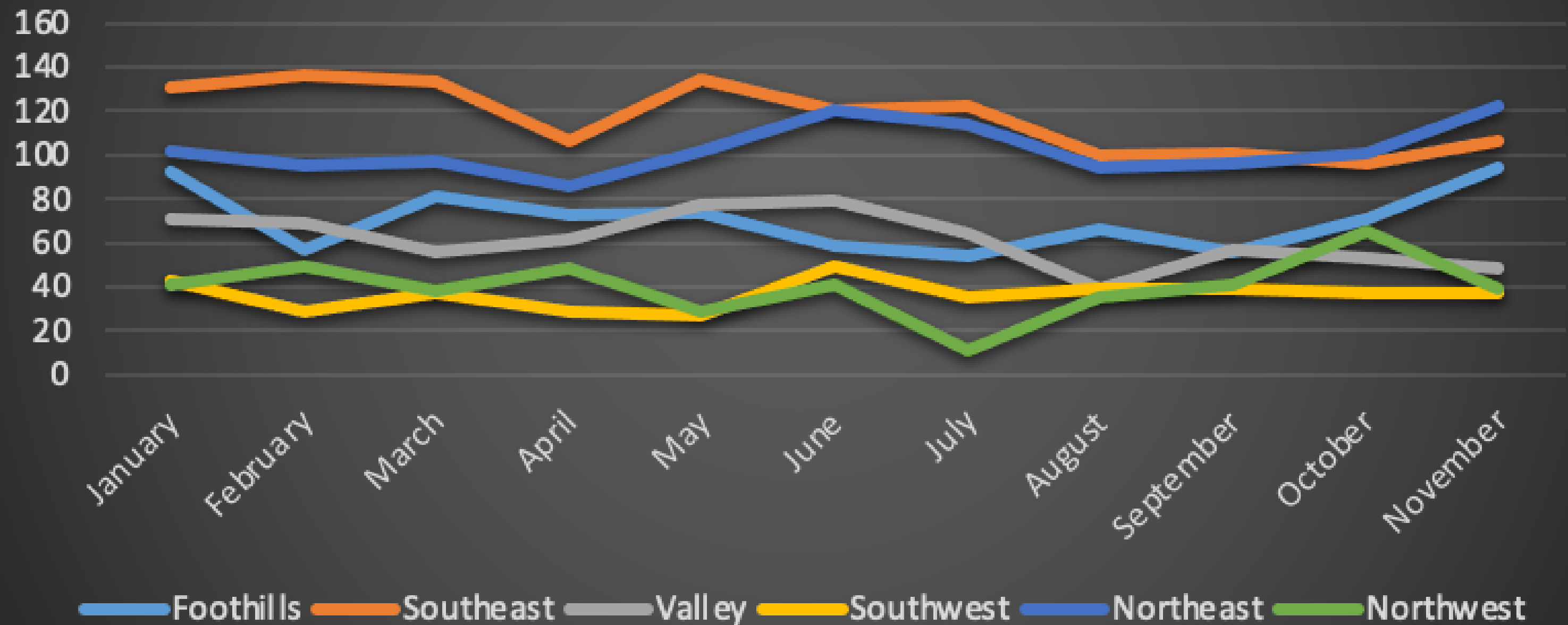
Aggravated Offenses 2020 by Area Command



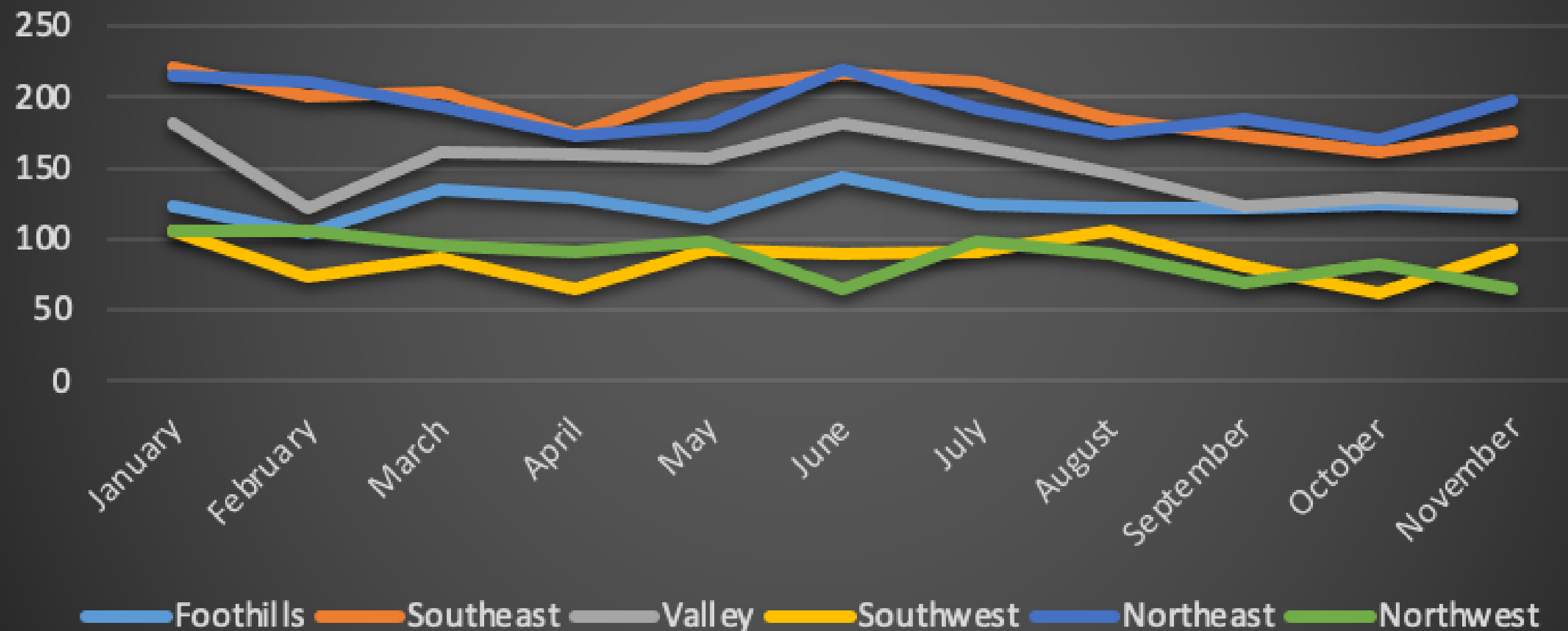
Homicide Offenses 2020 by Area Command



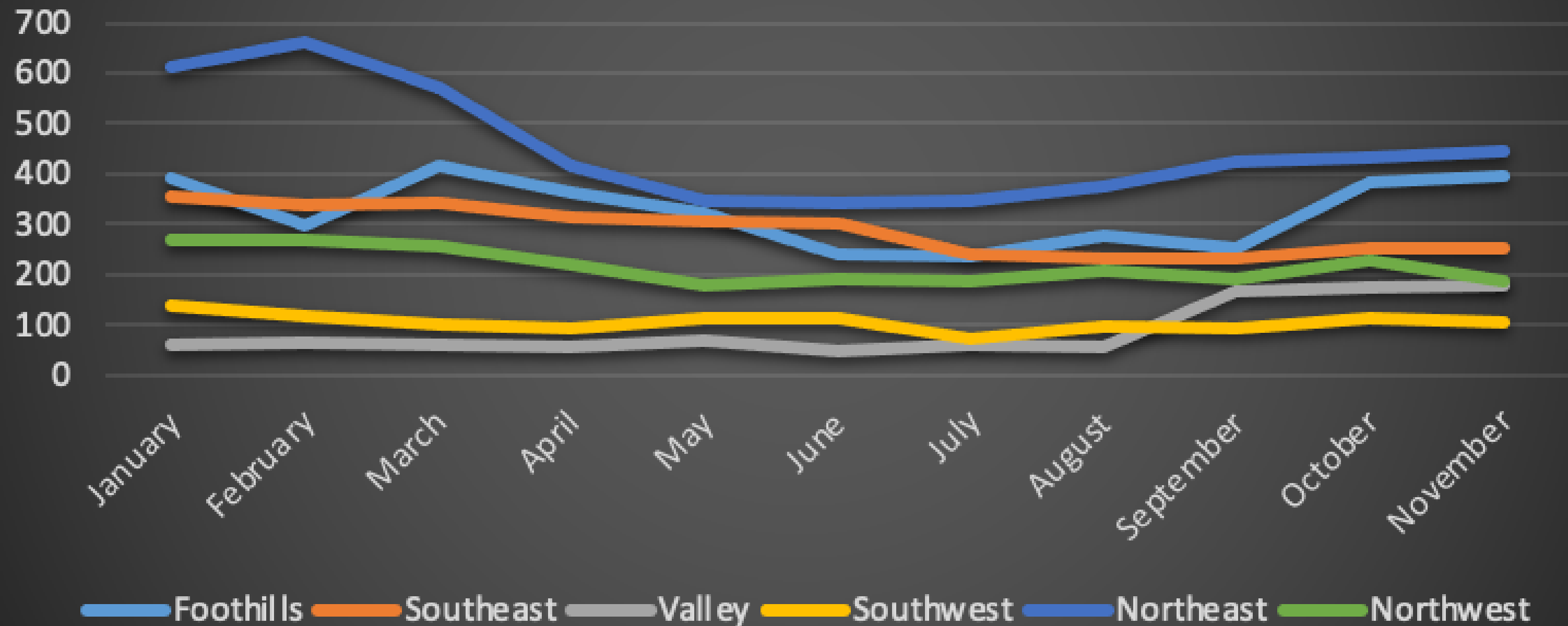
Burglary/Breaking & Entering 2020 by Area Command



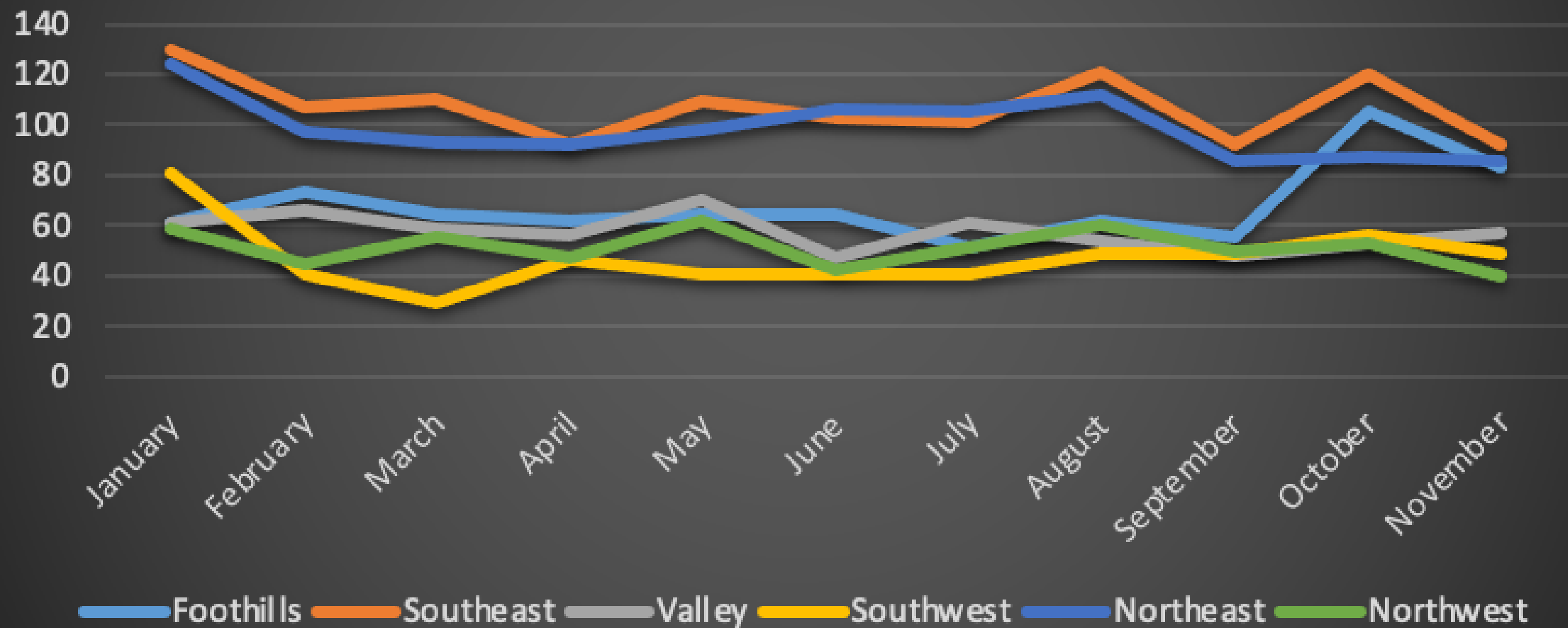
Destruction/Damage/Vandalism 2020 by Area Command



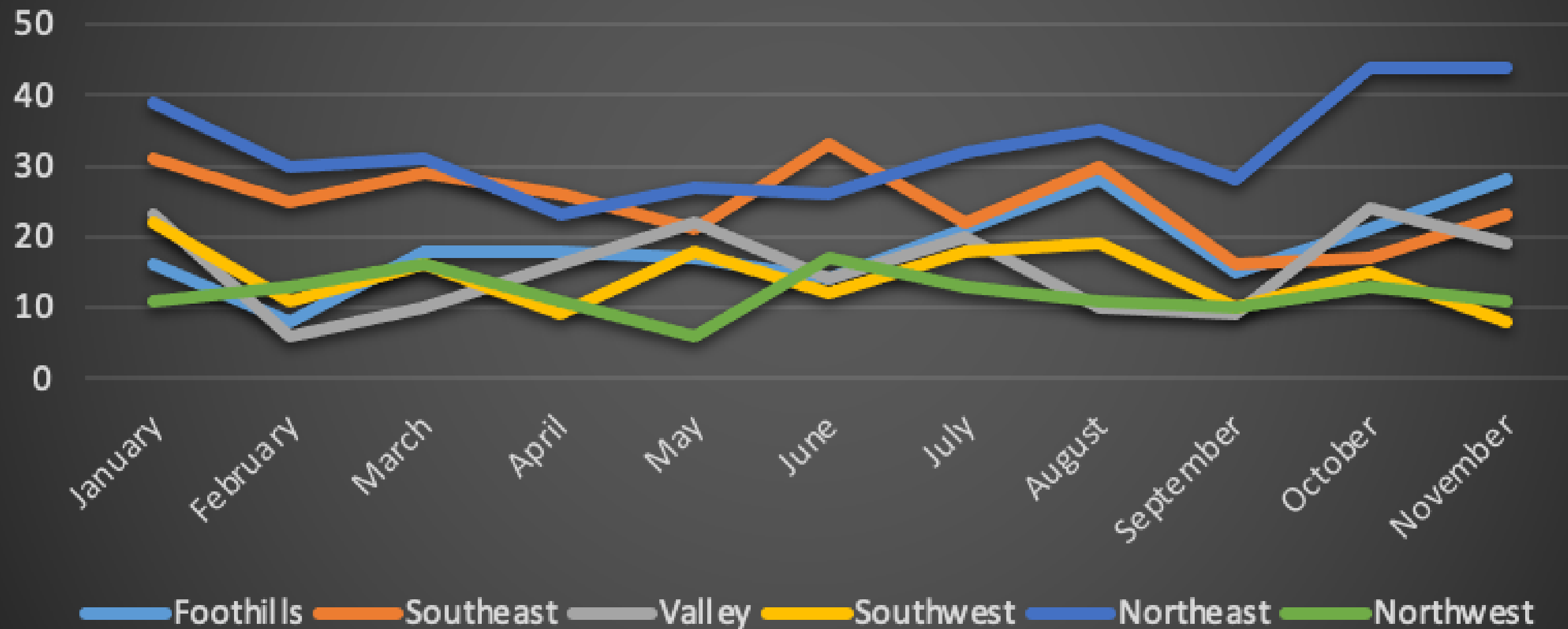
Larceny/Theft Offenses 2020 by Area Command



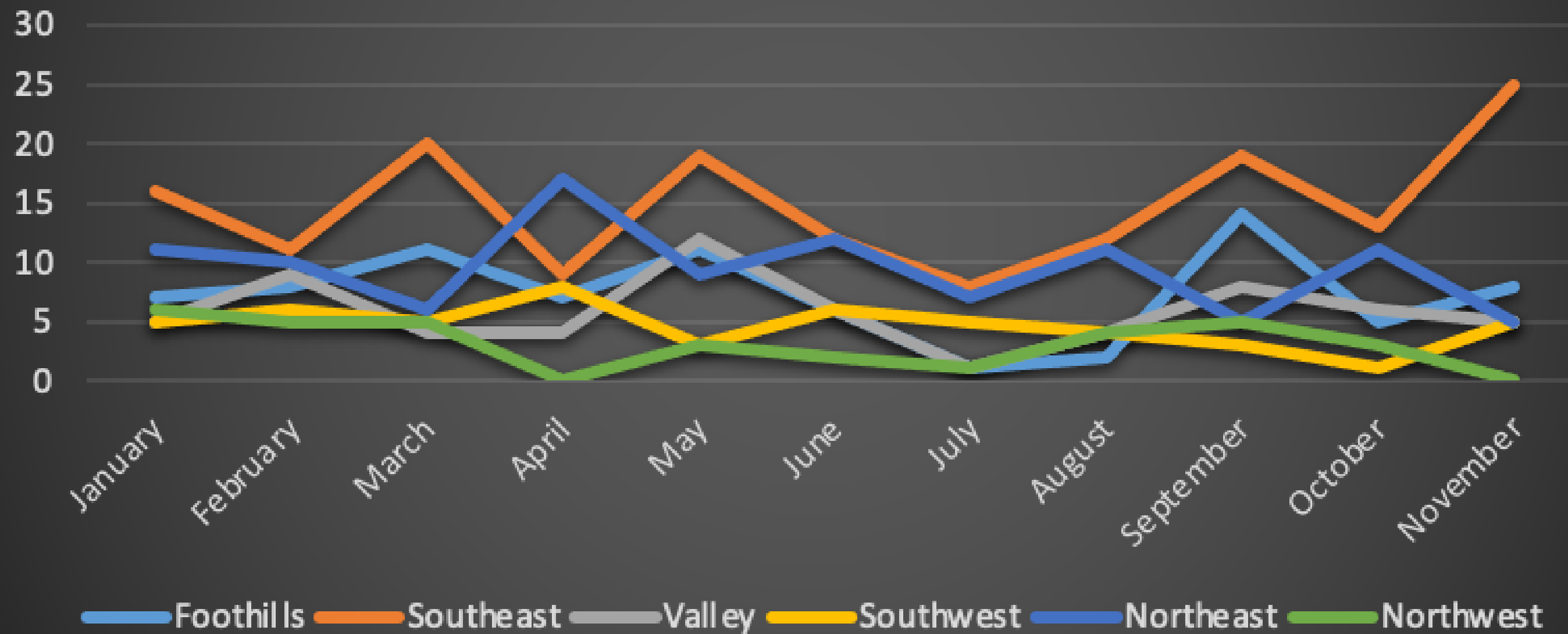
Motor Vehicle Theft 2020 by Area Command



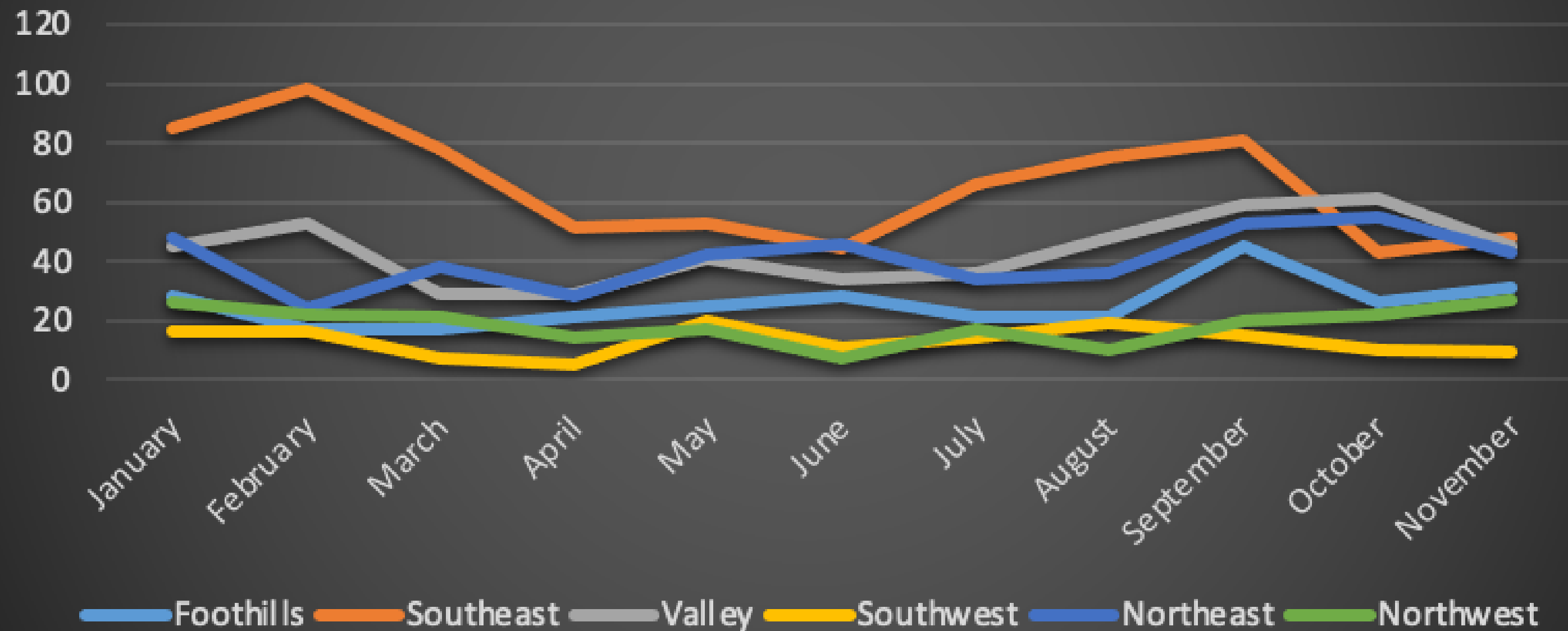
Robbery 2020 by Area Command



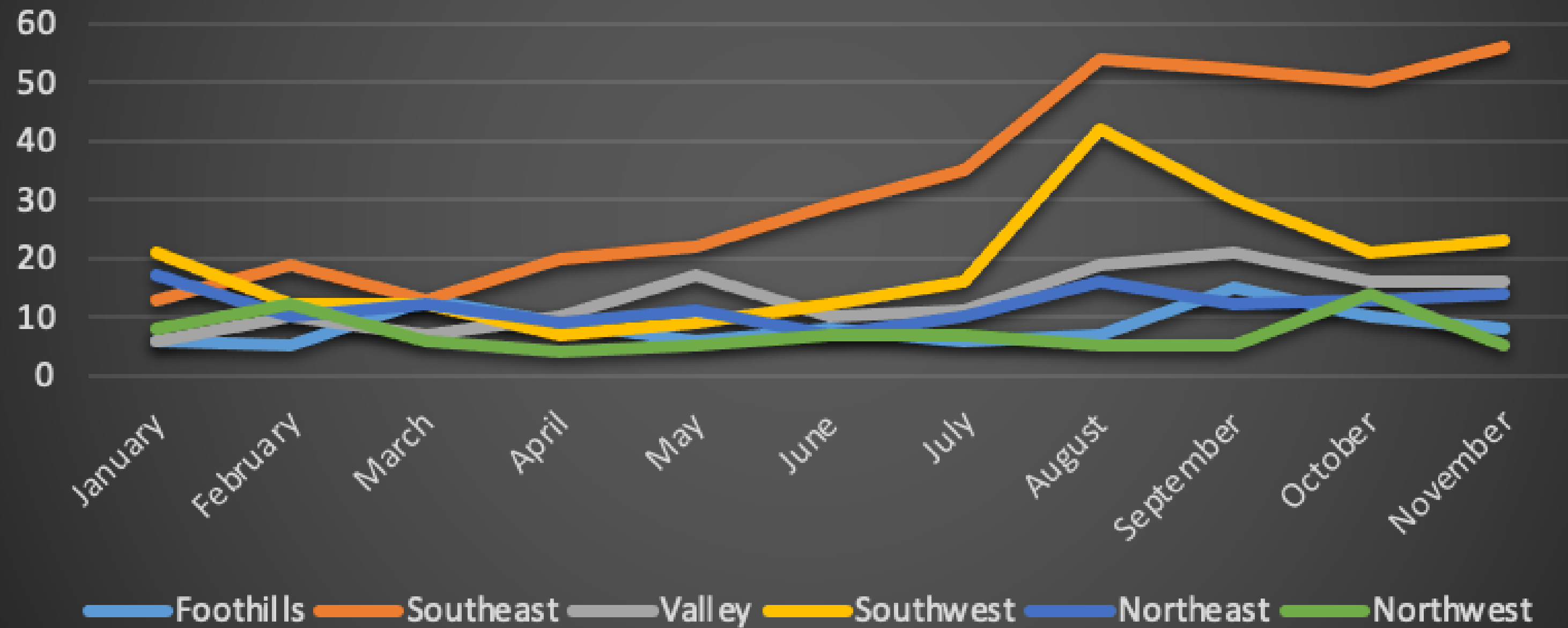
Stolen Property 2020 by Area Command



Drugs/Narcotics 2020 by Area Command



Weapons Violations 2020 by Area Command



District	Type	Name	Zipcode	Address	
1	Men's Shelter	Westside Emergency Shelter	87121	7440 Jim McDowell Rd, Albuquerque, NM 87121	Lan Sena
2	Men's Shelter	Albuquerque Opportunity Center	87107	715 Candelaria Rd NE, Albuquerque, NM 87107	Isaac Benton
2	Men's Shelter	S.A.F.E. House	87102	Albuquerque, NM 87102	Isaac Benton
2	Men's Shelter	Good Shepherd Center	87102	218 Iron Ave SW, Albuquerque, NM 87102	Isaac Benton
2	Men's Shelter	Steelbridge Resource Center	87102	2021 2nd St NW, Albuquerque, NM 87102	Isaac Benton
2	Men's Shelter	St Martin's Hospitality Center	87102	1201 3rd St NW, Albuquerque, NM 87102	Isaac Benton
2	Men's Shelter	SteelBridge	87102	525 2nd St SW, Albuquerque, NM 87102	Isaac Benton
2	Men's Shelter	Albuquerque Healthcare for the Homeless: Harn	87102	1217 1st St NW, Albuquerque, NM 87102	Isaac Benton
2	Men's Shelter	The Rock at NoonDay	87102	2400 2nd St NW, Albuquerque, NM 87102	Isaac Benton
2	Women's Shelter	S.A.F.E. House	87102	Albuquerque, NM 87102	Isaac Benton
2	Women's Shelter	Albuquerque Opportunity Center	87107	715 Candelaria Rd NE, Albuquerque, NM 87107	Isaac Benton
2	Women's Shelter	SteelBridge	87102	525 2nd St SW, Albuquerque, NM 87102	Isaac Benton
2	Women's Shelter	Good Shepherd Center	87102	218 Iron Ave SW, Albuquerque, NM 87102	Isaac Benton
2	Women's Shelter	Crossroads for Women	87102	235-239 Elm St NE, Albuquerque, NM 87102	Isaac Benton
2	Behavioral & Mental Health Services	UNM Psychiatric Center	87106	2600 Marble Ave, Albuquerque, NM 87106	Isaac Benton
2	Behavioral & Mental Health Services	St Martin's Hospitality Center	87102	1201 3rd St NW, Albuquerque, NM 87102	Isaac Benton
2	Drug/Alcohol Treatment	Central New Mexico Treatment Center	87102	630 Haines Ave NW, Albuquerque, NM 87102	Isaac Benton
2	Drug/Alcohol Treatment	Albuquerque Center for Hope and Recovery	87102	913 2nd St NW, Albuquerque, NM 87102	Isaac Benton
2	Halfway Houses/Transitional Housing	La Pasada Halfway House	87102	2206 4th St NW, Albuquerque, NM 87102	Isaac Benton
2	Halfway Houses/Transitional Housing	Oxford House Hazeldine	87102	629 Walter St SE, Albuquerque, NM 87102	Isaac Benton
2	Health Centers	Albuquerque Health Care for the Homeless	87102	1217 1st St NW, Albuquerque, NM 87102	Isaac Benton
2	Social Services	Child & Family Development Division	87106	Albuquerque, NM 87106	Isaac Benton
2	Social Services	John Marshall Health and Social Services Center	87102	1500 Walter St SE, Albuquerque, NM 87102	Isaac Benton
2	Social Services	NM Human Services Department	87106	1711 Randolph Rd SE, Albuquerque, NM 87106	Isaac Benton
2	Social Services	Coronado Park Homeless Ministry: Meal Site	87102	301 McKnight Ave, Albuquerque, NM 87102	Isaac Benton
3	Social Services	Catholic Charities of Central New Mexico	87105	2010 Bridge Blvd SW, Albuquerque, NM 87105	Klarissa Peña
4	Behavioral & Mental Health Services	Central Desert Behavioral Health Hospital	87107	1525 N Renaissance Blvd NE, Albuquerque, NM 87107	Brook Bassan
5					Cynthia D. Borrego
6	Men's Shelter	Gateway Shelter (proposed)	87108	5400 Gibson Blvd SE, Albuquerque, NM 87108	Pat Davis
6	Men's Shelter	HopeWorks	87106	1515 Yale Blvd SE, Albuquerque, NM 87106	Pat Davis
6	Men's Shelter	St. Martin's Hospitality Center - Yale Campus	87106	1515 Yale Blvd SE, Albuquerque, NM 87106	Pat Davis
6	Women's Shelter	Maya's Place	87108	640 Grove St SE, Albuquerque, NM 87108	Pat Davis
6	Women's Shelter	UNM Women's Resource Center	87131	302 Cornell Dr, Albuquerque, NM 87131	Pat Davis
6	Youth Shelters	New Day Youth & Family Services	87108	2820 Ridgecrest Dr SE, Albuquerque, NM 87108	Pat Davis
6	Behavioral & Mental Health Services	Albuquerque Family Mental Health Clinic	87108	401 San Pedro Dr NE, Albuquerque, NM 87108	Pat Davis
6	Behavioral & Mental Health Services	Calamus Center for Integrative Mental Health	87108	120 Madeira Dr NE, Albuquerque, NM 87108	Pat Davis
6	Behavioral & Mental Health Services	Conciencia Mental Health LLC	87108	219 Sierra Dr SE, Albuquerque, NM 87108	Pat Davis
6	Behavioral & Mental Health Services	Haven Behavioral Hospital of Albuquerque	87108	5400 Gibson Blvd SE, Albuquerque, NM 87108	Pat Davis
6	Behavioral & Mental Health Services	Perfectly Imperfect LLC	87108	146 Quincy St NE, Albuquerque, NM 87108	Pat Davis
6	Behavioral & Mental Health Services	Therapeutic Living Services Inc	87108	5601 Domingo Rd NE, Albuquerque, NM 87108	Pat Davis
6	Behavioral & Mental Health Services	Public Health Department	87108	7525 Zuni Rd SE B, Albuquerque, NM 87108	Pat Davis
6	Behavioral & Mental Health Services	East Central Multi Services Center	87108	306 San Pablo St SE, Albuquerque, NM 87108	Pat Davis

6	Behavioral & Mental Health Services	Bernalillo County Department of Behavioral Health	87108	5901 Zuni Rd SE, Albuquerque, NM 87108	Pat Davis
6	Drug/Alcohol Treatment	Addiction Solutions	87106	3631, 110 Columbia Dr SE #53, Albuquerque, NM 87106	Pat Davis
6	Drug/Alcohol Treatment	Albuquerque Health Services	87108	112 Monroe St NE, Albuquerque, NM 87108	Pat Davis
6	Drug/Alcohol Treatment	Turquoise Lodge Hospital	87108	5400 Gibson Blvd SE, Albuquerque, NM 87108	Pat Davis
6	Drug/Alcohol Treatment	County Abuse Programs	87108	5901 Zuni Rd SE, Albuquerque, NM 87108	Pat Davis
6	Drug/Alcohol Treatment	CARE Detox	87108	5901 Zuni Rd SE, Albuquerque, NM 87108	Pat Davis
6	Drug/Alcohol Treatment	Shadow Mountain Recovery at Albuquerque	87108	5400 Gibson Blvd SE, Albuquerque, NM 87108	Pat Davis
6	Halfway Houses/Transitional Housing	ABQ Indian Center	87108	105 Texas St SE, Albuquerque, NM 87108	Pat Davis
6	Halfway Houses/Transitional Housing	Wainwright Manor	87108	5601 Gibson Blvd SE, Albuquerque, NM 87108	Pat Davis
6	Halfway Houses/Transitional Housing	Transition For Living	87108	6231 Gibson Blvd SE, Albuquerque, NM 87108	Pat Davis
6	Halfway Houses/Transitional Housing	Transitional Living Services Inc	87108	4020 Central Ave SE, Albuquerque, NM 87108	Pat Davis
6	Halfway Houses/Transitional Housing	Oxford House Pennsylvania	87108	8406 San Juan Rd NE, Albuquerque, NM 87108	Pat Davis
6	Halfway Houses/Transitional Housing	Oxford House Turquoise	87108	633 Arizona St SE, Albuquerque, NM 87108	Pat Davis
6	Halfway Houses/Transitional Housing	Oxford House Tahiti	87108	6512 Anderson Ave SE, Albuquerque, NM 87108	Pat Davis
6	Halfway Houses/Transitional Housing	Tiny Home Village	87108	105 Texas St SE, Albuquerque, NM 87108	Pat Davis
6	Health Centers	One Hope Centro de Vida Health Center	87108	133 Virginia St NE, Albuquerque, NM 87108	Pat Davis
6	Health Centers	East Central Health and Social Service Center	87108	7525 Zuni Rd SE, Albuquerque, NM 87108	Pat Davis
6	Health Centers	Young Children's Health Center	87108	306 San Pablo St SE # A, Albuquerque, NM 87108	Pat Davis
6	Health Centers	Albuquerque Indian Center	87108	105 Texas St SE, Albuquerque, NM 87108	Pat Davis
6	Health Centers	All Nations Wellness and Healing Center	87108	ABQ161076, Albuquerque, NM 87108	Pat Davis
6	Health Centers	First Nations Community HealthSource	87108	7317 Central Ave NE, Albuquerque, NM 87108	Pat Davis
6	Health Centers	First Nations Community HealthSource (Zuni Clinic)	87108	5608 Zuni Rd SE, Albuquerque, NM 87108	Pat Davis
6	Social Services	County Social Services	87106	435-499 Amherst Dr NE, Albuquerque, NM 87106	Pat Davis
6	Social Services	Vocational Rehabilitation	87108	5400 Gibson Blvd SE, Albuquerque, NM 87108	Pat Davis
6	Social Services	New Creation Church: Meal Site	87108	8016 Zuni Rd SE, Albuquerque, NM 87108	Pat Davis
6	Social Services	Food Distribution Center - Fray Antonio Kitchen:	87108	404 San Mateo Blvd NE, Albuquerque, NM 87108	Pat Davis
6	Social Services	La Mesa Presbyterian Church: Meal Site	87108	7401 Copper Ave NE, Albuquerque, NM 87108	Pat Davis
6	Social Services	Transgender Resource Center of New Mexico	87108	5600 Domingo Rd NE, Albuquerque, NM 87108	Pat Davis
6	Social Services	God's Warehouse: Meals	87108	8011 Central Ave NE, Albuquerque, NM 87108	Pat Davis
6	Social Services	Compassion Center w/Rev. Joanne Landry	87108	7501 Trumbull Ave SE, Albuquerque, NM 87108	Pat Davis
6	Social Services	Restoration Ministries Church: Meal Site	87108	824 San Mateo Blvd SE, Albuquerque, NM 87108	Pat Davis
6	Social Services	Phil Chacon Park: Pick-up point for shelters	87108	7600 Southern Ave SE, Albuquerque, NM 87108	Pat Davis
6	Social Services	New Day and Drop In Outreach	87108	142 Truman St NE, Albuquerque, NM 87108	Pat Davis
6	Social Services	Jack and Jill Park: Shelter Pickup Point	87108	Albuquerque, NM 87108	Pat Davis
6	Social Services	Wilson Park: Shelter Pickup Point	87108	6000 Anderson Ave SE, Albuquerque, NM 87108	Pat Davis
6	Social Services	Zia Community Cares LLC	87108	5400 Gibson Blvd SE Building 11, Albuquerque, NM 87108	Pat Davis
6	Halfway Houses/Transitional Housing	Crossroads for Women	87108	640 Grove St SE, Albuquerque, NM 87108	Pat Davis
7	Men's Shelter	VA Hospital- Health Care for Homeless Veterans	87108	1501 San Pedro Dr SE, Albuquerque, NM 87108	Diane G. Gibson
7	Women's Shelter	Coalition To Stop Violence Against Native Women	87109	4600 Montgomery Blvd NE b202, Albuquerque, NM 87109	Diane G. Gibson
7	Women's Shelter	Women's Housing Coalition	87110	3005 San Pedro Dr NE, Albuquerque, NM 87110	Diane G. Gibson
7	Behavioral & Mental Health Services	Albuquerque Behavioral Health	87110	8200 Mountain Rd NE, Albuquerque, NM 87110	Diane G. Gibson
7	Behavioral & Mental Health Services	Heights Mental Health	87110	1101 Cardenas Dr NE #206, Albuquerque, NM 87110	Diane G. Gibson
7	Behavioral & Mental Health Services	ABQ Behavioral Services/ABQ Psychiatric Services	87110	2900 Louisiana Blvd NE Suite C1, Albuquerque, NM 87110	Diane G. Gibson

7	Behavioral & Mental Health Services	NMAIMH	87110	630 Manzano St NE B, Albuquerque, NM 87110	Diane G. Gibson
7	Drug/Alcohol Treatment	Recovery Based Solutions	87110	3200 Carlisle Blvd NE # 228, Albuquerque, NM 87110	Diane G. Gibson
7	Drug/Alcohol Treatment	Shadow Mountain Recovery Intensive Outpatient	87110	7005 Prospect Pl NE, Albuquerque, NM 87110	Diane G. Gibson
7	Drug/Alcohol Treatment	Focused Recovery of New Mexico	87110	3939 San Pedro Dr NE, Albuquerque, NM 87110	Diane G. Gibson
7	Halfway Houses/Transitional Housing	Oxford House Montgomery Park	87110	1402 Hendola Dr NE, Albuquerque, NM 87110	Diane G. Gibson
7	Halfway Houses/Transitional Housing	Oxford House Fair Heights	87110	2833 Bel Air Dr NE, Albuquerque, NM 87110	Diane G. Gibson
7	Halfway Houses/Transitional Housing	Oxford House Palomas	87110	2729 Palomas Dr NE, Albuquerque, NM 87110	Diane G. Gibson
7	Halfway Houses/Transitional Housing	Oxford House Candelaria	87112	1209 Childers Dr NE, Albuquerque, NM 87112	Diane G. Gibson
7	Halfway Houses/Transitional Housing	Oxford House Indian School	87112	9600 Euclid Ave NE, Albuquerque, NM 87112	Diane G. Gibson
7	Halfway Houses/Transitional Housing	Oxford House Zimmerman	87110	6105 Zimmerman Ave NE, Albuquerque, NM 87110	Diane G. Gibson
7	Halfway Houses/Transitional Housing	Oxford House Mountain Vista	87110	1309 Florida St NE, Albuquerque, NM 87110	Diane G. Gibson
7	Health Centers	Bernalillo County Wellesley Health Center	87107	2400 Wellesley Dr NE, Albuquerque, NM 87107	Diane G. Gibson
7	Health Centers	First Nations Community Healthsource Truman	87110	625 Truman St NE, Albuquerque, NM 87110	Diane G. Gibson
7	Social Services	Child Protective Services	87110	4501 Indian School Rd NE, Albuquerque, NM 87110	Diane G. Gibson
7	Social Services	New Mexico Coalition to End Homelessness	87110	2501 San Pedro Dr NE suite 111, Albuquerque, NM 87110	Diane G. Gibson
7	Social Services	NM Income Support Division - Human Services C	87110	4330 Cutler Ave NE, Albuquerque, NM 87110	Diane G. Gibson
8	Drug/Alcohol Treatment	Turning Point Recovery Center	87111	9201 Montgomery Blvd NE #5, Albuquerque, NM 87111	Diane G. Gibson
8	Halfway Houses/Transitional Housing	Oxford House Morris	87112	2413 Elizabeth St NE, Albuquerque, NM 87112	Diane G. Gibson
8	Halfway Houses/Transitional Housing	Oxford House Oasis Hills	87111	12001 Golden Gate Ave NE, Albuquerque, NM 87111	Trudy E. Jones
9	Women's Shelter	Barrett House	87112	10300 Constitution Ave NE, Albuquerque, NM 87112	Trudy E. Jones
9	Halfway Houses/Transitional Housing	Veterans Integration Centers (VIC)	87123	13032 Central Ave SE, Albuquerque, NM 87123	Trudy E. Jones
9	Halfway Houses/Transitional Housing	Oxford House Constitution	87112	11013 Constitution Ave NE, Albuquerque, NM 87112	Don Harris
9	Halfway Houses/Transitional Housing	Oxford House Snowheights	87112	2113 June St NE, Albuquerque, NM 87112	Don Harris
9	Halfway Houses/Transitional Housing	Oxford House Elizabeth	87112	2207 Elizabeth St NE, Albuquerque, NM 87112	Don Harris
9	Halfway Houses/Transitional Housing	Oxford House Ponderosa	87112	1608 Singletary Dr NE, Albuquerque, NM 87112	Don Harris
9	Social Services	Catholic Community Services	87112	10601 Lomas Blvd NE # 112, Albuquerque, NM 87112	Don Harris
BC	Men's Shelter	Joy Junction Shelter	87105	4500 2nd St SW, Albuquerque, NM 87105	
BC	Women's Shelter	Joy Junction Shelter	87105	4500 2nd St SW, Albuquerque, NM 87105	
BC	Youth Shelters	Amistad Runaway Facility	87105	1706 El Centro Familiar Blvd SW, Albuquerque, NM 87105	
BC	Drug/Alcohol Treatment	Recovery Services of New Mexico Isleta	87105	1711 Isleta Blvd SW, Albuquerque, NM 87105	
BC	Drug/Alcohol Treatment	Recovery Services of New Mexico Five Points Cli	87105	1528 5 Points Rd SW, Albuquerque, NM 87105	
BC	Health Centers	First Choice Community Healthcare - South Valle	87105	2001 N Centro Familiar Blvd SW suite a, Albuquerque, NM 87105	
Fed	Social Services	Department-Veteran Affairs Lib			

**CITY of ALBUQUERQUE
TWENTY FOURTH COUNCIL**

COUNCIL BILL NO. R-21-141 ENACTMENT NO. R-2021-021

SPONSORED BY: Pat Davis

1 **RESOLUTION**

2 **CALLING FOR ADDITIONAL COMMUNITY INPUT AND GOOD NEIGHBOR**
3 **MEASURES BY THE CITY FOR THE PROPOSED GATEWAY CENTER AT THE**
4 **FORMER LOVELACE HOSPITAL SITE.**

5 **WHEREAS, the City of Albuquerque is acquiring or has acquired the former**
6 **Lovelace Hospital site at 5400 Gibson Boulevard SE with intent that it house**
7 **the City's anticipated Gateway Center for Homeless Services (the "Gateway**
8 **Center"); and**

9 **WHEREAS, a Gateway Center will offer much needed support and services**
10 **to assist the homeless and promote the health and welfare of the City; and**

11 **WHEREAS, notwithstanding the need for homeless resources and services,**
12 **the City recognizes that the Gateway Center will present new land use and**
13 **community impacts within the City; and**

14 **WHEREAS, the City has previously collected online comment and held an**
15 **input session for the project on December 14, 2020, in order to gather general**
16 **feedback about the project; and**

17 **WHEREAS, notwithstanding the prior input session, the City has not yet**
18 **offered individualized attention to the neighborhoods and businesses in**
19 **closest proximity to the Gateway Center; and**

20 **WHEREAS, those neighbors and businesses bearing the greatest impacts**
21 **should be offered additional avenues for information sharing and gathering,**
22 **on-going updates, and an ongoing point of contact for presenting concerns**
23 **that might be reasonably addressed by the City; and**

24 **WHEREAS, a good neighbor program should be established for these**
25 **purposes before the City takes any further steps toward development of the**
26 **Gateway Center.**

1 BE IT RESOLVED BY THE COUNCIL, THE GOVERNING BODY OF THE CITY OF
2 ALBUQUERQUE:

3 SECTION 1. The City shall establish a good neighbor program for the
4 Gateway Center that:

5 • Offers at least two community input sessions within the next 45 days
6 specifically for neighbors, neighborhood associations, and businesses
7 located within communities adjoining the Gateway Center; and
8 • Kicks off or advances discussions towards additional components of
9 a Good Neighbor Agreement by the City with area residents and businesses to
10 be in place for so long as the Gateway Center operates at this location. This
11 discussion will, at a minimum, address:

- 12 ○ Overnight capacity;
- 13 ○ Security protocols;
- 14 ○ Land use changes that will be required to authorize proposed
15 uses at the site;
- 16 ○ Acceptable methods for the dissemination of project and
17 programming updates for interested persons within communities adjoining
18 the Gateway Center for the duration of its operation; and
19 ○ A point of contact where persons can direct their concerns
20 and have questions answered about the Gateway Center.

21 SECTION 2. The City shall not issue a certificate of occupancy or any
22 Conditional Use Permits for the Gateway Center until the two community input
23 sessions have occurred and the good neighbor program described in Section
24 1, above, has been completed.

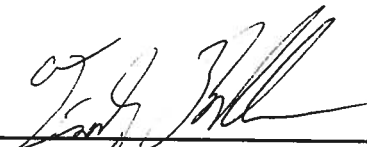
1 PASSED AND ADOPTED THIS 3rd DAY OF May, 2021
2 BY A VOTE OF: 9 FOR 0 AGAINST.

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10 Cynthia D. Borrego, President
11 City Council

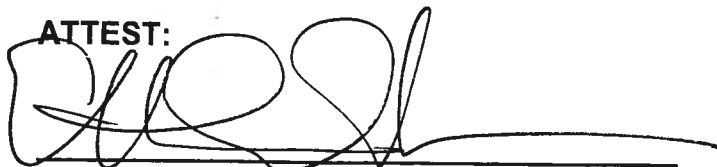
12
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14 APPROVED THIS 13 DAY OF May, 2021

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17 Bill No. R-21-141

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24 Timothy M. Keller, Mayor
25 City of Albuquerque
26

27
28 ATTEST:

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30

31 Ethan Watson, City Clerk
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33
34

Date: October 19, 2021

Attn: Robert Lucero, Zoning Hearing Examiner

Statement and information presented at October 19, 2021 Zoning hearing by Peter Kalitsis, a member of the Parkland Hills Homelessness Solutions Committee, and am representing of our Neighborhood Association re:

Albuquerque's proposed Gateway Center at 5400 and 5006 Gibson Blvd SE

(See attached referenced file "HRT_Scope with Timeline 6-1-21")

Thank you. I am Peter Kalitsis, a member of the Parkland Hills Homelessness Solutions Committee, and am representing of our Neighborhood Association.

We are requesting you reject the City's Conditional Use Permit application for the proposed Gateway Center at 5400 and 5006 Gibson Blvd SE. for the following reasons:

1. Clarification of Ms. Huval testimony of purpose of UNM Study

The description that Lisa Huval presented at the prior Zoning hearing was incomplete. When Mr. Lucero asked if the UNM study was looking generally at emergency shelters or is it specifically to the subject matter of today's hearing, Ms. Huval stated that it was "LOOKING GENERALLY AT EMERGENCY SHELTERS." This is contradicted by the presentation to the Homeless Services System committee meeting on June 1, 2021 attended by the Parkland Hills Homelessness Solutions Committee member, Melinda Frame. Within this presentation, it was communicated that the study was intended to be used in the planning of the Gateway Overnight shelter to assess benefits and adverse impacts, therefore making this study critical to the success of Gateway Shelter and to mitigate significant adverse impacts upon the surrounding neighborhoods and community.

Ms. Huval stated at the hearing "The homeless services committee...the committee identified the need for an assessment of the impact of emergency shelter on local neighborhood and community... Assessment of both the benefits and the potentially adverse impacts of emergency shelter on surrounding neighborhoods and provide recommendations and steps that the city could take to mitigate those impacts." When Mr. Lucero asked if the study was generally as to all shelters or specifically as to the subject matter of today's hearing, Huval's response was that the researchers have been looking generally at emergency shelter. This contradicts the information presented during the Homeless Services System committee meeting on June 1, 2021 in which Janet Page Reeves from UNM discussed this study and presented the following attached slides:

The attached document titled "HRT_Scope with Timeline 6-1-21" is the slide presentation shared by Janet Page Reeves, and clearly states that the purpose of this study is to:

- a. navigate concerns and opportunities related to the construction of the Gateway Center shelter in addition to inform future research directions
- b. **Evaluate impacts and benefits: People served, neighborhoods, community.**

Additionally in the applicant's Operation Plan submitted to the ZHE, under "Community Impact" it references this same study.

2. Inconsistent Operations Plan language

The language of the Operational Plan is problematic in regard to Accountability to neighborhoods.

Throughout the plan, the City uses the definitive words "WILL" and "WILL NOT" for all other elements of operation. Except within re: a public safety district and under "ACCOUNTABILITY AND COORDINATION WITH NEIGHBORHOODS" definitive WILL is replaced with the irresolute "INTENDS." therefore not showing good faith. City needs to guarantee the measures under the Good Neighbor Agreement with a change in wording.

3. IDO legal requirement for PHNA Pre-Submittal Neighborhood Meeting Not Met

At the September 19th hearing, Ms. Fishman stated "we followed the IDO process." Though that was the initial intent, when an error in IDO procedure in scheduling the meeting was brought to Fishman's attention by Parkland Hills NA President, Rob Leming, no effort was made to rectify this and to reschedule the meeting according to the mandated IDO protocol. Ms. Fishman was aware of this as you will note in the email communication included in Parkland Hills Neighborhood Association previous evidence submittal where she states and recognizes their error in not including Parkland Hills NA as an affected neighborhood. Though Parkland Hills Neighborhood Association waited expectantly for an invitation per the procedure clearly outlined in the IDO, this error was never corrected.

This was identified in the following:

In the Parkland Hills Neighborhood Submittal dated September 14, 2021, on page 44, the email dated June 22, 2021 from Jackie Fishman, in the third paragraph, Ms. Fishman acknowledges that "Parkland Hills Neighborhood Association should be considered and affected neighborhood Association to be notified."

Per the IDO requirements identified on pages 42 and 43 of this submittal identifies, IDO Section 14-16-6-4(C), a meeting with the neighborhood is to be offered, and that the applicant "shall offer at least 1 meeting to all Neighborhood Associations whose boundaries include or are adjacent to the subject before filing the application" (see IDO paragraph at the bottom of this letter for reference). The above statement stating this notice is a "courtesy" is in error, unless there are plans to do future invite to Parkland Hills, as our neighborhood is adjacent to the property.

As section 6-4(C)(3) states a "meeting request shall be sent to the 2 representatives on file at the ONC for all applicable Neighborhood Associations via Certified Mail, return receipt requested, or via email" (see IDO paragraph at the bottom of this letter), we request that the Office of Neighborhood Coordination corrects Consensus Planning's error. Our Neighborhood Association would appreciate a follow-up to verify that this misinformation has been corrected.

To further clarify, the IDO section, following, lists the procedure to follow if Parkland Hills Neighborhood Association had received an invitation. As was clearly stated we were copied as a courtesy, not as an offer for us to respond per the IDO. We were never given this required opportunity.

6-4(C)(4) If the Neighborhood Association chooses to meet, the Neighborhood Association must respond within 15 calendar days of the request (Certified Mail or email) being sent. The meeting must be scheduled for a date within 30 calendar days but no fewer than 15 calendar days after the Neighborhood Association accepts the meeting request, unless an earlier date is agreed upon. If the Neighborhood Association declines the meeting, the applicant may proceed pursuant to Subsection (9) below.

4. Day shelter

As the city indicated that this facility will not be a day shelter, we request this be included in the conditions of the Conditional Use permit.

5. Overburden creating Significant Adverse Impact

6-6(A)(3)(c) It will not create significant adverse impacts on adjacent properties, the surrounding neighborhood, or the larger community.

RESPONSE:

Based upon sections

14-16-4-3(A)(2) nuisance conditions affecting other properties,

14-16-5-13(A) OPERATING STANDARDS,

14-16-6-9 (Violations, Enforcement, and Penalties) Property owner responsibilities under this Section.,

14-16-5-13(B) MAINTENANCE STANDARDS shall not create any public or private nuisance., and

5-13(B)(1) Alleys All alleys shall be maintained by the abutting property owner.

For 1 ½ miles, due to the increase in homeless and encampment outside the ¼ mile radius of the overnight shelter, the city is placing a burden on the residential and business neighbors within that area with the city requirement for the property owners to maintain the alley. As stated previously the city should not place that burden, including that of alleys, city parks with needles, trash, and feces on the surrounding neighborhoods, and as part of conditions for the Conditional Use Permit, the city should provide daily cleanup of the alleys and parks within 1 ½ miles rather than ¼ miles, rather than shifting this burden on residences and businesses. If this increase in activity is not clearly apparent, visits to parks and areas surrounding service providers such as the tiny home village clearly demonstrate these outcomes.

These are the specific referenced code sections cited above.

Based upon the following codes requirements that city ordinances regulating “other nuisance conditions” in 14-16-4-3(A)(2) and activities in any zone district... that would create adverse impacts... on neighboring properties.

14-16-4-3(A)(2) All uses shall comply with City ordinances regulating noise, odors, vibration, glare, heat, and other nuisance conditions affecting other properties, as well as the requirements of Section 14-16-5-13 (Operation and Maintenance) unless specifically exempted from one or more of those requirements.

14-16-5-13(A) OPERATING STANDARDS

All structures, uses, and activities in any zone district shall be used or occupied to avoid creating any dangerous, injurious, noxious, or otherwise objectionable condition that would create adverse impacts on the residents, employees, or visitors on the property itself or on neighboring

properties. Uses and activities that operate in violation of applicable State or federal statutes or this IDO are violations of this Section 14-16-5-13 and shall be subject to the penalties of Section 14-16-6-9 (Violations, Enforcement, and Penalties). Property owner responsibilities under this Section include, but are not limited to, compliance with the following standards.

14-16-5-13(B) MAINTENANCE STANDARDS

All property, buildings, and structures shall be maintained in a clean and safe condition and shall not create any public or private nuisance. When the standards and procedures of this IDO or the conditions attached to any permit, approval, or Variance require that any building or site feature be constructed or installed, the property owner is responsible for maintaining those buildings or site features in good repair as approved and for replacing required site features if they are damaged or destroyed or, in the case of living materials, if they become diseased or die after installation. Property owner obligations include, but are not limited to, the following.

5-13(B)(1) Alleys

All alleys shall be maintained by the abutting property owner.

RESPONSE: Parks that experience significant homelessness and surrounding neighborhoods have challenges of increased incidences of syringes, feces, and trash. As there are adjoining residential neighborhoods, with numerous parks within one mile of this facility, some of which have experienced problems with homeless presence with needles, feces, and trash, this facility, with persons using the facility in a city council district that has had over 50 percent of the providers of services to the homeless, prior to opening the overnight shelter facility at Gibson, should clearly be expected to dramatically increase these severe impacts on the surrounding neighborhoods and create a very potentially dangerous environment for the neighboring community and for the unhoused who will be utilizing these surrounding amenities.

As there are many alleys in the surrounding neighborhoods, we would like a condition of a conditional use permit to include daily cleanup by the city of parks, sidewalks, and alleys of needles, feces, weapons, and trash. If this is not done this would place significant adverse impacts on the residences whose properties abut these alleys, or are near these parks, and sidewalks.

If this increase in activity is not clearly apparent, visits to parks and areas surrounding service providers such as the tiny home village clearly demonstrate these outcomes.

For 1 ½ miles, due to the increase in homeless and encampment outside the ¼ mile radius of the overnight shelter, the city is placing a burden on the residential and business neighbors within that area of the city requirement for the property owners to maintain the alley. As stated previously the city should not place that burden, including that of city parks with needles, trash, and feces on the surrounding neighborhoods, and as part of conditions for the Conditional Use Permit, the city should provide daily cleanup of the alleys and parks within 1 ½ miles rather than ¼ miles.

Date: October 19, 2021

Attn: Robert Lucero, Zoning Hearing Examiner

Statement and information presented at October 19, 2021 Zoning hearing by Vera Watson,

re: **Albuquerque's proposed Gateway Center at 5400 and 5006 Gibson Blvd SE**

At this time, the language of the Operational Plan is problematic in regard to Accountability to Neighborhoods. It is worth noting that throughout the plan, the City uses the definitive words "WILL" and "WILL NOT" for ALL OTHER elements of operation. It is only within the sections re: **a public safety district** and under "**ACCOUNTABILITY AND COORDINATION WITH NEIGHBORHOODS**" that the definitive "WILL" is replaced with the irresolute "INTENDS." The City needs to guarantee the measures under the Good Neighbor Agreement with a change in wording. The lack of definitive language re: the Good Neighbor Agreement is why we want a legally-binding Good Neighbor Agreement as a condition of their permit approval.

EXHIBIT V

Date: October 19, 2021

Attn: Robert Lucero, Zoning Hearing Examiner

Statement and information presented at October 19, 2021 Zoning hearing by Vera Watson,
re: **Albuquerque's proposed Gateway Center at 5400 and 5006 Gibson Blvd SE**

At this time, the language of the Operational Plan is problematic in regard to **Accountability to Neighborhoods**. It is worth noting that throughout the plan, the City uses the definitive words "WILL" and "WILL NOT" for ALL OTHER elements of operation. It is only within the sections re: **a public safety district** and under **"ACCOUNTABILITY AND COORDINATION WITH NEIGHBORHOODS"** that the definitive "WILL" is replaced with the irresolute "INTENDS." The City needs to guarantee the measures under the Good Neighbor Agreement with a change in wording. The lack of definitive language re: the Good Neighbor Agreement is why we want a legally-binding Good Neighbor Agreement as a condition of their permit approval.

Research Scope

Homeless Research Taskforce

6-1-21

Introduction

The following study design responds to a request for research from the Homelessness Coordinating Council (HCC) and is intended to build on findings from the Urban Institute Report¹, navigate concerns and opportunities related to the construction of the Gateway Center shelter, and inform future research directions.

Objective A

Review existing data to quantify permanent supportive housing needs (e.g., group homes, scattered-site and single site) for different populations.

Methods

Conduct a systematic literature review (peer-review and gray literature) on the known range of housing settings and options used as permanent supportive housing to address homelessness in the United States and factors that predict variable housing stability across settings. The review will be conducted in a systematic way with support from UNM research librarians. *Conducted by TBD w/Jenna Dole (UNM Sociology PhD student) with mentorship provided by HRT faculty Crisanti & Soto Mas.*

- 1.) Access and analyze Homelessness Management Information Systems (HMIS) data (2015-2020) through an agreement with the New Mexico Coalition to End Homelessness (NMCEH) in order to study trends in times from assessment to housing and factors predicting a return to homelessness. *Conducted by Kelli Kasper with mentorship provided by HRT faculty Erhardt.*
- 2.) Conduct qualitative interviews and/or structured dialogue groups/focus groups with housing services providers (N=12), community health workers (N=6), and adult individuals who have experienced/are experiencing homelessness (N=18) to understand predictive factors that influence success in varied existing or possible housing types and developing considerations and recommendations for newly allocated permanent supportive housing. *Conducted by the UNM Office for Community Health with mentorship provided by HRT Page-Reeves.*
- 3.) Synthesize findings into a report with recommendations that include an estimate for the number of permanent supportive housing units needed across varied housing types in Albuquerque.

¹ Assessing Shelter Capacity and Dynamics for Accommodating the Homeless Population in Albuquerque NM

Objective B

Evaluate impacts and benefits: People served, neighborhoods, community.

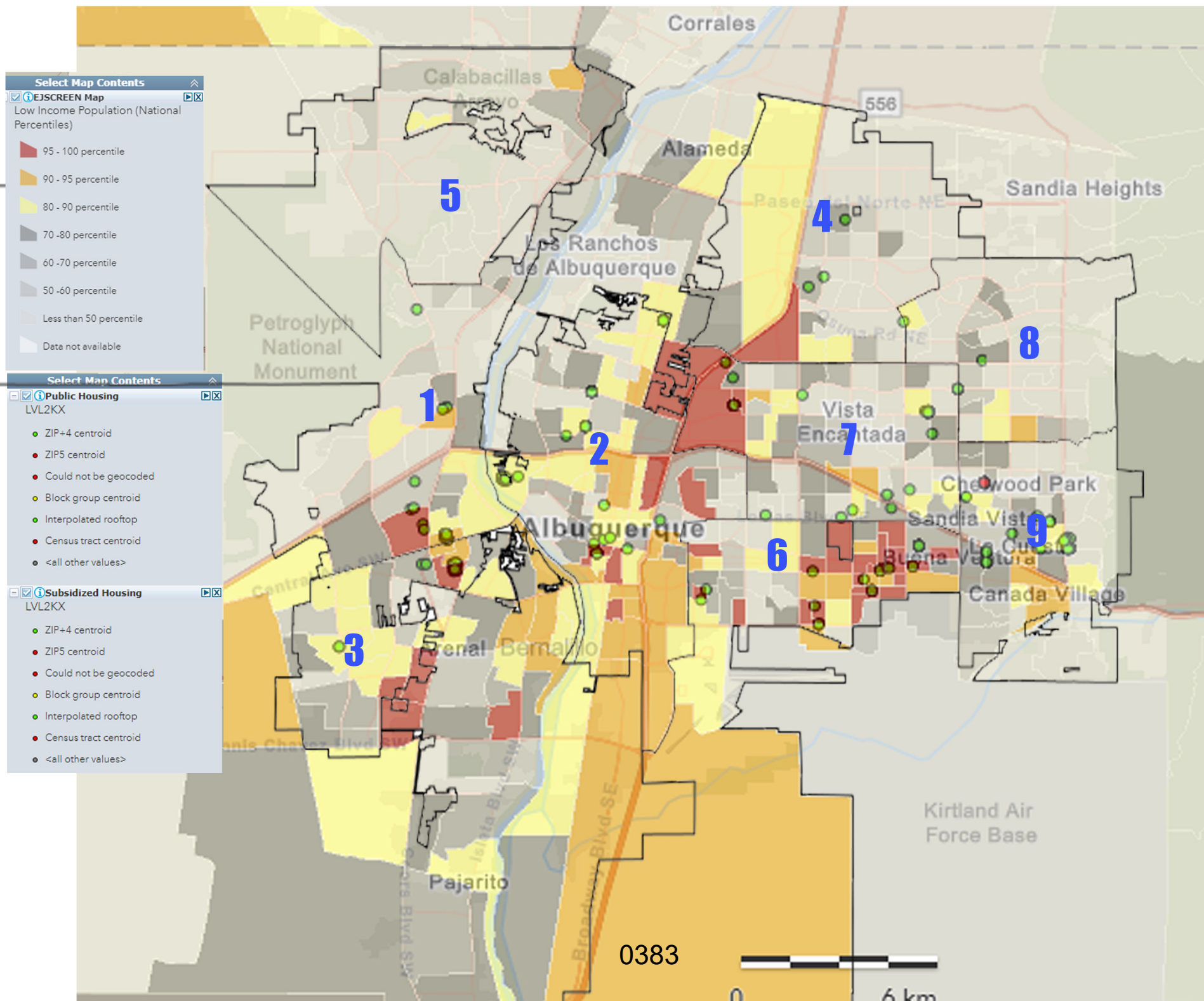
Methods

- 1.) Conduct a systematic literature review (peer-review and gray literature) on barriers and facilitators to successfully opening and operating new emergency shelters. The review will focus on community impact involving both risks and benefits associated. The review will be conducted in a systematic way with support from UNM research librarians. *Conducted by Jenna Dole (UNM Sociology PhD student) with mentorship provided by HRT faculty Crisanti & Soto Mas.*
- 2.) Hold listening sessions with the five Neighborhood Association representatives to the HCC and other relevant neighborhood stakeholders to obtain specific neighborhood perspectives and input: 1 session will be held in June/July at the beginning of the project, a second session will be held in January prior to development of the report and recommendations. *Facilitated by Michaela Pride, Professor of Architecture and co-facilitated by HRT faculty Ehrefocht.*
- 3.) Conduct qualitative interviews and/or structured dialogue groups/focus groups in Objective A with housing services providers (N=12), community health workers (N=6), and adult individuals who have experienced/are experiencing homelessness (N=18) to understand the positive impact of emergency shelters on individuals experiencing homelessness and on the community. *Interviews and focus groups will be conducted in a way to provide data for method #3 for this Research Objective and for Objective A (see method #3 above). Conducted by the UNM Office for Community Health with mentorship provided by HRT Page-Reeves.*
- 4.) Conduct a neighborhood impact assessment using the lit review in B1 above, input from the listening sessions and interviews, informal check-ins with community stakeholders, and relevant local data including crime statistics, property values, business disruption, and community health outcomes. The geographic area will include Wells Park from North of Lomas to I-40 and Gibson Medical Center. *Conducted by Post-Doc Matthew Schwartz with support from Andrew Gorvetzian and mentorship provided by HRT faculty Ehrefocht & O'Donnell.*
- 5.) Synthesize findings into a report that includes recommendations for emergency shelters programming and infrastructure, and for strategies to anticipate and address community concerns related to the allocation of new emergency shelter funds/sites.

Timeline

Objective	Activity	Month									
		June	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	
LOGISTICS	Submit IRB	X									
	Execute Data Sharing Agreement(s) & obtain data sets	X	X								
	Meet with UNM Leadership			X			X			X	
	PRESENET RESULTS TO HCC									X	
Objective 1	Conduct lit review	X	X	X							
	Revise/Finalize lit review				X	X	X				
	Analyze HMIS data			X	X	X	X	X			
	Conduct interviews/groups			X	X	X					
	Analyze qual data						X	X	X		
	Write report								X	X	
Objective 2	Conduct literature review	X	X	X							
	Revise/Finalize lit review				X	X	X				
	Conduct Listening Sessions		X						X		
	Conduct interviews/groups			X	X	X					
	Analyze qual data						X	X	X		
	Analyze community impact			X	X	X	X	X			
	Write report								X	X	

EXHIBIT X





Homeless Services System

11:00 – 12:30

June 1, 2021

Minutes

Meeting Participation Principles:

- Past Progress – Many diverse, and respected voices have contributed to where we are today.
- Preparation - All background materials, minutes and project updates should be read, prior to meetings.
- Contribution – Every voice is elicited, uninterrupted, and heard.
- Distraction - Mute cell phones, avoid side-conversations, stay on-topic.
- Transparency – Acknowledge mistakes, provide upward feedback, seek differing opinions.

Co-Chairs: Erin Engelbrecht (Mayor's Office), Commissioner Charlene Pyskoty (Bernalillo County), Rodney McNease (UNM)

Attendees: Erin Engelbrecht (CABQ), Laura Norman (CABQ consultant), Cate Reeves (NMPCA), Deiandra Cole (Downtown Block by Block Ambassadors), Christina Apodaca (Santa Barbara Martineztown NA), Rodney McNease (UNM), Comm Charlene Pyskoty (BernCo), Kinsey Cooper (CABQ), Lisa Huval (CABQ), Marit Tully (Near North Valley NA), Melinda Frame (Parkland Hills NA), Laura Nguyen (Mental Health Response and Advisory Committee), Beth Brownell (Stronghurst NA), Brother Nick (Good Shepherd Center), Janet Page Reeves (UNM)

Individual:	Discussion/Action
Welcome/Introductions and Approval of Minutes Comm Pyskoty	<ol style="list-style-type: none"> 1) Welcome, and introductions were made. 2) Motion to approve minutes of 05.04.21 was made by Erin Engelbrecht and seconded by Rodney McNease. Motion to approve passed. 3) Comm Pyskoty monitoring the chat box throughout the meeting
UNM Evaluations Update, Janet Page Reeves	<ol style="list-style-type: none"> 4) Janet Page Reeves, Cultural Anthropologist at UNM and also Director of Research for the Office for Community Health at UNM. UNM is following up on research objectives of this and another HCC committee. Evaluating the impact of shelters on neighborhoods and how to mitigate impact is the objective that came out of this HSS Committee. UNM is internally funding this effort. Screen was shared and presentation on UNM Evaluations reviewed. <ul style="list-style-type: none"> -<u>Objective A</u>: Review existing data to quantify permanent supportive housing needs (eg, group homes, scattered site and single site) for different populations. <ul style="list-style-type: none"> - Systematic literature review is being done - Access and analyze Homelessness Management Information System (HMIS data) through an agreement with the NM Coalition to End Homelessness.

<p>Community Engagement GMC, Kinsey Cooper</p>	<p><u>-Objective B: Evaluate impacts and benefits: people served, neighborhoods, community</u></p> <ul style="list-style-type: none"> -Conduct systematic literature review -Hold listening sessions with the 5 Neighborhood Association representatives to the HCC and other relevant neighborhood stakeholders -Conduct qualitative interviews and/or structured dialogue groups/ focus groups -Conduct neighborhood impact assessment using the lit review above, input from the listening sessions and interviews, informal check-ins with community stakeholders and relevant local data -Synthesize findings into a report that includes recommendations <p>Timeline shared: Logistics and for Obj 1 and Obj 2. All finalized Feb 2022</p> <p>Marit Tully asked for clarity on where objectives came from; Janet Page Reeves explained that these were the objectives of interest from the HCC. Lisa Huval confirmed that Quinn Donnay, Carol Pierce and Lisa Huval met with Janet Page Reeves to offer input as scope of project was developed.</p> <p>Marit Tully said that current geographic scope on neighborhood impact assessments is insufficient – two of the major providers are north of I40, in Near North Valley NA. Easy change to make per Janet Page Reeves.</p> <p>Third, Marit Tully asked if the word “benefits” is needed. This project will look at both positive and negative; be balanced; understand all the dimensions per Janet Page Reeves.</p> <p>Christina Apodaca, even though Santa Barbara Martineztown doesn’t have providers there, do feel the impact/overspill. Encouraged literature review to include communities that look like Albuquerque; primarily, where are the homeless providers located in those communities?</p> <p>Marit Tully encouraged looking at the situation holistically and investing in the neighborhoods where these services are located.</p> <p>Regarding timing, chat box question asked about timing with specific relevance to the Gibson Medical Center project. Per Janet Page Reeves, the work will be done as quickly as possible, but don’t see it being done before February. Lisa Huval stressed that the Gateway Center at Gibson Medical Center project is complex and will not be complete by February. This information will be utilized as services are brought on line at GMC and will help mitigate neighborhood impact. There are multiple feedback loops. Melinda Frame follow up question was whether any information would be available for the City’s community input meetings in mid June. No, can’t do any of the UNM input meetings until the IRB (Institutional Review Board) approval is obtained, per Janet Page Reeves.</p> <p>Further discussion of chat box question on timing of the report and how it will inform the plans for Gateway Center at GMC if it is not complete until Feb 2022. Kinsey Cooper moved into her community outreach presentation which reviewed</p>
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Core Documents:

CABQ: Focus Group – People With Lived Experience, Gateway Center Site Ranking Report, Gateway Center Online Survey Report, Gateway Center Public Input Session, Changing the Story document, Assessing Shelter Capacity Report (Barbara Poppe and Stephen Metreaux report), Gateway Concepts document, Medical Respite Community Needs Assessment

UNM: UNM Hospitals 2020 Community Health Needs Assessment

BernCo: Bernalillo County Healthcare Task Force Recommendations: 2014

EXHIBIT Z

PHNA EXHIBIT 9 14 EXHIBIT A THROUGH M

TABLE OF CONTENTS OF EXHIBITS

(Note: **SEE EXHIBIT Z FOR** EXHIBIT A through M from PHNA 9/14/21 ZHE submittal)

EXHIBIT A – PHNA NOTIFICATON

EXHIBIT B – CONTENT NEIGHBORHOOD MEETING

EXHIBIT C – MITIGATIONS REQUESTS

EXHIBIT D – BED CAPACITY REQUEST

EXHIBIT E– ADVERSE IMPACTS- UNMET COMMITMENTS

EXHIBIT F– 51% OVERBURDEN

EXHIBIT G– OPERATIONAL PLAN DEFICIT

EXHIBIT H– PROVIDER SHORTAGE

EXHIBIT I- TRANSPORTATION

EXHIBIT J- TRANSITION TO HOUSING

EXHIBIT K- BED CAPACITY LIMITS

EXHIBIT L- GOOD NEIGHBOR AGREEMENT

EXHIBIT M- PHNA CONCLUSION

EXHIBIT N- PHNA 9 14 SUBMITTAL (complete)

EXHIBIT O- 9/21 EHNA SUBMITTAL

EXHIBIT P- 9/21 SHNA SUBMITTAL

EXHIBIT Q- 9/21 **CRIME DATA SUBMITTAL**

EXHIBIT R- 9/21 RAVEN DEL RIO SUBMITTAL

EXHIBIT S- 9/21 PETER S. KALITSIS TESTIMONY

EXHIBIT T- R-21-141 RESOLUTION GATEWAY

EXHIBIT U- 10/19 PHNA TESTIMONY FOR 10 21 21 HEARING

EXHIBIT V- 10/19 VERA WATSON TESTIMONY

EXHIBIT W- 10/19 PHNA UNM STUDY PURPOSE (HRT Scope with Timeline 6-1-21

EXHIBIT X- **EPA LOW INCOME/PUBLIC HOUSING MAP**

EXHIBIT Y- HSS JUNE 1 MEETING

EXHIBIT Z- PHNA EXHIBIT 9 14 (EXHIBIT A THROUGH M)

PHNA EXHIBIT 9 14 (EXHIBIT A THROUGH M)

Date: September 14, 2021

Attn: Robert Lucero, Zoning Hearing Examiner

Please find enclosed the Written Statement (pg. 1 – 13) and Supporting Evidence (pg. 14 – 218) submitted by the Homelessness Solutions Committee of Parkland Hills Neighborhood Association regarding the Family & Community Services' application for a Conditional Use Permit for the City of Albuquerque's proposed Gateway Center at 5400 and 5006 Gibson Blvd SE

WRITTEN STATEMENT: SUMMARY

EXHIBIT A – PHNA NOTIFICATION

As an adjoining neighborhood to the proposed Gateway facility, we stand behind the ideals of the Gateway center to help the unhoused of our community. We see the need for more facilities to help those experiencing homelessness in our City, and believe these facilities are needed throughout our City. That said, we do feel the process to apply for the Conditional Use Permit at 5400 and 5006 Gibson Blvd SE has been rushed – many details for an adequate Operational Plan ensuring Gateway is impactful for the homeless population, along with strategies for mitigating significant adverse impacts to the surrounding community, are still undeveloped. Furthermore, the applicant failed to meet the requirements outlined in the IDO for submission of a Conditional Use Permit application. Therefore, though we understand the need and the desire to help our unhoused neighbors, Parkland Hills requests that you reject the City of Albuquerque Family & Community Service's Conditional Use Permit application for 5400 and 5006 Gibson Blvd on the grounds that the applicant did not adequately complete the IDO's submission process.

The applicant failed to meet the protocols set forth in the IDO for a pre-submittal meeting with our neighborhood as per IDO 6-4(C)(3) & IDO 6-4(C)(4). As an adjoining neighborhood, Parkland Hills did not receive "a meeting request," as mandated in IDO 6-4(C)(3), but rather, received a meeting notice "as a courtesy." Additionally, Parkland Hills was not involved in selecting the date for a pre-submittal meeting; the date was not "agreed upon" (IDO 6-4(C)(4), but rather, was determined by the applicant. Parkland Hills Neighborhood Association [PHNA] President Rob Leming wrote a letter to Consensus Planning and the City addressing this error, to which Jacqueline Fishman of Consensus Planning responded on June 18, 2021, stating Leming was correct and "that Parkland Hills should be considered an 'affected neighborhood association' to be notified." **[All correspondence found in Appendix A]**

EXHIBIT B – CONTENT NEIGHBORHOOD MEETING

Additionally, though they abandoned proper protocol for the pre-submittal meeting, a meeting did occur on June 22, 2021, and the applicant failed to address questions and provide the information mandated in IDO 6-4(C)(6), including but not limited to, “scope of uses, approximate square footages for different uses, general site layout, design guidelines, etc,” which is reflected in the Facilitated Meeting Report **[First item within Appendix A]** under Question no. 2b, pg. 4 of the report, and Question 2i, pg 7 of the report. Further details of these errors are outlined in a letter and attachments Parkland Hills Neighborhood Association President Rob Leming submitted to the City Planning Department on August 10, 2021, receipt of which was confirmed and added to the records VA-2021-00316 and VA-2021-00317. They are also attached to this document **following the complete Facilitated Meeting Report in Appendix A.**

Additionally, the City has not addressed how they will mitigate adverse impacts to the community. In IDO 6-6(A)(3)(c), it mandates the property “will not create significant adverse impacts on adjacent properties, the surrounding neighborhood, or the larger community.” The impact study being conducted by the University of New Mexico, which is to inform and guide the applicant’s Operational Plan on mitigating adverse impacts to our neighborhoods, has not been completed – it is not projected to be complete until January of 2022.

Though the study and report by UNM are not yet complete, there is much public documentation of the adverse impacts generated by the unhoused population, especially in areas with greater saturation of people experiencing homelessness. We will be referencing many of these articles in this letter, and they ² are adjoined here as **Appendix B - H**. Within these articles, we will also demonstrate the City’s lackluster track record with managing the adverse impacts of the homeless.

Due to the City’s inability to fulfill the mandated procedures of the IDO, and out of concern for the unforeseen damages which may occur without a comprehensive Operational Plan informed by a high impact study to serve the homeless and protect the surrounding communities from adverse impacts, we ask that you deny this application at this time. The city is free to come back once it has met the necessary requirements and offered adequate assurances.

Once the City has followed the protocols set forth in the IDO, and rectified the errors listed above, we would like you to consider adding the following terms as conditions for approval of their Conditional Use Permit:

EXHIBIT C – MITIGATIONS REQUESTS

To help mitigate adverse impacts to our communities, we request:

1. **A mandated Public Safety District encompassing the neighborhoods of Siesta Hills, Elder Homestead, South San Pedro, and Parkland Hills.** Budgeting for this public safety district would include added, designated resources and personnel for dispatch and patrol within the district, including ACS (Albuquerque Community Safety Department) and APD officers; added, designated personnel for street outreach teams; and added, designated personnel for daily cleanup of our parks and alleyways. **Additionally, all schools and public parks are to be excluded from being City shelter pickup/drop-off locations** (articles documenting the negative impacts and dangers at our City parks heavily trafficked and inhabited by the homeless have been submitted as written evidence, **Appendices C,D,E**).
2. **The implementation of a legally-binding Good Neighbor Agreement between the City as the property owner, and the four neighborhoods within the Public Safety District.** The conditions of the agreement must include the creation of a Community Oversight Committee. A list of items which should be incorporated into a Good Neighbor Agreement is attached (**Appendix S**). “Legally-binding” means “disputes, after initial mediation, shall be settled in district court” and not a city hearing officer.
3. **A detailed Operational Plan and budget for a comprehensive 24/7 transportation service system to/from Gateway** – including but not limited to, locations and schedule for pick-up and drop-offs for the shelter’s shuttle system; how the City will be expanding the public bus system and routes to/from Gateway to accommodate clients and residents; details and schedule on van services. (documentation supporting public safety concerns surrounding pick-up and drop-off locations for the City’s shelters have also been submitted as written evidence, **Appendices C,D,E**).
4. **Bed capacity limits** – due to the lack of behavioral health providers in our state, and the City’s track record with moving people out of the shelter system into transitional or permanent housing, and to help prevent additional adverse impacts to a district already saturated with more than 51% of the City’s homeless services, we request an overnight shelter bed capacity limit at the property as a condition of approval. Initially, we would request the City be granted Conditional Use for 15 families and 30 individuals. After demonstrating the successful implementation of these numbers, whereby the City shows they can adequately meet the needs of residents, and move them into housing within 90 days, while simultaneously proving the facility can operate without significant adverse impact to the surrounding communities, we would recommend in 2 years they request an increase in the number of beds at this facility.

EXHIBIT D – BED CAPACITY REQUEST

4. **Bed capacity limits** – due to the lack of behavioral health providers in our state, and the City's track record with moving people out of the shelter system into transitional or permanent housing, and to help prevent additional adverse impacts to a district already saturated with more than 51% of the City's homeless services, we request an overnight shelter bed capacity limit at the property as a condition of approval. Initially, we would request the City be granted Conditional Use for 15 families and 30 individuals. After demonstrating the successful implementation of these numbers, whereby the City shows they can adequately meet the needs of residents, and move them into housing within 90 days, while simultaneously proving the facility can operate without significant adverse impact to the surrounding communities, we would recommend in 2 years they request an increase in the number of beds at this facility.

We have requested these terms be added to the applicant's Conditional Use Permit to help ensure minimal adverse impacts to our communities. Below we will be outlining and presenting evidence supporting the implementation of these terms. The evidence will speak to adverse impacts in communities with large populations of people experiencing homelessness, the City's lack of success in
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mitigating these adverse impacts, as well as evidence supporting bed capacity limits in regard to the numbers of people the City will be able to adequately serve within Gateway, and how lesser numbers can help lessen adverse impacts.

Additional concerns and requests for data with the submission of a new application for a Conditional Use Permit are outlined below:

- Given the size of the overnight shelter the City intends to have at Gateway (**Appendix O**), we would like to request the applicant provide real data on the implications to the surrounding neighborhoods of an overnight shelter exceeding 100 residents.
- We request the applicant provide supporting evidence on how they will be able to serve an excess of 100 residents given the shortage of Behavioral Health Providers in our state (**Appendix I, P**).
- We request the applicant to provide supporting evidence on how a shelter with mixed demographics and an excess of 100 residents better serves the homeless population than a system of small shelters serving specific demographics, accompanied by an explanation of why existing resources are not already being utilized.
- We request the applicant provide a strategic plan on transitioning residents of the shelter into housing with the limited availability of housing options in our city.

EXHIBIT E– ADVERSE IMPACTS- UNMET COMMITMENTS

EVIDENCE: ADVERSE IMPACTS

1. Commitments from Family & Community Services [FCS] have not been met: Evaluation of Impact

Below are communications dated March 25, 2021, 6:43 PM from Carol Pierce, Director, to Councilor Davis. Carol Pierce is responding to Councilor Davis' question re: operation and oversight at Gateway on pg. 3 (excerpt of communications appears below; full communications attached as **Appendix M**)

Councilor Davis, Question 5: Who does FACS intend to operate the center, how will they be paid and what oversight will be put in place to ensure neighborhood issues and unintended consequences are adequately addressed better than current FACS homeless provider contractors downtown?

Ms. Pierce's response: "FCS will disseminate a Request for Proposal to select an entity that will operate the center. Once that entity is chosen, we will enter into a contract with them and oversee and monitor the contract to ensure it is in compliance with our standards. FCS will also be working with this entity and service providers at this location on Good Neighbor Agreements. As referenced in the draft Housing Services Framework

(<https://www.cabq.gov/family/documents/housingservices-framework>)

document sent to the HCC, we will evaluate the impacts of any emergency shelters within 5 miles of the proposed location including the possible impacts of proposed services (e.g., food, medical care, case management, substance abuse, drop-in access, 24/7 access) and the population to be served. That evaluation of impact will take into consideration the impact of existing services within the area as well and will inform the creation of a detailed plan to address community safety concerns for the area around any proposed emergency shelter locations.

A study is currently being done by the University of New Mexico for the City of Albuquerque to collect data on high-impact strategies for addressing homelessness, and to survey adverse impacts to communities surrounding overnight shelters. **This study was to inform and guide FCS in employing**

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best practices to serve the homeless, and to mitigate adverse impacts to surrounding neighborhoods. This study has yet to be completed – its completion is currently projected for early 2022.

By not waiting for the completion of the UNM report regarding mitigating negative impacts on surrounding neighborhoods, and by not performing an evaluation of impact for a large-scale facility, the City of Albuquerque is not following the procedures they indicated they would enlist to mitigate significant adverse impacts on the area neighborhoods. This demonstrates the City's Operational Plan is not based on data from the study they are having performed, and thereby demonstrates they are not sincerely attempting to mitigate severe impacts. These should be executed to determine shelter needs and requirements before the Conditional Use Permit is approved.

2. City's Track Record in Mitigating Adverse Impacts in Neighborhoods with Homeless Services

The City has demonstrated they are unable to rectify problems within the parks sitting in close proximity to homeless services, as well as those issues found at pickup and drop-off locations for transportation to/from homeless service providers. This is another reason we request that there be a cap of 15 families and 30 individuals at the Gateway shelter, to provide the city with the time and opportunity to develop better systems to alleviate these problems occurring at other locations, and to prevent similar adverse impacts on the neighborhoods surrounding Gateway.

The following reports provide evidence of the lack of success the City has had over the last two years in mitigating significant adverse impact on neighborhoods surrounding homeless service providers. Excerpts from reports appear below:

1. "Wells Park business owners file lawsuit over ongoing homeless problem," by Jeannie Nguyen, KRQE, Posted Oct 4, 2020, updated Oct. 5, 2020 (Appendix B)

"There's threats of violence against the people that are there, the residents that have property around that, destruction of property," says Blair Dunn. Jeannie Nguyen: "Back in July, attorney Blair Dunn sent a letter on behalf of business owners threatening to sue the city if the Mayor didn't fix the problem. Now, they are keeping their word by suing the St. Martin's Hospitality Center off Third and Mountain...With this lawsuit Dunn hopes St. Martin's and the city figure out a solution that works for both homeless people and the long-term residents of the Wells Park neighborhood."

2. "LOCAL VOICES: Albuquerque's homeless: Worse than you think" By Carl Dipalma, Albuquerque resident / Bruce M. Thomson, District 5 Director, board of Directors Chair, Albuquerque Metropolitan Arroyo Flood Control Authority, Sunday, August 8, 2021, 12:02am (Appendix C)

Neighbors' pleas for help to fight crime, drug trafficking, homelessness have long been ignored by the city

While spending the nights in Coronado Park this past year I became completely convinced the neighborhood has become as dangerous as anyplace in town.

The illegal and life-threatening drug trafficking continues on bicycles throughout the dark hours, and there are between 20 and 30 of these stolen two-wheelers there at any given time. The playground has become a home for used syringes, empty alcohol containers, broken glass, human waste, used condoms, discarded bike parts and filthy clothing and all kinds of throwaway weapons and other trash. The number of repeat offenders during the night is more than it has

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ever been because this park is being used as a pickup and drop-off location by the city-funded night shelter. Those people who are rejected by the yellow bus operators stay there after being told they cannot be given an empty bed and are now overflowing onto the surrounding taxpayers' doorways. The property managers for the surrounding locations and their helpers have made about 4,000 calls for assistance to Albuquerque Police Department and to those who direct city law enforcement during the past five or six years, explaining that no one is allowed in the park after dark according to the city ordinance. They have written certified letters to the mayor. They have repeatedly asked their city councilor's office for help in the most serious and respectful way. They have also been ignored at many city-dominated community meetings. They have established the periodical watch with Valley Command between midnight and 4 a.m. month after month after month. They also continue to put their lives on the line every night by making eyewitness reports to APD with their cellphones while on foot. But they and the genuine homeless persons still remain in an increasingly dangerous situation. The spotlights, loudspeakers and warning tickets disappeared long ago into the distance with the patrol car.

Homeless people sleep on the sidewalk in front of a facility called HopeWorks located on 3rd Street in downtown Albuquerque. (Roberto E. Rosales/Albuquerque Journal)

Yes the truly homeless persons are in fear of calling APD because they are then left alone as ongoing unprotected victims of the unpenalized repeat offenders. Last year the Mayor's Office told those calling for help that "they are not going to be put in jail because putting the offender behind bars does not do any good." As a result there has been a growing number of assaults with primitive throwaway weapons, robberies and thefts, rapes every night, drunken and verbal and physical arguments in and around Coronado.

3. "Police records depict pattern of problems, violence at Coronado Park," by Nathan O'Neal, KOB4, Created October 11, 2020 10:48pm; Updated October 11, 2020 10:50pm (Appendix D)

ALBUQUERQUE, N.M. — Coronado Park is considered the heart of Albuquerque's homeless problem. Located near I-40 and 2nd street, it comes with a lot of other problems too – including drug use, violence and mental health issues.

More than two years of police records reveal at least 120 times police, fire and other emergency services were needed at Coronado Park between January 2018 and June 2020.

"That park is not safe. It's not safe for the people experiencing homelessness, it's certainly not safe for any other neighborhood residents to go there," said Doreen McKnight who is president of the Wells Park Neighborhood Association and has lived in the area for 10 years.

"This year alone in 2020 there were three homicides at Coronado Park. In 2019, a disabled woman was raped there and in 2018 there was a murder," said McKnight.

Police 911 logs reveal a variety of other issues.

In February 2019, police investigated a stabbing after a fight broke out at the park.

One month before the stabbing, police responded to a call after a woman said she was suicidal, telling police on lapel camera video that she had previously made attempts to overdose on meth. Officers then took her to get help.

In 2018, the KOB 4 Investigates team used undercover cameras at Coronado Park which revealed illegal drinking, drug deals and people shooting up drugs in broad daylight.

4. "It's becoming increasingly dangerous: Albuquerque park sees 3rd homicide," by Ryan Laughlin, KOB4, Created July 14, 2020, 6:15pm; Updated July 14, 2020 6:24pm (Appendix E)

6

ALBUQUERQUE, NM-Coronado Park in Albuquerque saw its third homicide this year after a man was beaten to death Monday evening

Ralph DiPalma, a volunteer minister, said issues at the park have only been growing worse.

"Instead of straightening out the problem, it's becoming increasingly dangerous." DiPalma said.

There are many homicides among the homeless unreported, deliberate drug overdoses and missing persons," he added.

EXHIBIT F– 51% OVERBURDEN

3. Reasonable Limitations to Help Mitigate Impacts in a District with an Abundance of Homeless Services

Out of nine districts in the City of Albuquerque, District 6 is home to 51.25% of homeless service providers (**Appendix U**). With a saturation of providers serving the homeless population of Albuquerque, our district struggles with adverse impacts on a daily basis – a basic summary of these impacts may be found on page 5 of the 2019 Homeless ABQ Report, generated by homeless service provider Steelbridge Ministries (**Appendix V**). Among the impacts are panhandling and trespassing, the closure of businesses, minor and/or violent altercations with homeless who are mentally ill or inebriated, and criminal activity ranging from minor theft to drug trafficking, prostitution, and human trafficking; as well as public safety issues such as hazardous waste, including feces and needles, being left in our neighborhoods and public parks. There are 11 parks, 9 schools, and 7 daycare and pre-schools within 1.5 miles of the proposed Gateway facility (**Appendix T**), many of which already suffer the adverse impacts of a saturation of homeless providers in our communities.

A study by the University of Pennsylvania (**Appendix Q**) found a 56% increase in most property crimes (car burglary, car thefts) within about a two-block radius of emergency shelters. This same study found these crimes could be mitigated with sufficient presence of security and law enforcement. Additionally, according to the National Health Care for the Homeless Council (**Appendix R**), people experiencing homelessness are nearly 20 times as likely as the general population to be the victims of violent crime, supporting the community's concerns that an increase in the overall presence of homeless going in/out of Gateway will also lead to an increase in adverse impacts.

To help mitigate adverse impacts in an area already struggling with an overwhelming amount of existing homeless services, we propose an initial bed capacity limit at Gateway of 90 beds – providing for up to 15 families and 30 individuals. This bed capacity limit would be in place for Phase 1 of the City's opening of Gateway. Family & Community Services personnel have intended they would like to “start small” and phase in the numbers of people served. We believe this is the best approach to ensure success. We ask you to implement this bed capacity limit as part of their Conditional Use Permit approval. We propose that after 2 years, when the City has proven they can effectively serve our homeless population at Gateway and prevent adverse impacts to the surrounding communities, they may submit an application to increase their bed capacity numbers.

EXHIBIT G– OPERATIONAL PLAN DEFICIT

EVIDENCE: NEEDED IMPROVEMENTS TO THE OPERATIONAL PLAN

There are concerns the City does not currently have an adequate and developed Operational Plan, and we would request they have this in place when they apply for an increase in bed capacity.

1. Lack of an Established Operating Budget for the facility

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Currently the City has what they refer to as a “placeholder” budget – this has been quoted as both 4.7 million (at the Mayor’s Press Conference on April 6, 2021) <https://www.youtube.com/watch?v=0RvhP7JPZEU>, and then more recently quoted by FCS director Carol Pierce as \$4 million (at a panel hosted by Indivisible Nob Hill on August 30, 2021). Both estimated budgets were quoted in relation to the current Operating Budget for the City’s Westside Emergency Housing Center, aka the Westside Shelter, which does not provide the ‘wraparound services,’ resources, or personnel proposed for Gateway. Currently, the Westside Shelter provides limited services two days per week. It does not have a commercial kitchen or many of the amenities the Gateway intends to provide.

From Indivisible Nob Hill meeting held on 8/30/2021 with a panel of City representatives and Neighborhood Association representatives, the question on the budget was presented by moderator, Rayellen Smith:

Smith: “What is the operational budget and where is the money coming from?”

Carol Pierce, Director of FCS, responded with the following: “We needed to put a Placeholder in this year fy 22 city budget. We used our budget from the westside for what that includes,....replicating west side budget That was the best model we had the west has its own budget and then we were replicating that number to have something in the fy 22 budget”.

Smith confirmed the following: “There is 4.7 westside and 4.7 gateway” Carol responded “Yes, and that does not include... capital money...But primarily for operations the answer question it is federal fund dollars.”

As a significant portion of the operations appear to depend on federal funding, what happens if these funds are not renewed every year? What are the City’s plans to secure more funding? What contingency plans is in place?

Given the unforeseeable changes to access to federal funds, we feel the city needs the opportunity to plan a budget, not just a placeholder, and needs the time to develop future funding sources for this facility.

EXHIBIT H– PROVIDER SHORTAGE

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2. Shortage of Providers in NM

There is an extreme shortage of providers in behavioral health, medical health, and case managers/social workers in the state of New Mexico.

Recently a [Kaiser Family Foundation study](https://www.kff.org/other/state-indicator/mental-health-care-healthprofessional-shortage-areas-hpsas/?currentTimeframe=0&selectedRows=%7B%22states%22:%7B%22newmexico%22:%7B%7D%7D%7D&sortModel=%7B%22colId%22:%22Location%22,%22sort%22:%22desc%22%7D#notes), <https://www.kff.org/other/state-indicator/mental-health-care-healthprofessional-shortage-areas-hpsas/?currentTimeframe=0&selectedRows=%7B%22states%22:%7B%22newmexico%22:%7B%7D%7D%7D&sortModel=%7B%22colId%22:%22Location%22,%22sort%22:%22desc%22%7D#notes>

(Appendix I) indicated that New Mexico has an **87% deficit in mental health professionals, and a 76% percent shortage for primary healthcare professionals**. The 2019 report “Provider Shortages and Limited Availability of Behavioral Health Services in new Mexico’s Medicaid Managed Care” by the Office of Inspector General of the U.S. Department of Health and Human Services also details our provider shortages **(Appendix P)**. When asked about obtaining enough providers in this deficit environment, both the Mayor and FCS Director Carol Pierce have stated that an RFP would be put out. This does not provide an adequate answer to the very real issue that the providers simply *do not exist*.

Since 2019, the City’s Westside Shelter has experienced changes that include being open year-round and operating 24/7, providing behavioral healthcare and medical healthcare *only two days per week*, in addition to case management and with NM Workforce Connections providing career counseling. Given the City’s inability to provide more care at their current emergency shelter facility, there is serious concern they will be able to provide the care they are promising at Gateway.

In addition to the Behavioral Health services the City has stated they intend to provide at Gateway, another component of the Gibson Health Hub that will be feeding into the shelter services of Gateway is the medical respite program. FCS is currently slating 50 beds for medical respite, though based upon current zoning, the allowable number of homeless respite beds is unlimited. The unhoused respite care patients will need be supplied with supportive care once they are able to leave the respite setting, and it is anticipated they will require the services of the Gateway center. Due to the limited behavioral health, medical, and casework providers, having a large capacity of residents would lead to a shelter that cannot provide adequate services, and would result in a dangerous environment for the City’s most vulnerable.

The severe and potentially dangerous deficit of medical providers in the state, along with the state’s track record of contracting out lower-tier providers through their RFP process, is demonstrated by the deaths of nine inmates at Bernalillo County Metropolitan Detention Center (MDC) from August 2020 to January 2021. Six of these nine deaths occurred during detox, all while under the medical care of contracted provider Centurion. Centurion is currently facing 18 lawsuits and has vacated their 4-year contract 2.5 years early. Negligence and understaffing have both been reported as contributing to preventable deaths. **(Appendix J, K)**

Lawsuit filed in death of inmate at Bernalillo County Metropolitan Detention Center, By Elise Kaplan / Journal Staff Writer, Published: Friday, July 23rd, 2021 at 6:50pm; Updated: Friday, July 23rd, 2021 at 9:54pm

...The family of one of the people who died while in custody of the Metropolitan Detention Center last year has filed a lawsuit against Bernalillo County, the jail and the medical provider and staff alleging medical malpractice and negligence led to his death.

He was one of nine people in jail custody to die in the course of a year – a dramatic spike over previous years. While the causes of death varied, six appear to have occurred while inmates were detoxing from drugs or alcohol or in medical units – all under the care of medical contractor Centurion Detention Health Care.

... Last spring, after the Journal published an article on the increase in deaths at the jail, **the county said it “expressed concern to Centurion over staff vacancies and continuity of care”** and asked the company to respond. Instead, Centurion terminated its contract more than a year early.

...“I think there’s definitely a pattern, it’s more than just (deaths while in) detox or any of that,” Collins said. “It’s a pattern of gross neglect, gross medical neglect.”

Shortages of behavioral health providers are not a new problem in New Mexico. Lisa Huval, deputy director for Housing and Homelessness for FCS has stated the “dismantling” of our behavioral health infrastructure can be traced back to 2013 (**Appendix L**):

“NM’s rise in homelessness highest in the nation,” by Rick Nathanson / Journal Staff Writer
Thursday, January 9th, 2020 at 9:41PM

“One of the driving factors in the increase in chronically homeless people in New Mexico is what happened to our behavioral health system under the previous governor, with the dismantling of the behavioral health infrastructure as we knew it amid accusations of Medicaid fraud,” Huval said. “This forced a number of providers to close their doors and caused lots of people to lose access to services. In many ways, we’re still recovering from that.”

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In 2013, 15 behavioral health providers were shut down by the state Human Services Department after an audit alleged fraud. After a lengthy investigation, Attorney General Hector Balderas’ office eventually cleared all 15 providers of any wrongdoing.

Another part of the story, said Huval, “is our state’s struggle with funding and supporting behavioral health programs at the scale they’re needed, and with folks being able to get into housing and being able to stay in housing.”

As the state has not been able to increase the numbers of behavioral healthcare providers to sufficient levels over the last eight years, there is no indication there will be an adequate number of providers to administer the necessary care for a large-scale overnight shelter. Therefore, in addition to our concerns re: mitigating adverse impacts, we strongly feel the shortage of providers in our state presents strong evidence to support limiting bed capacities at this facility.

EXHIBIT I- TRANSPORTATION

3. Transportation to/from Gateway

Transportation services for the homeless do not appear to be well developed. The City has stated it takes over one million dollars to transport people to/ from the Westside Shelter, which includes both residents and various providers. Even with this budget, the Westside Shelter has limited transportation times and abilities, reducing residents' access to services at the Westside Shelter and with other providers. **The City has yet to develop a fully operational 24-hour transportation system** to transport people to/ from services to where they seek shelter.

While the city has had ample opportunity to provide comprehensive transportation for the homeless to be able to access services and housing in a safe manner, they have not demonstrated they are able or willing to provide these necessary services, which will be especially important to the success of the Gateway Center.

The City has stated they intend to utilize the current shuttle system, partner van carriers, and expand the public bus routes to provide more transportation options for Gateway residents. **But given the shuttle system's current limitations, and with no detailed plan for added bus routes and expansion, this presents concern for how adequately transportation systems will serve the homeless.** Without a reliable and easily accessible transportation system in place, residents and prospective residents of Gateway will more likely be left to their own devices, leading to harmful outcomes given the traffic dangers of Gibson Blvd, and the probability of overflow into surrounding neighborhoods.

We request that the City have a fully developed transportation plan of service in place and implemented prior to opening Gateway. This will ensure both the homeless and the surrounding neighborhoods do not experience significant adverse impact due to incomplete services being provided.

Background:

Prior to the COVID Pandemic in 2019, the shuttle to the Westside Shelter picked up people at Coronado Park (near 3rd St. and I-40) and Hope Works Day Shelter at 1301 3rd St NW (District 2); and in the latter part of 2019 additionally began picking up people at God's Warehouse at 8011 East Central Ave. NE in the International District (District 6).

During the COVID Pandemic, the number of pickup locations were increased to include five additional locations, four of which are in District 6, specifically in the International District. Three of these four additional locations in the Int'l District (listed below) are all at public parks, two of which are directly adjacent to Middle Schools, and one that is four blocks from an elementary school. All of these are within 1.5 miles of proposed Gateway Center (**Appendix T**).

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1. Steelbridge (for women and disabled guests only) at 2021 2nd St NW (District 2)
2. First Nations Community Healthsource at 5608 Zuni Rd. SE (District 6)
3. Wilson Park, 6000 Andersen Ave. SE, located next to Wilson Middle School (District 6)
4. Phil Chacon Park, 7600 Southern AVE SE., located next to Van Buren Middle School and 5 blocks from Emerson Elementary School (District 6)
5. Jack and Jill Park, 433 Arizona St. SE, located 5 blocks from Emerson Elementary School (District 6)

Therefore, during the COVID Pandemic, for transportation pickup to the Westside shelter, the

pickup locations statistics were as follows:

Three pickup locations were in District 2. Of those locations:

- One was at a public park
- Two were at a day shelter or food/supply pantry and soup kitchen: Hope Works Day Shelter, 1301 Third Street St NW, and Steelbridge, 2021 2nd St. NW (also located near The Rock, 2400 Second Street NW, which provides meals or similar service).

Five pickup locations were in District 6. Of these locations:

- Two are located at parks next to middle schools
- One was located at what is apparently a children's park being called Jack and Jill Park located 5 blocks from an elementary school.
- One is located at a soup kitchen/day shelter
- One is a healthcare services provider

Current pickup locations are not totally clear. The pickup locations described above changed after a neighborhood input meeting in June, in which FCS Director Carol Pierce was surprised to hear from a participant that all these pickup locations were still active – she responded that she would look into it. Subsequently, it appears that the number of stops have been reduced, though it is not necessarily clear where the new pickup locations are.

Furthermore, given the public safety issues already detailed in **Section 2: City's Track Record in Mitigating Adverse Impacts in Neighborhoods with Homeless Services (Item #s 2-4) pg. 4**, and further detailed in **Appendices B, D, E**, we request that all schools and public parks be excluded as pickup and drop-off locations for the City shelters.

EXHIBIT J- TRANSITION TO HOUSING

4. Transition of Residents from Gateway Shelter Into Housing

Below is a question presented by Councilor Davis to Carol Pierce, dated March 25, 2021, 6:43 PM re: the need for housing units (excerpt of communications appears below; full communications attached as **Appendix M**)

11 *Councilor Davis, Question 6: I have continually asked FACS to develop a long-term housing plan, with funding options, to meet our need for more than 800 new supportive housing units. During our most recent council meeting, Deputy Director Huval told the council that FACS could spend more money if allocated. CAO Nair quickly added that the administration did not believe it could.*

An example of the city's challenges with getting existing providers to agree to take on more housing obligations – even with funding provided – is revealed in this Albuquerque Journal article from October 7, 2020 (**Appendix N**):

“City leaves \$700K in housing voucher money unspent” ALBUQUERQUE JOURNAL By Jessica Dyer / Journal Staff Writer, Wednesday, October 7th, 2020 at 6:26PM

...Bottom, executive director of Vizionz-Sankofa, has been working with the homeless population in her area, including trying to get them housing. She said she cried when she heard the city finished the last budget year without spending \$700,000 it had available for housing vouchers.

...Bottom learned about a city-funded housing voucher program and went through special training required to get people on the waiting list. Working last fall and winter – often out of a Southeast Albuquerque soup kitchen – she helped an estimated 35 people complete the survey needed to get onto the ‘coordinated entry list.’

...To this day, Bottom said no one she helped has obtained a housing voucher.

So she was particularly rankled to learn recently that the city ended the 2020 fiscal year on June 30 with about \$700,000 in unspent housing voucher money. By city calculations, that is enough to support 51 different households for a full year.

...And Albuquerque city councilors are also raising questions about another \$2 million they had allocated last year for additional housing vouchers. The council approved the appropriation in the spring of 2019 at Mayor Tim Keller’s request.

Less than \$100,000 of that money was spent during fiscal year 2020, in part because the city could not find contractors to distribute the vouchers that quickly.

Lisa Huval, deputy director of housing and homelessness inside the city’s Family and Community Services Department, said there are multiple factors at play.

The unspent \$700,000 was due largely to understaffing within one of the 10 different organizations the city uses to administer the vouchers. Huval declined to identify the vendor...

This additionally demonstrates the city’s need to develop a working budget and plan to demonstrate they can properly administer this facility and transition people out of the shelter and into housing before they are given the opportunity to have an overnight shelter capacity of more than 15 families and 30 individuals.

EXHIBIT K- BED CAPACITY LIMITS

EVIDENCE SUPPORTING LIMITS ON BED CAPACITY

On September 4, 2021 it was announced via the Albuquerque Journal that the City is looking to accommodate up to 100 individuals and 25 families (upwards of 200 people). District 6 Councilor Pat Davis shares the concerns of his constituents, and has persistently asked FCS how they will adequately serve the proposed number of Gateway residents given the City's track record thus far:

From communications dated March 25, 2021, 6:43 PM from Carol Pierce, Director, to Councilor Davis:

(Appendix M):

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*Councilor Davis Question 2: ... According to the City's own powerpoint presentations given by FACS to community groups and the city council, the "gateway model" is designed to serve as a "no wrong door" entry to services where an individual is matched to a social worker and services to address their issues, assist with eligibility for programs (including housing) and place that person into long-term supportive housing. While FACS has publicly said this would take anywhere from 14-30 days per person, a gateway center with 175 on-site residents would require **more than 20 social workers** and 175 housing units to be available when the center opens. FACS is not prepared to offer either (as you recall, FACS had problems getting existing providers*

to agree to take on more housing obligations as recently as last December).

1. The only way I see serving 175 people at Gibson is by serving 175 per year, or about 15 per month. That is a doable load for a gateway model. Beyond that, we appear to be designing a system for warehousing people without providing services. Please explain how FACS will support the persons it intends to serve and how they will guarantee those services and lengths-of-stay will meet the gateway standards the public voted for when they approved funding for building this type of center.

Ms. Pierce's response: "We are still committed to the "no wrong door" strategy and to connecting each person who enters seeking emergency shelter beds with supports and services. More discussion is needed; however, all of our studies and input concur we need a mix of services that will help people stabilize, including case management services, housing navigation, assistance applying for disability, and connection to the workforce. Every person who come into this Gateway Center will be unique and will need their own, individualized exit plan into housing. Some people will need a rapid rehousing or a permanent housing voucher, but there also are other affordable housing options in our community. In an exit plan into housing, the goal will be to determine the mix of support that will serve that person the best. For example, some people will have a job or be able to start a job quickly and only need a security deposit and first month's rent. Some people may need to be referred to a residential treatment program. Some people are not going to be a good fit for a housing voucher and will need long-term care. We have a goal that every individual who comes to the Gateway Center will exit to a more stable housing destination within 90 days."

In order to accommodate the intentions outlined above by Ms. Pierce, there needs to be adequate case managers, behavioral health providers, treatment options, and housing resources. Without the City having a realistic and comprehensive Operational Plan and budget, this is not attainable. Currently the city/county government has demonstrated they are not equipped to provide adequate health and behavioral healthcare to persons in need

EXHIBIT L- GOOD NEIGHBOR AGREEMENT

LEGALLY-BINDING AND ENFORCEABLE GOOD NEIGHBOR AGREEMENT

One of the most critical terms the neighborhoods surrounding Gateway have requested as part of the applicant's Conditional Use Permit approval is a legally-binding Good Neighbor Agreement. When discussing and addressing questions re: what the Good Neighbor Agreement will look like and how it will work, FCS Director Carol Pierce has repeatedly referenced the existing Good Neighbor Agreement between Wells Park Neighborhood Association and Hope Works downtown. The problem with this, though, is that it is not a legally-binding document – there is nothing to hold the provider accountable.. And its lack of effectiveness is revealed in the severe adverse impacts Wells Park suffers as cited in the crime and violence which regularly Coronado Park and the surrounding area. Given that the facility in which Gateway will be housed will also house multiple other providers, and that the adjoining neighborhoods exceed one NA, the very nature of the Good Neighbor Agreement will need to differ from the agreement Pierce references.

Furthermore, given the propensity for overnight shelters and homeless service providers to create adverse impacts in the surrounding neighborhoods, and given the City's track record on mitigating these
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adverse impacts (cited previously), it is necessary for the neighborhoods surrounding Gateway to have legal recourse which will hold the City as property owner accountable.

Residents of the communities surrounding the proposed Gateway site have already shared with the City most of the terms they would like to see incorporated into a Good Neighbor Agreement (**Appendix S**).

It is also critical that outlined within the terms of the Good Neighbor Agreement that any legal fees or costs for mediation (not a city hearing officer) and district court shall be the responsibility of the City of Albuquerque so as not to exclude neighborhoods from participating in their government due to lack of financial resources and abilities.

EXHIBIT M- PHNA CONCLUSION

CONCLUSION

In closing, as an adjoining neighborhood of the proposed Gateway center, we understand the ideals behind its conception and want to ensure its success. Our objective is to work with the City so that our neighborhoods do not experience significant adverse impacts due to insufficient mitigation from the operation of Gateway as it provides the services our unhoused citizens so desperately need. In the body of this document, we have outlined evidence and suggestions to work toward this end, and our key requests in granting approval of their Conditional Use Permit (after they have rectified their errors of IDO protocols and procedures and complete the submission process adequately) are as following:

- Given their track record in mitigating significant adverse impacts of the unhoused, we request for the City to wait and apply for their Conditional Use Permit once the UNM Study and evaluation of adverse impacts is completed so it may guide the FCS in employing best practices to mitigate adverse impacts to our neighborhoods.
- We request additional necessary improvements to their Operating Plan – including an established budget which is in line with the intended services and staffing for the facility, and which also takes into account the shortage of providers in our state and creates realistic plans for personnel and treatment; we also request the development of a comprehensive 24/7 transportation system to get residents to/from Gateway, and a budget and strategy with enlisted providers to transition residents of Gateway into housing.
- We request reasonable limitations on bed capacities to help ensure the City phases in the number of people they can realistically and adequately serve at Gateway, while also minimizing the significant adverse impacts to our neighborhoods.
- We request a Good Neighbor Agreement that is legally binding and holds the City accountable, and for which any legal fees and mediation will be the financial responsibility of the City. To ensure the terms of the Good Neighbor Agreement are adequately followed, we also want to mandate a Community Oversight Committee as part of the Agreement.

REQUEST FOR SPECIAL EXCEPTION

☐ Variance ☒ Conditional Use ☐ Other

Interpreter: ☐ Yes ☒ No

VA# 2021-00316 PR# 2021-005834

Date: 5/24/2021		Received By: Charles Maestas	
Address of Request: 5400 GIBSON BLVD SE			
City: Albuquerque	State: NM	Zip: 87108	
Lot: A1A1A/LOVELACE HOSPITAL	Block: 0000	Zone: MX-H	Map page: M18
Subdivision: LOVELACE HOSPITAL		UPC# 101805513250020114	
Property Owner(s): City of Albuquerque Family and Community Services (attn: Carol Pierce)			
Mailing Address: 400 Marquette NW			
City: Albuquerque	State: NM	Zip: 87102	
Phone: 505-768-2860	Email: cpierce@cabq.gov		
Agent: Consensus Planning, Inc. / Jacqueline Fishman			
Mailing Address: 302 8th St NW			
City: Albuquerque	State: NM	Zip: 87102	
Phone: 505-764-9801	Email: fishman@consensusplanning.com		
Fee Total: \$ 260.00			

Completed Application Requirements:

- ☐ Copy of relevant IDO section
- ☐ Letter of authorization (if agent representation)
- ☐ Proof of Pre-application Meeting (not required for a variance)
- ☐ Proof that neighborhood meeting requirements were met
- ☐ Proof that public notice requirements were met
- ☐ Photos (site and existing structures)
- ☐ Sketch plan
- ☐ Justification letter
- ☐ Sign posting

~~\$265.20~~ city
• city project
• no fees

Approved for acceptance by:

Date:

Hearing Date: SEP. 21, 2021

ZONING OFFICIAL USE ONLY			
Request for exception to IDO Section: 14-16- 4-2 Table 4-2-1			
Description of request: Conditional Use to allow an overnight shelter.			
<input type="checkbox"/> Ownership verified on AGIS	<input type="checkbox"/> Proof of ownership included	<input type="checkbox"/> Letter of authorization included	
Case history number(s) from AGIS: 1001638			
APO: Air Space	CPO# -	HPO# -	VPO# -
Protection Sub-area			
Wall variances not allowed in low-density residential development in these 2 areas per 5-7(D)(3)(e):			
1) CPO 3 and 2) Monte Vista / College View Historic Dist. - Mapped Area:			

REQUEST FOR SPECIAL EXCEPTION

☐ Variance ☒ Conditional Use ☐ Other

Interpreter: ☐ Yes ☒ No

VA# 2021-00317

PR# 2021-005834

Date: 6/30/2021		Received By: Charles Maestas	
Address of Request: 5006 GIBSON BLVD SE			
City: Albuquerque	State: NM	Zip: 87108	
Lot: 1	Block: 0000	Zone: MX-H	Map page: M18
Subdivision: SWIFT ADDN		UPC# 101805504151520102	
Property Owner(s): City of Albuquerque Family and Community Services (attn: Carol Pierce)			
Mailing Address: 400 Marquette NW			
City: Albuquerque	State: NM	Zip: 87102	
Phone: 505-768-2860	Email: cpierce@cabq.gov		
Agent: Consensus Planning, Inc. / Jacqueline Fishman			
Mailing Address: 302 8th St NW			
City: Albuquerque	State: NM	Zip: 87102	
Phone: 505-764-9801	Email: fishman@consensusplanning.com		
Fee Total: \$260.00			

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~~\$265.20 CA~~
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Approved for acceptance by:

Date:

Hearing Date: SEP. 21, 2021

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Case history number(s) from AGIS: 1001638			
APO: Air Space	CPO# -	HPO# -	VPO# -
Protection Sub-area			
Wall variances not allowed in low-density residential development in these 2 areas per 5-7(D)(3)(e):			
1) CPO 3 and 2) Monte Vista / College View Historic Dist. - Mapped Area:			
2) CPO-8 states walls no more than 3 feet high, but may request a variance			

REQUEST FOR SPECIAL EXCEPTION

☐ Variance ☐ Conditional Use ☐ Other Interpreter: ☐ Yes ☐ No

VA# 2021-00316 PR# _____

Date: 5/24/2021		Received By: Charles Maestas	
Address of Request: 5400 GIBSON BLVD SE			
City: Albuquerque	State: NM	Zip: 87108	
Lot: A1A1A/LOVELACE HOSPITAL	Block: 0000	Zone: MX-H	Map page: M18
Subdivision: LOVELACE HOSPITAL		UPC# 101805513250020114	
Property Owner(s): City of Albuquerque Family and Community Services (attn: Carol Pierce)			
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Phone: 505-768-2860	Email: cpierce@cabq.gov		
Agent: Consensus Planning, Inc. / Jacqueline Fishman			
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- Proof that neighborhood meeting requirements were met
- Proof that public notice requirements were met
- Photos (site and existing structures)
- Sketch plan
- Justification letter
- Sign posting

Approved for acceptance by:

Date:

Hearing Date:

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Protection Sub-area			
Wall variances not allowed in low-density residential development in these 2 areas per 5-7(D)(3)(e):			
1) CPO 3 and 2) Monte Vista / College View Historic Dist. - Mapped Area:			

REQUEST FOR SPECIAL EXCEPTION

☐ Variance ☐ Conditional Use ☐ Other Interpreter: ☐ Yes ☐ No
 VA# 2021-00317 PR# _____

Date: 6/30/2021		Received By: Charles Maestas	
Address of Request: 5006 GIBSON BLVD SE			
City: Albuquerque	State: NM	Zip: 87108	
Lot: 1	Block: 0000	Zone: MX-H	Map page: M18
Subdivision: SWIFT ADDN		UPC# 101805504151520102	
Property Owner(s): City of Albuquerque Family and Community Services (attn: Carol Pierce)			
Mailing Address: 400 Marquette NW			
City: Albuquerque	State: NM	Zip: 87102	
Phone: 505-768-2860	Email: cpierce@cabq.gov		
Agent: Consensus Planning, Inc. / Jacqueline Fishman			
Mailing Address: 302 8th St NW			
City: Albuquerque	State: NM	Zip: 87102	
Phone: 505-764-9801	Email: fishman@consensusplanning.com		
Fee Total: \$ 260.00			

Completed Application Requirements:

- Copy of relevant IDO section
- Letter of authorization (if agent representation)
- Proof of Pre-application Meeting (not required for a variance)
- Proof that neighborhood meeting requirements were met
- Proof that public notice requirements were met
- Photos (site and existing structures)
- Sketch plan
- Justification letter
- Sign posting

Approved for acceptance by:	Date:	Hearing Date:
------------------------------------	--------------	----------------------

ZONING OFFICIAL USE ONLY			
Request for exception to IDO Section: 14-16- 4-2 Table 4-2-1			
Description of request: Conditional Use to allow an overnight shelter.			
<input type="checkbox"/> Ownership verified on AGIS	<input type="checkbox"/> Proof of ownership included	<input type="checkbox"/> Letter of authorization included	
Case history number(s) from AGIS: 1001638			
APO: Air Space	CPO# -	HPO# -	VPO# -
Protection Sub-area			
Wall variances not allowed in low-density residential development in these 2 areas per 5-7(D)(3)(e):			
1) CPO 3 and 2) Monte Vista / College View Historic Dist. - Mapped Area:			
2) CPO-8 states walls no more than 3 feet high, but may request a variance			

REQUEST FOR SPECIAL EXCEPTION

☐ Variance ☐ Conditional Use ☐ Other

Interpreter: ☐ Yes ☐ No

VA# _____ PR# _____

2) CPO-8 states walls no more than 3 feet high, but may request a variance

Part 14-16-4: Use Regulations
4-2: Allowable Uses

4-2 ALLOWABLE USES

Table 4-2-1: Allowable Uses

P = Permissive Primary C = Conditional Primary A = Permissive Accessory CA = Conditional Accessory
CV = Conditional if Structure Vacant for 5 years or more T = Temporary Blank Cell = Not Allowed

Zone District >>	Residential						Mixed-use				Non-residential							Use-specific Standards	
	R-A	R-1	R-MC	R-T	R-ML	R-MH	MX-T	MX-L	MX-M	MX-H	NR-C	NR-BP	NR-LM	NR-GM	NR-SU	A	B		NR-PO
Land Uses																			
PRIMARY USES THAT MAY BE ACCESSORY IN SOME ZONE DISTRICTS																			
RESIDENTIAL USES																			
Household Living																			
Dwelling, single-family detached	P	P	P	P	P		P												4-3(B)(1)
Dwelling, mobile home			P																
Dwelling, cluster development	P	P		P	P		P												4-3(B)(2)
Dwelling, cottage development	P	P	P	P	P		P												4-3(B)(3)
Dwelling, two-family detached (duplex)		P		P	P		P												4-3(B)(4)
Dwelling, townhouse				P	P	P	P	P	P	P									4-3(B)(5)
Dwelling, live-work				C	C	P	P	P	P	P	CA	CA							4-3(B)(6)
Dwelling, multi-family					P	P	P	P	P	P									4-3(B)(7)
Group Living																			
Assisted living facility or nursing home				C	P	P	P	P	P	P									
Community residential facility, small	P	P		P	P	P	P	P	P	P									4-3(B)(8)
Community residential facility, large					P	P	P	P	P	P									4-3(B)(8)
Dormitory						P	C	P	P	P									
Group home, small					C	P	P	P	P										4-3(B)(9)
Group home, medium					C	C	C	P	P	P									4-3(B)(9)
Group home, large						C			C	C									4-3(B)(9)
CIVIC AND INSTITUTIONAL USES																			
Adult or child day care facility			C	C	C	P	P	P	P	P	P	P	A	A					
BioPark																P (in D)			4-3(C)(8)
Cemetery															P				
Community center or library	C	P		P	P	P	P	P	P	P	C	C	C	C		P		C	4-3(C)(1)
Correctional facility															P				
Daytime gathering facility										A	C	C	A	C					4-3(C)(2)
Elementary or middle school	C	C		C	P	P	P	P	P	P	P	P	CV			P		C	4-3(C)(3)
Fire or police station															P				
High school	C	C		C	C	P	P	P	P	P	P	P	C			P			4-3(C)(4)
Hospital									P	P	P	P							4-3(C)(5)
Museum				CV	CV	C	P	P	P	P	P	P	P	P		P	A		4-3(C)(6)
Overnight shelter										C	C	C	C	C					4-3(C)(7)
Parks and open space	P	P		P	P	P	P	P	P	P	P	P	C	C	A	P	P	P	4-3(C)(8)
Religious institution	P	P		P	P	P	P	P	P	P	P	P	CV	CV					4-3(C)(9)
Sports field							CV	C	P	P	P	P	P	C		P		C	

CITY OF ALBUQUERQUE

Department of Family and Community Services

Carol M. Pierce, Director



Timothy M. Keller, Mayor

July 22, 2021

Mr. Robert Lucero
City of Albuquerque
Planning Department
600 Second Street NW
Albuquerque, NM 87102

Dear Mr. Lucero:

The City of Albuquerque Family and Community Services Department authorizes Consensus Planning, and its employees, to obtain information, submit and process applications, represent the Gateway Center project at meetings and public hearings, and act as the agent on all matters related to the entitlement of the property located at 5006 Gibson Boulevard SE and 5400 Gibson Boulevard SE. The City of Albuquerque is the property owner for the above stated properties.

Sincerely,

DocuSigned by:

Gilbert Ramirez

Carol M. Pierce

Director

Family and Community Services Department

PO Box 1293

Albuquerque

NM 87103

www.cabq.gov

PRE-APPLICATION REVIEW TEAM (PRT) MEETING NOTES

PA# 21-099 Date: 6/29/21 Time: N/A (sent via email to)

Address: 5400 Gibson Blvd. SE

AGENCY REPRESENTATIVES

Planning: Catalina Lehner (clehner@cabq.gov) James Aranda (imaranda@cabq.gov)

Zoning/Code Enforcement: Carl Garcia (cagarcia@cabq.gov)

Fire Marshal: Antonio Chinchilla (achinchilla@cabq.gov) or call 505-924-3611 (if needed)

Transportation: Jeanne Wolfenbarger (jwolfenbarger@cabq.gov)

Hydrology: Ernest Armijo, P.E. (earmijo@cabq.gov)

Solid Waste: Herman Gallegos (hgallegos@cabq.gov)

Water Authority: David Gutierrez - dggutierrez@abcwua.org or call 505.289.3307; 505.241.9630

PRT DISCUSSIONS ARE FOR INFORMATIONAL PURPOSES ONLY!

THEY ARE NON-BINDING AND DO NOT CONSTITUTE ANY KIND OF APPROVAL.

Additional research may be necessary to determine the exact type of application and/or process needed.

Factors unknown at this time and/or thought of as minor could become significant as the case progresses.

REQUEST: Conditional use for partial conversion of medical center into an overnight shelter for transitional housing and medical respite.

SITE INFORMATION:

Zone: MX-H

Size: Approx. 20.4 acres

Use: Mixed-Use High Intensity

Overlay zone: N/A

Comp Plan Area of: Change

Comp Plan Corridor: Commuter Corridor

Comp Plan Center: Lovelace/ VA Employment

MPOS or Sensitive Lands: X Flood zone

Parking: 14-16 5-5

MR Area: Near Heights

Landscaping: 14-16 5-6

Street Trees: 14-16 5-6(D)(1)

Use Specific Standards: Allowable Uses, Table 4-2-1

Dimensional Standards: Table 5-1-2: Mixed-use Zone District Dimensional Standards

*Neighborhood Organization/s: N/A

**This is preliminary information only. Neighborhood Organization information is only accurate when obtained from the Office of Neighborhood Coordination (ONC) at www.cabq.gov/neighborhoods.resources.*

PROCESS:

Type of Action: DRB

Review and Approval Body: DRB Is this a PRT requirement? Yes (Table 6-1-1)

PRE-APPLICATION REVIEW TEAM (PRT) MEETING NOTES

PA# 21-099 Date: 6/29/21 Time: N/A (sent via email)

Address: 5400 Gibson Blvd. SE

NOTES:

See the **Integrated Development Ordinance**

<https://documents.cabq.gov/planning/IDO/IDO-2019-Effective-2020-11-02.pdf>

Download Forms & Applications

<https://www.cabq.gov/planning/online-forms>

New Public Notice Forms

We have created forms for all email/mailed public notice and for Pre-submittal Neighborhood Meetings. Please complete these forms for public notice:

- Neighborhood Meeting - <http://www.cabq.gov/planning/urban-design-development/neighborhood-meeting-requirement-in-the-integrated-development-ordinance>
- Public Notice - <http://www.cabq.gov/planning/urban-design-development/public-notice>

Records requests

To request a site plan and/or Notice of Decision, please use ABQ Records web page:

<https://www.cabq.gov/clerk/public-records>

Please include the site's address and the Case Tracking #s (see Zoning Comments) in your request.

Requests to Inspect Public Records

Any person may submit their request to inspect public records to the Office of the City Clerk by clicking on the following link to request records using our ABQ Records portal. <https://cabq.nextrequest.com/>

This enables us to respond to requests in the order in which they are received. Plus, it's a better way to share large files.

File Submittal

For Administrative Amendments, DRB, EPC, hydrology and traffic submittals, e-mail electronic files to PLNDRS@cabq.gov. For questions about an application submittal or the submittal process itself, please contact Jay Rodenbeck at jrodenbeck@cabq.gov and/or to Maggie Gould at mgould@cabq.gov.

For other questions, please contact the Planning representative at the top of the PRT Notes.

For Building Safety Plan Review, contact Building Safety at 924-3963. Website:

<https://www.cabq.gov/planning/building-safety-permits>

PRE-APPLICATION REVIEW TEAM (PRT) MEETING NOTES

PA# 21-099 Date: 6/29/21 Time: N/A (sent via email)

Address: 5400 Gibson Blvd. SE

Zoning Comments

PRT 21-99

PROPERTY INFORMATION

- Address: 5400 GIBSON BLVD SE
- Lot: A1A1A/LOVELACE HOSPITAL Block: 0000
- Subdivision: LOVELACE HOSPITAL
- Kirtland AFB Military Influence Area
- Airport Protection Overlay Zone (Albuquerque Int'l Sunport)
- (Airport) Air Space Protection Sub-area
- Type: Change
- Comprehensive Plan Center
- Name: Lovelace/VA
- Type: Employment
- Status: Existing
- Calculated GIS Acres: 20.5573
- Old Zoning Description: HOSPITAL & REL FAC
- IDO Zoning: MX-H
- Old Zoning Designation: SU-1
- Old Zoning Description: HOSPITAL & REL FAC
- Old Zoning Category: INSTITUTIONAL / GOVERNMENT

CASE HISTORY

- 1001638

ALLOWABLE USE(S)

- Overnight shelter – Conditional Use

USE SPECIFIC STANDARDS

- 4-3(C)(7) Overnight Shelter

DEFINITION(S)

- **Overnight Shelter** - A facility that provides sleeping accommodations for 6 or more persons for a period of less than 24 hours with no charge or a charge substantially less than market value; it may provide meals and social services. Any such facility open to clients between 10:00 P.M. and 7:00 A.M. is

PRE-APPLICATION REVIEW TEAM (PRT) MEETING NOTES

PA# 21-099 Date: 6/29/21 Time: N/A (sent via email)

Address: 5400 Gibson Blvd. SE

considered an overnight shelter, while a facility providing similar services but open to clients between 7:00 A.M. and 10:00 P.M is considered a daytime gathering facility. A facility open to the public during both time periods is considered to have both uses on the property. See also Community Residential Facility, Daytime Gathering Facility, and Group Home.

PROCESS

- 6-6(A) CONDITIONAL USE APPROVAL

As always, if you have specific questions pertaining to zoning and/or development standards you are encouraged to reach out to the zoning counter at (505) 924-3857 option 1.

Transportation Development Comments

PRT 21-099 (5400 Gibson SE/Case No. 1001638)

Information for Site Development – Transportation Development

For additional information contact Jeanne Wolfenbarger (924-3991)

General comments below:

Curb Cuts

- Follow DPM guidelines for commercial curb cuts.
- Location of drive with respect to intersection depends on classification of the street. (See attached table.) Classification of street is according to the Long Range Master Plan developed by MRCOG.

Clear Sight Triangle at Access Points and Intersections

- Clear sight triangle (See attached hand-outs.) Nothing opaque should be in the triangle.

Private Site and Parking Lot Design

- Follow DPM and IDO Guidelines for Site and Parking Lot Design. Current ADA standards must be followed including required number of handicapped parking spaces and drive aisles, ADA access to public right-of-way, and ADA access to on-site buildings.
- See the Traffic Circulation Layout (TCL) Checklist. A TCL is required for any change or addition to a building > 500 sq. ft. or if the parking or circulation is changed. (This includes a repaving of parking lot.) Drawing must be stamped by a registered engineer or architect.
- When developing a parking lot layout, include all dimensioning for construction purposes. Also include all curb, curb ramp and signage details.
- Parking Calculations must be provided and per the requirements in the IDO. Number of vehicular spaces, motorcycle spaces, and bicycle spaces shall be specified and follow IDO requirements.
- Shared access/parking agreement is required if access/parking is shared with parking lot adjacent to site. (This can be established on a plat if submittal of a plat is required or by an agreement.)

PRE-APPLICATION REVIEW TEAM (PRT) MEETING NOTES

PA# 21-099 Date: 6/29/21 Time: N/A (sent via email)

Address: 5400 Gibson Blvd. SE

- Existing driveways that are not being used are required to be removed and replaced with standard curb and sidewalk to match existing.

Traffic Studies

- See the Traffic Impact Study (TIS) thresholds. In general, a minimum combination of 100 vehicles entering and exiting in the peak hour warrants a Traffic Impact Study. Visit with Traffic Engineer for determination, and fill out a TIS Form that states whether one is warranted. In some cases, a trip generation may be requested for determination.

Platting and Public Infrastructure Requirements for Roadways

- When submitting to DRB, all public roadway improvements that are required shall be shown on an infrastructure list. Public improvements must be included on a public work order set of drawings.
- All public roadway facilities must be within public right-of-way including the entire width of the public sidewalk, all public curb ramps, overhead utilities, traffic signals and lighting, etc.
- Curb and sidewalk are required along entire frontage of property. Follow IDO/DPM for specific width requirements.
- There is a Bikeway Master Plan that is prepared MRCOG which lays out proposed bicycle facilities including bicycle trails, bike lanes, and bike routes. The site would be required to provide such facilities along the site frontage if they have not been constructed yet. Right-of-way dedication would likely be required.
- Depending on site's use of an adjacent alleyway and on type of use for proposed site, alleyway improvements are required. This would include paving and/or proper right-of-way dedication to meet current width standards.
- For any private access easements on plats, all beneficiaries and maintenance responsibilities must be listed.
- Due to sight distance concerns and to construct sufficient curb ramps, right-of-way dedication is required to add curves to corners of properties at intersections if they are not already developed. See Table 23.3 of the DPM.
- Any private structures that are located within public right-of-way such as fences and walls shall either be removed or else a revocable permit with the City is required in which an annual fee is paid per year, based on square footage of the encroachment.

If you would have additional questions or would like to schedule a follow-up Zoom meeting please contact Diego Ewell at dewell@cabq.gov

From: [Sanchez, Suzanna A.](#)
To: [Charlene Johnson](#)
Subject: Public Notice 5400 Gibson Blvd. NE
Date: Monday, May 24, 2021 12:51:15 PM
Attachments: [2. Letter to Property Owners-July.pdf](#)

Dear Applicant,

Below is a list of property owners within 100+ feet of the subject property. Please fill in and mail the attached, 2. Letter to Property Owners- July. Also, please provide proof that the letters were sent. Proof can be either a receipt for postage stamps purchased or a photo of the addressed envelopes.

Owner	Complete Owner Address
GIBSON MEDICAL CENTER LLC	6300 JEFFERSON ST NE ALBUQUERQUE NM 87109
LOS POLLOS HERMANOS 5211 GIBSON LLC	105 JEFFERSON ST NE ALBUQUERQUE NM 87108-1216
RAVANO ROBERT J TRUSTEE RAVANO RVT & RAVANO STEPHEN R & THOMPSON SUZANNE M	1460 CRESTVIEW DR SAN CARLOS CA 94070-4255
HAJJAR CHARLES C TRUSTEE SIESTA HILLS REALTY TRUST C/O HAJJAR MGT CO INC	30 ADAMS ST MILTON MA 02186
RABADI SHARIF A & SAMIA S TR STAR TRUST	11201 SAN ANTONIO DR NE ALBUQUERQUE NM 87122-1049
PALM DIANE & PADILLA DEBORAH	1104 W BAY AVE NEWPORT BEACH CA 92661-1017
HAJJAR CHARLES C TRUSTEE SIESTA HILLS REALTY TRUST C/O HAJJAR MGMT CO INC	30 ADAMS ST MILTON MA 02186-3412
PEARL SPRING CREEK LLC	5600 GIBSON BLVD SE ALBUQUERQUE NM 87108-4840
ALBUQUERQUE HOUSING AUTHORITY	1840 UNIVERSITY BLVD SE ALBUQUERQUE NM 87106-3919
BHC ENTERPRISES LC	5844 AVONMORE CIR HIGHLAND UT 84003-3442
MCDONALDS REAL ESTATE COMPANY	ONE MCDONALDS PLAZA OAK BROOK IL 60523-1928
B & B MERRITT REAL ESTATE LLC	750 N 17TH ST LAS CRUCES NM 88005-4153
USA C/O DEPT OF VET AFFAIRS MED CENT	1501 SAN PEDRO DR SE 138 ALBUQUERQUE NM 87108-5138
GIBSON MEDICAL CENTER LLC	6300 JEFFERSON ST NE ALBUQUERQUE NM 87109-3482
LOVELACE BIOMEDICAL RESEARCH INSTITUTE	2425 RIDGECREST DR SE ALBUQUERQUE NM 87108-5129

Thank you,

Suzie



SUZIE SANCHEZ
zhe administrative assistant
o 505.924.3894
e suzannasanchez@cabq.gov
cabq.gov/planning

From: [Sanchez, Suzanna A.](#)
To: [Charlene Johnson](#)
Subject: ZHE Information for 5400 Gibson Boulevard SE
Date: Monday, May 24, 2021 12:47:30 PM
Attachments: [STEPS TO APPLY FOR A SPECIAL EXCEPTION APRIL 2021.pdf](#)
[PRE-APPLICATION REVIEW FORM.PDF](#)
[1. Letter to Neighborhood Association.pdf](#)
[CONDITIONAL USE JUSTIFICATION APRIL 2021.pdf](#)
Importance: High

Dear Applicant,

Thank you for your request. Attached are forms and instructions to complete your application for a conditional use. Please pay special attention to Step 3 in the "STEPS TO APPLY" document. These materials are required for a complete submittal. Requests will not be set for a hearing or reviewed for compliance until the application submittal is complete.

Please fill in and forward the attached [Letter to Neighborhood Association](#) to the list of neighborhood association contacts below. Per Section 14-16-6-4(C)(3) of the Integrated Development Ordinance, a meeting request must be sent to the 2 representatives of all applicable Neighborhood Associations via Certified Mail, return receipt requested, or via email.

Association Name	First Name	Last Name	Email	Address Line 1	Address Line 2	City	State	Zip
District 6 Coalition of Neighborhood Associations	Mandy	Warr	mandy@theremedyspa.com	119 Vassar Drive SE		Albuquerque	NM	87106
District 6 Coalition of Neighborhood Associations	Patricia	Willson	info@willsonstudio.com	505 Dartmouth Drive SE		Albuquerque	NM	87106
South San Pedro NA	Zabdiel	Aldaz	zabdiel505@gmail.com	735 Alvarado SE		Albuquerque	NM	87108
South San Pedro NA	Khadijah	Bottom	khadijahasil@vizonz.org	1200 Madeira SE	#130	Albuquerque	NM	87108

The deadline to submit a complete application packet for the July 20th hearing is [June 1st](#). If you have questions, please contact me.

Thank you,

Suzie Sanchez



SUZIE SANCHEZ
zhe administrative assistant
o 505.924.3894
e suzannasanchez@cabq.gov
cabq.gov/planning

Charlene Johnson

From: Jackie Fishman
Sent: Friday, June 4, 2021 3:14 PM
To: info@willsonstudio.com; mandy@theremedyydayspa.com; zabdiel505@gmail.com; khadijahasili@vizionz.org
Cc: sp-wonderwoman@comcast.net; mrkious@aol.com; mldarling56@yahoo.com; phnapresident@gmail.com; alyceice@gmail.com; landry54@msn.com; rbaca@bizjournals.com; kp-shna@centurylink.net; Chaplin, Doug H.; Jessie Lawrence; Cooper, Kinsey; thummell@cabq.gov; Triplett, Shannon; Charlene Johnson
Subject: Preapplication Facilitated Meeting - Gateway Center
Attachments: Neighborhood Notification Packet - 5400 Gibson Blvd SE.pdf

Dear Neighbors,

This email is notification that Consensus Planning is preparing an application for a Conditional use for Overnight Shelter to the City of Albuquerque Zoning Hearing Examiner (ZHE) on behalf of the City of Albuquerque Department of Family and Community Services. The property is located at 5400 Gibson SE the site of the existing Gibson Medical Center. The property is zoned MX-H and is legally described as *Tract A-1-A-1-A Plat of Tract A-1-A-1-A Lovelace Hospital (being a replat of Tract A-1-A-1 & a portion of vacated Ridgecrest Drive SE) containing 20.4232 Acres*. The request is for the City's Gateway Center project, an overnight shelter proposed for a portion of the Gibson Medical Center. Please see the attached neighborhood notification packet.

The City is providing an opportunity to discuss this request at a scheduled facilitated meeting on Tuesday, June 22, 2021 from 5:30 – 7:30 PM via Zoom using the following link:

<https://bit.ly/2SVSXxt>

The Office of Neighborhood Coordination provided contacts for the two affected neighborhood associations, District 6 and South San Pedro. Given the City has reached out to other neighborhood associations in the area, we are providing this notice and invite to the facilitated meeting as a courtesy to Elder Homestead, Parkland Hills, Trumbull Village, and Siesta Hills neighborhood associations.

Jessie Lawrence, an independent contractor with the City's ADR program, will be facilitating the meeting. Attendees must use the link above to register for the meeting prior to attending. Attendees need to enter name and email address to receive the meeting connection link. For more information about the facilitated meeting, please contact Jessie Lawrence at jessie@lawrencemeetingresources.com or (505) 603-4351.

For more information about the conditional use application and request, please contact Jackie Fishman, Principal at Consensus Planning, at fishman@consensusplanning.com or (505) 764-9801.

Thanks,

Jacqueline Fishman, AICP
Principal
Consensus Planning, Inc.
302 Eighth Street NW
Albuquerque, NM 87102
P: 505.764.9801

**OFFICIAL PUBLIC NOTIFICATION FORM
FOR MAILED OR ELECTRONIC MAIL NOTICE
CITY OF ALBUQUERQUE PLANNING DEPARTMENT**



PART I - PROCESS

Use [Table 6-1-1](#) in the Integrated Development Ordinance (IDO) to answer the following:

Application Type: Conditional-use for Overnight Shelter

Decision-making Body: Zoning Hearing Examiner (ZHE)

Pre-Application meeting required: ☒ Yes ☐ No

Neighborhood meeting required: ☒ Yes ☒ No

Mailed Notice required: ☒ Yes ☐ No

Electronic Mail required: ☒ Yes ☐ No

Is this a Site Plan Application: ☐ Yes ☒ No **Note: if yes, see second page**

PART II – DETAILS OF REQUEST

Address of property listed in application: 5400 Gibson Blvd. SE

Name of property owner: City of Albuquerque

Name of applicant: City of Albuquerque, Family and Community Services

Date, time, and place of public meeting or hearing, if applicable:

Tuesday, June 22, 2021, 5:30 - 7:30 PM via Zoom. [Zoom link: https://bit.ly/2SVSXxt](https://bit.ly/2SVSXxt)

Address, phone number, or website for additional information:

Agent: Jacqueline Fishman, Principal, Consensus Planning, Inc. (505) 764-9801, fishman@consensusplanning.com

PART III - ATTACHMENTS REQUIRED WITH THIS NOTICE

☒ Zone Atlas page indicating subject property.

☒ Drawings, elevations, or other illustrations of this request.

☐ Summary of pre-submittal neighborhood meeting, if applicable.

☒ Summary of request, including explanations of deviations, variances, or waivers.

IMPORTANT: PUBLIC NOTICE MUST BE MADE IN A TIMELY MANNER PURSUANT TO [SUBSECTION 14-16-6-4\(K\)](#) OF THE INTEGRATED DEVELOPMENT ORDINANCE (IDO). PROOF OF NOTICE WITH ALL REQUIRED ATTACHMENTS MUST BE PRESENTED UPON APPLICATION.

I certify that the information I have included here and sent in the required notice was complete, true, and accurate to the extent of my knowledge.

(Applicant signature)

June 04, 2021

(Date)

Note: Providing incomplete information may require re-sending public notice. Providing false or misleading information is a violation of the IDO pursuant to IDO Subsection 14-16-6-9(B)(3) and may lead to a denial of your application.

**OFFICIAL PUBLIC NOTIFICATION FORM
FOR MAILED OR ELECTRONIC MAIL NOTICE
CITY OF ALBUQUERQUE PLANNING DEPARTMENT**



PART IV – ATTACHMENTS REQUIRED FOR SITE PLAN APPLICATIONS ONLY

Provide a site plan that shows, at a minimum, the following:

N/A a. Location of proposed buildings and landscape areas.

N/A b. Access and circulation for vehicles and pedestrians.

N/A c. Maximum height of any proposed structures, with building elevations.

N/A d. For residential development: Maximum number of proposed dwelling units.

N/A e. For non-residential development:

- ☐ Total gross floor area of proposed project.
- ☐ Gross floor area for each proposed use.

REQUEST FOR NEIGHBORHOOD MEETING

Date: June 4, 2021

To Whom This May Concern:

I am requesting approval from the Zoning Hearing Examiner within the City of Albuquerque for a conditional use or variance to allow an overnight shelter in a portion of the Gibson Medical Center.
This request is for the City's Gateway Center.

Property owner City of Albuquerque, Family and Community Services

Agent if applicable Jacqueline Fishman, AICP, Principal, Consensus Planning

Property Address 5400 Gibson Blvd. SE, Albuquerque, NM, 87108 (zip code).

This letter is an offer to meet with you to provide additional information. If you wish to meet, please respond within 15 days. If you do not want to meet, or you support the proposal, please let me know.

Thank you,

Applicant Name Jacqueline Fishman (Agent)

Email fishman@consensusplanning.com

Phone Number (505) 764-9801

The City may require the applicant to attend a City-sponsored facilitated meeting with the Neighborhood Associations whose boundaries include or are adjacent to the proposed project, based on the complexity and potential impacts of a proposed project. For more information, please contact the ZHE Administrative Assistant Suzie Sanchez at 505-924-3894 or suzannasanchez@cabq.gov.

Please note: "You may submit written comments to the Zoning Hearing Examiner up to 6 days before the hearing (5pm on the Wednesday before the hearing). Written comments received after that deadline will not be taken into consideration for this application.

[Note: Items with an asterisk (*) are required.]

Neighborhood Meeting Request for a Proposed Project in the City of Albuquerque

Date of Request*: June 4, 2021

This request for a Neighborhood Meeting for a proposed project is provided as required by Integrated Development Ordinance (IDO) [Subsection 14-16-6-4\(K\) Public Notice](#) to:

District 6 Coalition of Neighborhood Associations and
Neighborhood Association (NA)*: South San Pedro Neighborhood Association.

Name of NA Representative*: Mandy Warr, Patricia Willson, Zabdiel Aldaz, Khadijah Bottom

Email Address* or Mailing Address* of NA Representative¹: mandy@theremedyspa.com, info@willsonstudio.com, zabdiel505@gmail.com, khadijahasili@vizionz.org

The application is not yet submitted. If you would like to have a Neighborhood Meeting about this proposed project, please respond to this request within 15 days.²

Email address to respond yes or no: fishman@consensusplanning.com

The applicant may specify a Neighborhood Meeting date that must be at least 15 days from the Date of Request above, unless you agree to an earlier date.

Meeting Date / Time / Location:

Tuesday, June 22, 2021, 5:30-7:00 PM via Zoom using the following link:

<https://bit.ly/2SVSXxt>

Project Information Required by [IDO Subsection 14-16-6-4\(K\)\(1\)\(a\)](#)

1. Subject Property Address* 5400 Gibson Blvd. SE, 87108
Location Description Existing Gibson Medical Center
2. Property Owner* City of Albuquerque, Family and Community Services
3. Agent/Applicant* [if applicable] Jacqueline Fishman, AICP, Principal, Consensus Planning
4. Application(s) Type* per IDO [Table 6-1-1](#) [mark all that apply]
 - ☒ Conditional Use Approval
 - ☐ Permit _____ (Carport or Wall/Fence – Major)
 - ☐ Site Plan
 - ☐ Subdivision _____ (Minor or Major)

¹ Pursuant to [IDO Subsection 14-16-6-4\(K\)\(5\)\(a\)](#), email is sufficient if on file with the Office of Neighborhood Coordination. If no email address is on file for a particular NA representative, notice must be mailed to the mailing address on file for that representative.

² If no one replies to this request, the applicant may be submitted to the City to begin the review/decision process.

[Note: Items with an asterisk (*) are required.]

- ☐ Vacation _____ (Easement/Private Way or Public Right-of-way)
- ☐ Variance
- ☐ Waiver
- ☐ Zoning Map Amendment
- ☐ Other: _____

Summary of project/request^{3*}:

Conditional use request for an overnight shelter in a portion of the existing Gibson Medical Center.

The overnight shelter is for the City's Gateway Project.

5. This type of application will be decided by^{*}: ☐ City Staff
OR at a public meeting or hearing by:
☒ Zoning Hearing Examiner (ZHE) ☐ Development Review Board (DRB)
☐ Landmarks Commission (LC) ☐ Environmental Planning Commission (EPC)
☐ City Council
6. Where more information about the project can be found^{*4}:
Please contact Jacqueline Fishman at fishman@consensusplanning.com or 505-764-9801.

Project Information Required for Mail/Email Notice by [IDO Subsection 6-4\(K\)\(1\)\(b\)](#):

1. Zone Atlas Page(s)^{*5} M-18
2. Architectural drawings, elevations of the proposed building(s) or other illustrations of the proposed application, as relevant^{*}: Attached to notice or provided via website noted above
3. The following exceptions to IDO standards will be requested for this project^{*}:

☐ Deviation(s) ☐ Variance(s) ☐ Waiver(s)

Explanation:

None requested.

4. An offer of a Pre-submittal Neighborhood Meeting is required by [Table 6-1-1](#)^{*}: ☒ Yes ☐ No

³ Attach additional information, as needed to explain the project/request. Note that information provided in this meeting request is conceptual and constitutes a draft intended to provide sufficient information for discussion of concerns and opportunities.

⁴ Address (mailing or email), phone number, or website to be provided by the applicant

⁵ Available online here: <http://data.cabq.gov/business/zoneatlas/>

[Note: Items with an asterisk (*) are required.]

5. **For Site Plan Applications only***, attach site plan showing, at a minimum:

- ☐ a. Location of proposed buildings and landscape areas.*
- ☐ b. Access and circulation for vehicles and pedestrians.*
- ☐ c. Maximum height of any proposed structures, with building elevations.*
- ☐ d. **For residential development***: Maximum number of proposed dwelling units.
- ☐ e. **For non-residential development***:
 - ☐ Total gross floor area of proposed project.
 - ☐ Gross floor area for each proposed use.

Additional Information:

1. From the IDO Zoning Map⁶:

- a. Area of Property [typically in acres] 20.4 acres
- b. IDO Zone District Mixed-use High Intensity (MX-H)
- c. Overlay Zone(s) [if applicable] Airport Protection Overlay Zone (APO)
- d. Center or Corridor Area [if applicable] Center: Lovelace/VA Employment Center

2. Current Land Use(s) [vacant, if none] Institutional / Medical

Useful Links

Integrated Development Ordinance (IDO):

<https://ido.abc-zone.com/>

IDO Interactive Map

<https://tinyurl.com/IDOzoningmap>

Cc: Elder Homestead Neighborhood Association [Other Neighborhood Associations, if any]

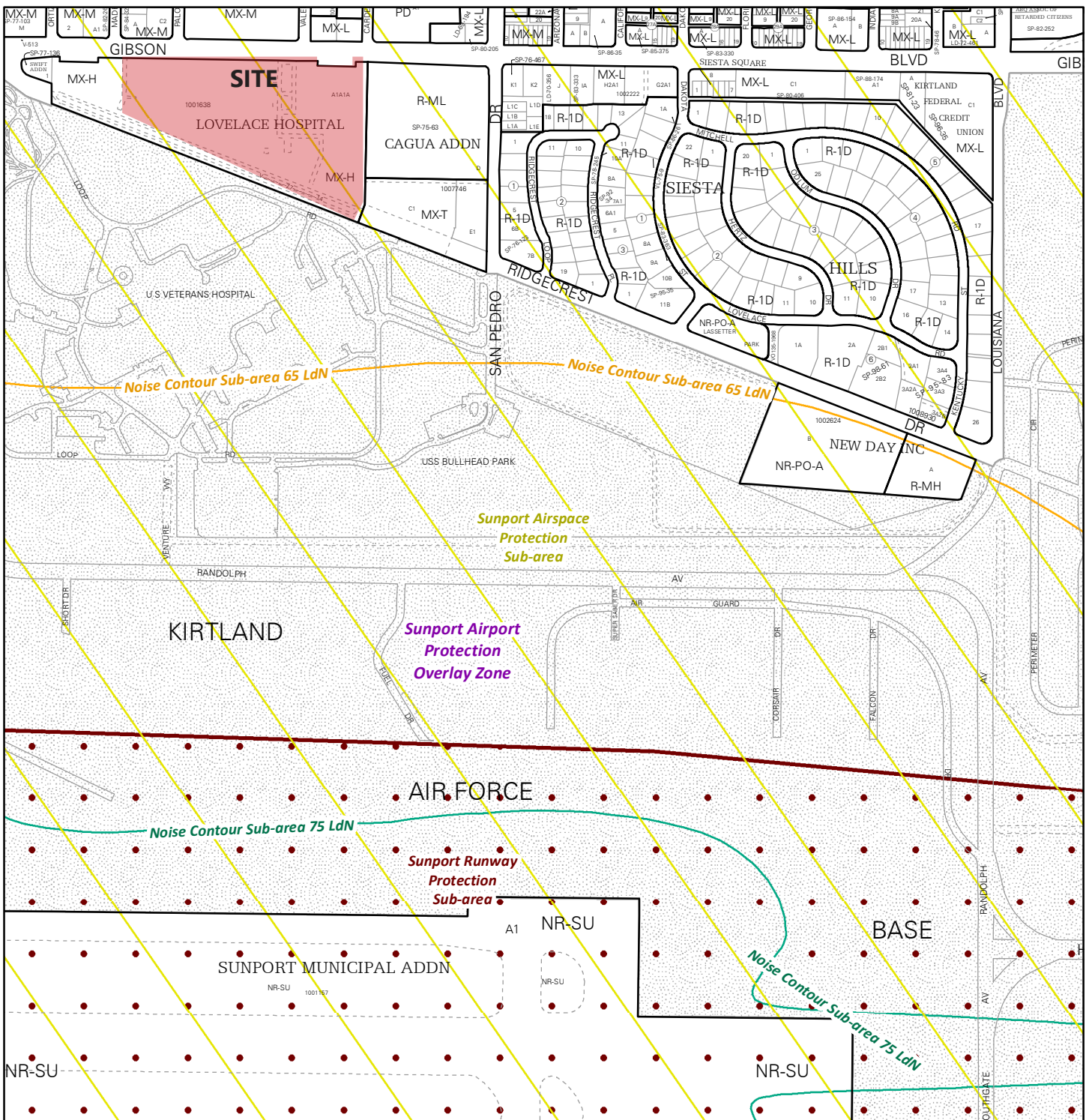
Parkland Hills Neighborhood Association

Trumbull Village Association

Siesta Hills Neighborhood Association

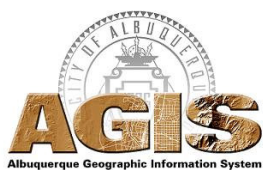
South San Pedro Neighborhood Association

⁶ Available here: <https://tinurl.com/idozoningmap>

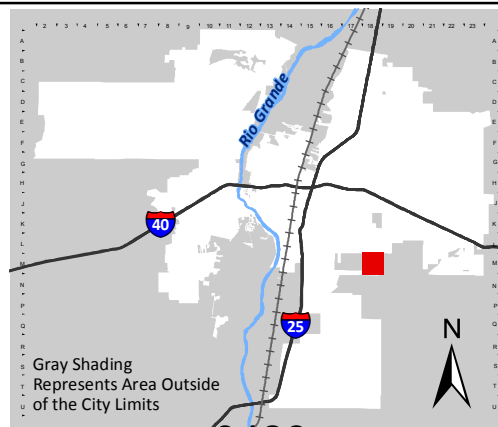


For more details about the Integrated Development Ordinance visit: <http://www.cabq.gov/planning/codes-policies-regulations/integrated-development-ordinance>

IDO Zone Atlas May 2018

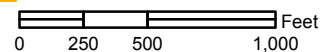


IDO Zoning information as of May 17, 2018
The Zone Districts and Overlay Zones
are established by the
Integrated Development Ordinance (IDO).



Zone Atlas Page:
M-18-Z

- Easement
- Petroglyph National Monument
- Areas Outside of City Limits
- Airport Protection Overlay (APO) Zone
- Character Protection Overlay (CPO) Zone
- Historic Protection Overlay (HPO) Zone
- View Protection Overlay (VPO) Zone



**CITY OF ALBUQUERQUE
LAND USE FACILITATION PROGRAM
PROJECT MEETING REPORT**

Project Number: N/A – Pre-Application Meeting
Property Description: 5400 & 5006 Gibson SE; Tract A-1-A-1-A Plat of Tract A-1-A-1-A Lovelace Hospital (being a replat of Tract A-1-A-1 & a portion of vacated Ridgecrest Drive SE), containing 20.4232 Acres
Date Submitted: June 24, 2021
Submitted by: Jessie Lawrence and Jocelyn Torres
Meeting Date and Time: June 22, 2021, 5:30 PM
Meeting Location: Online via Zoom
Facilitator: Jessie Lawrence
Co-facilitator: Jocelyn Torres

Parties:

- **Applicant:**
 - City of Albuquerque Department of Family and Community Services
- **Agent:**
 - Consensus Planning
- **Affected Neighborhood Associations (per City of Albuquerque notification requirements):**
 - District 6 Coalition of Neighborhood Associations
 - South San Pedro NA

Background/Meeting Summary:

Applicant requests Zoning Hearing Examiner approval of a conditional use to allow an overnight shelter in a portion of the Gibson Medical Center at 5400 Gibson Blvd. SE, part of the Gateway Center at the Gibson Health Hub (referred to as the Gateway Center throughout this report). This was a pre-application meeting.

At the meeting, participants expressed a number of concerns about the planned project, and also expressed frustration and a lack of trust with the planning, process, and communication so far. Some participants said that they did not want the Gateway Center in this area or that this center should serve only the local area, and other areas of the city should have to support a greater share of the homeless services. Others said that they needed more information and discussed the need for more data, the complete operations plan in writing, information in writing about the number of people to be served, and information about the planned providers. Others expressed concerns about crime, security, bathrooms, pedestrian traffic, and vehicular traffic. Others requested more information about how individuals would transition out of the Gateway Center and where the transitional housing would come from. Others expressed concern about the Gateway Center being a magnet drawing homeless people to the community, and also asked about homeless people who might seek services but not want shelter. One person pointed out the need to work with the VA Hospital and veterans, and one person suggested a written Good Neighbor Agreement between the neighborhoods and the City.

City staff answered questions and responded to the concerns during the meeting. See Meeting Specifics and the Zoom Chat Appendix for a summary of all of the questions and comments discussed.

As follow-up items, the applicant and agent agreed to share the slide presentation, to provide information about the locations of the 19 public restrooms throughout the community, and to look into the question about what would happen with the conditional use if other tenants wanted to add overnight uses. They also said that the operations plan would be ready before the planned August 17 ZHE hearing, and the conditional use request materials would be sent to the neighborhood associations when they are submitted.

Outcomes:

- **Areas of Agreement:**
 - None noted among all meeting participants.
- **Unresolved Issues and Concerns:**
 - Several participants discussed frustration and a lack of trust in the City, in particular because of the lack of written plans and commitments and changing information about who the Gateway Center would serve.
 - Some participants said that they did not want the Gateway Center in this area or that this center should serve only the local area, and other areas of the city should have to support a greater share of the homeless services.
 - Some participants said there should be more data and information shared with the local residents in writing, including the operations plan, before a conditional use request is submitted.
 - Concerns discussed about the operations of the Gateway Center included:
 - Crime
 - Security and adequate police service
 - Public defecation and the number of available public restrooms
 - Pedestrian traffic
 - Vehicular traffic
 - Some participants asked about the available transitional housing and suggested that there is not enough for the Gateway Center's plans, and noted that there needs to be planning for a limited time of services and a transition out of homelessness.
 - Some participants expressed concerns about the Gateway Center making the neighborhood a magnet for homeless individuals, and also asked about homeless people who might seek services but not want shelter.
 - One person pointed out the need for better coordination with the VA Hospital and veterans.
 - One person suggested a written Good Neighbor Agreement between the neighborhoods and the City; others said that such agreements have been hard to enforce in other places.

Meeting Specifics:

Proposed Meeting Agenda:

Topic	Person	Approximate Time
1. Welcome/introduction	Facilitator	5:30 – 5:40

2. Overview of the Gateway Center at GMC, with a focus on the conditional use request	Project team	5:40 – 6:00
3. Clarifying questions about the overview presentation	All	6:00 – 6:10
4. Questions/comments: Gateway Center operations	All	6:10 – 6:40
5. Questions/comments: Gateway Center coordination/communication with neighbors	All	6:40 – 7:00
6. Questions/comments: Conditional use process, timeline, and criteria	All	7:00 – 7:15
7. Other questions and concerns	All	7:15 – 7:25
8. Brief summary and next steps	Facilitator	7:25 – 7:30

1. Overview of the Gateway Center:

- a. Carol Pierce, Director of CABQ Family & Community Services, provided an overview of the planned Gateway Center. (The term Applicant throughout the report refers to the Family & Community Services staff.)
 - i. The Gibson Medical Center was purchased on April 1, 2021 by the City of Albuquerque and is being referred to as the Gibson Health Hub.
 - ii. It is about 572,000 square feet.
 - iii. The vision is to provide health services to the surrounding community that promote healing and recovery, including but not limited to primary care services, inpatient treatment, behavioral health services, and shelter and services for people without homes.
 - iv. There are about 10 tenants there currently, in behavioral health services, employment, medical care, and other uses.
 - v. In Albuquerque, at least 1,525 people are in shelters or on the street each night, and at least 5,000 households experienced homelessness in 2020.
 - vi. Chronic health conditions are more prevalent with people who are unhoused. Typically their life expectancy is 12 years less than those who are housed.
 - vii. Medical respite is an important component of the health hub; it will provide short-term medical care for patients without homes who are too ill to recover in a shelter or on the streets, but who are not sick enough to be in a hospital.
 1. Respite beds are very limited in the community.
 - viii. The Gateway Center will be one part of the Gibson Health Hub, for people who are unhoused and need wraparound services to have a planned exit to services and stable housing.
 1. The Gateway Center will be part of a comprehensive system of services to link individuals with health care, employment, and permanent housing.
 2. It will be trauma-informed, which means that it is safe for people who want to secure a safe bed, and people are met where they're at so they can be connected with what they need.
 3. On site supportive services will be important, including peer support services, people with lived experience.
 4. There will be individualized transition plans to resources and stable housing.
 - ix. The operational plan, which is in development, includes services, policies, neighborhood, and other operational components. [The components of the operational plan were shared in the slide presentation.]

- b. Jackie Fishman, Principal at Consensus Planning, the agent for the conditional use (Agent throughout this report), explained the conditional use request and criteria.
 - i. The property is at 5400 Gibson Ave. SE and 5006 Gibson Ave. SE.
 - ii. The application will be submitted on July 6, and neighborhood association contacts will receive an email from Agent's office when that application is submitted.
 - iii. The property is comprised of two parcels totaling 20.84 acres.
 - iv. The existing zoning is MX-H, which allows an overnight shelter as a conditional primary use.
 - v. There are six criteria in the Integrated Development Ordinance for a conditional use. [The criteria were shared in the slide presentation.]
 - vi. There was pre-application notice on June 4, 2021.
 - vii. Application notice will be provided to the city-provided list of neighborhood associations and the District 6 Coalition, and notice will also be provided to other neighborhood associations in the area that have been receiving communication.
 - viii. The hearing will be on August 17, probably on Zoom.
 - 1. The ZHE planner is Lorena Patten-Quintana, lpatten-quintana@cabq.gov.

2. Questions and Concerns Asked During the Meeting

- a. Participant (P): My elderly parents were in their backyard when a man came and robbed them. If the mayor and others really want to house people, why not set up a facility in their neighborhood, and let them see how safe they feel? I'm not happy that my elderly parents were robbed in their own home.
 - i. Applicant: I'm sorry to hear that, and I hear how horrifying that is. I understand the concern about crime, but I want to decouple the idea of crime from homelessness. They are not one and the same. There are shelters in a variety of parts of town, and we have examples of it working. Barrett House, the Albuquerque Opportunity Center, the Brothers of the Good Shelter.
 - 1. P: I'm happy that works, so let's close the idea here, and let's move people into other communities where it works.
- b. P: We keep hearing the Gateway will be a slice of the Gibson Health Hub. How much space will be allotted for the Gateway Center compared to the rest of the health hub, and how much space will be leased out? How much space for the 50 respite beds?
 - i. A: The City has contracted with an architect and evaluation has begun, so I don't have an answer on the specific square footage. The analysis is occurring. There is space that could be ready for medical respite, maybe about 50 beds. With the existing tenants, about 25% of the overall piece, but other people are also inquiring about complementing the health hub. There is not a set square footage, but the analysis is underway.
 - ii. P: Do you know at this point how many beds you're planning on having? Do you have any maximum capacity in mind?
 - 1. A: We don't have a specific number in mind. It's not 500 beds, it's not that large, because we know that's not trauma-informed. We know we need to right-size this and work with local providers and those with expertise so people feel safe and have support.

- c. P: I hear a lot of talk about beds, but what about public restrooms in the neighborhood? We've already twice found human waste in our backyard, in one case someone who walked through while we were looking out our window. There's a dearth of publicly accessible restrooms and increased foot traffic will make it worse, and I wonder what your plan is.
 - i. A: There are about 19 restrooms that have been put up all over the community, added when facilities weren't open. I know that doesn't always address every need. There have been concerns about heat and water that have come in, too. That's what exists right now.
 - ii. P: Where are the 19 restrooms located?
 - 1. A: We can provide a map or list of locations. That can be a follow-up item.
 - iii. P: My other question is why is this focus entirely on services like jobs, health, and housing, and not about meaningful daytime activities? I recommend gardening. It's healing, it's trauma-informed, and I think it would heal rifts between the Gateway and the neighborhood.
 - 1. A: Thank you for that. We know the need for outdoor space. There will be services on site for people to access, and also part of what people will need to do is work on the pieces that are needed with the support of their case manager so they can ultimately transition to housing.
- d. P: The conditional use is granted based on a review of the potential adverse impacts to the use and any appropriate mitigations on nearby properties. I propose that it's premature to grant a conditional use because no adverse impact study has been completed. A shelter and housing services, especially one of this size adjacent to dense residential neighborhoods, should be required to consider specific impacts to neighborhoods and businesses. To date, the City has not requested a list of impacts, and I haven't seen any documentation that lists any adverse impacts. The City can't address issues they haven't found. The only adverse impact review is currently being conducted by UNM students, not professionals in the field, and isn't expected to be complete until 2022. Director Pierce has said she hopes to have the shelter operating in under a year. These are substandard requirements for such a project. The City has not requested concerns and no one conducting the research and UNM has shared the parameters of their study. This is not due diligence. The current information is not enough to allow the conditional use without the City and UNM providing details and operational plans needed and required for such a change in use.
 - i. A: The initial list of neighborhood impacts, on the website, came from the Homeless Coordinating Council and that group does have neighborhood involvement. We're adding additional people who want to be part of the neighborhood piece.
 - ii. P: We have had less than four or five neighborhood representatives in the entire three-year process. One person does not report out information to the rest of the neighborhoods, even though it has been requested. This is not enough community contact and input to say that the neighborhood is connected enough to these committees to actually have a voice.
- e. P: I have concerns about walk-in services and the increase in pedestrian traffic. Are you anticipating an increase in pedestrian traffic? With that, I have concerns about how you are going to address pedestrian traffic and its impact on our neighborhood, including toileting, encampments, and trash. As a suggestion, have you evaluated fencing the

facility and eliminating pedestrian traffic, and having people transported into the Gateway Center to eliminate the pedestrian traffic and the impact and burden on our neighborhoods that comes with that?

- i. A: We think access will be two ways. One will be referral by different partners, and they could have transportation to get there. There could also be someone who wants to come and access a service. We've heard from the neighbors about traffic on Gibson and pedestrian safety, and we will work with DMD and APD to work on that. The Gateway won't be a day shelter, where people come, get a meal, and then leave again. People will come and stay and get the services they need.
 - ii. A: Transportation is a key part of making this a success, making sure that people who want services have transportation right to the front door. There are other shelters in the community set up that way, and that works well for those neighborhoods. We also want to make sure that homeless people in the International District can access a shelter bed, which is good for them and for the neighborhood.
- f. P: Will the submittal on July 6 include the neighborhood associations?
- i. Agent: Yes, it will go to the ZHE and to the neighborhood associations.
 - ii. P: At that time, will we receive an operational plan in writing? One of the requirements is that it will not create significant adverse impacts on adjacent properties or surrounding communities. I don't know how we could have that without an operational plan in writing, something that could serve as a written commitment.
 - iii. Applicant: We do have an operations plan that we are working on. The elements that are relevant to the conditional use will be included in the application.
 - iv. Agent: It won't be the complete operations plan, but it will be the parameters.
 - v. P: Will there be a final plan by August 17, the hearing?
 1. Applicant: I think we will have a fleshed-out operational plan that we will share with the neighborhoods.
- g. P: I saw that other locations were considered. But what was considered in Albuquerque Acres or High Desert or far northwest Albuquerque? HUD requires that you spread this around. There's a homeless shelter on Zuni, low-income housing, how many more of these do we get? What is the cap before the City says it needs to be other places to be fair and equitable?
- i. A: The City wants to continue to have a disbursed system, which is what we have now. We don't want one location, we want to continue to build multiple locations.
 - ii. P: How many are north of Menaul vs. south of Menaul? I bet they are disproportionately south of Lomas.
 1. A: Offhand, we have the Westside Emergency Housing Center, Joy Junction, AOC, Barrett House, New Day. Our shelter system is really disbursed in many locations throughout the city.
- h. P: The only reason why we have disbursed shelters is because a church can open a shelter, and most shelters are religious-run. The only one that's run by the City is the Westside shelter, so the City cannot control where they are. It's been said at previous meetings that it's not going to be 500 people, but the original model was 300, and then 100-150. In a meeting in April, it was mentioned that there would be 175 people, 50 males, 50 females, 75 family members, plus 50 respite beds, so 225 people was planned

a month ago. UNM is doing research, but we're going to have the decision put in five or six months before we have that research.

- i. A: Not all of the shelters cited are faith-based, but you're right, faith-based partners have some abilities. City-run shelters are the Westside and what we're proposing with the Gateway. We know that we have to start small, and we've thought through what it means for a certain number of families or a certain number of individuals. Originally, when there was a single Gateway proposed at 300 beds, we got strong feedback about the importance of a dispersed system, so we backed off. We want to start small and know that whatever we do has to work on the impact.
- ii. P: Starting small is an issue because at this point, people keep talking about the Westside shelter, and when it closes, where are those 400 people going?
 1. A: We have no plans to close the Westside. On any given night we have about 500 people who need shelter beds, that was the study done. We don't want all of those at Gibson. The Westside is expensive, but that will be with us for the foreseeable future, because we need that capacity.
- i. P: I hear this site has 572,000 square feet, and we don't know how much of that is going to be devoted to tenants, to beds, to transitional vs. family, and without those numbers, I don't understand how there can be a conditional use proposal. It doesn't seem like the City has their proposal ready, they're just throwing a proposal out to the ZHE without the data. You do not have the data. I hear that tenants are interested, but we're not getting the data on who they are. Another reason I don't believe the City is ready to make this proposal is because of the statement that said there will be no adverse effect on surrounding communities. We do not have that data, and to put that in a report is a lie, to say there will be no negative effect. We have real life experience that says the complete opposite. We have people shitting in yards, breaking into property, but we don't care about personal experiences, and we have so many homeless people we're trying to take care of. Another reason I don't think the proposal is ready is because I heard there will be no negative impact on traffic. This is not true, and there is not data to support this. You're telling me the homeless are not traffic, and they are a lot of pedestrian traffic. Tenants are also traffic. When all of the components of the hub are in, the people that will provide services, every one of them is traffic. I think again that the proposal is not ready, you don't know who the tenants will be, you don't know how much traffic you're bringing in. In the end, what is going to happen is there will be 572,000 square feet, the tenants will drop out, and it will be used as a straight homeless shelter. I don't think this is fair to the homeless or to the community. Other things are the number of parking space, the pedestrian traffic trying to cross Gibson, the vehicular traffic trying to leave, knowing where public restrooms will be. The research needs to be there. There are these statements about dispelling myths, but it's not a myth if you don't have the data. You can say that crime doesn't follow homelessness, but you don't have the data, and real life experience says differently. You can say that if you give people a home that it will address their health issues, but I don't think that's true either and I'd like the research done. You should do the research before this proposal is submitted on July 6.
 - i. A: On the safety aspects, Albuquerque Community Safety, we're addressing the safety and outreach components. We have a variety of outreach teams, and this

is part of what is critical to connecting people to the services they need, and out of the neighborhood to the services.

- ii. P: "Meet them where they're at" doesn't necessarily mean bring them in to meet them. We can provide these services where they are.
- j. P: I want to speak to the 500 number. For the three years that I've been following this, the 500 number has never been bandied about until recently. 300 was what we heard, then dropped to 30, then back to 175 plus respite beds, which is inching back up toward 300. It seems like by saying, "It's not 500!", we're supposed to say, "Great!" That's a concern. Mayor Keller also said this would never be a walk-up shelter or a meal site, and I can't help but notice that's creeping in more; if people walk up with a cart, they won't be turned away. There's a magnetizing effect, and when you put this in, people will be coming from other areas of the city to avail themselves of it. What will the parameters be to know if people are just there for a meal and a bed or for the other services? It doesn't sound like there's a way to pin them down. It seems like every meeting is a different story, that tells me that no one really knows what they're doing.
 - i. A: We plan on the people that are referred will be referred by other providers, and there will be transportation for them to the Gateway. We know that we will have to figure out if someone comes up with a cart, what we will have to do to get them out of the neighborhood and see what services they need and how we can connect with them. We want this to be referral, and we are also that people could walk up. We also want to take care of the pedestrian safety and concern mentioned. There will be food at the Gateway, for the people who are part of the Gateway program. It's not a day shelter, where everyone can come for food and then go back out in the neighborhood.
 - ii. A: I think we are working through what the right balance is. We want to reduce the impact on the neighborhood, like the pedestrian impact. But it's also not good for the neighborhood that people are living outside in public spaces, and we want to create opportunity and a path for those folks. That is good for the community.
 - iii. P: I love the idea that we'll be able to relieve the neighborhood of burdens, but we still haven't addressed what will be done about the people magnetized in who don't want to be part of the program or services, who want to stay on the streets or in the parks. We have a magnetization effect here in the International District. I've worked on a map and through my research, in District 6, not including the Gateway, there are 37 services, not including Oxford House and federal halfway houses. The nearest to us is District 2 at 15 services. District 8, 4, and 1 only have one service, and Districts 3 and 5 have zero. This is magnetizing, redlining a district, and overburdening one place. This is our neighborhood and we are getting shit on. It's hard to think that this is going to be a solution to our problem. District 2 is in a lawsuit with the City. Is that our future, too?
 - 1. A: We want to get more people into shelter beds. I understand that people in the neighborhoods are concerned. We have to start somewhere, and we do need to get people off the streets and connected to what they need. I don't think it's a magic bullet, but it's a piece of the solution. We know that we need to start small.
 - 2. P: We all agree we need assistance for the homeless. But you are targeting one area to the benefit of other areas of town. I can't figure out why we couldn't start small somewhere else, rather than starting

small on top of all of the services and programs that are already here. It's hard to have faith when there are two prime examples of city failures with trying to help the homeless. I'm afraid that's going to be what happens here, especially since we don't have real studies, impact studies, an alternate to the police force. We're talking about things that are coming, but we feel like we have a target on our back. How much is too much before we get overwhelmed and become a barrio by city design?

- k. P: I've participated in about everyone one of these input opportunities. I represent the Parkland Hills neighborhood association, and can just about throw a stone from by property to this facility. I represent 1600 households, more than the number of individuals in need of a bed throughout the city on a given night. Tonight, you've been hearing a strong undercurrent that we do not trust you to carry out an effective and impactful plan that protects the surrounding neighborhoods. What I have seen tonight is an iteration of the same presentation I've seen several times before, even after other input sessions. We still do not have an operational plan in place, which tells me the public input hasn't been compiled or incorporated into an operational plan, which is supposed to be submitted in 2 weeks as part of the conditional use. This is putting the cart before the horse, and we don't have any idea what to expect from this facility. It is time for answers, time for written operational plans that show us that we can trust you to implement and execute an effective and impactful plan. There are unsheltered individuals in my neighborhood and I consider them my neighbors, and I want to see them helped. Thus far, we've been given verbal assurances, sometimes contradictory, which does not inspire confidence, and that's why you're hearing such strong opposition. It's not the theory and the principle, but it's the putting the cart before the horse. We need answers and we need them now in order to have community buy-in. My suggestion is a legally binding Good Neighbor Agreement with the City of Albuquerque, and the enforcing organization for that needs to be a community oversight council including the health care providers in the facility, residents of the surrounding neighborhoods, and potentially graduates of the facility, operating where the executive director will report to the council and if certain metrics are not being met, there will be corrective actions. And this needs to be put in writing now, because the feeling is this is being rammed down our throats. I appreciate this public input, but we can't take it seriously or trust you when we don't have concrete results shown, unless we have something in writing. Unless we get a positive response and statements in writing, we have no choice but to oppose.
 - i. A: I agree, and that's what the operational plan will include. We will have that plan including input by the August 17 date.
- l. P: One of the things we haven't done at these meetings is write down the proportion of people who are actually living in this neighborhood. My concern is overinflated numbers; don't say there were 75 neighborhood members at this meeting, because the number is not actually reflective of the number of people in the neighborhood who participate, and I don't want you to misuse those numbers. That gets to the trust issue. You've discussed the local area, but you haven't discussed how to decamp from that area. Where will the affordable housing be? Where will the transitional housing be? How will you get people to those places in a timely and reasonable fashion? What are we going to do about the people who don't want housing, who don't want to be part of the community in a civilized manner but want to live their lives as they choose, in

homelessness? That's an uncomfortable thing that no one has been willing to talk about except David Sisneros. I worry that as you build more, people will come and hang out, and then what will happen? I need to know about the decamping strategies. That should be central in the operational plan, not just beds and services, but where people will go next.

- i. A: The vast majority of people experiencing homelessness want a home, and we know that different things work for different people. The main issue is not that people want to be homeless, but that there's not enough housing with supportive services to meet those needs, which is why the strategy is not just the Gateway, but also in supportive housing as well, and the City has increased its investment in supportive housing by 45% since FY18. We may focus in the wrong place when we focus on the small portion of homeless folks who want to be homeless.
 - 1. P: That is condescending to me, that is not addressing a reality that many of us see every day.
- ii. A: What we're talking about is, there will be people that no matter what we do as a community, no matter how we work to meet people where they're at, we won't succeed with everyone. I appreciate you raising that. Safe outdoor space is one strategy. I appreciate the comment.
- m. P: I want to address that multiple neighborhoods are affected here. At one of these meetings I said, please keep our parks safe, and the moderator asked which park. It's not one specific park. We need our neighborhoods to be safe. I don't think the City understands how many neighborhoods are affected by the proposal and how much crime we're already subjected to. That's an important point for the people who sit downtown, who don't seem to know the area very well sometimes. I work at a library a few blocks from a homeless shelter, and it's not homelessness per se that's the problem, it's the substance abuse, mental health problems, there's an ecosystem around the shelters involving the sale of drugs and people who prey on the homeless. The City has to acknowledge that. Some people do have kind of a hobo lifestyle, they want to live that way. I hear "our homeless neighbors," but the truth is this shelter will bring people from all over the city. They're humans who need help and we need to find a way to help people as a city, but I hate the spin that we're hearing, the lack of plans, and how the story keeps changing. That's why people are so frustrated.
 - i. A: Thank you for that comment. We do understand that it's neighborhoods, and that it's parks.
- n. P: About public safety in and around the center – is APD or a private security firm going to be doing that security?
 - i. A: Right now, there is 24-7 security on a team there, and that will continue. APD is part of our conversation for the operational plan, as is the Albuquerque Community Safety Department.
 - ii. P: Currently, the southeast APD are understaffed already. Is there a plan in place to hire more officers, equivalent with the population that will be coming? Also, what is the training level involved for this current security that will be in and around the center? Any person on the street has already had to make the choice about self-defense and protecting themselves, and when they get contacted to receive services and brought to the center, what kind of process would be in place to ensure the safety of the residents inside, the safety of the individuals, and the safety of the surrounding communities? You're going to

have families coming in. Is there a process to screen sex offenders who are not currently on supervision?

1. A: APD is working with us on the safety and security. I don't have an answer about an added number of police. There will be pieces in the plan. In other facilities, we've focused on de-escalation training as a key piece. About the sex offender question, families will not be in the same place and single women or single men. We want to keep people safe.
 2. A: We want to make sure we have a trauma informed care approach, mental health first aid, suicide training, and motivational interviewing as part of meeting people where they are.
- o. P: The proposal should not be submitted until operational plan for security is formalized into plan. And the statement that there is going to be no increased traffic effects nor adverse effects on neighborhoods is corrected.
- i. Agent: The slides that I went through are the criteria from the IDO. I wasn't saying we have addressed those yet, but those are the criteria that we have to meet for a conditional use to be approved by the ZHE.
 - ii. P: How are you going to have that data by July 6? How will you know there are no adverse effects on neighborhoods and no increased traffic?
 1. Agent: Where it talks about pedestrian and transit, that's about connectivity, that it won't negatively impact that connectivity. We are working hard to address those criteria by July 6. That letter will be shared with the neighborhoods when we send out the notification.
- p. P: The problem is that the City has a credibility problem with this district. I can go down Central and see the shuttered businesses because of ART. They said it would be great and everyone would love it and there would be nothing to worry about, and that's how I feel here tonight. We've been mischaracterized as folks who might be anti-homeless or against solving the problem of homelessness, and we're not. But we want to do our share, not everyone else's share. We're doing our share. The other thing that scares me is you saying you're going to start off small; I don't want you to start small, I don't want you to start at all. Can you guarantee us that the homeless population we're going to serve is going to be from this district? If we're serving families and homeless in this district, I think we could all get behind that. But if we're importing the homeless in to this facility, I think a lot of us are going to have a problem with it and do everything we can to make sure that whoever is elected is held accountable for that. The lack of planning and organization – I'm the vice chair of the state Democratic Party and you keep giving me more work to do. Also, I'm a veteran, and I use the VA Hospital, and a lot of my brother and sister veterans travel from around the state to go to appointments there, and often have to get there early. If we have a homeless shelter a stone's throw away from veterans who are dealing with PTSD, with substance abuse, how is that helping them? I thought last time we had a meeting, we had an agreement that the shelter would serve our district, but now I'm hearing something different again. I thought we were calling it the Southeast Gateway Center, but I'm not hearing that anymore. It's like building a plane while you're flying it, and that worries me. Will you also guarantee us a beginning and an end, that when someone arrives, a clock starts? I don't want a band-aid for this social problem, I want a cure, and I need the City's assurance that we're not just increasing the homeless population of this district.

- i. A: We don't think anyone's anti-homeless. The thinking that we had has been roughly 90 days, based on experience working with other providers. We think there needs to be a beginning and an end.
 - 1. P: Other parts of this are job training, CNM, Goodwill Industries. You've got the infrastructure in place, but I haven't heard anything about linking those things.
 - 2. A: Those are key. I wish but cannot guarantee that only homeless individuals in the neighborhoods are going to be served, but I do think there will be a positive impact for those who can get connected, get services, get off the street.
 - a. P: We need something guaranteed from the City that makes them a priority, that we solve homelessness in our neighborhood first. Or it's going to be ugly. We need something that's a guarantee that our district is going to be a priority.
- ii. P: I also have my question about veterans. I want to know that veterans will be addressed, or we'll be asking some very uncomfortable questions. What coordination has been done with the VA?
 - 1. A: There has been some coordination with the hospital, and we have to do more. You are absolutely right. Veterans are key.
- q. P: I too have very little confidence that the operational plan will be ready, and if it is ready, it won't be sufficient because of the lack of due diligence by the City. Who are the service providers? When can we see the agreements you have with some of the providers? In other meetings, we were told that services would be provided by agencies already leasing space in the GMC. These places are often full and have waitlists for people with court orders to enter, so I have a hard time believing they will just have open beds for the Gateway Center.
 - i. A: A list of service providers hasn't been identified yet. When the architect completes the assessment and space is identified, we will use a RFP process and put the specifications that we need. We're far away from that step. In terms of the existing tenants, we think there's the potential to connect people, and some providers have expressed interest in potentially expanding their footprint.
 - ii. P: I'd like to see the actual providers who are ready to go on this and what their plan will be, as soon as possible. I believe some of the frustration and anger is building because we lack a plan, and we know that once we get that plan, we still won't have the specifics, a real idea of how someone moves through the facility and who will be accountable and who we need to call.
- r. P: What other entitlement processes will this project undergo?
 - i. Agent: This is the main entitlement process. You normally go to DRB if you're building new square footage or have major public infrastructure. At a minimum, we will do a site plan administrative, a site plan approval process through building permit that will require notification of the neighborhood associations.
 - ii. P: I also wanted to clarify – I know who the partner providers will be is still a question mark, but how many other providers might there be in the facility that might also have overnight shelter beds? We see that with a couple of the current tenants. I'm wondering if that's something that's expected.
 - 1. A: There are about 100-120 folks getting overnight services with the existing tenants.

2. P: Because we don't know who the partner providers will be, it's an open question whether there might be more overnight shelter components? Will those beds be factored in to how many beds the Gateway Center is serving?
 - a. A: There are overnight beds with medical respite. When we do an RFP, we will be clear about the specific services. It's a question about the conditional use, if another tenant came in and wanted to do an overnight component with services, how that would relate to our process.
 - b. Agent: The conditional use process has its criteria and doesn't use a number of beds, though the IDO does have a distance between overnight shelters. If it's all part of the Gibson hub, it would all be part of the one overnight shelter. I can do some additional research where another tenant might also want to do overnight services.
- s. P: I'm a resident of Siesta Hills, a former board president of Siesta Hills, and the current chair of the Homelessness Solutions Committee. I'm also a One ABQ Ambassador. I think that's important; I love this city and I'm not trying to tear it down, but we need answers here. At the moment, we do not have enough transitional housing units to accommodate the number of people that the Gateway is supposedly supposed to serve. The City has not identified enough new housing units to serve those that they're proposing in this shelter. Director Pierce said that most folks will be approximately 90-day programs. If there are 350 beds in this facility turning over every 90 days, that means you would need transitional housing for 1400 residents per year, just from this shelter. That also means that the Gateway Center would serve almost every homeless resident in Albuquerque, just in District 6. If we don't have enough transitional housing in place prior to providing the services, the Gateway shelter will fail before it begins. We would be taking people in, but not having anywhere to place them when they complete their plan, and they will end up back on the streets with money and time wasted. Since this is not supposed to be the only Gateway in the city, I feel that much of the 572,000 square feet should be reserved for coordinated services, and District 6 should not have to shoulder more than 100 beds, especially considering how many indigent services and shelters the southeast already holds. I would ask that the transitional housing needed be set up in all other city council districts, outside District 6.
 - i. A: We do need the housing. We know that part of the \$14 million in the next budget year for transitional housing will be used for Gateway individuals. Addressing the housing options throughout our community is critical to this.

Application Hearing Details:

1. This is a pre-application meeting. Applicant plans to submit an application to the ZHE for the conditional use for the August 17 hearing.
2. Hearing Details:
 - a. The Zoning Hearing Examiner (ZHE) conducts monthly quasi-judicial public hearings regarding special exceptions to the Integrated Development Ordinance.
 - b. A special exception allows a property to develop in a way that is different from what the zoning of the property allows. Special exceptions include variances, conditional uses, and expansions of nonconforming uses or structures. After a special exception is filed,

all interested parties are given the opportunity to participate in a public hearing. All requests are given due consideration.

3. Hearing Process:
 - a. Comments from facilitated meetings will go into a report which goes to the Hearing Examiner.
 - b. All interested parties may appear at the hearing and voice their opinions or submit written comments prior to the day of public hearing.
 - c. The Zoning Hearing Examiner will render a determination of approval, approval with conditions, or denial within 15 days after the close of the public hearing. Determinations can be appealed to City Council through the Land Use Hearing Officer.
4. Any further questions or comments can be referred to:

Lorena Patten-Quintana
ZHE Planner
lpatten-quintana@cabq.gov

Names of Registered Attendees:

[Note: Approximately 98 people registered for the meeting, and as many as 75-80 participated in the meeting at the highest participation. This list reflects everyone who registered for the meeting.]

Julie Fulcher	William White	Steve Sacco
Raven DelRio	Jim Summers	Karen C.
Mary Collins	Kathy Summers	Brittany Costello
David Montoya	Candy Nartonis	Bernadette Hardy
Kristina Yu	Jackie Fishman	Reyna Juarez
Rita Giomi	Sonora Rodriguez	William Burleigh
Katy Fuchs	Bridget Llanes	Jeff DeBellis
Bobby Ehrig	Paula Metzner	Glory Juarez
Alexandra Paisano	Peter Kalitsis	
Aaron Moore	Melinda Frame	
Tamaya Toulouse	Vera Watson	
Julie Hinzman	Colleen Woods	
Sandra Perea	Maggie Silva	
Ruthie Bailon	Kathleen Pierson	
Mary Toponce	Karen Bonime	
Linda Schilling	Rachel Baca	
Patricia Saul	Carol Pierce	
Khadijah Bottom	Erin Engelbrecht	
Nicky Ovitt	Virginia Kotler	
Craig Ebersbach	Taylor Cook	
Eliza Martin	Sharon Wirth	
Greg Steiner	June Sutton	
Douglas Heller	Mary Rodriguez	
Ryan Kamm	John and Bernice Comstock	
Myles Padilla	Vincent Lavolpa	
Regina Mead	Jacquelyn Robins	
Calenda Wooten	Tony Johnson	
Christina Martin	Kenneth Sherrell	

Janet Benson	Janet Youngberg	
Dee Whitfield	Marit Tully	
Robert Pierson	M. Connolly	
Wallace Payne	Robyn Cruz	
Michael and Kathleen McBride	Kate Matthews	
Ruth Haest	Rob Leming	
Barbara Jay VeeVee	Michelle Meaders	
Rich Weiner	Patricia Willson	
Gilbert Ramirez	Janet Simon	
Lisa Huval	Aaron Nieto	
Myra Segal	Mandy Warr	
Bobby Sisneros	Frances Davis	
Gary and Lydia Rieg	Laura Calderone	
Debbie Purdy	Daniel McLaughlin	
Rod Reay	Catherine Farmer	
Jennifer Jones	Ryan Kious	
Tim Roberts	Valerie Wolf	

Appendix: Zoom Chat Comments

- Is anyone from the city of ABQ. attending this meeting?
- Can we please ensure to get a recording link for this meeting?
- Please let us know now, at the top of the meeting, whether a link to the recording will be made available either at request or on the City's website or otherwise. Thank you.
- Is the mayor attending this meeting?
- Please display screen with contact info for planner and yourself...Or place that in chat...or a link..thanks
- Do Not agree with Mayor's Plan to purchase facility and seek zoning change later.
- No - rammed down our throats, just like ART!!
- Nice job of changing name to change focus on fact that the bulk of this "hub" will be a homeless shelter...How many of the 572,000 will be devoted to tenants and how much to shelters.
- Can attendees please get a copy of this powerpoint? Thank you.
- I don't believe research supports that housing is the crux of the matter of why the disparity exists... Changing the housing is NOT going to necessarily change the disparity. Ask anyone in "inner city housing"
- Wow. At least double for all these problems and much more than that for most! must cost a lot more to the public to provide healthcare to unhoused than even it would be to provide housing.
- How many square feet would be to "medical respite?"
- That's wild. Just in the price for healthcare we are already paying to help unhoused it makes sense to provide housing! That graph makes it crazy clear
- How many square feet and personnel would be housed to provide employment services, behavioral health services, medical care, permanent housing?
- I do not believe respite use is compatible with family use. There is no clear end game/plan to achieve housing.
- I have not heard a plan...only a vision of "what we want" ..there is NO plan1
- It's the same powerpoint presentation over and over with no answers after three years.

- Good evening. Thank you for having this meeting and letting us participate. I live in the Downtown area. The downtown area is bearing the brunt of the homeless population ills, although this issue is a social issue that needs to be addressed and borne by all areas of the City. The homeless need medical, health, and daily living attention. I am in favor of this project and believe it is well-planned and the area of town in which it is located is great. Bus service is available to this facility. Medical services are there already, and it seems like the supportive services would be very well utilized.
- Operational components needs to be resolved before further movement.
- Do we have permission to record?
- This is a one party state Craig, you don't need permission, just FYI.
- Good evening... I disagree that there is a plan...there is no plan...just an uninformed purchase of property and money pit.
- I thought this was a meeting for the neighborhoods surrounding GMC to give their input - not downtown. I understood it was Elder Homestead, South San Pedro, Siesta Hills, Parkland Hills, and Trumbull Village that were invited to participate.
- While I am sympathetic to the city-wide impacts of the unsheltered population, there are local concerns that need to be addressed that local residents are keenly aware of and willing to share helpful ideas. This facility/operational plan needs A LOT of work until it is acceptable.
- Where can I find a copy of the comprehensive plan??
- Standards are not set yet...specific use standards...Adverse impacts-cannot be yet declared that there will be no significant adverse impact to surrounding community.
- Who will assess the adverse effect to the surrounding neighborhood?
- There will be new cars because you are going to have personnel for those citizens you serve.
- I agree Barbara.
- It will also have a negative impact on pedestrian and transit connectivity.
- Family and community services needs to have a plan with transit BEFORE this conditional use app is approved
- What case worker-to-client ratio are you targeting to determine how many social workers you need?
- WHY is there an application being submitted on July 6, when there are issues on the conditional use.
- I think we need an in-person hearing on this.
- There is NOT research on the declaration that there will be no negative impact.
- 300 feet is inadequate. The effects on surrounding areas should be addressed for at least a mile.
- Each have a date except notice to NAs. Why no date for that?
- Why are they submitting a conditional use permit request BEFORE the planned site use plan is in place? It seems to be putting the cart before the horse
- UNM's own studies show a 56% increase in crime within I believe a mile of a shelter.
- How does this hub comply with HUD requirements to deconcentrate low income housing across the city, which includes homeless shelters?
- There should be a link to the recording, we don't need a large file. We are requesting a recording because specific details that are shared by officials are needed to follow up on. If you cannot share a recording, we should be able to get a PDF of a transcript.
- Not sharing a link to a recording nullifies the claim to transparency.
- Agreed...a recording should be available.

- A report is only going to highlight what one person who is writing the report wants to highlight or remembers to highlight.
- You can really slant a meeting report when you're the one writing it.
- Was the site assessed as to level of low income housing in the area vs say North Albuquerque Acres.
- Did unhoused people rob your parents?
- Where is the research that says unhoused people are not linked to higher crime rates? I think research shows differently.
- Once the permit is granted, is there any further avenue for neighbors to have input in this process?
- Will it be documented how many people on this meeting were from neighborhoods affected versus not in neighborhoods affected?
- Barrett House has 30 beds
- My research shows 37 homeless/drug and alcohol/behavioral health/faith-based services in District 6, There are only 17 in D2, 13 in D7, 2 in D9, 1 in D1, 4. and 8, and ZERO in D3 and D5. This is NOT "evenly spread out" like the City claims.
- Without knowing how much square foot is being devoted to beds, there is no idea of how many beds there will be
- You don't have a number in mind. That's unbelievable
- How can we get the input of the houseless population? What they need? What is their voice? Online meetings are great. They are not ideal for the target population. Is there anything I can do to support the effort to give a voice to the voiceless?
- I read a number of articles where some unhoused were interviewed. They requested to be placed far away from Central and temptations or the downtrodden environment. Guess how that went.
- HEAR her!!
- Thank you Tamaya!!!! Completely Agree!!!!
- Thank you, Tamaya.
- Tamaya nailed it.
- Thank you, Tamaya!!!
- I'm sorry but Carol's response is woefully inadequate to address Tamaya's comments.
- Agreed with Rob.
- That's it, Tamaya. Spot on.
- Agreed with Rob and Tamaya!
- None of their responses address our concerns
- Tamaya is correct
- So in other words you are moving forward no matter what we say?
- I'm trying to get on board with some version of Gateway, but I'm having trouble moving in that direction. There are way too many issues to address that have not been addressed or in process of being addressed. There are excellent questions unfortunately not clear answers.
- It boils down to Tim Keller and a fistful of Councilors wanting a reelection. Ramming this through with be a coup...
- What exactly does "referral" mean?
- YES Ryan, thank you!!!

- I agree with the comments by Tamaya. We are getting generalized answers to specific questions. Until we get specific answers, I do not see how the rezoning can be approved without written plans.
- Do the NA's get a copy of the application, or does it just go straight to the Zoning Examiner?
- Good questions
- So will you answer his question please
- Heading home
- We need a map showing number of beds, SE has many more beds than other areas. Shelter
- I agree. We need a report on where shelters are and what percentage are here in SE.
- I built the map.
- These shelters are not proposed to hold 300+ beds like Gateway!!!
- THIS IS CORRECT.
- Barrett house is located south of Indian School. That is always trotted out as the "dispersed" shelter in the NE heights.
- Westside shelter /Emergency Housing Center has 300 beds
- City has said they plan to close west side - please do not go back and forth on what you say Carol, Lisa, all of you at City
- The have claimed the West side will close repeatedly.
- Go Barbara!
- Phoenix has a similar "center" called Human Service Campus, with 15 organizations providing services and their surrounding neighborhoods are "Overwhelmed and overburdened by the sheer volume of homelessness" <https://amp.azcentral.com/amp/5967262002>
- Point for point for point, Barbara, you are spot on.
- These are excellent points!!
- Excellent points. Let her continue.
- The westside shelter previously had a couple of years ago had a capacity of 450 not 300.
- She is bringing up detailed excellent points.
- Instead of interrupting her, why don't you answer her questions!
- Thank you Barbara!
- Great point providing services where they are
- We need to go to zoning meeting. To slow down this project.
- If they show up with a cart from a business (smiths cart) they should be arrested. Stolen property.
- No, that is not a sound plan.
- When you get your operational plan solidified is when the proposal should go to zoning committee!!
- What plan? At present there are no studies or a clearly laid out plan. What about the impact to local businesses?
- Go Raven! You have given us more information than the City to date!
- Exactly, Raven. Thank you!!!
- There it is.
- Thank you for those numbers, Raven.
- Excellent points, Raven!!!
- Yay Raven
- Amen

- Based on data presented by Raven, and lack of data ...this proposal IS NOT ready for submittal on July 6
- Thank you Raven. Spot on.
- "We want to get more people into shelter beds."
- District 6 residents are not 'concerned', we are OVERWHELMED with indigent services.
- Problematic phrasing there, we need clarity on numbers.
- The proposal is not remotely ready. Lots more work needed.
- HOW big a slice will be shelter and how much will be tenant services??!!!
- They don't care you get hurt. They want re-election
- AND starting small still needs a cap!!!
- Raven is speaking the harsh truth. No it is not going to help us getting them in the shelter from our neighborhood, if you are bringing more into the neighborhood by busing them in from all over.
- Raven and many of us have done homework for months. City doesn't give us anything concrete, just maneuvering and we're not disposable citizens here – we've built homes here. Starting small is what we asked city council to do w/ Davis amendment last week
- We are also hosting a "safety center" at San Mateo and Kathryn
- No, the city is now planning to build housing there.
- The Kathryn San Mateo plan is still quite a ways from being finalized. It's my understanding that a public input meeting regarding that location is scheduled for the upcoming weeks and months. Please check the d6 Facebook page or website for more information as it becomes available.
- NO PLAN
- No zoning change
- Rob is right. We need real, binding answers.
- Yes we do.
- Yes yes yes Zoning meeting needs canceled until real plans and data are presented to neighborhoods.
- Agreed, the conditional use proposal should be cancelled for July 6
- Hear! Hear! Thanks Rob Leming
- A red-lined document that shows that Plan A existed, and then gives us a clue as to what has been changed after public input!
- Right on, Rob!
- Thanks Rob, Raven, Tamaya et al.
- This I why there won't be a video link...they don't want this out there.
- Thank you Rob.
- IF august is when operational plan will be written than that is when proposal to city zoning should be made
- Thank you Rob!
- We need to start voting no on the bond funds for proposals with no details
- Good point, Mario in them inflating numbers of how many participants are actually from the affected neighborhoods.
- Yes Agreed, no conditional use request without an operational plan that is neighborhood reviewed
- Thank you Rob! Well, if you are going to have the operational plan in August, then the rezoning should not be approved until then.
- Thanks for that point Mario, I live in District 6 but further west in Victory Hills.

- The tent facilities that the housing committee is looking should be located in other areas other than district 2 and 4
- Decamping strategies need to be in place..YES!!!
- Yes.
- I refuse to vote yes on bonds now for just this reason...just seniors and parks get my ok. I voted yes on streets for ever, but quit after they repaved west side sidewalks and streets twice in 2 years, but Elder Homestead still has original 1954 sidewalks.
- They are already camping out at the small house village.
- There is no data saying that most people that are homeless want a home
- Where is the data to support that most folks that are homeless want a home???
- There is no data to support that most folks that are homeless want a home...why does Lisa keep saying that!!!
- There is NO data supporting that claim. I have friends in Social Security that quit due to getting overwhelmed by the number of homeless that will not quit their lifestyle.
- I strongly disagree was meant for all
- I agree with Raven...that is my data as well!
- And yes, magnetization is clearly in effect with the number of people who have moved in to the streets and neighborhoods near Tiny Homes.
- Seems Carol and Lisa dance around they issues. Don't answer directly
- Please limit the city response time tnx
- I never got a response from the lady that presented the proposal bullets in which the proposal stated that there is no effect on traffic or adverse effects on neighborhoods.
- The city is still using our parks as pick up/drop off for the shelter system. That wouldn't fly in the far northeast.
- Why can't homeless people be temporarily allowed to stay in the old Galles on Lomas or KMart, which are air-conditioned?
- Good points Laura!
- There is no security plan once they leave the premises.. Albuquerque police have no plans for increased patrols, and yes; we are currently understaffed.
- How is the Gibson Center going to separate out the people who truly want help/services verse the people who want to be homeless? The ones who don't want help will need to be redirected somewhere else to avoid congesting services for those who want help.
- We have asked for transparency on crime statistics currently around this area, and APD presence based on crime stats, not necessarily populations.
- Medical care is to be provided to the homeless presumably at city expense due to inability of the clients to pay. Would a poor person who has a home get the same support?
- There is no screening process, including abusers/sex offenders/ violent criminals, etc.
- Are they wanting our neighborhoods to form vigilante groups?
- Not to beat a dead horse...but Jackie Fishman, the proposal should not be submitted until operational plan for security is formalized into plan. And the statements that there is going to be no increased traffic effects nor adverse effects on neighborhoods is corrected.
- Funny, but one person involved in this City-side suggested neighborhoods be proactive. Not my circus, not my job
- Whatever information the city comes up with on adverse affects also needs to be shared with neighbors and businesses and discussed BEFORE decisions are made, and with ample time.
- Agreed, Tamaya!

- The conditional use meeting for July 6 should be canceled until more data is gathered. Why is the city rushing this? Is this strictly a political move by Keller?
- None of the people involved in this project live here, so they do not care what happens.
- Agreed, the conditional use proposal for July 6 should be cancelled until the data and the operational plan is in writing - and good neighbor plan is in place.
- For the record, here is the link to my services map. There are 4 more homeless services to add courtesy of collaborators, but my connection is tenuous, so I'll be adding them post-meeting.
<https://www.google.com/maps/d/edit?mid=1UY2rBBJvh4sJwsmQwN0ieemwGcaivFPT&usp=sharing>
- And neighborhoods affected will have time to respond to the proposal that is drawn up that will supposedly address include data on traffic and adverse effects
- Awesome Raven, thank you!
- Agreed that this item should be removed from the upcoming conditional use permit hearing. Is there a way for us to request that this be bumped forward rather than allowing this item to be on the meeting's agenda?
- Good neighbor agreements have NO TEETH. They are not legally binding. The GNA's I have seen do not even list CABQ as liable parties, they only list the neighborhood and the non-profit the city pawns the responsibility off to.
- This is not the First of Many, rather it is the Only of None.
- ..." trying to build this plane while you're flying it..."
- To say start small is what city Council voted against in the proposal made by Pat Davis
- *Only of One. Stupid fingers!
- This is District 6, not 5. But your point is well taken.
- District 6, David, District 5 is on west side of river
- At least I think that is what our City Councilman was asking
- Yes, thank you David!
- Sorry for getting districts mixed up...I'm rather perturbed at moment.
- I can't help but wonder who was promised what to vote against Pat Davis if "starting small" is really in the City plan.
- We are not solving this together...this is being pushed down our throat...
- Bravo David, I hesitated to bring up the obligation of the participants have some terms of compliance. The "Low barrier" concept really concerns me. This must be quid pro quo!
- city not credible.
- If people will not meet halfway to ascend from homelessness, then the ship has already sunk.
- There are no solutions being proposed to neighborhood concerns...only talk of visions...and when you look back on the mountains, the Landslide will bring you down
- There will be a positive impact no matter where they are served at.
- Go, David! let's get the delegation involved!!!
- If we were in this together.....
- Barbara...give me about 3 hours, and I can draft you a powerpoint about the new railway bridge I'm going to build you downtown. I'm not saying I can lay a single brick, mind you, but I can make you one helluva presentation!
- We need a legally enforceable documents that hold the city accountable.
- Patricia, please do!
- I want to thank all neighbor residents for attending and staying on this . And to Jessie and your group, please note all the unanswered questions tonight and the trust issue we spoke to. I am

still waiting on answers to my sign up for homeless newsletter, and my gateway input question - I haven't received any responses except from Jessie - no transparency so they don't mean it.

- I second Vera. I've not gotten a single thing from the City other than Jessie's emails.
- We need another meeting to address all of the points brought up tonight
- DO THE RIGHT THING. PERMIT HEARING NEEDS CANCELLED UNTIL THERE IS MORE DATA PROVIDED AND WE ARE GIVEN AN OPERATIONAL PLAN.
- Thank you David. Great points.
- David, thank you! You were great as so many have been tonight!
- Oops sorry district 6
- When will that architect review be complete...that is the least that should be complete BEFORE the zoning proposal is made!!!
- Thank you, David
- Agreed...that was one of my questions too...to know who the actual tenants/ providers will be AND how much square foot will be allotted to ancillary providers!!!
- No conditional permit should be issued now. We need answers.
- If nothing has been decided yet why is the city proceeding with any future decision regarding the Gateway. Please GET a plan and then proceed. The city is not giving ANY concrete answer to any of the issues. Everything has been said to be in the future. The future is July 6th????
- Barbara...YES! How do we know what goes where and how much of it when NOTHING EXISTS.
- I wonder who the architect is. How do we express our concerns about numbers to that person or organization?
- NO conditional permit should be asked for!!!! NOT on July 6 and not in Augustnot until operational plans, architectural review is completed!!!
- What is the appeal process for ZHE?
- We should request that the review board decline to open this process
- What is the appeal process for a "site plan administrative" decision?
- Kate- agreed.
- The city should not approach the zoning examiner with a ghost proposal on July 6!!!
- Agree, there should be no permit without a credible, transparent and thought out plan.
- So....the City wants respite beds, shelter beds, then overnight beds from God-knows-how-many tenants?????
- Yikes.
- Will there be daycare for families with children onsite?
- This right here is why that amendment from Pat Davis was so important. All bets are off for bed caps.
- "It's not going to be 500 beds" Puts in 500 beds.
- Why are we asking approval for use when we don't have an operations plan?!!!
- Rachel , I mentioned that in chat, let's look for it
- Will the current homeless shelters still be in operation along with the Gateway Center?
- Already holds....with a crap track record.
- YAAAAAAS Queen
- 70 maximum is more sustainable than 100. A cap of 70 total individuals or 30 families maximum would be supportable by the neighborhoods.
- Let Districts 1, 3, 4, 5, 8, and 9 take their "Fair Share"
- Who else would agree with a CAP OF 70 INDIVIDUALS OR 30 FAMILIES?
- Peter, I would

- Only 100 if they were all Veterans
- Can we please get the budget and timeline for additional transitional housing listed in the plan before July 6th? Thank you everyone for your time.
- Tamaya has done her homework, which is more than I can say for the city. Great job Tamaya.
- Thank you Jessie for facilitating what we knew would be challenging meeting.
- I would
- We definitely need a reasonable cap. 70 maximum.
- Thank you Jessie for facilitating a hard meeting.
- From all the community partners in place now, there should be data for a graduation rate from services and maintaining stability?
- Thank you Jessica! You did a fabulous job with an emotionally charged topic.
- good job Jessie
- Thanks Tamaya. Good questions.
- Recording is trusted thnx
- 100 VETERANS WOULD BE GOOD AS THEY HAVE ADJACENT SUPPORT SERVICES NEXT DOOR
- Thank you Jocelyn
- A big sarcastic Thaaaaaaanks to every City Councilor but Pat
- I saved the chat and audio recorded if anyone needs it

From: Sanchez, Suzanna A. <suzannasanchez@cabq.gov>
Sent: Tuesday, August 3, 2021 9:02 AM
To: Aranda, James M. <jmaranda@cabq.gov>; Jackie Fishman <jfishman@consensusplanning.com>
Cc: Patten-Quintana, Lorena <lpatten-quintana@cabq.gov>; Charlene Johnson <Johnson@consensusplanning.com>
Subject: RE: Public Notice Inquiry Sheet Submission

Good morning Jackie,

In order to get Parkland Hills on the list I went out 200 feet rather than the 100+ feet.

Association Name	First Name	Last Name	Email	Address Line 1	Address Line 2	City	State	Zip
Parkland Hills NA	Mary	Darling	mldarling56@yahoo.com	650 Monroe Street SE		Albuquerque	NM	87108
Parkland Hills NA	Robert	Leming	phnapresident@gmail.com	712 Truman Street SE		Albuquerque	NM	87108
District 6 Coalition of Neighborhood Associations	Mandy	Warr	mandy@theremedydspa.com	119 Vassar Drive SE		Albuquerque	NM	87106
District 6 Coalition of Neighborhood Associations	Patricia	Willson	info@willsonstudio.com	505 Dartmouth Drive SE		Albuquerque	NM	87106
South San Pedro NA	Zabdiel	Aldaz	zabdiel505@gmail.com	735 Alvarado SE		Albuquerque	NM	87108
South San Pedro NA	Khadjah	Bottom	khadjahasilivizionz.org	1200 Madeira SE	#130	Albuquerque	NM	87108

Thank you,

Suzie

Below is the list of property owners to notify for 5400 and 5006 Gibson.

Owner	Complete Owner Address
GIBSON MEDICAL CENTER LLC	6300 JEFFERSON ST NE ALBUQUERQUE NM 87109
LOS POLLOS HERMANOS 5211 GIBSON LLC	105 JEFFERSON ST NE ALBUQUERQUE NM 87108-1216
RAVANO ROBERT J TRUSTEE RAVANO RVT & RAVANO STEPHEN R & THOMPSON SUZANNE M	1460 CRESTVIEW DR SAN CARLOS CA 94070-4255
HAJJAR CHARLES C TRUSTEE SIESTA HILLS REALTY TRUST C/O HAJJAR MGT CO INC	30 ADAMS ST MILTON MA 02186
RABADI SHARIF A & SAMIA S TR STAR TRUST	11201 SAN ANTONIO DR NE ALBUQUERQUE NM 87122-1049
PALM DIANE & PADILLA DEBORAH	1104 W BAY AVE NEWPORT BEACH CA 92661-1017
U S GOVERNMENT 377 CEG/CERR	2050 WYOMING BLVD SE KIRTLAND AFB NM 87117-5663
HAJJAR CHARLES C TRUSTEE SIESTA HILLS REALTY TRUST C/O HAJJAR MGMT CO INC	30 ADAMS ST MILTON MA 02186-3412
PEARL SPRING CREEK LLC	5600 GIBSON BLVD SE ALBUQUERQUE NM 87108-4840
ALBUQUERQUE HOUSING AUTHORITY	1840 UNIVERSITY BLVD SE ALBUQUERQUE NM 87106-3919
BHC ENTERPRISES LC	5844 AVONMORE CIR HIGHLAND UT 84003-3442
MCDONALDS REAL ESTATE COMPANY	ONE MCDONALDS PLAZA OAK BROOK IL 60523-1928
B & B MERRITT REAL ESTATE LLC	750 N 17TH ST LAS CRUCES NM 88005-4153
USA C/O DEPT OF VET AFFAIRS MED CENT	1501 SAN PEDRO DR SE 138 ALBUQUERQUE NM 87108-5138
GIBSON MEDICAL CENTER LLC	6300 JEFFERSON ST NE ALBUQUERQUE NM 87109-3482
LOVELACE BIOMEDICAL RESEARCH INSTITUTE	2425 RIDGECREST DR SE ALBUQUERQUE NM 87108-5129

Public Notice Inquiry For:

Zoning Hearing Examiner

If you selected "Other" in the question above, please describe what you are seeking a Public Notice Inquiry for below:

Contact Name

Charlene Johnson

Telephone Number

5057649801

Email Address

johnson@consensusplanning.com

Company Name

Consensus Planning

Company Address

302 8th Street NW, 3rd Street and Lomas, Universe St. and Paseo del Norte Blvd.

City

Albuquerque

State

NM

ZIP

87102

Legal description of the subject site for this project:

TR A-1-A-1-A PLAT OF TR A-1-A-1-A LOVELACE HOSPITAL (BEING AREPL OF TR A-1-A-1 & A PORTION OF VACATED RIDGECREST DRIVESE) CONT 20.4232 AC

LOT 1 SWIFT ADD'N CONT 0.4226 AC

Acres: 0.4226

Physical address of subject site:

5006 Gibson Blvd. SE and 5400 Gibson Blvd SE

Subject site cross streets:

Gibson Boulevard and San Mateo Boulevard

Other subject site identifiers:

Old Lovelace Hospital Site

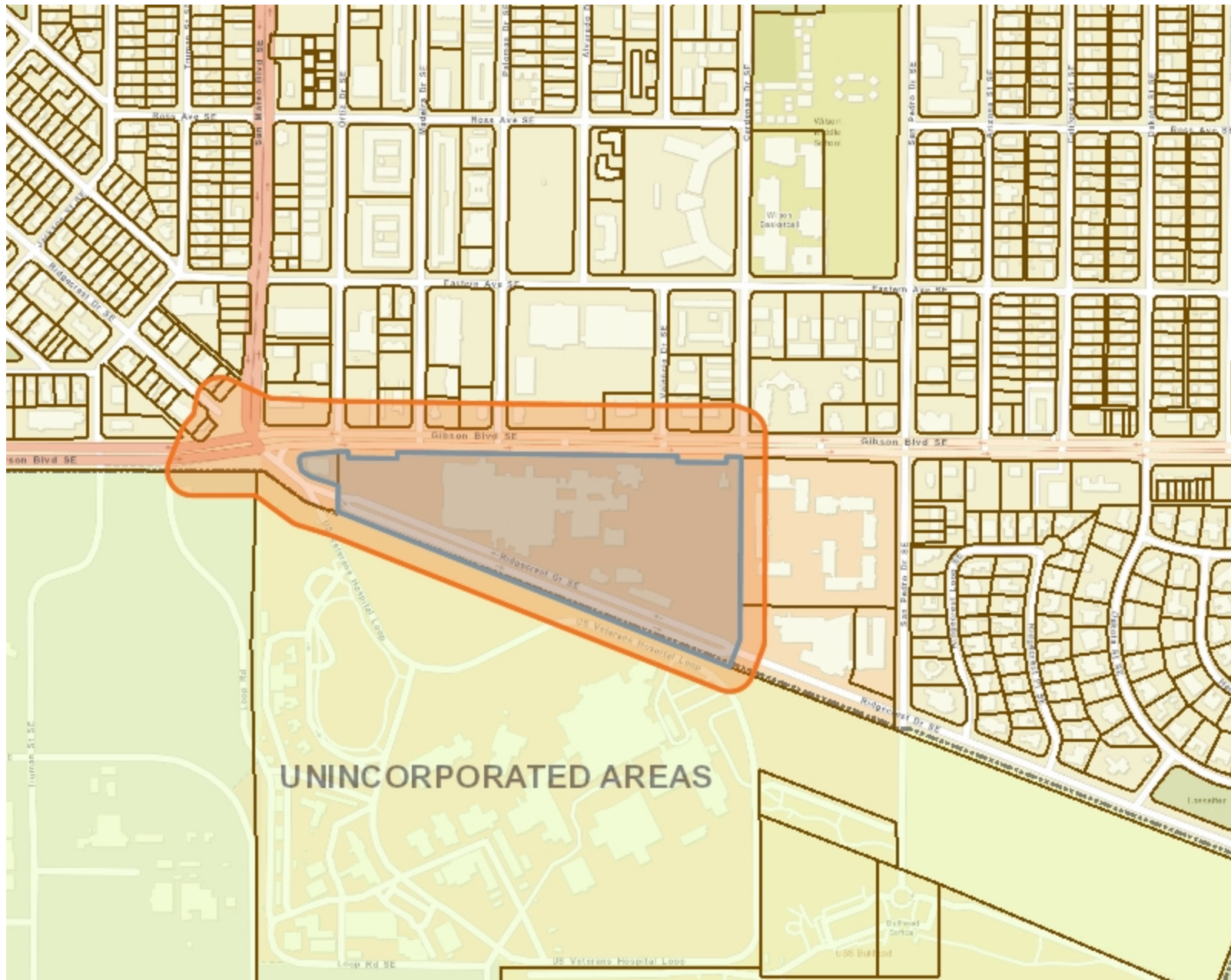
This site is located on the following zone atlas page:

M-18-Z

<2. Letter to Property Owners-September.pdf>



100 ft. - Buffer 5006 & 5400 Gibson Blvd



Legend

- Bernalillo County Parcels
- Municipal Limits
 - Corrales
 - Edgewood
 - Los Ranchos
 - Rio Rancho
 - Tijeras
 - UNINCORPORATED
- World Street Map

Notes

Prepared by Consensus Planning

1,202 0 601 1,202 Feet

WGS_1984_Web_Mercator_Auxiliary_Sphere
7/30/2021 © City of Albuquerque

1: 7,212

0453

The City of Albuquerque ("City") provides the data on this website as a service to the public. The City makes no warranty, representation, or guaranty as to the content, accuracy, timeliness, or completeness of any of the data provided at this website. Please visit <http://www.cabq.gov/abq-data/abq-data-disclaimer-1> for more information.

THIS MAP IS NOT TO BE USED FOR NAVIGATION

100-ft. Buffer Property Owner Addresses - 5006 Gibson Blvd. and 5400 Gibson Blvd.

Owner	Owner Address	Owner Address 2
VAMANOS PEST LLC	5901J WYOMING BLVD NE NO. 311	ALBUQUERQUE NM 87109-3866
GIBSON MEDICAL CENTER LLC	6300 JEFFERSON ST NE	ALBUQUERQUE NM 87109
LOS POLLOS HERMANOS 5211 GIBSON LLC	105 JEFFERSON ST NE	ALBUQUERQUE NM 87108-1216
RAVANO ROBERT J TRUSTEE RAVANO RVT & F	1460 CRESTVIEW DR	SAN CARLOS CA 94070-4255
HAJJAR CHARLES C TRUSTEE SIESTA HILLS REA	30 ADAMS ST	MILTON MA 02186
RABADI SHARIF A & SAMIA S TR STAR TRUST	11201 SAN ANTONIO DR NE	ALBUQUERQUE NM 87122-1049
PALM DIANE & PADILLA DEBORAH	1104 W BAY AVE	NEWPORT BEACH CA 92661-1017
ALVARADO LINDA M	924 W COLFAX AVE SUITE 302	DENVER CO 80204-2469
U S GOVERNMENT 377 CEG/CERR	2050 WYOMING BLVD SE	KIRTLAND AFB NM 87117-5663
DESANTIS WAYNE M	2017 RIDGECREST DR SE	ALBUQUERQUE NM 87108-4531
HAJJAR CHARLES C TRUSTEE SIESTA HILLS REA	30 ADAMS ST	MILTON MA 02186-3412
PEARL SPRING CREEK LLC	5600 GIBSON BLVD SE	ALBUQUERQUE NM 87108-4840
ALBUQUERQUE HOUSING AUTHORITY	1840 UNIVERSITY BLVD SE	ALBUQUERQUE NM 87106-3919
BHC ENTERPRISES LC	5844 AVONMORE CIR	HIGHLAND UT 84003-3442
MCDONALDS REAL ESTATE COMPANY	ONE MCDONALDS PLAZA	OAK BROOK IL 60523-1928
VAMANOS PEST LLC	5901J WYOMING BLVD NE NO. 311	ALBUQUERQUE NM 87109-3866
B & B MERRITT REAL ESTATE LLC	750 N 17TH ST	LAS CRUCES NM 88005-4153
USA C/O DEPT OF VET AFFAIRS MED CENT	1501 SAN PEDRO DR SE 138	ALBUQUERQUE NM 87108-5138
GIBSON MEDICAL CENTER LLC	6300 JEFFERSON ST NE	ALBUQUERQUE NM 87109-3482
LOVELACE BIOMEDICAL RESEARCH INSTITUTE	2425 RIDGECREST DR SE	ALBUQUERQUE NM 87108-5129
MCGILVRAYS LLC	1410 SUNSET RD SW	ALBUQUERQUE NM 87105-4010

Public Notice of Hearing

Date: August 03, 2021

To Whom This May Concern:

I am requesting approval from the Zoning Hearing Examiner within the City of Albuquerque for a conditional use or variance to allow a overnight shelter at the existing Gibson Health Hub (old Lovelace Hospital) (summary of request).

Property owner: City of Albuquerque

Agent (If applicable): Jacqueline Fishman, AICP, Principal, Consensus Planning

Property Address: 5006 and 5400 Gibson Blvd. SE, Albuquerque, NM, 87108 (zip code).

A hearing will be held on September 21, 2021 beginning at 9:00AM via ZOOM. Please call 505- 924-3894 for details and updates regarding an in-person hearing. If an in-person hearing is available, it will occur in the Plaza Del Sol Hearing Room at 600 2ND Street NW-Basement Level.

Join Zoom Meeting

<https://cabq.zoom.us/j/7044490999>

Meeting ID: 704 449 0999

One tap mobile

+16699006833,,7044490999# US (San Jose)

+12532158782,,7044490999# US (Tacoma)

Dial by your location

+1 669 900 6833 US (San Jose)

+1 253 215 8782 US (Tacoma)

+1 346 248 7799 US (Houston)

+1 646 558 8656 US (New York)

+1 301 715 8592 US (Germantown)

+1 312 626 6799 US (Chicago)

Find your local number: <https://cabq.zoom.us/j/7044490999>

Thank you,

Applicant's Name: City of Albuquerque, Family and Community Services

Applicant's Number or Email Address: fishman@consensusplanning.com (Agent)

For more information, please contact the ZHE Administrative Assistant Suzie Sanchez at 505- 924-3894 or suzannasanchez@cabq.gov. Information on the Gateway Center Project is available the City's website at cabq.gov/gateway.

Please note: "You may submit written comments to the Zoning Hearing Examiner up to 6 days before the hearing (5pm on the Wednesday before the hearing). Written comments received after that deadline may result in deferral. An agenda can be found at <http://www.cabq.gov/planning/boards-commissions/zoning-hearing-examiner/zhe-agendas-action-sheets-decisions>.

**OFFICIAL PUBLIC NOTIFICATION FORM
FOR MAILED OR ELECTRONIC MAIL NOTICE
CITY OF ALBUQUERQUE PLANNING DEPARTMENT**



PART I - PROCESS

Use [Table 6-1-1](#) in the Integrated Development Ordinance (IDO) to answer the following:

Application Type:

Decision-making Body: Zoning Hearing Examiner

Pre-Application meeting required: ☐ Yes ☐ No

Neighborhood meeting required: ☐ Yes ☐ No

Mailed Notice required: ☒ ☐ Yes ☐ No

Electronic Mail required: ☐ Yes ☐ No ☒

Is this a Site Plan Application: ☐ Yes ☐ No ☒ **Note: if yes, see second page**

PART II – DETAILS OF REQUEST

Address of property listed in application: 5006 and 5400 Gibson Blvd. SE

Name of property owner: City of Albuquerque

Name of applicant: City of Albuquerque / Agent: Jacqueline Fishman, Principal, Consensus Planning, Inc.

Date, time, and place of public meeting or hearing, if applicable:

September 21, 2021 9:00AM via Zoom (Meeting ID# 704 449 0999)

Address, phone number, or website for additional information:

www.cabq.gov/zoninghearingexaminer or 505-924-3894

PART III - ATTACHMENTS REQUIRED WITH THIS NOTICE

☒ Zone Atlas page indicating subject property.

☒ Drawings, elevations, or other illustrations of this request.

☒ Summary of pre-submittal neighborhood meeting, if applicable.

☒ Summary of request, including explanations of deviations, variances, or waivers.

IMPORTANT: PUBLIC NOTICE MUST BE MADE IN A TIMELY MANNER PURSUANT TO [SUBSECTION 14-16-6-4\(K\)](#) OF THE INTEGRATED DEVELOPMENT ORDINANCE (IDO). PROOF OF NOTICE WITH ALL REQUIRED ATTACHMENTS MUST BE PRESENTED UPON APPLICATION.

I certify that the information I have included here and sent in the required notice was complete, true, and accurate to the extent of my knowledge.

(Applicant signature) August 03, 2021 (Date)

Note: Providing incomplete information may require re-sending public notice. Providing false or misleading information is a violation of the IDO pursuant to IDO Subsection 14-16-6-9(B)(3) and may lead to a denial of your application.

**CITY OF ALBUQUERQUE
LAND USE FACILITATION PROGRAM
PROJECT MEETING REPORT**

Project Number: N/A – Pre-Application Meeting
Property Description: 5400 & 5006 Gibson SE; Tract A-1-A-1-A Plat of Tract A-1-A-1-A Lovelace Hospital (being a replat of Tract A-1-A-1 & a portion of vacated Ridgecrest Drive SE), containing 20.4232 Acres
Date Submitted: June 24, 2021
Submitted by: Jessie Lawrence and Jocelyn Torres
Meeting Date and Time: June 22, 2021, 5:30 PM
Meeting Location: Online via Zoom
Facilitator: Jessie Lawrence
Co-facilitator: Jocelyn Torres

Parties:

- **Applicant:**
 - City of Albuquerque Department of Family and Community Services
- **Agent:**
 - Consensus Planning
- **Affected Neighborhood Associations (per City of Albuquerque notification requirements):**
 - District 6 Coalition of Neighborhood Associations
 - South San Pedro NA

Background/Meeting Summary:

Applicant requests Zoning Hearing Examiner approval of a conditional use to allow an overnight shelter in a portion of the Gibson Medical Center at 5400 Gibson Blvd. SE, part of the Gateway Center at the Gibson Health Hub (referred to as the Gateway Center throughout this report). This was a pre-application meeting.

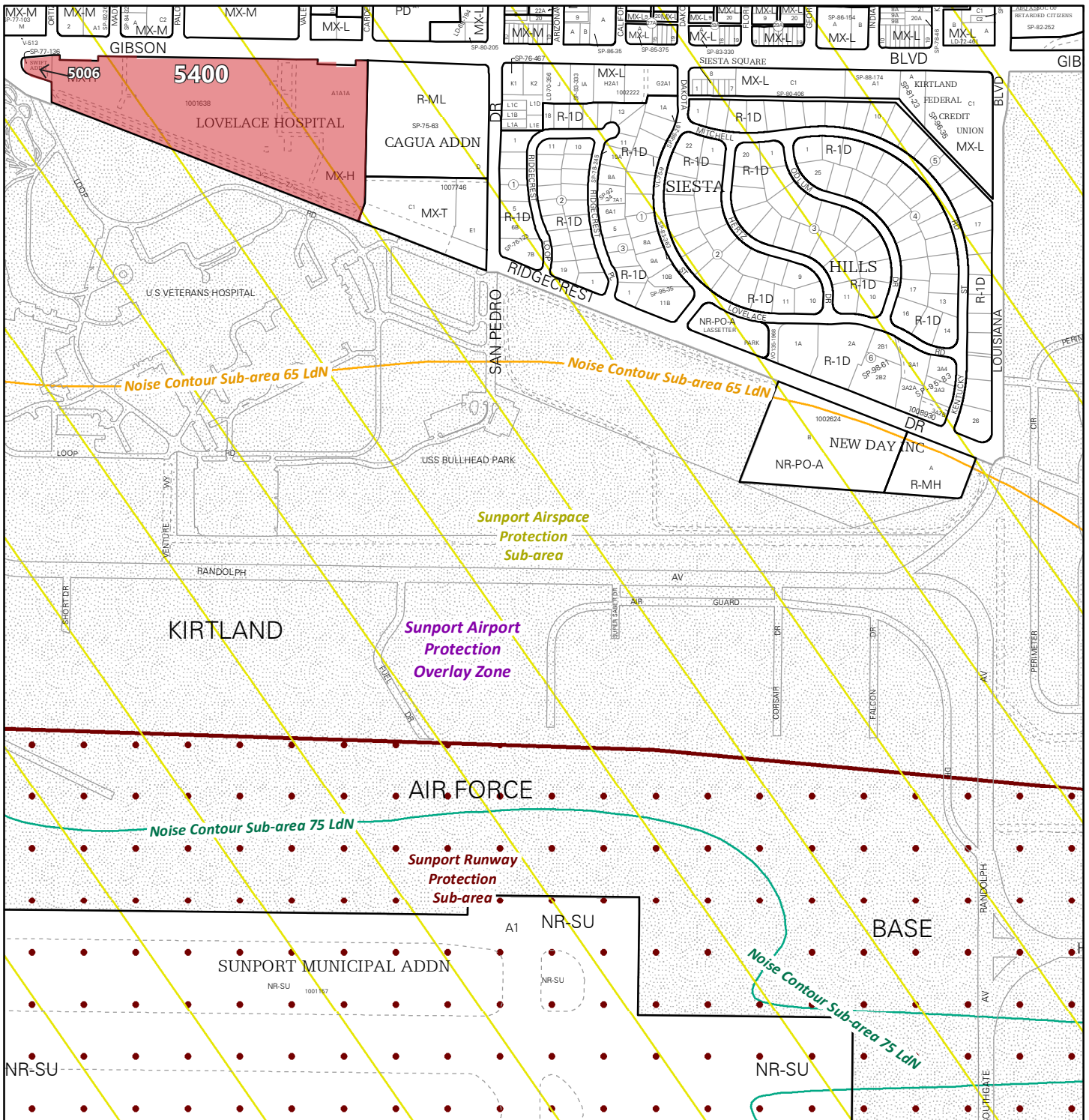
At the meeting, participants expressed a number of concerns about the planned project, and also expressed frustration and a lack of trust with the planning, process, and communication so far. Some participants said that they did not want the Gateway Center in this area or that this center should serve only the local area, and other areas of the city should have to support a greater share of the homeless services. Others said that they needed more information and discussed the need for more data, the complete operations plan in writing, information in writing about the number of people to be served, and information about the planned providers. Others expressed concerns about crime, security, bathrooms, pedestrian traffic, and vehicular traffic. Others requested more information about how individuals would transition out of the Gateway Center and where the transitional housing would come from. Others expressed concern about the Gateway Center being a magnet drawing homeless people to the community, and also asked about homeless people who might seek services but not want shelter. One person pointed out the need to work with the VA Hospital and veterans, and one person suggested a written Good Neighbor Agreement between the neighborhoods and the City.

City staff answered questions and responded to the concerns during the meeting. See Meeting Specifics and the Zoom Chat Appendix for a summary of all of the questions and comments discussed.

As follow-up items, the applicant and agent agreed to share the slide presentation, to provide information about the locations of the 19 public restrooms throughout the community, and to look into the question about what would happen with the conditional use if other tenants wanted to add overnight uses. They also said that the operations plan would be ready before the planned August 17 ZHE hearing, and the conditional use request materials would be sent to the neighborhood associations when they are submitted.

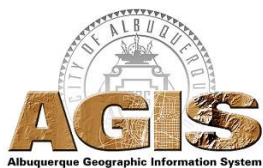
Outcomes:

- **Areas of Agreement:**
 - None noted among all meeting participants.
- **Unresolved Issues and Concerns:**
 - Several participants discussed frustration and a lack of trust in the City, in particular because of the lack of written plans and commitments and changing information about who the Gateway Center would serve.
 - Some participants said that they did not want the Gateway Center in this area or that this center should serve only the local area, and other areas of the city should have to support a greater share of the homeless services.
 - Some participants said there should be more data and information shared with the local residents in writing, including the operations plan, before a conditional use request is submitted.
 - Concerns discussed about the operations of the Gateway Center included:
 - Crime
 - Security and adequate police service
 - Public defecation and the number of available public restrooms
 - Pedestrian traffic
 - Vehicular traffic
 - Some participants asked about the available transitional housing and suggested that there is not enough for the Gateway Center's plans, and noted that there needs to be planning for a limited time of services and a transition out of homelessness.
 - Some participants expressed concerns about the Gateway Center making the neighborhood a magnet for homeless individuals, and also asked about homeless people who might seek services but not want shelter.
 - One person pointed out the need for better coordination with the VA Hospital and veterans.
 - One person suggested a written Good Neighbor Agreement between the neighborhoods and the City; others said that such agreements have been hard to enforce in other places.

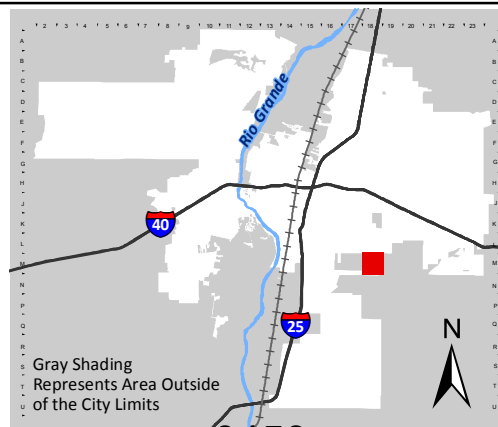


For more details about the Integrated Development Ordinance visit: <http://www.cabq.gov/planning/codes-policies-regulations/integrated-development-ordinance>

IDO Zone Atlas May 2018



IDO Zoning information as of May 17, 2018
The Zone Districts and Overlay Zones
are established by the
Integrated Development Ordinance (IDO).

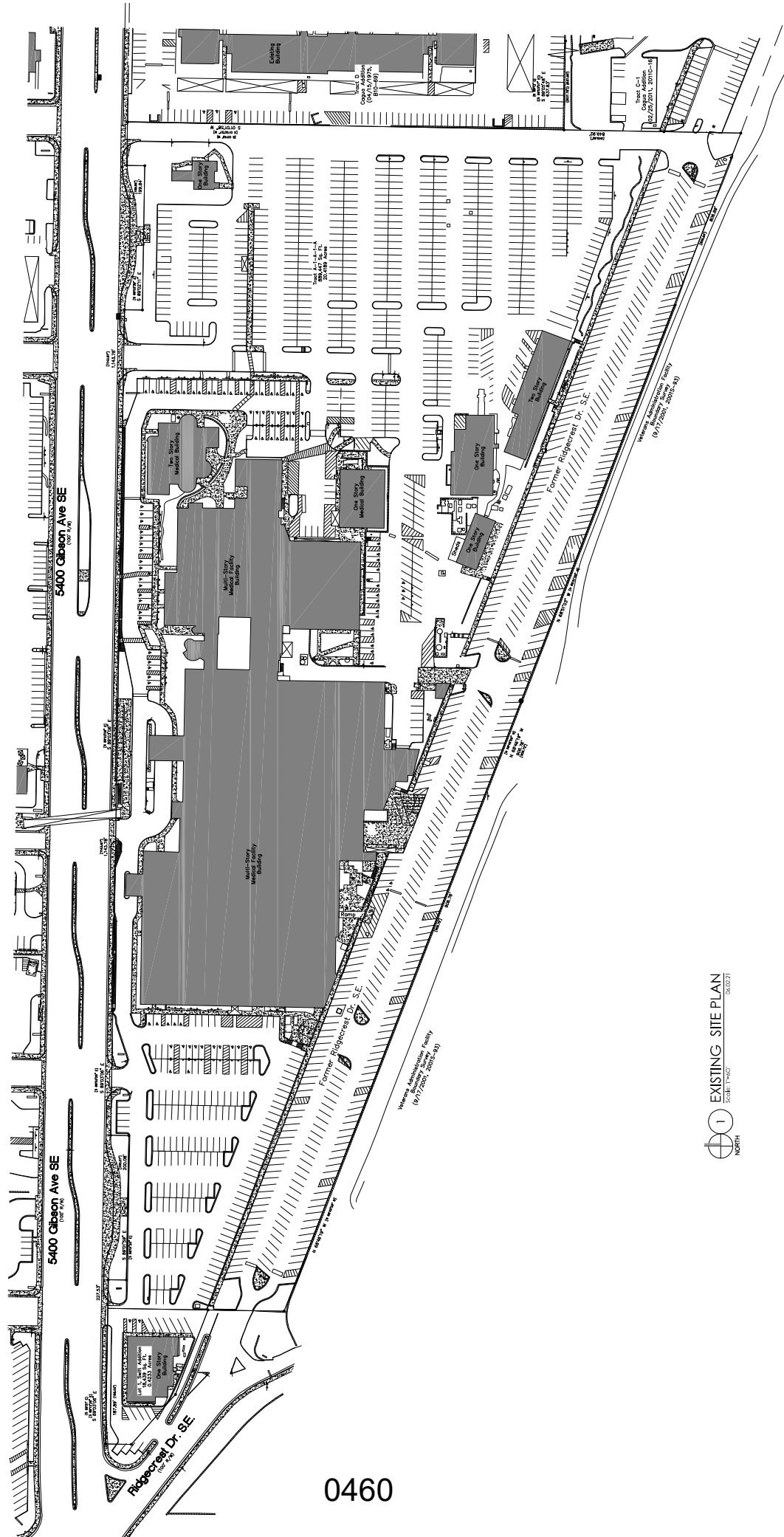


Gray Shading
Represents Area Outside
of the City Limits

Zone Atlas Page:
M-18-Z

- Easement
- Petroglyph National Monument
- Areas Outside of City Limits
- Airport Protection Overlay (APO) Zone
- Character Protection Overlay (CPO) Zone
- Historic Protection Overlay (HPO) Zone
- View Protection Overlay (VPO) Zone

0 250 500 1,000 Feet



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CITY OF ALBUQUERQUE PLANNING DEPARTMENT**



PART I - PROCESS

Use [Table 6-1-1](#) in the Integrated Development Ordinance (IDO) to answer the following:

Application Type: Conditional-use for Overnight Shelter

Decision-making Body: Zoning Hearing Examiner (ZHE)

Pre-Application meeting required: ☒ Yes ☐ No

Neighborhood meeting required: ☒ Yes ☒ No

Mailed Notice required: ☒ Yes ☐ No

Electronic Mail required: ☒ Yes ☐ No

Is this a Site Plan Application: ☐ Yes ☒ No **Note: if yes, see second page**

PART II – DETAILS OF REQUEST

Address of property listed in application: 5006 and 5400 Gibson Blvd. SE

Name of property owner: City of Albuquerque

Name of applicant: City of Albuquerque, Family and Community Services

Date, time, and place of public meeting or hearing, if applicable: Tuesday, September 21, 2021 at 9:00 AM via Zoom or In-Person.

Contact Suzie Sanchez at suzannasanchez@cabq.gov or (505) 924-3894 for more information.

Address, phone number, or website for additional information:

Jacqueline Fishman, Principal, Consensus Planning, Inc. (505) 764-9801, fishman@consensusplanning.com

PART III - ATTACHMENTS REQUIRED WITH THIS NOTICE

☒ Zone Atlas page indicating subject property.

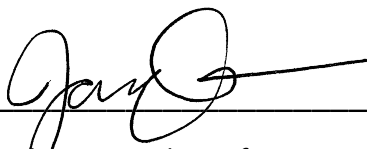
☒ Drawings, elevations, or other illustrations of this request.

☒ Summary of pre-submittal neighborhood meeting, if applicable.

☒ Summary of request, including explanations of deviations, variances, or waivers.

IMPORTANT: PUBLIC NOTICE MUST BE MADE IN A TIMELY MANNER PURSUANT TO [SUBSECTION 14-16-6-4\(K\)](#) OF THE INTEGRATED DEVELOPMENT ORDINANCE (IDO). PROOF OF NOTICE WITH ALL REQUIRED ATTACHMENTS MUST BE PRESENTED UPON APPLICATION.

I certify that the information I have included here and sent in the required notice was complete, true, and accurate to the extent of my knowledge.

 (Applicant signature) August 03, 2021 (Date)

Note: Providing incomplete information may require re-sending public notice. Providing false or misleading information is a violation of the IDO pursuant to IDO Subsection 14-16-6-9(B)(3) and may lead to a denial of your application.

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PART IV – ATTACHMENTS REQUIRED FOR SITE PLAN APPLICATIONS ONLY

Provide a site plan that shows, at a minimum, the following:

N/A a. Location of proposed buildings and landscape areas.

N/A b. Access and circulation for vehicles and pedestrians.

N/A c. Maximum height of any proposed structures, with building elevations.

N/A d. For residential development: Maximum number of proposed dwelling units.

N/A e. For non-residential development:

- ☐ Total gross floor area of proposed project.
- ☐ Gross floor area for each proposed use.

[Note: Items with an asterisk (*) are required.]

**Public Notice of a Proposed Project in the City of Albuquerque
for Decisions Requiring a Meeting or Hearing
Mailed/Emailed to a Neighborhood Association**

Date of Notice*: August 03, 2021

This notice of an application for a proposed project is provided as required by Integrated Development Ordinance (IDO) [Subsection 14-16-6-4\(K\) Public Notice](#) to:

Neighborhood Association (NA)*: See attached neighborhood contacts from Office of Neighborhood Coordination.

Name of NA Representative*: See attached neighborhood contacts from Office of Neighborhood Coordination.

Email Address* or Mailing Address* of NA Representative¹: See attached from Office of Neighborhood Coordination

Information Required by [IDO Subsection 14-16-6-4\(K\)\(1\)\(a\)](#)

1. Subject Property Address* 5006 and 5400 Gibson Blvd. SE
Location Description Southwest corner of Gibson Boulevard and San Mateo Boulevard.
2. Property Owner* City of Albuquerque
3. Agent/Applicant* [if applicable] Consensus Planning, Inc.
4. Application(s) Type* per IDO [Table 6-1-1](#) [mark all that apply]

☒ Conditional Use Approval

- ☐ Permit _____ (Carport or Wall/Fence – Major)
- ☐ Site Plan
- ☐ Subdivision _____ (Minor or Major)
- ☐ Vacation _____ (Easement/Private Way or Public Right-of-way)
- ☐ Variance
- ☐ Waiver
- ☐ Other: _____

Summary of project/request²*:

Conditional use for an overnight shelter in a portion of the Gibson Health Hub Building.

The overnight shelter is for the City's Gateway Project.

¹ Pursuant to [IDO Subsection 14-16-6-4\(K\)\(5\)\(a\)](#), email is sufficient if on file with the Office of Neighborhood Coordination. If no email address is on file for a particular NA representative, notice must be mailed to the mailing address on file for that representative.

² Attach additional information, as needed to explain the project/request.

[Note: Items with an asterisk (*) are required.]

5. This application will be decided at a public meeting or hearing by*:

☒ Zoning Hearing Examiner (ZHE)

☐ Development Review Board (DRB)

☐ Landmarks Commission (LC)

☐ Environmental Planning Commission (EPC)

Date/Time*: Tuesday, September 21, 2021 at 9:00 AM via Zoom or In-Person.

Location*³: Please call (505) 924-3894 for details and updated regarding an in person hearing.

Agenda/meeting materials: <http://www.cabq.gov/planning/boards-commissions>

To contact staff, email devhelp@cabq.gov or call the Planning Department at 505-924-3860.

6. Where more information about the project can be found*⁴:

Please contact Jacqueline Fishman at fishman@consensusplanning.com or 505-764-9801.

Information on the Gateway Center Project is also available the City's website at cabq.gov/gateway.

Information Required for Mail/Email Notice by [IDO Subsection 6-4\(K\)\(1\)\(b\)](#):

1. Zone Atlas Page(s)*⁵ M-18-Z
2. Architectural drawings, elevations of the proposed building(s) or other illustrations of the proposed application, as relevant*: Attached to notice or provided via website noted above
3. The following exceptions to IDO standards have been requested for this project*:

☐ Deviation(s)

☐ Variance(s)

☐ Waiver(s)

Explanation*:

None requested.

4. A Pre-submittal Neighborhood Meeting was required by [Table 6-1-1](#): ☒ Yes ☐ No

Summary of the Pre-submittal Neighborhood Meeting, if one occurred:

A facilitated meeting occurred on June 22, 2021. Please see attached Facilitated Meeting Report Summary.

³ Physical address or Zoom link

⁴ Address (mailing or email), phone number, or website to be provided by the applicant

⁵ Available online here: <http://data.cabq.gov/business/zoneatlas/>

[Note: Items with an asterisk (*) are required.]

5. **For Site Plan Applications only***, attach site plan showing, at a minimum:

N/A a. Location of proposed buildings and landscape areas.*

N/A b. Access and circulation for vehicles and pedestrians.*

N/A c. Maximum height of any proposed structures, with building elevations.*

N/A d. **For residential development***: Maximum number of proposed dwelling units.

N/A e. **For non-residential development***:

☐ Total gross floor area of proposed project.

☐ Gross floor area for each proposed use.

Additional Information [Optional]:

From the IDO Zoning Map⁶:

1. Area of Property [typically in acres] 20.4 acres
 2. IDO Zone District Mixed-use High Intensity (MX-H)
 3. Overlay Zone(s) [if applicable] Airport Protection Overlay Zone (APO)
 4. Center or Corridor Area [if applicable] Center: Lovelace/VA Employment Center
- Current Land Use(s) [vacant, if none] Institutional / Medical

NOTE: Pursuant to [IDO Subsection 14-16-6-4\(L\)](#), property owners within 330 feet and Neighborhood Associations within 660 feet may request a post-submittal facilitated meeting. If requested at least 15 calendar days before the public meeting/hearing date noted above, the facilitated meeting will be required. To request a facilitated meeting regarding this project, contact the Planning Department at devhelp@cabq.gov or 505-924-3955.

Useful Links

Integrated Development Ordinance (IDO):

<https://ido.abc-zone.com/>

IDO Interactive Map

<https://tinyurl.com/IDOzoningmap>

Cc: Elder Homestead Neighborhood Association [Other Neighborhood Associations, if any]
Parkland Hills Neighborhood Association
Trumbull Village Association
Siesta Hills Neighborhood Association

⁶ Available here: <https://tinurl.com/idozoningmap>

**CITY OF ALBUQUERQUE
LAND USE FACILITATION PROGRAM
PROJECT MEETING REPORT**

Project Number: N/A – Pre-Application Meeting
Property Description: 5400 & 5006 Gibson SE; Tract A-1-A-1-A Plat of Tract A-1-A-1-A Lovelace Hospital (being a replat of Tract A-1-A-1 & a portion of vacated Ridgecrest Drive SE), containing 20.4232 Acres
Date Submitted: June 24, 2021
Submitted by: Jessie Lawrence and Jocelyn Torres
Meeting Date and Time: June 22, 2021, 5:30 PM
Meeting Location: Online via Zoom
Facilitator: Jessie Lawrence
Co-facilitator: Jocelyn Torres

Parties:

- **Applicant:**
 - City of Albuquerque Department of Family and Community Services
- **Agent:**
 - Consensus Planning
- **Affected Neighborhood Associations (per City of Albuquerque notification requirements):**
 - District 6 Coalition of Neighborhood Associations
 - South San Pedro NA

Background/Meeting Summary:

Applicant requests Zoning Hearing Examiner approval of a conditional use to allow an overnight shelter in a portion of the Gibson Medical Center at 5400 Gibson Blvd. SE, part of the Gateway Center at the Gibson Health Hub (referred to as the Gateway Center throughout this report). This was a pre-application meeting.

At the meeting, participants expressed a number of concerns about the planned project, and also expressed frustration and a lack of trust with the planning, process, and communication so far. Some participants said that they did not want the Gateway Center in this area or that this center should serve only the local area, and other areas of the city should have to support a greater share of the homeless services. Others said that they needed more information and discussed the need for more data, the complete operations plan in writing, information in writing about the number of people to be served, and information about the planned providers. Others expressed concerns about crime, security, bathrooms, pedestrian traffic, and vehicular traffic. Others requested more information about how individuals would transition out of the Gateway Center and where the transitional housing would come from. Others expressed concern about the Gateway Center being a magnet drawing homeless people to the community, and also asked about homeless people who might seek services but not want shelter. One person pointed out the need to work with the VA Hospital and veterans, and one person suggested a written Good Neighbor Agreement between the neighborhoods and the City.

City staff answered questions and responded to the concerns during the meeting. See Meeting Specifics and the Zoom Chat Appendix for a summary of all of the questions and comments discussed.

As follow-up items, the applicant and agent agreed to share the slide presentation, to provide information about the locations of the 19 public restrooms throughout the community, and to look into the question about what would happen with the conditional use if other tenants wanted to add overnight uses. They also said that the operations plan would be ready before the planned August 17 ZHE hearing, and the conditional use request materials would be sent to the neighborhood associations when they are submitted.

Outcomes:

- **Areas of Agreement:**
 - None noted among all meeting participants.
- **Unresolved Issues and Concerns:**
 - Several participants discussed frustration and a lack of trust in the City, in particular because of the lack of written plans and commitments and changing information about who the Gateway Center would serve.
 - Some participants said that they did not want the Gateway Center in this area or that this center should serve only the local area, and other areas of the city should have to support a greater share of the homeless services.
 - Some participants said there should be more data and information shared with the local residents in writing, including the operations plan, before a conditional use request is submitted.
 - Concerns discussed about the operations of the Gateway Center included:
 - Crime
 - Security and adequate police service
 - Public defecation and the number of available public restrooms
 - Pedestrian traffic
 - Vehicular traffic
 - Some participants asked about the available transitional housing and suggested that there is not enough for the Gateway Center's plans, and noted that there needs to be planning for a limited time of services and a transition out of homelessness.
 - Some participants expressed concerns about the Gateway Center making the neighborhood a magnet for homeless individuals, and also asked about homeless people who might seek services but not want shelter.
 - One person pointed out the need for better coordination with the VA Hospital and veterans.
 - One person suggested a written Good Neighbor Agreement between the neighborhoods and the City; others said that such agreements have been hard to enforce in other places.

From: Sanchez, Suzanna A. <suzannasanchez@cabq.gov>
Sent: Tuesday, August 3, 2021 9:02 AM
To: Aranda, James M. <jmaranda@cabq.gov>; Jackie Fishman <jfishman@consensusplanning.com>
Cc: Patten-Quintana, Lorena <lpatten-quintana@cabq.gov>; Charlene Johnson <Johnson@consensusplanning.com>
Subject: RE: Public Notice Inquiry Sheet Submission

Good morning Jackie,

In order to get Parkland Hills on the list I went out 200 feet rather than the 100+ feet.

Association Name	First Name	Last Name	Email	Address Line 1	Address Line 2	City	State	Zip
Parkland Hills NA	Mary	Darling	mldarling56@yahoo.com	650 Monroe Street SE		Albuquerque	NM	87108
Parkland Hills NA	Robert	Leming	phnapresident@gmail.com	712 Truman Street SE		Albuquerque	NM	87108
District 6 Coalition of Neighborhood Associations	Mandy	Warr	mandy@theremedydspa.com	119 Vassar Drive SE		Albuquerque	NM	87106
District 6 Coalition of Neighborhood Associations	Patricia	Willson	info@willsonstudio.com	505 Dartmouth Drive SE		Albuquerque	NM	87106
South San Pedro NA	Zabdiel	Aldaz	zabdiel505@gmail.com	735 Alvarado SE		Albuquerque	NM	87108
South San Pedro NA	Khadjah	Bottom	khadjahasilivizionz.org	1200 Madeira SE	#130	Albuquerque	NM	87108

Thank you,

Suzie

Below is the list of property owners to notify for 5400 and 5006 Gibson.

Owner	Complete Owner Address
GIBSON MEDICAL CENTER LLC	6300 JEFFERSON ST NE ALBUQUERQUE NM 87109
LOS POLLOS HERMANOS 5211 GIBSON LLC	105 JEFFERSON ST NE ALBUQUERQUE NM 87108-1216
RAVANO ROBERT J TRUSTEE RAVANO RVT & RAVANO STEPHEN R & THOMPSON SUZANNE M	1460 CRESTVIEW DR SAN CARLOS CA 94070-4255
HAJJAR CHARLES C TRUSTEE SIESTA HILLS REALTY TRUST C/O HAJJAR MGT CO INC	30 ADAMS ST MILTON MA 02186
RABADI SHARIF A & SAMIA S TR STAR TRUST	11201 SAN ANTONIO DR NE ALBUQUERQUE NM 87122-1049
PALM DIANE & PADILLA DEBORAH	1104 W BAY AVE NEWPORT BEACH CA 92661-1017
U S GOVERNMENT 377 CEG/CERR	2050 WYOMING BLVD SE KIRTLAND AFB NM 87117-5663
HAJJAR CHARLES C TRUSTEE SIESTA HILLS REALTY TRUST C/O HAJJAR MGMT CO INC	30 ADAMS ST MILTON MA 02186-3412
PEARL SPRING CREEK LLC	5600 GIBSON BLVD SE ALBUQUERQUE NM 87108-4840
ALBUQUERQUE HOUSING AUTHORITY	1840 UNIVERSITY BLVD SE ALBUQUERQUE NM 87106-3919
BHC ENTERPRISES LC	5844 AVONMORE CIR HIGHLAND UT 84003-3442
MCDONALDS REAL ESTATE COMPANY	ONE MCDONALDS PLAZA OAK BROOK IL 60523-1928
B & B MERRITT REAL ESTATE LLC	750 N 17TH ST LAS CRUCES NM 88005-4153
USA C/O DEPT OF VET AFFAIRS MED CENT	1501 SAN PEDRO DR SE 138 ALBUQUERQUE NM 87108-5138
GIBSON MEDICAL CENTER LLC	6300 JEFFERSON ST NE ALBUQUERQUE NM 87109-3482
LOVELACE BIOMEDICAL RESEARCH INSTITUTE	2425 RIDGECREST DR SE ALBUQUERQUE NM 87108-5129

Public Notice Inquiry For:

Zoning Hearing Examiner

If you selected "Other" in the question above, please describe what you are seeking a Public Notice Inquiry for below:

Contact Name

Charlene Johnson

Telephone Number

5057649801

Email Address

johnson@consensusplanning.com

Company Name

Consensus Planning

Company Address

302 8th Street NW, 3rd Street and Lomas, Universe St. and Paseo del Norte Blvd.

City

Albuquerque

State

NM

ZIP

87102

Legal description of the subject site for this project:

TR A-1-A-1-A PLAT OF TR A-1-A-1-A LOVELACE HOSPITAL (BEING AREPL OF TR A-1-A-1 & A PORTION OF VACATED RIDGECREST DRIVESE) CONT 20.4232 AC

LOT 1 SWIFT ADD'N CONT 0.4226 AC

Acres: 0.4226

Physical address of subject site:

5006 Gibson Blvd. SE and 5400 Gibson Blvd SE

Subject site cross streets:

Gibson Boulevard and San Mateo Boulevard

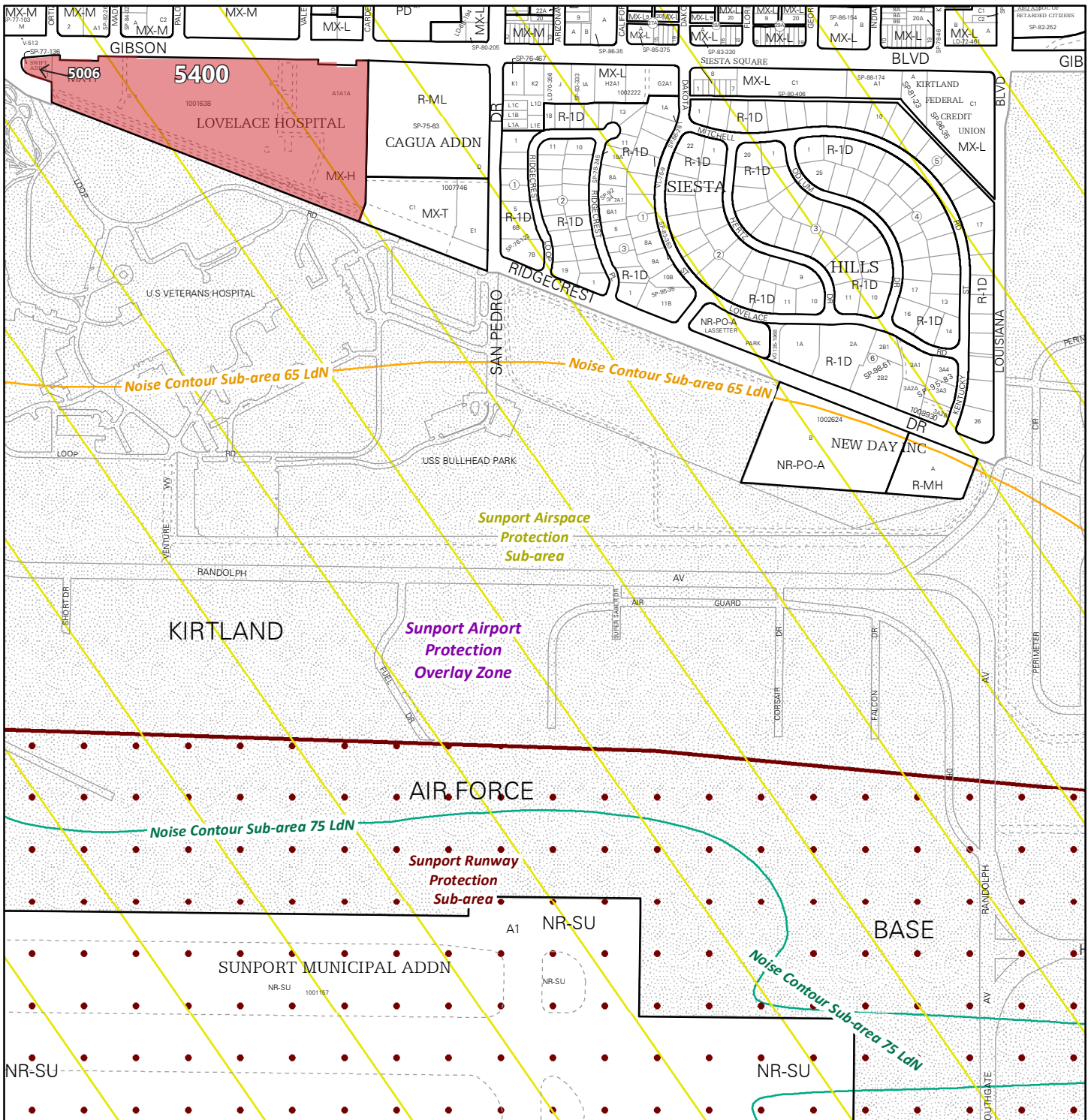
Other subject site identifiers:

Old Lovelace Hospital Site

This site is located on the following zone atlas page:

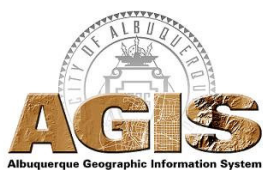
M-18-Z

<2. Letter to Property Owners-September.pdf>

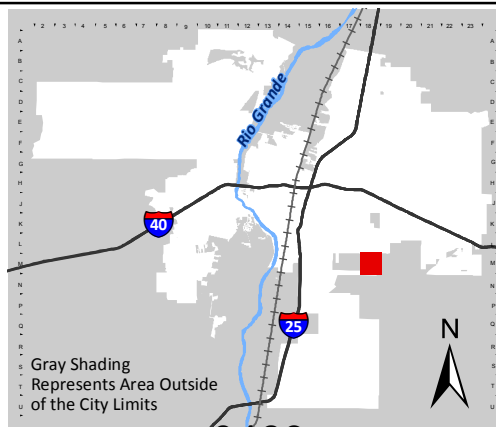


For more details about the Integrated Development Ordinance visit: <http://www.cabq.gov/planning/codes-policies-regulations/integrated-development-ordinance>

IDO Zone Atlas May 2018



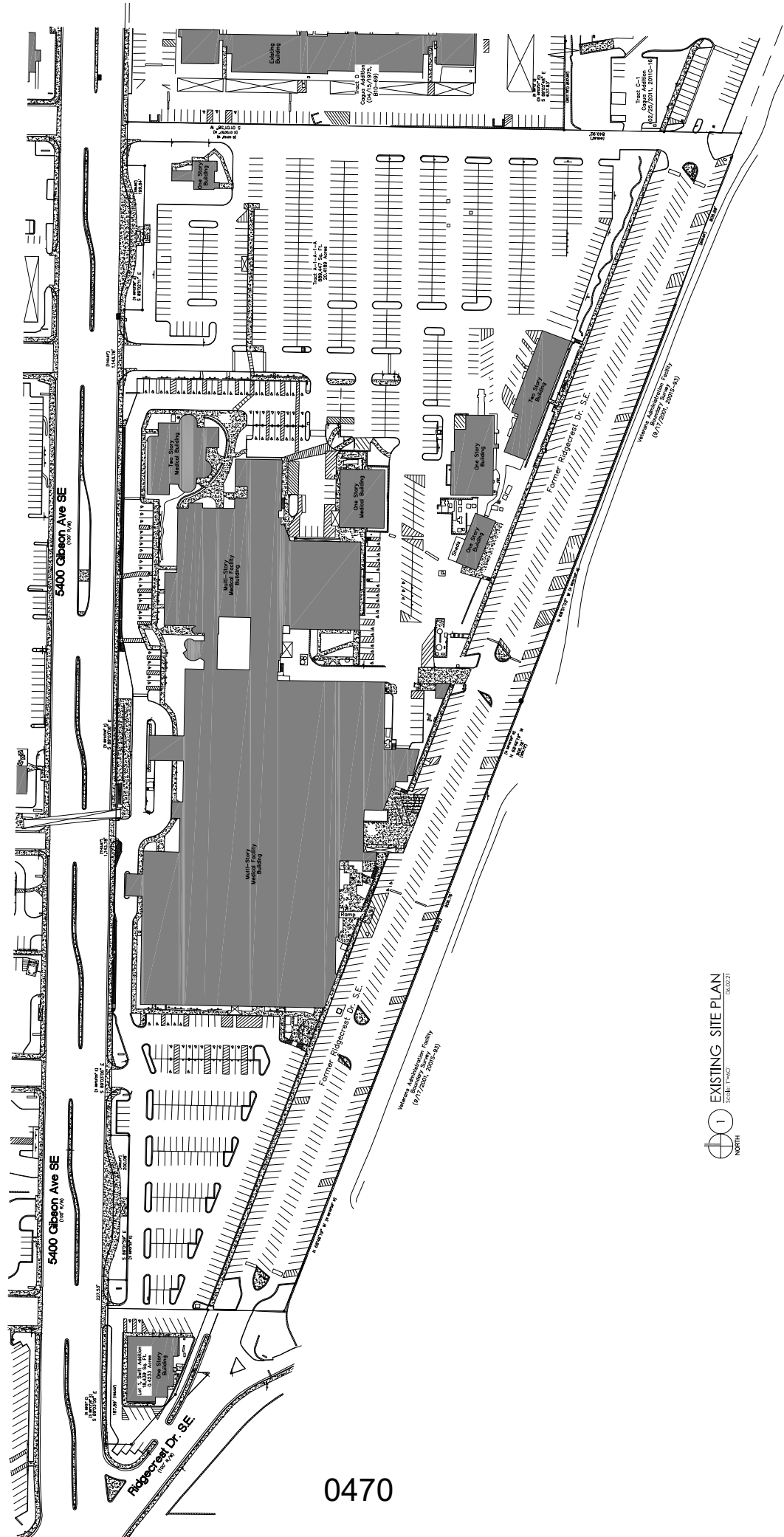
IDO Zoning information as of May 17, 2018
The Zone Districts and Overlay Zones
are established by the
Integrated Development Ordinance (IDO).



Zone Atlas Page:
M-18-Z

- Easement
- Escarpment
- Petroglyph National Monument
- Areas Outside of City Limits
- Airport Protection Overlay (APO) Zone
- Character Protection Overlay (CPO) Zone
- Historic Protection Overlay (HPO) Zone
- View Protection Overlay (VPO) Zone

0 250 500 1,000 Feet



0470

From: Jackie Fishman
To: info@willsonstudio.com; mandy@theremedyspa.com; zabdiel505@gmail.com; khadijahasili@vizionz.org; mldarling56@yahoo.com; phnapresident@gmail.com; SEAreaOrganizers@gmail.com; rbaca@bizjournals.com; kp-shna@centurylink.net; sp-wonderwoman@comcast.net; mrkious@aol.com; alyceice@gmail.com; landry54@msn.com
Cc: Charlene Johnson; Pierce, Carol M.; Huval, Lisa L.
Subject: Application notification - Gateway Center CU
Date: Tuesday, August 3, 2021 10:33:58 AM
Attachments: [Neighborhood Association Public Hearing Notification Packet.pdf](#)

Dear Neighbors,

This email is notification that Consensus Planning has submitted an application for a Conditional Primary Use for Overnight Shelter to the City of Albuquerque Zoning Hearing Examiner (ZHE) on behalf of the City of Albuquerque Department of Family and Community Services. The request is for the Gateway Center project, an overnight shelter proposed for a portion of the Gibson Health Hub. The property consists of two lots at 5006 and 5400 Gibson SE the site of the existing Gibson Medical Center. The property is zoned MX-H. The legal descriptions for the two sites are as follows:

- *Lot 1 Swift Addition containing 0.4226 acres (5006 Gibson Boulevard SE)*
- *Tract A-1-A-1-A Plat of Tract A-1-A-1-A Lovelace Hospital (being a replat of Tract A-1-A-1 & A portion of vacated Ridgcrest Drive SE) containing 20.4232 acres (5400 Gibson Boulevard SE)*

A facilitated meeting was held on June 22, 2021 to discuss the conditional use application. In response to input from that meeting, the City delayed the submittal of the Conditional Use application until the draft Operations Plan for the Gateway Center was ready. You can review the draft Operations Plan posted on the City's website at www.cabq.gov/gateway.

The hearing for this application is scheduled for **Tuesday, September 21, 2021** starting at **9:00 A.M.** At this time the hearing is scheduled to be heard on Zoom using the following link.

Join Zoom Meeting <https://cabq.zoom.us/j/7044490999>

Meeting ID: 704 449 0999

One tap mobile +16699006833,,7044490999# US (San Jose)

+12532158782,,7044490999# US (Tacoma)

Dial by your location

+1 669 900 6833 US (San Jose) +1 253 215 8782 US (Tacoma) +1 346 248 7799 US (Houston)

+1 646 558 8656 US (New York) +1 301 715 8592 US (Germantown)

+1 312 626 6799 US (Chicago)

Find your local number: <https://cabq.zoom.us/u/a2s7T1dnA>

Depending on public health orders, the hearing may also be scheduled in-person. Please call (505) 924-3894 for details and updates regarding an in-person hearing. If an in-person hearing is available, it will occur in the Plaza del Sol hearing Room at 600 Second Street NW, Basement Level.

For more information about the conditional use application and request, please contact Jackie Fishman, Principal at Consensus Planning, at fishman@consensusplanning.com or (505) 764-9801. You may also contact the ZHE Administrative Assistant, Suzie Sanchez at (505) 924-3894 or suzannasanchez@cabq.gov.

Please note: You may submit written comments to the Zoning Hearing Examiner up to 6 days before the hearing (5pm on the Wednesday before the hearing). Written comments received after that deadline will not be taken into consideration for this application.

Attached: Neighborhood Notification Packet

Jacqueline Fishman, AICP

Principal
Consensus Planning, Inc.
302 Eighth Street NW
Albuquerque, NM 87102
P: 505.764.9801

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ALBUQUERQUE NM 87122-1049

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LOS POLLOS HERMANOS 5211 GIBSON LLC
105 JEFFERSON ST NE
ALBUQUERQUE NM 87108-1216

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ALBUQUERQUE NM 87109-3866

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MCDONALDS REAL ESTATE COMPANY
ONE MCDONALDS PLAZA
OAK BROOK IL 60523-1928

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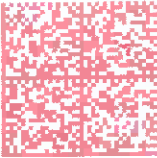


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PEARL SPRING CREEK LLC
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6300 JEFFERSON ST NE
ALBUQUERQUE NM 87109-3482

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MCGILVRAYS LLC
1410 SUNSET RD SW
ALBUQUERQUE NM 87105-4010

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USA C/O DEPT OF VET AFFAIRS MED CENT
1501 SAN PEDRO DR SE 138
ALBUQUERQUE NM 87108-5138

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ALBUQUERQUE HOUSING AUTHORITY
1840 UNIVERSITY BLVD SE
ALBUQUERQUE NM 87106-3919

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VAMANOS PEST LLC
5901J WYOMING BLVD NE NO. 311
ALBUQUERQUE NM 87109-3866

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LOVELACE BIOMEDICAL RESEARCH
INSTITUTE
2425 RIDGECREST DR SE
ALBUQUERQUE NM 87108-5129

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RAVANO STEPHEN R & THOMPSON SUZANNE
1460 CRESTVIEW DR
SAN CARLOS CA 94070-4255

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PALM DIANE & PADILLA DEBORAH
1104 W BAY AVE
NEWPORT BEACH CA 92661-1017

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REALTY TRUST C/O HAJJAR MGMT CO INC
30 ADAMS ST
MILTON MA 02186-3412

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NM 87102

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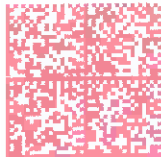


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HIGHLAND UT 84003-3442

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B & B MERRITT REAL ESTATE LLC
750 N 17TH ST
LAS CRUCES NM 88005-4153

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GIBSON MEDICAL CENTER LLC
6300 JEFFERSON ST NE
ALBUQUERQUE NM 87109

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HAJJAR CHARLES C TRUSTEE SIESTA HILLS
REALTY TRUST C/O HAJJAR MGT CO INC
30 ADAMS ST
MILTON MA 02186

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ALVARADO LINDA M
924 W COLFAX AVE SUITE 302
DENVER CO 80204-2469





August 3, 2021

Robert Lucero, Esq.,
Zoning Hearing Examiner
City of Albuquerque
600 Second Street NW
Albuquerque, New Mexico 87102

RE: Request for Conditional Primary Use for Overnight Shelter

Dear Mr. Lucero,

The purpose of this letter is to request approval of a Conditional Primary Use for an Overnight Shelter at the Gibson Health Hub on behalf of the City of Albuquerque Family and Community Services Department. The property is comprised of two parcels located at 5006 Gibson Boulevard SE and 5400 Gibson Boulevard. The legal descriptions for the two parcels are as follows:

- Lot 1 Swift Addition containing 0.4233 acres (5006 Gibson Boulevard SE)
- Tract A-1-A-1-A Plat of Tract A-1-A-1-A Lovelace Hospital (being a replat of Tract A-1-A-1 & A portion of vacated Ridgecrest Drive SE) containing 20.4189 acres (5400 Gibson Boulevard SE)

The Applicant proposes to renovate a portion of the existing 572,000 square foot facility for use as an overnight shelter for individuals experiencing homelessness. The subject property is zoned MX-H, which allows an Overnight Shelter as a Primary Conditional Use per the Integrated Development Ordinance (IDO), Table 4-2-1 Allowable Uses.



Subject Property.

Landscape Architecture
Urban Design
Planning Services

302 Eighth St. NW
Albuquerque, NM 87102

(505) 764-9801
Fax 842-5495
cp@consensusplanning.com
www.consensusplanning.com

PRINCIPALS

James K. Strozier, FAICP
Christopher J. Green, PLA,
ASLA, LEED AP
Jacqueline Fishman, AICP

EXISTING SITE CONDITIONS

The City acquired the 20.84-acre property encompassing the Gibson Health Hub in April 2021 (see attached *Boundary Survey and ALTA/NSPS Land Title Survey*). The Gibson Health Hub currently has ten tenants of whom seven provide medical or behavioral health services to the community. The IDO defines hospital as:

“An establishment that provides diagnosis and treatment, both surgical and nonsurgical, for patients who have any of a variety of medical conditions through an organized medical staff and permanent facilities that include inpatient beds, medical services, and continuous licensed professional nursing services. This definition includes any facility licensed by the State as a general, limited, or special hospital.”

The subject site is located within a highly developed area of Albuquerque along Gibson Boulevard (a designated Commuter Corridor), within an Area of Change and the Lovelace/VA Employment Center, as designated by the Comprehensive Plan. The subject site is also within the designated San Mateo Boulevard Major Transit Corridor area and a 1/2-mile west of the Louisiana Boulevard Major Transit Corridor area.

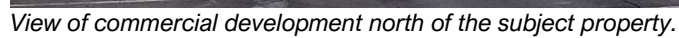


View of Gibson Health Hub along Gibson Boulevard.

Zoning and Land Use

Existing zoning and land use to the north of the subject site along Gibson Boulevard are commercial uses zoned MX-M and a limited amount of MX-L. To the east abutting the Gibson Health Hub’s large parking lot is multi-family use zoned R-ML and medical office uses zoned MX-T. To the south is federal land within the unincorporated area of Bernalillo County containing the VA Hospital Complex. To the west, south of Gibson Boulevard, is vacant land occupied by Kirtland Air Force Base and north of Gibson Boulevard is a mix of commercial retail and services, and light industrial uses.

EXISTING ZONING and LAND USE		
Direction	Zoning	Land Use
North	MX-M	Commercial retail
South	N/A	Hospital
East	RM-L, MX-T	Multi-family residential, office/medical
West	MX-M, N/A	Commercial retail and services, industrial, vacant





VA Hospital located to the south of the subject property.



The Pearl Apartments, located east of the subject property.



Lovelace Biomedical Research facility located southeast of the subject property.

PROJECT DESCRIPTION

The City's vision for the Gibson Health Hub is to provide services to the surrounding community that promote health, healing and recovery, including but not limited to primary care services, inpatient treatment, behavioral health services, and shelter and services for people without homes. The Applicant proposes to renovate a portion of the existing Gibson Health Hub for the Gateway Center, which will be comprised of an Engagement Center (an access point to services) and an Overnight Shelter (low barrier, trauma-informed shelter) for families, women, and men experiencing homelessness. Each client of the Gateway Center will be given the opportunity to develop an exit strategy, such as supportive housing, treatment, or another shelter.

The Gateway Center will also include medical respite, which falls under the permissive use of hospital in the MX-H zone, for persons who are too ill or frail to recover from a physical illness or injury on the streets but are not ill enough to be in a traditional hospital. Partnerships with existing tenants and other providers will help the Gibson Health Hub become a center for care and support for the unhoused population in Albuquerque.

COMMUNITY INPUT

In 2019, the City of Albuquerque held a special election in which a majority of voters approved \$14 million in General Obligation Bond funding to build a new facility that would provide temporary housing for people experiencing homelessness in Albuquerque. In 2020, after a community involvement process, the City purchased the property and buildings that together constitute the “Gibson Health Hub”.

Community Outreach

Community involvement in selecting a site for the Gateway Center has been paramount to the City. Throughout the process of site selection, the City sought input from unhoused and housed residents, neighbors, and business owners regarding the Gateway Center project.

Community Input Session and Online Survey

On December 14, 2018, the City of Albuquerque held a community input session where members of the greater Albuquerque community provided feedback on essential criteria and the potential locations for the Gateway Center. An online survey was open from November 2019 to January 2020 and received 3,512 responses.

Criteria themes that emerged from the session and the survey were:

- Low impact on neighborhoods
- Ease of access to services
- Ease of access to transportation
- Safety and security for all

The Gibson Medical Center was one of three sites identified that met the criteria.

Focus Groups with People Experiencing Homelessness

In January 2020, five focus groups were conducted with people experiencing homelessness. Participants identified key criteria for the Gateway Center, including safety and security, access to services, ease of access to transportation, retail services, and fast-food restaurants. Participants identified the Gibson Medical Center as a good location due to ease of access to medical care, bus routes, and access to amenities.

Neighborhood Community Meetings

Surrounding neighborhoods provided input to ensure the Gateway Center at the Gibson Health Hub successfully met the criteria that emerged from the community input session and online survey. Representatives from the Department of Family and Community Services, including Director Carol Pierce, have met with surrounding neighborhood associations and residents to listen to their concerns and ideas.



City Council Resolution R-21-141

On March 15, 2021, the Albuquerque City Council approved Resolution R-21-141, which required two community input sessions within 45 days and advancement towards a Good Neighbor Agreement by the City with area residents and businesses to be in place for so long as the Gateway Center operates at the Gibson Health Hub site. The City held the two community input meetings on June 10 and June 12, 2021. The first meeting was held online and the second was held at the Gibson Health Hub Educational Building. Input from the meetings is posted on the City's website at www.cabq.gov/gateway.

Conditional Use Pre-Application Facilitated Meeting

On June 22, 2021, the Department of Family and Community Services and the City's planning consultant, Consensus Planning, held a facilitated, online meeting with affected neighborhood associations to discuss the request for Conditional Primary Use for Overnight Shelter. The Facilitated Meeting Report is included as an attachment to the Conditional Use application. The table below lists each meeting the City held with the community by date and the total participants at each meeting.

COMMUNITY INPUT MEETINGS			
	Date	Community Group	Participants
1	4/19/21	Community Meeting at GMC	12
2	4/27/21	Parkland Hills Neighborhood Meeting	30
3	4/28/21	Trumbull Neighborhood Meeting	25
4	6/3/21	Elder Homestead Neighborhood Meeting	10
5	6/7/21	District 6 Community and Provider Meeting	10
6	6/10/21	Community Input Session Via Zoom	90
7	6/12/21	Community Input Session at GMC Education Building	77
8	6/15/21	Siesta Hills Neighborhood Meeting	40
9	6/22/21	Conditional Use Facilitated Meeting	85
10	7/26/21	District 6 Leadership on Operations Plan	23
		Total Reach	402

Videos and Newsletters

In addition to community meetings, the City used YouTube videos and bi-monthly emailed newsletters to distribute information about the Gateway Center project. The videos were viewed 595 times and newsletters were opened by 8,989 people.

YOUTUBE VIDEOS			
	Date	Video Name	Views
1	12/2/20	Will the proposed Gateway Center be one large 300 bed facility?	230
2	12/30/20	Will WEHC close with the Gateway Center opens?	84
3	2/8/21	FAQ's: Four causes of homelessness.	70
4	2/22/21	FAQ's: Winter Weather	37
5	2/24/21	FCS Conversations Webinar	104
6	3/25/21	Medical Respite Webinar 2	70
		Total Views	595

MAIL CHIMP NEWSLETTERS			
	Date	Title	Opened
1	11/12/20	November 2020 E-Newsletter	960
2	11/26/20	November 2020 E-Newsletter #2	1,102
3	12/9/20	December 2020 E-Newsletter #1	915
4	12/27/20	December 2020 E-Newsletter #2	855
5	1/8/21	January 2021 E-Newsletter #1	1,122
6	1/26/21	January 2021 E-Newsletter #2	904
7	2/11/21	February 2021 E-Newsletter #1	786
8	2/25/21	February 2021 E-Newsletter #2	803
9	3/12/21	March 2021 E-Newsletter #1	764
10	4/30/21	April Newsletter	778
		Total Opened	8,989

Future Community Input

Per City Council Resolution R-21-141, the City will create and implement a Good Neighbor Agreement that addresses the concerns of community members. The City is committed to communicate regularly with the surrounding neighbors and business owners as the Gateway Center Operations Plan is finalized and the Gateway Center becomes operational. The parameters of the Good Neighbor Agreement is provided in the draft Operations Plan, which is attached to this Conditional Use application.

CONDITIONAL USE CRITERIA

The IDO defines an Overnight Shelter as follows:

“A facility that provides sleeping accommodations for 6 or more persons for a period of less than 24 hours with no charge or a charge substantially less than market value; it may provide meals and social services. Any such facility open to clients between 10:00 P.M. and 7:00 A.M. is considered an overnight shelter.”

The following is an explanation of how the request meets the specific criteria for a Conditional Primary Use for Overnight Shelter:

CU CRITERION 6-6(A)(3)(A): It is consistent with the adopted ABC Comp Plan, as amended.

Applicant Response: The request for Conditional Primary Use for Overnight Shelter is consistent with and furthers the goals and policies of the ABC Comprehensive Plan in the following ways:

Goal 6.2 Multi-Modal System: Encourage walking, biking, and transit, especially at peak-hour commuting times, to enhance access and mobility for people of all ages and abilities.

Applicant Response: The proposed Gateway Center overnight shelter at the Gibson Health Hub furthers *Goal 6.2 Multi-Modal System* by placing it in an area with excellent multi-modal access, including transit services, major street network, and pedestrian and bicycle access and connections. The subject property is along Gibson Boulevard, an Urban Principal Arterial, and designated as a Commuter Corridor by the Comprehensive Plan. It is within the designated San Mateo Boulevard

Major Transit Corridor area and a 1/2-mile west of the Louisiana Boulevard Major Transit Corridor area.

Twelve ABQ Ride bus stops near the Gibson Health Hub are located on Gibson and San Mateo Boulevards, providing clients with convenient access to transit, which the focus group participants identified as an essential criterion for the Gateway Center location. The existing bus routes that run near the Gibson Health Hub are listed in the following table below.

CABQ RIDE BUS ROUTES		
Route	Days	Peak Frequency
San Mateo/Jefferson - 140	M-F	30 minutes
San Mateo – 141	M-Su	30 minutes
Crosstown Commuter - 96	M-F	40 minutes
Broadway-University-Gibson - 16	M-Su	45 minutes
Downtown-KAFB Limited - 217	M-F	45 minutes
Rio Bravo-Sunport-KAFB	M-F	65 minutes

It should be noted that the City Transit Department will be conducting a transit study to evaluate current transit route/bus systems and suggest modifications, as needed. Shuttle buses to transport clients to the Gateway Center from providers and designated hubs will be part of the evaluation.

There are sidewalks along San Mateo Boulevard, Gibson Boulevard, and Louisiana Boulevard in the vicinity of the subject property. Two trails run near or adjacent to the subject property providing bicycle and pedestrian access. The Gibson Trail terminates just west of the subject property and connects to the proposed paved Ridgecrest Drive Trail, which will run to the south of the subject property. A designated bike lane is proposed for Gibson Boulevard. The Gibson Pedestrian Bridge spans Gibson Boulevard, providing safe pedestrian and bicycle crossing.



Subject property with surrounding trails, bus stops, bus routes, and pedestrian access.



Gibson Health Hub and Gibson Pedestrian Bridge.

POLICY 6.2.7 Transit Network: *Prioritize transit travel and pedestrian safety, especially near transit stops and stations and intersections.*

Applicant Response: *Policy 6.2.7 Transit Network* is furthered by this request based on the numerous transit stops located near the site and the pedestrian bridge that provides safe access across Gibson Boulevard. Clients of the proposed overnight shelter will likely rely on public transit as their primary mode of transportation. Shuttle services for the Gateway Center will also be provided, transporting clients from provider organization locations and designated hubs.

In addition, the Department of Municipal Development (DMD) will be prioritizing public safety infrastructure in the areas closest to the Gateway Center to ensure that lighting, street, and sidewalk design emphasizes pedestrian safety. DMD is also conducting a speed study on Gibson Boulevard to assess current conditions and create interventions that ensure the property speed limit is set and enforced.

Goal 9.4 Homelessness: *Make homelessness rare, short-term, and non-recurring.*

Applicant Response: The Gateway Center overnight shelter will further *Goal 9.4 Homelessness* by being a critical component of the City's comprehensive approach to making homelessness rare, short-term, and non-recurring. The City estimates that there are at least 1,525 people in shelters or on the streets in Albuquerque each night, and at least 5,000 households experienced homelessness in 2020. The Gateway Center will address chronic homelessness in Albuquerque by providing safe, dignified emergency shelter within a central, developed area of Albuquerque.

In addition, clients will receive wraparound services that help them exit the overnight shelter into stable, permanent housing and other community resources. The Gateway Center overnight shelter will be open 24 hours, seven days a week to ensure that individuals in need can quickly access the shelter and services. Once in the shelter, clients will receive social services intended to find permanent solutions to homelessness, reducing recurrence for families and individuals.

POLICY 9.4.1: Best Practices: *Implement an appropriate and effective model to address chronic homelessness.*

Applicant Response: The Gateway Center overnight shelter furthers *Policy 9.4.1 Best Practices* by providing emergency shelter for those experiencing

homelessness and work with them to transition into permanent housing. The proposed Gateway Center overnight shelter will function as a "gateway" to end chronic homelessness through the use of three models to effectively transition unhoused community members into housing, including the Low Barrier Shelter Model, Wraparound Model, and Time-Limited Model.

The Low Barrier Shelter model aims to have as few barriers as possible to allow more people to access services and takes in people as they are. As part of the Low Barrier Model, the Gateway Shelter will use the Wraparound Model of providing services, which creates individualized plans to support the client with an entire team of professional and natural supporters led by the client. The Time-Limited Model aims to transition individuals into permanent housing as soon as Wraparound Teams and clients can execute it. Ideally, clients will transition out of the overnight shelter within 90-days. If clients need additional time, they will not be expelled from the Gateway Center. These three models will guide the Gateway Center operations and services.

POLICY 9.4.2 Services: *Provide expanded options for shelters and services for people experiencing temporary homelessness.*

Applicant Response: The proposed Gateway Center overnight shelter will further *Policy 9.4.2 Services* by expanding options for temporary shelter and services for the City's unhoused populations. Although there are many service providers in Albuquerque that serve the unhoused populations, the City does not currently have a centralized 24/7 center that can connect unhoused individuals to the support organizations they need, often creating a "gap" in services. By building strong partnerships with existing providers, the City's proposed Gateway Center can serve as a centralized center, allowing for a more efficient connection to essential services and reducing the potential gap in services. The Gateway Center will create a "sea change" for unhoused people in our community.

POLICY 9.4.3 Equitable Distribution: *Support a network of service points that are easily accessible by residents and workers, geographically distributed throughout the City and County, and proximate to transit.*

Applicant Response: Locating the proposed Gateway Center overnight shelter at the Gibson Health Hub furthers *Policy 9.4.3 Equitable Distribution* as reflected in comments from the individuals experiencing homelessness focus groups. The Gateway Center location is accessible to trusted nearby service providers in the International District and is located within the San Mateo Major Transit Corridor area. The proposed Gateway Center is the City's first step towards a dispersed shelter model that will add more shelters and supportive services in other locations within Albuquerque.

Goal 9.5 Vulnerable Populations: *Expand capacity to provide quality housing and services to vulnerable populations.*

Applicant Response: The proposed Gateway Center will expand the City's capacity to provide services and access to quality housing to vulnerable populations, thereby furthering *Goal 9.5 Vulnerable Populations*. The needs of the unhoused population in Albuquerque are increasing. Organizations that work with unhoused populations provide essential life-saving services, but it is not enough. The proposed Gateway Center will commit the City to providing the additional services needed for this

population and ensure they are able to transition to quality housing as they exit the Gateway Center.

POLICY 9.5.1 Quality Housing: *Ensure well maintained, safe transitional and permanent housing for the lowest income households that are most at risk of homelessness.*

Applicant Response: The proposed Gateway Center furthers *Policy 9.5.1 Quality Housing* by providing the first step to permanent housing for the most vulnerable in our community. The Time-Limited Model ensures that clients of the overnight shelter have secured permanent housing before they leave the shelter. Low-income clients will have Wraparound services, including case management and assistance securing financial support for housing expenses. The goal of the Gateway Center is to reduce the risk of homelessness by ensuring clients have the support to maintain stable, permanent housing.

POLICY 9.5.2 Transitional Services: *Encourage on-site transitional services with culturally competent service delivery that respects the dignity of individuals and families and fosters self-determination and self-sufficiency, including job training, financial education, and behavioral health assistance.*

Applicant Response: The services provided at the Gateway Center will support *Policy 9.5.2 Transitional Services* by providing Wraparound services for individuals and families. The individual leads the team-based, collaborative Wraparound approach to case management. The program is flexible, comprehensive, and can involve a number of organizations. The City will partner with existing community organizations and service providers specializing in delivering culturally competent services that will respect the individual and prepare individualized transition plans.

CU CRITERION 6-6(A)(3)(B): It complies with all applicable provisions of this IDO, including but not limited to any Use-specific Standards applicable to the use in Section 14-16-4-3; the DPM; other adopted City regulations; and any conditions specifically applied to development of the property in a prior permit or approval affecting the property, or there is a condition of approval that any Variances or Waivers needed to comply with any of these provisions must be approved or the Conditional Use Approval will be invalidated pursuant to Subsection (2)(c)2 above.

Applicant Response: The proposed overnight shelter is allowed under the MX-H zone as a Conditional Use. There are ongoing functions at the Gibson Health Hub that fall under hospital use, which is permissive under the MX-H zone. The proposed Gateway Center overnight shelter will comply with the Use-Specific Standards contained in Section 4-3-(C)(6) Overnight Shelter as follows:

4-3(C)(6) This use is prohibited within 1,500 feet in any direction of any other overnight shelter.

Applicant Response: The proposed Gateway Center overnight shelter at the Gibson Health Hub is not within 1,500 feet in any direction of another overnight shelter. The New Day Youth and Family Services operates an overnight shelter at 2820 Ridgecrest Drive SE, approximately 2,308 feet from the southeast corner of the Gibson Health Hub property whose shelter operations will occur hundreds of feet further into the site.

There are no other requirements per the DPM or other City regulations applicable to the overnight shelter operating at the Gibson Health Hub. Additionally, there is no condition of approval in a prior permit or approval that required a variance or waiver. The Applicant is not expanding the footprint of the facility; rather, the intent is to modify a portion of the floor plans to accommodate the future functions of the Gateway Center.

CU CRITERION 6-6(A)(3)(C): It will not create adverse impacts on adjacent properties, the surrounding neighborhood, or the larger community.

Applicant Response: By providing secure shelter and services for individuals living in vulnerable situations, the Gateway Center will positively impact the adjacent properties, surrounding neighborhoods, and the larger community that are currently dealing with the unhoused population. The City has been working diligently on the draft Operations Plan for the Gateway Center, which is attached to this application and posted on the City's website (www.cabq.gov/gateway) as of 7/3/2021. The draft Operations Plan addresses many of the community's concerns, including impacts on adjacent properties, surrounding neighborhoods, and the larger community, and is briefly summarized below:

- **Transportation** – A shuttle system will be in place to transport referred guests for intake and assessment as well as transport guests to their exit destination, with pick-up and drop-off points at the Gateway Center. The Transit Department is exploring several options, including expanding the frequency of service on the Route 16 line or extending nearby bus lines with more frequent services to the Gateway Center.
- **Operating hours** – The Gateway Center will be open 24 hours a day, 365 days a year. Initially, the Gateway Center will conduct intakes between 8:00 A.M. and 8:00 P.M. for most community partner referrals, but will conduct intakes 24 hours a day for referrals from hospitals, first responders, and law enforcement. The dining room will be open daily during breakfast, lunch, and dinner hours.
- **Secure entrance** – The Gateway Center will have a secured entrance that is staffed 24 hours a day, 7 days a week, to ensure only enrolled guests, staff, and volunteers enter the facility.
- **Physical design** – The Gateway Center will utilize Trauma-informed Design and Crime Prevention through Environmental Design (CPTED) design principles. The City's intent is to upgrade all building-mounted lighting and parking lot lighting prior to opening the Gateway Center. Appropriate fencing, landscaping, and other design features will be incorporated to ensure curb appeal and low visual impact.
- **Security** – Onsite professional security is currently provided at the Gibson Health Hub and will continue to be once the Gateway Center is open. In addition, safety team staff will include supervisors, case managers, peer supporters, and navigators that are all trained in de-escalation methods. Security systems will be established, including metal detection, fire alarm, an annunciator system, security cameras, and an alarm system. Clear signage

will be provided to service providers along with ramps for gurneys and wheelchairs.

- **Weapons** – Weapons will not be allowed at the Gateway Center.
- **Entry and Exit** – A team of intake officers and front desk staff will be stationed at the entrance, with only enrolled shelter guests, staff, program staff and volunteers, and registered partner agency staff and volunteers allowed to enter the facility. Personal visitors will not be allowed at the Gateway Center, except under limited conditions. The intent is to establish separate entrances for families, women, and men. There will be a 10:00 p.m. curfew policy, with limited exceptions.
- **Shelter capacity** – If the Gateway Center reaches capacity, single adults seeking shelter will be referred to the Westside Emergency Housing Center or other appropriate shelter options. Transportation will be provided, if needed. Emergency overflow for families will be established in the community or through the use of motel vouchers.
- **Critical Incident Response** – Procedures addressing threats and assaults to clients and staff will be established. Guests that threaten or assault another client or staff will be exited from the Gateway Center and will receive transportation to their exit destination. In addition, de-escalation procedures will be established, with staff receiving training in conflict resolution and de-escalation techniques. The procedures will address the appropriate use of the Albuquerque Police Department resources to resolve safety issues at the Gateway Center.
- **Trash removal** – The Solid Waste Department will clean and remove trash on a daily basis from surrounding areas, including sidewalks, bus stops, store fronts, and area parks.
- **Pedestrian safety** – Pedestrian crosswalks in the vicinity of the Gateway Center will be improved to promote use, ease, and safety of crossing roadways. Roadway medians will be improved to prevent jaywalking.
- **Encampments** - Encampments are expressly prohibited on the Gibson Health Hub property. The Family and Community Services public outreach team will monitor a ¼-mile radius for encampments on public and private property. The public outreach team will refer encampments on private property to the City's Code Enforcement Division and a notice for encampments on public property will be posted by the public outreach team on the same day the encampment is observed.
- **Good Neighbor Agreement** – The City intends to enter into a Good Neighbor Agreement with the Elder Homestead, Parkland Hills, Siesta Hills, South San Pedro, and Trumbull neighborhood associations. The following will be established through the Good Neighbor Agreement:
 - A phone number where residents can report any issues related to the Gateway Center.

- A community dispute resolution process.
- A Neighborhood Advisory Committee. The Agreement will set the membership of the Committee, which will include neighborhood representatives, City representatives from the organization(s) operating the Gateway Center, and current or former guests of the Gateway Center. The Committee will meet at least quarterly and will issue an annual survey to community members. The Committee will review and update as needed the Good Neighbor Agreement annually. The Neighborhood Advisory Committee will review baseline data and information over time to provide feedback on high impact strategies to keep community, staff, and clients safe.
- **Community Impact** - The City intends to explore options for supporting businesses in the vicinity of the Gateway Center, including the strategies identified in the Homeless Coordinating Council's Community Coordinated Framework on Homelessness.

This project will redevelop an underutilized property for the purpose of serving some of the most vulnerable members of the Albuquerque community. The Gibson Health Hub is an ideal location for the Gateway Center overnight shelter because of its size, location, ease of access, relative separation from existing residential development, and the services currently offered at the site. The Good Neighbor Agreement, developed in coordination with a Neighborhood Advisory Committee, will ensure that the City is aware of and remedies issues of concerns regarding the Gateway Center in a prompt manner. If approved, the Gateway Center shelter will further the City's stated policies and priorities of addressing the needs of the unhoused population in Albuquerque.

CU CRITERION 6-6(A)(3)(D): It will not create material adverse impacts on other land in the surrounding area through increases in traffic congestion, parking congestion, noise, or vibration without sufficient mitigation or civic or environmental benefits that outweigh the expected impacts.

Applicant Response: The Gateway Center shelter will not create material adverse impacts on surrounding properties from the issues stated in the above criterion. Development of the Gateway Center will focus on interior renovations. No increases in noise or vibrations will occur or create adverse impacts to the surrounding area.

People utilizing the services at the Gateway Center will primarily be relying on shuttles from pick-up locations and service provider facilities, and public bus transit, which will decrease the potential for traffic congestion. The site contains large parking areas, which are more than adequate to support the parking needs of the Gateway Center and the existing tenants.

CU CRITERION 6-6(A)(3)(E): On a project site with existing uses, it will not increase non-residential activity within 300 feet in any direction of a lot in any Residential zone district between the hours of 10:00 P.M. and 6:00 A.M.

Applicant Response: The overnight shelter use at the Gibson Health Hub will not increase non-residential activity within 300 feet of a residential zone district between the hours of 10:00 P.M. and 6:00 A.M. The overnight shelter use will be a relatively small portion of the Gibson Health Hub premise. The initial phase of the Gateway

Shelter is anticipated to limit intakes to between 8:00 A.M to 8:00 P.M. for most community partner referrals, but intakes will be conducted at all hours for referrals from hospitals, first responders, and law enforcement. The intake activity will be more than 500 feet from the R-ML zoned property to the east and buffered by a large parking lot. The closest apartment building within the R-ML site is setback approximately 67 feet east of its shared property line with the Gibson Health Hub. These existing physical conditions and separation between uses, and operating procedures will ensure the adjacent residential use will not impacted by the overnight shelter use at the Gibson Health Hub facility.



View of the Pearl Apartments facing west towards the east parking area of the subject property.

CU CRITERION 6-6(A)(3)(F): It will not negatively impact pedestrian or transit connectivity without appropriate mitigation.

Applicant Response: The Gateway Center overnight shelter will draw pedestrians, transit riders, shuttles, and vehicles to the site. Impacts on pedestrian and transit connectivity will be appropriately mitigated by various City departments through services and actions that include:

- Shuttle service to and from the site from designated pick-up sites and community partner organizations;
- Designated onsite pick-up and drop-off location;
- Evaluation and prioritization of improvements to sidewalks, pedestrian crossings, and medians in Gibson Boulevard and San Mateo by the Department of Municipal Development to ensure pedestrians, neighborhood residents, and visitors have a safe and comfortable walking experience in the area;
- Evaluation and potential modification to existing transit routes by the City Transit Department to accommodate a potential increase in ridership; and
- Conducting a speed study of Gibson Boulevard and taking appropriate measures as determined by the study.

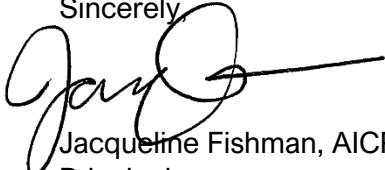
Based on the information presented in this letter, and on behalf of the City of Albuquerque Department of Family and Community Services, we respectfully



request that this application for Conditional Primary Use for Overnight Shelter be approved for the property known as the Gibson Health Hub located at 5400 Gibson Boulevard SE and 5006 Gibson Boulevard SE.

Thank you for your consideration.

Sincerely,



Jacqueline Fishman, AICP
Principal

Att: Gibson Health Hub - Boundary Survey and ALTA/NSPS Land Title Survey
Draft Operations Plan dated August 3, 2021
Letters of Support



Gateway Center at Gibson Health Hub Operations Plan

August 2, 2021

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Executive Summary

In April 2021, the City of Albuquerque acquired Gibson Health Hub, a 572,000 square foot facility located in the International District. The City's vision for Gibson Health Hub is to provide services to the surrounding community that promote health, healing and recovery, including but not limited to primary care services, inpatient treatment, behavioral health services, and shelter and services for people without homes.

One component of the Gibson Health Hub will be a Gateway Center, that will provide an Engagement Center and Shelter for families, women and men experiencing homelessness. This document serves as the operations plan for the Gateway Center at Gibson Health Hub.

This Operations Plan has been developed with extensive public input from neighborhood residents and service providers, including:

- Two community meetings (one virtual and one in-person) with over 60 people at each meeting and co-hosted by the District 6 Coalition
- A facilitated meeting that was held as part of the City's Conditional Use request
- Meetings with Parkland Hills, Trumbull, South San Pedro, Elder Homestead and Siesta Hill Neighborhood Associations
- Meetings with District 6 neighborhood members, service providers, and other local homeless service providers
- Domestic Violence Task Force
- Homeless Advisory Council meetings
- Homeless Coordinating Council (HCC) and HCC Homeless Services System Committee meetings

This Operations Plan has also been informed by the City of Albuquerque's own experience operating the Westside Emergency Housing Center and three "Wellness Motels" that have provided non-congregate shelter to vulnerable people during the COVID pandemic. The City has partnered with a local nonprofit to expand operations at the WEHC to a year-round shelter since April 2018, and began operating the Wellness Motels in June 2020. Finally, this operation plan has been informed by the expertise of the team at Barbara Poppe Associates; Ms. Poppe is the former director of the U.S. Interagency Council on Homelessness under President Obama.

The City recognizes that while a system of care to help people without homes already exists in our community, including an existing network of emergency shelters, there are not enough of the right type of shelter beds to meet the needs of our City. That is, while there is shelter capacity in Albuquerque on any given night, the available beds do not meet the needs of the community for a number of reasons, including the far travel distance to the WEHC. The Gateway Center will expand and strengthen that system of care. This plan addresses how services will be provided at the Gateway Center, while ensuring the safety and quality of life for guests and those who live and work in the surrounding neighborhoods.

Gateway Health Hub Vision

The Gibson Health Hub (GHH) will be an anchor facility to fill healthcare and social service gaps. The Gateway Center will comprise a portion of the GHH to provide shelter and services for our unhoused neighbors.

Clarifying Terms

The Gibson Health Hub (GHH) refers to the entire 572,000 square foot facility and will include both current and new health providers that serve the community for Gateway Center and non-Gateway Center populations. There are currently ten tenants at Gibson Health Hub (occupying approximately 140,000 square feet), of whom seven provide medical or behavioral health services. These tenants are AMG, Fresenius Medical Care, Haven Behavioral Health, NM Department of Vocational Rehabilitation, Optum, Turquoise Lodge, and Zia Community Health. In addition, new services will be added to Gibson Health Hub to address gaps in the community such as medical respite and medical sobering.

The Gateway Center will occupy a portion of the Gibson Health Hub facility to serve unhoused populations with temporary living areas and support services.

The Gateway Center will be comprised of an Engagement Center and Shelter. All portions of the Gibson Health Hub will incorporate design and operations that provide a safe and secure environment for different populations with different needs. The renovation design will use the advantages provided by the building size and layout of the facility so people with different needs can use separate entrances.

24/7 security operations will maintain safety for the wide variety of customers served at the facility.

Gateway Center Overview

Gateway Center Mission

The mission of the Gateway Center is to provide a safe and welcoming place that provides a low-barrier, trauma-informed shelter along with services to meet people where they are at, using a client-centered approach to support individual paths to housing stability.

Gateway Center Principles

The design of the Gateway Center will be trauma-informed to reinforce a safe and welcoming atmosphere and be ADA compliant.

Gateway Center programming will incorporate a trauma-informed approach that is equitable, culturally and spiritually accommodating, and supportive of LGBTQ+, people of color and people living with disabilities.

Through the Engagement Center, the Gateway Center will provide person-centered services that “meet people where they are at” in their journey to achieve housing and behavioral health stability. Intake to services will be staged according to client need and interest.

Programs will embody a person-centered approach to support connections to community, and attain housing and behavioral health stability so that homelessness is a brief, rare, one-time experience.

The Gateway Center will provide multiple opportunities for each participant to develop an exit strategy such as to supportive housing, treatment, or another shelter.

The Gateway Center will be a low barrier shelter that follows the Housing First principles to address immediate and long-term housing needs. As a low-barrier and inclusive shelter, the Gateway Center will accept unhoused people who may have complex histories, including a criminal history.

The Gateway Center will leverage existing services and develop partnerships for referrals into the community to foster collaboration and not competition. This includes creating space within the Gateway Center for other community partners to connect with guests and provide services, such as satellite office space.

The Gateway Center will operate with a harm reduction philosophy to address substance use disorders. Guests do not need to be clean and sober to access the Engagement Center or Shelter, but they cannot use drugs on site.

Components

The Gateway Center will have two major components: an Engagement Center and the Shelter.

- a. The Engagement Center will serve as a warm and welcoming access point to services, while also helping to meet the most immediate needs of unhoused people coming to the Shelter.
- b. The Shelter will provide low barrier, trauma-informed shelter that meets people where they are at with a client-centered approach to develop a plan to achieve housing stability.

Administration

The City will have an onsite Gateway Center Administrator to oversee operations. One onsite Community Outreach Coordinator and a Gateways Systems Analyst will report to the Administrator. The Gateway Center Administration will be responsible for overseeing all Gateway Center Operations. The Systems Analyst will be responsible for ensuring systems are place to implement and evaluate effective service delivery, including data systems. The Community Outreach Coordinator will be responsible for coordinating day-to-day operations with the organizations selected to operate the Gateway Center.

The City will issue an RFP to select one or more organizations to operate the Gateway Center Shelter and Engagement Center. The City will work with the organization(s) operating the Gateway Center to develop and implement a Data and Quality Assurance Plan.

Transportation

The Gateway Center will operate a shuttle system. The shuttle system will transport referred guests to the Gateway Center for intake and assessment. The shuttle system will provide transportation to individuals and families exiting the Gateway Center to their exit destination. There will be clear, safe and well designed, pick up and drop off points at Gateway Center

The Gateway Center will be a stop for the current Community Support Shuttle, operated by the Veterans Integration Center with funding from the City, which provides a regular route to services, primarily for people experiencing homelessness.

Case managers and other services staff will also transport guests as they apply for housing, employment, benefits and other resources.

Case managers and other service staff will help guests obtain transportation for which they are eligible, such as the City Sun Van, Medicaid reimbursed transportation, or transportation to school via APS Title I.

Some Gateway Center guests will also utilize public transportation. The City recognizes that the current bus route closest to Gibson Health Hub, Route 16, is not sufficient to meet the needs of Gateway Center guests and is committed to improving public transportation for guests. The Albuquerque Transit Department is exploring several options, including expanding the frequency of service on the Route 16 line or extending nearby bus lines with more frequent services to the Gateway Center, including the 140, 141 or 157. The City will decide by fall 2021 on which option to implement.

Gateway Center Shelter

Operating Hours

The Gateway Center Shelter will be open 24 hours a day, 365 days a year.

In Phase 1, the Gateway Center Shelter will conduct intakes daily between 8:00am – 8:00pm for most community partner referrals. However, the Gateway Center Shelter will conduct intakes 24 hours a day, 7 days a week for referrals from hospitals, first responders and law enforcement.

The dining room will be open daily, with anticipated hours in Phase 1 of 7:00am-9:00am; 11:00am-1:00pm; 5:00pm-7:00pm

In Phase 1, donations may be dropped off daily between 8:00am-5:00pm.

The Gateway Center Shelter's secure entrance will be staffed 24 hours a day, 7 days a week to ensure that only enrolled guests (shelter & engagement center), program, staff and volunteers and registered partner agency staff/volunteers enter the facility.

Referral to the Gateway Center Shelter

The Gateway Center Shelter will establish a referral process for community organizations, including other homeless assistance providers and other local service agencies.

The Engagement Center will make referrals to the Gateway Center Shelter.

If the Gateway Center Shelter is at capacity, single adults seeking shelter will be referred to the Westside Emergency Housing Center or other appropriate shelter options. Transportation will be provided if needed. Emergency overflow for families will be established in the community or through the use of motel vouchers.

The City will coordinate with outreach teams to engage people who are reluctant to access shelter or have high barriers to permanent housing, including those who are living in the International District. This will likely involve seeking to understand the reasons for their reluctance and, if possible, addressing those concerns.

Screening & Pre-Admission Process

Gateway Center staff will conduct an assessment that will address any immediate issues that need to be resolved, including physical/or medical issues that may require a triage to more appropriate options. This may include, but is not limited to, medical respite, detox or recovery programs.

Gateway Center service staff will conduct a general assessment with individuals and families to verify that the Gateway Center is an appropriate option. As part of this assessment, Gateway Center staff will assess whether the presenting individual or family can be safely diverted to a non-shelter alternative.

Diversion is a proven strategy that helps people experiencing a housing crisis quickly identify and access safe alternatives to emergency shelter. This is most effectively implemented at access points to shelter, and will be part of the screening process at the Gateway Center. Diversion may include creative problem-solving conversations; connecting with community resources and family supports; housing search and placement; and flexible financial assistance to help people resolve their immediate housing crisis. Gateway Center staff will have access to a flexible source of funds that can be used to provide short-term, one time help to divert people seeking shelter to other safe housing options if needed.

The City shall comply with all federal, state and local laws that may pertain to its admission policies.

Entry and Exit

A team of intake and front desk staff will be situated at the Gateway Center entry to greet new and existing guests as they enter the Gateway Center. Only enrolled Gateway Center Shelter guests, staff, program staff and volunteers, and registered partner agency staff and volunteers will be allowed to enter the Gateway Center shelter.

Personal visitors will not be allowed at the Gateway Center Shelter, except under limited conditions with express permission. Front desk and security staff will monitor entry into the building to ensure only guests, service providers and permitted individuals enter the Gateway Center shelter.

Residents can come and go as needed while following a curfew policy, with exceptions to include work and personal needs (e.g., family obligations) and unanticipated issues (e.g., transportation, family crisis/urgency, etc.). The City's goal is to establish separate entrances to the shelter for families, women and men.

Safety and Security at the Gateway Center

Physical Design

The Gateway Center will be designed to promote safety and security, using both Trauma Informed Design and Crime Prevention through Environmental Design (CPTED) design principles. Trauma-informed design principles, such as open, safe and inviting floor plan can support the physical and emotional safety of clients. The design includes and open, safe, and inviting floor plan. The City intends to establish separate entrances to the shelter for families, women, and men, if design permits.

CPTED is a set of design principles used to discourage crime and promote building security. These design principles, which the City has adopted in other projects, will be integrated into the design of the

Gateway Center and surrounding area. Key features of the design will include but not be limited to sufficient lighting, fencing, and technology (such as security cameras). These appropriate fencing, landscaping and other design features will be designed to ensure curb appeal and low visual impact.

The City, in partnership with contracted organization(s) operating the Gateway Center will establish appropriate security systems including: metal detection, fire system, an annunciator system, security cameras, and an alarm system. Clear signage will be provided to service providers along with ramps for gurneys and wheelchairs.

The Department of Municipal Development (DMD) completed an assessment of lighting attached to the building and the parking lot lights. Prior to opening, all exterior lighting will be upgraded.

Onsite Security Personnel

Gibson Health Hub currently has, and will continue to have, on site 24/7 professional security, provided by a private security firm and City personnel. Security staff will be adjusted to ensure that the appropriate ratio and balance is achieved. If the number of tenants increases, and the number of people served within Gibson Health Hub increase, the level of security provided will be adjusted accordingly.

Evaluation is an essential component of determining safety and security. Baseline data and continued data collection will be used to determine staffing needs specifically related to the critical incidence responses.

Gateway Center safety team staffing will include supervisors, case managers, peer supporters and navigators-all who are trained in de-escalation.

Weapons

Weapons will not be allowed at the Gateway Center. There will be a weapons policy & procedure to address weapons brought on site. Clients will be required to sign a form acknowledging that they are aware of the weapons policy & procedure.

Critical Incident Response

The City of Albuquerque will work with the organization(s) operating the Gateway Center to establish procedures for critical incident response. Threats and assaults to staff and clients will not be tolerated. A policy and procedure addressing threats and assaults to client and staff will be established. Any guest who threatens or assault staff or clients will be exited from the Gateway Center, and will receive transportation to their exit destination.

De-escalation procedures will be established. All Gateway Center staff will receive training in conflict resolution and de-escalation techniques. The procedures will address appropriate use of APD to resolve safety issues at the Gateway Center.

An emergency procedure, emergency evacuation plan, fire procedure, infectious disease and first aid policies and procedures will be established. There will be on-site crisis intervention and de-escalation teams.

Security and Safety in the Community Surrounding Gateway Center

The Role of Albuquerque Police Department (APD)

APD has a strong presence in southeast Albuquerque. The APD Substation located at Kathryn Avenue and Louisiana Boulevard is within close proximity to the Gateway Center. An expansion of this substation is underway and the next phase is planned for completion in 2022.

The City intends to establish a public safety district around the Gateway Center, which will be a concentrated, coordinated effort between City Departments that address public safety, including Albuquerque Community Safety, APD, Albuquerque Fire and Rescue, Family and Community Services, Parks and Recreation and Solid Waste. The purpose of the Public Safety District will be to better coordinate existing resources and efforts. Community policing will be included.

The APD Problem Response Team (PRT) dedicated to the Southeast Area Command will continue to work within the future Public Safety District to resolve issues in the area. Public Service Assistants will be assigned to the southeast area and serve alongside the Problem Response Team.

APD is dedicated to active community policing and conducting outreach to area residents, businesses, and organizations. Community policing efforts will continue as the Gateway Center is developed. APD will coordinate and communicate with the Nob Hill ECHO team and Street Connect to connect on issues related to Gateway Center in the area and Central Avenue corridor.

APD currently works closely with multiple city departments including Solid Waste, Parks and Recreation, Planning, and Family and Community Services to respond to identify issues which need responses and resources, including encampments and criminal trespassing. APD will work with the Department of Family and Community Services to conduct outreach to unsanctioned encampments and assist residents to seek shelter, resources and stable housing through the Gateway Center. APD will continue work with the Planning Department to investigate and clear out abandoned houses and ensure the safety of nearby residents and properties.

Role of Albuquerque Community Safety Department (ACS)

ACS will provide coordinated street outreach to meet the needs of people experiencing homelessness in the vicinity of the Gateway Center Shelter who are not using the shelter. ACS will participate in the efforts of the public safety district. ACS launches the fall of 2021, with staff that will serve all of Albuquerque. ACS will have in 2022, dedicated staff to serve the southeast area of Albuquerque including the International District.

The future site for the ACS Department is centered at Kathryn and San Mateo. This site is within minutes of the Gateway Center. All calls related to ACS are first qualified through 9-1-1. Upon assessment, appropriate calls for assistance will be sent to ACS.

ACS responders may transport people to the Gateway Center upon request. Transport will be voluntary only, people cannot be transported without consent.

Role of Albuquerque Fire and Rescue (AFR)

AFR has two stations within close proximity to the Gibson Health Hub and can respond to calls as designated through the 9-1-1 system. Station 11 on Kathryn Avenue SE is under one mile of distance. Station 5, located on Dallas NE is located within 2.5 miles to the Gateway Center. AFR will take service calls through 9-1-1 and provide basic medical screening to determine if transport to Gateway Center is appropriate. If so, AFR can provide transport. AFR will work closely with APD and ACS as members of the public safety district to evaluate and determine needs and resources for response systems.

Role of Solid Waste Department (SWD)

SWD will clean and remove trash daily from areas surrounding the Gateway Center. Priority locations include sidewalks, bus stops, store fronts and area parks. SWD also oversees median plantings and maintenance and will work with Department of Municipal Development for any improvements or changes needed to Gibson Blvd. medians. SWD will be a member of the public safety district team.

Role of Department of Municipal Development (DMD)

Investment in public safety infrastructure in the areas close to the Gibson Health Hub will be prioritized by DMD. DMD will review conditions that affect pedestrians, cyclists, and motorists to ensure that lighting, street and sidewalk design prioritize safety. DMD will conduct a road audit of Gibson Blvd and collector streets to assess the best design and potential interventions for ultimate street safety. DMD will conduct a speed study on Gibson Blvd. to assess current conditions and create interventions that ensure the proper speed limit is set and enforced.

As part of the road audit, DMD will address pedestrian safety which includes the examination of crash data within the vicinity. Resulting improvements could include pedestrian crosswalks to promote safe use and ease of crossing. Road medians will be designed to prevent jay-walking and promote the use of crosswalks for pedestrian safety.

Role of Transit Department

The Transit Department (Transit) will conduct a study evaluating current transit route/bus systems. Transit will consider modifications to routes connecting passengers to the Gateway Center and around Albuquerque to needed resources. Shuttle buses connecting clients to the Gateway Center from providers and designated locations will be part of the transit evaluation, but will not necessarily be operated by the City's Transit Department.

Encampments

Encampments will not be allowed on the Gibson Health Hub property. The Department of Family and Community Services (DFCS) public outreach team is responsible for addressing encampments on all public property. Two of the public outreach team members will be based at the Gibson Health Hub. The DFCS public outreach team will monitor the ¼-mile radius from Gibson Health Hub daily for encampments on public or private property.

For encampments on public property, DFCS will post notice the same day the encampment is observed. The DFCS outreach team will refer any encampments located on private property to the Planning Department Code Enforcement Division. ACS will provide outreach to encampment residents to assist them with obtaining safe, stable shelter arrangements.

Evaluation

The City of Albuquerque will conduct ongoing evaluation of safety and security of Gibson Health Hub and surrounding neighborhoods.

Accountability to & Coordination with Neighborhoods

Good Neighbor Agreement

The City of Albuquerque intends to enter into a Good Neighbor Agreement with the Elder Homestead, Parkland Hills, Siesta Hills, South San Pedro and Trumbull Neighborhood Associations. All five neighborhood associations are adjacent to or very close to the Gibson Health Hub facility.

The City intends for the Good Neighbor Agreement to establish:

- A phone number where residents can report any issues related to the Gateway Center.
- A community dispute resolution process
- A Neighborhood Advisory Committee. The Agreement will set the membership of the Committee, which will include neighborhood representatives, City representatives from the organization(s) operating the Gateway Center, and current or former guests of the Gateway Center.
- The Committee will meet at least quarterly and will issue an annual survey to community members.
- The Neighborhood Advisory Committee will review community baseline data and information to provide feedback on the safety of the community.

Community Impact

The University of New Mexico will conduct a study and issue a report that includes recommendations for emergency shelters programming, and infrastructure, and strategies to anticipate and address community concerns. The report will be issued by February 2022.

The City will explore options for supporting businesses in the vicinity of the Gateway Center, including the strategies identified in the Homeless Coordinating Council's Community Coordinated Framework on Homelessness.

August 3, 2021

Mr. Robert Lucero, ESQ.
Zoning Hearing Examiner
City of Albuquerque Planning Dept.
600 2nd Street
Albuquerque NM 87102

Re: Support for Gateway Center Conditional Use Permit

Mr. Lucero,

I am writing to express my full and enthusiastic support for the Gateway Center at the former Gibson Medical Center. As a public health worker tasked with addressing and mitigating the COVID-19 pandemic in our unhoused community, I have seen the tremendous need for support, shelter, and services for those experiencing homelessness. With passage of the Conditional Use Permit, the City of Albuquerque can continue its work to meet a critical need in our community.

During my time working with the guests at the Westside Emergency Housing Center, the efforts geared toward COVID mitigation and control also shown a light on the gaps in services for those experiencing homelessness. While shelters exist that help provide services to our unhoused community, there continues to be a need for our Albuquerque neighbors. By developing a new multi-bed shelter located within Albuquerque we can help ensure our community members have access to shelter as well as vitally needed support services. Existing community partners and FQHCs already help provided care to our unhoused community and are poised to continue their support and services at the Gateway Center.

According HUD, New Mexico had the highest increase in homelessness in the country in 2019 and homelessness has been increasing at an average annual rate of 7.7% in Albuquerque since 2013. These sobering statistics are all from before the COVID-19 pandemic began. Additionally, the 2020 HUD Point in Time Count found that "For the first time since the government began doing the annual count, the number of single adult living outside... exceeded the number of individuals living in shelters..." With the significant economic impact of the pandemic, the financial stresses our community may face will likely only worsen. Some organizations project that fallout from the pandemic may cause chronic homeless to rise by 49% across the nation. There is already a clear need for shelter and support services for our unhoused population and this need will likely only get more desperate due to the impacts of COVID-19.

Please consider the critical need our unhoused residents in Albuquerque have. I urge you to grant the Gateway Center Conditional Use Permit. Let us come together as a community, support the needs of those experiencing homelessness, and meet the ideals of our One Albuquerque goals.

Thank you for your time and consideration.

Sincerely,

Benjamin Fox

August 3, 2021

Robert Lucero, ESQ
Zoning Hearing Examiner
City of Albuquerque Planning Dept
600 2nd St NW
Albuquerque, NM 87102

Dear Mr. Lucero,

I am writing in support of the City's application to obtain Zoning for the upcoming Gateway Center that will focus on sheltering the people experiencing homelessness particularly in the International District.

You see Sir, I live and work in the International District. I've seen the increase and have felt the impact of the growing need to address this humanitarian problem for people experiencing homelessness. I've seen businesses close, homes vandalized, residents daily routines change, the love for an area they deemed safe.....diminish!! On the other hand, I've seen parks, sidewalks, parking lots and abandoned houses become shelter for those experiencing homelessness.

The Gateway Center is no way being promoted as the ultimate solution to homelessness, but what it does is offer hope for the hopeless. I was personally told that the Gateway Center would bring homeowners property value down, and my response was how does that work; to provide shelter for unsheltered families and individuals versus leaving them residing in cars and other unsafe domains!!

Mr. Lucero, I do not close my ears to the fears and concerns of those who stand in opposition to the opening of the Gateway Center, nor will I close my eyes to those in need of this proposed Center, with that being said, Sir, I respectfully ask that you grant the requested Zoning permit to the City for use of the Gateway Center.

Sincerely,


Khadijah Bottom

August 2, 2021

Mr. Robert Lucero, ESQ.
Zoning Hearing Examiner
City of Albuquerque Planning Dept.
600 2nd Street
Albuquerque NM 87102

Re: Support for Gateway Center Conditional Use Permit

Mr. Lucero,

I am writing to express our full support for the Gateway Center at the former Gibson Medical Center. With passage of the Conditional Use Permit, the City of Albuquerque can continue to meet a critical need in our community and develop an emergency shelter for unhoused residents of Albuquerque.

First Nations Community HealthSource is New Mexico's urban Indian health center and a Federally Qualified Health Center in Albuquerque. For more than 49 years, First Nations has provided an integrated and culturally competent health delivery system that addresses the physical, social, emotional and spiritual needs of our community members. Many of our members are in need of emergency shelter along with coordinated care and wrap-around services.

With the launch of the Gateway Center, we will collaborate extensively with the City to ensure community members have access to shelter as well as healthcare. The First Nations Community Healthsource (FNCH) Homeless Outreach Program (HOP) assists individuals and families who are homeless or at-risk of being homeless with healthcare and social support assistance by providing walk-in case management, and outreach services. We will work closely with the City of Albuquerque and partners at the Gateway Center to strengthen this work.

Please consider the critical need for our unhoused residents in our community and strong record of success and support of our agency and other service providers for the Gateway Center. We urge that you grant the Conditional Use Permit to the City of Albuquerque.

Sincerely,



Linda Son-Stone, Ed.D.
Chief Executive Officer

SIGN POSTING AGREEMENT

REQUIREMENTS

POSTING SIGNS ANNOUNCING PUBLIC HEARINGS

All persons making application to the City under the requirements and procedures established by the Integrated Development Ordinance are responsible for the posting and maintaining of one or more signs on the property which is subject to the application, as shown in Table 6-1-1. Vacations of public rights-of-way (if the way has been in use) also require signs. Waterproof signs are provided at the time of application for a \$10 fee per sign. If the application is mailed, you must still stop at the Development Services Front Counter to pick up the sign(s).

The applicant is responsible for ensuring that the signs remain posted throughout the 15-day period prior to any public meeting or hearing. Failure to maintain the signs during this entire period may be cause for deferral or denial of the application. Replacement signs for those lost or damaged are available from the Development Services Front Counter.

1. LOCATION

- A. The sign shall be conspicuously located. It shall be located within twenty feet of the public sidewalk (or edge of public street). Staff may indicate a specific location.
- B. The face of the sign shall be parallel to the street, and the bottom of the sign shall be at least two feet from the ground.
- C. No barrier shall prevent a person from coming within five feet of the sign to read it.

2. NUMBER

- A. One sign shall be posted on each paved street frontage. Signs may be required on unpaved street frontages.
- B. If the land does not abut a public street, then, in addition to a sign placed on the property, a sign shall be placed on and at the edge of the public right-of-way of the nearest paved City street. Such a sign must direct readers toward the subject property by an arrow and an indication of distance.

3. PHYSICAL POSTING

- A. A heavy stake with two crossbars or a full plywood backing works best to keep the sign in place, especially during high winds.
- B. Large headed nails or staples are best for attaching signs to a post or backing; the sign tears out less easily.

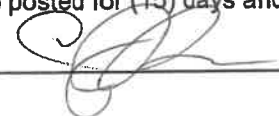
4. TIME

Signs must be posted from SEP 6, 2021 To OCT 21, 2021

5. REMOVAL

- A. The sign is not to be removed before the initial hearing on the request.
- B. The sign should be removed within five (5) days after the initial hearing.

I have read this sheet and discussed it with the Development Services Front Counter Staff. I understand (A) my obligation to keep the sign(s) posted for (15) days and (B) where the sign(s) are to be located. I am being given a copy of this sheet.



(Applicant or Agent)

August 31, 2021

(Date)

I issued 3 signs for this application, 8/31/21, Charles Meester

(Date) (Staff Member)

PROJECT NUMBER: PR-2021-005834/VA-2021-00316

CITY OF ALBUQUERQUE
PLANNING DEPARTMENT
INTER-OFFICE MEMORANDUM

September 1, 2021

To: Lorena Patten-Quintana, ZHE Planner

From: Matt Grush, P.E. Senior Engineer

Subject: COMMENTS FOR THE ZHE HEARING OF September 19, **2021**

The Transportation Development Review Services Section has reviewed the zone hearing requests, and submits the attached comments.

VA-2021-00316-00317

PR-2021-005834

Address: 5006 & 5400 Gibson Blvd SE

Transportation Review: **No objections**

Transportation has no objection to the request of conditional use to allow an overnight shelter.

City of Albuquerque ZHE – September 21, 2021

Agenda Item #6

VA-2021-00316

PR-2021-005834

City of Albuquerque Family and Community Services (Agent, Consensus Planning) requests a conditional use to allow an overnight shelter for Lot A1A1A/Lovelace Hospital, Lovelace Hospital, located at 5400 Gibson BLVD SE, zoned MX-H [Section 14-16-4-2]

Ownership: **Owner:** GIBSON MEDICAL CENTER LLC

Zone District/Purpose: MX-H/The purpose of the MX-H zone district is to provide for large-scale destination retail and high-intensity commercial, residential, light industrial, and institutional uses, as well as high-density residential uses, particularly along Transit Corridors and in Urban Centers. The MX-H zone district is intended to allow higher-density infill development in appropriate locations.

Allowable Use:

Mixed-use				Non-residential							Use-specific Standards	
MX-T	MX-L	MX-M	MX-H	NR-C	NR-BP	NR-LM	NR-GM	NR-SU	NR-PO			
									A	B		C
			C	C	C	C	C					
4-3(C)(6)												

Applicable Comp Plan Designation(s): Area of Change; Lovelace Employment Center

Applicable Overlay Zones: APO

Applicable Use-Specific Standard(s): 4- 3(C)(6) Overnight Shelter

This use is prohibited within 1,500 feet in any direction of any other overnight shelter.

Applicable Dimensional/Development Standards: n/a

Prior Approval Conditions: No prior special exceptions listed

Traffic Recommendations: No objection

Planning Recommendation: This matter should proceed to a public hearing where the Zoning Hearing Examiner will hear additional evidence and make a written decision pursuant to applicable provisions of Section 14-16-6-4.



City of Albuquerque ZHE – September 21, 2021

Agenda Item #7

VA-2021-00317

PR-2021-005834

City of Albuquerque Family and Community Services (Agent, Consensus Planning) requests a conditional use to allow an overnight shelter for Lot 1, Swift Addn, located at 5006 Gibson BLVD SE, zoned MX-H [Section 14-16-4-2]

Ownership: **Owner:** GIBSON MEDICAL CENTER LLC

Zone District/Purpose: MX-H/The purpose of the MX-H zone district is to provide for large-scale destination retail and high-intensity commercial, residential, light industrial, and institutional uses, as well as high-density residential uses, particularly along Transit Corridors and in Urban Centers. The MX-H zone district is intended to allow higher-density infill development in appropriate locations.

Allowable Use:

Mixed-use				Non-residential							Use-specific Standards	
MX-T	MX-L	MX-M	MX-H	NR-C	NR-BP	NR-LM	NR-GM	NR-SU	NR-PO			
									A	B		C
			C	C	C	C	C					
												4-3(C)(6)

Applicable Comp Plan Designation(s): Area of Change; Lovelace Employment Center, San Mateo Major Transit Corridor

Applicable Overlay Zones: APO

Applicable Use-Specific Standard(s): 4- 3(C)(6) Overnight Shelter

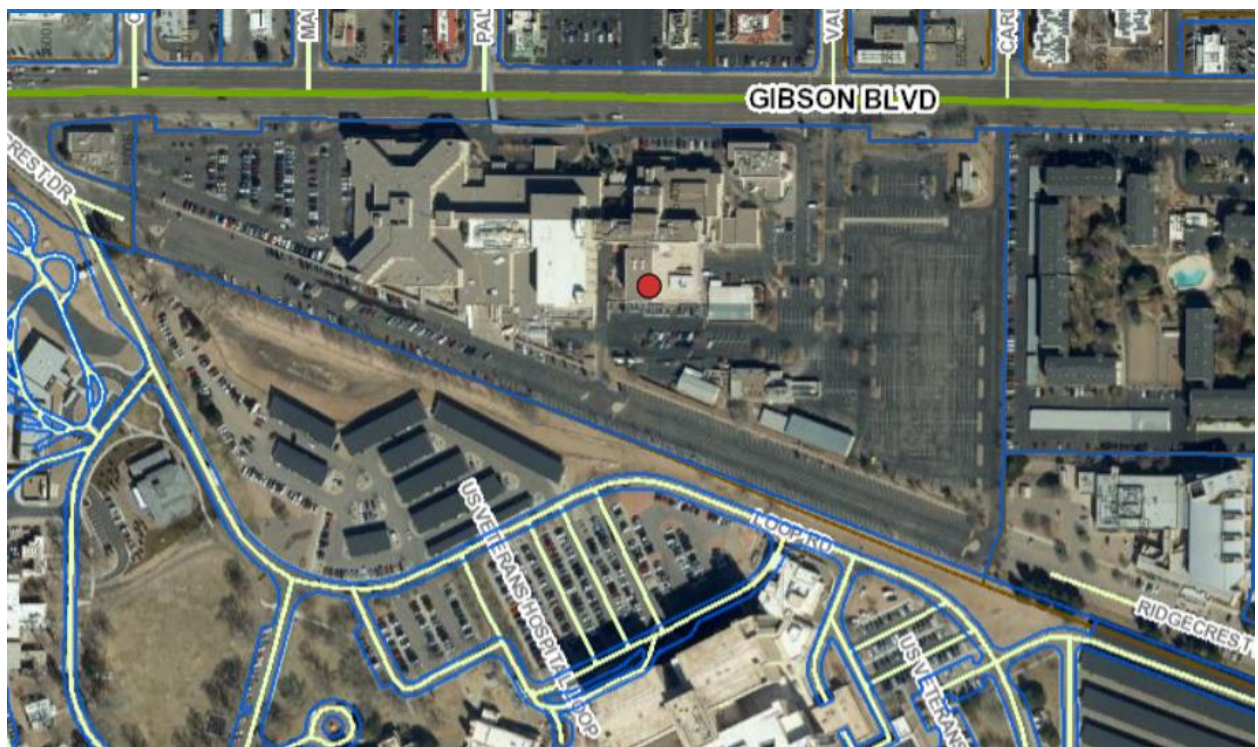
This use is prohibited within 1,500 feet in any direction of any other overnight shelter.

Applicable Dimensional/Development Standards: n/a

Prior Approval Conditions: No prior special exceptions listed

Traffic Recommendations: No objection

Planning Recommendation: This matter should proceed to a public hearing where the Zoning Hearing Examiner will hear additional evidence and make a written decision pursuant to applicable provisions of Section 14-16-6-4.



Sanchez, Suzanna A.

From: Briggs, Hartwell L.
Sent: Thursday, September 02, 2021 5:20 PM
To: Sanchez, Suzanna A.
Cc: Patten-Quintana, Lorena
Subject: RE: ZHE Application Notice for 5400 Gibson BLVD SE and 5006 Gibson BLVD SE

Follow Up Flag: Follow up
Flag Status: Completed

Hello Suzie,

I have no objection to the proposed variance.

Thanks, Hartwell



HARTWELL BRIGGS, RA

planning manager

o 505.244.7800

m 505.238.3110

abqsunport.com

From: Sanchez, Suzanna A.
Sent: Thursday, September 2, 2021 12:38 PM
To: Briggs, Hartwell L. <hbriggs@cabq.gov>
Cc: Patten-Quintana, Lorena <lpatten-quintana@cabq.gov>
Subject: ZHE Application Notice for 5400 Gibson BLVD SE and 5006 Gibson BLVD SE

Mr. Briggs,

Per the new Integrated Development Ordinance, (see citation below) the City is required to notify you of an application for a variance at the property located at 5400 Gibson and 5006 Gibson and I have attached the file for you to review. Please let me know if you have any questions.

6-4(I) REFERRALS TO COMMENTING AGENCIES

Following a determination that the application is complete, the Planning Director, ZEO, or any City staff designated to review applications in Table 6-1-1 shall refer applications for comment to the following departments or agencies, as noted below. Any comments received within 15 consecutive days after such a referral shall be considered with the application materials in any further review and decision-making procedures.

6-4(I)(3) Kirtland Air Force Base and City Aviation Department staff for applications that include development in the Kirtland Air Force Base Military Influence.

Agenda Item #28.

VA-2021-00316

PR-2021-005834

City of Albuquerque Family and Community Services (Agent, Consensus Planning) requests a conditional use to allow an overnight shelter for Lot A1A1A/Lovelace Hospital, Lovelace Hospital, located at 5400 Gibson BLVD SE, zoned MX-H [Section 14-16-4-2]

Agenda Item #29.

VA-2021-00317

PR-2021-005834

City of Albuquerque Family and Community Services (Agent, Consensus Planning) requests a conditional use to allow an overnight shelter for Lot 1, Swift Addn, located at 5006 Gibson BLVD SE, zoned MX-H [Section 14-16-4-2]

Thank you,

Suzie Sanchez



SUZIE SANCHEZ

zhe administrative assistant

o 505.924.3894

e suzannasanchez@cabq.gov

cabq.gov/planning

Sanchez, Suzanna A.

From: Jackie Fishman <fishman@consensusplanning.com>
Sent: Wednesday, August 04, 2021 5:33 PM
To: Patten-Quintana, Lorena; Sanchez, Suzanna A.
Subject: FW: Letter of Support
Attachments: Gibson Medical Hub Support.pdf

Good afternoon –

I'm forwarding another letter of support for the Gateway Center to be added to the project case file. Please confirm you received this.

Thanks!

Jacqueline Fishman, AICP

Principal
Consensus Planning, Inc.
302 Eighth Street NW
Albuquerque, NM 87102
P: 505.764.9801

From: enrique@bchealthcouncil.org <enrique@bchealthcouncil.org>
Sent: Wednesday, August 4, 2021 3:55 PM
To: 'Engelbrecht, Erin' <engelbrecht@cabq.gov>
Cc: 'Tracy McDaniel' <tmcdaniel@swwomenslaw.org>; Jackie Fishman <fishman@consensusplanning.com>; 'Segal, Myra J.' <msegal@cabq.gov>
Subject: RE: Letter of Support

Hello Everyone!

Here is our support letter. 😊

In Solidarity for Health Equity!



Enrique Cardiel, MPH

Executive Director | Health Equity Council

He/Him/His also Camarada

P: 505.246.1638

E: enrique@bchealthcouncil.org

Donate online to help keep our public health work thriving!

<https://secure.givelively.org/donate/bernalillo-county-community-health-council>

From: Engelbrecht, Erin <eengelbrecht@cabq.gov>

Sent: Friday, July 30, 2021 3:28 PM

To: enrique@bchealthcouncil.org

Cc: 'Tracy McDaniel' <tmcdaniel@swwomenslaw.org>; Jackie Fishman <fishman@consensusplanning.com>; Segal, Myra J. <msegal@cabq.gov>

Subject: RE: Letter of Support

Dear Enrique and Tracy,

Thank you very much, we really appreciate the support!

The Conditional Use Permit application will be submitted on August 3rd, but we have some more time to provide materials to the Hearing Officer.

If you can provide a letter to us by the end of next week, Friday August 6th, that would be beneficial. The letter should be addressed to the Hearing Officer, information below:

Mr. Robert Lucero, ESQ.
Zoning Hearing Examiner
City of Albuquerque Planning Dept.
600 2nd Street
Albuquerque NM 87102

You can sign and send as a PDF to those of us on this email including Jackie Fishman, the Consensus Planning manager and Myra Segal our Sr. Policy Advisor with Dept. of Family and Community Services. Ms. Fishman will send your letter of support to the Hearing Officer.

If you have any questions or if there is anything you need from us, please let us know. I am out of the office beginning next Thursday August 5th through August 13th, and Myra Segal from Dept. of Family and Community Services can assist you with this request too.

Hope you have a lovely weekend.

Best regards,

Erin



ERIN ENGELBRECHT MCRP, MPA

Office of Mayor Tim Keller

Assistant Chief of Staff

o 505.768.2641

m 505.218.0356

eeengelbrecht@cabq.gov

From: enrique@bchealthcouncil.org <enrique@bchealthcouncil.org>

Sent: Friday, July 30, 2021 3:14 PM

To: Engelbrecht, Erin <eeengelbrecht@cabq.gov>

Cc: 'Tracy McDaniel' <tmcdaniel@swwomenslaw.org>

Subject: RE: Letter of Support

External

Hello Erin!

When's the deadline? I'd be very happy to. Maybe my Board Chair would like to co-sign. 😊

In Solidarity for Health Equity!



Enrique Cardiel, MPH

Executive Director | Health Equity Council

He/Him/His also Camarada

P: 505.246.1638

E: enrique@bchealthcouncil.org

Donate online to help keep our public health work thriving!

<https://secure.givelively.org/donate/bernalillo-county-community-health-council>

From: Engelbrecht, Erin <eeengelbrecht@cabq.gov>

Sent: Thursday, July 29, 2021 2:21 PM

To: enrique@bchealthcouncil.org

Subject: Letter of Support

Hello Enrique,

I wanted to reach out to you to see if the Health Equity Council would provide a letter of support for the Gateway Center in regards to the application for the Conditional Use Permit.

There is no length requirement – it can be as long with as much information as you believe necessary. This should come from the HEC perspective of why the GWC is needed and our collaboration which will continue into the future.

Please let me know if you have questions and would like to discuss further.

Thank you,
Erin



ERIN ENGELBRECHT MCRP, MPA

Office of Mayor Tim Keller

Assistant Chief of Staff

O 505.768.2641

m 505.218.0356

eengelbrecht@cabq.gov

Letter of Support

Albuquerque's Gateway Center

Homelessness in Albuquerque was on a sharp rise just as the pandemic hit, reaching a 7 year high in 2019 according to the Albuquerque Point in Time Report. In a recent report from the U.S. Department of Housing and Urban Development (HUD), New Mexico's chronic homelessness numbers went up by 57.6% from 2019. The report also notes Albuquerque's homeless population rose by 15%.

With the ongoing pandemic and potential for continued increase in numbers of homeless individuals and families, there is an urgency to address the needs of the unhoused community. This and many other reasons lead us to enthusiastically support the Gibson Medical Hub, commonly called the Gateway Center.

Recommendations:

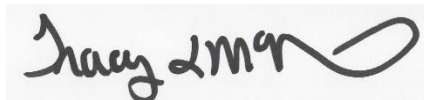
- Recommendation 1: Maximize the potential of the public facility while maintaining high quality services and reducing infrastructure costs.
- Create a centralized 24/7 universal triage center to support a diversity of services (or smaller centers).
- Recommendation 2: Create a plan utilizing equity tools- including centering leadership and input from unhoused community members directly impacted.
- Consider utilizing health equity tools (<https://humanimpact.org/hiprojects/ensuring-equity-in-covid-19-planning-response-and-recovery-decision-making/?strategy=all>) in plans, projects, policies and budgets.
- Recommendation 3: Continue to monitor, evaluate and make adjustments to the plan based on the needs of the community most impacted.
- Adapt services as evaluations assess most effective practices.

The Health Equity Council (HEC) looks at this as an opportunity to take advantage of the infrastructure of the Gibson Medical Hub building while still working for small centers across the City and County. While the building could likely serve a very large number of people, we support various small centers. We are also committed to supporting the project in ways we are able.

Very Respectfully,

A handwritten signature in black ink, appearing to read "Enrique Cardiel".

Enrique Cardiel, Executive Director

A handwritten signature in black ink, appearing to read "Tracy McDaniel".

Tracy McDaniel, Interim Board Chair

Sanchez, Suzanna A.

From: Jackie Fishman <fishman@consensusplanning.com>
Sent: Thursday, August 05, 2021 2:18 PM
To: Sanchez, Suzanna A.; Patten-Quintana, Lorena
Cc: Charlene Johnson
Subject: FW: Letter of Support- UNM-OCH
Attachments: Gateway Center LOS-UNM-OCH.pdf

Heres another support letter for the file.

Jacqueline Fishman, AICP

Principal
Consensus Planning, Inc.
302 Eighth Street NW
Albuquerque, NM 87102
P: 505.764.9801

From: Segal, Myra J. <msegal@cabq.gov>
Sent: Thursday, August 5, 2021 2:10 PM
To: Jackie Fishman <fishman@consensusplanning.com>; Manzano, Alicia <amanzano@cabq.gov>; Venice Ceballos <VCeballos@salud.unm.edu>; Daniella S Matthews-Trigg <dmatthewstrigg@salud.unm.edu>
Cc: Engelbrecht, Erin <eengelbrecht@cabq.gov>
Subject: Letter of Support- UNM-OCH

Hello Jackie,

Attached is a letter of support signed by the Vice Chancellor for Community Health, University of New Mexico Health Sciences Center.

Thank you for submitting to the hearing officer.

-Myra

MYRA SEGAL
Senior Policy Advisor
505.768.2843
cabq.gov/family

August 5, 2021

Mr. Robert Lucero, ESQ.
Zoning Hearing Examiner
City of Albuquerque Planning Dept.
600 2nd Street
Albuquerque NM 87102

Re: Support for Gateway Center Conditional Use Permit

Mr. Lucero,

I am writing to express our full support for the providing conditional use designation for having a homeless shelter at the former Gibson Medical Center. There is a significant unmet need for shelter in Albuquerque, especially for families.

The Pathways Program's team of Navigators provide housing navigation and case management services at the Wellness-2 Hotel. Since December 2020 the Pathways program has helped to get over 25 families into permanent housing. Through this work we have seen first-hand the complex needs of families and children experiencing homelessness. We cannot overstate the importance and impact of wraparound support services for families in need.

The Gateway Center at the Gibson Health Hub will provide a much-needed resource for New Mexico families who have extremely limited options for shelter and struggle to access resources and support.

Please consider the critical need for shelter for New Mexico's families. We urge you to approve the Conditional Use Permit to the City of Albuquerque.

Sincerely,



Arthur Kaufman, MD

Distinguished Professor of Family and Community Medicine

Vice Chancellor for Community Health, University of New Mexico Health Sciences Center

Sanchez, Suzanna A.

From: peter kalitsis <peterkalitsis@gmail.com>
Sent: Wednesday, September 01, 2021 11:03 AM
To: Sanchez, Suzanna A.
Cc: Melinda Frame; Vera Watson
Subject: Questions regarding hearing evidence and deadlines

Follow Up Flag: Follow up
Flag Status: Completed

Ms. Suzie Sanchez

I have some questions regarding Zoning hearing for September 21, 2021 regarding the following:

“OFFICIAL PUBLIC NOTIFICATION FORM
FOR MAILED OR ELECTRONIC MAIL NOTICE
CITY OF ALBUQUERQUE PLANNING DEPARTMENT”

Dated August 03, 2021

Subject Property Address 5006 and 5400 Gibson Blvd. SE

Summary of project/request Conditional use for an overnight shelter in a portion of the Gibson Health Hub Building. The overnight shelter is for the City's Gateway Project.

My questions are as follows:

1. Does the application package info that was sent to the neighborhood associations which is 10 pages and includes maps on the last page include all of the information that was submitted for the zoning hearing including all evidence submitted at that time?
2. If it is not, how can we obtain information submitted and copies of other evidence submitted to date?
3. There is an evidence submittal deadline of September 15. I want to clarify my understanding of the steps that will occur.
 - a. Evidence submitted goes to the planning department for review and recommendations to the Zoning Hearing Examiner.
 - b. If the evidence is not submitted until the evidence submittal deadline, will it be reviewed by the planning department with recommendations to ZHE? I want to see if I am misunderstanding this deadline.
 - c. When is the latest that evidence can be submitted so it can be reviewed with recommendations?
4. When all the evidence is submitted by September 15th, how can we obtain a copy of this prior to the Hearing Date?
5. I was reading the statement “If you wish to appear in-person in the hearing room, please contact the ZHE Administrative Assistant at 505-924-3894 or suzannasanchez@cabq.gov no later than 7 days prior to the scheduled hearing for updated information.”
 - a. I want to confirm that this meeting will be occurring on zoom.
 - b. Additionally, I want to find out the deadline in signing up to speak by an individual and by a neighborhood association is.

I appreciate your assistance in helping me to navigate these procedures.

Sincerely,
Peter S. Kalitsis,
Cell - 505-463-4356

Sanchez, Suzanna A.

From: Rob Leming <phnapresident@gmail.com>
Sent: Tuesday, August 10, 2021 6:26 PM
To: Planning Department; Wolfley, Jolene; Aranda, James M.; Griego, Robert E.
Cc: Sanchez, Suzanna A.; Aguilar Jr., Esteban A.
Subject: Request Rejection Of Conditional Use Permit Application for Overnight Shelter at 5400 Gibson Blvd SE and 5006 Gibson Blvd SE
Attachments: PHNA_Letter to Planning Dept.pdf; 1 PREAPP FACIL MTG COURTESY.pdf; 2 OFFICE NEIGHBOR COORDINATOR PARKLAND INCLUSION.docx; 3 CONSENSUS PARKLAND INCLUDED.pdf; 3A Addresses exhibit._PARKLAND INCLUDED.pdf; 4 APPLIC NOTIF GATEWAY 8 3 21 PORT(1).pdf; Neighborhood Association Public Hearing Notification Packet aug 3 21.pdf

Follow Up Flag: Follow up
Flag Status: Completed

Good day Mr. Williams and staff,

Please see the attached letter and references from the Parkland Hills Neighborhood Association regarding our request to reject the Conditional Use Permit Application for an overnight shelter at 5400 Gibson SE and 5600 Gibson SE. Your consideration and response is greatly appreciated. Thank you.

Best,

Rob Leming

--

Rob Leming

President

Parkland Hills Neighborhood Association

505-750-7672

To: Jacqueline Fishman AICP, Principal, Consensus Planning, Inc,
Office of Neighborhood Coordinator

Re: Correction of information in email letter and Neighborhood Meeting Request for Conditional Use for overnight Shelter at 5400 Gibson Blvd. SE, Albuquerque, New Mexico.

Dear Jacqueline,

Our Neighborhood Association, Parkland Hills, would like to clarify informational errors on the Official Notification Form for the above project, and on the letter sent to some of the adjacent neighborhood associations.

On the Neighborhood Meeting Request Form under “Neighborhood Association” there is a listing of two neighborhood associations, though only one is in fact a neighborhood association. It lists South San Pedro Neighborhood Association, which is one of the adjacent neighborhood associations. The letter also addresses the District 6 Coalition of Neighborhood Associations as the second neighborhood association. To be very clear – **District 6 Coalition is not a Neighborhood Association** and therefore does not qualify as an official party to be notified. It is generous to include the District 6 Coalition to be more inclusive, but our Neighborhood Association, Parkland Hills, along with others, **have been excluded**. Parkland Hills is indeed adjacent to the Gibson Medical Center property line, and so too is Siesta Hills. Elder Homestead and Southeast Heights are in very close proximity as well.

Our Neighborhood Association is additionally writing to clarify the Pre-Submittal Neighborhood Meeting requirement as outlined in the IDO (and referenced at the bottom of this letter). Our neighborhood association was sent an email from you, Jacqueline Fishman AICP, Principal, Consensus Planning, Inc, which stated the following:

“The Office of Neighborhood Coordination provided contacts for the two affected neighborhood associations, District 6 and South San Pedro. Given the City has reached out to other neighborhood associations in the area, we are providing this notice and invite to the facilitated meeting as a courtesy to Elder Homestead, Parkland Hills, Trumbull Village, and Siesta Hills neighborhood associations.”

We would like to clarify the statement “invite to the facilitated meeting as a courtesy”: per IDO Section 14-16-6-4(C), a meeting with the neighborhood is to be offered, and that the applicant “shall offer at least 1 meeting to all Neighborhood Associations whose boundaries include or are adjacent to the subject before filing the application” (see IDO paragraph at the bottom of this letter for reference). The above statement stating this notice is a “courtesy” is in error, unless there are plans to do future invite to Parkland Hills, as our neighborhood is adjacent to the property.

As section 6-4(C)(3) states a “meeting request shall be sent to the 2 representatives on file at the ONC for all applicable Neighborhood Associations via Certified Mail, return receipt requested, or via email” (see IDO paragraph at the bottom of this letter), we request that the Office of Neighborhood Coordination corrects Consensus Planning’s error.

Our Neighborhood Association would appreciate a follow-up to verify that this misinformation has been corrected.

Pertinent Sections Extracted from the IDO:

Part 14-16-6: Administration and Enforcement

6-4: General Procedures

6-4(C) PRE-SUBMITTAL NEIGHBORHOOD MEETING

6-4(C)(1) For those types of applications where Table 6-1-1 requires a meeting with a neighborhood to be offered, the applicant shall offer at least 1 meeting to all Neighborhood Associations whose boundaries include or are adjacent to the

subject before filing the application. In such cases, project applications will not be accepted until a pre-submittal neighborhood meeting has been held, or the requirements for a reasonable attempt in Subsection (3) below have been met.

6-4(C)(3) A meeting request shall be sent to the 2 representatives on file at the ONC for all applicable Neighborhood Associations via Certified Mail, return receipt requested, or via email. Either method constitutes a reasonable attempt to notify a Neighborhood Association of a meeting request. The requirements of Subsection 14-16-6-4(K)(7) (Documentation of Good Faith Effort Required) also apply.

If you have any questions, please do not hesitate to contact us.

Sincerely,

Robert Leming (digital signature), President Parkland Hills Neighborhood Association

Email: phnapresident@gmail.com

Address: 1609 Ridgecrest Drive. SE, Albuquerque, NM 87108



peter kalitsis <peterkalitsis@gmail.com>

Fwd: Preapplication Facilitated Meeting - Gateway Center

Melinda Frame <phna.homelessness.solutions@gmail.com>
To: peter kalitsis <peterkalitsis@gmail.com>

Wed, Jun 9, 2021 at 3:59 PM

----- Forwarded message -----

From: **Rob Leming** <phnapresident@gmail.com>
Date: Tue, Jun 8, 2021 at 6:13 PM
Subject: Fwd: Preapplication Facilitated Meeting - Gateway Center
To: Janet Simon <phnacomunications@gmail.com>, Melinda Frame <phna.homelessness.solutions@gmail.com>

----- Forwarded message -----

From: **Jessie Lawrence** <jessie@lawrencemeetingresources.com>
Date: Mon, Jun 7, 2021 at 4:59 PM
Subject: Re: Preapplication Facilitated Meeting - Gateway Center
To: Jackie Fishman <fishman@consensusplanning.com>
CC: info@willsonstudio.com <info@willsonstudio.com>, mandy@theremedyspa.com <mandy@theremedyspa.com>, zabdiel505@gmail.com <zabdiel505@gmail.com>, khadijahasili@vizionz.org <khadijahasili@vizionz.org>, sp-wonderwoman@comcast.net <sp-wonderwoman@comcast.net>, mrkious@aol.com <mrkious@aol.com>, mldarling56@yahoo.com <mldarling56@yahoo.com>, phnapresident@gmail.com <phnapresident@gmail.com>, alyceice@gmail.com <alyceice@gmail.com>, landry54@msn.com <landry54@msn.com>, rbaca@bizjournals.com <rbaca@bizjournals.com>, kp-shna@centurylink.net <kp-shna@centurylink.net>, Chaplin, Doug H. <dchaplin@cabq.gov>, Cooper, Kinsey <kcooper@cabq.gov>, Tyson Hummell <thummell@cabq.gov>, Shannon Triplett <striplett@cabq.gov>, Charlene Johnson <Johnson@consensusplanning.com>, Jocelyn M Torres <nmlawyer09@comcast.net>

Thank you for sharing this information, Jackie. I wanted to reiterate that if any neighbors have any questions for me as the facilitator about this meeting, please feel free to contact me in advance by email or phone. I also welcome input about discussion topics for the meeting. That will help me make this the most useful and productive meeting possible.

Also, if there are other neighbors that may be interested in this meeting, please help share the information. As a reminder, attendees need to use the link below to register, and they'll then receive the meeting connection information.

I'll look forward to our meeting on June 22.

Jessie Lawrence
CABQ Contract Meeting Facilitator

On Jun 4, 2021, at 3:13 PM, Jackie Fishman <fishman@consensusplanning.com> wrote:

Dear Neighbors,

This email is notification that Consensus Planning is preparing an application for a Conditional use for Overnight Shelter to the City of Albuquerque Zoning Hearing Examiner (ZHE) on behalf of the City of Albuquerque Department of Family and Community Services. The property is located at [5400 Gibson SE](#) the site of the existing Gibson Medical Center. The property is zoned MX-H and is legally described as *Tract A-1-A-1-A Plat of Tract A-1-A-1-A Lovelace Hospital (being a replat of Tract A-1-A-1 & a*

portion of vacated Ridgecrest Drive SE) containing 20.4232 Acres. The request is for the City's Gateway Center project, an overnight shelter proposed for a portion of the Gibson Medical Center. Please see the attached neighborhood notification packet.

The City is providing an opportunity to discuss this request at a scheduled facilitated meeting on Tuesday, June 22, 2021 from 5:30 – 7:30 PM via Zoom using the following link:

<https://bit.ly/2SVSXxt>

The Office of Neighborhood Coordination provided contacts for the two affected neighborhood associations, District 6 and South San Pedro. Given the City has reached out to other neighborhood associations in the area, we are providing this notice and invite to the facilitated meeting as a courtesy to Elder Homestead, Parkland Hills, Trumbull Village, and Siesta Hills neighborhood associations.

Jessie Lawrence, an independent contractor with the City's ADR program, will be facilitating the meeting. Attendees must use the link above to register for the meeting prior to attending. Attendees need to enter name and email address to receive the meeting connection link. For more information about the facilitated meeting, please contact Jessie Lawrence at jessie@lawrencemeetingresources.com or (505) 603-4351.

For more information about the conditional use application and request, please contact Jackie Fishman, Principal at Consensus Planning, at fishman@consensusplanning.com or (505) 764-9801.

Thanks,

Jacqueline Fishman, AICP

Principal

Consensus Planning, Inc.

302 Eighth Street NW

Albuquerque, NM 87102

P: 505.764.9801

<Neighborhood Notification Packet - 5400 Gibson Blvd SE.pdf>

--

Rob Leming

President

Parkland Hills Neighborhood Association

505-750-7672

**OFFICIAL PUBLIC NOTIFICATION FORM
FOR MAILED OR ELECTRONIC MAIL NOTICE
CITY OF ALBUQUERQUE PLANNING DEPARTMENT**



PART I - PROCESS

Use [Table 6-1-1](#) in the Integrated Development Ordinance (IDO) to answer the following:

Application Type: Conditional-use for Overnight Shelter

Decision-making Body: Zoning Hearing Examiner (ZHE)

Pre-Application meeting required: ☒ Yes ☐ No

Neighborhood meeting required: ☒ Yes ☒ No

Mailed Notice required: ☒ Yes ☐ No

Electronic Mail required: ☒ Yes ☐ No

Is this a Site Plan Application: ☐ Yes ☒ No **Note: if yes, see second page**

PART II – DETAILS OF REQUEST

Address of property listed in application: 5006 and 5400 Gibson Blvd. SE

Name of property owner: City of Albuquerque

Name of applicant: City of Albuquerque, Family and Community Services

Date, time, and place of public meeting or hearing, if applicable: Tuesday, September 21, 2021 at 9:00 AM via Zoom or In-Person.

Contact Suzie Sanchez at suzannasanchez@cabq.gov or (505) 924-3894 for more information.

Address, phone number, or website for additional information:

Jacqueline Fishman, Principal, Consensus Planning, Inc. (505) 764-9801, fishman@consensusplanning.com

PART III - ATTACHMENTS REQUIRED WITH THIS NOTICE

☒ Zone Atlas page indicating subject property.

☒ Drawings, elevations, or other illustrations of this request.

☒ Summary of pre-submittal neighborhood meeting, if applicable.

☒ Summary of request, including explanations of deviations, variances, or waivers.

IMPORTANT: PUBLIC NOTICE MUST BE MADE IN A TIMELY MANNER PURSUANT TO [SUBSECTION 14-16-6-4\(K\)](#) OF THE INTEGRATED DEVELOPMENT ORDINANCE (IDO). PROOF OF NOTICE WITH ALL REQUIRED ATTACHMENTS MUST BE PRESENTED UPON APPLICATION.

I certify that the information I have included here and sent in the required notice was complete, true, and accurate to the extent of my knowledge.

(Applicant signature)

August 03, 2021

(Date)

Note: Providing incomplete information may require re-sending public notice. Providing false or misleading information is a violation of the IDO pursuant to IDO Subsection 14-16-6-9(B)(3) and may lead to a denial of your application.

**OFFICIAL PUBLIC NOTIFICATION FORM
FOR MAILED OR ELECTRONIC MAIL NOTICE
CITY OF ALBUQUERQUE PLANNING DEPARTMENT**



PART IV – ATTACHMENTS REQUIRED FOR SITE PLAN APPLICATIONS ONLY

Provide a site plan that shows, at a minimum, the following:

N/A a. Location of proposed buildings and landscape areas.

N/A b. Access and circulation for vehicles and pedestrians.

N/A c. Maximum height of any proposed structures, with building elevations.

N/A d. For residential development: Maximum number of proposed dwelling units.

N/A e. For non-residential development:

- ☐ Total gross floor area of proposed project.
- ☐ Gross floor area for each proposed use.

[Note: Items with an asterisk (*) are required.]

**Public Notice of a Proposed Project in the City of Albuquerque
for Decisions Requiring a Meeting or Hearing
Mailed/Emailed to a Neighborhood Association**

Date of Notice*: August 03, 2021

This notice of an application for a proposed project is provided as required by Integrated Development Ordinance (IDO) [Subsection 14-16-6-4\(K\) Public Notice](#) to:

Neighborhood Association (NA)*: See attached neighborhood contacts from Office of Neighborhood Coordination.

Name of NA Representative*: See attached neighborhood contacts from Office of Neighborhood Coordination.

Email Address* or Mailing Address* of NA Representative¹: See attached from Office of Neighborhood Coordination

Information Required by [IDO Subsection 14-16-6-4\(K\)\(1\)\(a\)](#)

1. Subject Property Address* 5006 and 5400 Gibson Blvd. SE
Location Description Southwest corner of Gibson Boulevard and San Mateo Boulevard.
2. Property Owner* City of Albuquerque
3. Agent/Applicant* *[if applicable]* Consensus Planning, Inc.
4. Application(s) Type* per IDO [Table 6-1-1](#) *[mark all that apply]*

☒ Conditional Use Approval

- ☐ Permit _____ (Carport or Wall/Fence – Major)
- ☐ Site Plan
- ☐ Subdivision _____ (Minor or Major)
- ☐ Vacation _____ (Easement/Private Way or Public Right-of-way)
- ☐ Variance
- ☐ Waiver
- ☐ Other: _____

Summary of project/request²*:

Conditional use for an overnight shelter in a portion of the Gibson Health Hub Building.

The overnight shelter is for the City's Gateway Project.

¹ Pursuant to [IDO Subsection 14-16-6-4\(K\)\(5\)\(a\)](#), email is sufficient if on file with the Office of Neighborhood Coordination. If no email address is on file for a particular NA representative, notice must be mailed to the mailing address on file for that representative.

² Attach additional information, as needed to explain the project/request.

[Note: Items with an asterisk (*) are required.]

5. This application will be decided at a public meeting or hearing by*:

☒ Zoning Hearing Examiner (ZHE)

☐ Development Review Board (DRB)

☐ Landmarks Commission (LC)

☐ Environmental Planning Commission (EPC)

Date/Time*: Tuesday, September 21, 2021 at 9:00 AM via Zoom or In-Person.

Location*³: Please call (505) 924-3894 for details and updated regarding an in person hearing.

Agenda/meeting materials: <http://www.cabq.gov/planning/boards-commissions>

To contact staff, email devhelp@cabq.gov or call the Planning Department at 505-924-3860.

6. Where more information about the project can be found*⁴:

Please contact Jacqueline Fishman at fishman@consensusplanning.com or 505-764-9801.

Information on the Gateway Center Project is also available the City's website at cabq.gov/gateway.

Information Required for Mail/Email Notice by [IDO Subsection 6-4\(K\)\(1\)\(b\)](#):

1. Zone Atlas Page(s)*⁵ M-18-Z
2. Architectural drawings, elevations of the proposed building(s) or other illustrations of the proposed application, as relevant*: Attached to notice or provided via website noted above
3. The following exceptions to IDO standards have been requested for this project*:

☐ Deviation(s)

☐ Variance(s)

☐ Waiver(s)

Explanation*:

None requested.

4. A Pre-submittal Neighborhood Meeting was required by [Table 6-1-1](#): ☒ Yes ☐ No

Summary of the Pre-submittal Neighborhood Meeting, if one occurred:

A facilitated meeting occurred on June 22, 2021. Please see attached Facilitated Meeting Report Summary.

³ Physical address or Zoom link

⁴ Address (mailing or email), phone number, or website to be provided by the applicant

⁵ Available online here: <http://data.cabq.gov/business/zoneatlas/>

[Note: Items with an asterisk (*) are required.]

5. **For Site Plan Applications only***, attach site plan showing, at a minimum:

N/A a. Location of proposed buildings and landscape areas.*

N/A b. Access and circulation for vehicles and pedestrians.*

N/A c. Maximum height of any proposed structures, with building elevations.*

N/A d. **For residential development***: Maximum number of proposed dwelling units.

N/A e. **For non-residential development***:

☐ Total gross floor area of proposed project.

☐ Gross floor area for each proposed use.

Additional Information [Optional]:

From the IDO Zoning Map⁶:

1. Area of Property [typically in acres] 20.4 acres
 2. IDO Zone District Mixed-use High Intensity (MX-H)
 3. Overlay Zone(s) [if applicable] Airport Protection Overlay Zone (APO)
 4. Center or Corridor Area [if applicable] Center: Lovelace/VA Employment Center
- Current Land Use(s) [vacant, if none] Institutional / Medical

NOTE: Pursuant to [IDO Subsection 14-16-6-4\(L\)](#), property owners within 330 feet and Neighborhood Associations within 660 feet may request a post-submittal facilitated meeting. If requested at least 15 calendar days before the public meeting/hearing date noted above, the facilitated meeting will be required. To request a facilitated meeting regarding this project, contact the Planning Department at devhelp@cabq.gov or 505-924-3955.

Useful Links

Integrated Development Ordinance (IDO):

<https://ido.abc-zone.com/>

IDO Interactive Map

<https://tinyurl.com/IDOzoningmap>

Cc: Elder Homestead Neighborhood Association [Other Neighborhood Associations, if any]
Parkland Hills Neighborhood Association
Trumbull Village Association
Siesta Hills Neighborhood Association

⁶ Available here: <https://tinyurl.com/idozoningmap>

**CITY OF ALBUQUERQUE
LAND USE FACILITATION PROGRAM
PROJECT MEETING REPORT**

Project Number: N/A – Pre-Application Meeting
Property Description: 5400 & 5006 Gibson SE; Tract A-1-A-1-A Plat of Tract A-1-A-1-A Lovelace Hospital (being a replat of Tract A-1-A-1 & a portion of vacated Ridgecrest Drive SE), containing 20.4232 Acres
Date Submitted: June 24, 2021
Submitted by: Jessie Lawrence and Jocelyn Torres
Meeting Date and Time: June 22, 2021, 5:30 PM
Meeting Location: Online via Zoom
Facilitator: Jessie Lawrence
Co-facilitator: Jocelyn Torres

Parties:

- **Applicant:**
 - City of Albuquerque Department of Family and Community Services
- **Agent:**
 - Consensus Planning
- **Affected Neighborhood Associations (per City of Albuquerque notification requirements):**
 - District 6 Coalition of Neighborhood Associations
 - South San Pedro NA

Background/Meeting Summary:

Applicant requests Zoning Hearing Examiner approval of a conditional use to allow an overnight shelter in a portion of the Gibson Medical Center at 5400 Gibson Blvd. SE, part of the Gateway Center at the Gibson Health Hub (referred to as the Gateway Center throughout this report). This was a pre-application meeting.

At the meeting, participants expressed a number of concerns about the planned project, and also expressed frustration and a lack of trust with the planning, process, and communication so far. Some participants said that they did not want the Gateway Center in this area or that this center should serve only the local area, and other areas of the city should have to support a greater share of the homeless services. Others said that they needed more information and discussed the need for more data, the complete operations plan in writing, information in writing about the number of people to be served, and information about the planned providers. Others expressed concerns about crime, security, bathrooms, pedestrian traffic, and vehicular traffic. Others requested more information about how individuals would transition out of the Gateway Center and where the transitional housing would come from. Others expressed concern about the Gateway Center being a magnet drawing homeless people to the community, and also asked about homeless people who might seek services but not want shelter. One person pointed out the need to work with the VA Hospital and veterans, and one person suggested a written Good Neighbor Agreement between the neighborhoods and the City.

City staff answered questions and responded to the concerns during the meeting. See Meeting Specifics and the Zoom Chat Appendix for a summary of all of the questions and comments discussed.

As follow-up items, the applicant and agent agreed to share the slide presentation, to provide information about the locations of the 19 public restrooms throughout the community, and to look into the question about what would happen with the conditional use if other tenants wanted to add overnight uses. They also said that the operations plan would be ready before the planned August 17 ZHE hearing, and the conditional use request materials would be sent to the neighborhood associations when they are submitted.

Outcomes:

- **Areas of Agreement:**
 - None noted among all meeting participants.
- **Unresolved Issues and Concerns:**
 - Several participants discussed frustration and a lack of trust in the City, in particular because of the lack of written plans and commitments and changing information about who the Gateway Center would serve.
 - Some participants said that they did not want the Gateway Center in this area or that this center should serve only the local area, and other areas of the city should have to support a greater share of the homeless services.
 - Some participants said there should be more data and information shared with the local residents in writing, including the operations plan, before a conditional use request is submitted.
 - Concerns discussed about the operations of the Gateway Center included:
 - Crime
 - Security and adequate police service
 - Public defecation and the number of available public restrooms
 - Pedestrian traffic
 - Vehicular traffic
 - Some participants asked about the available transitional housing and suggested that there is not enough for the Gateway Center's plans, and noted that there needs to be planning for a limited time of services and a transition out of homelessness.
 - Some participants expressed concerns about the Gateway Center making the neighborhood a magnet for homeless individuals, and also asked about homeless people who might seek services but not want shelter.
 - One person pointed out the need for better coordination with the VA Hospital and veterans.
 - One person suggested a written Good Neighbor Agreement between the neighborhoods and the City; others said that such agreements have been hard to enforce in other places.

From: Sanchez, Suzanna A. <suzannasanchez@cabq.gov>
Sent: Tuesday, August 3, 2021 9:02 AM
To: Aranda, James M. <jmaranda@cabq.gov>; Jackie Fishman <fishman@consensusplanning.com>
Cc: Patten-Quintana, Lorena <lpatten-quintana@cabq.gov>; Charlene Johnson <Johnson@consensusplanning.com>
Subject: RE: Public Notice Inquiry Sheet Submission

Good morning Jackie,

In order to get Parkland Hills on the list I went out 200 feet rather than the 100+ feet.

Association Name	First Name	Last Name	Email	Address Line 1	Address Line 2	City	State	Zip
Parkland Hills NA	Mary	Darling	mldarling56@yahoo.com	650 Monroe Street SE		Albuquerque	NM	87108
Parkland Hills NA	Robert	Leming	phnapresident@gmail.com	712 Truman Street SE		Albuquerque	NM	87108
District 6 Coalition of Neighborhood Associations	Mandy	Warr	mandy@theremedydyspa.com	119 Vassar Drive SE		Albuquerque	NM	87106
District 6 Coalition of Neighborhood Associations	Patricia	Willson	info@willsonstudio.com	505 Dartmouth Drive SE		Albuquerque	NM	87106
South San Pedro NA	Zabdiel	Aldaz	zabdiel505@gmail.com	735 Alvarado SE		Albuquerque	NM	87108
South San Pedro NA	Khadjah	Bottom	khadjahasilivizionz.org	1200 Madeira SE	#130	Albuquerque	NM	87108

Thank you,

Suzie

Below is the list of property owners to notify for 5400 and 5006 Gibson.

Owner	Complete Owner Address
GIBSON MEDICAL CENTER LLC	6300 JEFFERSON ST NE ALBUQUERQUE NM 87109
LOS POLLOS HERMANOS 5211 GIBSON LLC	105 JEFFERSON ST NE ALBUQUERQUE NM 87108-1216
RAVANO ROBERT J TRUSTEE RAVANO RVT & RAVANO STEPHEN R & THOMPSON SUZANNE M	1460 CRESTVIEW DR SAN CARLOS CA 94070-4255
HAJJAR CHARLES C TRUSTEE SIESTA HILLS REALTY TRUST C/O HAJJAR MGT CO INC	30 ADAMS ST MILTON MA 02186
RABADI SHARIF A & SAMIA S TR STAR TRUST	11201 SAN ANTONIO DR NE ALBUQUERQUE NM 87122-1049
PALM DIANE & PADILLA DEBORAH	1104 W BAY AVE NEWPORT BEACH CA 92661-1017
U S GOVERNMENT 377 CEG/CERR	2050 WYOMING BLVD SE KIRTLAND AFB NM 87117-5663
HAJJAR CHARLES C TRUSTEE SIESTA HILLS REALTY TRUST C/O HAJJAR MGMT CO INC	30 ADAMS ST MILTON MA 02186-3412
PEARL SPRING CREEK LLC	5600 GIBSON BLVD SE ALBUQUERQUE NM 87108-4840
ALBUQUERQUE HOUSING AUTHORITY	1840 UNIVERSITY BLVD SE ALBUQUERQUE NM 87106-3919
BHC ENTERPRISES LC	5844 AVONMORE CIR HIGHLAND UT 84003-3442
MCDONALDS REAL ESTATE COMPANY	ONE MCDONALDS PLAZA OAK BROOK IL 60523-1928
B & B MERRITT REAL ESTATE LLC	750 N 17TH ST LAS CRUCES NM 88005-4153
USA C/O DEPT OF VET AFFAIRS MED CENT	1501 SAN PEDRO DR SE 138 ALBUQUERQUE NM 87108-5138
GIBSON MEDICAL CENTER LLC	6300 JEFFERSON ST NE ALBUQUERQUE NM 87109-3482
LOVELACE BIOMEDICAL RESEARCH INSTITUTE	2425 RIDGECREST DR SE ALBUQUERQUE NM 87108-5129

Public Notice Inquiry For:

Zoning Hearing Examiner

If you selected "Other" in the question above, please describe what you are seeking a Public Notice Inquiry for below:

Contact Name

Charlene Johnson

Telephone Number

5057649801

Email Address

johnson@consensusplanning.com

Company Name

Consensus Planning

Company Address

302 8th Street NW, 3rd Street and Lomas, Universe St. and Paseo del Norte Blvd.

City

Albuquerque

State

NM

ZIP

87102

Legal description of the subject site for this project:

TR A-1-A-1-A PLAT OF TR A-1-A-1-A LOVELACE HOSPITAL (BEING AREPL OF TR A-1-A-1 & A PORTION OF VACATED RIDGECREST DRIVESE) CONT 20.4232 AC

LOT 1 SWIFT ADD'N CONT 0.4226 AC

Acres: 0.4226

Physical address of subject site:

5006 Gibson Blvd. SE and 5400 Gibson Blvd SE

Subject site cross streets:

Gibson Boulevard and San Mateo Boulevard

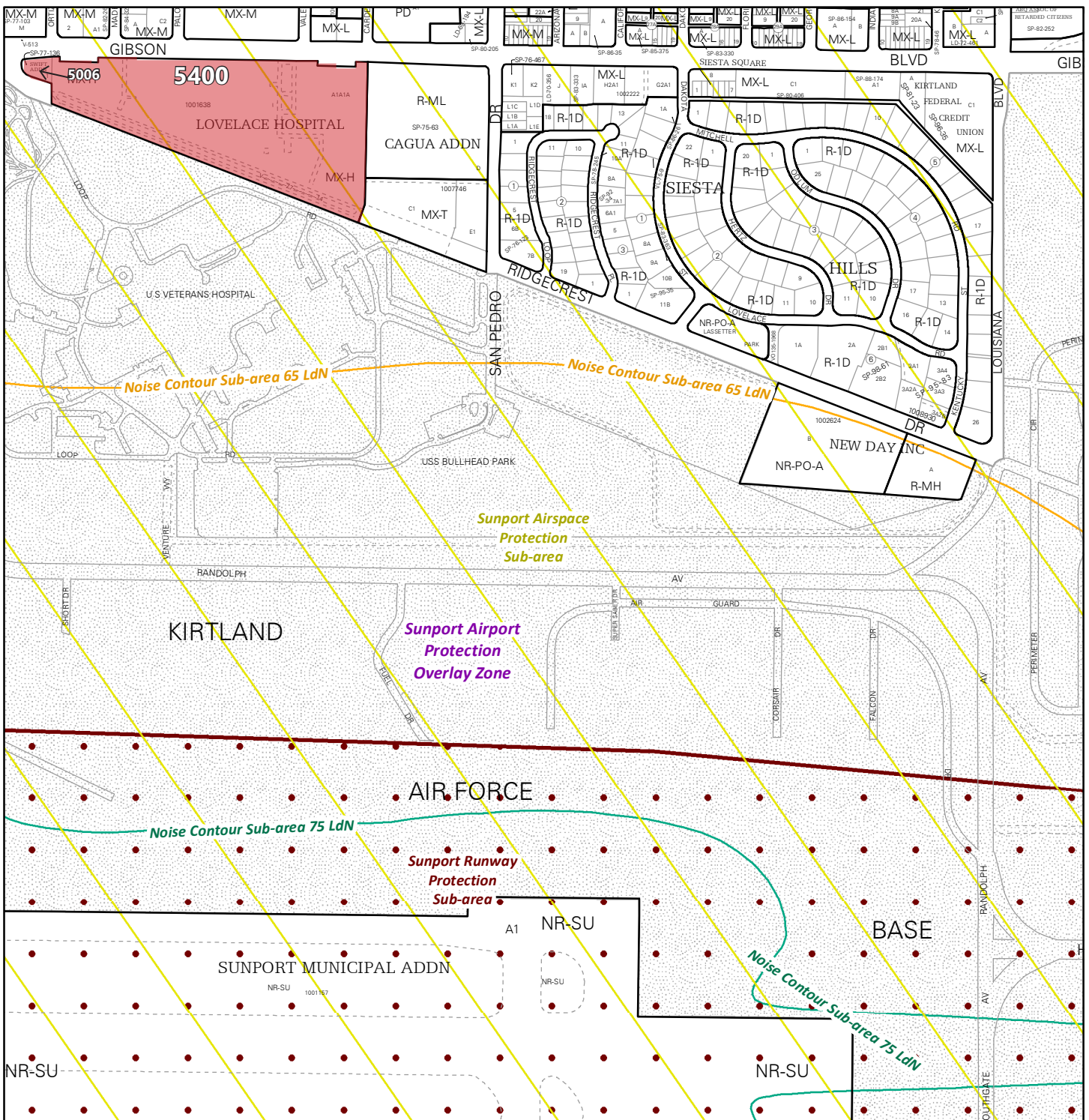
Other subject site identifiers:

Old Lovelace Hospital Site

This site is located on the following zone atlas page:

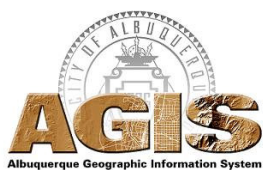
M-18-Z

<2. Letter to Property Owners-September.pdf>

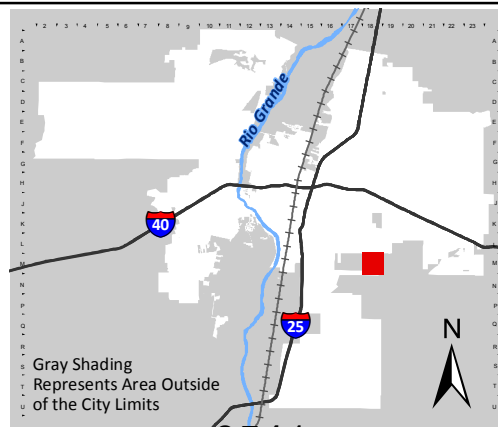


For more details about the Integrated Development Ordinance visit: <http://www.cabq.gov/planning/codes-policies-regulations/integrated-development-ordinance>

IDO Zone Atlas May 2018

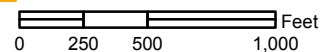


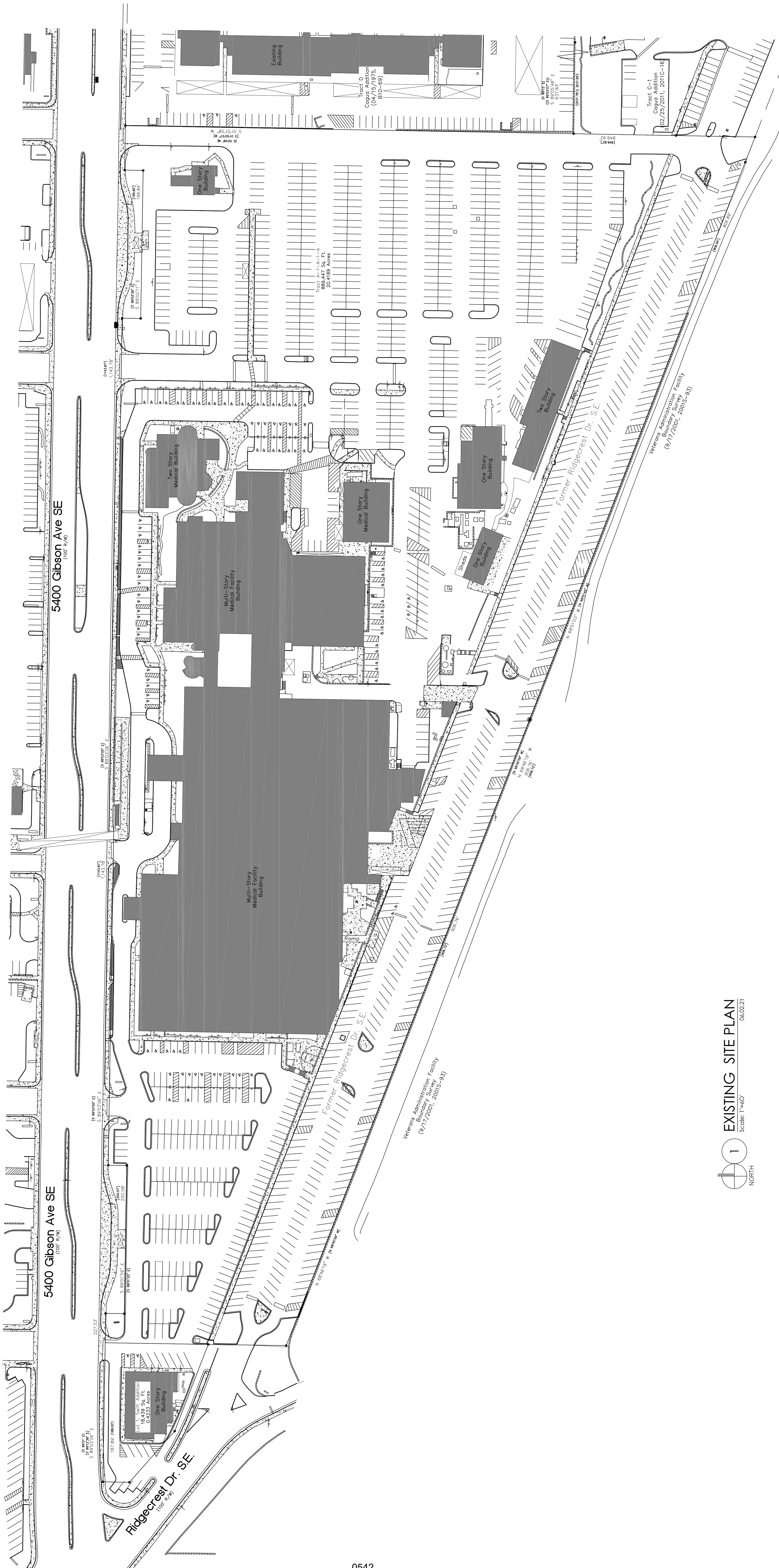
IDO Zoning information as of May 17, 2018
The Zone Districts and Overlay Zones
are established by the
Integrated Development Ordinance (IDO).



Zone Atlas Page:
M-18-Z

- Easement
- Escarpment
- Petroglyph National Monument
- Areas Outside of City Limits
- Airport Protection Overlay (APO) Zone
- Character Protection Overlay (CPO) Zone
- Historic Protection Overlay (HPO) Zone
- View Protection Overlay (VPO) Zone





1 EXISTING SITE PLAN
Scale: 1"=40'
06.02.21
NORTH

Date: August 10, 2021

To: City of Albuquerque, Planning Department; City of Albuquerque, Legal Department

Re: Request for immediate rejection of the application by the City of Albuquerque, Family and Community Services, and their agent, Consensus Planning, Inc. for a Conditional Use Permit for an Overnight Shelter at 5400 Gibson Blvd SE and 5006 Gibson Blvd SE as the applicant's submission does not meet the requirements for application per the IDO

Attn: Brennon Williams, Planning Department Director

Our Neighborhood Association, Parkland Hills, would like to inform you that the City of Albuquerque Family & Community Services, and their representative, Consensus Planning, have not adequately completed the submission process in applying for their Conditional Use Permit for the Overnight Shelter at 5400 Gibson Blvd. SE and 5006 Gibson Blvd. SE.

As an adjoining neighborhood, Parkland Hills did not receive "a meeting request," as mandated in IDO 6-4(C)(3), but rather, received a meeting notice "as a courtesy." Additionally, Parkland Hills was not involved in selecting the date for a pre-submittal meeting; the date was not "agreed upon" (IDO 6-4(C)(4), but determined by the applicant.

Though the applicant failed to follow IDO protocols and procedures for scheduling a pre-submittal meeting, a meeting was scheduled by the applicant, for which notice was sent to South San Pedro NA and District 6 Coalition, and sent to additional NA's as a "courtesy." This meeting was held on June 22, 2021. At this meeting, the applicant failed to provide the information required by IDO 6-4(C)(6):

"At the pre-submittal neighborhood meeting, the applicant shall provide information about the proposed project, including but not limited to the scope of uses, approximate square footages for different uses, general site layout, design guidelines, architectural style, conceptual elevations, and conceptual landscaping plans."

Not only was this information not presented, but specific questions regarding the approximate amount of space and square footage devoted to different uses went unanswered, as you will see in the Facilitated Meeting Report under Question no. 2b, pg. 4, and Question 2i, pg 7. (See attached file – 5 2021-6-22 Facilitated Meeting Report). The damage done by lack of information and opportunity to participate leading up to the meeting remains to be seen.

Because of the applicant's failure to comply with IDO requirements in IDO 6-4(C)(3), (IDO 6-4(C)(4) and IDO 6-4(C)(6), we are requesting that you reject this application immediately.

To clarify the sequence of events, and Parkland Hills' due diligence in informing Consensus Planning of this error, we would like to explain the following:

Parkland Hills Neighborhood Association [PHNA] received an email from Jacqueline Fishman AICP, Principal, Consensus Planning, Inc. on June 4, 2021 notifying the NA of a meeting scheduled for June 22, 2021 "for the two affected neighborhood associations, District 6 and South San Pedro." It went on to state that they were providing this notice "as a courtesy to...Parkland Hills..." (See attached file - 1 PREAPP FACIL MTG COURTESY dated June 4, 2021 communication from Jacqueline Fishman, page 2).

PHNA President, Rob Leming, informed Ms. Fishman that PHNA did not receive a request for a meeting as mandated by the IDO (See attached file – 2 OFFICE NEIGHBOR COORDINATOR PARKLAND

INCLUSION- Please note that his letter is included attachment 3, CORRECTION OF INFORMATION dated June 22, page 2, From Rob Leming to Jackie, as attachment 2).


Ms. Fishman acknowledged in a subsequent email to Mr. Leming that Parkland Hills should be considered an "affected neighborhood association" to be notified. (See attached file – 3 CONSENSUS PARKLAND INCLUDED referenced correspondence from Ms. Fishman dated June 18/17, 2021. Attached file 3A Addresses exhibit_PARKLAND INCLUDED is attachment 1 of 2). 3, 3A

In Ms. Fishman's response email to Mr. Leming, the error of the applicant to meet the requirements of IDO 6-4(C)(3), (IDO 6-4(C)(4) is acknowledged by Consensus Planning. In the Facilitated Meeting Report from 6/22/21, the inability of the applicant to address IDO requirements IDO 6-4(C)(6) is revealed in the questions and comments in Question #2, pages 4-7.

We also want to make note of the error in their Official Public Notification Form, under Part I – Process, where "Neighborhood meeting required" with an option to check "yes" or "no," both boxes are checked.

We appreciate your consideration and response to this request.

Sincerely,



President, Parkland Hills Neighborhood Association

See attachments 1, 2, 3, 3A, 4, June 4 neighborhood notification packet

Referenced IDO sections:

Per the IDO section **Part 14-16-6: Administration and Enforcement**

6-4: General Procedures

6-4(C) PRE-SUBMITTAL NEIGHBORHOOD MEETING

6-4(C)(1) For those types of applications where Table 6-1-1 requires a meeting with a neighborhood to be offered, the applicant shall offer at least 1 meeting to all Neighborhood Associations whose boundaries include or are adjacent to the subject before filing the application. In such cases, project applications will not be accepted until a pre-submittal neighborhood meeting has been held, or the requirements for a reasonable attempt in Subsection (3) below have been met.

6-4(C)(3) A meeting request shall be sent to the 2 representatives on file at the ONC for all applicable Neighborhood Associations via Certified Mail, return receipt requested, or via email. Either method constitutes a reasonable attempt to notify a Neighborhood Association of a meeting request. The requirements of Subsection 14-16-6-4(K)(7) (Documentation of Good Faith Effort Required) also apply.

6-4(C)(4) If the Neighborhood Association chooses to meet, the Neighborhood Association must respond within 15 calendar days of the request (Certified Mail or email) being sent. The meeting must be scheduled for a date within 30 calendar days but no fewer than 15 calendar days after the Neighborhood Association accepts the meeting request, unless an earlier date is agreed upon. If the Neighborhood Association declines the meeting, the applicant may proceed pursuant to Subsection (9) below.

6-4(C)(6) At the pre-submittal neighborhood meeting, the applicant shall provide

information about the proposed project, including but not limited to the scope of uses, approximate square footages for different uses, general site layout, design guidelines, architectural style, conceptual elevations, and conceptual landscaping plans.

6-4(C)(7) A summary of the meeting shall be prepared and emailed to the representatives of the Neighborhood Association(s) that requested the meeting and any other meeting participants who signed in and provided an email address.

6-4(C)(9) Where Table 6-1-1 requires that a pre-submittal neighborhood meeting be held, and a meeting was not held, the requirement for a pre-submittal neighborhood meeting shall be waived if the applicant can demonstrate that reasonable attempts were made to notify a Neighborhood Association as required by Subsections (1) through (4) above, and either no response was received within 15 calendar days of the notice being sent, or the notified Neighborhood Association declined the meeting.

6-4(G)(4) No development application shall be reviewed for compliance with this IDO or scheduled for a public meeting or hearing by any decision-making body until it is determined to be complete.

End of referenced IDO sections.



peter kalitsis <peterkalitsis@gmail.com>

Fwd: Correction of Information

Melinda Frame <phna.homelessness.solutions@gmail.com>

Tue, Jun 22, 2021 at 3:31 PM

To: peter kalitsis <peterkalitsis@gmail.com>

----- Forwarded message -----

From: **Jackie Fishman** <fishman@consensusplanning.com>

Date: Fri, Jun 18, 2021 at 12:34 PM

Subject: RE: Correction of Information

To: Rob Leming <phnapresident@gmail.com>, dlcarmona@cabq.gov <dlcarmona@cabq.gov>, Sanchez, Suzanna A. <suzannasanchez@cabq.gov>, Patten-Quintana, Lorena <lpatten-quintana@cabq.gov>

CC: Baca, Vanessa <vanessabaca@cabq.gov>, Melinda Frame <phna.homelessness.solutions@gmail.com>, Charlene Johnson <Johnson@consensusplanning.com>, Carol Pierce <cpierce@cabq.gov>

Hi Rob –

Thanks for reaching out to me regarding your concerns regarding the Official Neighborhood Form provided by the Office of Neighborhood Coordination and the Zoning Hearing Examiner. I've copied the City staff from both departments on this email.

Regarding contacting District 6 Coalition, the City's IDO process does require us to notify the coalitions even though they technically are not neighborhood associations.

Since receiving your email last night, I've been working to clarify the project address, which we understood to be [5400 Gibson Boulevard SE](#). Using this City address, there are only two associations (South San Pedro and District 6 Coalition) that the project site falls within or adjacent to (adjacent is defined by the IDO as excluding public rights-of-way). Those are the two associations that were provided to my staff by ONC and ZHE staff. In looking at the site map with Carol Pierce this morning, and confirming with City Legal, the City's purchase of the property did include [5006 Gibson SE](#), which is the small .4226 acre parcel at the corner of Gibson/Ridgecrest NE. When we include [5006 Gibson SE](#), [Parkland Hills](#) NA is adjacent to the project site. Therefore, you are correct that Parkland Hills should be considered an "affected neighborhood association" to be notified.

As you quoted from my email, I did include Elder Homestead, Parkland Hills, Trumbull Village, and Siesta Hills neighborhood associations as a "courtesy" in the notice and invite to the facilitated meeting on Tuesday, June 22nd at 5:30 pm. I apologize for the confusion on this issue. I will ensure that my office will send Parkland Hills all information related to the conditional use request to the Zoning Hearing Examiner and we will include both addresses ([5400 Gibson SE](#) and [5006 Gibson SE](#)) from this point forward. Elder Homestead, Trumbull Village, and Siesta Hills NAs are not within the expanded ONC boundary, but we will also continue to provide information as a courtesy.

Thank you and feel free to contact me or Carol Pierce if you have any questions.

Jacqueline Fishman, AICP

Principal

Consensus Planning, Inc.

302 Eighth Street NW

Albuquerque, NM 87102

P: 505.764.9801

From: Rob Leming <phnapresident@gmail.com>

Sent: Thursday, June 17, 2021 4:57 PM

To: Jackie Fishman <fishman@consensusplanning.com>

Cc: Baca, Vanessa <vanessabaca@cabq.gov>; Melinda Frame <phna.homelessness.solutions@gmail.com>

Subject: Correction of Information

Dear Jackie,

Please see the attached letter advising corrections to meeting notices and communiques. Thank you.

Best,

--

Rob Leming

President

Parkland Hills Neighborhood Association

505-750-7672

2 attachments



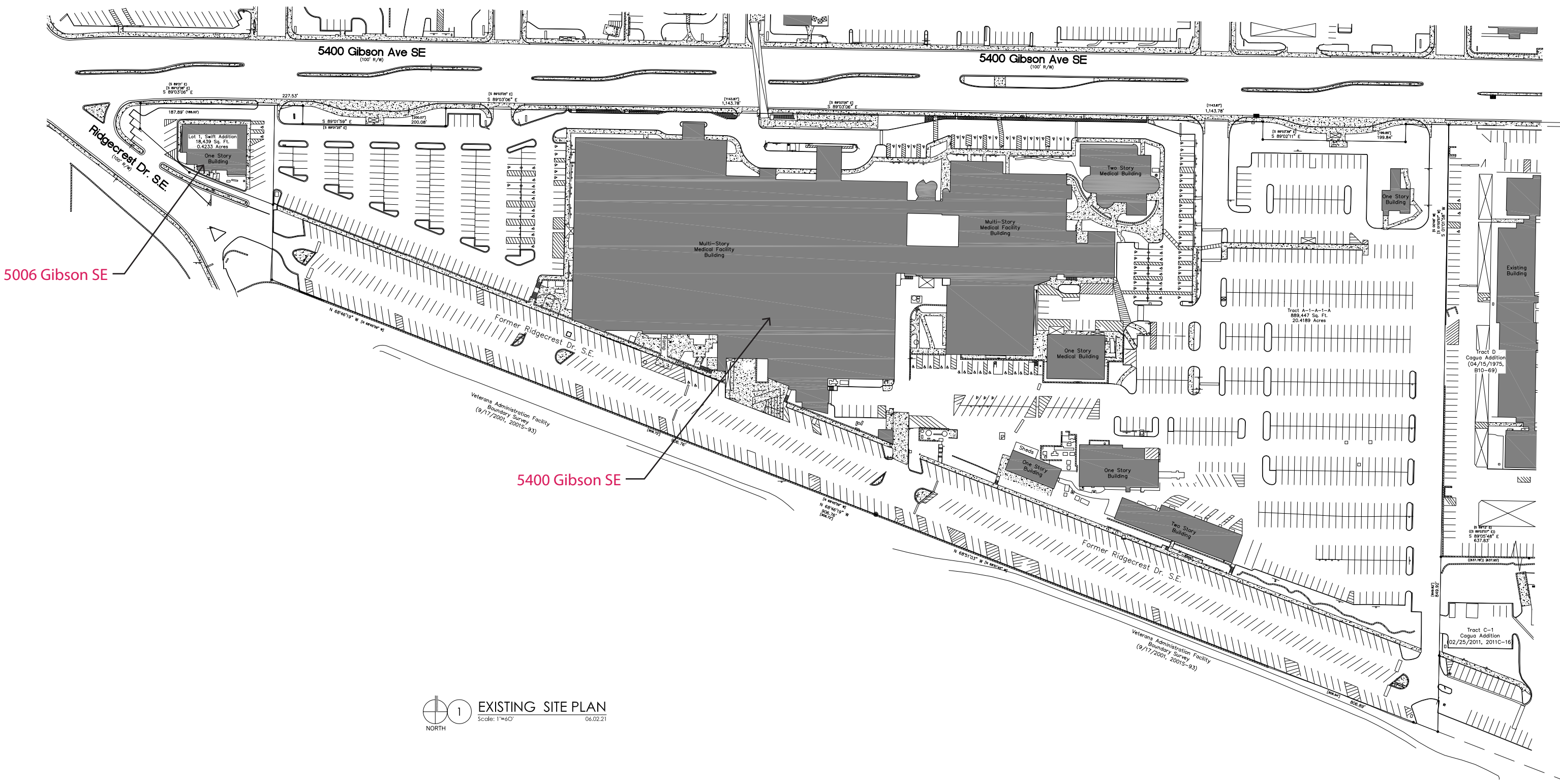
Addresses exhibit.pdf

1003K



OFFICE NEIGHBOR COORDINATOR JUNE 9 LETTER.docx

17K



5006 Gibson SE

5400 Gibson SE

 **1** EXISTING SITE PLAN
Scale: 1"=60' 06.02.21



peter kalitsis <peterkalitsis@gmail.com>

Fwd: Application notification - Gateway Center CU

1 message

Melinda Frame <phna.homelessness.solutions@gmail.com>

Thu, Aug 5, 2021 at 10:08 AM

To: peter kalitsis <peterkalitsis@gmail.com>

----- Forwarded message -----

From: **Rob Leming** <phnapresident@gmail.com>

Date: Thu, Aug 5, 2021 at 9:50 AM

Subject: Fwd: Application notification - Gateway Center CU

To: Melinda Frame <phna.homelessness.solutions@gmail.com>

----- Forwarded message -----

From: **Jackie Fishman** <fishman@consensusplanning.com>

Date: Tue, Aug 3, 2021 at 10:34 AM

Subject: Application notification - Gateway Center CU

To: info@willsonstudio.com <info@willsonstudio.com>, mandy@theremedydayspa.com <mandy@theremedydayspa.com>, zabdiel505@gmail.com <zabdiel505@gmail.com>, khadijahasili@vizionz.org <khadijahasili@vizionz.org>, mldarling56@yahoo.com <mldarling56@yahoo.com>, phnapresident@gmail.com <phnapresident@gmail.com>, SEAreaOrganizers@gmail.com <SEAreaOrganizers@gmail.com>, rbaca@bizjournals.com <rbaca@bizjournals.com>, kp-shna@centurylink.net <kp-shna@centurylink.net>, sp-wonderwoman@comcast.net <sp-wonderwoman@comcast.net>, mrkious@aol.com <mrkious@aol.com>, alyceice@gmail.com <alyceice@gmail.com>, landry54@msn.com <landry54@msn.com>
CC: Charlene Johnson <Johnson@consensusplanning.com>, Pierce, Carol M. <cpierce@cabq.gov>, Huval, Lisa L. <lisahuval@cabq.gov>

Dear Neighbors,

This email is notification that Consensus Planning has submitted an application for a Conditional Primary Use for Overnight Shelter to the City of Albuquerque Zoning Hearing Examiner (ZHE) on behalf of the City of Albuquerque Department of Family and Community Services. The request is for the Gateway Center project, an overnight shelter proposed for a portion of the Gibson Health Hub. The property consists of two lots at 5006 and [5400 Gibson SE](#) the site of the existing Gibson Medical Center. The property is zoned MX-H. The legal descriptions for the two sites are as follows:

- Lot 1 Swift Addition containing 0.4226 acres ([5006 Gibson Boulevard SE](#))
- Tract A-1-A-1-A Plat of Tract A-1-A-1-A Lovelace Hospital (being a replat of Tract A-1-A-1 & A portion of vacated Ridgcrest Drive SE) containing 20.4232 acres ([5400 Gibson Boulevard](#))

SE)

A facilitated meeting was held on June 22, 2021 to discuss the conditional use application. In response to input from that meeting, the City delayed the submittal of the Conditional Use application until the draft Operations Plan for the Gateway Center was ready. You can review the draft Operations Plan posted on the City's website at www.cabq.gov/gateway.

The hearing for this application is scheduled for **Tuesday, September 21, 2021** starting at **9:00 A.M.** At this time the hearing is scheduled to be heard on Zoom using the following link.

Join Zoom Meeting <https://cabq.zoom.us/j/7044490999>

Meeting ID: 704 449 0999

One tap mobile +16699006833,,7044490999# US (San Jose)
+12532158782,,7044490999# US (Tacoma)

Dial by your location

+1 669 900 6833 US (San Jose) +1 253 215 8782 US (Tacoma) +1 346 248 7799 US (Houston)

+1 646 558 8656 US (New York) +1 301 715 8592 US (Germantown)

+1 312 626 6799 US (Chicago)

Find your local number: <https://cabq.zoom.us/j/7044490999>

Depending on public health orders, the hearing may also be scheduled in-person. Please call (505) 924-3894 for details and updates regarding an in-person hearing. If an in-person hearing is available, it will occur in the Plaza del Sol hearing Room at [600 Second Street NW](#), Basement Level.

For more information about the conditional use application and request, please contact Jackie Fishman, Principal at Consensus Planning, at fishman@consensusplanning.com or (505) 764-9801. You may also contact the ZHE Administrative Assistant, Suzie Sanchez at (505) 924-3894 or suzannasanchez@cabq.gov.

Please note: You may submit written comments to the Zoning Hearing Examiner up to 6 days before the hearing (5pm on the Wednesday before the hearing). Written comments received after that deadline will not be taken into consideration for this application.

Attached: Neighborhood Notification Packet

Jacqueline Fishman, AICP

Principal

Consensus Planning, Inc.

[302 Eighth Street NW](#)

[Albuquerque, NM 87102](#)

P: 505.764.9801

--

Rob Leming

President

Parkland Hills Neighborhood Association

505-750-7672



Neighborhood Association Public Hearing Notification Packet.pdf

1798K

August 5, 2021

Mr. Robert Lucero, ESQ.
Zoning Hearing Examiner
City of Albuquerque Planning Dept.
600 2nd Street
Albuquerque NM 87102

Re: Support for Gateway Center Conditional Use Permit

Mr. Lucero,

I am writing to express support for the conditional use permit to allow a high quality shelter for people experiencing homelessness at the Gibson Health Hub.

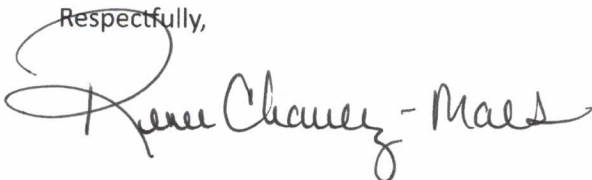
We have provided peer support services to individuals and families and helped many of them get housed as well as to get connected to substance use and mental health services that they request.

Life Link Training Institute Fema RSP has provided support services and intervention at the Westside Emergency Housing Center (WEHC) and the City's Wellness hotels over the past year. Our clients tell us that these services make a meaningful difference in their lives. We keep data and have it available if needed that show meaningful outcomes.

The former hospital is a perfect place to provide the shelter, case management, behavioral health and medical services that are otherwise not available in our community. We support an initiative where these individuals can receive all of the necessary services, support, accountability and housing services all in one location and are focused on serving these individuals to increase their quality of life.

We support approval of the Conditional Use Permit to the City of Albuquerque to operate the Gateway Center at the Gibson Health Hub.

Respectfully,

A handwritten signature in black ink that reads "Renee Chavez-Maes". The signature is fluid and cursive, with the first name "Renee" being more prominent and the last name "Chavez-Maes" following in a similar style.

Renee Chavez-Maes; CPSW, CCHW, CARS
State Team Lead, Life Link Training Institute
505-582-5901
rchavezmaes@lltraininginstitute.org



September 17, 2021

Mr. Robert Lucero, Esq.
Zoning Hearing Examiner
City of Albuquerque Planning Department
600 2nd Street
Albuquerque, NM 87102

RE: Support for Gateway Center Conditional Use Permit

Dear Mr. Lucero:

On behalf of Albuquerque Health Care for the Homeless, Inc. (AHCH), I am writing today to express support for the City of Albuquerque's request for a Conditional Use Permit for the Gateway Center at the former Gibson Medical Center. Especially at this point in the COVID-19 public health emergency, such a measure's passage will leverage the City's and community's need to address additional emergency shelter for people without homes across our the Metro Area, in a more centrally-located facility than is currently available.

To the extent that emergency shelter beds are needed symptomatically as a short-term response to basic survival needs for people who are unhoused, AHCH has been a strong proponent of smaller, more community-integrated models with lower neighborhood impact, oriented to the best (and very viable) outcome of exit to housing. We have opposed proposals for large shelters anywhere in our community and were pleased when Mayor Keller and the Department of Family & Community Services explicitly shifted gears to multiple Gateway Centers in response to service provider, neighborhood, and other community input.

We believe that the City's operational plan to shelter up to 100 individuals and 25 families at the Gibson site is aligned with this philosophy and has a high likelihood of positive impact on the unhoused population to improve their circumstances and health, and to end their homelessness. AHCH is committed to continuing to work with the City of Albuquerque and range of service provider partners toward this end.

For questions or more information, please do not hesitate to contact me at 505-767-1184, or jennymetzler@abqhch.org.

Sincerely,

Sincerely,

A handwritten signature in black ink, appearing to read "J Metzler".

Jennifer L. Metzler, MPH, Chief Executive Officer

Sanchez, Suzanna A.

From: Sara Fitzgerald <sfitzgerald@greaterabq.com>
Sent: Friday, September 17, 2021 1:25 PM
To: Sanchez, Suzanna A.
Subject: Greater ABQ Chamber Letter of Support
Attachments: Gateway Center Letter of Support.pdf

Good afternoon,

Please find attached a letter of support for the City of Albuquerque Family and Community Services' request for a conditional use permit for overnight sheltering at the Gibson Medical Center, item #6 on the agenda for Tuesday's hearing.

Please let me know if we can provide you with any additional information.

Thank you, and have a restful weekend!
Sara



Sara Fitzgerald / *Senior VP of Policy Research and Strategic Communications*
Greater Albuquerque Chamber of Commerce
400 Tijeras Ave. NW
Albuquerque, NM 87102



September 17, 2021

Dear Mr. Lucero,

We are writing in support of the City of Albuquerque Family and Community Services' request to allow overnight sheltering at the Gibson Medical Center, the future home of a 24/7 Gateway Center that will act as a hub for critical services for people experiencing homelessness.

Our city's challenge with homelessness is a complex one, and we may not all agree on how we address it. But there are two facts we should all be able to agree on:

- (1) **Our community desperately lacks overnight sheltering for the homeless – especially within our city limits, and especially among single adults.** We do not have enough overnight shelter beds in the Albuquerque area, and those we do have are often far from the city itself and can be difficult to access. Consequently, alley ways, storefronts, overpasses, sidewalks, and parks serve as our current overnight sheltering for far too many. It's inadequate for the homeless and it impacts our residents and businesses. Equipping our city's infrastructure with an additional more than 100 beds for overnight sheltering is an important start for keeping unhoused people safe and off the streets.
- (2) **We must improve the coordination of services and care for those who are homeless if we ever expect them to be able to find and transition into stable housing.** The Chamber has studied the issue of homelessness for years, and we believe it's imperative that access to assistance and services be co-located – everything from ID recovery to short-term medical care to behavioral health screenings – in order to adequately support a person and connect them to the full range of help they likely need. The Gateway Center will serve as a hub to connect people experiencing homelessness with the services they need, with a goal of decreasing, over time, the number of people who need overnight sheltering.

Our Gateway Center on Gibson is a critical first step in addressing both of the challenges we've identified. We urge you to approve this permit to allow the City's Family and Community Services team to get started on this important work.

Thank you for your continued service to our community.

Sincerely,



Norm Becker
Chair
GACC Board of Directors



Terri Cole
President and CEO
Greater Albuquerque Chamber of Commerce



Del Esparza
GACC Downtown Transformation BIG Chairman
CEO, esparza

Sanchez, Suzanna A.

From: CUNNINGHAM-STEPHENS, JANET L CTR USAF AFGSC 377 MSG/CEN-CP
<janet.cunningham-stephens.ctr@us.af.mil>
Sent: Friday, September 17, 2021 3:44 PM
To: Sanchez, Suzanna A.
Cc: BOHANNON, HERBERT C III GS-14 USAF AFGSC 377 MSG/CEN; FIFE, JAMES M CIV USAF AFGSC 377 MSG/CENE; LECHEMINANT, PAUL T CTR USAF AFGSC 377 MSG/CEN-CE; SANDOVAL, DONNA S CTR USAF AFGSC 377 MSG/CEN-CE
Subject: RE: [Non-DoD Source] FW: ZHE Application Notice for 5400 Gibson BLVD SE and 5006 Gibson BLVD SE

Follow Up Flag: Follow up
Flag Status: Completed

Good Afternoon,

Regarding Agenda Items 28 and 29 mentioned below, Kirtland AFB concerns would be with incursions by unauthorized persons onto the military installation. In order for persons to be allowed access to the base, certain protocols must be followed. Should incursions occur, proper procedures will be used to detain/remove those individuals.

Thank you for the opportunity to provide input into this matter.

Best regards,

Janet Cunningham-Stephens

Lead Community Planner

NetCentric Technology, LLC

JCunningham-Stephens@asrcfederal.com | janet.cunningham-stephens.ctr@us.af.mil

📞: (505) 853-2747

2050 Wyoming Blvd SE, Bldg. 20686, Kirtland Air Force Base, NM 87117-5005

asrcfederal.com | Purpose driven. Enduring Commitment

From: Sanchez, Suzanna A. <suzannasanchez@cabq.gov>
Sent: Thursday, September 16, 2021 9:43 AM
To: CUNNINGHAM-STEPHENS, JANET L CTR USAF AFGSC 377 MSG/CEN-CP <janet.cunningham-stephens.ctr@us.af.mil>
Subject: [Non-DoD Source] FW: ZHE Application Notice for 5400 Gibson BLVD SE and 5006 Gibson BLVD SE

Good morning Janet,

Per the new Integrated Development Ordinance, (see citation below) the City is required to notify you of an application for a variance at the property located at 5400 Gibson and 5006 Gibson and I have attached the file for you to review. Please let me know if you have any questions.

6-4(I) REFERRALS TO COMMENTING AGENCIES

Following a determination that the application is complete, the Planning Director, ZEO, or any City staff designated to review applications in Table 6-1-1 shall refer applications for comment to the following departments or agencies, as noted below. Any comments received within 15 consecutive days after such a referral shall be considered with the application materials in any further review and decision-making procedures.

6-4(I)(3) Kirtland Air Force Base and City Aviation Department staff for applications that include development in the Kirtland Air Force Base Military Influence.

Agenda Item #28. VA-2021-00316 PR-2021-005834

City of Albuquerque Family and Community Services (Agent, Consensus Planning) requests a conditional use to allow an overnight shelter for Lot A1A1A/Lovelace Hospital, Lovelace Hospital, located at 5400 Gibson BLVD SE, zoned MX-H [Section 14-16-4-2]

Agenda Item #29. VA-2021-00317 PR-2021-005834

City of Albuquerque Family and Community Services (Agent, Consensus Planning) requests a conditional use to allow an overnight shelter for Lot 1, Swift Addn, located at 5006 Gibson BLVD SE, zoned MX-H [Section 14-16-4-2]

Thank you,

Suzie Sanchez



SUZIE SANCHEZ

zhe administrative assistant

o 505.924.3894

e suzannasanchez@cabq.gov

cabq.gov/planning

Sanchez, Suzanna A.

From: Kate Matthews <kate.sonora@gmail.com>
Sent: Friday, September 17, 2021 12:47 PM
To: Sanchez, Suzanna A.
Subject: Gateway Center Conditional Use Permit Application Comment for Sept. 21 Hearing

The proposed Gateway Center has the potential to create many negative impacts to nearby neighborhoods and businesses. Zoning Hearing Examiners should not even consider granting the permit until The City completes required neighborhood and business impact studies AND also provides actionable mitigation measures for identified negative impacts. As a resident of an adjacent neighborhood, I respectfully request that the Examiners defer making a decision on the conditional use permit until impact studies are completed.

Kate Matthews
Parkland Hills

--

Sent from Gmail Mobile

Sanchez, Suzanna A.

From: Melinda Frame <phna.homelessness.solutions@gmail.com>
Sent: Tuesday, September 14, 2021 4:57 PM
To: Sanchez, Suzanna A.
Subject: Written Statement and Evidence for Zoning Hearing 9/21/21

Follow Up Flag: Follow up
Flag Status: Flagged

Hello-

Please find attached a written statement and evidence compiled by the Parkland Hills Neighborhood Association's Homelessness Solutions Committee regarding the Family & Community Services' application for a Conditional Use Permit for the City of Albuquerque's proposed Gateway Center at 5400 and 5006 Gibson Blvd SE. This committee was formed and appointed by the Board of the Parkland Hills Neighborhood Association to track developments of the City's Gateway Center, and to help keep the residents of Parkland Hills informed of these developments.

As it is a large document (a total of 218 pages), please let us know you have both received it and were able to download and open it without issues.



[PHNA STATEMENT AND EVIDENCE_ZHE_9_14_21.pdf](#)



Thank you,
Melinda Frame
Homelessness Solutions Committee Chair
Parkland Hills Neighborhood Association

Date: September 14, 2021

Attn: Robert Lucero, Zoning Hearing Examiner

Please find enclosed the Written Statement (pg. 1 – 13) and Supporting Evidence (pg. 14 – 218) submitted by the Homelessness Solutions Committee of Parkland Hills Neighborhood Association regarding the Family & Community Services' application for a Conditional Use Permit for the City of Albuquerque's proposed Gateway Center at 5400 and 5006 Gibson Blvd SE

WRITTEN STATEMENT: SUMMARY

As an adjoining neighborhood to the proposed Gateway facility, we stand behind the ideals of the Gateway center to help the unhoused of our community. We see the need for more facilities to help those experiencing homelessness in our City, and believe these facilities are needed throughout our City. That said, we do feel the process to apply for the Conditional Use Permit at 5400 and 5006 Gibson Blvd SE has been rushed – many details for an adequate Operational Plan ensuring Gateway is impactful for the homeless population, along with strategies for mitigating significant adverse impacts to the surrounding community, are still undeveloped. Furthermore, the applicant failed to meet the requirements outlined in the IDO for submission of a Conditional Use Permit application. Therefore, though we understand the need and the desire to help our unhoused neighbors, Parkland Hills requests that you reject the City of Albuquerque Family & Community Service's Conditional Use Permit application for 5400 and 5006 Gibson Blvd on the grounds that the applicant did not adequately complete the IDO's submission process.

The applicant failed to meet the protocols set forth in the IDO for a pre-submittal meeting with our neighborhood as per IDO 6-4(C)(3) & IDO 6-4(C)(4). As an adjoining neighborhood, Parkland Hills did not receive "a meeting request," as mandated in IDO 6-4(C)(3), but rather, received a meeting notice "as a courtesy." Additionally, Parkland Hills was not involved in selecting the date for a pre-submittal meeting; the date was not "agreed upon" (IDO 6-4(C)(4), but rather, was determined by the applicant. Parkland Hills Neighborhood Association [PHNA] President Rob Leming wrote a letter to Consensus Planning and the City addressing this error, to which Jacqueline Fishman of Consensus Planning responded on June 18, 2021, stating Leming was correct and "that Parkland Hills should be considered an 'affected neighborhood association' to be notified." **[All correspondence found in Appendix A]**

Additionally, though they abandoned proper protocol for the pre-submittal meeting, a meeting did occur on June 22, 2021, and the applicant failed to address questions and provide the information mandated in IDO 6-4(C)(6), including but not limited to, "scope of uses, approximate square footages for different uses, general site layout, design guidelines, etc," which is reflected in the Facilitated Meeting Report **[First item within Appendix A]** under Question no. 2b, pg. 4 of the report, and Question 2i, pg 7 of the report. Further details of these errors are outlined in a letter and attachments Parkland Hills Neighborhood Association President Rob Leming submitted to the City Planning Department on August 10, 2021, receipt of which was confirmed and added to the records VA-2021-00316 and VA-2021-00317. They are also attached to this document **following the complete Facilitated Meeting Report in Appendix A.**

Additionally, the City has not addressed how they will mitigate adverse impacts to the community. In IDO 6-6(A)(3)(c), it mandates the property "will not create significant adverse impacts on adjacent properties, the surrounding neighborhood, or the larger community." The impact study being conducted by the University of New Mexico, which is to inform and guide the applicant's Operational Plan on mitigating adverse impacts to our neighborhoods, has not been completed – it is not projected to be complete until January of 2022.

Though the study and report by UNM are not yet complete, there is much public documentation of the adverse impacts generated by the unhoused population, especially in areas with greater saturation of people experiencing homelessness. We will be referencing many of these articles in this letter, and they

are adjoined here as **Appendix B - H**. Within these articles, we will also demonstrate the City's lackluster track record with managing the adverse impacts of the homeless.

Due to the City's inability to fulfill the mandated procedures of the IDO, and out of concern for the unforeseen damages which may occur without a comprehensive Operational Plan informed by a high-impact study to serve the homeless and protect the surrounding communities from adverse impacts, we ask that you deny this application at this time. The city is free to come back once it has met the necessary requirements and offered adequate assurances.

Once the City has followed the protocols set forth in the IDO, and rectified the errors listed above, we would like you to consider adding the following terms as conditions for approval of their Conditional Use Permit:

To help mitigate adverse impacts to our communities, we request:

1. **A mandated Public Safety District encompassing the neighborhoods of Siesta Hills, Elder Homestead, South San Pedro, and Parkland Hills.** Budgeting for this public safety district would include added, designated resources and personnel for dispatch and patrol within the district, including ACS (Albuquerque Community Safety Department) and APD officers; added, designated personnel for street outreach teams; and added, designated personnel for daily cleanup of our parks and alleyways. **Additionally, all schools and public parks are to be excluded from being City shelter pickup/drop-off locations** (articles documenting the negative impacts and dangers at our City parks heavily trafficked and inhabited by the homeless have been submitted as written evidence, **Appendices C,D,E**).
2. **The implementation of a legally-binding Good Neighbor Agreement between the City as the property owner, and the four neighborhoods within the Public Safety District.** The conditions of the agreement must include the creation of a Community Oversight Committee. A list of items which should be incorporated into a Good Neighbor Agreement is attached **(Appendix S)**. "Legally-binding" means "disputes, after initial mediation, shall be settled in district court" and not a city hearing officer.
3. **A detailed Operational Plan and budget for a comprehensive 24/7 transportation service system to/from Gateway** – including but not limited to, locations and schedule for pick-up and drop-offs for the shelter's shuttle system; how the City will be expanding the public bus system and routes to/from Gateway to accommodate clients and residents; details and schedule on van services. (documentation supporting public safety concerns surrounding pick-up and drop-off locations for the City's shelters have also been submitted as written evidence, **Appendices C,D,E**).
4. **Bed capacity limits** – due to the lack of behavioral health providers in our state, and the City's track record with moving people out of the shelter system into transitional or permanent housing, and to help prevent additional adverse impacts to a district already saturated with more than 51% of the City's homeless services, we request an overnight shelter bed capacity limit at the property as a condition of approval. Initially, we would request the City be granted Conditional Use for 15 families and 30 individuals. After demonstrating the successful implementation of these numbers, whereby the City shows they can adequately meet the needs of residents, and move them into housing within 90 days, while simultaneously proving the facility can operate without significant adverse impact to the surrounding communities, we would recommend in 2 years they request an increase in the number of beds at this facility.

We have requested these terms be added to the applicant's Conditional Use Permit to help ensure minimal adverse impacts to our communities. Below we will be outlining and presenting evidence supporting the implementation of these terms. The evidence will speak to adverse impacts in communities with large populations of people experiencing homelessness, the City's lack of success in

mitigating these adverse impacts, as well as evidence supporting bed capacity limits in regard to the numbers of people the City will be able to adequately serve within Gateway, and how lesser numbers can help lessen adverse impacts.

Additional concerns and requests for data with the submission of a new application for a Conditional Use Permit are outlined below:

- Given the size of the overnight shelter the City intends to have at Gateway **(Appendix O)**, we would like to request the applicant provide real data on the implications to the surrounding neighborhoods of an overnight shelter exceeding 100 residents.
- We request the applicant provide supporting evidence on how they will be able to serve an excess of 100 residents given the shortage of Behavioral Health Providers in our state **(Appendix I, P)**.
- We request the applicant to provide supporting evidence on how a shelter with mixed demographics and an excess of 100 residents better serves the homeless population than a system of small shelters serving specific demographics, accompanied by an explanation of why existing resources are not already being utilized.
- We request the applicant provide a strategic plan on transitioning residents of the shelter into housing with the limited availability of housing options in our city.

EVIDENCE: ADVERSE IMPACTS

1. Commitments from Family & Community Services [FCS] have not been met: Evaluation of Impact

Below are communications dated March 25, 2021, 6:43 PM from Carol Pierce, Director, to Councilor Davis. Carol Pierce is responding to Councilor Davis' question re: operation and oversight at Gateway on pg. 3 (excerpt of communications appears below; full communications attached as **Appendix M**)

Councilor Davis, Question 5: Who does FACS intend to operate the center, how will they be paid and what oversight will be put in place to ensure neighborhood issues and unintended consequences are adequately addressed better than current FACS homeless provider contractors downtown?

*Ms. Pierce's response: "FCS will disseminate a Request for Proposal to select an entity that will operate the center. Once that entity is chosen, we will enter into a contract with them and oversee and monitor the contract to ensure it is in compliance with our standards. FCS will also be working with this entity and service providers at this location on Good Neighbor Agreements. **As referenced in the draft Housing Services Framework** (<https://www.cabq.gov/family/documents/housing-services-framework>) **document sent to the HCC, we will evaluate the impacts of any emergency shelters within 5 miles of the proposed location including the possible impacts of proposed services (e.g., food, medical care, case management, substance abuse, drop-in access, 24/7 access) and the population to be served. That evaluation of impact will take into consideration the impact of existing services within the area as well and will inform the creation of a detailed plan to address community safety concerns for the area around any proposed emergency shelter locations.***

A study is currently being done by the University of New Mexico for the City of Albuquerque to collect data on high-impact strategies for addressing homelessness, and to survey adverse impacts to communities surrounding overnight shelters. **This study was to inform and guide FCS in employing**

best practices to serve the homeless, and to mitigate adverse impacts to surrounding neighborhoods. This study has yet to be completed – its completion is currently projected for early 2022.

By not waiting for the completion of the UNM report regarding mitigating negative impacts on surrounding neighborhoods, and by not performing an evaluation of impact for a large-scale facility, the City of Albuquerque is not following the procedures they indicated they would enlist to mitigate significant adverse impacts on the area neighborhoods. This demonstrates the City's Operational Plan is not based on data from the study they are having performed, and thereby demonstrates they are not sincerely attempting to mitigate severe impacts. These should be executed to determine shelter needs and requirements before the Conditional Use Permit is approved.

2. City's Track Record in Mitigating Adverse Impacts in Neighborhoods with Homeless Services

The City has demonstrated they are unable to rectify problems within the parks sitting in close proximity to homeless services, as well as those issues found at pickup and drop-off locations for transportation to/from homeless service providers. This is another reason we request that there be a cap of 15 families and 30 individuals at the Gateway shelter, to provide the city with the time and opportunity to develop better systems to alleviate these problems occurring at other locations, and to prevent similar adverse impacts on the neighborhoods surrounding Gateway.

The following reports provide evidence of the lack of success the City has had over the last two years in mitigating significant adverse impact on neighborhoods surrounding homeless service providers. Excerpts from reports appear below:

1. "Wells Park business owners file lawsuit over ongoing homeless problem," by Jeannie Nguyen, KRQE, Posted Oct 4, 2020, updated Oct. 5, 2020 (Appendix B)

"There's threats of violence against the people that are there, the residents that have property around that, destruction of property," says Blair Dunn. Jeannie Nguyen: "Back in July, attorney Blair Dunn sent a letter on behalf of business owners threatening to sue the city if the Mayor didn't fix the problem. Now, they are keeping their word by suing the St. Martin's Hospitality Center off Third and Mountain...With this lawsuit Dunn hopes St. Martin's and the city figure out a solution that works for both homeless people and the long-term residents of the Wells Park neighborhood."

2. "LOCAL VOICES: Albuquerque's homeless: Worse than you think" By Carl Dipalma, Albuquerque resident / Bruce M. Thomson, District 5 Director, board of Directors Chair, Albuquerque Metropolitan Arroyo Flood Control Authority, Sunday, August 8, 2021, 12:02am (Appendix C)

Neighbors' pleas for help to fight crime, drug trafficking, homelessness have long been ignored by the city

While spending the nights in Coronado Park this past year I became completely convinced the neighborhood has become as dangerous as anyplace in town.

The illegal and life-threatening drug trafficking continues on bicycles throughout the dark hours, and there are between 20 and 30 of these stolen two-wheelers there at any given time. The playground has become a home for used syringes, empty alcohol containers, broken glass, human waste, used condoms, discarded bike parts and filthy clothing and all kinds of throwaway weapons and other trash. The number of repeat offenders during the night is more than it has

ever been because this park is being used as a pickup and drop-off location by the city-funded night shelter. Those people who are rejected by the yellow bus operators stay there after being told they cannot be given an empty bed and are now overflowing onto the surrounding taxpayers' doorways. The property managers for the surrounding locations and their helpers have made about 4,000 calls for assistance to Albuquerque Police Department and to those who direct city law enforcement during the past five or six years, explaining that no one is allowed in the park after dark according to the city ordinance. They have written certified letters to the mayor. They have repeatedly asked their city councilor's office for help in the most serious and respectful way. They have also been ignored at many city-dominated community meetings. They have established the periodical watch with Valley Command between midnight and 4 a.m. month after month after month. They also continue to put their lives on the line every night by making eyewitness reports to APD with their cellphones while on foot. But they and the genuine homeless persons still remain in an increasingly dangerous situation. The spotlights, loudspeakers and warning tickets disappeared long ago into the distance with the patrol car.

Homeless people sleep on the sidewalk in front of a facility called HopeWorks located on 3rd Street in downtown Albuquerque. (Roberto E. Rosales/Albuquerque Journal)

Yes the truly homeless persons are in fear of calling APD because they are then left alone as ongoing unprotected victims of the unpenalized repeat offenders. Last year the Mayor's Office told those calling for help that "they are not going to be put in jail because putting the offender behind bars does not do any good." As a result there has been a growing number of assaults with primitive throwaway weapons, robberies and thefts, rapes every night, drunken and verbal and physical arguments in and around Coronado.

3. "Police records depict pattern of problems, violence at Coronado Park," by Nathan O'Neal, KOB4, Created October 11, 2020 10:48pm; Updated October 11, 2020 10:50pm (Appendix D)

ALBUQUERQUE, N.M. — Coronado Park is considered the heart of Albuquerque's homeless problem. Located near I-40 and 2nd street, it comes with a lot of other problems too – including drug use, violence and mental health issues.

More than two years of police records reveal at least 120 times police, fire and other emergency services were needed at Coronado Park between January 2018 and June 2020.

"That park is not safe. It's not safe for the people experiencing homelessness, it's certainly not safe for any other neighborhood residents to go there," said Doreen McKnight who is president of the Wells Park Neighborhood Association and has lived in the area for 10 years.

"This year alone in 2020 there were three homicides at Coronado Park. In 2019, a disabled woman was raped there and in 2018 there was a murder," said McKnight.

Police 911 logs reveal a variety of other issues.

In February 2019, police investigated a stabbing after a fight broke out at the park.

One month before the stabbing, police responded to a call after a woman said she was suicidal, telling police on lapel camera video that she had previously made attempts to overdose on meth. Officers then took her to get help.

In 2018, the KOB 4 Investigates team used undercover cameras at Coronado Park which revealed illegal drinking, drug deals and people shooting up drugs in broad daylight.

4. "It's becoming increasingly dangerous: Albuquerque park sees 3rd homicide," by Ryan Laughlin, KOB4, Created July 14, 2020, 6:15pm; Updated July 14, 2020 6:24pm (Appendix E)

ALBUQUERQUE, NM-Coronado Park in Albuquerque saw its third homicide this year after a man was beaten to death Monday evening

Ralph DiPalma, a volunteer minister, said issues at the park have only been growing worse.

"Instead of straightening out the problem, it's becoming increasingly dangerous." DiPalma said.

There are many homicides among the homeless unreported, deliberate drug overdoses and missing persons," he added.

3. Reasonable Limitations to Help Mitigate Impacts in a District with an Abundance of Homeless Services

Out of nine districts in the City of Albuquerque, District 6 is home to 51.25% of homeless service providers **(Appendix U)**. With a saturation of providers serving the homeless population of Albuquerque, our district struggles with adverse impacts on a daily basis – a basic summary of these impacts may be found on page 5 of the 2019 Homeless ABQ Report, generated by homeless service provider Steelbridge Ministries **(Appendix V)**. Among the impacts are panhandling and trespassing, the closure of businesses, minor and/or violent altercations with homeless who are mentally ill or inebriated, and criminal activity ranging from minor theft to drug trafficking, prostitution, and human trafficking; as well as public safety issues such as hazardous waste, including feces and needles, being left in our neighborhoods and public parks. There are 11 parks, 9 schools, and 7 daycare and pre-schools within 1.5 miles of the proposed Gateway facility **(Appendix T)**, many of which already suffer the adverse impacts of a saturation of homeless providers in our communities.

A study by the University of Pennsylvania **(Appendix Q)** found a 56% increase in most property crimes (car burglary, car thefts) within about a two-block radius of emergency shelters. This same study found these crimes could be mitigated with sufficient presence of security and law enforcement. Additionally, according to the National Health Care for the Homeless Council **(Appendix R)**, people experiencing homelessness are nearly 20 times as likely as the general population to be the victims of violent crime, supporting the community's concerns that an increase in the overall presence of homeless going in/out of Gateway will also lead to an increase in adverse impacts.

To help mitigate adverse impacts in an area already struggling with an overwhelming amount of existing homeless services, we propose an initial bed capacity limit at Gateway of 90 beds – providing for up to 15 families and 30 individuals. This bed capacity limit would be in place for Phase 1 of the City's opening of Gateway. Family & Community Services personnel have intended they would like to "start small" and phase in the numbers of people served. We believe this is the best approach to ensure success. We ask you to implement this bed capacity limit as part of their Conditional Use Permit approval. We propose that after 2 years, when the City has proven they can effectively serve our homeless population at Gateway and prevent adverse impacts to the surrounding communities, they may submit an application to increase their bed capacity numbers.

EVIDENCE: NEEDED IMPROVEMENTS TO THE OPERATIONAL PLAN

There are concerns the City does not currently have an adequate and developed Operational Plan, and we would request they have this in place when they apply for an increase in bed capacity.

1. Lack of an Established Operating Budget for the facility

Currently the City has what they refer to as a “placeholder” budget – this has been quoted as both 4.7 million ([at the Mayor's Press Conference on April 6, 2021](https://www.youtube.com/watch?v=0RvhP7JPZEU)) <https://www.youtube.com/watch?v=0RvhP7JPZEU>, and then more recently quoted by FCS director Carol Pierce as \$4 million (at a panel hosted by Indivisible Nob Hill on August 30, 2021). Both estimated budgets were quoted in relation to the current Operating Budget for the City's Westside Emergency Housing Center, aka the Westside Shelter, which does not provide the ‘wraparound services,’ resources, or personnel proposed for Gateway. Currently, the Westside Shelter provides limited services two days per week. It does not have a commercial kitchen or many of the amenities the Gateway intends to provide.

From Indivisible Nob Hill meeting held on 8/30/2021 with a panel of City representatives and Neighborhood Association representatives, the question on the budget was presented by moderator, Rayellen Smith:

Smith: “What is the operational budget and where is the money coming from?”

Carol Pierce, Director of FCS, responded with the following: “We needed to put a Placeholder in this year fy 22 city budget. We used our budget from the westside for what that includes,....replicating west side budget That was the best model we had the west has its own budget and then we were replicating that number to have something in the fy 22 budget”.

Smith confirmed the following: “There is 4.7 westside and 4.7 gateway” Carol responded “Yes, and that does not include... capital money...But primarily for operations the answer question it is federal fund dollars.”

As a significant portion of the operations appear to depend on federal funding, what happens if these funds are not renewed every year? What are the City's plans to secure more funding? What contingency plans is in place?

Given the unforeseeable changes to access to federal funds, we feel the city needs the opportunity to plan a budget, not just a placeholder, and needs the time to develop future funding sources for this facility.

2. Shortage of Providers in NM

There is an extreme shortage of providers in behavioral health, medical health, and case managers/social workers in the state of New Mexico.

Recently a [Kaiser Family Foundation study](https://www.kff.org/other/state-indicator/mental-health-care-health-professional-shortage-areas-hpsas/?currentTimeframe=0&selectedRows=%7B%22states%22:%7B%22new-mexico%22:%7B%7D%7D%7D&sortModel=%7B%22colId%22:%22Location%22,%22sort%22:%22desc%22%7D#notes), <https://www.kff.org/other/state-indicator/mental-health-care-health-professional-shortage-areas-hpsas/?currentTimeframe=0&selectedRows=%7B%22states%22:%7B%22new-mexico%22:%7B%7D%7D%7D&sortModel=%7B%22colId%22:%22Location%22,%22sort%22:%22desc%22%7D#notes> **(Appendix I)** indicated that New Mexico has an **87% deficit in mental health professionals, and a 76% percent shortage for primary healthcare professionals**. The 2019 report “Provider Shortages and Limited Availability of Behavioral Health Services in new Mexico's Medicaid Managed Care” by the Office of Inspector General of the U.S. Department of Health and Human Services also details our provider shortages **(Appendix P)**. When asked about obtaining enough providers in this deficit environment, both the Mayor and FCS Director Carol Pierce have stated that an RFP would be put out. This does not provide an adequate answer to the very real issue that the providers simply *do not exist*.

Since 2019, the City's Westside Shelter has experienced changes that include being open year-round and operating 24/7, providing behavioral healthcare and medical healthcare *only two days per week*, in addition to case management and with NM Workforce Connections providing career counseling. Given the City's inability to provide more care at their current emergency shelter facility, there is serious concern they will be able to provide the care they are promising at Gateway.

In addition to the Behavioral Health services the City has stated they intend to provide at Gateway, another component of the Gibson Health Hub that will be feeding into the shelter services of Gateway is the medical respite program. FCS is currently slating 50 beds for medical respite, though based upon current zoning, the allowable number of homeless respite beds is unlimited. The unhoused respite care patients will need be supplied with supportive care once they are able to leave the respite setting, and it is anticipated they will require the services of the Gateway center. Due to the limited behavioral health, medical, and casework providers, having a large capacity of residents would lead to a shelter that cannot provide adequate services, and would result in a dangerous environment for the City's most vulnerable.

The severe and potentially dangerous deficit of medical providers in the state, along with the state's track record of contracting out lower-tier providers through their RFP process, is demonstrated by the deaths of nine inmates at Bernalillo County Metropolitan Detention Center (MDC) from August 2020 to January 2021. Six of these nine deaths occurred during detox, all while under the medical care of contracted provider Centurion. Centurion is currently facing 18 lawsuits and has vacated their 4-year contract 2.5 years early. Negligence and understaffing have both been reported as contributing to preventable deaths. **(Appendix J, K)**

Lawsuit filed in death of inmate at Bernalillo County Metropolitan Detention Center, By Elise Kaplan / Journal Staff Writer, Published: Friday, July 23rd, 2021 at 6:50pm; Updated: Friday, July 23rd, 2021 at 9:54pm

...The family of one of the people who died while in custody of the Metropolitan Detention Center last year has filed a lawsuit against Bernalillo County, the jail and the medical provider and staff alleging medical malpractice and negligence led to his death.

He was one of nine people in jail custody to die in the course of a year – a dramatic spike over previous years. While the causes of death varied, six appear to have occurred while inmates were detoxing from drugs or alcohol or in medical units – all under the care of medical contractor Centurion Detention Health Care.

*... Last spring, after the Journal published an article on the increase in deaths at the jail, **the county said it “expressed concern to Centurion over staff vacancies and continuity of care”** and asked the company to respond. Instead, Centurion terminated its contract more than a year early.*

...“I think there’s definitely a pattern, it’s more than just (deaths while in) detox or any of that,” Collins said. “It’s a pattern of gross neglect, gross medical neglect.

Shortages of behavioral health providers are not a new problem in New Mexico. Lisa Huval, deputy director for Housing and Homelessness for FCS has stated the “dismantling” of our behavioral health infrastructure can be traced back to 2013 **(Appendix L):**

“NM’s rise in homelessness highest in the nation,” by Rick Nathanson / Journal Staff Writer Thursday, January 9th, 2020 at 9:41PM

“One of the driving factors in the increase in chronically homeless people in New Mexico is what happened to our behavioral health system under the previous governor, with the dismantling of the behavioral health infrastructure as we knew it amid accusations of Medicaid fraud,” Huval said. “This forced a number of providers to close their doors and caused lots of people to lose access to services. In many ways, we’re still recovering from that.”

In 2013, 15 behavioral health providers were shut down by the state Human Services Department after an audit alleged fraud. After a lengthy investigation, Attorney General Hector Balderas' office eventually cleared all 15 providers of any wrongdoing.

Another part of the story, said Huval, "is our state's struggle with funding and supporting behavioral health programs at the scale they're needed, and with folks being able to get into housing and being able to stay in housing."

As the state has not been able to increase the numbers of behavioral healthcare providers to sufficient levels over the last eight years, there is no indication there will be an adequate number of providers to administer the necessary care for a large-scale overnight shelter. Therefore, in addition to our concerns re: mitigating adverse impacts, we strongly feel the shortage of providers in our state presents strong evidence to support limiting bed capacities at this facility.

3. Transportation to/from Gateway

Transportation services for the homeless do not appear to be well developed. The City has stated it takes over one million dollars to transport people to/ from the Westside Shelter, which includes both residents and various providers. Even with this budget, the Westside Shelter has limited transportation times and abilities, reducing residents' access to services at the Westside Shelter and with other providers. **The City has yet to develop a fully operational 24-hour transportation system** to transport people to/ from services to where they seek shelter.

While the city has had ample opportunity to provide comprehensive transportation for the homeless to be able to access services and housing in a safe manner, they have not demonstrated they are able or willing to provide these necessary services, which will be especially important to the success of the Gateway Center.

The City has stated they intend to utilize the current shuttle system, partner van carriers, and expand the public bus routes to provide more transportation options for Gateway residents. **But given the shuttle system's current limitations, and with no detailed plan for added bus routes and expansion, this presents concern for how adequately transportation systems will serve the homeless.** Without a reliable and easily accessible transportation system in place, residents and prospective residents of Gateway will more likely be left to their own devices, leading to harmful outcomes given the traffic dangers of Gibson Blvd, and the probability of overflow into surrounding neighborhoods.

We request that the City have a fully developed transportation plan of service in place and implemented prior to opening Gateway. This will ensure both the homeless and the surrounding neighborhoods do not experience significant adverse impact due to incomplete services being provided.

Background:

Prior to the COVID Pandemic in 2019, the shuttle to the Westside Shelter picked up people at Coronado Park (near 3rd St. and I-40) and Hope Works Day Shelter at 1301 3rd St NW (District 2); and in the latter part of 2019 additionally began picking up people at God's Warehouse at 8011 East Central Ave. NE in the International District (District 6).

During the COVID Pandemic, the number of pickup locations were increased to include five additional locations, four of which are in District 6, specifically in the International District. Three of these four additional locations in the Int'l District (listed below) are all at public parks, two of which are directly adjacent to Middle Schools, and one that is four blocks from an elementary school. All of these are within 1.5 miles of proposed Gateway Center **(Appendix T).**

1. Steelbridge (for women and disabled guests only) at 2021 2nd St NW (District 2)
2. First Nations Community Healthsource at 5608 Zuni Rd. SE (District 6)
3. Wilson Park, 6000 Andersen Ave. SE, located next to Wilson Middle School (District 6)
4. Phil Chacon Park, 7600 Southern AVE SE., located next to Van Buren Middle School and 5 blocks from Emerson Elementary School (District 6)
5. Jack and Jill Park, 433 Arizona St. SE, located 5 blocks from Emerson Elementary School (District 6)

Therefore, during the COVID Pandemic, for transportation pickup to the Westside shelter, the pickup locations statistics were as follows:

Three pickup locations were in District 2. Of those locations:

- One was at a public park
- Two were at a day shelter or food/supply pantry and soup kitchen: Hope Works Day Shelter, 1301 Third Street St NW, and Steelbridge, 2021 2nd St. NW (also located near The Rock, 2400 Second Street NW, which provides meals or similar service).

Five pickup locations were in District 6. Of these locations:

- Two are located at parks next to middle schools
- One was located at what is apparently a children's park being called Jack and Jill Park located 5 blocks from an elementary school.
- One is located at a soup kitchen/day shelter
- One is a healthcare services provider

Current pickup locations are not totally clear. The pickup locations described above changed after a neighborhood input meeting in June, in which FCS Director Carol Pierce was surprised to hear from a participant that all these pickup locations were still active – she responded that she would look into it. Subsequently, it appears that the number of stops have been reduced, though it is not necessarily clear where the new pickup locations are.

Furthermore, given the public safety issues already detailed in **Section 2: City's Track Record in Mitigating Adverse Impacts in Neighborhoods with Homeless Services (Item #s 2-4) pg. 4**, and further detailed in **Appendices B, D, E**, we request that all schools and public parks be excluded as pickup and drop-off locations for the City shelters.

4. Transition of Residents from Gateway Shelter Into Housing

Below is a question presented by Councilor Davis to Carol Pierce, dated March 25, 2021, 6:43 PM re: the need for housing units (excerpt of communications appears below; full communications attached as **Appendix M**)

Councilor Davis, Question 6: I have continually asked FACS to develop a long-term housing plan, with funding options, to meet our need for more than 800 new supportive housing units. During

our most recent council meeting, Deputy Director Huval told the council that FACS could spend more money if allocated. CAO Nair quickly added that the administration did not believe it could.

An example of the city's challenges with getting existing providers to agree to take on more housing obligations – even with funding provided – is revealed in this Albuquerque Journal article from October 7, 2020 **(Appendix N)**:

“City leaves \$700K in housing voucher money unspent” ALBUQUERQUE JOURNAL By Jessica Dyer / Journal Staff Writer, Wednesday, October 7th, 2020 at 6:26PM

...Bottom, executive director of Vizionz-Sankofa, has been working with the homeless population in her area, including trying to get them housing. She said she cried when she heard the city finished the last budget year without spending \$700,000 it had available for housing vouchers.

...Bottom learned about a city-funded housing voucher program and went through special training required to get people on the waiting list. Working last fall and winter – often out of a Southeast Albuquerque soup kitchen – she helped an estimated 35 people complete the survey needed to get onto the ‘coordinated entry list.’

...To this day, Bottom said no one she helped has obtained a housing voucher.

So she was particularly rankled to learn recently that the city ended the 2020 fiscal year on June 30 with about \$700,000 in unspent housing voucher money. By city calculations, that is enough to support 51 different households for a full year.

...And Albuquerque city councilors are also raising questions about another \$2 million they had allocated last year for additional housing vouchers. The council approved the appropriation in the spring of 2019 at Mayor Tim Keller's request.

Less than \$100,000 of that money was spent during fiscal year 2020, in part because the city could not find contractors to distribute the vouchers that quickly.

Lisa Huval, deputy director of housing and homelessness inside the city's Family and Community Services Department, said there are multiple factors at play.

The unspent \$700,000 was due largely to understaffing within one of the 10 different organizations the city uses to administer the vouchers. Huval declined to identify the vendor...

This additionally demonstrates the city's need to develop a working budget and plan to demonstrate they can properly administer this facility and transition people out of the shelter and into housing before they are given the opportunity to have an overnight shelter capacity of more than 15 families and 30 individuals.

EVIDENCE SUPPORTING LIMITS ON BED CAPACITY

On September 4, 2021 it was announced via the Albuquerque Journal that the City is looking to accommodate up to 100 individuals and 25 families (upwards of 200 people). District 6 Councilor Pat Davis shares the concerns of his constituents, and has persistently asked FCS how they will adequately serve the proposed number of Gateway residents given the City's track record thus far:

From communications dated March 25, 2021, 6:43 PM from Carol Pierce, Director, to Councilor Davis: **(Appendix M)**:

*Councilor Davis Question 2: ... According to the City's own powerpoint presentations given by FACS to community groups and the city council, the "gateway model" is designed to serve as a "no wrong door" entry to services where an individual is matched to a social worker and services to address their issues, assist with eligibility for programs (including housing) and place that person into long-term supportive housing. While FACS has publicly said this would take anywhere from 14-30 days per person, a gateway center with 175 on-site residents would require **more than 20 social workers** and 175 housing units to be available when the center opens. FACS is not prepared to offer either (as you recall, FACS had problems getting existing providers to agree to take on more housing obligations as recently as last December).*

1. The only way I see serving 175 people at Gibson is by serving 175 per year, or about 15 per month. That is a doable load for a gateway model. Beyond that, we appear to be designing a system for warehousing people without providing services. Please explain how FACS will support the persons it intends to serve and how they will guarantee those services and lengths-of-stay will meet the gateway standards the public voted for when they approved funding for building this type of center.

Ms. Pierce's response: "We are still committed to the "no wrong door" strategy and to connecting each person who enters seeking emergency shelter beds with supports and services. More discussion is needed; however, all of our studies and input concur we need a mix of services that will help people stabilize, including case management services, housing navigation, assistance applying for disability, and connection to the workforce. Every person who come into this Gateway Center will be unique and will need their own, individualized exit plan into housing. Some people will need a rapid rehousing or a permanent housing voucher, but there also are other affordable housing options in our community. In an exit plan into housing, the goal will be to determine the mix of support that will serve that person the best. For example, some people will have a job or be able to start a job quickly and only need a security deposit and first month's rent. Some people may need to be referred to a residential treatment program. Some people are not going to be a good fit for a housing voucher and will need long-term care. We have a goal that every individual who comes to the Gateway Center will exit to a more stable housing destination within 90 days."

In order to accommodate the intentions outlined above by Ms. Pierce, there needs to be adequate case managers, behavioral health providers, treatment options, and housing resources. Without the City having a realistic and comprehensive Operational Plan and budget, this is not attainable. Currently the city/county government has demonstrated they are not equipped to provide adequate health and behavioral healthcare to persons in need

LEGALLY-BINDING AND ENFORCEABLE GOOD NEIGHBOR AGREEMENT

One of the most critical terms the neighborhoods surrounding Gateway have requested as part of the applicant's Conditional Use Permit approval is a legally-binding Good Neighbor Agreement. When discussing and addressing questions re: what the Good Neighbor Agreement will look like and how it will work, FCS Director Carol Pierce has repeatedly referenced the existing Good Neighbor Agreement between Wells Park Neighborhood Association and Hope Works downtown. The problem with this, though, is that it is not a legally-binding document – there is nothing to hold the provider accountable.. And its lack of effectiveness is revealed in the severe adverse impacts Wells Park suffers as cited in the crime and violence which regularly Coronado Park and the surrounding area. Given that the facility in which Gateway will be housed will also house multiple other providers, and that the adjoining neighborhoods exceed one NA, the very nature of the Good Neighbor Agreement will need to differ from the agreement Pierce references.

Furthermore, given the propensity for overnight shelters and homeless service providers to create adverse impacts in the surrounding neighborhoods, and given the City's track record on mitigating these

adverse impacts (cited previously), it is necessary for the neighborhoods surrounding Gateway to have legal recourse which will hold the City as property owner accountable.

Residents of the communities surrounding the proposed Gateway site have already shared with the City most of the terms they would like to see incorporated into a Good Neighbor Agreement **(Appendix S)**.

It is also critical that outlined within the terms of the Good Neighbor Agreement that any legal fees or costs for mediation (not a city hearing officer) and district court shall be the responsibility of the City of Albuquerque so as not to exclude neighborhoods from participating in their government due to lack of financial resources and abilities.

CONCLUSION

In closing, as an adjoining neighborhood of the proposed Gateway center, we understand the ideals behind its conception and want to ensure its success. Our objective is to work with the City so that our neighborhoods do not experience significant adverse impacts due to insufficient mitigation from the operation of Gateway as it provides the services our unhoused citizens so desperately need. In the body of this document, we have outlined evidence and suggestions to work toward this end, and our key requests in granting approval of their Conditional Use Permit (after they have rectified their errors of IDO protocols and procedures and complete the submission process adequately) are as following:

- Given their track record in mitigating significant adverse impacts of the unhoused, we request for the City to wait and apply for their Conditional Use Permit once the UNM Study and evaluation of adverse impacts is completed so it may guide the FCS in employing best practices to mitigate adverse impacts to our neighborhoods.
- We request additional necessary improvements to their Operating Plan – including an established budget which is in line with the intended services and staffing for the facility, and which also takes into account the shortage of providers in our state and creates realistic plans for personnel and treatment; we also request the development of a comprehensive 24/7 transportation system to get residents to/from Gateway, and a budget and strategy with enlisted providers to transition residents of Gateway into housing.
- We request reasonable limitations on bed capacities to help ensure the City phases in the number of people they can realistically and adequately serve at Gateway, while also minimizing the significant adverse impacts to our neighborhoods.
- We request a Good Neighbor Agreement that is legally binding and holds the City accountable, and for which any legal fees and mediation will be the financial responsibility of the City. To ensure the terms of the Good Neighbor Agreement are adequately followed, we also want to mandate a Community Oversight Committee as part of the Agreement.

APPENDIX A

CITY OF ALBUQUERQUE LAND USE FACILITATION PROGRAM PROJECT MEETING REPORT

Project Number: N/A – Pre-Application Meeting
Property Description: 5400 & 5006 Gibson SE; Tract A-1-A-1-A Plat of Tract A-1-A-1-A Lovelace Hospital (being a replat of Tract A-1-A-1 & a portion of vacated Ridgcrest Drive SE), containing 20.4232 Acres
Date Submitted: June 24, 2021
Submitted by: Jessie Lawrence and Jocelyn Torres
Meeting Date and Time: June 22, 2021, 5:30 PM
Meeting Location: Online via Zoom
Facilitator: Jessie Lawrence
Co-facilitator: Jocelyn Torres

Parties:

- **Applicant:**
 - City of Albuquerque Department of Family and Community Services
- **Agent:**
 - Consensus Planning
- **Affected Neighborhood Associations (per City of Albuquerque notification requirements):**
 - District 6 Coalition of Neighborhood Associations
 - South San Pedro NA

Background/Meeting Summary:

Applicant requests Zoning Hearing Examiner approval of a conditional use to allow an overnight shelter in a portion of the Gibson Medical Center at 5400 Gibson Blvd. SE, part of the Gateway Center at the Gibson Health Hub (referred to as the Gateway Center throughout this report). This was a pre-application meeting.

At the meeting, participants expressed a number of concerns about the planned project, and also expressed frustration and a lack of trust with the planning, process, and communication so far. Some participants said that they did not want the Gateway Center in this area or that this center should serve only the local area, and other areas of the city should have to support a greater share of the homeless services. Others said that they needed more information and discussed the need for more data, the complete operations plan in writing, information in writing about the number of people to be served, and information about the planned providers. Others expressed concerns about crime, security, bathrooms, pedestrian traffic, and vehicular traffic. Others requested more information about how individuals would transition out of the Gateway Center and where the transitional housing would come from. Others expressed concern about the Gateway Center being a magnet drawing homeless people to the community, and also asked about homeless people who might seek services but not want shelter. One person pointed out the need to work with the VA Hospital and veterans, and one person suggested a written Good Neighbor Agreement between the neighborhoods and the City.

City staff answered questions and responded to the concerns during the meeting. See Meeting Specifics and the Zoom Chat Appendix for a summary of all of the questions and comments discussed.

As follow-up items, the applicant and agent agreed to share the slide presentation, to provide information about the locations of the 19 public restrooms throughout the community, and to look into the question about what would happen with the conditional use if other tenants wanted to add overnight uses. They also said that the operations plan would be ready before the planned August 17 ZHE hearing, and the conditional use request materials would be sent to the neighborhood associations when they are submitted.

Outcomes:

- **Areas of Agreement:**
 - None noted among all meeting participants.
- **Unresolved Issues and Concerns:**
 - Several participants discussed frustration and a lack of trust in the City, in particular because of the lack of written plans and commitments and changing information about who the Gateway Center would serve.
 - Some participants said that they did not want the Gateway Center in this area or that this center should serve only the local area, and other areas of the city should have to support a greater share of the homeless services.
 - Some participants said there should be more data and information shared with the local residents in writing, including the operations plan, before a conditional use request is submitted.
 - Concerns discussed about the operations of the Gateway Center included:
 - Crime
 - Security and adequate police service
 - Public defecation and the number of available public restrooms
 - Pedestrian traffic
 - Vehicular traffic
 - Some participants asked about the available transitional housing and suggested that there is not enough for the Gateway Center's plans, and noted that there needs to be planning for a limited time of services and a transition out of homelessness.
 - Some participants expressed concerns about the Gateway Center making the neighborhood a magnet for homeless individuals, and also asked about homeless people who might seek services but not want shelter.
 - One person pointed out the need for better coordination with the VA Hospital and veterans.
 - One person suggested a written Good Neighbor Agreement between the neighborhoods and the City; others said that such agreements have been hard to enforce in other places.

Meeting Specifics:

Proposed Meeting Agenda:

Topic	Person	Approximate Time
1. Welcome/introduction	Facilitator	5:30 – 5:40

2. Overview of the Gateway Center at GMC, with a focus on the conditional use request	Project team	5:40 – 6:00
3. Clarifying questions about the overview presentation	All	6:00 – 6:10
4. Questions/comments: Gateway Center operations	All	6:10 – 6:40
5. Questions/comments: Gateway Center coordination/communication with neighbors	All	6:40 – 7:00
6. Questions/comments: Conditional use process, timeline, and criteria	All	7:00 – 7:15
7. Other questions and concerns	All	7:15 – 7:25
8. Brief summary and next steps	Facilitator	7:25 – 7:30

1. Overview of the Gateway Center:

- a. Carol Pierce, Director of CABQ Family & Community Services, provided an overview of the planned Gateway Center. (The term Applicant throughout the report refers to the Family & Community Services staff.)
 - i. The Gibson Medical Center was purchased on April 1, 2021 by the City of Albuquerque and is being referred to as the Gibson Health Hub.
 - ii. It is about 572,000 square feet.
 - iii. The vision is to provide health services to the surrounding community that promote healing and recovery, including but not limited to primary care services, inpatient treatment, behavioral health services, and shelter and services for people without homes.
 - iv. There are about 10 tenants there currently, in behavioral health services, employment, medical care, and other uses.
 - v. In Albuquerque, at least 1,525 people are in shelters or on the street each night, and at least 5,000 households experienced homelessness in 2020.
 - vi. Chronic health conditions are more prevalent with people who are unhoused. Typically their life expectancy is 12 years less than those who are housed.
 - vii. Medical respite is an important component of the health hub; it will provide short-term medical care for patients without homes who are too ill to recover in a shelter or on the streets, but who are not sick enough to be in a hospital.
 1. Respite beds are very limited in the community.
 - viii. The Gateway Center will be one part of the Gibson Health Hub, for people who are unhoused and need wraparound services to have a planned exit to services and stable housing.
 1. The Gateway Center will be part of a comprehensive system of services to link individuals with health care, employment, and permanent housing.
 2. It will be trauma-informed, which means that it is safe for people who want to secure a safe bed, and people are met where they're at so they can be connected with what they need.
 3. On site supportive services will be important, including peer support services, people with lived experience.
 4. There will be individualized transition plans to resources and stable housing.
 - ix. The operational plan, which is in development, includes services, policies, neighborhood, and other operational components. [The components of the operational plan were shared in the slide presentation.]

- b. Jackie Fishman, Principal at Consensus Planning, the agent for the conditional use (Agent throughout this report), explained the conditional use request and criteria.
 - i. The property is at 5400 Gibson Ave. SE and 5006 Gibson Ave. SE.
 - ii. The application will be submitted on July 6, and neighborhood association contacts will receive an email from Agent's office when that application is submitted.
 - iii. The property is comprised of two parcels totaling 20.84 acres.
 - iv. The existing zoning is MX-H, which allows an overnight shelter as a conditional primary use.
 - v. There are six criteria in the Integrated Development Ordinance for a conditional use. [The criteria were shared in the slide presentation.]
 - vi. There was pre-application notice on June 4, 2021.
 - vii. Application notice will be provided to the city-provided list of neighborhood associations and the District 6 Coalition, and notice will also be provided to other neighborhood associations in the area that have been receiving communication.
 - viii. The hearing will be on August 17, probably on Zoom.
 - 1. The ZHE planner is Lorena Patten-Quintana, lpatten-quintana@cabq.gov.

2. Questions and Concerns Asked During the Meeting

- a. Participant (P): My elderly parents were in their backyard when a man came and robbed them. If the mayor and others really want to house people, why not set up a facility in their neighborhood, and let them see how safe they feel? I'm not happy that my elderly parents were robbed in their own home.
 - i. Applicant: I'm sorry to hear that, and I hear how horrifying that is. I understand the concern about crime, but I want to decouple the idea of crime from homelessness. They are not one and the same. There are shelters in a variety of parts of town, and we have examples of it working. Barrett House, the Albuquerque Opportunity Center, the Brothers of the Good Shelter.
 - 1. P: I'm happy that works, so let's close the idea here, and let's move people into other communities where it works.
- b. P: We keep hearing the Gateway will be a slice of the Gibson Health Hub. How much space will be allotted for the Gateway Center compared to the rest of the health hub, and how much space will be leased out? How much space for the 50 respite beds?
 - i. A: The City has contracted with an architect and evaluation has begun, so I don't have an answer on the specific square footage. The analysis is occurring. There is space that could be ready for medical respite, maybe about 50 beds. With the existing tenants, about 25% of the overall piece, but other people are also inquiring about complementing the health hub. There is not a set square footage, but the analysis is underway.
 - ii. P: Do you know at this point how many beds you're planning on having? Do you have any maximum capacity in mind?
 - 1. A: We don't have a specific number in mind. It's not 500 beds, it's not that large, because we know that's not trauma-informed. We know we need to right-size this and work with local providers and those with expertise so people feel safe and have support.

- c. P: I hear a lot of talk about beds, but what about public restrooms in the neighborhood? We've already twice found human waste in our backyard, in one case someone who walked through while we were looking out our window. There's a dearth of publicly accessible restrooms and increased foot traffic will make it worse, and I wonder what your plan is.
 - i. A: There are about 19 restrooms that have been put up all over the community, added when facilities weren't open. I know that doesn't always address every need. There have been concerns about heat and water that have come in, too. That's what exists right now.
 - ii. P: Where are the 19 restrooms located?
 - 1. A: We can provide a map or list of locations. That can be a follow-up item.
 - iii. P: My other question is why is this focus entirely on services like jobs, health, and housing, and not about meaningful daytime activities? I recommend gardening. It's healing, it's trauma-informed, and I think it would heal rifts between the Gateway and the neighborhood.
 - 1. A: Thank you for that. We know the need for outdoor space. There will be services on site for people to access, and also part of what people will need to do is work on the pieces that are needed with the support of their case manager so they can ultimately transition to housing.
- d. P: The conditional use is granted based on a review of the potential adverse impacts to the use and any appropriate mitigations on nearby properties. I propose that it's premature to grant a conditional use because no adverse impact study has been completed. A shelter and housing services, especially one of this size adjacent to dense residential neighborhoods, should be required to consider specific impacts to neighborhoods and businesses. To date, the City has not requested a list of impacts, and I haven't seen any documentation that lists any adverse impacts. The City can't address issues they haven't found. The only adverse impact review is currently being conducted by UNM students, not professionals in the field, and isn't expected to be complete until 2022. Director Pierce has said she hopes to have the shelter operating in under a year. These are substandard requirements for such a project. The City has not requested concerns and no one conducting the research and UNM has shared the parameters of their study. This is not due diligence. The current information is not enough to allow the conditional use without the City and UNM providing details and operational plans needed and required for such a change in use.
 - i. A: The initial list of neighborhood impacts, on the website, came from the Homeless Coordinating Council and that group does have neighborhood involvement. We're adding additional people who want to be part of the neighborhood piece.
 - ii. P: We have had less than four or five neighborhood representatives in the entire three-year process. One person does not report out information to the rest of the neighborhoods, even though it has been requested. This is not enough community contact and input to say that the neighborhood is connected enough to these committees to actually have a voice.
- e. P: I have concerns about walk-in services and the increase in pedestrian traffic. Are you anticipating an increase in pedestrian traffic? With that, I have concerns about how you are going to address pedestrian traffic and its impact on our neighborhood, including toileting, encampments, and trash. As a suggestion, have you evaluated fencing the

facility and eliminating pedestrian traffic, and having people transported into the Gateway Center to eliminate the pedestrian traffic and the impact and burden on our neighborhoods that comes with that?

- i. A: We think access will be two ways. One will be referral by different partners, and they could have transportation to get there. There could also be someone who wants to come and access a service. We've heard from the neighbors about traffic on Gibson and pedestrian safety, and we will work with DMD and APD to work on that. The Gateway won't be a day shelter, where people come, get a meal, and then leave again. People will come and stay and get the services they need.
 - ii. A: Transportation is a key part of making this a success, making sure that people who want services have transportation right to the front door. There are other shelters in the community set up that way, and that works well for those neighborhoods. We also want to make sure that homeless people in the International District can access a shelter bed, which is good for them and for the neighborhood.
- f. P: Will the submittal on July 6 include the neighborhood associations?
- i. Agent: Yes, it will go to the ZHE and to the neighborhood associations.
 - ii. P: At that time, will we receive an operational plan in writing? One of the requirements is that it will not create significant adverse impacts on adjacent properties or surrounding communities. I don't know how we could have that without an operational plan in writing, something that could serve as a written commitment.
 - iii. Applicant: We do have an operations plan that we are working on. The elements that are relevant to the conditional use will be included in the application.
 - iv. Agent: It won't be the complete operations plan, but it will be the parameters.
 - v. P: Will there be a final plan by August 17, the hearing?
 1. Applicant: I think we will have a fleshed-out operational plan that we will share with the neighborhoods.
- g. P: I saw that other locations were considered. But what was considered in Albuquerque Acres or High Desert or far northwest Albuquerque? HUD requires that you spread this around. There's a homeless shelter on Zuni, low-income housing, how many more of these do we get? What is the cap before the City says it needs to be other places to be fair and equitable?
- i. A: The City wants to continue to have a disbursed system, which is what we have now. We don't want one location, we want to continue to build multiple locations.
 - ii. P: How many are north of Menaul vs. south of Menaul? I bet they are disproportionately south of Lomas.
 1. A: Offhand, we have the Westside Emergency Housing Center, Joy Junction, AOC, Barrett House, New Day. Our shelter system is really disbursed in many locations throughout the city.
- h. P: The only reason why we have disbursed shelters is because a church can open a shelter, and most shelters are religious-run. The only one that's run by the City is the Westside shelter, so the City cannot control where they are. It's been said at previous meetings that it's not going to be 500 people, but the original model was 300, and then 100-150. In a meeting in April, it was mentioned that there would be 175 people, 50 males, 50 females, 75 family members, plus 50 respite beds, so 225 people was planned

a month ago. UNM is doing research, but we're going to have the decision put in five or six months before we have that research.

- i. A: Not all of the shelters cited are faith-based, but you're right, faith-based partners have some abilities. City-run shelters are the Westside and what we're proposing with the Gateway. We know that we have to start small, and we've thought through what it means for a certain number of families or a certain number of individuals. Originally, when there was a single Gateway proposed at 300 beds, we got strong feedback about the importance of a dispersed system, so we backed off. We want to start small and know that whatever we do has to work on the impact.
- ii. P: Starting small is an issue because at this point, people keep talking about the Westside shelter, and when it closes, where are those 400 people going?
 - 1. A: We have no plans to close the Westside. On any given night we have about 500 people who need shelter beds, that was the study done. We don't want all of those at Gibson. The Westside is expensive, but that will be with us for the foreseeable future, because we need that capacity.
- i. P: I hear this site has 572,000 square feet, and we don't know how much of that is going to be devoted to tenants, to beds, to transitional vs. family, and without those numbers, I don't understand how there can be a conditional use proposal. It doesn't seem like the City has their proposal ready, they're just throwing a proposal out to the ZHE without the data. You do not have the data. I hear that tenants are interested, but we're not getting the data on who they are. Another reason I don't believe the City is ready to make this proposal is because of the statement that said there will be no adverse effect on surrounding communities. We do not have that data, and to put that in a report is a lie, to say there will be no negative effect. We have real life experience that says the complete opposite. We have people shitting in yards, breaking into property, but we don't care about personal experiences, and we have so many homeless people we're trying to take care of. Another reason I don't think the proposal is ready is because I heard there will be no negative impact on traffic. This is not true, and there is not data to support this. You're telling me the homeless are not traffic, and they are a lot of pedestrian traffic. Tenants are also traffic. When all of the components of the hub are in, the people that will provide services, every one of them is traffic. I think again that the proposal is not ready, you don't know who the tenants will be, you don't know how much traffic you're bringing in. In the end, what is going to happen is there will be 572,000 square feet, the tenants will drop out, and it will be used as a straight homeless shelter. I don't think this is fair to the homeless or to the community. Other things are the number of parking space, the pedestrian traffic trying to cross Gibson, the vehicular traffic trying to leave, knowing where public restrooms will be. The research needs to be there. There are these statements about dispelling myths, but it's not a myth if you don't have the data. You can say that crime doesn't follow homelessness, but you don't have the data, and real life experience says differently. You can say that if you give people a home that it will address their health issues, but I don't think that's true either and I'd like the research done. You should do the research before this proposal is submitted on July 6.
 - i. A: On the safety aspects, Albuquerque Community Safety, we're addressing the safety and outreach components. We have a variety of outreach teams, and this

is part of what is critical to connecting people to the services they need, and out of the neighborhood to the services.

- ii. P: "Meet them where they're at" doesn't necessarily mean bring them in to meet them. We can provide these services where they are.
- j. P: I want to speak to the 500 number. For the three years that I've been following this, the 500 number has never been bandied about until recently. 300 was what we heard, then dropped to 30, then back to 175 plus respite beds, which is inching back up toward 300. It seems like by saying, "It's not 500!", we're supposed to say, "Great!" That's a concern. Mayor Keller also said this would never be a walk-up shelter or a meal site, and I can't help but notice that's creeping in more; if people walk up with a cart, they won't be turned away. There's a magnetizing effect, and when you put this in, people will be coming from other areas of the city to avail themselves of it. What will the parameters be to know if people are just there for a meal and a bed or for the other services? It doesn't sound like there's a way to pin them down. It seems like every meeting is a different story, that tells me that no one really knows what they're doing.
 - i. A: We plan on the people that are referred will be referred by other providers, and there will be transportation for them to the Gateway. We know that we will have to figure out if someone comes up with a cart, what we will have to do to get them out of the neighborhood and see what services they need and how we can connect with them. We want this to be referral, and we are also that people could walk up. We also want to take care of the pedestrian safety and concern mentioned. There will be food at the Gateway, for the people who are part of the Gateway program. It's not a day shelter, where everyone can come for food and then go back out in the neighborhood.
 - ii. A: I think we are working through what the right balance is. We want to reduce the impact on the neighborhood, like the pedestrian impact. But it's also not good for the neighborhood that people are living outside in public spaces, and we want to create opportunity and a path for those folks. That is good for the community.
 - iii. P: I love the idea that we'll be able to relieve the neighborhood of burdens, but we still haven't addressed what will be done about the people magnetized in who don't want to be part of the program or services, who want to stay on the streets or in the parks. We have a magnetization effect here in the International District. I've worked on a map and through my research, in District 6, not including the Gateway, there are 37 services, not including Oxford House and federal halfway houses. The nearest to us is District 2 at 15 services. District 8, 4, and 1 only have one service, and Districts 3 and 5 have zero. This is magnetizing, redlining a district, and overburdening one place. This is our neighborhood and we are getting shit on. It's hard to think that this is going to be a solution to our problem. District 2 is in a lawsuit with the City. Is that our future, too?
 - 1. A: We want to get more people into shelter beds. I understand that people in the neighborhoods are concerned. We have to start somewhere, and we do need to get people off the streets and connected to what they need. I don't think it's a magic bullet, but it's a piece of the solution. We know that we need to start small.
 - 2. P: We all agree we need assistance for the homeless. But you are targeting one area to the benefit of other areas of town. I can't figure out why we couldn't start small somewhere else, rather than starting

small on top of all of the services and programs that are already here. It's hard to have faith when there are two prime examples of city failures with trying to help the homeless. I'm afraid that's going to be what happens here, especially since we don't have real studies, impact studies, an alternate to the police force. We're talking about things that are coming, but we feel like we have a target on our back. How much is too much before we get overwhelmed and become a barrio by city design?

- k. P: I've participated in about everyone one of these input opportunities. I represent the Parkland Hills neighborhood association, and can just about throw a stone from by property to this facility. I represent 1600 households, more than the number of individuals in need of a bed throughout the city on a given night. Tonight, you've been hearing a strong undercurrent that we do not trust you to carry out an effective and impactful plan that protects the surrounding neighborhoods. What I have seen tonight is an iteration of the same presentation I've seen several times before, even after other input sessions. We still do not have an operational plan in place, which tells me the public input hasn't been compiled or incorporated into an operational plan, which is supposed to be submitted in 2 weeks as part of the conditional use. This is putting the cart before the horse, and we don't have any idea what to expect from this facility. It is time for answers, time for written operational plans that show us that we can trust you to implement and execute an effective and impactful plan. There are unsheltered individuals in my neighborhood and I consider them my neighbors, and I want to see them helped. Thus far, we've been given verbal assurances, sometimes contradictory, which does not inspire confidence, and that's why you're hearing such strong opposition. It's not the theory and the principle, but it's the putting the cart before the horse. We need answers and we need them now in order to have community buy-in. My suggestion is a legally binding Good Neighbor Agreement with the City of Albuquerque, and the enforcing organization for that needs to be a community oversight council including the health care providers in the facility, residents of the surrounding neighborhoods, and potentially graduates of the facility, operating where the executive director will report to the council and if certain metrics are not being met, there will be corrective actions. And this needs to be put in writing now, because the feeling is this is being rammed down our throats. I appreciate this public input, but we can't take it seriously or trust you when we don't have concrete results shown, unless we have something in writing. Unless we get a positive response and statements in writing, we have no choice but to oppose.
 - i. A: I agree, and that's what the operational plan will include. We will have that plan including input by the August 17 date.
- l. P: One of the things we haven't done at these meetings is write down the proportion of people who are actually living in this neighborhood. My concern is overinflated numbers; don't say there were 75 neighborhood members at this meeting, because the number is not actually reflective of the number of people in the neighborhood who participate, and I don't want you to misuse those numbers. That gets to the trust issue. You've discussed the local area, but you haven't discussed how to decamp from that area. Where will the affordable housing be? Where will the transitional housing be? How will you get people to those places in a timely and reasonable fashion? What are we going to do about the people who don't want housing, who don't want to be part of the community in a civilized manner but want to live their lives as they choose, in

homelessness? That's an uncomfortable thing that no one has been willing to talk about except David Sisneros. I worry that as you build more, people will come and hang out, and then what will happen? I need to know about the decamping strategies. That should be central in the operational plan, not just beds and services, but where people will go next.

- i. A: The vast majority of people experiencing homelessness want a home, and we know that different things work for different people. The main issue is not that people want to be homeless, but that there's not enough housing with supportive services to meet those needs, which is why the strategy is not just the Gateway, but also in supportive housing as well, and the City has increased its investment in supportive housing by 45% since FY18. We may focus in the wrong place when we focus on the small portion of homeless folks who want to be homeless.
 - 1. P: That is condescending to me, that is not addressing a reality that many of us see every day.
- ii. A: What we're talking about is, there will be people that no matter what we do as a community, no matter how we work to meet people where they're at, we won't succeed with everyone. I appreciate you raising that. Safe outdoor space is one strategy. I appreciate the comment.
- m. P: I want to address that multiple neighborhoods are affected here. At one of these meetings I said, please keep our parks safe, and the moderator asked which park. It's not one specific park. We need our neighborhoods to be safe. I don't think the City understands how many neighborhoods are affected by the proposal and how much crime we're already subjected to. That's an important point for the people who sit downtown, who don't seem to know the area very well sometimes. I work at a library a few blocks from a homeless shelter, and it's not homelessness per se that's the problem, it's the substance abuse, mental health problems, there's an ecosystem around the shelters involving the sale of drugs and people who prey on the homeless. The City has to acknowledge that. Some people do have kind of a hobo lifestyle, they want to live that way. I hear "our homeless neighbors," but the truth is this shelter will bring people from all over the city. They're humans who need help and we need to find a way to help people as a city, but I hate the spin that we're hearing, the lack of plans, and how the story keeps changing. That's why people are so frustrated.
 - i. A: Thank you for that comment. We do understand that it's neighborhoods, and that it's parks.
- n. P: About public safety in and around the center – is APD or a private security firm going to be doing that security?
 - i. A: Right now, there is 24-7 security on a team there, and that will continue. APD is part of our conversation for the operational plan, as is the Albuquerque Community Safety Department.
 - ii. P: Currently, the southeast APD are understaffed already. Is there a plan in place to hire more officers, equivalent with the population that will be coming? Also, what is the training level involved for this current security that will be in and around the center? Any person on the street has already had to make the choice about self-defense and protecting themselves, and when they get contacted to receive services and brought to the center, what kind of process would be in place to ensure the safety of the residents inside, the safety of the individuals, and the safety of the surrounding communities? You're going to

have families coming in. Is there a process to screen sex offenders who are not currently on supervision?

1. A: APD is working with us on the safety and security. I don't have an answer about an added number of police. There will be pieces in the plan. In other facilities, we've focused on de-escalation training as a key piece. About the sex offender question, families will not be in the same place and single women or single men. We want to keep people safe.
 2. A: We want to make sure we have a trauma informed care approach, mental health first aid, suicide training, and motivational interviewing as part of meeting people where they are.
- o. P: The proposal should not be submitted until operational plan for security is formalized into plan. And the statement that there is going to be no increased traffic effects nor adverse effects on neighborhoods is corrected.
- i. Agent: The slides that I went through are the criteria from the IDO. I wasn't saying we have addressed those yet, but those are the criteria that we have to meet for a conditional use to be approved by the ZHE.
 - ii. P: How are you going to have that data by July 6? How will you know there are no adverse effects on neighborhoods and no increased traffic?
 1. Agent: Where it talks about pedestrian and transit, that's about connectivity, that it won't negatively impact that connectivity. We are working hard to address those criteria by July 6. That letter will be shared with the neighborhoods when we send out the notification.
- p. P: The problem is that the City has a credibility problem with this district. I can go down Central and see the shuttered businesses because of ART. They said it would be great and everyone would love it and there would be nothing to worry about, and that's how I feel here tonight. We've been mischaracterized as folks who might be anti-homeless or against solving the problem of homelessness, and we're not. But we want to do our share, not everyone else's share. We're doing our share. The other thing that scares me is you saying you're going to start off small; I don't want you to start small, I don't want you to start at all. Can you guarantee us that the homeless population we're going to serve is going to be from this district? If we're serving families and homeless in this district, I think we could all get behind that. But if we're importing the homeless in to this facility, I think a lot of us are going to have a problem with it and do everything we can to make sure that whoever is elected is held accountable for that. The lack of planning and organization – I'm the vice chair of the state Democratic Party and you keep giving me more work to do. Also, I'm a veteran, and I use the VA Hospital, and a lot of my brother and sister veterans travel from around the state to go to appointments there, and often have to get there early. If we have a homeless shelter a stone's throw away from veterans who are dealing with PTSD, with substance abuse, how is that helping them? I thought last time we had a meeting, we had an agreement that the shelter would serve our district, but now I'm hearing something different again. I thought we were calling it the Southeast Gateway Center, but I'm not hearing that anymore. It's like building a plane while you're flying it, and that worries me. Will you also guarantee us a beginning and an end, that when someone arrives, a clock starts? I don't want a band-aid for this social problem, I want a cure, and I need the City's assurance that we're not just increasing the homeless population of this district.

- i. A: We don't think anyone's anti-homeless. The thinking that we had has been roughly 90 days, based on experience working with other providers. We think there needs to be a beginning and an end.
 - 1. P: Other parts of this are job training, CNM, Goodwill Industries. You've got the infrastructure in place, but I haven't heard anything about linking those things.
 - 2. A: Those are key. I wish but cannot guarantee that only homeless individuals in the neighborhoods are going to be served, but I do think there will be a positive impact for those who can get connected, get services, get off the street.
 - a. P: We need something guaranteed from the City that makes them a priority, that we solve homelessness in our neighborhood first. Or it's going to be ugly. We need something that's a guarantee that our district is going to be a priority.
- ii. P: I also have my question about veterans. I want to know that veterans will be addressed, or we'll be asking some very uncomfortable questions. What coordination has been done with the VA?
 - 1. A: There has been some coordination with the hospital, and we have to do more. You are absolutely right. Veterans are key.
- q. P: I too have very little confidence that the operational plan will be ready, and if it is ready, it won't be sufficient because of the lack of due diligence by the City. Who are the service providers? When can we see the agreements you have with some of the providers? In other meetings, we were told that services would be provided by agencies already leasing space in the GMC. These places are often full and have waitlists for people with court orders to enter, so I have a hard time believing they will just have open beds for the Gateway Center.
 - i. A: A list of service providers hasn't been identified yet. When the architect completes the assessment and space is identified, we will use a RFP process and put the specifications that we need. We're far away from that step. In terms of the existing tenants, we think there's the potential to connect people, and some providers have expressed interest in potentially expanding their footprint.
 - ii. P: I'd like to see the actual providers who are ready to go on this and what their plan will be, as soon as possible. I believe some of the frustration and anger is building because we lack a plan, and we know that once we get that plan, we still won't have the specifics, a real idea of how someone moves through the facility and who will be accountable and who we need to call.
- r. P: What other entitlement processes will this project undergo?
 - i. Agent: This is the main entitlement process. You normally go to DRB if you're building new square footage or have major public infrastructure. At a minimum, we will do a site plan administrative, a site plan approval process through building permit that will require notification of the neighborhood associations.
 - ii. P: I also wanted to clarify – I know who the partner providers will be is still a question mark, but how many other providers might there be in the facility that might also have overnight shelter beds? We see that with a couple of the current tenants. I'm wondering if that's something that's expected.
 - 1. A: There are about 100-120 folks getting overnight services with the existing tenants.

2. P: Because we don't know who the partner providers will be, it's an open question whether there might be more overnight shelter components? Will those beds be factored in to how many beds the Gateway Center is serving?
 - a. A: There are overnight beds with medical respite. When we do an RFP, we will be clear about the specific services. It's a question about the conditional use, if another tenant came in and wanted to do an overnight component with services, how that would relate to our process.
 - b. Agent: The conditional use process has its criteria and doesn't use a number of beds, though the IDO does have a distance between overnight shelters. If it's all part of the Gibson hub, it would all be part of the one overnight shelter. I can do some additional research where another tenant might also want to do overnight services.
- s. P: I'm a resident of Siesta Hills, a former board president of Siesta Hills, and the current chair of the Homelessness Solutions Committee. I'm also a One ABQ Ambassador. I think that's important; I love this city and I'm not trying to tear it down, but we need answers here. At the moment, we do not have enough transitional housing units to accommodate the number of people that the Gateway is supposedly supposed to serve. The City has not identified enough new housing units to serve those that they're proposing in this shelter. Director Pierce said that most folks will be approximately 90-day programs. If there are 350 beds in this facility turning over every 90 days, that means you would need transitional housing for 1400 residents per year, just from this shelter. That also means that the Gateway Center would serve almost every homeless resident in Albuquerque, just in District 6. If we don't have enough transitional housing in place prior to providing the services, the Gateway shelter will fail before it begins. We would be taking people in, but not having anywhere to place them when they complete their plan, and they will end up back on the streets with money and time wasted. Since this is not supposed to be the only Gateway in the city, I feel that much of the 572,000 square feet should be reserved for coordinated services, and District 6 should not have to shoulder more than 100 beds, especially considering how many indigent services and shelters the southeast already holds. I would ask that the transitional housing needed be set up in all other city council districts, outside District 6.
 - i. A: We do need the housing. We know that part of the \$14 million in the next budget year for transitional housing will be used for Gateway individuals. Addressing the housing options throughout our community is critical to this.

Application Hearing Details:

1. This is a pre-application meeting. Applicant plans to submit an application to the ZHE for the conditional use for the August 17 hearing.
2. Hearing Details:
 - a. The Zoning Hearing Examiner (ZHE) conducts monthly quasi-judicial public hearings regarding special exceptions to the Integrated Development Ordinance.
 - b. A special exception allows a property to develop in a way that is different from what the zoning of the property allows. Special exceptions include variances, conditional uses, and expansions of nonconforming uses or structures. After a special exception is filed,

all interested parties are given the opportunity to participate in a public hearing. All requests are given due consideration.

3. Hearing Process:
 - a. Comments from facilitated meetings will go into a report which goes to the Hearing Examiner.
 - b. All interested parties may appear at the hearing and voice their opinions or submit written comments prior to the day of public hearing.
 - c. The Zoning Hearing Examiner will render a determination of approval, approval with conditions, or denial within 15 days after the close of the public hearing. Determinations can be appealed to City Council through the Land Use Hearing Officer.
4. Any further questions or comments can be referred to:

Lorena Patten-Quintana
ZHE Planner
lpatten-quintana@cabq.gov

Names of Registered Attendees:

[Note: Approximately 98 people registered for the meeting, and as many as 75-80 participated in the meeting at the highest participation. This list reflects everyone who registered for the meeting.]

Julie Fulcher	William White	Steve Sacco
Raven DelRio	Jim Summers	Karen C.
Mary Collins	Kathy Summers	Brittany Costello
David Montoya	Candy Nartonis	Bernadette Hardy
Kristina Yu	Jackie Fishman	Reyna Juarez
Rita Giomi	Sonora Rodriguez	William Burleigh
Katy Fuchs	Bridget Llanes	Jeff DeBellis
Bobby Ehrig	Paula Metzner	Glory Juarez
Alexandra Paisano	Peter Kalitsis	
Aaron Moore	Melinda Frame	
Tamaya Toulouse	Vera Watson	
Julie Hinzman	Colleen Woods	
Sandra Perea	Maggie Silva	
Ruthie Bailon	Kathleen Pierson	
Mary Toponce	Karen Bonime	
Linda Schilling	Rachel Baca	
Patricia Saul	Carol Pierce	
Khadijah Bottom	Erin Engelbrecht	
Nicky Ovitt	Virginia Kotler	
Craig Ebersbach	Taylor Cook	
Eliza Martin	Sharon Wirth	
Greg Steiner	June Sutton	
Douglas Heller	Mary Rodriguez	
Ryan Kamm	John and Bernice Comstock	
Myles Padilla	Vincent Lavolpa	
Regina Mead	Jacquelyn Robins	
Calenda Wooten	Tony Johnson	
Christina Martin	Kenneth Sherrell	

Janet Benson	Janet Youngberg	
Dee Whitfield	Marit Tully	
Robert Pierson	M. Connolly	
Wallace Payne	Robyn Cruz	
Michael and Kathleen McBride	Kate Matthews	
Ruth Haest	Rob Leming	
Barbara Jay VeeVee	Michelle Meaders	
Rich Weiner	Patricia Willson	
Gilbert Ramirez	Janet Simon	
Lisa Huval	Aaron Nieto	
Myra Segal	Mandy Warr	
Bobby Sisneros	Frances Davis	
Gary and Lydia Rieg	Laura Calderone	
Debbie Purdy	Daniel McLaughlin	
Rod Reay	Catherine Farmer	
Jennifer Jones	Ryan Kious	
Tim Roberts	Valerie Wolf	

Appendix: Zoom Chat Comments

- Is anyone from the city of ABQ. attending this meeting?
- Can we please ensure to get a recording link for this meeting?
- Please let us know now, at the top of the meeting, whether a link to the recording will be made available either at request or on the City's website or otherwise. Thank you.
- Is the mayor attending this meeting?
- Please display screen with contact info for planner and yourself...Or place that in chat...or a link..thanks
- Do Not agree with Mayor's Plan to purchase facility and seek zoning change later.
- No - rammed down our throats, just like ART!!
- Nice job of changing name to change focus on fact that the bulk of this "hub" will be a homeless shelter...How many of the 572,000 will be devoted to tenants and how much to shelters.
- Can attendees please get a copy of this powerpoint? Thank you.
- I don't believe research supports that housing is the crux of the matter of why the disparity exists... Changing the housing is NOT going to necessarily change the disparity. Ask anyone in "inner city housing"
- Wow. At least double for all these problems and much more than that for most! must cost a lot more to the public to provide healthcare to unhoused than even it would be to provide housing.
- How many square feet would be to "medical respite?"
- That's wild. Just in the price for healthcare we are already paying to help unhoused it makes sense to provide housing! That graph makes it crazy clear
- How many square feet and personnel would be housed to provide employment services, behavioral health services, medical care, permanent housing?
- I do not believe respite use is compatible with family use. There is no clear end game/plan to achieve housing.
- I have not heard a plan...only a vision of "what we want" ..there is NO plan1
- It's the same powerpoint presentation over and over with no answers after three years.

- Good evening. Thank you for having this meeting and letting us participate. I live in the Downtown area. The downtown area is bearing the brunt of the homeless population ills, although this issue is a social issue that needs to be addressed and borne by all areas of the City. The homeless need medical, health, and daily living attention. I am in favor of this project and believe it is well-planned and the area of town in which it is located is great. Bus service is available to this facility. Medical services are there already, and it seems like the supportive services would be very well utilized.
- Operational components needs to be resolved before further movement.
- Do we have permission to record?
- This is a one party state Craig, you don't need permission, just FYI.
- Good evening... I disagree that there is a plan...there is no plan...just an uninformed purchase of property and money pit.
- I thought this was a meeting for the neighborhoods surrounding GMC to give their input - not downtown. I understood it was Elder Homestead, South San Pedro, Siesta Hills, Parkland Hills, and Trumbull Village that were invited to participate.
- While I am sympathetic to the city-wide impacts of the unsheltered population, there are local concerns that need to be addressed that local residents are keenly aware of and willing to share helpful ideas. This facility/operational plan needs A LOT of work until it is acceptable.
- Where can I find a copy of the comprehensive plan??
- Standards are not set yet...specific use standards...Adverse impacts-cannot be yet declared that there will be no significant adverse impact to surrounding community.
- Who will assess the adverse effect to the surrounding neighborhood?
- There will be new cars because you are going to have personnel for those citizens you serve.
- I agree Barbara.
- It will also have a negative impact on pedestrian and transit connectivity.
- Family and community services needs to have a plan with transit BEFORE this conditional use app is approved
- What case worker-to-client ratio are you targeting to determine how many social workers you need?
- WHY is there an application being submitted on July 6, when there are issues on the conditional use.
- I think we need an in-person hearing on this.
- There is NOT research on the declaration that there will be no negative impact.
- 300 feet is inadequate. The effects on surrounding areas should be addressed for at least a mile.
- Each have a date except notice to NAs. Why no date for that?
- Why are they submitting a conditional use permit request BEFORE the planned site use plan is in place? It seems to be putting the cart before the horse
- UNM's own studies show a 56% increase in crime within I believe a mile of a shelter.
- How does this hub comply with HUD requirements to deconcentrate low income housing across the city, which includes homeless shelters?
- There should be a link to the recording, we don't need a large file. We are requesting a recording because specific details that are shared by officials are needed to follow up on. If you cannot share a recording, we should be able to get a PDF of a transcript.
- Not sharing a link to a recording nullifies the claim to transparency.
- Agreed...a recording should be available.

- A report is only going to highlight what one person who is writing the report wants to highlight or remembers to highlight.
- You can really slant a meeting report when you're the one writing it.
- Was the site assessed as to level of low income housing in the area vs say North Albuquerque Acres.
- Did unhoused people rob your parents?
- Where is the research that says unhoused people are not linked to higher crime rates? I think research shows differently.
- Once the permit is granted, is there any further avenue for neighbors to have input in this process?
- Will it be documented how many people on this meeting were from neighborhoods affected versus not in neighborhoods affected?
- Barrett House has 30 beds
- My research shows 37 homeless/drug and alcohol/behavioral health/faith-based services in District 6, There are only 17 in D2, 13 in D7, 2 in D9, 1 in D1, 4. and 8, and ZERO in D3 and D5. This is NOT "evenly spread out" like the City claims.
- Without knowing how much square foot is being devoted to beds, there is no idea of how many beds there will be
- You don't have a number in mind. That's unbelievable
- How can we get the input of the houseless population? What they need? What is their voice? Online meetings are great. They are not ideal for the target population. Is there anything I can do to support the effort to give a voice to the voiceless?
- I read a number of articles where some unhoused were interviewed. They requested to be placed far away from Central and temptations or the downtrodden environment. Guess how that went.
- HEAR her!!
- Thank you Tamaya!!!! Completely Agree!!!!
- Thank you, Tamaya.
- Tamaya nailed it.
- Thank you, Tamaya!!!
- I'm sorry but Carol's response is woefully inadequate to address Tamaya's comments.
- Agreed with Rob.
- That's it, Tamaya. Spot on.
- Agreed with Rob and Tamaya!
- None of their responses address our concerns
- Tamaya is correct
- So in other words you are moving forward no matter what we say?
- I'm trying to get on board with some version of Gateway, but I'm having trouble moving in that direction. There are way too many issues to address that have not been addressed or in process of being addressed. There are excellent questions unfortunately not clear answers.
- It boils down to Tim Keller and a fistful of Councilors wanting a reelection. Ramming this through with be a coup...
- What exactly does "referral" mean?
- YES Ryan, thank you!!!

- I agree with the comments by Tamaya. We are getting generalized answers to specific questions. Until we get specific answers, I do not see how the rezoning can be approved without written plans.
- Do the NA's get a copy of the application, or does it just go straight to the Zoning Examiner?
- Good questions
- So will you answer his question please
- Heading home
- We need a map showing number of beds, SE has many more beds than other areas. Shelter
- I agree. We need a report on where shelters are and what percentage are here in SE.
- I built the map.
- These shelters are not proposed to hold 300+ beds like Gateway!!!
- THIS IS CORRECT.
- Barrett house is located south of Indian School. That is always trotted out as the "dispersed" shelter in the NE heights.
- Westside shelter /Emergency Housing Center has 300 beds
- City has said they plan to close west side - please do not go back and forth on what you say Carol, Lisa, all of you at City
- The have claimed the West side will close repeatedly.
- Go Barbara!
- Phoenix has a similar "center" called Human Service Campus, with 15 organizations providing services and their surrounding neighborhoods are "Overwhelmed and overburdened by the sheer volume of homelessness" <https://amp.azcentral.com/amp/5967262002>
- Point for point for point, Barbara, you are spot on.
- These are excellent points!!
- Excellent points. Let her continue.
- The westside shelter previously had a couple of years ago had a capacity of 450 not 300.
- She is bringing up detailed excellent points.
- Instead of interrupting her, why don't you answer her questions!
- Thank you Barbara!
- Great point providing services where they are
- We need to go to zoning meeting. To slow down this project.
- If they show up with a cart from a business (smiths cart) they should be arrested. Stolen property.
- No, that is not a sound plan.
- When you get your operational plan solidified is when the proposal should go to zoning committee!!
- What plan? At present there are no studies or a clearly laid out plan. What about the impact to local businesses?
- Go Raven! You have given us more information than the City to date!
- Exactly, Raven. Thank you!!!
- There it is.
- Thank you for those numbers, Raven.
- Excellent points, Raven!!!
- Yay Raven
- Amen

- Based on data presented by Raven, and lack of data ...this proposal IS NOT ready for submittal on July 6
- Thank you Raven. Spot on.
- "We want to get more people into shelter beds."
- District 6 residents are not 'concerned', we are OVERWHELMED with indigent services.
- Problematic phrasing there, we need clarity on numbers.
- The proposal is not remotely ready. Lots more work needed.
- HOW big a slice will be shelter and how much will be tenant services??!!!
- They don't care you get hurt. They want re-election
- AND starting small still needs a cap!!!
- Raven is speaking the harsh truth. No it is not going to help us getting them in the shelter from our neighborhood, if you are bringing more into the neighborhood by busing them in from all over.
- Raven and many of us have done homework for months. City doesn't give us anything concrete, just maneuvering and we're not disposable citizens here – we've built homes here. Starting small is what we asked city council to do w/ Davis amendment last week
- We are also hosting a "safety center" at San Mateo and Kathryn
- No, the city is now planning to build housing there.
- The Kathryn San Mateo plan is still quite a ways from being finalized. It's my understanding that a public input meeting regarding that location is scheduled for the upcoming weeks and months. Please check the d6 Facebook page or website for more information as it becomes available.
- NO PLAN
- No zoning change
- Rob is right. We need real, binding answers.
- Yes we do.
- Yes yes yes Zoning meeting needs canceled until real plans and data are presented to neighborhoods.
- Agreed, the conditional use proposal should be cancelled for July 6
- Hear! Hear! Thanks Rob Leming
- A red-lined document that shows that Plan A existed, and then gives us a clue as to what has been changed after public input!
- Right on, Rob!
- Thanks Rob, Raven, Tamaya et al.
- This I why there won't be a video link...they don't want this out there.
- Thank you Rob.
- IF august is when operational plan will be written than that is when proposal to city zoning should be made
- Thank you Rob!
- We need to start voting no on the bond funds for proposals with no details
- Good point, Mario in them inflating numbers of how many participants are actually from the affected neighborhoods.
- Yes Agreed, no conditional use request without an operational plan that is neighborhood reviewed
- Thank you Rob! Well, if you are going to have the operational plan in August, then the rezoning should not be approved until then.
- Thanks for that point Mario, I live in District 6 but further west in Victory Hills.

- The tent facilities that the housing committee is looking should be located in other areas other than district 2 and 4
- Decamping strategies need to be in place..YES!!!
- Yes.
- I refuse to vote yes on bonds now for just this reason...just seniors and parks get my ok. I voted yes on streets for ever, but quit after they repaved west side sidewalks and streets twice in 2 years, but Elder Homestead still has original 1954 sidewalks.
- They are already camping out at the small house village.
- There is no data saying that most people that are homeless want a home
- Where is the data to support that most folks that are homeless want a home???
- There is no data to support that most folks that are homeless want a home...why does Lisa keep saying that!!!
- There is NO data supporting that claim. I have friends in Social Security that quit due to getting overwhelmed by the number of homeless that will not quit their lifestyle.
- I strongly disagree was meant for all
- I agree with Raven...that is my data as well!
- And yes, magnetization is clearly in effect with the number of people who have moved in to the streets and neighborhoods near Tiny Homes.
- Seems Carol and Lisa dance around they issues. Don't answer directly
- Please limit the city response time tnx
- I never got a response from the lady that presented the proposal bullets in which the proposal stated that there is no effect on traffic or adverse effects on neighborhoods.
- The city is still using our parks as pick up/drop off for the shelter system. That wouldn't fly in the far northeast.
- Why can't homeless people be temporarily allowed to stay in the old Galles on Lomas or KMart, which are air-conditioned?
- Good points Laura!
- There is no security plan once they leave the premises.. Albuquerque police have no plans for increased patrols, and yes; we are currently understaffed.
- How is the Gibson Center going to separate out the people who truly want help/services verse the people who want to be homeless? The ones who don't want help will need to be redirected somewhere else to avoid congesting services for those who want help.
- We have asked for transparency on crime statistics currently around this area, and APD presence based on crime stats, not necessarily populations.
- Medical care is to be provided to the homeless presumably at city expense due to inability of the clients to pay. Would a poor person who has a home get the same support?
- There is no screening process, including abusers/sex offenders/ violent criminals, etc.
- Are they wanting our neighborhoods to form vigilante groups?
- Not to beat a dead horse...but Jackie Fishman, the proposal should not be submitted until operational plan for security is formalized into plan. And the statements that there is going to be no increased traffic effects nor adverse effects on neighborhoods is corrected.
- Funny, but one person involved in this City-side suggested neighborhoods be proactive. Not my circus, not my job
- Whatever information the city comes up with on adverse affects also needs to be shared with neighbors and businesses and discussed BEFORE decisions are made, and with ample time.
- Agreed, Tamaya!

- The conditional use meeting for July 6 should be canceled until more data is gathered. Why is the city rushing this? Is this strictly a political move by Keller?
- None of the people involved in this project live here, so they do not care what happens.
- Agreed, the conditional use proposal for July 6 should be cancelled until the data and the operational plan is in writing - and good neighbor plan is in place.
- For the record, here is the link to my services map. There are 4 more homeless services to add courtesy of collaborators, but my connection is tenuous, so I'll be adding them post-meeting.
<https://www.google.com/maps/d/edit?mid=1UY2rBBJvh4sJwsmQwN0ieemwGcaivFPT&usp=sharing>
- And neighborhoods affected will have time to respond to the proposal that is drawn up that will supposedly address include data on traffic and adverse effects
- Awesome Raven, thank you!
- Agreed that this item should be removed from the upcoming conditional use permit hearing. Is there a way for us to request that this be bumped forward rather than allowing this item to be on the meeting's agenda?
- Good neighbor agreements have NO TEETH. They are not legally binding. The GNA's I have seen do not even list CABQ as liable parties, they only list the neighborhood and the non-profit the city pawns the responsibility off to.
- This is not the First of Many, rather it is the Only of None.
- ..." trying to build this plane while you're flying it..."
- To say start small is what city Council voted against in the proposal made by Pat Davis
- *Only of One. Stupid fingers!
- This is District 6, not 5. But your point is well taken.
- District 6, David, District 5 is on west side of river
- At least I think that is what our City Councilman was asking
- Yes, thank you David!
- Sorry for getting districts mixed up...I'm rather perturbed at moment.
- I can't help but wonder who was promised what to vote against Pat Davis if "starting small" is really in the City plan.
- We are not solving this together...this is being pushed down our throat...
- Bravo David, I hesitated to bring up the obligation of the participants have some terms of compliance. The "Low barrier" concept really concerns me. This must be quid pro quo!
- city not credible.
- If people will not meet halfway to ascend from homelessness, then the ship has already sunk.
- There are no solutions being proposed to neighborhood concerns...only talk of visions...and when you look back on the mountains, the Landslide will bring you down
- There will be a positive impact no matter where they are served at.
- Go, David! let's get the delegation involved!!!
- If we were in this together.....
- Barbara...give me about 3 hours, and I can draft you a powerpoint about the new railway bridge I'm going to build you downtown. I'm not saying I can lay a single brick, mind you, but I can make you one helluva presentation!
- We need a legally enforceable documents that hold the city accountable.
- Patricia, please do!
- I want to thank all neighbor residents for attending and staying on this . And to Jessie and your group, please note all the unanswered questions tonight and the trust issue we spoke to. I am

still waiting on answers to my sign up for homeless newsletter, and my gateway input question - I haven't received any responses except from Jessie - no transparency so they don't mean it.

- I second Vera. I've not gotten a single thing from the City other than Jessie's emails.
- We need another meeting to address all of the points brought up tonight
- DO THE RIGHT THING. PERMIT HEARING NEEDS CANCELLED UNTIL THERE IS MORE DATA PROVIDED AND WE ARE GIVEN AN OPERATIONAL PLAN.
- Thank you David. Great points.
- David, thank you! You were great as so many have been tonight!
- Oops sorry district 6
- When will that architect review be complete...that is the least that should be complete BEFORE the zoning proposal is made!!!
- Thank you, David
- Agreed...that was one of my questions too...to know who the actual tenants/ providers will be AND how much square foot will be allotted to ancillary providers!!!
- No conditional permit should be issued now. We need answers.
- If nothing has been decided yet why is the city proceeding with any future decision regarding the Gateway. Please GET a plan and then proceed. The city is not giving ANY concrete answer to any of the issues. Everything has been said to be in the future. The future is July 6th????
- Barbara...YES! How do we know what goes where and how much of it when NOTHING EXISTS.
- I wonder who the architect is. How do we express our concerns about numbers to that person or organization?
- NO conditional permit should be asked for!!!! NOT on July 6 and not in Augustnot until operational plans, architectural review is completed!!!
- What is the appeal process for ZHE?
- We should request that the review board decline to open this process
- What is the appeal process for a "site plan administrative" decision?
- Kate- agreed.
- The city should not approach the zoning examiner with a ghost proposal on July 6!!!
- Agree, there should be no permit without a credible, transparent and thought out plan.
- So....the City wants respite beds, shelter beds, then overnight beds from God-knows-how-many tenants????
- Yikes.
- Will there be daycare for families with children onsite?
- This right here is why that amendment from Pat Davis was so important. All bets are off for bed caps.
- "It's not going to be 500 beds" Puts in 500 beds.
- Why are we asking approval for use when we don't have an operations plan?!!!
- Rachel , I mentioned that in chat, let's look for it
- Will the current homeless shelters still be in operation along with the Gateway Center?
- Already holds....with a crap track record.
- YAAAAAAS Queen
- 70 maximum is more sustainable than 100. A cap of 70 total individuals or 30 families maximum would be supportable by the neighborhoods.
- Let Districts 1, 3, 4, 5, 8, and 9 take their "Fair Share"
- Who else would agree with a CAP OF 70 INDIVIDUALS OR 30 FAMILIES?
- Peter, I would

- Only 100 if they were all Veterans
- Can we please get the budget and timeline for additional transitional housing listed in the plan before July 6th? Thank you everyone for your time.
- Tamaya has done her homework, which is more than I can say for the city. Great job Tamaya.
- Thank you Jessie for facilitating what we knew would be challenging meeting.
- I would
- We definitely need a reasonable cap. 70 maximum.
- Thank you Jessie for facilitating a hard meeting.
- From all the community partners in place now, there should be data for a graduation rate from services and maintaining stability?
- Thank you Jessica! You did a fabulous job with an emotionally charged topic.
- good job Jessie
- Thanks Tamaya. Good questions.
- Recording is trusted thnx
- 100 VETERANS WOULD BE GOOD AS THEY HAVE ADJACENT SUPPORT SERVICES NEXT DOOR
- Thank you Jocelyn
- A big sarcastic Thaaaaaaanks to every City Councilor but Pat
- I saved the chat and audio recorded if anyone needs it

APPENDIX A CONT'D, PHNA ITEMS

Date: August 10, 2021

To: City of Albuquerque, Planning Department; City of Albuquerque, Legal Department

Re: Request for immediate rejection of the application by the City of Albuquerque, Family and Community Services, and their agent, Consensus Planning, Inc. for a Conditional Use Permit for an Overnight Shelter at 5400 Gibson Blvd SE and 5006 Gibson Blvd SE as the applicant's submission does not meet the requirements for application per the IDO

Attn: Brennon Williams, Planning Department Director

Our Neighborhood Association, Parkland Hills, would like to inform you that the City of Albuquerque Family & Community Services, and their representative, Consensus Planning, have not adequately completed the submission process in applying for their Conditional Use Permit for the Overnight Shelter at 5400 Gibson Blvd. SE and 5006 Gibson Blvd. SE.

As an adjoining neighborhood, Parkland Hills did not receive "a meeting request," as mandated in IDO 6-4(C)(3), but rather, received a meeting notice "as a courtesy." Additionally, Parkland Hills was not involved in selecting the date for a pre-submittal meeting; the date was not "agreed upon" (IDO 6-4(C)(4), but determined by the applicant.

Though the applicant failed to follow IDO protocols and procedures for scheduling a pre-submittal meeting, a meeting was scheduled by the applicant, for which notice was sent to South San Pedro NA and District 6 Coalition, and sent to additional NA's as a "courtesy." This meeting was held on June 22, 2021. At this meeting, the applicant failed to provide the information required by IDO 6-4(C)(6):

"At the pre-submittal neighborhood meeting, the applicant shall provide information about the proposed project, including but not limited to the scope of uses, approximate square footages for different uses, general site layout, design guidelines, architectural style, conceptual elevations, and conceptual landscaping plans."

Not only was this information not presented, but specific questions regarding the approximate amount of space and square footage devoted to different uses went unanswered, as you will see in the Facilitated Meeting Report under Question no. 2b, pg. 4, and Question 2i, pg 7. (See attached file – 5 2021-6-22 Facilitated Meeting Report). The damage done by lack of information and opportunity to participate leading up to the meeting remains to be seen.

Because of the applicant's failure to comply with IDO requirements in IDO 6-4(C)(3), (IDO 6-4(C)(4) and IDO 6-4(C)(6), we are requesting that you reject this application immediately.

To clarify the sequence of events, and Parkland Hills' due diligence in informing Consensus Planning of this error, we would like to explain the following:

Parkland Hills Neighborhood Association [PHNA] received an email from Jacqueline Fishman AICP, Principal, Consensus Planning, Inc. on June 4, 2021 notifying the NA of a meeting scheduled for June 22, 2021 "for the two affected neighborhood associations, District 6 and South San Pedro." It went on to state that they were providing this notice "as a courtesy to...Parkland Hills..." (See attached file - 1 PREAPP FACIL MTG COURTESY dated June 4, 2021 communication from Jacqueline Fishman, page 2).

PHNA President, Rob Leming, informed Ms. Fishman that PHNA did not receive a request for a meeting as mandated by the IDO (See attached file – 2 OFFICE NEIGHBOR COORDINATOR PARKLAND

INCLUSION- Please note that his letter is included attachment 3, CORRECTION OF INFORMATION dated June 22, page 2, From Rob Leming to Jackie, as attachment 2).

Ms. Fishman acknowledged in a subsequent email to Mr. Leming that Parkland Hills should be considered an "affected neighborhood association" to be notified. (See attached file – 3 CONSENSUS PARKLAND INCLUDED referenced correspondence from Ms. Fishman dated June 18/17, 2021. Attached file 3A Addresses exhibit_PARKLAND INCLUDED is attachment 1 of 2). 3, 3A

In Ms. Fishman's response email to Mr. Leming, the error of the applicant to meet the requirements of IDO 6-4(C)(3), (IDO 6-4(C)(4) is acknowledged by Consensus Planning. In the Facilitated Meeting Report from 6/22/21, the inability of the applicant to address IDO requirements IDO 6-4(C)(6) is revealed in the questions and comments in Question #2, pages 4-7.

We also want to make note of the error in their Official Public Notification Form, under Part I – Process, where "Neighborhood meeting required" with an option to check "yes" or "no," both boxes are checked.

We appreciate your consideration and response to this request.

Sincerely,



President, Parkland Hills Neighborhood Association

See attachments 1, 2, 3, 3A, 4, June 4 neighborhood notification packet

Referenced IDO sections:

Per the IDO section **Part 14-16-6: Administration and Enforcement**

6-4: General Procedures

6-4(C) PRE-SUBMITTAL NEIGHBORHOOD MEETING

6-4(C)(1) For those types of applications where Table 6-1-1 requires a meeting with a neighborhood to be offered, the applicant shall offer at least 1 meeting to all Neighborhood Associations whose boundaries include or are adjacent to the subject before filing the application. In such cases, project applications will not be accepted until a pre-submittal neighborhood meeting has been held, or the requirements for a reasonable attempt in Subsection (3) below have been met.

6-4(C)(3) A meeting request shall be sent to the 2 representatives on file at the ONC for all applicable Neighborhood Associations via Certified Mail, return receipt requested, or via email. Either method constitutes a reasonable attempt to notify a Neighborhood Association of a meeting request. The requirements of Subsection 14-16-6-4(K)(7) (Documentation of Good Faith Effort Required) also apply.

6-4(C)(4) If the Neighborhood Association chooses to meet, the Neighborhood Association must respond within 15 calendar days of the request (Certified Mail or email) being sent. The meeting must be scheduled for a date within 30 calendar days but no fewer than 15 calendar days after the Neighborhood Association accepts the meeting request, unless an earlier date is agreed upon. If the Neighborhood Association declines the meeting, the applicant may proceed pursuant to Subsection (9) below.

6-4(C)(6) At the pre-submittal neighborhood meeting, the applicant shall provide

information about the proposed project, including but not limited to the scope of uses, approximate square footages for different uses, general site layout, design guidelines, architectural style, conceptual elevations, and conceptual landscaping plans.

6-4(C)(7) A summary of the meeting shall be prepared and emailed to the representatives of the Neighborhood Association(s) that requested the meeting and any other meeting participants who signed in and provided an email address.

6-4(C)(9) Where Table 6-1-1 requires that a pre-submittal neighborhood meeting be held, and a meeting was not held, the requirement for a pre-submittal neighborhood meeting shall be waived if the applicant can demonstrate that reasonable attempts were made to notify a Neighborhood Association as required by Subsections (1) through (4) above, and either no response was received within 15 calendar days of the notice being sent, or the notified Neighborhood Association declined the meeting.

6-4(G)(4) No development application shall be reviewed for compliance with this IDO or scheduled for a public meeting or hearing by any decision-making body until it is determined to be complete.

End of referenced IDO sections.



peter kalitsis <peterkalitsis@gmail.com>

Fwd: Preapplication Facilitated Meeting - Gateway Center

Melinda Frame <phna.homelessness.solutions@gmail.com>
To: peter kalitsis <peterkalitsis@gmail.com>

Wed, Jun 9, 2021 at 3:59 PM

----- Forwarded message -----

From: **Rob Leming** <phnapresident@gmail.com>
Date: Tue, Jun 8, 2021 at 6:13 PM
Subject: Fwd: Preapplication Facilitated Meeting - Gateway Center
To: Janet Simon <phnacomunications@gmail.com>, Melinda Frame <phna.homelessness.solutions@gmail.com>

----- Forwarded message -----

From: **Jessie Lawrence** <jessie@lawrencemeetingresources.com>
Date: Mon, Jun 7, 2021 at 4:59 PM
Subject: Re: Preapplication Facilitated Meeting - Gateway Center
To: Jackie Fishman <fishman@consensusplanning.com>
CC: info@willsonstudio.com <info@willsonstudio.com>, mandy@theremedyspa.com <mandy@theremedyspa.com>, zabdiel505@gmail.com <zabdiel505@gmail.com>, khadijahasili@vizionz.org <khadijahasili@vizionz.org>, sp-wonderwoman@comcast.net <sp-wonderwoman@comcast.net>, mrkious@aol.com <mrkious@aol.com>, mldarling56@yahoo.com <mldarling56@yahoo.com>, phnapresident@gmail.com <phnapresident@gmail.com>, alyceice@gmail.com <alyceice@gmail.com>, landry54@msn.com <landry54@msn.com>, rbaca@bizjournals.com <rbaca@bizjournals.com>, kp-shna@centurylink.net <kp-shna@centurylink.net>, Chaplin, Doug H. <dchaplin@cabq.gov>, Cooper, Kinsey <kcooper@cabq.gov>, Tyson Hummell <thummell@cabq.gov>, Shannon Triplett <striplett@cabq.gov>, Charlene Johnson <Johnson@consensusplanning.com>, Jocelyn M Torres <nmlawyer09@comcast.net>

Thank you for sharing this information, Jackie. I wanted to reiterate that if any neighbors have any questions for me as the facilitator about this meeting, please feel free to contact me in advance by email or phone. I also welcome input about discussion topics for the meeting. That will help me make this the most useful and productive meeting possible.

Also, if there are other neighbors that may be interested in this meeting, please help share the information. As a reminder, attendees need to use the link below to register, and they'll then receive the meeting connection information.

I'll look forward to our meeting on June 22.

Jessie Lawrence
CABQ Contract Meeting Facilitator

On Jun 4, 2021, at 3:13 PM, Jackie Fishman <fishman@consensusplanning.com> wrote:

Dear Neighbors,

This email is notification that Consensus Planning is preparing an application for a Conditional use for Overnight Shelter to the City of Albuquerque Zoning Hearing Examiner (ZHE) on behalf of the City of Albuquerque Department of Family and Community Services. The property is located at [5400 Gibson SE](#) the site of the existing Gibson Medical Center. The property is zoned MX-H and is legally described as *Tract A-1-A-1-A Plat of Tract A-1-A-1-A Lovelace Hospital (being a replat of Tract A-1-A-1 & a*

portion of vacated Ridgecrest Drive SE) containing 20.4232 Acres. The request is for the City's Gateway Center project, an overnight shelter proposed for a portion of the Gibson Medical Center. Please see the attached neighborhood notification packet.

The City is providing an opportunity to discuss this request at a scheduled facilitated meeting on Tuesday, June 22, 2021 from 5:30 – 7:30 PM via Zoom using the following link:

<https://bit.ly/2SVSXxt>

The Office of Neighborhood Coordination provided contacts for the two affected neighborhood associations, District 6 and South San Pedro. Given the City has reached out to other neighborhood associations in the area, we are providing this notice and **invite to the facilitated meeting as a courtesy** to Elder Homestead, **Parkland Hills**, Trumbull Village, and Siesta Hills neighborhood associations.

Jessie Lawrence, an independent contractor with the City's ADR program, will be facilitating the meeting. Attendees must use the link above to register for the meeting prior to attending. Attendees need to enter name and email address to receive the meeting connection link. For more information about the facilitated meeting, please contact Jessie Lawrence at jessie@lawrencemeetingresources.com or (505) 603-4351.

For more information about the conditional use application and request, please contact Jackie Fishman, Principal at Consensus Planning, at fishman@consensusplanning.com or (505) 764-9801.

Thanks,

Jacqueline Fishman, AICP

Principal

Consensus Planning, Inc.

[302 Eighth Street NW](#)

[Albuquerque, NM 87102](#)

P: 505.764.9801

<Neighborhood Notification Packet - [5400 Gibson Blvd SE.pdf](#)>

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Rob Leming

President

Parkland Hills Neighborhood Association

505-750-7672

To: Jacqueline Fishman AICP, Principal, Consensus Planning, Inc,
Office of Neighborhood Coordinator

Re: Correction of information in email letter and Neighborhood Meeting Request for Conditional Use for overnight Shelter at 5400 Gibson Blvd. SE, Albuquerque, New Mexico.

Dear Jacqueline,

Our Neighborhood Association, Parkland Hills, would like to clarify informational errors on the Official Notification Form for the above project, and on the letter sent to some of the adjacent neighborhood associations.

On the Neighborhood Meeting Request Form under "Neighborhood Association" there is a listing of two neighborhood associations, though only one is in fact a neighborhood association. It lists South San Pedro Neighborhood Association, which is one of the adjacent neighborhood associations. The letter also addresses the District 6 Coalition of Neighborhood Associations as the second neighborhood association. To be very clear – **District 6 Coalition is not a Neighborhood Association** and therefore does not qualify as an official party to be notified. It is generous to include the District 6 Coalition to be more inclusive, but our Neighborhood Association, Parkland Hills, along with others, **have been excluded**. Parkland Hills is indeed adjacent to the Gibson Medical Center property line, and so too is Siesta Hills. Elder Homestead and Southeast Heights are in very close proximity as well.

Our Neighborhood Association is additionally writing to clarify the Pre-Submittal Neighborhood Meeting requirement as outlined in the IDO (and referenced at the bottom of this letter). Our neighborhood association was sent an email from you, Jacqueline Fishman AICP, Principal, Consensus Planning, Inc, which stated the following:

"The Office of Neighborhood Coordination provided contacts for the two affected neighborhood associations, District 6 and South San Pedro. Given the City has reached out to other neighborhood associations in the area, we are providing this notice and invite to the facilitated meeting as a courtesy to Elder Homestead, Parkland Hills, Trumbull Village, and Siesta Hills neighborhood associations."

We would like to clarify the statement "invite to the facilitated meeting as a courtesy": per IDO Section 14-16-6-4(C), a meeting with the neighborhood is to be offered, and that the applicant "shall offer at least 1 meeting to all Neighborhood Associations whose boundaries include or are adjacent to the subject before filing the application" (see IDO paragraph at the bottom of this letter for reference). The above statement stating this notice is a "courtesy" is in error, unless there are plans to do future invite to Parkland Hills, as our neighborhood is adjacent to the property.

As section 6-4(C)(3) states a "meeting request shall be sent to the 2 representatives on file at the ONC for all applicable Neighborhood Associations via Certified Mail, return receipt requested, or via email" (see IDO paragraph at the bottom of this letter), we request that the Office of Neighborhood Coordination corrects Consensus Planning's error.

Our Neighborhood Association would appreciate a follow-up to verify that this misinformation has been corrected.

Pertinent Sections Extracted from the IDO:

Part 14-16-6: Administration and Enforcement

6-4: General Procedures

6-4(C) PRE-SUBMITTAL NEIGHBORHOOD MEETING

6-4(C)(1) For those types of applications where Table 6-1-1 requires a meeting with a neighborhood to be offered, the applicant shall offer at least 1 meeting to all Neighborhood Associations whose boundaries include or are adjacent to the

subject before filing the application. In such cases, project applications will not be accepted until a pre-submittal neighborhood meeting has been held, or the requirements for a reasonable attempt in Subsection (3) below have been met.

6-4(C)(3) A meeting request shall be sent to the 2 representatives on file at the ONC for all applicable Neighborhood Associations via Certified Mail, return receipt requested, or via email. Either method constitutes a reasonable attempt to notify a Neighborhood Association of a meeting request. The requirements of Subsection 14-16-6-4(K)(7) (Documentation of Good Faith Effort Required) also apply.

If you have any questions, please do not hesitate to contact us.

Sincerely,

Robert Leming (digital signature), President Parkland Hills Neighborhood Association

Email: phnapresident@gmail.com

Address: 1609 Ridgecrest Drive. SE, Albuquerque, NM 87108



peter kalitsis <peterkalitsis@gmail.com>

Fwd: Correction of Information

Melinda Frame <phna.homelessness.solutions@gmail.com>

Tue, Jun 22, 2021 at 3:31 PM

To: peter kalitsis <peterkalitsis@gmail.com>

----- Forwarded message -----

From: **Jackie Fishman** <fishman@consensusplanning.com>

Date: Fri, Jun 18, 2021 at 12:34 PM

Subject: RE: Correction of Information

To: Rob Leming <phnapresident@gmail.com>, dlcarmona@cabq.gov <dlcarmona@cabq.gov>, Sanchez, Suzanna A. <suzannasanchez@cabq.gov>, Patten-Quintana, Lorena <lpatten-quintana@cabq.gov>

CC: Baca, Vanessa <vanessabaca@cabq.gov>, Melinda Frame <phna.homelessness.solutions@gmail.com>, Charlene Johnson <Johnson@consensusplanning.com>, Carol Pierce <cpierce@cabq.gov>

Hi Rob –

Thanks for reaching out to me regarding your concerns regarding the Official Neighborhood Form provided by the Office of Neighborhood Coordination and the Zoning Hearing Examiner. I've copied the City staff from both departments on this email.

Regarding contacting District 6 Coalition, the City's IDO process does require us to notify the coalitions even though they technically are not neighborhood associations.

Since receiving your email last night, I've been working to clarify the project address, which we understood to be [5400 Gibson Boulevard SE](#). Using this City address, there are only two associations (South San Pedro and District 6 Coalition) that the project site falls within or adjacent to (adjacent is defined by the IDO as excluding public rights-of-way). Those are the two associations that were provided to my staff by ONC and ZHE staff. In looking at the site map with Carol Pierce this morning, and confirming with City Legal, the City's purchase of the property did include [5006 Gibson SE](#), which is the small .4226 acre parcel at the corner of Gibson/Ridgecrest NE. When we include [5006 Gibson SE](#), [Parkland Hills](#) NA is adjacent to the project site. Therefore, you are correct that Parkland Hills should be considered an "affected neighborhood association" to be notified.

As you quoted from my email, I did include Elder Homestead, Parkland Hills, Trumbull Village, and Siesta Hills neighborhood associations as a "courtesy" in the notice and invite to the facilitated meeting on Tuesday, June 22nd at 5:30 pm. I apologize for the confusion on this issue. I will ensure that my office will send Parkland Hills all information related to the conditional use request to the Zoning Hearing Examiner and we will include both addresses ([5400 Gibson SE](#) and [5006 Gibson SE](#)) from this point forward. Elder Homestead, Trumbull Village, and Siesta Hills NAs are not within the expanded ONC boundary, but we will also continue to provide information as a courtesy.

Thank you and feel free to contact me or Carol Pierce if you have any questions.

Jacqueline Fishman, AICP

Principal

Consensus Planning, Inc.

302 Eighth Street NW

Albuquerque, NM 87102

P: 505.764.9801

From: Rob Leming <phnapresident@gmail.com>

Sent: Thursday, June 17, 2021 4:57 PM

To: Jackie Fishman <fishman@consensusplanning.com>

Cc: Baca, Vanessa <vanessabaca@cabq.gov>; Melinda Frame <phna.homelessness.solutions@gmail.com>

Subject: Correction of Information

Dear Jackie,

Please see the attached letter advising corrections to meeting notices and communiques. Thank you.

Best,

--

Rob Leming

President

Parkland Hills Neighborhood Association

505-750-7672

2 attachments



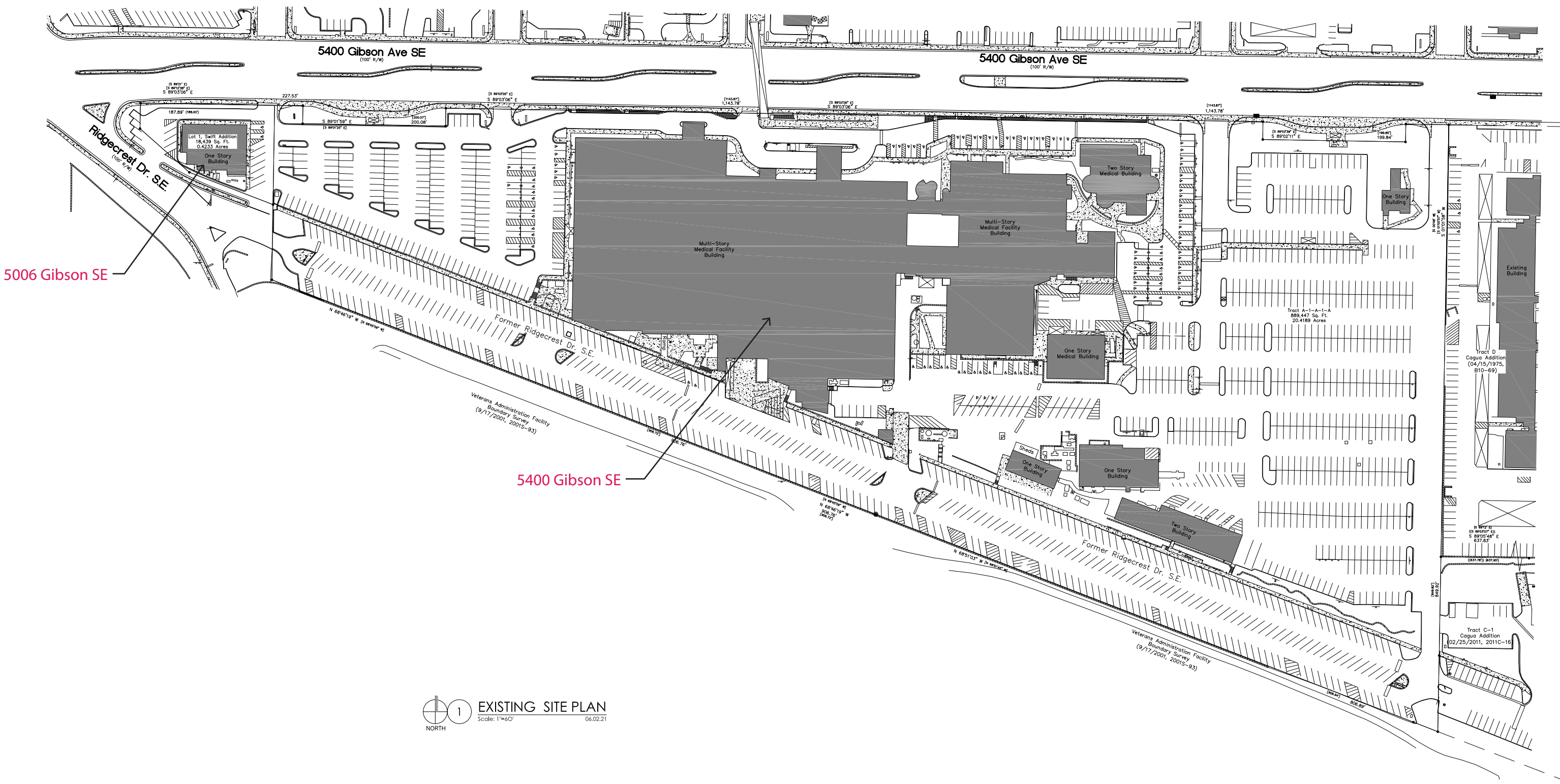
Addresses exhibit.pdf

1003K



OFFICE NEIGHBOR COORDINATOR JUNE 9 LETTER.docx

17K



5006 Gibson SE

5400 Gibson SE

 **1** EXISTING SITE PLAN
Scale: 1"=60' 06.02.21



peter kalitsis <peterkalitsis@gmail.com>

Fwd: Application notification - Gateway Center CU

1 message

Melinda Frame <phna.homelessness.solutions@gmail.com>

Thu, Aug 5, 2021 at 10:08 AM

To: peter kalitsis <peterkalitsis@gmail.com>

----- Forwarded message -----

From: **Rob Leming** <phnapresident@gmail.com>

Date: Thu, Aug 5, 2021 at 9:50 AM

Subject: Fwd: Application notification - Gateway Center CU

To: Melinda Frame <phna.homelessness.solutions@gmail.com>

----- Forwarded message -----

From: **Jackie Fishman** <fishman@consensusplanning.com>

Date: Tue, Aug 3, 2021 at 10:34 AM

Subject: Application notification - Gateway Center CU

To: info@willsonstudio.com <info@willsonstudio.com>, mandy@theremedydayspa.com <mandy@theremedydayspa.com>, zabdiel505@gmail.com <zabdiel505@gmail.com>, khadijahasili@vizionz.org <khadijahasili@vizionz.org>, mldarling56@yahoo.com <mldarling56@yahoo.com>, phnapresident@gmail.com <phnapresident@gmail.com>, SEAreaOrganizers@gmail.com <SEAreaOrganizers@gmail.com>, rbaca@bizjournals.com <rbaca@bizjournals.com>, kp-shna@centurylink.net <kp-shna@centurylink.net>, sp-wonderwoman@comcast.net <sp-wonderwoman@comcast.net>, mrkious@aol.com <mrkious@aol.com>, alyceice@gmail.com <alyceice@gmail.com>, landry54@msn.com <landry54@msn.com>
CC: Charlene Johnson <Johnson@consensusplanning.com>, Pierce, Carol M. <cpierce@cabq.gov>, Huval, Lisa L. <lisahuval@cabq.gov>

Dear Neighbors,

This email is notification that Consensus Planning has submitted an application for a Conditional Primary Use for Overnight Shelter to the City of Albuquerque Zoning Hearing Examiner (ZHE) on behalf of the City of Albuquerque Department of Family and Community Services. The request is for the Gateway Center project, an overnight shelter proposed for a portion of the Gibson Health Hub. The property consists of two lots at 5006 and [5400 Gibson SE](#) the site of the existing Gibson Medical Center. The property is zoned MX-H. The legal descriptions for the two sites are as follows:

- Lot 1 Swift Addition containing 0.4226 acres ([5006 Gibson Boulevard SE](#))
- Tract A-1-A-1-A Plat of Tract A-1-A-1-A Lovelace Hospital (being a replat of Tract A-1-A-1 & A portion of vacated Ridgcrest Drive SE) containing 20.4232 acres ([5400 Gibson Boulevard](#))

SE)

A facilitated meeting was held on June 22, 2021 to discuss the conditional use application. In response to input from that meeting, the City delayed the submittal of the Conditional Use application until the draft Operations Plan for the Gateway Center was ready. You can review the draft Operations Plan posted on the City's website at www.cabq.gov/gateway.

The hearing for this application is scheduled for **Tuesday, September 21, 2021** starting at **9:00 A.M.** At this time the hearing is scheduled to be heard on Zoom using the following link.

Join Zoom Meeting <https://cabq.zoom.us/j/7044490999>

Meeting ID: 704 449 0999

One tap mobile +16699006833,,7044490999# US (San Jose)
+12532158782,,7044490999# US (Tacoma)

Dial by your location

+1 669 900 6833 US (San Jose) +1 253 215 8782 US (Tacoma) +1 346 248 7799 US (Houston)

+1 646 558 8656 US (New York) +1 301 715 8592 US (Germantown)

+1 312 626 6799 US (Chicago)

Find your local number: <https://cabq.zoom.us/j/7044490999>

Depending on public health orders, the hearing may also be scheduled in-person. Please call (505) 924-3894 for details and updates regarding an in-person hearing. If an in-person hearing is available, it will occur in the Plaza del Sol hearing Room at [600 Second Street NW](#), Basement Level.

For more information about the conditional use application and request, please contact Jackie Fishman, Principal at Consensus Planning, at fishman@consensusplanning.com or (505) 764-9801. You may also contact the ZHE Administrative Assistant, Suzie Sanchez at (505) 924-3894 or suzannasanchez@cabq.gov.

Please note: You may submit written comments to the Zoning Hearing Examiner up to 6 days before the hearing (5pm on the Wednesday before the hearing). Written comments received after that deadline will not be taken into consideration for this application.

Attached: Neighborhood Notification Packet

Jacqueline Fishman, AICP

Principal

Consensus Planning, Inc.

[302 Eighth Street NW](#)

[Albuquerque, NM 87102](#)

P: 505.764.9801

--

Rob Leming

President

Parkland Hills Neighborhood Association

505-750-7672



Neighborhood Association Public Hearing Notification Packet.pdf

1798K

**OFFICIAL PUBLIC NOTIFICATION FORM
FOR MAILED OR ELECTRONIC MAIL NOTICE
CITY OF ALBUQUERQUE PLANNING DEPARTMENT**



PART I - PROCESS

Use [Table 6-1-1](#) in the Integrated Development Ordinance (IDO) to answer the following:

Application Type: Conditional-use for Overnight Shelter

Decision-making Body: Zoning Hearing Examiner (ZHE)

Pre-Application meeting required: ☒ Yes ☐ No

Neighborhood meeting required: ☒ Yes ☒ No

Mailed Notice required: ☒ Yes ☐ No

Electronic Mail required: ☒ Yes ☐ No

Is this a Site Plan Application: ☐ Yes ☒ No **Note: if yes, see second page**

PART II – DETAILS OF REQUEST

Address of property listed in application: 5006 and 5400 Gibson Blvd. SE

Name of property owner: City of Albuquerque

Name of applicant: City of Albuquerque, Family and Community Services

Date, time, and place of public meeting or hearing, if applicable: Tuesday, September 21, 2021 at 9:00 AM via Zoom or In-Person.

Contact Suzie Sanchez at suzannasanchez@cabq.gov or (505) 924-3894 for more information.

Address, phone number, or website for additional information:

Jacqueline Fishman, Principal, Consensus Planning, Inc. (505) 764-9801, fishman@consensusplanning.com

PART III - ATTACHMENTS REQUIRED WITH THIS NOTICE

☒ Zone Atlas page indicating subject property.


☒ Drawings, elevations, or other illustrations of this request.

☒ Summary of pre-submittal neighborhood meeting, if applicable.

☒ Summary of request, including explanations of deviations, variances, or waivers.

IMPORTANT: PUBLIC NOTICE MUST BE MADE IN A TIMELY MANNER PURSUANT TO [SUBSECTION 14-16-6-4\(K\)](#) OF THE INTEGRATED DEVELOPMENT ORDINANCE (IDO). PROOF OF NOTICE WITH ALL REQUIRED ATTACHMENTS MUST BE PRESENTED UPON APPLICATION.

I certify that the information I have included here and sent in the required notice was complete, true, and accurate to the extent of my knowledge.

 (Applicant signature) August 03, 2021 (Date)

Note: Providing incomplete information may require re-sending public notice. Providing false or misleading information is a violation of the IDO pursuant to IDO Subsection 14-16-6-9(B)(3) and may lead to a denial of your application.

**OFFICIAL PUBLIC NOTIFICATION FORM
FOR MAILED OR ELECTRONIC MAIL NOTICE
CITY OF ALBUQUERQUE PLANNING DEPARTMENT**



PART IV – ATTACHMENTS REQUIRED FOR SITE PLAN APPLICATIONS ONLY

Provide a site plan that shows, at a minimum, the following:

N/A a. Location of proposed buildings and landscape areas.

N/A b. Access and circulation for vehicles and pedestrians.

N/A c. Maximum height of any proposed structures, with building elevations.

N/A d. For residential development: Maximum number of proposed dwelling units.

N/A e. For non-residential development:

- ☐ Total gross floor area of proposed project.
- ☐ Gross floor area for each proposed use.

[Note: Items with an asterisk (*) are required.]

**Public Notice of a Proposed Project in the City of Albuquerque
for Decisions Requiring a Meeting or Hearing
Mailed/Emailed to a Neighborhood Association**

Date of Notice*: August 03, 2021

This notice of an application for a proposed project is provided as required by Integrated Development Ordinance (IDO) [Subsection 14-16-6-4\(K\) Public Notice](#) to:

Neighborhood Association (NA)*: See attached neighborhood contacts from Office of Neighborhood Coordination.

Name of NA Representative*: See attached neighborhood contacts from Office of Neighborhood Coordination.

Email Address* or Mailing Address* of NA Representative¹: See attached from Office of Neighborhood Coordination

Information Required by [IDO Subsection 14-16-6-4\(K\)\(1\)\(a\)](#)

1. Subject Property Address* 5006 and 5400 Gibson Blvd. SE
Location Description Southwest corner of Gibson Boulevard and San Mateo Boulevard.
2. Property Owner* City of Albuquerque
3. Agent/Applicant* [if applicable] Consensus Planning, Inc.
4. Application(s) Type* per IDO [Table 6-1-1](#) [mark all that apply]

☒ Conditional Use Approval

- ☐ Permit _____ (Carport or Wall/Fence – Major)
- ☐ Site Plan
- ☐ Subdivision _____ (Minor or Major)
- ☐ Vacation _____ (Easement/Private Way or Public Right-of-way)
- ☐ Variance
- ☐ Waiver
- ☐ Other: _____

Summary of project/request²*:

Conditional use for an overnight shelter in a portion of the Gibson Health Hub Building.

The overnight shelter is for the City's Gateway Project.

¹ Pursuant to [IDO Subsection 14-16-6-4\(K\)\(5\)\(a\)](#), email is sufficient if on file with the Office of Neighborhood Coordination. If no email address is on file for a particular NA representative, notice must be mailed to the mailing address on file for that representative.

² Attach additional information, as needed to explain the project/request.

[Note: Items with an asterisk (*) are required.]

5. This application will be decided at a public meeting or hearing by*:

☒ Zoning Hearing Examiner (ZHE)

☐ Development Review Board (DRB)

☐ Landmarks Commission (LC)

☐ Environmental Planning Commission (EPC)

Date/Time*: Tuesday, September 21, 2021 at 9:00 AM via Zoom or In-Person.

Location*³: Please call (505) 924-3894 for details and updated regarding an in person hearing.

Agenda/meeting materials: <http://www.cabq.gov/planning/boards-commissions>

To contact staff, email devhelp@cabq.gov or call the Planning Department at 505-924-3860.

6. Where more information about the project can be found*⁴:

Please contact Jacqueline Fishman at fishman@consensusplanning.com or 505-764-9801.

Information on the Gateway Center Project is also available the City's website at cabq.gov/gateway.

Information Required for Mail/Email Notice by [IDO Subsection 6-4\(K\)\(1\)\(b\)](#):

1. Zone Atlas Page(s)*⁵ M-18-Z
2. Architectural drawings, elevations of the proposed building(s) or other illustrations of the proposed application, as relevant*: Attached to notice or provided via website noted above
3. The following exceptions to IDO standards have been requested for this project*:

☐ Deviation(s)

☐ Variance(s)

☐ Waiver(s)

Explanation*:

None requested.

4. A Pre-submittal Neighborhood Meeting was required by [Table 6-1-1](#): ☒ Yes ☐ No

Summary of the Pre-submittal Neighborhood Meeting, if one occurred:

A facilitated meeting occurred on June 22, 2021. Please see attached Facilitated Meeting Report Summary.

³ Physical address or Zoom link

⁴ Address (mailing or email), phone number, or website to be provided by the applicant

⁵ Available online here: <http://data.cabq.gov/business/zoneatlas/>

[Note: Items with an asterisk (*) are required.]

5. **For Site Plan Applications only***, attach site plan showing, at a minimum:

N/A a. Location of proposed buildings and landscape areas.*

N/A b. Access and circulation for vehicles and pedestrians.*

N/A c. Maximum height of any proposed structures, with building elevations.*

N/A d. **For residential development***: Maximum number of proposed dwelling units.

N/A e. **For non-residential development***:

☐ Total gross floor area of proposed project.

☐ Gross floor area for each proposed use.

Additional Information [Optional]:

From the IDO Zoning Map⁶:

1. Area of Property [typically in acres] 20.4 acres
 2. IDO Zone District Mixed-use High Intensity (MX-H)
 3. Overlay Zone(s) [if applicable] Airport Protection Overlay Zone (APO)
 4. Center or Corridor Area [if applicable] Center: Lovelace/VA Employment Center
- Current Land Use(s) [vacant, if none] Institutional / Medical

NOTE: Pursuant to [IDO Subsection 14-16-6-4\(L\)](#), property owners within 330 feet and Neighborhood Associations within 660 feet may request a post-submittal facilitated meeting. If requested at least 15 calendar days before the public meeting/hearing date noted above, the facilitated meeting will be required. To request a facilitated meeting regarding this project, contact the Planning Department at devhelp@cabq.gov or 505-924-3955.

Useful Links

Integrated Development Ordinance (IDO):

<https://ido.abc-zone.com/>

IDO Interactive Map

<https://tinyurl.com/IDOzoningmap>

Cc: Elder Homestead Neighborhood Association [Other Neighborhood Associations, if any]
Parkland Hills Neighborhood Association
Trumbull Village Association
Siesta Hills Neighborhood Association

⁶ Available here: <https://tinurl.com/idozoningmap>

**CITY OF ALBUQUERQUE
LAND USE FACILITATION PROGRAM
PROJECT MEETING REPORT**

Project Number: N/A – Pre-Application Meeting
Property Description: 5400 & 5006 Gibson SE; Tract A-1-A-1-A Plat of Tract A-1-A-1-A Lovelace Hospital (being a replat of Tract A-1-A-1 & a portion of vacated Ridgecrest Drive SE), containing 20.4232 Acres
Date Submitted: June 24, 2021
Submitted by: Jessie Lawrence and Jocelyn Torres
Meeting Date and Time: June 22, 2021, 5:30 PM
Meeting Location: Online via Zoom
Facilitator: Jessie Lawrence
Co-facilitator: Jocelyn Torres

Parties:

- **Applicant:**
 - City of Albuquerque Department of Family and Community Services
- **Agent:**
 - Consensus Planning
- **Affected Neighborhood Associations (per City of Albuquerque notification requirements):**
 - District 6 Coalition of Neighborhood Associations
 - South San Pedro NA

Background/Meeting Summary:

Applicant requests Zoning Hearing Examiner approval of a conditional use to allow an overnight shelter in a portion of the Gibson Medical Center at 5400 Gibson Blvd. SE, part of the Gateway Center at the Gibson Health Hub (referred to as the Gateway Center throughout this report). This was a pre-application meeting.

At the meeting, participants expressed a number of concerns about the planned project, and also expressed frustration and a lack of trust with the planning, process, and communication so far. Some participants said that they did not want the Gateway Center in this area or that this center should serve only the local area, and other areas of the city should have to support a greater share of the homeless services. Others said that they needed more information and discussed the need for more data, the complete operations plan in writing, information in writing about the number of people to be served, and information about the planned providers. Others expressed concerns about crime, security, bathrooms, pedestrian traffic, and vehicular traffic. Others requested more information about how individuals would transition out of the Gateway Center and where the transitional housing would come from. Others expressed concern about the Gateway Center being a magnet drawing homeless people to the community, and also asked about homeless people who might seek services but not want shelter. One person pointed out the need to work with the VA Hospital and veterans, and one person suggested a written Good Neighbor Agreement between the neighborhoods and the City.

City staff answered questions and responded to the concerns during the meeting. See Meeting Specifics and the Zoom Chat Appendix for a summary of all of the questions and comments discussed.

As follow-up items, the applicant and agent agreed to share the slide presentation, to provide information about the locations of the 19 public restrooms throughout the community, and to look into the question about what would happen with the conditional use if other tenants wanted to add overnight uses. They also said that the operations plan would be ready before the planned August 17 ZHE hearing, and the conditional use request materials would be sent to the neighborhood associations when they are submitted.

Outcomes:

- **Areas of Agreement:**
 - None noted among all meeting participants.
- **Unresolved Issues and Concerns:**
 - Several participants discussed frustration and a lack of trust in the City, in particular because of the lack of written plans and commitments and changing information about who the Gateway Center would serve.
 - Some participants said that they did not want the Gateway Center in this area or that this center should serve only the local area, and other areas of the city should have to support a greater share of the homeless services.
 - Some participants said there should be more data and information shared with the local residents in writing, including the operations plan, before a conditional use request is submitted.
 - Concerns discussed about the operations of the Gateway Center included:
 - Crime
 - Security and adequate police service
 - Public defecation and the number of available public restrooms
 - Pedestrian traffic
 - Vehicular traffic
 - Some participants asked about the available transitional housing and suggested that there is not enough for the Gateway Center's plans, and noted that there needs to be planning for a limited time of services and a transition out of homelessness.
 - Some participants expressed concerns about the Gateway Center making the neighborhood a magnet for homeless individuals, and also asked about homeless people who might seek services but not want shelter.
 - One person pointed out the need for better coordination with the VA Hospital and veterans.
 - One person suggested a written Good Neighbor Agreement between the neighborhoods and the City; others said that such agreements have been hard to enforce in other places.

From: Sanchez, Suzanna A. <suzannasanchez@cabq.gov>
Sent: Tuesday, August 3, 2021 9:02 AM
To: Aranda, James M. <jmaranda@cabq.gov>; Jackie Fishman <jfishman@consensusplanning.com>
Cc: Patten-Quintana, Lorena <lpatten-quintana@cabq.gov>; Charlene Johnson <Johnson@consensusplanning.com>
Subject: RE: Public Notice Inquiry Sheet Submission

Good morning Jackie,

In order to get Parkland Hills on the list I went out 200 feet rather than the 100+ feet.

Association Name	First Name	Last Name	Email	Address Line 1	Address Line 2	City	State	Zip
Parkland Hills NA	Mary	Darling	mldarling56@yahoo.com	650 Monroe Street SE		Albuquerque	NM	87108
Parkland Hills NA	Robert	Leming	phnapresident@gmail.com	712 Truman Street SE		Albuquerque	NM	87108
District 6 Coalition of Neighborhood Associations	Mandy	Warr	mandy@theremedydspa.com	119 Vassar Drive SE		Albuquerque	NM	87106
District 6 Coalition of Neighborhood Associations	Patricia	Willson	info@willsonstudio.com	505 Dartmouth Drive SE		Albuquerque	NM	87106
South San Pedro NA	Zabdiel	Aldaz	zabdiel505@gmail.com	735 Alvarado SE		Albuquerque	NM	87108
South San Pedro NA	Khadjah	Bottom	khadjahasilivizionz.org	1200 Madeira SE	#130	Albuquerque	NM	87108

Thank you,

Suzie

Below is the list of property owners to notify for 5400 and 5006 Gibson.

Owner	Complete Owner Address
GIBSON MEDICAL CENTER LLC	6300 JEFFERSON ST NE ALBUQUERQUE NM 87109
LOS POLLOS HERMANOS 5211 GIBSON LLC	105 JEFFERSON ST NE ALBUQUERQUE NM 87108-1216
RAVANO ROBERT J TRUSTEE RAVANO RVT & RAVANO STEPHEN R & THOMPSON SUZANNE M	1460 CRESTVIEW DR SAN CARLOS CA 94070-4255
HAJJAR CHARLES C TRUSTEE SIESTA HILLS REALTY TRUST C/O HAJJAR MGT CO INC	30 ADAMS ST MILTON MA 02186
RABADI SHARIF A & SAMIA S TR STAR TRUST	11201 SAN ANTONIO DR NE ALBUQUERQUE NM 87122-1049
PALM DIANE & PADILLA DEBORAH	1104 W BAY AVE NEWPORT BEACH CA 92661-1017
U S GOVERNMENT 377 CEG/CERR	2050 WYOMING BLVD SE KIRTLAND AFB NM 87117-5663
HAJJAR CHARLES C TRUSTEE SIESTA HILLS REALTY TRUST C/O HAJJAR MGMT CO INC	30 ADAMS ST MILTON MA 02186-3412
PEARL SPRING CREEK LLC	5600 GIBSON BLVD SE ALBUQUERQUE NM 87108-4840
ALBUQUERQUE HOUSING AUTHORITY	1840 UNIVERSITY BLVD SE ALBUQUERQUE NM 87106-3919
BHC ENTERPRISES LC	5844 AVONMORE CIR HIGHLAND UT 84003-3442
MCDONALDS REAL ESTATE COMPANY	ONE MCDONALDS PLAZA OAK BROOK IL 60523-1928
B & B MERRITT REAL ESTATE LLC	750 N 17TH ST LAS CRUCES NM 88005-4153
USA C/O DEPT OF VET AFFAIRS MED CENT	1501 SAN PEDRO DR SE 138 ALBUQUERQUE NM 87108-5138
GIBSON MEDICAL CENTER LLC	6300 JEFFERSON ST NE ALBUQUERQUE NM 87109-3482
LOVELACE BIOMEDICAL RESEARCH INSTITUTE	2425 RIDGECREST DR SE ALBUQUERQUE NM 87108-5129

Public Notice Inquiry For:

Zoning Hearing Examiner

If you selected "Other" in the question above, please describe what you are seeking a Public Notice Inquiry for below:

Contact Name

Charlene Johnson

Telephone Number

5057649801

Email Address

johnson@consensusplanning.com

Company Name

Consensus Planning

Company Address

302 8th Street NW, 3rd Street and Lomas, Universe St. and Paseo del Norte Blvd.

City

Albuquerque

State

NM

ZIP

87102

Legal description of the subject site for this project:

TR A-1-A-1-A PLAT OF TR A-1-A-1-A LOVELACE HOSPITAL (BEING AREPL OF TR A-1-A-1 & A PORTION OF VACATED RIDGECREST DRIVESE) CONT 20.4232 AC

LOT 1 SWIFT ADD'N CONT 0.4226 AC

Acres: 0.4226

Physical address of subject site:

5006 Gibson Blvd. SE and 5400 Gibson Blvd SE

Subject site cross streets:

Gibson Boulevard and San Mateo Boulevard

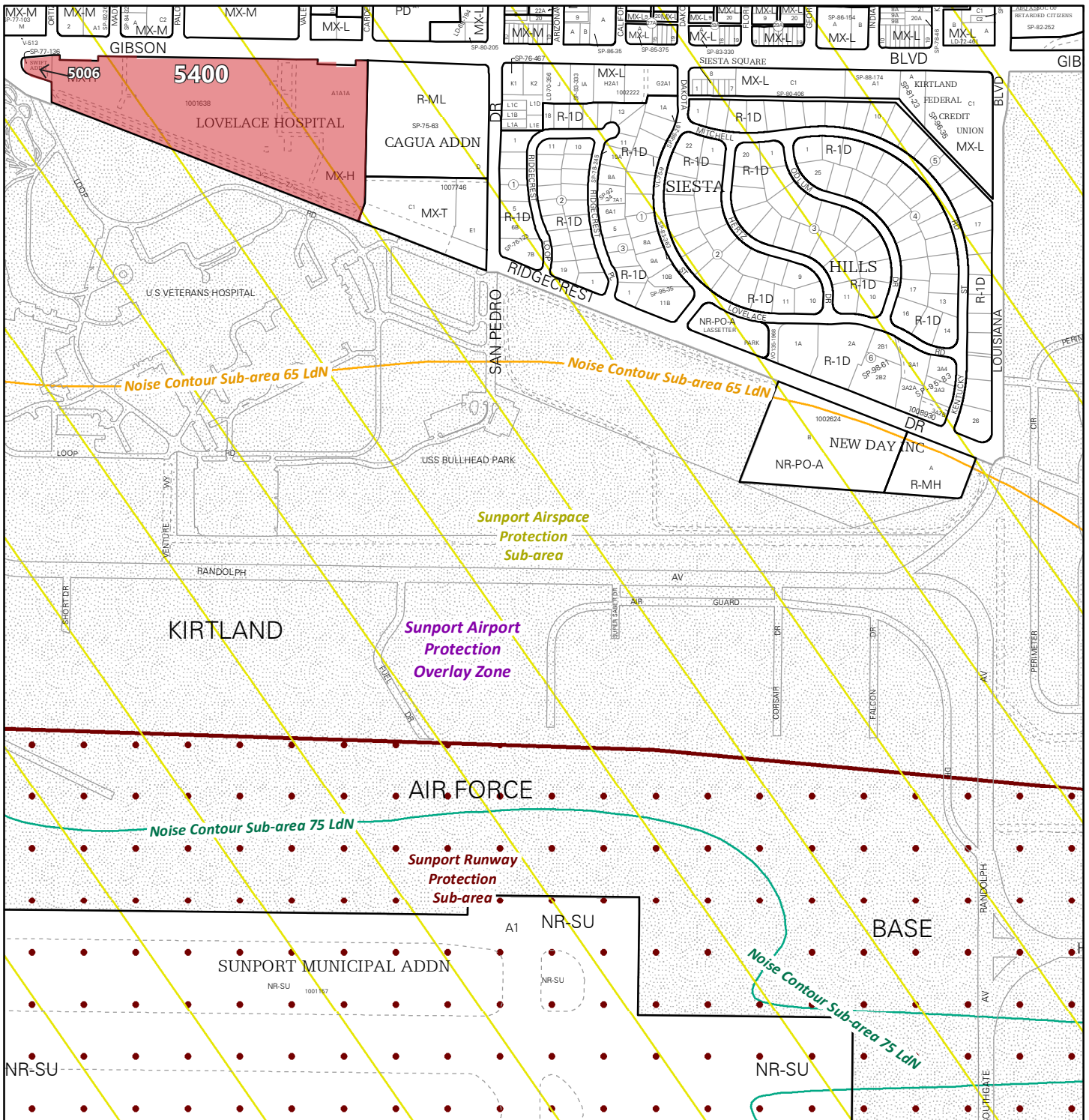
Other subject site identifiers:

Old Lovelace Hospital Site

This site is located on the following zone atlas page:

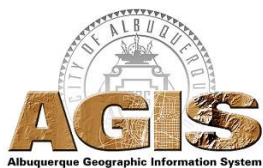
M-18-Z

<2. Letter to Property Owners-September.pdf>

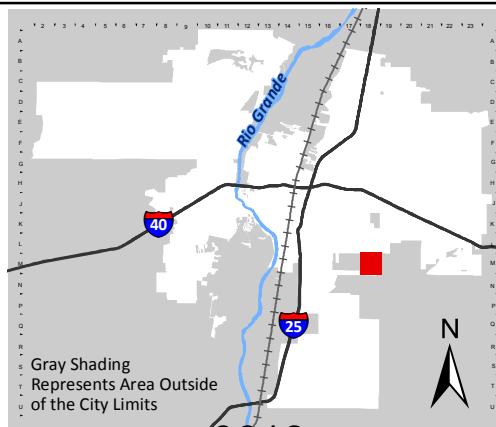


For more details about the Integrated Development Ordinance visit: <http://www.cabq.gov/planning/codes-policies-regulations/integrated-development-ordinance>

IDO Zone Atlas May 2018



IDO Zoning information as of May 17, 2018
The Zone Districts and Overlay Zones
are established by the
Integrated Development Ordinance (IDO).

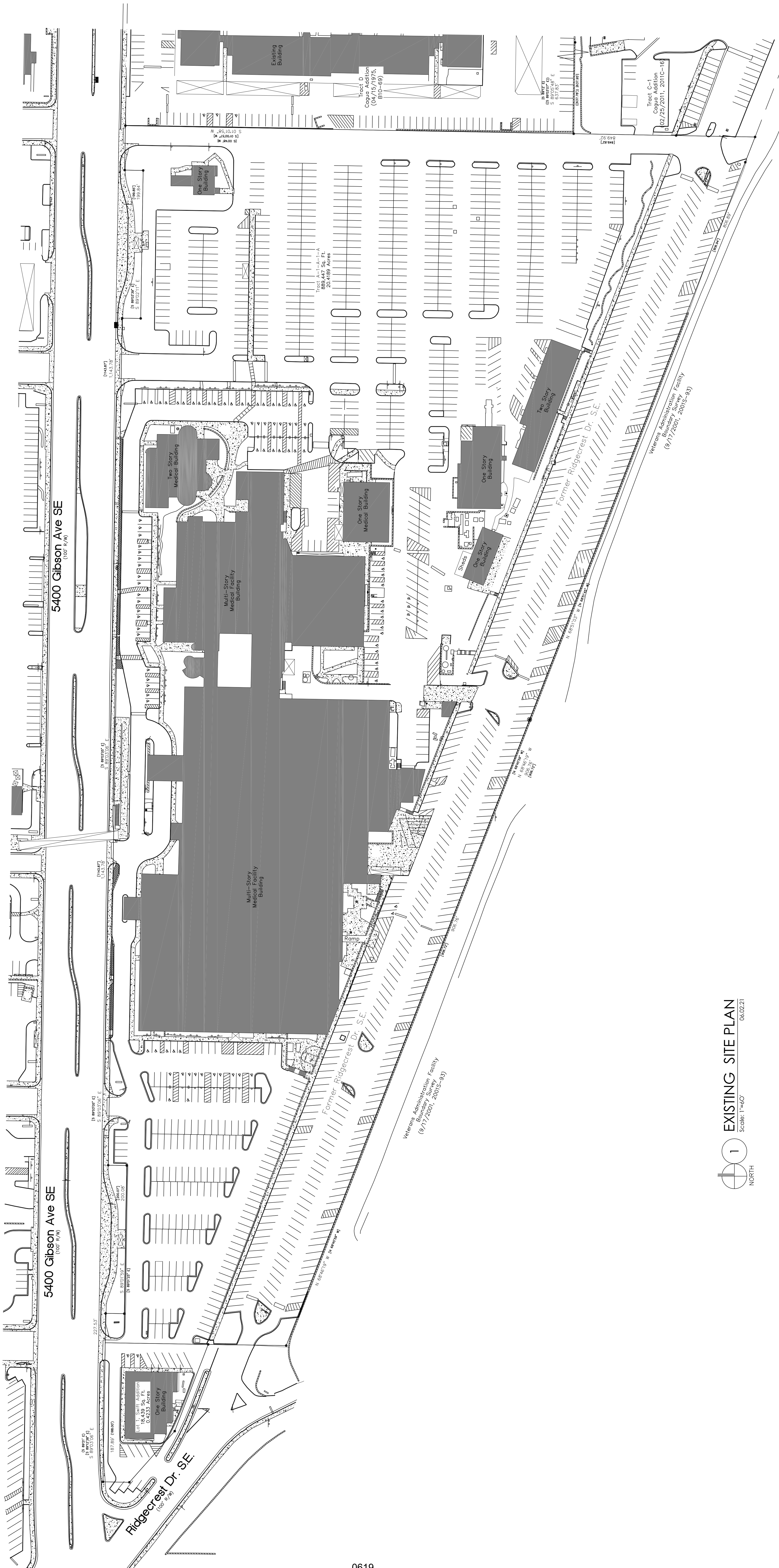


Gray Shading
Represents Area Outside
of the City Limits

Zone Atlas Page:
M-18-Z

- Easement
- Escarpment
- Petroglyph National Monument
- Areas Outside of City Limits
- Airport Protection Overlay (APO) Zone
- Character Protection Overlay (CPO) Zone
- Historic Protection Overlay (HPO) Zone
- View Protection Overlay (VPO) Zone

0 250 500 1,000 Feet



APPENDIX B

Source: KRQE News

Report by Jeannie Nguyen “Wells Park business owners file lawsuit over ongoing homeless problem,” Posted Oct 4, 2020, updated Oct. 5, 2020 (from pg. 4)

News Broadcast Video:

<https://www.krqe.com/news/albuquerque-metro/wells-park-business-owners-file-lawsuit-over-ongoing-homeless-problem/>

Written report: [ALBUQUERQUE, N.M.](#) (KRQE) – People living and working near Albuquerque’s Wells Park neighborhood are fed up with the growing homeless problem. They believe a local shelter is to blame.

“There’s threats of violence against the people that are there. The residents that have the property around that. There’s destruction of property,” says Attorney Blair Dunn.

Back in July, [Dunn sent a letter on behalf of the nearby business owners](#) threatening to sue the city if the mayor didn’t fix the problem. Now, they are keeping their word by suing the St. Martin’s Hospitality Center off Third St. and Mountain.

“This isn’t to knock St. Martin’s completely. They are trying to do good, but sometimes you do more harm than good. You draw these people down and you’re not giving them what they need,” he says.

While St. Martin’s provides services for the homeless, Dunn says their help is only temporary and doesn’t give long term solutions to the problem. “St. Martin’s needs to be more cognizant of the fact that they are imposing a burden on their neighbors,” he says.

With this lawsuit, Dunn hopes St. Martin’s and the city figure out a solution that works for both homeless people and the long-term residents of the Wells Park neighborhood. “They probably need to re-locate some place where they’re not imposing. That becomes an issue the city needs to weigh in on,” he says.

Back in July, the city told KRQE News 13 business owners should support Mayor Tim Keller’s plan on building a new homeless shelter, rather than threatening a lawsuit. The city and St. Martin’s did not respond to our request for comment.

Earlier this year, [Albuquerque Police started to crack down on homeless people](#) being in places they shouldn’t be by giving them citations. APD has said that is their last resort and they prefer to point them to services instead.

APPENDIX C

Source: Albuquerque Journal

LOCAL VOICES: Albuquerque's homeless: Worse than you think

By [Carl Dipalma, Albuquerque resident / Bruce M. Thomson, District 5 Director, board of Directors Chair, Albuquerque Metropolitan Arroyo Flood Control Authority](#)

Sunday, August 8th, 2021 at 12:02AM

Neighbors' pleas for help to fight crime, drug trafficking, homelessness have long been ignored by the city

By Carl Dipalma, Albuquerque resident

While spending the nights in Coronado Park this past year I became completely convinced the neighborhood has become as dangerous as anyplace in town.



A group of homeless people gathers at Coronado Park near 2nd Street and I40, January 2020. (Adolphe Pierre-Louis/Albuquerque Journal)

The illegal and life-threatening drug trafficking continues on bicycles throughout the dark hours, and there are between 20 and 30 of these stolen two-wheelers there at any given time. The grass has been destroyed. The playground has become a home for used syringes, empty alcohol containers, broken glass, human waste, used condoms, discarded bike parts and filthy clothing and all kinds of throwaway weapons and other trash.

The number of repeat offenders during the night is more than it has ever been because this park is being used as a pickup and drop-off location by the city-funded night shelter. Those people who are rejected by the yellow bus operators stay there after being told they cannot be given an empty bed and are now overflowing onto the surrounding taxpayers' doorways.

The property managers for the surrounding locations and their helpers have made about 4,000 calls for assistance to Albuquerque Police Department and to those who direct city law enforcement during the past five or six years, explaining that no one is allowed in the park after dark according to the city ordinance. They have written certified letters to the mayor. They have repeatedly asked their city councilor's office for help in the most serious and respectful way. They have also been ignored at many city-dominated community meetings. They have established the periodical watch with Valley Command between midnight and 4 a.m. month after month after month. They also continue to put their lives on the line every night by making eyewitness reports to APD with their cellphones while on foot. But they and the genuine homeless persons still remain in an increasingly dangerous situation. The spotlights, loudspeakers and warning tickets disappeared long ago into the distance with the patrol car.



Homeless people sleep on the sidewalk in front of a facility called HopeWorks located on 3rd Street in downtown Albuquerque. (Roberto E. Rosales/Albuquerque Journal)

Yes the truly homeless persons are in fear of calling APD because they are then left alone as ongoing unprotected victims of the unpenalized repeat offenders. Last year the Mayor's Office told those calling for help that "they are not going to be put in jail because putting the offender behind bars does not do any good." As a result there has been a growing number of assaults with primitive throwaway weapons, robberies and thefts, rapes every night, drunken and verbal and physical arguments in and around Coronado. We expect another homicide in the immediate area.

In short we are asking why do the contractor's yellow bus operators, who are unanswerable to the taxpayers, turn away their undesirable people on our property rather than use their own taxpayer-paid-for property to conduct their profitable businesses?

APPENDIX D

Police records depict pattern of problems, violence at Coronado Park

Nathan O'Neal

Updated: October 11, 2020 10:50 PM

Created: October 11, 2020 10:48 PM



ALBUQUERQUE, N.M. — Coronado Park is considered the heart of Albuquerque’s homeless problem. Located near I-40 and 2nd street, it comes with a lot of other problems too – including drug use, violence and mental health issues.

More than two years of police records reveal at least 120 times police, fire and other emergency services were needed at Coronado Park between January 2018 and June 2020.

“That park is not safe. It’s not safe for the people experiencing homelessness, it’s certainly not safe for any other neighborhood residents to go there,” said Doreen McKnight who is president of the Wells Park Neighborhood Association and has lived in the area for 10 years.

“This year alone in 2020 there were three homicides at Coronado Park. In 2019, a disabled woman was raped there and in 2018 there was a murder,” said McKnight.



Police 911 logs reveal a variety of other issues.

In February 2019, police investigated a stabbing after a fight broke out at the park.

One month before the stabbing, police responded to a call after a woman said she was suicidal, telling police on lapel camera video that she had previously made attempts to overdose on meth. Officers then took her to get help.

In 2018, the KOB 4 Investigates team used undercover cameras at Coronado Park which revealed illegal drinking, drug deals and people shooting up drugs in broad daylight.

The City of Albuquerque sees similar problems in other areas – in some cases, the city has taken legal action, even demolishing homes and building that have been deemed a nuisance problem.

McKnight wonders why the city hasn't treated Coronado Park the same way they've treated those other problem areas.

"If there was a private property that was picking up these kinds of 911 call numbers and these kinds of 311 call numbers and the types of criminal activity that's going on there, there's no way that the city would put up with that," said McKnight.

City councilor Isaac Benton who represents the area said "in the past, legal action has been taken against the city when we did try to remove street people from, for instance, the 4th street mall downtown."

“I think in general there’s a reluctance and it’s understandable... not just going after an individual homeless person who are in the park, even if they’ve set up some kind of small shelter or something,” said Benton. “But it’s a fine line between that and getting out of control.”

4 Investigator Nathan O’Neal: Do you believe that the city is doing as much as they can to address that problem?

Councilor Benton: “Yes, I do. We’re doing as much as we can but that’s not enough. So that sounds like a contradiction but it’s not. As a community, we have to accept that we’re going to have to spend a lot of money to tackle this problem and a lot of effort – and we’re in the midst of that right now.”

Coronado Park is a central hub for the homeless – a designated pick up and drop off site for the West Side Shelter. McKnight wants that to change.

“I think that the city really needs to make an effort to invest in that park... re-evaluate what the parks purposes, reengage people in that property, really activate the property,” said McKnight.

The problems at Coronado Park are complex and layered – and many city leaders concede, there is no simple fix.

“I think we need to do more,” said Carol Pierce, the director for Albuquerque’s Family and Community Services department, adding that stakeholders are working to develop a long-term plan for the area.

“There’s no question that we need more emergency shelter beds that are centrally located and what we know works and the community is asking for is smaller shelters,” said Pierce, adding later: “We’re not talking a 300-bed facility, we’re talking smaller shelters.”

“I remain optimistic because of who Albuquerque is and the neighbors and the businesses -- because together we can do this and we can do better,” said Pierce.

However, some are still skeptical.

“I don't know what the city's long term plan is but it definitely can't be just kicking people out of the park every day,” said McKnight of the neighborhood association.

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APPENDIX E

'It's becoming increasingly dangerous': Albuquerque park sees 3rd homicide

[Ryan Laughlin](#)

Updated: July 14, 2020 06:24 PM

Created: July 14, 2020 06:15 PM



ALBUQUERQUE, N.M. — Coronado Park in Albuquerque saw its third homicide this year after a [man was beaten to death Monday evening](#).

Ralph DiPalma, a volunteer minister, said issues at the park have only been growing worse.

"Instead of straightening out the problem, it's becoming increasingly dangerous," DiPalma said.

"There are many homicides among the homeless unreported, deliberate drug overdoses and missing persons," he added.



DiPalma has dedicated most of his life trying to serve the homeless almost every night at Coronado Park.

A spokesperson for APD said the department was cleaning out the park right before the latest homicide occurred. The victim was identified as 49-year-old Randy Hillard. DiPalma said he knew him well.

"We talk to Randy all the time. We bought him a bus ticket back to Texas. He didn't stay in Texas, he came back here because Albuquerque has become a sanctuary city for the repeat offender, homeless men and women," he said.

DiPalma said Hillard was a known drug addict that got himself into trouble.

"We have a lot invested in Randy. We got him into drug and alcohol programs, and he refused to stay," he said.

DiPalma said they've tried to engage with the mayor and wrote him a letter with more than a dozen business signatures asking for help.

"Ten months, no real answer—just a makeshift response," he said.

Mayor Keller sent KOB 4 the following response to the latest Coronado murder:

"It isn't about whether the park will become an issue at some point--it already is and has been. We have already taken steps to improve the park including gating, lighting, regular cleanup and patrol. Until we get the Gateway Center built we are worried about continued violence and challenges with our homeless community. The Gateway Center will get vulnerable people off the streets and into permanent housing even as we tackle violent crime from the APD side with both enforcement and prevention. Improving Coronado Park means tackling the underlying public safety issues, and that's our focus."

An APD spokesperson said the new APD Valley Commander is focusing police resources on the park and that they're clearing it out every night to prevent people from sleeping there.

"You know, I'm not sure what you mean by a public nuisance, but it is a focal point for the department. We want to prevent violence and I think we've been doing a pretty good job lately, but we've had these homicides that are concerning," said APD spokesman Gilbert Gallegos.

APD said they're continuing to do undercover drug operations, outreach for the homeless and working with neighborhood partners.

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APPENDIX F

https://www.santafenewmexican.com/opinion/editorials/the-shelter-next-door-can-be-a-tough-neighbor/article_79ffa0b8-ebea-11eb-8ea8-4b85fd3cc2eo.html

The shelter next door can be a tough neighbor

The New Mexican

Jul 23, 2021



People gather in October on Harrison Road outside the Interfaith Community Shelter at Pete's Place.

Luis Sánchez Saturno/New Mexican file photo

Loving your neighbor is easier when the homeless shelter is not next door.

Just ask the residents along Harrison Road by the Interfaith Community Shelter at Pete's Place, or the people living close to nearby Franklin E. Miles Park, or the long-suffering folks near St. Elizabeth Shelters & Supportive Housing on Alarid Street.

This reaction is not a simple case of not-in-my-backyard, a cruel refusal to help the stranger or those who struggle. It is an understandable frustration of homeowners, renters, businessmen and women — all concerned about their safety, their children's safety, their surrounding environments and, yes, their property values.

Everyone wants to help people without shelter — or at least most people, except perhaps for the very cruel. But most people who help the shelter, whether with good wishes, cash, donations or in-person volunteering, aren't living next door.

It is the neighbors who must deal with petty thefts, people defecating on their sidewalks, needles left after addicts shoot up and the never-ending supply of empty alcohol bottles or beer cans. There are fights, drug deals and other altercations that interrupt otherwise quiet residential neighborhoods.

Much of the commotion is not caused by people who live on the streets; other, darker forces prey on them, whether selling drugs or robbing those who can't defend themselves.

To fail to succor people who need assistance is cruel, unworthy of Santa Fe.

The Interfaith Community Shelter at Pete's Place came into being for the best of reasons — to protect people who were dying because of the cold. St. Elizabeth Shelter, with its long history of helping the vulnerable, was established only after a lawsuit and much controversy back in the late 1980s.

A few weeks ago, residents near the interfaith shelter once again went to the city for relief. They want Pete's moved. They want to be able to walk down the sidewalk without having to step over a tent or avoid human waste. They want their children to be able to play in safety, and their businesses to operate without customers being harassed.

They want the same quiet that nearly every other Santa Fe neighborhood enjoys.

That is not so much to ask.

During the pandemic, the city began putting up shelter guests in motels or in the dorms at the abandoned Santa Fe University of Art and Design campus. Santa Fe can and should be proud that COVID-19 did not spread rapidly among people without homes.

Further, the city used \$2 million in CARES Act money — the federal aid to relieve effects of the pandemic — to assist a nonprofit in the purchase of a hotel with suites, establishing a place where more people who need homes can get a fresh start.

But the problem of people living on the streets is not going away, not with the price of rentals skyrocketing and a shortage not just of affordable housing, but all housing. Supply and demand is off-kilter, not just in Santa Fe, but the country.

Just this month, workers from Santa Fe Public Schools cleared a homeless camp in open space by the La Farge Branch Library. Close to Nava Elementary, Milagro Middle School and Santa Fe High, the camp also was located in a waterway. It was both unsightly and unsanitary, but home to the people who slept there. It needed to be removed, but where will its residents, as well as the many people sleeping in arroyos, parks or benches, go?

City of Santa Fe officials, now that the pandemic has eased, say they will begin breaking up more such settlements. Camping on public property is restricted by city ordinance, although that prohibition was eased during the pandemic because of limits on shelter capacities.

Cleaning up camps fixes one problem. But people still need shelter. What we are doing is not working. That doesn't mean private foundations, city and county officials, experts on homelessness and others are not developing better ways to meet the needs of our community. A document written during the pandemic — Santa Fe Homeless and Housing Needs — succinctly outlined problems and solutions, including what such groups as The Life Link or Esperanza Shelter are doing. Many smart people are working on this issue.

As they work, keep in mind both the people who need help and neighbors who need relief. Kids should be able to play in the park without seeing grown men urinate or two strangers having sex on the grass. And no human should fear being swept away in a flash flood because the only safe place to sleep is in an arroyo. Santa Fe needs to address both challenges.

Neighbors of Pete's Place have asked the city to consider relocating the shelter — and city leaders should listen, not because "those people" should be hidden away but because individuals who need shelter deserve better. Shelter staff and volunteers do incredible work, but the building is a former pet store, hardly an optimal location for sheltering humans.

A more expansive shelter, close to bus routes but with room on the grounds for showers,

restrooms, camping sites and services — counseling, job advice, health care, substance abuse treatment — is a more humane approach. Pete's has a four-year lease, approved by the City Council late last year. Use those years to plan a better solution for helping transients or providing emergency care, and at the same time, keep focusing on housing for families, young people and working adults.

Our hearts are in the right place — now, to get people in homes, support them in their search back to self-sufficiency and ensure dignity and safety to all residents as they go about their lives.

APPENDIX G

https://www.santafenewmexican.com/news/local_news/some-request-relocation-of-pete-s-place-shelter-at-santa-fe-community-meeting/article_a5a67ada-e365-11eb-b66a-2fd59f8fo8f3.html

Some request relocation of Pete's Place shelter at Santa Fe community meeting

By Sean P. Thomas sthoams@sfnewmexican.com

Jul 13, 2021

Drug abuse and safety concerns near the Interfaith Community Shelter at Pete's Place dominated a community discussion held by the city Tuesday evening.

Much of the discussion surrounded deteriorating conditions around the shelter, located at the corner of Cerrillos and Harrison roads.

Residents and business owners painted a picture that included drug dealing, aggressive behavior and sexual assault, particularly along Harrison Road.

Those problems led some to call for the shelter's relocation.

Santa Fe resident Susan Guevara said the situation has only spiraled in the 14 years she has lived near the facility.

"The situation has gone from 'Aw, gee, this is a drag' to absolutely frightening," Guevara said. "I told the City Council and Mayor [Alan] Webber that we have already had assaults there; we are going to see batteries soon. That is one of the biggest reasons why this shelter needs to be in a more appropriate area."

George Lyon, announced as the shelter's new executive director in May, said that regardless of where the facility is located, the underlying problem will persist.

"We will resolve the situation with your help," Lyon said. "It's not just Pete's Place. If you move Pete's, you're just moving it to another area. The problem is a disease that is hurting our community, and without concerted effort, it is not going to change."

Police Chief Andrew Padilla said the community needs to unite to find a solution to the issues.

"The location it is in, it is there," Padilla said. "Until we come together as a city, a county and a state and identify a better location, unfortunately, we have to deal with this situation as a community and as a group."

The city approved a new four-year lease with the shelter in October. The meeting, held virtually via Zoom, was a requirement of the city's agreement with Pete's Place.

Capt. Matthew Champlin said the police department typically receives complaints about loitering, which affects the quality of life for business owners and residents in the area.

The city does not have an ordinance against loitering.

There were 118 dispatched calls for service on Harrison Road from June 1 to July 13, according to the police department.

During that same time, Champlin said the department completed 140 drive-bys in the area, also known as proactive close patrols.

"That is the highest amount of close patrols I have seen in that time period in one area," Champlin said.

Community Health and Safety Director Kyra Ochoa outlined actions taken by the city to mitigate safety concerns, including adding \$90,000 to an Allied Security contract for Harrison Street during the past fiscal year.

City officials also detailed a budding plan to increase sidewalk access along Harrison Road, often impeded by tents, according to residents.

Improvements to spotty street lighting along the road to help address safety issues in the corridor also were proposed.

Mark Edwards, owner of Z Pets Hotel and Spa on Harrison Road, said he felt it currently was more dangerous during the day than at night and didn't believe infrastructure improvements would help with safety.

“I have a 13-year-old volunteer who lives in the Homewise project who doesn’t feel safe enough to walk to my business to volunteer there,” Edwards said. “She is not even allowed to come out of my business until her mother is in the parking lot.”

Santa Fe resident Miguel Gabaldon said if the city did widen the sidewalk, it would result in more sidewalk camping and need for enforcement.

City Councilor Renee Villarreal, who spearheaded the sidewalk-widening effort with Councilor Signe Lindell, said that while she didn’t believe it was a fix for issues swirling around Harrison Road, it helped meet a constituent’s request.

“I don’t want to disregard the folks who do want that,” Villarreal said.

Villarreal said while she is concerned about homelessness, she receives more complaints about drug dealers, drug use and gangs.

“The complaints we get are not complaints against the homeless populations,” she said. “It’s really about the people who prey on these folks.”

Champlin said arresting away a drug problem was not a solution, adding better alternative was providing support services.

Mayor Alan Webber agreed.

“You can’t arrest someone for being homeless,” Webber said. “That is not a crime in our city. It is a crime to be a drug dealer, to threaten someone with violence, to be a gang member throwing rocks and intimidating people and blocking them into their cars.”

Sean Thomas

Reporter

APPENDIX H

'We're really the dumping ground': Phoenix neighbors, service providers clash after decades of inaction on homelessness

Jessica Boehm | Arizona Republic | 2:15 pm MST October 13, 2020



[Surviving summer in a Phoenix homeless encampment](#)

[View | 12 Photos](#)

Andre House provides water, food and relief from heat

About 500 people sleep every night in sleeping bags, tents and makeshift tarp shelters on the streets around the Human Services Campus south of downtown Phoenix.

They either can't get — or don't want — one of the roughly 450 shelter spaces on the campus, which are full virtually every night.

The large encampment, which temporarily has been moved to nearby parking lots because of the COVID-19 pandemic, has created severe public health and safety issues for the people sleeping on the streets and nearby businesses and residents.

The Human Services Campus has asked Phoenix for permission to increase the number of people who can sleep on the campus by about 500. The leadership at the campus believes this will both save lives of people living in the harsh elements and unsafe conditions on the street while easing the burden on the neighborhoods.

Neighbors aren't sold. They're fearful that the people who move onto the campus will just be replaced by more people experiencing homelessness, which will further increase the issues they have with [trash and crime in the area](#).

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For more than 30 years, these working-class, minority neighborhoods has shouldered most of the burden of caring for people experiencing homelessness in Maricopa County.

The current debate over whether to increase beds at the Human Services Campus comes after decades of inaction in every level of government in Arizona to successfully address a homelessness problem that has reached unprecedented levels.

And because of the economic consequences of COVID-19, the suffering could become even more acute.

Neighbors and service providers agree that the state, county and metro-Phoenix cities need to create more shelters and more services in other parts of the region so that fewer people are concentrated in the neighborhoods around the Human Services Campus.

But after decades of broken promises and a lack of leadership, it's hard for anyone to believe that change is possible.

Bill Morlan, president of Electric Supply Inc., said he feels like "we're having the same conversations we've had for as long as we can remember." Morlan's been working at the business, which is almost next door to the Human Services Campus, since 1985 when his family bought it.

For the past year, the massive encampment on Madison Street dotted his property line, and he'd find trash and human feces on his property daily.

Morlan recently came across a transcript of a city meeting from decades ago where his father was listing the same concerns that he has now.

"The city and the county and the state have not really worked together with a good long-term approach on how to handle the problem of homelessness. They just try to hide it by sending it down to this neighborhood. We're really the dumping ground," Morlan said.



Homeless tents are erected in lots west of downtown Phoenix on May 27, 2020.
Michael Chow, Emmanuel Lozano/The Republic

The failure of the government to adequately address the problem has led to a single homeless campus that's absorbing a large portion of the homeless population and neighborhoods whose concerns about their health and safety are frequently brushed aside.

Both are overwhelmed and overburdened by the sheer volume of the homelessness problem in the region, which has been placed squarely on their shoulders because of decades of government inaction.

"We should have seen some of this coming a long time ago and been ready for this," Morlan said.

Only one large service provider

The Human Services Campus includes 15 organizations that provide services to the region's homeless population, including a shelter run by Central Arizona Shelter Services.

Some smaller homeless shelters are scattered across metro Phoenix, but the Human Services Campus is the major provider of shelter and services for all of Maricopa County.

Plans for other large shelters in the region were scrapped in past decades because of neighborhood pushback and a lack of political will. Meanwhile, the demand for shelter has increased.

Unsheltered homelessness has increased in Maricopa County for the past six years. According to [the most recent point-in-time count](#), there are at least 3,767 people living in places not meant for human habitation.

Maricopa County, the state of Arizona and the metro Phoenix cities share the responsibility of address homelessness in the region.

Each entity often blames the others for not doing their part. In actuality, no level of government has adequately addressed the issues of housing affordability and homeless services, what is evident in the increasing numbers of people experiencing homelessness across the county.

Phoenix leaders say their city and constituents have carried the most weight because the Human Services Campus is in the city. Phoenix Mayor Kate Gallego and other leaders have called on the county, state and suburban cities to pitch in and create their own shelters.

Those calls have gone largely unanswered.

A bill that would have allocated \$5 million from Arizona's general fund to build a new 200-bed emergency shelter for people age 55 and older in the West Valley got some traction earlier this year but was derailed after the COVID-19 pandemic took hold in Arizona.

What would zoning change do?

The Human Services Campus believes adding more shelter space on the campus will provide some relief for both the people experiencing homelessness and the surrounding neighborhoods that are impacted by people currently sleeping on the street.

Executive Director Amy Schwabenlender said the additional shelter beds will not solve the homelessness crisis for the whole county. But it's one thing her organization can do now to move people off the streets and into a bed.

"We do know that a shelter bed is the step to housing, and a shelter bed is the way out of homelessness," Schwabenlender told the Central City Village Planning Committee on Monday night.

The Human Services Campus zoning currently allows for 425 shelter beds, but the campus received approval to add 45 beds through a grant in past years, bringing the total number of beds to 470.

During extreme heat, the campus allows an additional 275 people to sleep indoors in the St. Vincent de Paul dining room.

So there can be as many as 745 people sleeping on the Human Services Campus.

That number was lower this summer because of physical distancing requirements associated with COVID-19, but was the case last summer and in recent past years.

About two years ago, Maricopa County closed the overflow shelter outside of the campus where about 500 people slept nightly and did not provide another option or additional shelter beds. Many believe that the closure led to the large number of people sleeping outside.

The zoning change the Human Services Campus is requesting would add 275 beds to the main shelter on the campus, operated by CASS, bringing the year-round total to 700.

It would also allow 100 new beds to be operated at an existing building owned by Andre House, a Catholic service organization across the street from the Human Services Campus.

[View | 19 Photos](#)

Coronavirus pandemic: Homeless camps in Phoenix brace for heat wave

The Andre House shelter would be a "lower-barrier shelter," meaning it would be more accepting of people with substance abuse issues, pets or excess personal belongings than a traditional shelter.

This type of shelter is meant to appeal to the people who have been living on the streets for long periods of time and may not be comfortable with the rules and crowds in a traditional shelter, said Ash Uss, advocacy and partnership coordinator for Andre House.

Uss interviewed people experiencing homelessness in the area and found that 90 out of 100 people who chose not to stay at CASS would feel comfortable staying in the Andre House shelter.

"We have evidence to believe that this kind of unique shelter model will capture those folks," Uss said.

The zoning change would also allow for 200 "weather relief" beds, which would allow an additional 200 people to sleep on the campus during extreme weather.

"I fundamentally believe it is inhumane that we have buildings, we have capital and we have resources to shelter more people but we don't have permit to shelter more people," Uss said.

The Phoenix Planning and Development Department staff recommended approval of the bed increase, subject to 22 requirements that include daily cleaning around the property, a reservation of beds for police officers who encounter vulnerable people in need of a bed and mandatory community and city meetings to try to alleviate neighborhood issues.

The zoning change went before the Central City Village Planning Committee on Monday night.

The committee voted 6-3 to recommend approval of the bed increase, after about four hours of heated public comment.

The case is expected to go before the Planning Commission in November and to the Phoenix City Council for a final decision in December.

Decades of 'disrespect'

"The things that this community wants are no different than what any community wants: to have a healthy, environmentally safe neighborhood full of opportunity and to have neighbors and business bring quality to life to the neighborhood and are not detrimental," said Eva Olivas, executive director and CEO of the Phoenix Revitalization Corporation.

Olivas has led the charge against the expansion of beds at the Human Services Campus and for more than a decade has been asking city, county and state officials to intervene and reduce the campus' impact on neighborhoods.

Olivas said people experiencing homelessness leave the shelter during the day and walk through their neighborhoods, often leaving behind trash and sometimes engaging in criminal activity. Parents won't let their kids go to parks or walk the neighborhood unattended out of fear, and some elementary schools have had issues with people experiencing homelessness coming onto their campuses, she said.



A woman experiencing homelessness moves her belongings during an intensive street cleanup near the Human Services Campus on Feb. 5, 2020, in Phoenix.
Sean Logan/The Republic

She said the neighborhood groups have been shuffled around from the city, to the county, to the Human Services Campus — and she doesn't believe any entity takes their concerns seriously.

Olivas said the shelter's neighbors have no faith that the Human Services Campus adding beds will lessen the burden on neighborhoods. They believe it will just draw more people to the area and give the rest of Maricopa County an excuse to not develop other shelters, she said.

The neighborhoods surrounding the Human Services Campus are extremely low-income and largely Latino. Olivas said she believes this is why the city ignores their concerns.

She recalled a news story from last year about a Dutch Bros. coffee shop on Central and Camelback avenues that drew ire from neighbors because of the amount of traffic. [The city revoked the coffee chain's permits.](#) effectively forcing it to close.

The neighborhood impact near the Human Services Campus is far worse than traffic congestion, but communities in the area are brushed aside, Olivas said.

"Are you serious? I don't understand. Is it because people in that neighborhood said it?" she said.

Olivas said every time her neighborhood group speaks about their concerns, service providers and government officials say they have "no humanity" and don't care about people experiencing homelessness.

This isn't true, and the comments are hurtful and isolating, she said.

"They're not asking for the Taj Mahal, they're asking for a clean and safe environment," Olivas said. "(The neighbors have) been so disrespected, so dismissed, so discarded."

She said until neighborhoods are taken seriously by the Human Services Campus, "there's no way for us to coexist."

Schwabenlender said she recently read a transcript from a city meeting in 1990, shortly after CASS opened.

The concerns from the neighborhoods about trash, crime and oversaturation were nearly identical to those of today.

"After reading that, I have probably more empathy for some of the people who've lived here so long. They've been saying things for 30 years and no one's heard them. That's really disappointing," Schwabenlender said.

She said the rules the city attached to the bed increase, including enhanced cleaning and more frequent conversations with the community, will create a better relationship with the neighborhoods and address their valid concerns about negative impacts.

Schwabenlender has been the executive director of Human Services Campus for about two years. Before her, there were several other executive directors over a short period of time and that could have led to a fractured relationship with the neighborhoods, she said.

She wants to change that, and she wants the neighborhoods to hold her and the campus accountable. Schwabenlender said she know that neighborhood trust is something that will take time to win.

"They have to have enough experience to know I'm going to do what I say I'm going to do," Schwabenlender said. "I can't speed up time to show them."

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APPENDIX I

KFF Mental Health Care Health Professional Shortage Areas (HPSAs) | KFF

Timeframe: as of September 30, 2020

Location	Total Mental Health Care HPSA Designations	Population of Designated HPSAs	Percent of Need Met	Practitioners Needed to Remove HPSA Designation
New Mexico	80	1,366,095	12.9%	78

NOTES

Notes

Health Professional Shortage Area (HPSA) designations are used to identify areas and population groups within the United States that are experiencing a shortage of health professionals. There are three categories of HPSA designation based on the health discipline that is experiencing a shortage: 1) primary medical; 2) dental; and 3) mental health. The primary factor used to determine a HPSA designation is the number of health professionals relative to the population with consideration of high need. Federal regulations stipulate that, in order to be considered as having a shortage of providers, an area must have a population-to-provider ratio of a certain threshold. For mental health, the population to provider ratio must be at least 30,000 to 1 (20,000 to 1 if there are unusually high needs in the community).

The number of mental health care HPSA designations includes HPSAs that are proposed for withdrawal and HPSAs that have no data. By statute, designations are not withdrawn until a Federal Register Notice is published, generally once a year on or around July 1.

Sources

Bureau of Health Workforce, Health Resources and Services Administration (HRSA), U.S. Department of Health & Human Services, [Designated Health Professional Shortage Areas Statistics: Designated HPSA Quarterly Summary, as of September 30, 2020](https://data.hrsa.gov/topics/health-workforce/shortage-areas) available at <https://data.hrsa.gov/topics/health-workforce/shortage-areas>.

Definitions

Percent of Need Met is computed by dividing the number of psychiatrists available to serve the population of the area, group, or facility by the number of psychiatrists that would be necessary to eliminate the mental health HPSA (based on a ratio of 30,000 to 1 (20,000 to 1 where high needs are indicated)).

Practitioners Needed to Remove HPSA Designation is the number of additional psychiatrists needed to achieve a population-to-psychiatrist ratio of 30,000 to 1 (20,000 to 1 where high needs are indicated) in all designated mental health HPSAs, resulting in their removal from designation. While mental health HPSA designations can include core mental health providers in addition to psychiatrists, most mental health HPSA designations are currently based on the psychiatrists only to population ratio. HPSA designations based on psychiatrists only do not take into account the availability of additional mental health services provided by other mental health providers in the area, such as clinical psychologists, clinical social workers, psychiatric nurse specialists, and marriage and family therapists.

N/A: Data not available.

APPENDIX J

Lawsuit filed in death of inmate at Bernalillo County Metropolitan Detention Center

By Elise Kaplan / Journal Staff Writer

Published: Friday, July 23rd, 2021 at 6:50pm

Updated: Friday, July 23rd, 2021 at 9:54pm

Metropolitan Detention Center. (AP file)

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The family of one of the people who died while in custody of the Metropolitan Detention Center last year has filed a lawsuit against Bernalillo County, the jail and the medical provider and staff alleging medical malpractice and negligence led to his death.

Samuel Bryant, 46, died from the toxic effects of methamphetamine with contributing factors of opiate withdrawal, according to an autopsy report. The Office of the Medical Investigator determined his death was an accident.

He was one of nine people in jail custody to die in the course of a year – a dramatic spike over previous years. While the causes of death varied, six appear to have occurred while inmates were detoxing from drugs or alcohol or in medical units – all under the care of medical contractor Centurion Detention Health Care. None of the deaths were from COVID-19.

Bryant's death is similar to that of 38-year-old Joleen Nez, who also died from the toxic effects of methamphetamine, according to an autopsy report recently released to the Journal. OMI determined her death also was an accident.

A jail spokeswoman did not answer questions about whether anyone was disciplined regarding either death or whether any jail policies have since been changed.

In an email, spokeswoman Julia Rivera said "MDC will not provide a comments on any pending litigation." An attorney for Centurion did not respond to a call or email from the Journal seeking comment on the lawsuit.

Last spring, after the Journal published an article on the increase in deaths at the jail, the county said it "expressed concern to Centurion over staff vacancies and continuity of care" and asked the company to respond. Instead, Centurion terminated its contract more than a year early.

Parrish Collins, the attorney representing Bryant's estate, has filed numerous lawsuits against Centurion, the state Department of Corrections and county jails regarding medical malpractice behind bars. "I think there's definitely a pattern, it's more than just (deaths while in) detox or any of that," Collins said. "It's a pattern of gross neglect, gross medical neglect. I think it runs throughout the state, the jails and prisons." He said in Bryant's case the medical and jail staff should have taken care of him. "He was on therapeutic watch but they weren't watching him despite the fact that he was screaming in pain," Collins said. "The fact that they documented that he was screaming and they did nothing, I don't even know how to describe that level of callousness."

Bryant was arrested on a warrant for failing to appear in a domestic violence case on Sept. 22 and housed in a single occupancy cell in the jail's detox unit. His stepmother told the Journal in March that he had a "heart

of gold” and was a very good man who got “hooked on drugs.” She said he had visited her hours before he was arrested.

Correctional officers checked on him around 11:30 p.m. and saw that he had vomited on the floor, according to incident reports released to the Journal in response to an Inspection of Public Records Act request. The guards said they asked if he needed anything and he said, “I’m just detoxing.” For the next couple of hours he could be heard banging on the wall and yelling. Around 2:30 a.m. he was seen lying on his stomach. About 50 minutes later when a detox nurse went to check his vitals he was unresponsive.

At 4:06 a.m. Bryant was declared dead.

According to the lawsuit filed against Bernalillo County, the jail, Centurion and individual employees, staff “knew of Bryant’s history of heroin usage and that he was in withdrawal and with wanton, willful and deliberate indifference to his severe and emergent medical condition failed to take action within its authority to protect the health of Mr. Bryant.” The lawsuit also alleges that the defendants “ignored Mr. Bryant’s screams throughout the night leaving him to suffer severe physical and psychological pain.”

The suit asks for compensatory and punitive damages.

Nez, who died on Jan. 31, had been arrested on a warrant for failing to appear in a littering case. She had been charged with littering after an officer saw her kick over a cup and bowl and then – after the officer asked her to pick it up – she only picked up the bowl.

She was booked into a detox unit on Jan. 29 and, according to incident reports, another inmate found her unconscious and not breathing around noon.

She was brought to the hospital, where she died. OMI said her brain and kidney were damaged due to her organs not getting enough blood and oxygen over a period of time.

The Journal could not reach Nez’s family.

APPENDIX K

Centurion Presence Coincidental In New Mexico Prison and Jail Deaths?

By: [Collins & Collins, P.C.](#)

July 29th, 2021 in [Civil Rights](#), [Medical Malpractice](#), [New Mexico Injury Attorney Blog](#), [Prison Medical Neglect](#)
<https://www.collinsattorneys.com/centurion-presence-coincidental-in-new-mexico-prison-and-jail-deaths/>

[A report from the Albuquerque Journal](#) indicates that nine inmates died while in the custody of the Bernalillo County Metropolitan Detention Center (MDC) during the prior August 2020 to January 2021. At least 72 inmates died in the custody of NMCD from June 2016 to November 2019.

What is the common denominator in all these deaths? Centurion Correctional Healthcare of New Mexico (Centurion) was the medical contractor providing medical care to those deceased inmates. The question is whether or not this is purely coincidental?

Centurion Lawsuits

As of the writing of this article, [Collins & Collins, P.C.](#) has filed 18 lawsuits against Centurion. The most recent lawsuit filed by the firm, [Estate of Samuel Bryant v. Centurion, Bernalillo County, et al](#), involved a detox death at MDC. Sadly, again according to the Albuquerque Journal, Samuel was one of six MDC inmates that died during detox. One detox death is inexcusable. Six approaches criminality. Until that lawsuit, the firm had not filed any lawsuits against MDC. Rather, the lawsuits were limited to New Mexico Corrections Department (NMCD).

Centurion according to the contract with MDC took over medical care at the facility on January 1, 2020 with a first year compensation base of \$13 million. These 18 lawsuits will by no means be the last. It is expected that there will be additional lawsuits arising out of Centurion's medical services at MDC. Likewise, there will likely be additional lawsuits arising out of NMCD medical care despite the fact that Centurion vacated the contract in November 2019.

Centurion Vacated NMCD Contract Early

The original contract between NMCD and Centurion was for 3 years. The term had been extended for one year so the contract should have ended around June of 2020. However, Centurion as mentioned above vacated early in November 2019.

Centurion Vacating MDC Contract Early

According to [press reports](#), Centurion will be vacating the MDC early as well. The contract with MDC was for 4 years. Assuming the press reports are accurate, Centurion will be leaving about 2.5 years early on its 4 year contract. It is not known yet why Centurion is leaving but that is certainly something that Collins & Collins, P.C. will be exploring in its most recent lawsuit against MDC and Centurion.

Centurion Cannot Exit New Mexico Soon Enough

Centurion's performance in New Mexico prisons and jails is appalling to say the least. This can be judged purely on the basis of the number of deaths at NMCD and MDC under Centurion's medical watch. However, it is much worse than that. The clients of Collins & Collins, P.C. have suffered severe and permanent injuries at best while a number have died under the care of Centurion. Keep in mind that Collins & Collins, P.C. is a small firm among many law firms in New Mexico. There have been many other suits filed by other firms with equally devastating and avoidable injuries arising out of the callous medical neglect of New Mexico inmates. Likewise, there have been other

deaths. Worse still, the true toll of Centurion's tenure in New Mexico is not known as few inmates actually file suits for many reasons which are beyond the scope of this article. In addition, NMCD deaths resulting from Centurion's gross incompetence are likely far higher than the 72 identified since deaths that occur outside NMCD premises do not show up in Office the Medical Investigator reports.

The toll on inmates and their families is incomprehensible. The [toll on New Mexico taxpayers has not been measured but the costs associated with medical neglect in NMCD facilities is enormous.](#)

Prison and Jail Medical Care Unlikely to Improve

Even if Centurion leaves the state completely, the medical care for New Mexico prison and jail inmates will not improve as things stand now. With regard to the state's prisons, the big problem is NMCD itself. NMCD is a renegade agency, chocked full of corruption, incompetence, and deliberate cruelty. NMCD simply does not care about constitutionally adequate medical care. If it did, why would it keep the same medical providers as the medical contractors come and go. That's right, the individual medical providers, including doctors, physicians assistant, nurses and others, remain the same after one contractor leaves and the next takes over. It is not a change in medical care, it is simply a change in payee on the checks written by the taxpayers of New Mexico. Even worse, the contractors are on a revolving plan. One contractor gets fired or leaves, the next one steps in. This would not be so bad, but NMCD simply fills the slot with medical contractors that had already failed in the State. This will likely be the same with MDC which is illustrated by the fact that MDC hired Centurion to begin with despite the large number of suits filed against Centurion both in New Mexico and other states.

Centurion Involvement Coincidental?

Perhaps coincidental is not the right word. Centurion just happens to be the payee on the checks now written by MDC and formerly the checks written by NMCD. It is not coincidence. It is standard operating procedure on the part of New Mexico prison and jails. They rotate the same bad actor medical contractors from one contract term to the next. At the same time, the same incompetent and too often deliberately cruel individual medical providers stay in place from one medical contractor to the next.

This is unfortunately the state of prison and jail medical care in New Mexico for the foreseeable future. This is certainly the case at the present with the successor to Centurion, Wexford, performing as poorly and arguably worse than Centurion. The beat goes on and this will continue until NMCD is completely overhauled beginning with its contracting practices.

APPENDIX L

NM's rise in homelessness highest in the nation

By [Rick Nathanson / Journal Staff Writer](#)

Thursday, January 9th, 2020 at 9:41PM



Anthony Lucero, 56, who has been living on the streets for a decade, pulls two shopping carts containing his belongings from the parking lot at The Rock At Noon Day, after having lunch there. (Adolphe Pierre-Louis, Albuquerque Journal)

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When Albuquerque Mayor Tim Keller goes before the state Legislature seeking a \$14 million state match to build a homeless shelter, he will be armed with additional ammunition from a U.S. Department of Housing and Urban Development report showing New Mexico had the nation's largest percentage increase in homelessness from 2018 to 2019.

That increase of 27% is detailed in the 2019 Annual Homeless Assessment Report to Congress, released Thursday.

In addition, the report shows that the state had a 57.6% increase in chronic homelessness last year, also the highest in the nation.

Lisa Huval, deputy director for Housing and Homelessness for the Albuquerque Family and Community Services Department, said the New Mexico numbers used by HUD were taken from the annual Point-in-Time Count conducted in Albuquerque and around the state last January, in both urban and rural areas, and counting both sheltered and unsheltered homeless people.

The percentage increase in Albuquerque's homeless population alone rose by 15%, she said.

HUD defines homelessness as an individual or family who lacks a fixed, regular and adequate nighttime residence, or has a primary nighttime residence that is a public or private place not meant for human habitation, or is living in a publicly or privately operated shelter, Huval said.

“Chronic homelessness is defined by HUD as a person who has been homeless for one year, or has had four episodes of homelessness over three years with the combined episodes adding up to one year, and has a disabling condition that makes it difficult to obtain housing,” Huval said.

In New Mexico, according to the report, there were 2,464 homeless people in 2019. Of that total, 1,283 persons, or about 52%, were chronically homeless.

The New Mexico Coalition to End Homelessness, which is contracted by the city to conduct the annual count, puts the number of homeless people in Albuquerque at 1,524 sheltered and unsheltered individuals – 206 more than were counted in 2017, when 1,318 homeless people were counted in the city limits.

In even-numbered years, only homeless people who stay in shelters are counted; in odd-numbered years, both sheltered and unsheltered homeless people are counted.

Only those homeless people who can be located are counted, either sheltered or unsheltered, as well as only those who agree to participate in the survey.

Albuquerque Public Schools spokeswoman Johanna King said about 3,000 children enrolled in APS are considered homeless at any given time over the course of a school year. But that number includes people who live in motels or who are doubled up with family or friends.

Danny Whatley, executive director of the Rock At Noon Day, a day shelter and meal site, said that based on his observations, the number of homeless people in Albuquerque is likely between 4,000 and 4,500.



Jesus Hernandez, 44, folds a blanket so it will fit into a shopping cart with the rest of his belongings in the parking lot at The Rock At Noon Day. He has been homeless for seven years.(Adolphe Pierre-Louis, Albuquerque Journal)

“One of the driving factors in the increase in chronically homeless people in New Mexico is what happened to our behavioral health system under the previous governor, with the dismantling of the behavioral health infrastructure as we knew it amid accusations of Medicaid fraud,” Huval said. “This forced a number of providers to close their doors and caused lots of people to lose access to services. In many ways, we’re still recovering from that.”

In 2013, 15 behavioral health providers were shut down by the state Human Services Department after an audit alleged fraud. After a lengthy investigation, Attorney General Hector Balderas’ office eventually cleared all 15 providers of any wrongdoing.

Another part of the story, said Huval, “is our state’s struggle with funding and supporting behavioral health programs at the scale they’re needed, and with folks being able to get into housing and being able to stay in housing.”

In raw numbers, the HUD report reveals that an estimated 567,715 people nationwide, both sheltered and unsheltered, were identified as homeless on the single night of the 2019 count. That represents a 2.7% increase over 2018.

Homelessness overall declined in 29 states and the District of Columbia, but increased in 21 states.

Nationwide, 396,045 people experienced homelessness as individuals, meaning they did not have children with them.

Individuals made up 70% of the total homeless population. And half of those who experienced homelessness as individuals were staying in sheltered locations.

According to the report, the number of unsheltered homeless people nationally rose by 8.7%, which includes increases of 15% among unsheltered women and 43% among people who identify as transgender.

California has 53% of all unsheltered homeless people in the country, with 108,432 people living on the streets.

That figure is nearly nine times higher than the number of unsheltered homeless people in Florida, the state with the next highest count at 12,476. California’s population is twice that of Florida’s.

In an introduction to the report, HUD Secretary Ben Carson noted that there remains “deep and persistent racial inequities among the people who experience homelessness.”

African Americans, he said, “accounted for 40% of all people experiencing homelessness in 2019, despite being 13% of the U.S. population.”

Veterans represented a bright spot in the report.

Compared to 2009 numbers there were 40% fewer homeless veterans nationwide during 2019.

The number of homeless veterans in 2019 shows a 2% decline from 2018. In raw numbers that means 36,282 fewer homeless veterans than there were in 2009.

That decline, according to the report, was a result of partnerships between HUD and the Department of Veterans Affairs in funding supportive housing programs.



Homeless people gather daily at Coronado Park in the shadow of Interstate 40 near Second Street. (Adolphe Pierre-Louis, Albuquerque Journal)



APPENDIX M

peter kalitsis <peterkalitsis@gmail.com>

Video of March 16, homeless coordinating council meeting

Rob Leming <phnapresident@gmail.com>
 To: peter kalitsis <peterkalitsis@gmail.com>

Fri, Mar 26, 2021 at 2:48 PM

I have been in close contact with Councilor Davis about some of the questions you are asking and in preparation for tomorrow's meeting, he and I agreed to share the information he received from FACS who will be administering this project. The PHNA will be sharing this information in a modified format shortly. Please see the information below:

From: Pierce, Carol M.
Sent: Thursday, March 25, 2021 6:43 PM
To: Davis, Pat
Cc: Foran, Sean M.
Subject: RE: Questions about plans for Gibson Gateway Center

Hello Councilor Davis,

Thank you for reaching out with your questions. I understand you weren't able to attend the last Homelessness Coordinating Council meeting and I appreciate the opportunity to share our thinking with you. Thanks for your patience. You stated in your email you are having a community meeting this Saturday. I would like to attend with you. What neighborhood are you having a meeting?

First, let me say that the Homeless Coordinating Council (HCC) is a valuable convening of partners and we are committed to sharing timely updates as the project moves forward. This discussion about the number of beds was brought to this group first because we value their input and expertise. However, it is an open meeting and reporters do attend it.

The HCC and its subcommittees is the latest addition to a robust public input process that included 13 HCC meetings and 3395 survey responses that produced the siting report (<http://www.cabq.gov/family/documents/gateway-center-analysis-of-public-input-on-location-preferences-02272020.pdf>) ; a focus group of people experiencing homelessness specifically on their needs from the Gateway model (<http://www.cabq.gov/family/documents/focus-group-pehia.pdf>); the Homeless Advisory Group <https://www.cabq.gov/family/partner-resources/meeting-minutes-agendas/one-albuquerque-homeless-advisory-council-and-its-subcommittees-that-have-been-meeting-regularly-for-over-two-years>; the Point in Time count (<http://www.cabq.gov/family/documents/2019-albuquerque-pit-count-final.pdf>) ; the comprehensive study by the Urban Institute (<http://www.cabq.gov/family/documents/albuquerque-affordable-housing-and-homelessness-needs-assessment.pdf>); months of additional outreach and participation related to the possible siting of a Gateway facility near UNM; and deep and sustained conversations with our partner providers whose input we value and is recommended in all we do.

Our vision for this project has always been to create trauma-informed, centrally located emergency shelter beds in Albuquerque with supports and services to help move those who enter into housing, which best addresses their needs. Community and partner input have and will continue to play a key role in shaping where we are on this project but these are the central principles we will return to when moving forward and will continue to work to achieve.

In response to your questions:

1. How did FACS arrive at the overnight capacity number? In all of our public data analysis, we have seen that single men outnumber women and children by 4 or 5-to-one. This 1/3, 1/3, 1/3 design does not seem to be guided by data or need. Please explain how you determined this is the appropriate mix.

We see the acquisition of GMC as being in alignment with our original goal and as an opportunity to increase the number of safe, dignified and centrally located shelter beds for all populations experiencing homelessness in our community. The 2019 Point in Time Count and 2019 *Assessing Shelter Capacity and Dynamics for Accommodating the Homeless Population in Albuquerque NM* report commissioned by the City identified need for additional emergency shelter beds for single men, single women and families with children. While our data does show that there are more men than women and families, we also know that women and families with young children are particularly vulnerable. Data all shows that the impact of traveling back and forth to the Westside Emergency Housing Center is particularly difficult for families with school-age children. Numerous studies agree that a trauma-centered approach requires having separate spaces for people of different genders. We specified a proposed division of space in HCC discussion. We will continue to work with the community and providers to find the right balance, and with the team involved in space planning to give us maximum flexibility.

2. 175 is far far too many for a gateway model. According to the City's own powerpoint presentations given by FACS to community groups and the city council, the "gateway model" is designed to serve as a "no wrong door" entry to services where an individual is matched to a social worker and services to address their issues, assist with eligibility for programs (including housing) and place that person into long-term supportive housing. While FACS has publicly said this would take anywhere from 14-30 days per person, a gateway center with 175 on-site residents would require more than 20 social workers and 175 housing units to be available when the center opens. FACS is not prepared to offer either (as you recall, FACS had problems getting existing providers to agree to take on more housing obligations as recently as last December).

1. The only way I see serving 175 people at Gibson is by serving 175 per year, or about 15 per month. That is a doable load for a gateway model. Beyond that, we appear to be designing a system for warehousing people without providing services. Please explain how FACS will support the persons it intends to serve and how they will guarantee those services and lengths-of-stay will meet the gateway standards the public voted for when they approved funding for building this type of center.

We are still committed to the "no wrong door" strategy and to connecting each person who enters seeking emergency shelter beds with supports and services. More discussion is needed; however, all of our studies and input concur we need a mix of services that will help people stabilize, including case management services, housing navigation, assistance applying for disability, and connection to the workforce.

Every person who comes into this Gateway Center will be unique and will need their own, individualized exit plan into housing. Some people will need a rapid rehousing or a permanent housing voucher, but there also are other affordable housing options in our community. In an exit plan into housing, the goal will be to determine the mix of support that will serve that person the best. For example, some people will have a job or be able to start a job quickly and only need a security deposit and first month's rent. Some people may need to be referred to a residential treatment program. Some people are not going to be a good fit for a housing voucher and will need long-term care. We have a goal that every individual who comes to the Gateway Center will exit to a more stable housing destination within 90 days.

Additionally, our commitment is to examine the full system of care-our community partners are part of the solution. We also intend to continue to work with providers to find the right balance of partner presence at the Gateway, contracted management and staff, and City staffing. We have heard loud and clear that we do not need to duplicate services.

0653

3. Please explain the administration's intent to seek land use changes, including what changes it will seek and when you intend to apply.

The current analysis, based on the fact that the Gibson Medical Center already houses a number of service providers, suggests the need for a conditional use permit. That process takes several months and we intend to begin it as soon as possible within the next couple of months.

4. Please explain why the administration has not yet met with any of the neighborhood association leaders surrounding the property before determining the neighborhood capacity to care for additional persons in need.

We agree that meeting with the neighborhood around the site is important; however, your assumption that we have not begun is incorrect. Community input is something we have taken seriously throughout this project and we will continue to engage stakeholders, including those that live and work in the area. Various in-person, online and lived experience input opportunities not only informed decisions to lower bed counts and shift to a multi-site model, they also helped guide the location. Throughout the process, we have shared updates and continued conversations with the neighborhood. This has included District 6 Coalition whose Vice President is an active member of the HCC Services Committee. After the City closes on the purchase of the facility, we will continue to ramp up additional community engagement work.

5. Who does FACS intend to operate the center, how will they be paid and what oversight will be put in place to ensure neighborhood issues and unintended consequences are adequately addressed better than current FACS homeless provider contractors downtown?

FCS will disseminate a Request for Proposal to select an entity that will operate the center. Once that entity is chosen, we will enter into a contract with them and oversee and monitor the contract to ensure it is in compliance with our standards. FCS will also be working with this entity and service providers at this location on Good Neighbor Agreements. As referenced in the draft Housing Services Framework (<https://www.cabq.gov/family/documents/housing-services-framework>) document sent to the HCC, we will evaluate the impacts of any emergency shelters within 5 miles of the proposed location including the possible impacts of proposed services (e.g., food, medical care, case management, substance abuse, drop-in access, 24/7 access) and the population to be served. That evaluation of impact will take into consideration the impact of existing services within the area as well and will inform the creation of a detailed plan to address community safety concerns for the area around any proposed emergency shelter locations.

6. I have continually asked FACS to develop a long-term housing plan, with funding options, to meet our need for more than 800 new supportive housing units. During our most recent council meeting, Deputy Director Huval told the council that FACS could spend more money if allocated. CAO Nair quickly added that the administration did not believe it could. Given the administration's skepticism of its ability to quickly meet the housing need, even if fully funded, how will FACS create the housing units needed to support 175 persons receiving gateway services?

In the experience of the City and our partners, it is not accurate to assume that each person who enters the Gateway Center will need a unit of affordable housing because of the unique circumstance for each individual that the City must construct or fund. The City took an important first step toward creating long-term housing plan by commissioning the *City's 2020 Albuquerque Affordable Housing and Homelessness Needs Assessment* from the *Urban Institute* that showed the city needs to add 15,500 rental units that are affordable for those with a very low income. The Urban Institute also estimated that we need 2,200 new permanent supportive housing units and 800 new Rapid ReHousing units in order to fully address the need for supportive housing in Albuquerque. Based on the findings in that report, the HCC Housing Committee has developed a list of high-impact strategies and is now working on measurable five year and annual targets. Some of the shorter-term, high-impact strategies that are covered in more detail in the draft Housing Services Framework at <https://www.cabq.gov/family/documents/housing-services-framework>

Housing Services Framework document includes these high-impact strategies:

- Increasing the supply of permanent supportive housing vouchers
- Increasing the supply of housing vouchers for low-income tenants
- Pair affordable housing development with ongoing rental assistance
- Collaborate with the Albuquerque Housing Authority to ensure that the existing limited preference for Section 8 vouchers for supportive housing tenants is fully utilized
- Act aggressively to preserve existing subsidized and market-rate affordable units
- Develop more affordable housing through regulatory, infrastructure and funding support for affordable housing development
- Increase development of market-rate housing development targeted for low-income families
- Develop site-based permanent supportive housing, for those who need onsite supportive services to maintain housing stability
- Increase tenant protections
- Increase connection to social service supports & community

In addition to the money contained in the GO Bond cycle, the administration successfully advocated at the legislature for state funding for additional affordable housing. If the community is able to partner with the City and expend the \$17.5 million that will be in the Workforce Housing Trust, together with any of the additional state funds that make it through the veto process, we will be the first ones to ask Council for additional funding. In the meantime, other projects that can be completed in the near term – many of which will benefit the same parts of town where Gateway Centers will be – can proceed and contribute to the overall success of our homelessness and public safety strategy.

As this project progresses, we will continue to get input from and provide updates to City Council, the HCC, the neighborhoods directly surrounding this location, the public, and other key stakeholders and there will be opportunities for input and questions.

Councilor Davis, please let me know if you have any additional questions.

Carol

[Quoted text hidden]

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Rob Leming
President
Parkland Hills Neighborhood Association
505-750-7672

City leaves \$700K in housing voucher money unspent

BY JESSICA DYER / JOURNAL STAFF WRITER

WEDNESDAY, OCTOBER 7TH, 2020 AT 6:26PM



Khadijah Bottom, right, hands a mask to Live Free, a man who has been homeless for 17 years, during a food giveaway Sunday in the International District. Bottom, executive director of Vizionz-Sankofa, has been working with the homeless population in her area, including trying to get them housing. She said she cried when she heard the city finished the last budget year without spending \$700,000 it had available for housing vouchers. (Adolphe Pierre-Louis/Albuquerque Journal)

Khadijah Bottom has for several years run an organization devoted to helping African immigrants and refugees in Albuquerque but broadened her focus last year after an

encounter with an elderly man sleeping in her neighborhood park.

Bottom, executive director of Vizionz-Sankofa, felt compelled to help him, and others in similar circumstances, find a place to live.

“(He) was too frail to be sleeping under a tree,” she said.

Bottom learned about a city-funded housing voucher program and went through special training required to get people onto the waiting list. Working last fall and winter – often out of a Southeast Albuquerque soup kitchen – she helped an estimated 35 people complete the survey needed to get onto the “coordinated entry list.” It’s a vulnerability index that many city contractors and other providers use when determining who gets new vouchers when they become available.

To this day, Bottom said no one she helped has obtained a housing voucher.

So she was particularly rankled to learn recently that the city ended the 2020 fiscal year on June 30 with about \$700,000 in unspent housing voucher money. By city calculations, that is enough to support 51 different households for a full year.

“That was heartbreaking – 51!” Bottom said in a recent interview, recalling that she cried when she first heard about the leftover funds. “I could’ve housed everybody (sleeping) in Wilson Park.”

And Albuquerque city councilors are also raising questions about another \$2 million they had allocated last year for additional housing vouchers. The council approved the appropriation in the spring of 2019 at Mayor Tim Keller’s request.

Less than \$100,000 of that money was spent during fiscal year 2020, in part because the city couldn’t find contractors to

distribute the vouchers that quickly.

Council President Pat Davis said he is frustrated, and the public likely is, too. An official count last year identified 1,524 people as homeless on a single night in Albuquerque, and there are usually thousands of people at any given time seeking housing support on the local coordinated entry list.

“I think people are going to drive past their park or drive down Central and see people sleeping (outside) who need a place to be, and they’re not going to accept an excuse that money is literally sitting in the bank but the vouchers to put these people into housing who want them just can’t be done because of paperwork,” Davis said. “That’s just not going to be an acceptable answer.”

Lisa Huval, deputy director of housing and homelessness inside the city’s Family and Community Services Department, said there are multiple factors at play.

The unspent \$700,000 was due largely to understaffing within one of the 10 different organizations the city uses to administer the vouchers. Huval declined to identify the vendor, but said it has recently filled several open positions and should be better able to handle the workload this year.

The city, she said, ultimately bears the responsibility monitoring contract activity and performance.

“When I saw that number (of unused vouchers), I definitely felt we need to do better,” she said. “We need to work with our contractors to ensure they are fully expending these funds.”

While the city retained some of that \$700,000, it lost about a third of it, as \$235,000 reverted back to the federal government, according to Huval.

Despite its failure to spend all available money last year, the city

still issued a total of 720 vouchers in fiscal year 2020, about equal to the year before, worth about \$6 million total. That includes “rapid rehousing” vouchers for those seeking temporary rental support and “permanent supportive housing” vouchers for those who need more intensive, longer-term support, often due to a disability.

As for the \$2 million for additional vouchers approved over a year ago, Huval said it is reaching the community, albeit on a longer timeline than originally anticipated. When the city issued a request for vendors to administer the vouchers, it did not get proposals large enough to account for all \$2 million. Huval said the city decided to extend the \$2 million appropriation into a three-year program and contracted with two nonprofits – the Barrett Foundation and HopeWorks – to issue a combined 145 vouchers over that span.

The contracts ultimately took effect Dec. 1, 2019. As of June 30 – a year after the council’s appropriation was available – Barrett had issued six, while HopeWorks had issued 32, Huval said, accounting for \$99,710 in total expenditures.

New vouchers continue going out; Barrett Executive Director Heather Hoffman said this week that the nonprofit has now issued a total of 15.

Huval said launching any new program takes time – both for the city but also for the vendors who need to add staff – and that COVID-19 created some hurdles as well, but that the \$2 million is being used effectively.

“I’m proud of what we’ve done; we’ve contracted with two very experienced providers that have an excellent track record of providing rapid rehousing to people in our community and over the next two to three years they will help close to 150 homeless households obtain and maintain permanent housing,” she said.

“I think what we have structured is very sound and is going to make a huge impact for those families.”

But some city councilors say they are frustrated, in part because they expected the \$2 million to have flowed into the community already.

Councilor Isaac Benton, who represents Downtown, said he did not know until recently that city staff had executed contracts to expend the money over a three-year period instead of one. He said the council – the city’s appropriating body – should have had a role in that decision.

“I’m not going to blame the present leadership, but this department has a history of problems as far as just effectively getting work out and money out on the streets where it’s needed,” he said.

The administration included information about the three-year rollout plan in a fiscal year-end status report sent to council last month. Such communication would normally have occurred earlier in the year, but COVID-19 altered the budget timelines, a spokeswoman for Mayor Tim Keller’s office told the Journal.

Davis, whose district includes Nob Hill and the International District, said he never understood the allocation as a multi-year expenditure and expected that Keller’s budget request for the funding last year reflected a ready program.

“I feel like when they make the request of money from the council to put a program in place, it assumes they’ve developed the capacity to do it in the field,” he said, adding that the way the city handled the voucher money raises questions about other new initiatives. That includes the mayor’s proposed “Community Safety” department, which gives the city a third option – beyond police and fire – for responding to 911 calls and addressing issues like homelessness and behavioral health. The mayor’s

proposed 2021 budget includes \$7.5 million for the new department, primarily moved from other departments in the city.

“People are going to look at that plan ... in the same way and say, ‘You’re asking us for a big commitment to get something new started, but there’s no indication they’ve got a good track record of putting money into the systemic issues in a significant way even when they have the funds,’ ” Davis said.

Jessica Campbell, a spokeswoman for Keller’s office, cited both COVID-19 and limited provider capacity for the challenges of getting money out the door.

“This city has historically contracted with outside service providers to get people into housing in exchange for this funding, and we are equally frustrated that the money wasn’t spent. While we do believe this stems from pandemic related challenges around the inability to physically find housing and place candidates, it’s not something we ever want to see happen. We have instructed the department to work with the providers to make sure there is more capacity going forward to deliver on what the city needs when it comes to getting people housed, and if it’s not there, we’re going to help build out additional partnerships,” Campbell said.

Bottom said she has temporarily stopped trying to get people on the housing waiting list but has not forgotten about those living on the streets in her area. She tries to maintain regular contact and help when she can.

“Even though I’m not able to put them in housing, I still go feed them; I will just take off a couple days out of the week and either go buy 10 boxes of pizza or sometimes I’ll cook in my house and go feed them on the weekend just to let them know I still think about them,” she said.

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APPENDIX O

Gateway Center shelter could hold 25 families, 100 others

By [Jessica Dyer / Journal Staff Writer](#)

Published: Friday, September 3rd, 2021 at 7:08PM

Updated: Friday, September 3rd, 2021 at 11:33PM



The city of Albuquerque is currently expecting to accommodate up to 100 individuals and 25 families at the forthcoming Gateway Center on Gibson. (Liam DeBonis/for the Albuquerque Journal)

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As it seeks permission to establish an overnight shelter in the old Lovelace hospital, the city of Albuquerque now says it is looking to accommodate up to 100 individuals and 25 families on-site.

The details come ahead of the city's Sept. 21 hearing to obtain a "conditional use" permit for the project. The numbers appear to address a lingering question about the eventual size of the Gateway Center's emergency shelter operation, though one neighborhood leader said they are not precise enough, and the city acknowledges they are not necessarily final.

"I think that's the community's best thinking and our best thinking now in terms of setting some sort of marker. It's a scenario that has gained the most traction as we've been doing community meetings," said Alicia Manzano, the city's liaison for strategic partnerships.

The city's first Gateway Center has been years in the making and one of the highest-profile initiatives of Mayor Tim Keller's first term.

His administration at one time envisioned a 24/7 shelter with 300 beds to serve all populations and link people to services and programs. Voters approved \$14 million for the project as part of a 2019 general obligation bond package.

But officials moved away from the 300-bed model last year after losing out on their top location choice – University of New Mexico land north of Lomas Boulevard – and amid criticism that such scale might negatively impact the clients and the surrounding neighborhood.

Questions about capacity have continued swirling since the city this spring closed on the purchase of the old Lovelace hospital – a 572,000-square-foot building on Gibson Boulevard, which still has some on-site health care providers.

While city officials said earlier this year they were contemplating incorporating 150 to 175 emergency shelter beds into what they're now calling the Gateway Center at Gibson Health Hub, some neighbors along the Gibson corridor had advocated for a cap of 30.

When the city last month released a draft operations plan, it did not address shelter capacity. Officials said they planned to have that information by the end of August.

In response to Journal inquiries this week, the city said in a statement that it is now considering an operation that gradually ramps up to 100 individuals and 25 families.

“We are still meeting with neighborhood groups and various stakeholders on the best scenario for bed capacity at Gibson Gateway Center. The scenario that seems to be getting the most traction is a phased approach which would accommodate about 25 families and 100 individuals when fully phased in. The phased approach will allow us to evaluate effectiveness and efficiency so we can adjust as needed,” Family and Community Services Department planning manager Bobby Sisneros said in a written statement.

Rachel Conger Baca, president of the nearby Siesta Hills Neighborhood Association, said “family” is not clear-cut, as it could mean anything from a single mother with one child to extended family units that would push the shelter’s total capacity to 200-plus.

“That still doesn’t sound too far off from a 300-bed facility,” said Baca, adding that she wants the city to set a specific capacity limit on the shelter prior to the Sept. 21 hearing.

She said the scale does not seem to jibe with the city’s goal of having a “trauma-informed” facility.

“We are convinced that the City keeps taking steps that will ensure trauma will be inflicted on the people using the shelter and those who live, work and go to school near it,” she said.

APPENDIX P

U.S. Department of Health and Human Services
Office of Inspector General

Provider Shortages and Limited Availability of Behavioral Health Services in New Mexico's Medicaid Managed Care

OEI-02-17-00490

September 2019

oig.hhs.gov

Joanne M. Chiedi
Acting Inspector General





Provider Shortages and Limited Availability of Behavioral Health Services in New Mexico's Medicaid Managed Care

What OIG Found

Despite the need for behavioral health services—which includes treatments and services for mental health and substance use disorders—many counties in New Mexico have few licensed behavioral health providers serving Medicaid managed care enrollees. These behavioral health providers are unevenly distributed across the State, with rural and frontier counties having fewer providers and prescribers per 1,000 Medicaid managed care enrollees. Further, a significant number of New Mexico's licensed behavioral health providers do not provide services to Medicaid managed care enrollees.

In addition, most of the State's licensed behavioral health providers serving Medicaid managed care enrollees work in behavioral health organizations (BHOs), which include federally qualified health centers and community mental health centers; however, BHOs report challenges with finding and retaining staff, as well as ensuring transportation for enrollees. As a result, these organizations cannot always ensure timely access for enrollees seeking behavioral health services. These organizations also report difficulty arranging or making referrals for services that they do not provide largely because of the lack of providers. In addition, they report challenges with continuity of care for enrollees, citing limited care coordination and lack of integration of primary and behavioral healthcare, provider shortages, and barriers to sharing health information, such as a lack of access to broadband. Nonetheless, BHOs highlight promising initiatives to increase the availability of behavioral health services, including open-access scheduling, treatment first, care integration, and telehealth.

What OIG Recommends

Although this report focuses on New Mexico, it provides insights into challenges that are likely shared by other States providing behavioral health services to Medicaid enrollees, especially in rural and frontier counties. In addition, because of the breadth and depth of these issues, additional support at the national level is needed. Therefore, we recommend that the Centers for Medicare & Medicaid Services (CMS) identify States that have limited availability of behavioral health services and develop strategies and share information with them to ensure that Medicaid managed care enrollees have timely access to these services. We also recommend that the New Mexico Human Services Department expand New Mexico's behavioral health workforce that serves Medicaid managed care enrollees. It should also improve access to services by reviewing its access to care standards and by increasing access to transportation, access to broadband, and the use of telehealth. Lastly, it should improve the effectiveness of services by increasing adoption of electronic health records, identifying and sharing information about strategies to improve care coordination, expanding initiatives to integrate behavioral and primary healthcare, and sharing information about open-access scheduling and the Treat First Clinical Model. Both CMS and the New Mexico Human Services Department concurred with our recommendations.

Key Takeaway

The challenges faced by New Mexico—including provider shortages and limited availability of behavioral health services—are likely shared by other States and will require both State and national attention.

Why OIG Did This Review

The need for behavioral health services is particularly pronounced in New Mexico—a State that has among the highest rates for suicide and deaths from overdose in the Nation. The Office of Inspector General (OIG) received a congressional request to look into concerns about behavioral health provider shortages and the availability of care for Medicaid managed care enrollees; these enrollees account for most of New Mexico's Medicaid population.

How OIG Did This Review

We analyzed State Medicaid managed care data on the number of behavioral health providers and the number of managed care enrollees by county. We also conducted a survey of selected BHOs that play a critical role in providing services to the State's Medicaid enrollees as well as to uninsured residents. In addition, we interviewed selected providers, State Medicaid agency officials, and key stakeholders.

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BACKGROUND

Objectives

1. To determine the number of behavioral health providers that serve New Mexico's Medicaid managed care enrollees in each county.
2. To determine the extent to which behavioral health organizations are able to meet the needs of the State's Medicaid managed care enrollees.
3. To identify challenges and promising initiatives for improving the availability of behavioral health services for the State's Medicaid managed care enrollees.

Research has shown that Medicaid enrollees experience a higher rate of behavioral health disorders—which include both mental health disorders and substance use disorders—than the general population.¹ In spite of the importance of treating such disorders, many Medicaid enrollees encounter significant barriers when accessing behavioral health treatment. These barriers include an overall shortage of behavioral health providers in the United States, combined with a relatively small number of behavioral health providers who accept Medicaid.² Such barriers can impede access to necessary services, resulting in untreated addiction and mental health conditions, worsening health, and increased medical costs.³

¹ Government Accountability Office (GAO), *Medicaid Expansion: Behavioral Health Treatment Use in Selected States in 2014*, (GAO-17-529), June 2017. Accessed at <https://www.gao.gov/assets/690/685415.pdf> on April 4, 2019.

² Substance Abuse and Mental Health Services Administration (SAMHSA), *Report to Congress on the Nation's Substance Abuse and Mental Health Workforce Issues*, January 24, 2013. Accessed at https://www.cibhs.org/sites/main/files/file-attachments/samhsa_bhwork_0.pdf on April 5, 2019. See also Medicaid and CHIP Payment and Access Commission (MACPAC), *Physician Acceptance of New Medicaid Patients*, January 24, 2019. Accessed at <https://www.macpac.gov/wp-content/uploads/2019/01/Physician-Acceptance-of-New-Medicaid-Patients.pdf> on April 5, 2019.

³ GAO, *Medicaid Expansion: Behavioral Health Treatment Use in Selected States in 2014*, June 2017. Accessed at <https://www.gao.gov/assets/690/685415.pdf> on April 4, 2019.

Improving access to behavioral healthcare is essential in New Mexico, where 56 percent of adults with mental illness do not receive treatment.⁴ Further, the State has among the highest rates for suicide and deaths from overdose in the Nation.⁵ New Mexico also ranks as one of the poorest States in the Nation, with more than half of the population either covered by public health insurance or uninsured.⁶

In 2013, New Mexico experienced major disruptions in services, with the closure and replacement of many of its largest behavioral health

organizations (see text box below). The Office of Inspector General (OIG) received a congressional request to look into concerns about behavioral health provider shortages in Medicaid managed care. In response, OIG agreed to conduct a review to determine the number of behavioral health providers that serve the State's Medicaid managed care enrollees and the availability of care to meet the needs of this population. OIG also agreed to look at the extent to which providers have waiting lists, the extent to which providers have difficulty making referrals, and any challenges with continuity of care.

Behavioral health includes:

- promotion of emotional health,
- prevention of mental illnesses and substance use disorders, and
- treatment and services for mental and substance use disorders.

Historical perspective of behavioral health in New Mexico

The behavioral health system in New Mexico experienced major disruptions in the provision of care that affected Medicaid managed care enrollees. In 2013, the New Mexico Human Services Department suspended Medicaid payments to 15 behavioral health organizations due to an accusation of fraud; these 15 organizations provided about 85 percent of all behavioral health services to enrollees. Although all of these organizations were eventually cleared of wrongdoing in subsequent years, 13 of them went out of business. These organizations were initially replaced by Arizona-based organizations; however, all but two of these replacement organizations are no longer practicing in the State.

⁴ SAMHSA, *Behavioral Health Barometer: New Mexico, Volume 4: Indicators as Measure Through the 2015 National Survey on Drug Use and Health, the National Survey of Substance Abuse Treatment Services, and the Uniform Reporting System*, 2017. Accessed at https://www.samhsa.gov/data/sites/default/files/NewMexico_BHBarometer_Volume_4.pdf on June 10, 2019.

⁵ New Mexico Health Care Workforce Committee, *2017 Annual Report*, October 1, 2017. Accessed at http://www.hsd.state.nm.us/uploads/PressRelease/2f473c14ee654f868b5a25b3cfd15a6d/NMHCFW 2017Report_eDist_LoRes.pdf on April 3, 2019.

⁶ U.S. Census Bureau, *2013–2017 American Community Survey 5-Year Estimates, Selected Economic Characteristics*. Accessed at <https://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?src=bkmk> on June 10, 2019.

Medicaid managed care in New Mexico

Medicaid plays a critical role in providing behavioral healthcare. Nationally, Medicaid is the single largest payor for behavioral healthcare, accounting for approximately 11 percent of all Medicaid spending.⁷

Most States, including New Mexico, provide a portion—if not all—of their behavioral health services through Medicaid managed care plans. These plans typically provide behavioral health services through a network of participating providers in exchange for a fixed monthly fee per enrollee (often referred to as capitation).

New Mexico's Medicaid managed care program, Centennial Care, was implemented in 2014 and requires managed care plans to cover services for physical health, behavioral health, and long-term care.⁸ Most (80 percent) of New Mexico's Medicaid population is enrolled in one of New Mexico's three managed care plans.⁹ These plans provide services to enrollees throughout the State, and most of the behavioral health providers that participate in Medicaid managed care participate in all of the State's managed care plans.

Federal regulations require States to develop standards for access to care that all managed care plans must meet.¹⁰ These standards are intended to ensure that each plan maintains an adequate network to provide access to covered Medicaid services.¹¹ New Mexico's standards for behavioral health require that appointments for non-urgent behavioral healthcare be

⁷ This analysis is based on 2009 Medicaid data. Mark et al., *Insurance Financing Increased for Mental Health Conditions But Not for Substance Use Disorders 1986-2014*, June 2016. Accessed at <https://www.healthaffairs.org/doi/pdf/10.1377/hlthaff.2016.0002> on June 10, 2019.

⁸ The New Mexico Human Services Department oversees the Medical Assistance Division and the Behavioral Health Services Division. The Medical Assistance Division is responsible for contracting with Medicaid managed care organizations and the Behavioral Health Services Division oversees SAMHSA-funded behavioral health block grants.

⁹ These data were provided by the New Mexico Human Services Department. Note that the Native American population is typically exempt from the requirement to enroll in a managed care plan. See New Mexico Administrative Code (NMAC) 8.308.7.9(A). Also note that for most of the study period, there were four Medicaid managed care plans in the State.

¹⁰ 42 CFR § 438.206(a).

¹¹ 42 CFR § 438.206(b)(1).

available within 14 days and behavioral health outpatient appointments for urgent conditions be available within 24 hours.¹²

Licensed behavioral health providers

Licensed behavioral health providers have a range of education and training in specialties that address substance use and mental health needs. These behavioral health providers are able to engage in a broad range of interventions, including assessment, psychotherapy, and crisis intervention services.

Independently licensed providers may be directly reimbursed by Medicaid for their services. Such providers include psychiatrists, psychologists, and licensed clinical social workers.¹³ Certain independently licensed behavioral health professionals are also authorized to diagnose mental illness and substance use disorders, and in some cases, can prescribe medication as part of an enrollee's treatment plan.¹⁴

The next level of licensure consists of non-independently licensed providers. These providers typically work under the supervision of an independently licensed provider and generally cannot be directly reimbursed for their services. These providers include licensed master's level social workers, licensed mental health counselors, and licensed associate marriage and family therapists.¹⁵

Behavioral health organizations

Although outpatient behavioral health services can be provided by individuals (and by individuals who form group practices), behavioral health organizations (BHOs) are core providers that play a critical role in providing

¹² NMAC 8.308.2.12 (E), (F). The standard governing request-to-appointment time, for non-urgent behavioral healthcare, can be waived if the enrollee requests a later time. New Mexico also requires that appointments for behavioral health crisis services be available within two hours. See NMAC 8.308.2.12 (R). In addition, New Mexico requires its managed care organizations to comply with standards that address distance and travel time between enrollees and contracted providers. See NMAC 8.308.2.9 (A)(11)(c).

¹³ NMAC, 8.321.2.9 (H).

¹⁴ New Mexico Health Care Workforce Committee, *2017 Annual Report*, October 1, 2017. Accessed at http://www.hsd.state.nm.us/uploads/PressRelease/2f473c14ee654f868b5a25b3cfd15a6d/NMHCWF_2017Report_eDist_LoRes.pdf on April 25, 2019.

¹⁵ NMAC 8.321.2.9 (J). Some behavioral health services may be provided by non-licensed providers who are not able to prescribe medication and are not able to practice without supervision. These include master's level behavioral health interns, certified peer support workers, and pre-licensure psychology post-doctorate students. New Mexico Network of Care, *Behavioral Health in New Mexico: Challenges, Medicaid Contributions, New Opportunities*. Accessed at <http://newmexico.networkofcare.org/content/client/1446/3Centennial%20Care%20Update-Final.pdf> on June 10, 2019.

services to the State’s Medicaid enrollees as well as to uninsured residents. BHOs include federally qualified health centers, community mental health centers, behavioral health agencies, rural health clinics, and core service agencies.¹⁶

In addition to outpatient services, a number of behavioral health services are delivered in inpatient or residential settings. These include psychiatric hospitals, residential treatment centers, as well as facilities that provide inpatient treatment for substance use disorders.

Methodology

We used several data sources to address the study’s objectives. We first analyzed State Medicaid managed care data to determine the number of behavioral health providers serving New Mexico’s managed care enrollees by county. We focused this part of the study on licensed behavioral health providers who render outpatient services to Medicaid managed care enrollees. Licensed behavioral health providers have the specific education and training needed to address a broad range of mental health and substance use disorders. We did not include non-licensed behavioral health workers and other physical health workers who may provide only limited behavioral health services such as diagnostic screening.¹⁷

Next, we conducted a survey of 53 selected BHOs to determine the extent to which these organizations are able to meet the needs of the State’s Medicaid managed care enrollees. In addition, we interviewed selected behavioral health providers, State Medicaid agency officials, and key stakeholders. We analyzed these data to identify challenges and promising initiatives for improving the availability of behavioral health services for Medicaid managed care enrollees.

See Appendix A for the detailed methodology.

Standards

We conducted this study in accordance with the *Quality Standards for Inspection and Evaluation* issued by the Council of the Inspectors General on Integrity and Efficiency.

¹⁶ New Mexico may designate a BHO as a core service agency if it provides and coordinates certain core services, such as psychiatric services, medication management, crisis services, and treatments that support an enrollee’s recovery goals.

¹⁷ This study also does not include out-of-State behavioral health providers licensed by New Mexico who provide services remotely.

FINDINGS

Many counties have few behavioral health providers serving Medicaid managed care enrollees

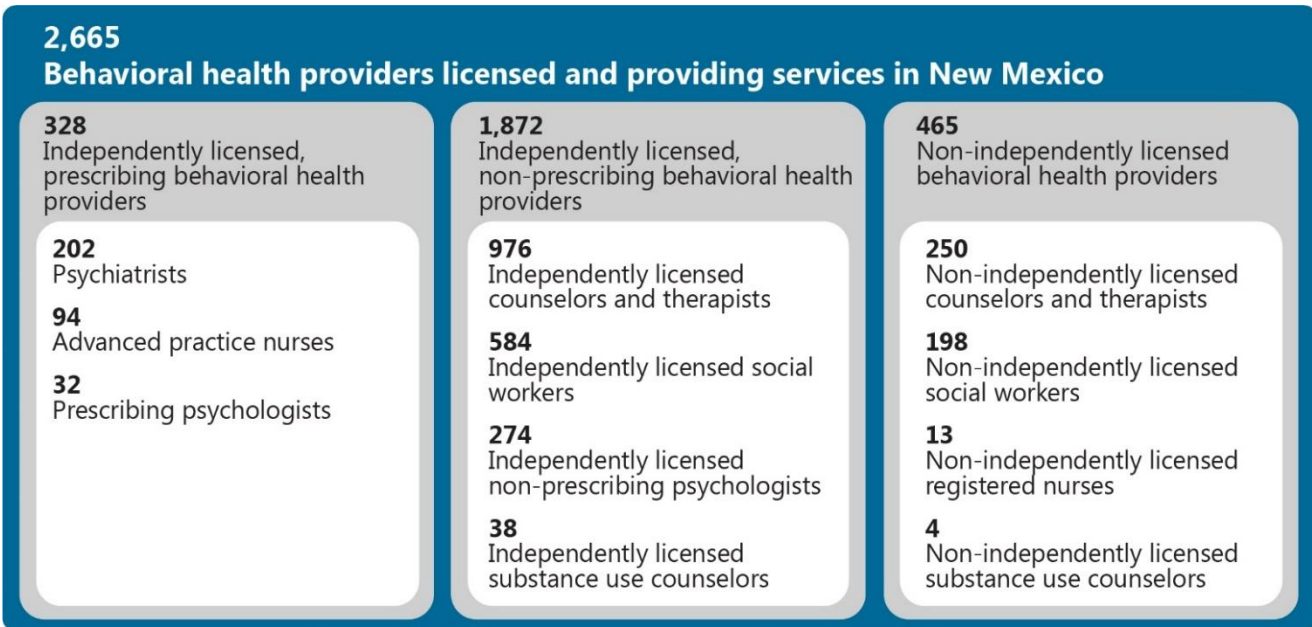
New Mexico has about 2,700 licensed behavioral health providers that serve its Medicaid managed care enrollees. These behavioral health providers are distributed unevenly across the State. As a result, many counties have few providers that serve Medicaid managed care enrollees.

New Mexico has 2,665 licensed behavioral health providers that serve nearly 670,000 Medicaid managed care enrollees

Licensed providers are essential to meeting the behavioral health needs of enrollees. Enrollees with serious mental illnesses or substance use disorders often require a team of providers that consist of several different types of licensed providers. These providers include prescribing providers such as psychiatrists and advance practice nurses. They also include other independently licensed providers, such as professional clinical counselors, clinical social workers, and marriage and family therapists. Additionally, there are non-independently licensed providers that include social workers, registered nurses, and substance use counselors. These providers generally cannot be directly reimbursed for their services and typically work under the supervision of an independently licensed provider.

In total, New Mexico has 2,665 licensed behavioral health providers that serve its Medicaid managed care enrollees in 2017. See Exhibit 1 for more detailed information about the number of licensed providers in New Mexico.

Exhibit 1: Licensed behavioral health providers in New Mexico.



Source: OIG analysis of State Medicaid data, 2019.

Many of the State's licensed behavioral health providers do not serve Medicaid managed care enrollees

Shortages of behavioral health providers are a problem that affects behavioral healthcare for all populations, not just for its managed care enrollees.¹⁸ A study of the New Mexico healthcare workforce found that 9,528 behavioral health providers had active licenses in the State in 2016.¹⁹ The smaller number of providers that we identified—just 2,665 providers or 30 percent—indicates that many behavioral health providers in New Mexico do not provide services to Medicaid managed care enrollees. If only a small proportion of that workforce serves Medicaid enrollees, enrollees' access to critical services can be impeded.

More than half of New Mexico's counties have fewer than 2 licensed providers per 1,000 enrollees; all of these counties are rural or frontier

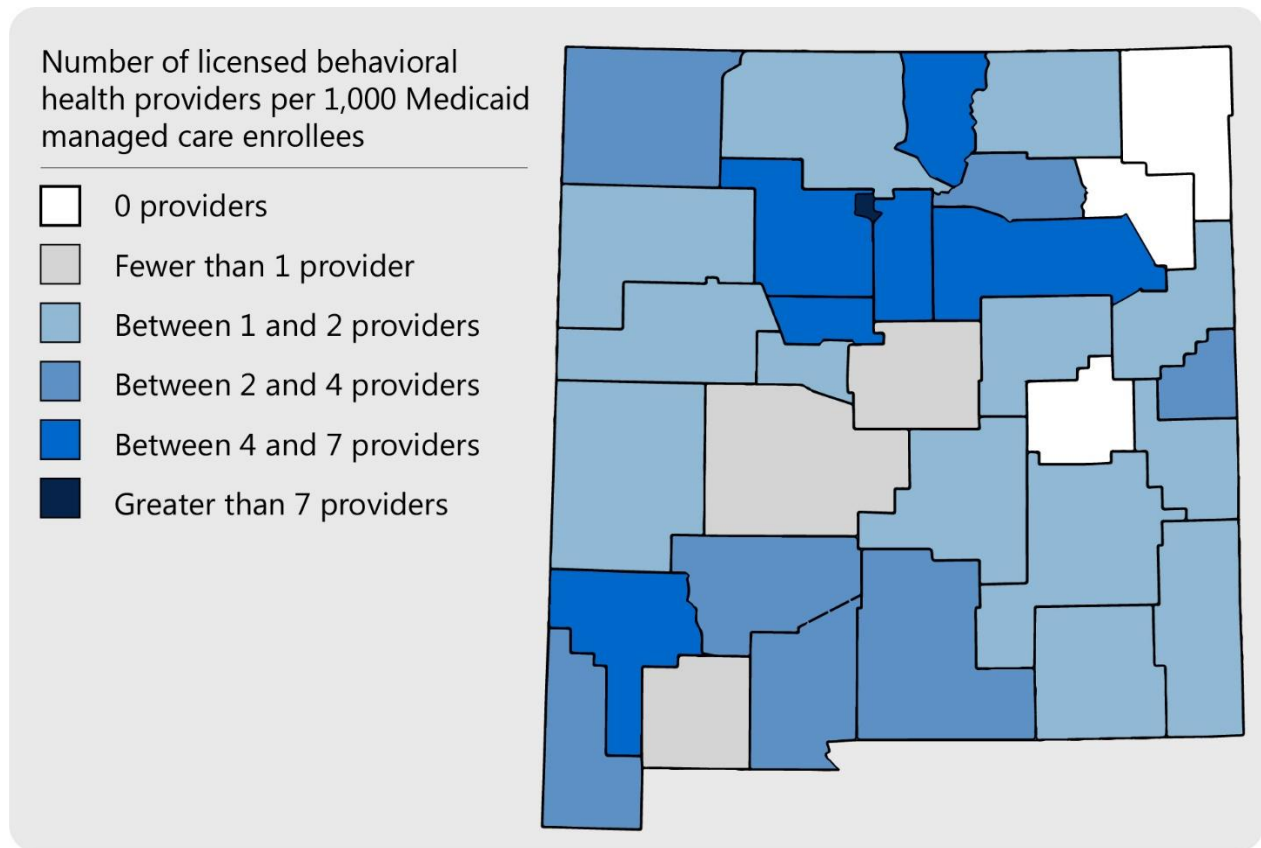
The 2,665 licensed behavioral health providers are distributed unevenly across the State. Notably, 19 of the State's 33 counties have fewer than 2 licensed behavioral health providers for every 1,000 Medicaid managed care enrollees. All 19 of these counties are rural or frontier.²⁰ This includes 13 counties that have between 1 and 2 providers per 1,000 enrollees; 3 counties that have fewer than 1 provider per 1,000 enrollees; and 3 counties that have no providers at all. In contrast, four counties—most of them urban—have much larger numbers of licensed providers per 1,000 enrollees. These 4 counties ranged from 6 to 19 providers per 1,000 enrollees. See Exhibit 2 and Appendix B for the number of licensed behavioral health providers by county.

¹⁸ Almost all of New Mexico's counties have a "health professional shortage area" for mental health. For more information see Health Resources and Services Administration, *Health Professional Shortage Areas Find*. Accessed at <https://data.hrsa.gov/tools/shortage-area/hpsa-find> on May 24, 2019.

¹⁹ Note that this analysis was mandated by the State of New Mexico's Legislature. The 9,528 providers identified in the study are the same types of providers that are included in our report. See New Mexico Health Care Workforce Committee, *2017 Annual Report*, October 1, 2017. Accessed at http://www.hsd.state.nm.us/uploads/PressRelease/2f473c14ee654f868b5a25b3cfd15a6d/NMHCWF_2017Report_eDist_LoRes.pdf on April 25, 2019.

²⁰ New Mexico designates counties as urban, rural, or frontier. Note that frontier counties have an average of 2.8 people per square mile, and rural counties have an average of 13.7 people per square mile.

Exhibit 2: Distribution of licensed behavioral health providers in New Mexico.



Source: OIG analysis of State Medicaid data, 2019.

Rural and frontier counties have disproportionately fewer licensed providers than urban counties. Only 29 percent of licensed providers are located in rural and frontier counties, even though nearly half of the State's Medicaid managed care enrollees reside in these counties. Further, rural and frontier counties have a median of 1.8 providers and 1.5 providers per 1,000 Medicaid managed care enrollees, respectively. In contrast, urban counties have a median of 6.4 providers. See Exhibit 3.

Similarly, rural and frontier counties have disproportionately fewer behavioral health prescribers. Ten frontier counties—with a total of 27,000 Medicaid managed care enrollees—have no prescribers. Further, rural and frontier counties have a median of 0.2 prescribers and 0.0 prescribers per 1,000 Medicaid managed care enrollees, while urban counties have a median of 0.7 prescribers.

Exhibit 3: Rural and frontier counties have a lower median number of providers and prescribers.

County Type	Median Number of Behavioral Health Providers per 1,000 Enrollees	Median Number of Prescribing Behavioral Health Providers per 1,000 Enrollees
Urban	6.4	0.7
Rural	1.8	0.2
Frontier	1.5	0.0

Source: OIG analysis of State Medicaid data, 2019.

Most behavioral health providers work in behavioral health organizations; however, these organizations report challenges with finding and retaining staff

Sixty-two percent of the State's licensed behavioral health providers serving Medicaid enrollees work in BHOs.²¹ These organizations play a unique role in the State's behavioral health system because they are responsible for coordinating care and providing essential services to managed care enrollees who have serious mental illnesses, severe emotional disturbances, or dependence on alcohol or drugs. BHOs are core providers typically offering behavioral health services to the State's Medicaid enrollees as well as uninsured residents.²²

62% of licensed behavioral health providers work in BHOs.

Notably, 38 of the 53 selected BHOs report that they need additional staff to meet the needs of Medicaid managed care enrollees in their area. They report particularly needing prescribing providers and providers that specialize in treating substance use disorders. Of these BHOs, one in three did not have a prescriber on staff. Additionally, two in three BHOs did not have a provider specializing in substance use disorders on staff. Most of the BHOs in need of additional staff are located in rural and frontier areas. BHOs further note that staffing challenges affect enrollees with all types of diagnoses. As one BHO states, "there are far more requests for services beyond staff capacity."

BHOs also highlight challenges with finding and retaining qualified staff to meet the needs of enrollees. Several cite an overall lack of licensed providers in the State or their area to meet the demands of the population,

²¹ The remaining providers work in group or independent practices, other outpatient settings, or inpatient facilities.

²² As noted earlier, BHOs include federally qualified health centers, core service agencies, community mental health centers, behavioral health agencies, and rural health clinics.

as well as challenges maintaining a highly trained workforce. According to several BHOs, there is an extremely limited pool of qualified candidates, and when they do find qualified candidates, it can be difficult to retain them. This challenge particularly affects rural and frontier BHOs. As one BHO explains, “It is difficult to find and hire therapists in [rural] New Mexico...it is really difficult work with a high burnout rate. Therapists from other areas, [who are not familiar with the specific needs of the community], do not last.”

Behavioral health organizations cannot always ensure timely access for enrollees seeking behavioral health services

BHOs provide essential behavioral health services to Medicaid managed care enrollees. Yet, many BHOs report that Medicaid managed care enrollees have difficulty accessing the full range of behavioral health services at the frequency they need. BHOs further report difficulty providing

timely appointments for enrollees, and some BHOs maintain wait lists for certain services. Providing timely access to behavioral health services is important to ensuring positive health outcomes and to ensuring that patients’ behavioral health conditions do not go untreated.

43% of BHOs report that **enrollees have difficulty accessing the full range of behavioral health services at the frequency they need.**

More than half of BHOs are not able to offer timely appointments for enrollees

Most BHOs (29 of 53) report that they do not have urgent appointments available within 24 hours or routine appointments available within 14 days with providers in their BHO for Medicaid managed care enrollees. According to New Mexico’s standards, appointments for urgent conditions must be available within 24 hours and appointments for routine behavioral healthcare must be available within 14 days.²³ See Appendix C for more detailed information about the number of BHOs that are not able to offer timely urgent or timely routine appointments.

²³ NMAC 8.308.2.12 (E), (F).

More than 40% of BHOs are **unable** to provide:



urgent appointments with prescribers in their BHOs **within 24 hours.**



routine appointments with prescribers in their BHOs **within 14 days.**

Notably, 23 of 53 BHOs are unable to provide urgent appointments with prescribers in their BHOs within 24 hours. Twenty of these BHOs do not have prescribers on staff.²⁴ The other three have wait times for urgent appointments with prescribers that range from 2 days to 21 days. At the same time, four BHOs are unable to provide urgent appointments with non-prescribers in their BHO within 24 hours. For these BHOs, wait times with non-prescribers range from 2 days to 7 days.

In addition, 25 of 53 BHOs are unable to provide routine appointments with prescribers in their BHOs within the 14 days as established by New Mexico's standards. For the BHOs with prescribers on staff, wait times for routine appointments range from 20 days to 90 days. Four BHOs are unable to provide routine appointments with non-prescribers in their BHO within 14 days. For these BHOs, wait times for non-prescribers range from 30 days to 75 days.

Some BHOs maintain wait lists for certain behavioral health services

If the BHO is at capacity, it may have to maintain a wait list until services become available. Fourteen BHOs report having maintained a wait list in the past year for at least one of the services they provide. Most commonly, they had wait lists for certain outpatient services such as substance abuse treatment or counseling and therapy. Four BHOs had a wait list for up to one month; an additional six BHOs had a wait list for longer. BHOs report that wait lists particularly affect services for beneficiaries with autism spectrum disorder, depression, and substance use disorder.

“**We are not supposed to have a wait list, but the reality is that at different times providers have had to use a wait list because of workforce issues.**”

-BHO Administrator

²⁴ BHOs may provide appointments by arranging services with other providers who are not on their staff.

BHOs report that transportation is a challenge to ensuring access to timely services

A number of BHOs (9 of 53) highlight challenges with accessing nonemergency medical transportation, despite New Mexico's requirement that its Medicaid managed care organizations provide such transportation to enrollees who need it.²⁵ For example, one stakeholder notes that there are no nonemergency medical transportation providers in the area that offer service in the evening, making it particularly difficult for enrollees to access intensive outpatient substance abuse counseling services, which are often held in the evening. A few BHOs also note that difficulty accessing nonemergency medical transportation causes delays in care. For example, one BHOs notes, "[non-emergency medical transportation] has to be scheduled, and sometimes that takes a few days for approval. The patient is then seen a week after their initial scheduled appointment."

Behavioral health organizations report difficulty arranging or making referrals for services that they do not provide

BHOs arrange services or make referrals for services that enrollees need but that BHOs do not—or currently cannot—provide. Enrollees with mental health and substance use issues need a range of services that include: recovery and support services; non-intensive outpatient services; intensive outpatient services; and inpatient and residential services. BHOs report difficulty arranging behavioral health services in each category to meet the needs of Medicaid managed care enrollees. See Exhibit 4 for a description of the different service categories and Appendix D for the number of BHOs that report having difficulty arranging each service.

²⁵ New Mexico requires that Medicaid managed care organizations provide nonemergency medical transportation for enrollees who have no other means of transportation and need to get to and from medical services, including behavioral health services. NMAC 8.308.2.12 (P). New Mexico's managed care organizations contract with providers to offer nonemergency medical transportation services to enrollees. New Mexico Human Services Department, *Centennial Care Waiver Demonstration: Section 1115 Quarterly Report*, March 2, 2018. Accessed at [http://www.hsd.state.nm.us/uploads/files/Public%20Information/Centennial%20Care/Quarterly%20Reports/2017%20Quarterly%20Progress%20Reports/Final%20Report\(2\).pdf](http://www.hsd.state.nm.us/uploads/files/Public%20Information/Centennial%20Care/Quarterly%20Reports/2017%20Quarterly%20Progress%20Reports/Final%20Report(2).pdf) on February 15, 2019.

Exhibit 4: Behavioral health services includes a variety of services that are generally organized into four categories.

Recovery and support services

include a range of educational, psychosocial rehabilitation, and supported employment services.

Non-intensive outpatient services

is the broadest category and includes assessments and therapy for behavioral health conditions and medication assisted treatment for opioid use disorder.

Intensive outpatient services

are sometimes used as an alternative to inpatient psychiatric care, such as applied behavior analysis and intensive outpatient programs for substance use disorder.

Inpatient and residential services

are the most intensive level of treatment, often requiring 24-hour care in a hospital or group living environment.

Source: OIG analysis of State documentation on behavioral health services, 2019.

BHOs most commonly (43 of 53) report having difficulty arranging recovery and support services for Medicaid managed care enrollees. BHOs explain that provider shortages make it difficult to make referrals and can result in enrollees not receiving the support and services that they need. Notably, BHOs report difficulty arranging psychosocial rehabilitation services that help enrollees develop coping strategies, as well as respite care that provides short-term relief for primary caregivers. As one BHO notes, these services are “already provided by an extremely limited number of providers, which is continually shrinking.”

Most BHOs (42 of 53) also report having difficulty arranging intensive outpatient services. This includes arranging applied behavior analysis—a type of therapy that focuses on improving social skills and adaptive learning skills for enrollees with autism spectrum disorder. As one rural BHO explains, there are no providers that offer this type of therapy in the five neighboring counties, making it extremely difficult to arrange these services for enrollees. As a result, enrollees may need to travel long distances to the nearest provider. Another rural BHO adds that its nearest autism care provider is 4 hours away.

Similarly, most BHOs (39 of 53) report difficulty arranging inpatient and residential services. In particular, some BHOs note that there are a lack of inpatient psychiatric facilities and detox facilities. One stakeholder notes that, as a result, “it is a long, long wait to get enrollees into inpatient

psychiatric treatment, and it is even more difficult to secure inpatient psychiatric treatment for a child.” Further, these facilities may be far away. According to this stakeholder, the nearest child inpatient psychiatric treatment facility is 200 miles away. Another stakeholder notes that many of the inpatient facilities for substance use disorders “will not accept enrollees on any medication, often only accept men, and [will] not accept anyone with mental health diagnoses. This clearly leaves many enrollees without care.”

Further, many BHOs (33 of 53) report having difficulty arranging non-intensive outpatient services. Nearly half have difficulty arranging medication assisted treatment to treat opioid addiction, such as buprenorphine. BHOs also attribute this difficulty to the lack of providers. As one provider notes, the number of medication assisted treatment providers in one of the larger urban areas needs to double in size in order to meet current enrollee needs. BHOs also highlight difficulty arranging day treatment—services that focus on improving functional and behavioral deficits—and note a lack of providers offering these services.

Behavioral health organizations report challenges with continuity of care, citing limited care coordination, provider shortages, and barriers to sharing health information

Continuity of care is particularly important for patients with behavioral health diagnoses because they may require treatment from a number of providers for extended periods of time.²⁶ Continuity of care includes maintaining care when transferring from one setting to another, seeing the same provider each visit at the BHO, and exchanging health information throughout the continuum of care. BHOs report a number of concerns about continuity of care for Medicaid managed care enrollees.

Enrollees' care is not always maintained during transitions, due in part to limited coordination among providers

More than half of BHOs (29 of 53) report that enrollees' care is not always maintained when they are transferred from one level of care to another. Breakdowns during transitions of care can cause confusion regarding treatment plans, duplicative testing, discrepancies in medications, and missed appointments.²⁷

A number of BHOs report difficulties with coordinating enrollees' care during transitions. One BHO notes that constant provider turnover results in enrollees not effectively transitioning to other care providers, causing a significant proportion of these enrollees to leave care altogether. Another stakeholder notes that there is a lack of coordinated care for enrollees who need both mental health services and services for substance use disorders. Many of these enrollees must see multiple behavioral health providers to meet their needs, and those providers do not always coordinate patients' care.

A few BHOs use warm handoffs to promote continuity of care

Warm handoffs occur between two healthcare providers when a patient is being transferred from one setting to another. In addition to in-person communication between providers, the patient is also included in the discussion about his or her plan of care. This helps to build relationships between care coordinators, providers, patients, and their families and provide opportunities to clarify or correct information.

²⁶ Institute of Medicine Committee on Crossing the Quality Chasm, *Coordinating Care for Better Mental, Substance-Use, and General Health*, 2006. Accessed at <https://www.ncbi.nlm.nih.gov/books/NBK19833/> on March 27, 2019. See also Biringer et al., *Continuity of Care as Experienced by Mental Health Service Users: A Qualitative Study*, November 21, 2017. Accessed at <https://bmchealthservres.biomedcentral.com/articles/10.1186/s12913-017-2719-9> on March 27, 2019.

²⁷ Although BHOs strive to provide coordinated care, some types of BHOs are required to do so. See CareLink NM, *CareLink NM Health Homes: Provider Policy Manual*, 2018. Accessed at https://www.hsd.state.nm.us/uploads/files/Providers/Manuals%20and%20Guides/Managed%20Care%20Policy%20Manual/CLNM%20Pol%20Manual%2012_28_18.pdf on June 11, 2019.

A few BHOs also note that the lack of integration between primary and behavioral healthcare acts as a barrier to coordination efforts. Integrating primary and behavioral healthcare—which typically involves close collaboration of both physical and behavioral health providers in the same location—can be critical, since certain behavioral health disorders carry higher incidences of physical issues, including obesity, diabetes, asthma, migraines, heart disease and cancers.²⁸

Enrollees are not always able to see the same providers, often because of a lack of providers or high turnover

One-third of BHOs (17 of 53) report that enrollees cannot always see the same provider as the previous visit for the same service. Ongoing relationships with the same provider create stable conditions for enrollees; changes in providers can often create setbacks in treatment, and can sometimes give rise to anxiety, frustration, and a sense of being rejected.²⁹

A few BHOs highlight the importance of engaging in and maintaining such relationships to improve health outcomes. As one provider notes, “enrollees are scheduled with the same provider...which ensures sustained recovery.”

“Part of [ensuring continuity of care] is you have to keep people in the workforce. You can see a provider more than once—that is really critical—it can be done.”

- Key Stakeholder

BHOs find that a lack of providers limits their ability to keep

enrollees with the same provider. For example, according to one BHO, “more patients are being seen in psychiatric emergency services because of the lack of community providers, resulting in continuity of care issues.” Some BHOs also state that staff turnover results in some enrollees being unable to continue with the same provider, which affects enrollees’ health outcomes. For example, a rural provider, who focuses on treatment for autism spectrum disorder, notes that turnover impacts a child’s long-term outcomes since each new provider has to build a rapport with the child and learn the child’s complex treatment plan.

Enrollee health information is not always communicated because of barriers to sharing enrollee health information across providers

Half of BHOs (26 of 53) report that enrollees’ health information is not always communicated in an effective and timely manner throughout their

²⁸ The Colorado Health Foundation, *The Colorado Blueprint for Promoting Integrated Care Sustainability*, March 2012. Accessed at https://www.integration.samhsa.gov/TCHF_IntegratedCareReport.pdf on January 8, 2019.

²⁹ Biringer et al., *Continuity of Care as Experienced by Mental Health Service Users: A Qualitative Study*, November 21, 2017. Accessed at <https://bmchealthservres.biomedcentral.com/articles/10.1186/s12913-017-2719-9> on March 27, 2019.

continuum of care. Sharing health information helps coordinate care among different providers and across different settings. It also helps providers reduce unnecessary testing, avoid medication errors, and decrease administrative costs.³⁰ Electronic health record (EHR) systems can be a critical tool for supporting seamless and instantaneous health information exchanges across providers when those providers' EHR systems are interoperable (able to exchange information).

Many BHOs (26 of 53) use EHRs, and find that using EHRs helps them to improve services for enrollees. According to one BHO, its EHRs provide quicker access to health information and improves its ability to share records with providers and ensure continuity of care. Some BHOs further note that their EHRs enable providers to collaborate across behavioral health disciplines and with primary healthcare providers.

“ [EHRs] improve continuity of care for patients with multiple providers, maintain updated information, document patients' past records, and track patients' recovery goals and interventions. ”

- BHO Administrator

Despite the advantages of EHRs, some BHOs (13 of 52) have not adopted EHRs.³¹ Nearly all of these BHOs are rural. Rural providers face a unique set of barriers to implementing EHRs, such as difficulty connecting to broadband service. Broadband is high-speed internet access, and is needed to support EHRs and other health information technology services such as telehealth.³² In New Mexico, only 47 percent of people in rural areas have access to advanced broadband, compared to 95 percent of people in urban areas.³³ Other barriers to implementing EHRs include a lack of expertise on how to use such technology and what some BHOs perceive to be prohibitive startup costs. One stakeholder further explains, “it is difficult for provider organizations, unless they are very large and have sufficient scale, to afford the cost of an EHR.”

³⁰ Office of National Coordinator for Health Information Technology (ONC), *Why is health information exchange important?*, March 21, 2018. Accessed at <https://www.healthit.gov/fag/why-health-information-exchange-important> on March 18, 2019.

³¹ For information on nationwide BHO adoption of health information technology, see National Council for Community Behavioral Healthcare, *HIT Adoption and Readiness for Meaningful Use in Community Behavioral Health*, June 2012. Accessed at <https://www.thenationalcouncil.org/wp-content/uploads/2012/10/HIT-Survey-Full-Report.pdf> on May 3, 2019.

³² ONC, *Federal Health IT Strategic Plan: 2015-2020*. Accessed at https://www.healthit.gov/sites/default/files/9-5-federalhealthitstratplanfinal_0.pdf on May 3, 2019.

³³ Federal Communications Commission, *2018 Communications Marketplace Report: Broadband Deployment Appendices*, December 31, 2017. Accessed at <https://docs.fcc.gov/public/attachments/FCC-18-181A9.pdf> on March 21, 2019.

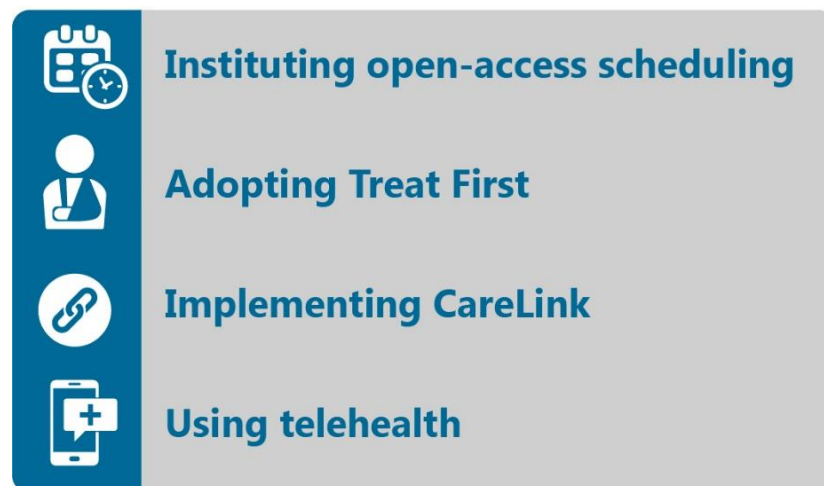
Other BHOs note that the lack of interoperability between their EHR systems and other providers' systems presents problems. Interoperability allows unrelated records systems to exchange electronic health information. As one BHO explains, not enough providers in the area can accept and share information with other providers' EHR systems. Such barriers to interoperability can constrain BHOs' ability to share health information and coordinate care among different providers and across different settings.

Several BHOs also note difficulty with getting enrollee health information from certain types of providers. New Mexico operates a health information exchange (HIE)—a platform through which participating providers can share health information. The HIE has the potential to enable providers to share information about enrollees' demographics, diagnoses, medications, encounter history, procedures, and even clinical notes. However, there are only a small number of behavioral health providers that participate in the State's HIE. While the HIE is available to all providers, as one stakeholder notes, providers without EHRs are unable to participate in the HIE.

Behavioral health organizations highlight promising initiatives to increase the availability of services, including open-access scheduling, treatment first, care integration, and telehealth

Although BHOs report a number of challenges with the availability of behavioral health services, they also cite a number of promising initiatives. BHOs have adopted these initiatives to varying degrees. These initiatives increase the availability of services by improving access to providers, better coordinating enrollee care, and expanding the use of technology to deliver services.

Exhibit 5: Initiatives to increase the availability of behavioral health services.



Many BHOs find that open-access scheduling improves the availability of services

Many BHOs (34 of 53) have implemented open-access scheduling or walk-in availability. Open-access—also known as advanced access and same-day scheduling—is a method of scheduling in which patients can receive an appointment on the day they call. Rather than booking each provider’s full

“We can see 90 percent of our clients within 24 hours of placing a call.”

block of time weeks or even months in advance, this model leaves part of the day open for unscheduled visits. Another part of the schedule is booked only with clinically necessary follow-up visits and appointments for patients who chose not to come on the day they called. BHOs implement open-access scheduling in a variety of ways. For example, one BHO

reserves a few same-day appointments throughout the week, whereas another reserves one day per week for same-day appointments.

All 34 BHOs that have implemented this type of scheduling report that it has improved the availability of services for managed care enrollees. These BHOs commonly note that such initiatives immediately address crisis situations, with one BHO noting that “anything urgent or emergency can be seen immediately, or on the same day.” Several BHOs further note that these initiatives can potentially decrease the need for higher levels of care or hospitalization, as well as improve enrollee health outcomes. Another BHO notes that open-access not only increases access to services, it also decreases the number of no-show appointments.

The Treat First Clinical Model allows faster access to services

About half of the BHOs (25 of 53) have adopted the clinical model referred to as Treat First. Developed for New Mexico in March 2016, Treat First is designed to improve access to care by prioritizing treatment and reducing State assessment requirements.³⁴ Previously, the State required that the results of a comprehensive assessment and treatment plan for each new patient be submitted within 30 days of the first visit, emphasizing the assessment over treatment. Treat First allows for up to four encounters with a provisional diagnosis without a comprehensive assessment and treatment plan.

Almost all BHOs that have adopted this model of care (21 of 25 BHOs) report that it has improved the availability of services for managed care enrollees. According to one BHO, Treat First enrollees have easier and more immediate access to services, leading to increased patient satisfaction and

³⁴ Medical Assistance Division, *Letter of Direction #57: “Treat First” Model Extension*, August 25, 2016. Accessed at https://www.hsd.state.nm.us/uploads/FileLinks/c06b4701fbc84ea3938e646301d8c950/LOD_%2357_Treat_First_Model_Extension_08.25.2016.pdf on June 10, 2019.

better rapport with the clinicians as well as reduced paperwork and less staff burnout among providers. In addition, stakeholders report that Treat First has resulted in a decrease in the number of enrollees that are no-shows for the next scheduled appointment, which they attribute to being able to begin treatment during the enrollee's first visit.

CareLink Health Homes Program helps to integrate physical and behavioral healthcare

In total, eight BHOs participate in New Mexico's CareLink Health Homes Program, which is an integrated healthcare service program.³⁵ The program provides a monthly capitated payment per eligible enrollee to each participating BHO. Each BHO agrees to serve as a health home and is responsible for providing and coordinating the physical and behavioral healthcare for the enrollee. The health home is also required to provide additional services, including comprehensive care management and referrals to community and social support services. Each health home must also measure and report on specific quality indicators.

According to one BHO that currently participates in CareLink, it is "better able to connect enrollees with services outside their agency and address conditions causing hospitalization." Other BHOs add that coordination of care between behavioral health and primary care is improved by more frequent contact between enrollees and providers. This coordination increases access to services and improves medication compliance, which can improve overall health outcomes.

Many BHOs find that telehealth improves availability of services

Telehealth uses internet and communications technologies such as videoconferencing, chat, and text messaging, to provide health information and treatments in real time.

Thirty BHOs report having implemented telehealth in some way. Several BHOs report using telehealth for assessments, and many BHOs report also providing medication management and

psychiatric services through telehealth. All 30 BHOs note that implementing telehealth has improved the availability of services for Medicaid managed care enrollees. According to one BHO that implemented telepsychiatry, this

“ We would not be able to serve 90% of the families we currently serve without telehealth. ”
- BHO Administrator

³⁵ Four additional BHOs that are not in our sample also participate in CareLink. CareLink is for Medicaid behavioral health beneficiaries with a *primary condition* of Serious Mental Illness and/or Severe Emotional Disturbance. See New Mexico Human Services Department, *CareLink NM Health Homes*. Accessed at <http://www.hsd.state.nm.us/health-homes.aspx> on April 5, 2019.

initiative increases its ability to offer more stable outpatient medication management because of an increased pool of qualified staff.³⁶ Another BHO highlights the value of using telehealth for assessments, noting that it “has opened up time for our therapists to provide more time for individual therapy and group therapy, reducing wait times and increasing access to services.”

Telehealth can offer particular benefits for enrollees located in remote locations. According to one BHO, its telehealth initiative has allowed it to spend less time and resources recruiting local providers in rural and frontier clinic sites, allowing for better continuity of care and increased access to psychiatric and counseling services. One provider adds that “telehealth has been critical in establishing care for families in rural and underserved areas.”

At the same time, several BHOs note the limitations of telehealth. First, enrollees sometimes have limited receptiveness to telehealth. As one stakeholder points out, some enrollees do not feel comfortable with sharing their problems openly through technology.

Second, many rural and frontier areas have limited broadband connectivity. As one BHO explains, the internet service for enrollees that live in remote areas is sometimes not capable of sustaining a good connection for telehealth. Another provider further comments: “Telehealth has improved access tremendously. However, many communities in need of services either do not have internet access in their rural area or cannot afford to pay for the service.” Research indicates that internet access remains a challenge to rural telehealth; as mentioned earlier, rural areas in New Mexico have less

Project ECHO: Extension for Community Healthcare Outcomes

In addition to providing services to enrollees, telehealth can also be used to train and supervise providers. New Mexico’s Project ECHO uses teleconferencing to increase the availability of specialty care in behavioral health. The model links specialist teams with behavioral health providers in the community. Behavioral health providers become part of a learning community, where they receive mentoring and feedback from specialists. This model is now used in both urban and rural areas, and includes training on how to treat both mental and substance use disorders.

³⁶ New Mexico is one of nine States as of 2017 where medical boards issue telehealth-specific licenses or certificates that allow out-of-State providers to furnish telehealth services in a State that they are not located. See University of Michigan: Behavioral Health Workforce Research Center, *The Use of Telehealth Within Behavioral Health Settings: Utilization, Opportunities, and Challenges*, March 2018. Accessed at http://www.behavioralhealthworkforce.org/wp-content/uploads/2018/05/Telehealth-Full-Paper_5.17.18-clean.pdf on April 3, 2018.

access to broadband—a factor that limits the types of telehealth services available to them via a home internet connection.

CONCLUSION AND RECOMMENDATIONS

Concerns exist about the availability of behavioral health services—which includes treatments and services for mental health and substance use disorders—for enrollees in Medicaid managed care. The need for such services is particularly pronounced in New Mexico—a State that has among the highest rates for suicide and deaths from overdose in the Nation.

Many counties in New Mexico have few licensed behavioral health providers serving Medicaid managed care enrollees. These behavioral health providers are unevenly distributed across the State, with rural and frontier counties having disproportionately fewer providers and prescribers. Notably, only 29 percent of the State’s licensed providers are in rural and frontier counties, despite nearly half of the State’s Medicaid managed care enrollees residing in these counties. Further, a significant number of New Mexico’s licensed behavioral health providers do not provide services to Medicaid managed care enrollees.

Additionally, most of the State’s licensed behavioral health providers work in BHOs—which include federally qualified health centers and community mental health centers; however, BHOs report challenges with finding and retaining staff, as well as ensuring transportation for enrollees. As a result, these organizations cannot always ensure timely access for enrollees seeking behavioral health services. These organizations also report difficulty arranging or making referrals for services that they do not—or currently cannot—provide. In addition, they report challenges with continuity of care for enrollees, citing limited care coordination, provider shortages, and barriers to sharing health information.

Nonetheless, BHOs highlight promising initiatives that increase the availability of behavioral health services for Medicaid managed care enrollees, including open-access scheduling, treatment first, care integration, and telehealth. These initiatives increase the availability of behavioral health services by improving access to providers, coordinating enrollee care, and expanding the use of technology. In addition, New Mexico recently announced its intention to raise certain provider payment rates.³⁷

Although this report focuses on New Mexico, it provides insights into challenges that are likely shared by other States providing behavioral health services to Medicaid enrollees, especially in rural and frontier counties. These challenges—including provider shortages and limited availability of behavioral health—require attention not only at the State level, but at the

³⁷ New Mexico Human Services Department. Accessed at https://www.hsd.state.nm.us/uploads/PressRelease/2f473c14ee654f868b5a25b3cfd15a6d/FY20_RateIncrease_PubNotice_FINAL.pdf on July 3, 2019.

national level as well. These challenges are particularly heightened as Medicaid agencies continue to be on the front lines of fighting opioid abuse and in ensuring that appropriate behavioral health services are available.

On the basis of the findings of this report, we recommend that the Centers for Medicare & Medicaid Services (CMS):

Identify States that have limited availability of behavioral health services and develop strategies and share information to ensure that Medicaid managed care enrollees have timely access to these services

CMS should identify States—in addition to New Mexico—that have limited availability of behavioral health services for Medicaid managed care enrollees. CMS should work with these States to develop strategies to ensure that enrollees have timely access to behavioral health services. CMS should particularly focus on these challenges in rural and frontier areas. CMS should build on its existing efforts to provide technical assistance and share best practices and lessons learned from States’ experiences. As a part of its efforts, CMS should work to ensure that States are monitoring the numbers and locations of behavioral health providers and that States are identifying any barriers that impede access to behavioral healthcare. For example, CMS could encourage States to monitor whether there are shortages of specific types of behavioral health providers, such as substance use counselors or psychiatrists. To encourage information sharing, CMS could identify any promising practices that other States have developed. CMS could then share this information with States—such as through case studies, tool kits, and other methods.

We also recommend that the New Mexico Human Services Department:

Expand New Mexico’s behavioral health workforce that serves Medicaid managed care enrollees

Having a sufficient number of behavioral health providers that serve Medicaid managed care enrollees in New Mexico is essential to improving the availability of services to this population. To achieve this, the New Mexico Human Services Department should:

- **Take steps to expand New Mexico’s overall behavioral health workforce.** To address workforce shortages of behavioral health providers, New Mexico should implement initiatives to recruit and retain additional behavioral health providers. For example, New Mexico could look to other States’ initiatives, including internship opportunities in behavioral health fields and market to both in-State and out-of-State candidates. New Mexico could also encourage non-licensed providers to pursue licensure. New Mexico should particularly target these

efforts towards developing its behavioral health workforce in rural and frontier counties.

- **Increase behavioral health providers' participation in Medicaid managed care.** A significant number of New Mexico's licensed behavioral health providers do not provide services to Medicaid managed care enrollees. New Mexico should develop initiatives to encourage more of its existing behavioral health workforce to serve Medicaid managed care enrollees. Such initiatives could include initiatives implemented by other States, such as periodic reviews of licensure requirements and reimbursement rates, direct outreach to providers, and simplification of administrative requirements.

Improve access to behavioral health services

Improving access to services is another essential element for bolstering services for Medicaid managed care enrollees. To achieve this, the New Mexico Human Services Department should:

- **Review its standards governing access to care and determine whether additional standards are needed for behavioral health providers.** New Mexico should determine whether its managed care organizations are meeting the existing State standards that apply to behavioral health providers. It should also evaluate whether any changes to its existing standards are needed in order to better meet the behavioral health needs of their Medicaid managed care enrollees.
- **Improve access to transportation for Medicaid managed care enrollees needing behavioral health services.** Transportation to medical care is essential for Medicaid managed care enrollees who have limited means of transport to and from needed behavioral health services. New Mexico should first take steps to determine if managed care organizations are meeting their contractual obligations and to identify any challenges with nonemergency medical transportation. It should then work with its managed care organizations to develop initiatives to provide improved nonemergency medical transportation to enrollees. It should identify these initiatives and effective practices by reviewing the approaches taken by other States to improve the availability of

transportation services.³⁸ These initiatives should include working with the managed care organizations to review their networks of nonemergency medical transportation providers and looking for ways to expand the number of providers, such as coordinating with local organizations.

- **Work with State partners to strengthen access to high-speed, reliable, and secure communications technologies in rural and frontier counties.** High-speed, reliable, and secure communications technology is needed for healthcare providers and enrollees to benefit from EHRs and other health information technology services such as telehealth. A lack of access to connectivity with sufficient bandwidth speeds—such as broadband connectivity—remains a significant barrier faced by rural providers. New Mexico should strengthen broadband access, particularly in rural and frontier counties. New Mexico should work with other State partners to look for opportunities to attract additional broadband service providers to communities that are currently without access to broadband. New Mexico should also pursue additional funding opportunities for broadband-related projects, including Federal programs that can fund projects related to broadband planning, public access, digital literacy, and deployment.³⁹
- **Expand the use of telehealth to increase the availability of behavioral health services.** BHOs note that telehealth has improved the availability of services for Medicaid managed care enrollees, particularly those in rural and frontier areas. New Mexico should expand the use of telehealth, as appropriate, to further increase the availability of services, particularly in rural and frontier areas. To do this, the State should encourage adoption of telehealth, expand participation in Project Echo, and

³⁸ CMS and the National Academies of Sciences, Engineering, and Medicine provide effective practices used by other States to address transportation issues. See National Academies of Sciences, Engineering, and Medicine, *Handbook for Examining the Effects of Non-Emergency Medical Transportation Brokerages on Transportation Coordination*, October 22, 2018. Accessed at <https://www.nap.edu/download/25184> on February 25, 2019; CMS, *Medicaid State Plan Amendments*. Accessed at <https://www.medicaid.gov/state-resource-center/medicaid-state-plan-amendments/index.html> on February 26, 2019; and, GAO, *Nonemergency Medical Transportation: Updated Medicaid Guidance Could Help States*, GAO-16-238, February 2, 2016. Accessed at <https://www.gao.gov/assets/680/674934.pdf> on February 7, 2019.

³⁹ For a list of Federal funding sources, including grants funded by the United States Department of Health and Human Services, see the Federal Communications Commission, *Funding Broadband-Enabled Health Care*. Accessed at <https://www.fcc.gov/general/funding-broadband-enabled-health-care> on May 6, 2019.

strengthen access to broadband to expand telehealth accessibility.

Improve the effectiveness of behavioral health services

Another key element of strengthening services for Medicaid managed care enrollees is to improve their effectiveness. To achieve this, the New Mexico Human Services Department should:

- **Take steps to increase adoption of electronic health records (EHRs) and participation in the State Health Information Exchange (HIE) by behavioral health providers.** BHOs report that EHRs improve care for enrollees and enable providers to collaborate across behavioral health settings and with primary healthcare providers. EHRs also allow providers to easily access patient information and in some cases to share that information with other providers. EHRs are also needed to participate in the State's HIE, which can provide information about enrollees' diagnoses, medications, procedures, and—in some cases—clinical notes. Some providers face challenges in adopting EHRs and participating in the State HIE including the prohibitive cost of many EHR systems and limited expertise on how to use such technology. To address these challenges, New Mexico should work with providers in accessing assistance and resources that support behavioral health providers' adoption and use of EHRs and encourage participation in the State's HIE.⁴⁰
- **Identify and share information about strategies to improve care coordination.** Coordination among behavioral health and other providers is especially important since certain behavioral disorders carry higher incidences of chronic physical illnesses. BHOs report some challenges with finding providers and coordinating among providers, particularly when enrollees are transferred from one level of care to another. New Mexico should identify and share information on strategies for improved care coordination among behavioral health and other providers. For example, New Mexico should review other States' strategies to promote coordinated care across various

⁴⁰ An example of a resource that may be helpful is the Regional Extension Centers, which provide on-the-ground technical assistance for individual and small provider practices that lack resources to adopt and maintain EHRs. Services include health information technology education and training, vendor selection consultation, and partnering with the State health information exchange. For more information, see ONC, *Regional Extension Centers (RECs)*, November 7, 2018. Accessed at <https://www.healthit.gov/topic/regional-extension-centers-recs> on March 7, 2019.

settings. New Mexico should facilitate information sharing among its providers—through the development of case studies, tool kits, and other methods—to encourage providers to use these strategies.

- **Expand initiatives to integrate behavioral and primary healthcare.** BHOs report that the increased integration between behavioral and primary healthcare can improve patient outcomes. For example, CareLink health homes is New Mexico's integrated care model. The goal of this model is to enhance the integration of behavioral and primary healthcare as well as other services. New Mexico should assess the implementation of CareLink health homes and the value of integrating care. On the basis of the results, it should refine and expand this model or consider other models of integrated care, if appropriate.
- **Share information about open-access scheduling and the Treat First Clinical Model and promote expansion.** BHOs report that open-access scheduling and the Treat First Clinical Model help increase the availability of behavioral health services for Medicaid managed care enrollees. New Mexico should share information with the BHOs that do not use these tools about the benefits identified by the BHOs that do use them. New Mexico could also convene forums for BHOs to share strategies and technical assistance for successful implementation of these tools.

AGENCY AND STATE COMMENTS AND OIG RESPONSE

Both CMS and the New Mexico Human Services Department (the State) concurred with our recommendations. We made one recommendation to CMS and 10 recommendations to the State.

CMS concurred with our recommendation to identify States that have limited availability of behavioral health services and develop strategies and share information. CMS stated that it will work with States that identify themselves as having behavioral health shortages and States that have managed care plans that do not meet the State defined standards of network adequacy. CMS stated that it will provide technical assistance to those States by developing strategies and sharing information to ensure that Medicaid managed care enrollees have timely access to behavioral health services.

The State concurred with our 10 recommendations that seek to expand the State's behavioral health workforce, improve access to behavioral health services, and improve the effectiveness of behavioral health services.

In response to the two recommendations that seek to expand the State's behavioral health workforce, the State noted that it plans to, among other things, use Federal grants to increase behavioral health services provided in rural and frontier counties, while also implementing a Graduate Medical Education program for providers. The State also implemented an increase of Medicaid rates for behavioral health providers and will continue to meet with the Regulation and Licensing Department to discuss the streamlining of licensing requirements and implementation of reciprocity for out-of-state providers who move to New Mexico.

In response to the four recommendations that seek to improve access to behavioral health services, the State noted that it is in the process of promulgating a new rule for behavioral health. It also stated that it plans to provide additional non-emergency medical transportation for the justice-involved population upon their release. To strengthen access to communication technologies, it stated that it plans to pursue additional funding for broadband coverage and work with other State agencies to endorse increased funding for broadband efforts. It also stated that it will continue working with the State telehealth network to expand telehealth coverage.

In response to the four recommendations that seek to improve the effectiveness of behavioral health services, the State plans to explore funding for connectivity and data transmission to increase behavioral health

provider data sharing. It also noted that it is currently in discussions with the State's HIE to include behavioral health providers on the HIE. The State also noted that it recently expanded the number of health homes to better integrate behavioral and primary healthcare. Finally, the State added that it plans to collaborate with the New Mexico Behavioral Health Provider Association to increase the number of providers who are trained in the Treat First model.

We appreciate CMS's and the State's steps to address these important issues. OIG urges both CMS and the State to continue their work in this area to ensure timely access to behavioral health services for Medicaid managed care enrollees.

For the full text of CMS's comments, see Appendix E. For the full text of the New Mexico Human Services Department's comments, see Appendix F.

APPENDIX A: Detailed Methodology

We based this study on analyses of Medicaid managed care data from the State and on survey data from selected BHOs. We also conducted interviews with selected behavioral health providers, State Medicaid agency officials, and key stakeholders.

State Medicaid managed care data

We requested data from the State Medicaid Agency to determine the number and type of licensed behavioral health providers that serve the State's managed care enrollees. Using these data, we developed a list of all unique providers listed on at least one behavioral health claim during the period of January 1, 2017, through December 31, 2017.

For each of these providers, we requested information about their behavioral health specialty, their current enrollment status (i.e., "active"), and the primary county in which they provide services—and whether that county was urban, rural, or frontier.⁴¹ We also requested information about the organizations where each of the providers work. We then identified all unique active licensed behavioral health providers in the State, by county.⁴² We included providers in the following three categories:⁴³

- Independently licensed, prescribing behavioral health providers consist of psychiatrists (MD or DO with a psychiatric specialty), advanced practice nurses (i.e., clinical nurse specialists or clinical nurse practitioners with a psychiatric specialty), and licensed clinical psychologists (Ph.D., Psy.D. or Ed.D.) certified for prescribing.
- Independently licensed, non-prescribing behavioral health providers consist of licensed clinical psychologists (Ph.D., Psy.D. or Ed.D.) not certified for prescribing, licensed independent or clinical social workers (LISW or LCSW), licensed professional clinical mental health counselors (LPCC), licensed professional mental health counselors

⁴¹ Note that providers may practice at multiple locations, including locations outside of their primary service county. Further, we based our analysis on New Mexico's designation of urban, rural, and frontier counties. Note that frontier counties have an average of 2.8 people per square mile, and rural counties have an average of 13.7 people per square mile.

⁴² This analysis does not include out-of-State providers.

⁴³ In addition to the types of providers listed above, the State licenses other behavioral health providers, such as certified alcohol and drug abuse counselors (CADAC) and licensed physician assistants (PA) with a psychiatric specialty. Note that if types of behavioral health providers are not included in the bullets above, there were no providers of these types in the 2017 data.

(LPC), licensed marriage and family therapists (LMFT), licensed professional art therapists (LPAT), and licensed alcohol and drug abuse counselors (LADAC).

- Non-independently licensed behavioral health providers consist of licensed masters of social work (LMSW), licensed baccalaureates of social work (LBSW), licensed mental health counselors (LMHC), licensed associate marriage and family therapists (LAMFT), licensed substance abuse associates (LSAA), and registered nurses (RN) with a with a psychiatric specialty.

We also requested the total number of Medicaid managed care enrollees by county in 2017. Using these data, we determined the ratio of providers per 1,000 Medicaid managed care enrollees for each county. We also calculated the median ratio of providers and prescribers per 1,000 Medicaid managed care enrollees for urban, rural, and frontier counties.

Finally, we identified the number of licensed behavioral health providers that work in BHOs. Using the State data, we identified 351 BHOs that provide services to Medicaid managed care enrollees. These included all BHOs that provided outpatient behavioral health services to Medicaid managed care enrollees from January 1, 2017, through December 31, 2017.

Survey of behavioral health organizations

We selected a purposive sample of BHOs to survey. We included all BHOs designated as core service agencies because they are primary sources for comprehensive medical and support services for many Medicaid managed care enrollees in New Mexico. We then selected up to two additional BHOs with the largest behavioral health expenditures in each county to ensure geographic representation.⁴⁴ Finally, we included any additional BHOs that billed for more than \$1 million in 2017. In total, we selected 78 BHOs throughout the State.

Next, we conducted a survey of each of the selected BHOs. Our questions focused on the availability of behavioral health services for Medicaid managed care enrollees. We asked about the availability of both urgent and routine appointments for enrollees seeking services at the BHO from both prescribing and non-prescribing providers. We also asked about the extent to which BHOs maintain wait lists. Additionally, we asked about the extent to which they have difficulty arranging services that they do not or currently cannot provide. We also asked about any challenges with ensuring continuity of care, including maintaining care when transferring from one setting to another, seeing the same provider each visit, and exchanging health information throughout the continuum of care. Lastly, we asked about challenges and promising initiatives for improving the

⁴⁴ Five counties only had one BHO, and one county did not have a BHO.

availability of behavioral health services. We conducted the survey from August through November 2018. We received responses from a total of 53 BHOs in 27 of the 32 counties in New Mexico with a BHO. Of these BHOs, 16 were in urban counties, 20 were in rural counties, and 17 were in frontier counties.⁴⁵

Interviews with selected providers, State Medicaid officials and key stakeholders

We conducted interviews with selected providers from the BHOs, officials from the State's Medicaid managed care program, and key stakeholders.⁴⁶ We asked the behavioral health providers about their experience working with Medicaid managed care enrollees and the availability of behavioral health services. We conducted structured interviews with State Medicaid officials responsible for behavioral health services in the State and specific initiatives such as the Treat First Clinical Model. Lastly, we conducted structured interviews with key stakeholders, including representatives from the Local Collaborative Alliance New Mexico, a group of organizations that support community participation in behavioral health services. We focused our questions on the availability of behavioral health services for Medicaid managed care enrollees and on challenges and opportunities for improving the availability of behavioral health services in the State.

⁴⁵ The 53 BHOs received more than \$61 million in Medicaid managed care behavioral health expenditures in 2017. This amounts to 50 percent of the expenditures received by all BHOs in that year.

⁴⁶ We asked each BHO to identify at least one provider who had the most experience working with Medicaid managed care enrollees.

APPENDIX B: Number of Licensed Behavioral Health Providers That Serve Medicaid Managed Care Enrollees in New Mexico

Exhibit B-1: Number of licensed behavioral health providers, by provider type, 2017

	Total	Urban		Rural		Frontier	
Independently Licensed Prescribing Behavioral Health Providers	328	227	69%	83	25%	18	6%
Psychiatrists	202	151	75%	40	20%	11	5%
Advanced Practice Nurses*	94	52	55%	38	40%	4	4%
Prescribing Psychologists	32	24	75%	5	16%	3	9%
Independently Licensed Non-Prescribing Behavioral Health Providers	1,872	1,346	72%	449	24%	77	4%
Counselors and Therapists	976	682	70%	255	26%	39	4%
Social Workers	584	426	73%	131	22%	27	5%
Psychologists, Non-Prescribing	274	220	80%	45	16%	9	3%
Substance Use Counselors	38	18	47%	18	47%	2	5%
Non-Independently Licensed Behavioral Health Providers	465	325	70%	115	25%	25	5%
Counselors and Therapists	250	184	74%	58	23%	8	3%
Social Workers	198	131	66%	51	26%	16	8%
Registered Nurses	13	9	69%	4	31%	0	0%
Substance Use Counselors	4	1	25%	2	50%	1	25%
Total	2,665	1,898	71%	647	24%	120	5%

* Includes certified nurse practitioners with a psychiatric specialty and certified nurse specialists with a psychiatric specialty.

Rows may not total 100 percent due to rounding.

Source: OIG analysis of State Medicaid data, 2019.

Exhibit B-2: Number of licensed behavioral health providers, by county, 2017

County	Type	Total Medicaid Managed Care Enrollees*	Independently Licensed, Prescribing Providers	Independently Licensed, Non-Prescribing Providers	Non-Independently Licensed Providers	Total Licensed Providers	Licensed Providers per 1,000 Enrollees
Bernalillo	Urban	187,932	149	911	230	1,290	6.9
Catron	Frontier	654	-	1	-	1	1.5
Chaves	Rural	25,574	3	22	8	33	1.3
Cibola	Frontier	7,353	2	7	2	11	1.5
Colfax	Frontier	4,448	-	4	2	6	1.3
Curry	Rural	16,123	2	37	14	53	3.3
De Baca	Frontier	902	-	-	-	-	-
Dona Ana	Urban	92,905	48	157	46	251	2.7
Eddy	Rural	18,215	7	14	5	26	1.4
Grant	Rural	9,472	3	33	5	41	4.3
Guadalupe	Frontier	1,910	-	3	-	3	1.6
Harding	Frontier	67	-	-	-	-	-
Hidalgo	Frontier	1,677	1	1	2	4	2.4
Lea	Rural	24,730	4	14	7	25	1.0
Lincoln	Frontier	6,117	-	8	-	8	1.3
Los Alamos	Urban	775	1	11	3	15	19.4
Luna	Rural	13,544	2	6	3	11	0.8

Exhibit B-2: Number of licensed behavioral health providers, by county, 2017 (continued)

County	Type	Total Medicaid Managed Care Enrollees*	Independently Licensed, Prescribing Providers	Independently Licensed, Non-Prescribing Providers	Non-Independently Licensed Providers	Total Licensed Providers	Licensed Providers per 1,000 Enrollees
McKinley	Rural	17,377	10	17	3	30	1.7
Mora	Frontier	1,295	-	4	-	4	3.1
Otero	Rural	16,798	13	32	4	49	2.9
Quay	Frontier	3,513	-	4	2	6	1.7
Rio Arriba	Rural	17,449	2	21	9	32	1.8
Roosevelt	Rural	6,444	1	6	-	7	1.1
San Juan	Rural	32,683	16	45	9	70	2.1
San Miguel	Frontier	11,315	12	25	16	53	4.7
Sandoval	Rural	33,006	15	111	33	159	4.8
Santa Fe	Urban	56,777	29	267	46	342	6.0
Sierra	Frontier	6,435	2	10	1	13	2.0
Socorro	Frontier	6,414	1	3	-	4	0.6
Taos	Rural	12,064	4	64	12	80	6.6
Torrance	Frontier	7,986	-	7	-	7	0.9
Union	Frontier	576	-	-	-	-	-
Valencia	Rural	26,852	1	27	3	31	1.2
Total		669,705*	328	1,872	465	2,665	4.0

* This includes an additional 323 enrollees in which the county was unknown.

Source: OIG analysis of State Medicaid data, 2019.

APPENDIX C: Number of Selected Behavioral Health Organizations That Report Having Difficulty Providing Timely Appointments

Urgent Appointments		
	Number of BHOs	Percentage of BHOs
With a prescriber in their BHO		
Within 24 Hours	30	56.6%
After 24 Hours	23	43.4%
With a non-prescriber in their BHO		
Within 24 Hours	49	92.5%
After 24 Hours*	4	7.5%
Routine Appointments		
	Number of BHOs	Percentage of BHOs
With a prescriber in their BHO		
Within 14 Days	28	52.8%
After 14 Days	25	47.2%
With a non-prescriber in their BHO		
Within 14 Days	49	92.5%
After 14 Days**	4	7.5%

* Three of the four BHOs are unable to provide urgent appointments with prescribers and non-prescribers in their BHOs within 24 hours.

** All four BHOs are unable to provide routine appointments with prescribers and non-prescribers in their BHOs within 14 days.

Source: OIG analysis of BHO survey data, 2019.

Appendix D: Number of Selected Behavioral Health Organizations That Report Having Difficulty Arranging Each Service

	Number of BHOs	Percentage of BHOs
Recovery and Support Services		
Behavioral Health Respite Care	27	50.9%
Family Support Services	22	41.5%
Psychosocial Rehabilitation Services	22	41.5%
Supportive Housing Pre-Tenancy and Tenancy Services	22	41.5%
Behavior Management Skills Development Services	17	32.1%
Comprehensive Community Support Services (CCSS)	15	28.3%
Non-Intensive Outpatient Services		
Day Treatment	24	45.3%
Medication Assisted Treatment (MAT): Buprenorphine Treatment for Opioid Use Disorder	24	45.3%
Screening, Brief Intervention & Referral to Treatment (SBIRT)	16	30.2%
Crisis Intervention Services	12	22.6%
Behavioral Health Professional Services for Screenings, Evaluations, Assessments and Therapy	4	7.5%
Intensive Outpatient Services		
Opioid Treatment Program (OTP)	22	41.5%
Applied Behavior Analysis (ABA)	28	52.8%
Intensive Outpatient Program for Substance Use Disorders or Mental Health Conditions (IOP)	21	39.6%
Cognitive Enhancement Therapy (CET)	20	37.7%
Assertive Community Treatment Services	19	35.8%
Multi-Systemic Therapy (MST)	17	32.1%

	Number of BHOs	Percentage of BHOs
Inpatient and Residential Services		
Accredited/ Non-accredited Residential Treatment Center (ARTC, RTC) or Group Home	30	56.6%
Institution for Mental Diseases (IMD)	30	56.6%
Treatment Foster Care I and II	18	34.0%

Source: OIG analysis of BHO survey data, 2019.

APPENDIX E: Centers for Medicare & Medicaid Services Comments



DEPARTMENT OF HEALTH & HUMAN SERVICES

Centers for Medicare & Medicaid Services

Administrator
Washington, DC 20201

DATE: August 16, 2019

TO: Joanne Chiedi
Acting Inspector General
Office of Inspector General

FROM: Seema Verma
Administrator
Centers for Medicare & Medicaid Services

SUBJECT: Office of Inspector General (OIG) Draft Report: Provider Shortages and Limited Availability of Behavioral Health Services in New Mexico's Medicaid Managed Care (OEI-02-17-00490)

The Centers for Medicare & Medicaid Services (CMS) appreciates the opportunity to review and comment on the Office of Inspector General's (OIG) draft report. CMS is committed to working with states to provide Medicaid managed care enrollees with high quality behavioral health services.

CMS recognizes the importance of collaborating with states to increase the availability of behavioral health services for Medicaid beneficiaries. CMS also believes that states are in the best position to develop meaningful and appropriate network adequacy and service availability standards that reflect the scope of their programs, the populations served, and the unique demographics and characteristics of each state. To assist states in developing their network adequacy and service availability standards, CMS formed a working group of states to discuss common access challenges and goals, as well as to create a forum for states to present their successful techniques for establishing and monitoring network adequacy in their programs. In April 2017, CMS published the Network Adequacy Toolkit, which provides technical assistance to states in the development and oversight of Medicaid managed care plan networks including mental health providers.¹

CMS also has a section 1115 demonstration initiative focused on improving access to substance use disorder treatment, which is designed to incentivize states to ensure Medicaid beneficiaries have access to a full continuum of care to treat substance use disorder, while also implementing standards and processes to improve the quality of care being provided.² As part of these demonstrations, participating states are expected to take actions to improve provider capacity across a continuum of care including outpatient, intensive outpatient, and residential settings and ensure access to medication assisted treatment at all of these levels of care.

¹ <https://www.medicaid.gov/medicaid/managed-care/downloads/guidance/adequacy-and-access-toolkit.pdf>

² <https://www.medicaid.gov/federal-policy-guidance/downloads/smd17003.pdf>

In addition, in November 2018, CMS issued a letter to State Medicaid Directors that outlines both existing and new opportunities for states to design innovative service delivery systems for adults with serious mental illness and children with serious emotional disturbance.³ The letter includes a new opportunity for states to receive authority to pay for short-term residential treatment services in an institution for mental disease for these patients. As a part of this new opportunity, participating states will be expected to conduct a thorough assessment of the availability of mental health providers at different levels of care across their state and develop strategies and take actions to fill gaps in provider availability and participation in Medicaid. CMS believes these opportunities offer states the flexibility to make significant improvements on access to quality behavioral health care.

Recognizing the unique challenges faced by rural communities in accessing care, in May 2018, CMS launched the agency's first Rural Health Strategy to help improve access to high quality, affordable healthcare in rural communities.⁴ As part of this initiative, CMS is working with state Medicaid agencies to improve access to care through provider engagement and support, focusing particularly on behavioral health. In addition, the initiative includes forming a council of experts tasked with addressing rural health issues, engaging stakeholders in rural communities, and partnering with health organizations to raise awareness.

Aligning with these efforts, the Substance Use-Disorder Prevention that Promotes Opioid Recovery and Treatment (SUPPORT) for Patients and Communities Act (Pub. L. 115-271), enacted in October 2018, includes a number of significant Medicaid provisions aimed at improving access to behavioral health care for Medicaid beneficiaries, including those in managed care.⁵ Specifically, the SUPPORT Act includes a provision that requires CMS to issue guidance to states regarding federal reimbursement for services and treatment for substance use disorders under Medicaid delivered via telehealth. It also requires CMS to issue a Report to Congress identifying best practices and potential solutions for reducing barriers to using services delivered via telehealth for substance use disorders among pediatric populations under Medicaid. The SUPPORT Act also includes a number of other significant Medicaid provisions, such as a new mandatory benefit covering all forms of medication assisted treatment, a new optional benefit to cover specialized inpatient and residential substance use disorder treatment, and a demonstration program providing planning funding to up to ten states to increase the capacity of Medicaid providers to deliver substance use disorder treatment. CMS is in the process of developing guidance on several of these statutory requirements in the SUPPORT Act, and is working to implement the benefit changes and opportunities aimed at improving access to behavioral health care in Medicaid.

Lastly, in July 2019, CMS issued a notice of proposed rulemaking designed to help streamline federal oversight of access to care requirements that protect Medicaid beneficiaries.⁶ If the proposed rule is finalized, CMS would replace the ongoing access reviews required by current regulations with a more comprehensive and outcomes-driven approach to monitoring access across delivery systems, developed through workgroups and technical expert panels that include key state and federal stakeholders.

³ <https://www.medicaid.gov/federal-policy-guidance/downloads/smd18011.pdf>

⁴ <https://www.cms.gov/About-CMS/Agency-Information/OMH/Downloads/Rural-Strategy-2018.pdf>

⁵ <https://www.congress.gov/bills/115/congress/house-bill/6>

⁶ <https://www.cms.gov/newsroom/press-releases/cms-launches-comprehensive-effort-strengthen-monitoring-medicare-beneficiary-access-patients-while>

CMS is committed to providing opportunities for states to improve access to behavioral health care and through the efforts described above, we are assisting states and other stakeholders in meeting this goal.

OIG's recommendation and CMS' response are below.

OIG Recommendation

Identify States that have limited availability of behavioral health services and develop strategies and share information to ensure that Medicaid managed care enrollees have timely access to these services.

CMS Response

CMS concurs with this recommendation. CMS will work with states who identify themselves as having behavioral health shortages, or through the course of their network monitoring, consistently have managed care plans that do not meet state defined standards of network adequacy. CMS will utilize our robust efforts described above to provide technical assistance to those states by developing strategies and sharing information to ensure that Medicaid managed care enrollees have timely access to behavioral health services.

APPENDIX F: New Mexico Human Services Department Comments



Michelle Lujan Grisham, Governor
David R. Scrase, M.D., Secretary

August 16, 2019

Ms. Suzanne Murrin
Deputy Inspector General
Department of Health and Human Services
Office of Inspector General
Washington, DC 20201

Dear Deputy Inspector Murrin:

Thank you for granting New Mexico the opportunity to comment on the draft report entitled *Provider Shortages and Limited Availability of Behavioral Health Services in New Mexico's Medicaid Managed Care*, OEI-02-17-00490.

Attached are New Mexico Human Services Department's comments and specific actions related to each of the ten recommendations. Included are draft timelines for the actions outlined for each recommendation.

If you have any questions about this report, please do not hesitate to email me at David.scrase@state.nm.us or call me at 505-827-7750.

Sincerely,

A handwritten signature in dark ink, appearing to read "David R. Scrase".

David Scrase, M.D.
Secretary

Office of the Secretary | PO Box 2348 – Santa Fe, NM 87504 | Phone: (505) 827-7750 Fax: (505) 827-6286

New Mexico's Comments
Provider Shortages and Limited Availability of Behavioral Health Services in New Mexico's Medicaid Managed Care
OEI-02-17-00490

1. Expand NM's behavioral health workforce that serves Medicaid managed care enrollees

a. Take Steps to expand NM's overall BH workforce

- i. The Human Services Department (HSD) concurs with this recommendation.
 - 1. Since January 1, 2019, HSD has implemented a multiprong strategy to expand NM's overall BH workforce including but not limited to:
 - a. BH provider rate increase in July 2019 and October 2019 totaling \$50M;
 - b. Utilization of federal grants (\$27.5M) to increase BH services provided in rural and frontier counties;
 - c. Dedicated staff to serve as support for BH providers regarding new services, Medicaid enrollment, certification, etc.
 - d. Submission of an application for the CMS SUD Medicaid Workforce grant on 8/9/2019; and
 - e. Implementation of a Graduate Medical Education program for providers in 2020.
 - 2. NM's Behavioral Health Collaborative (BHC) is comprised of Secretaries for various state agencies. The BHC developed four strategic goals, one of which is the Expansion of the Behavioral Health Network. The BHC will be requesting \$25M for next fiscal year in an effort to accomplish the objectives of all four goals.

b. Increase BH providers' participation in Medicaid managed care

- i. HSD concurs with this recommendation.
 - 1. HSD's managed care program, Centennial Care, included new BH services with the implementation of its 1115 waiver renewal on January 1, 2019. New Medicaid reimbursable BH services include: Screening, Brief Intervention & Referral to Treatment; Accredited Residential Treatment Centers for Adults; and Supportive Housing.
 - 2. Since 2017, HSD has reduced the departmental administrative requirements for BH providers who render specialty services.
 - 3. HSD continues to meet with the Regulation and Licensing Department to discuss the streamlining of licensing requirements and implementation of reciprocity for out of state providers moving to NM.
 - 4. HSD will conduct a BH provider network analysis over the next six months.

2. Improve access to BH services

a. Review its standards governing access to care and determine whether additional standards are needed for behavioral health providers.

- i. HSD concurs with this recommendation.
 - 1. On January 14, 2019, HSD released a Medicaid Supplement to BH providers and the MCOs regarding BH service updates.
 - 2. In January 2019, HSD release the BH Billing and Policy Manual.

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3. On December 1, 2019, HSD will complete the BH rule promulgation process.
- b. Improve access to transportation for Medicaid managed care enrollees needing behavioral health services.**
 - i. HSD concurs with this recommendation.
 1. NM Medicaid covers non-emergency medical transportation for members with physical health (PH) and BH appointments.
 2. Within the next six months, HSD will implement non-medical transportation for the justice involved population upon release to ensure access to pharmacy and other services.
- c. Work with State partners to strengthen access to high-speed, reliable, and secure communications technologies in rural and frontier counties.**
 - i. HSD concurs with this recommendation.
 1. Since 2014, NM Medicaid has reimbursed for BH and physical health services provided via telehealth. BH providers have the highest utilization of telehealth.
 2. HSD is pursuing funding for broadband coverage and is working with other state agencies to endorse increased funding for these efforts.
- d. Expand the use of telehealth to increase the availability of behavioral health services.**
 - i. HSD concurs with this recommendation.
 1. With the implementation of Centennial Care in 2014, HSD identified telemedicine as a focus area for improving health outcomes by addressing barriers to physical and behavioral health care needs in our rural and frontier areas.
 2. Beginning in 2019, HSD included telemedicine as a contractually required Delivery System Improvement Performance Target for the MCOs.
 3. In 2018, HSD included the use of telemedicine for the provision of Applied Behavior Analysis (ABA) services, Medication Assisted Treatment (MAT) and Opioid Treatment Program (OTP).
 4. HSD is working with the State telehealth network to expand coverage.
- 3. Improve the effectiveness of behavioral health services.**
 - a. Take steps to increase adoption of EHRs and participation in the HIE by behavioral health providers.**
 - i. HSD concurs with this recommendation.
 1. HSD is exploring funding for connectivity and data transmission to increase data sharing.
 2. HSD is in discussions with NM's HIE to include BH providers on the HIE.
 - b. Identify and share information about strategies to improve care coordination.**
 - i. HSD concurs with this recommendation.
 1. Effective January 1, 2019, the Medicaid Centennial Care MCOs are able to fully or partially delegate care coordination functions to providers.

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This includes PH and BH providers who know their communities and are able to link members to services.

- c. Expand initiatives to integrate behavioral and primary healthcare.**
 - i. HSD concurs with this recommendation.
 - 1. Since April 1, 2016 CareLink NM allowed 2 pilot Health Homes to coordinate care for members with Serious Mental Illness and/or Severe Emotional Disturbance. In 2018, HSD expanded the number of health homes to 12.
- d. Share information about open-access scheduling and the Treat First Clinical Model and promote expansion.**
 - i. HSD concurs with this recommendation.
 - 1. The Treat First model was piloted in Spring of 2016 with 8 BH agencies in 21 clinics across the state. As of April 2019, 18 BH agencies have been Certified as a Treat First Agency in 69 clinics. HSD continues to collaborate with the NM Behavioral Health Provider Association to train provider in the Treat First model to increase the number of qualified providers. The following is the link to the NM Treat First website:
<https://treatfirst.org/>
 - 2. HSD conducts several learning collaboratives with BH providers regarding open access scheduling. Each BH agency has shared its customized approach to implementation, how they improve access, reduce "No Show" rates and improve client satisfaction. The agencies that use an Open Access model have shared how Treat First has improved client engagement when used in conjunction with Open Access.

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To obtain additional information concerning this report or to obtain copies, contact the Office of Public Affairs at Public.Affairs@oig.hhs.gov.

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APPENDIX Q

This is a pre-print of an article published in the *Journal of Experimental Criminology*. The final authenticated version is available online at <https://doi.org/10.1007/s11292-017-9320-4>.

Effect of Emergency Winter Homeless Shelters on Property Crime

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1 Abstract

Objectives. We evaluate the effect of emergency winter homeless shelters on property crimes in the nearby communities.

Methods. Every winter between 2009 and 2016, the City of Vancouver, Canada opened shelters to protect the homeless from harsh winter conditions. The city opened 19 shelters, but only five to nine of them were open in any one winter. Using the variation in timing and placement of the shelters, we contrast crime rates in the surrounding areas when the shelters are open and closed.

Results. The presence of a shelter appears to cause property crime to increase by 56% within 100m of that shelter, with thefts from vehicles, other thefts, and vandalism driving the increase. However, when a homeless shelter opened, rates of breaking and entering commercial establishments were 34% lower within 100m of that shelter. The observed effects are concentrated close to shelters, within 400 meters, and dissipate beyond 400 meters. Consistent with a causal effect, we find a decreasing effect of shelters with increasing distance from the shelter.

Conclusions. While homeless shelters are a critical social service, in Vancouver they appear to impact property crime in the surrounding community. Shelters may warrant greater security to control property crime, but the data suggest any increase in security need not extend beyond 400 meters, about 2 to 3 blocks, from the shelters.

Keywords: community design, homeless shelters, property crime, Vancouver

2 Introduction

Homeless shelters offer temporary accommodations and social services to those lacking permanent housing. Studies suggest that the benefits of this type of public health intervention on its target population and surrounding community are numerous. Comparative evaluations of homeless populations reveal that both, sheltered youth and women, have better health outcomes than their unsheltered counterparts, with these sheltered populations respectively reporting fewer serious health issues, and better physical and mental health (Klein, et al., 2000; Nyamathi, Leake, & Gelberg, 2000).

Unsurprisingly, occupants of homeless shelters also report greater access to food than their peers on the streets (Regional Steering Committee on Homelessness, 2012). While compared to the general population sheltered homeless people have a greater mortality rate (Barrow, Herman, Cordova, & Struening, 1999; Hwang, 2000), sheltered homeless populations seem to have fewer risk factors for mortality in comparison to unsheltered homeless individuals (Montgomery, Szymkowiak, Marcus, Howard, & Culhane, 2016).

Despite the potential benefits of sheltering the homeless, neighborhood stakeholders such as property owners, business owners, and residents often oppose the establishment of such shelters in their neighborhoods. In addition to concerns about property values and business disruption, the risk that shelters might increase crime rates is a primary driver of their reticence. This study addresses this issue, providing empirical evidence for the effect of emergency homeless shelters on crime. This paper begins with an overview of the existing literature related to homeless shelters and crime. The following sections discuss the data used in the study, the difference-in-differences analysis method employed, the results, and the conclusions drawn based upon the results.

3 Prior Literature

Criminological theories support the possibility of crime increasing after the implementation of homeless shelters. Specifically, routine activity and lifestyle victimization theories both propose mechanisms for how homeless individuals affect crime rates whereas broken windows theory proposes mechanisms for how the built environment of a neighborhood, such as shelters, could influence crime. In accordance with routine activity theory, crime might increase after a shelter opening due to the convergence of motivated offenders, suitable targets, and the absence of capable guardians (Cohen & Felson, 1979). For example, homeless individuals may commit acquisitive crimes due to a lack of basic necessities, be suitable targets due to their vulnerability, and may frequent areas with an absence of security. Shelters may vary in the degree of police and security presence. Lifestyle victimization theory suggests that the opening of homeless shelters could lead to more crime, as homeless individuals tend to experience high-risk lifestyles that make them easier targets for crimes (Anderson, 2014). High rates of victimization (Fitzpatrick, La Gory, & Ritchey, 1993; Kushel, Evans, Perry, Robertson, & Moss, 2003) and offending (Redburn & Buss, 1986; Snow, Baker, & Anderson, 1989) among the homeless support these theories. Although congruent with the notion that shelters could increase crime, broken windows theory proposes that the increase could be due to the social disorder signaled by the existence of a shelter and the presence of homeless people in proximity of shelters. According to the theory, crimes can occur anywhere once communal barriers, the sense of mutual regard and the obligations of civility, are lowered by physical signs of social disorder that seem to signal that “no one cares” (Wilson & Kelling, 1982). Therefore, because of its anonymity, the high population turnover, and the past experience of “no one caring”, homeless shelters could signal the presence of the breakdown of community controls, indicating to potential criminals that the surrounding area is not preoccupied with or has lost control of those locations.

Depending on design and implementation, shelters could reduce crime and the reduction could still be consistent with routine activity, lifestyle victimization, and broken windows theories. Routine activity

theory suggests that crime could decrease after shelters open as this infrastructure might make homeless people less vulnerable and less likely to be motivated to commit crimes out of necessity. This theory also proposes that homeless shelters could be linked to a decline in crime rates when paired with increased security and/or police presence, as adequate police and security planning could offset the risk of any increase in crime or reduce crime altogether. Likewise, lifestyle victimization supports the possibility that the opening of homeless shelters could lead to less crime, as the shelter may directly address the aspects of a high-risk lifestyle that puts the homeless at greatest risk. Broken windows theory also posits that crime could decrease near homeless shelters since these structures could remove signs of social disorder and may signal to potential offenders that stakeholders care about their community. Altogether, criminological theories suggest that homeless shelters could affect crime, but it is unclear in what direction the change would be.

While prior empirical research has shown that certain features of the built environment affect incidences of crime in its surrounding community, it has not extensively covered the effect of homeless shelters on crime. Instead, most studies have greatly focused on the topic of abandoned housing, transit, business improvement districts, and indigent housing (MacDonald, 2015). Although the topic of indigent housing is closely related to that of homeless shelters, indigent housing provides long-term stays to those in need and does not provide the same resources as homeless shelters. Thus, applying conclusions from indigent housing studies to the topic of homeless shelters would be speculative.

Since prior research has neither confirmed nor disproven the influence of homeless shelter on crime in either direction, our analysis will examine the roll out of emergency winter shelters in Vancouver and assess the effect of the activation of these shelters on crime in the surrounding community.

4 Emergency Winter Shelters in Vancouver

In 2008, Vancouver's homeless population numbered 1,570 people, with more than 50% unsheltered (Thomson, 2016). That same year, Dawn Bergman, a homeless Vancouver woman, died when her shopping cart caught fire. Shelters at the time did not allow shopping carts and, fearing her possessions would be stolen, Ms. Bergman refused the efforts of Vancouver police officers encouraging her to stay at a shelter during an unusually cold winter night. As a result of her death, Vancouver created a Winter Response Strategy to better manage the city's emergency winter shelter needs. Every year from 2009 to 2016, as part of its Winter Response Strategy program, the city of Vancouver opened seasonal shelters to protect the homeless from the harsh winter conditions. Consequently, although the homeless population grew 17% between 2008 and 2016, the percentage of the homeless population who were unsheltered declined to 29%.

Since the start of the program, numerous news articles have discussed the openings of emergency winter shelters. In combination with homeless counts conducted on seven occasions between 2008 and 2016, inclusively, these articles provide details on these facilities and their operation. From the end of 2008 to 2016, Vancouver opened winter shelters in 19 different locations. The city commissioned seven operators to manage the shelters with RainCity Housing and Support Society managing more than half of the homeless shelters. The shelters generally operate at or near capacity with the number of beds ranging between 30 and 200. In addition, many also offered services such as access to showers and

connections to housing options. Although nearly all shelters catered towards a clientele of all gender and ages, in practice shelters served a predominantly male and adult population; roughly 70% of shelter stays involved homeless men. At the time of their stay in these shelters, an estimated 83% of homeless shelter occupants had been homeless for over a month. Approximately 38% of Vancouver's sheltered homeless population reported suffering from mental illness and 53% from an addiction.

Shelters were mostly located within or in close proximity to Vancouver's Central Business District, although some were in more commercial areas than others. Table 1 shows the timing and locations of the shelters. Table 1 shows that several shelters were operational by January 2009, the winter following Ms. Bergman's death, though one had been operational for the winters of 2007 and 2008. For logistical and political reasons that are not always clear, the majority of the 19 locations in which shelters were opened only hosted a shelter for three or fewer winters. Most shelters typically started operating in December prior to the year listed in the column headings in Table 1 and closed towards the end of the following April. However, sometimes shelters would not open until late December or January. As a result, we focus our attention on January to March when all emergency shelters were operational.

Table 1: Timing and Placement of Emergency Winter Homeless Shelters in Vancouver

Shelter Address	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
134 East Cordova Street		✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
51B W Cordova Street				✓	✓	✓	✓	✓	✓	✓	✓
320 Hastings Street				✓	✓	✓	✓	✓	✓	✓	✓
201 Central Street				✓	✓	✓	✓	✓	✓	✓	✓
1442 Howe Street				✓		✓	✓				
1435 Granville Street				✓	✓						
1642 West 4th Avenue					✓	✓					
747 Cardero Street					✓	✓					
677 East Broadway Street					✓	✓					
1648 East 1st Avenue					✓	✓					✓
518 Richards Street							✓				
2950 Prince Edward Street							✓				
119 East Cordova Street							✓			✓	✓
1210 Seymour Street								✓			
2610 Victoria Drive								✓			
21 East 5th Avenue								✓	✓		
862 Richards Street								✓	✓		
1647 East Pender Street										✓	
900 Pacific Street											✓

The timing and placement of the shelters was not random. The placement often was a result of availability and suitability of space and an organization capable of managing the shelter. While current crime conditions were not an overt ingredient in the decision to place a shelter, crime could have

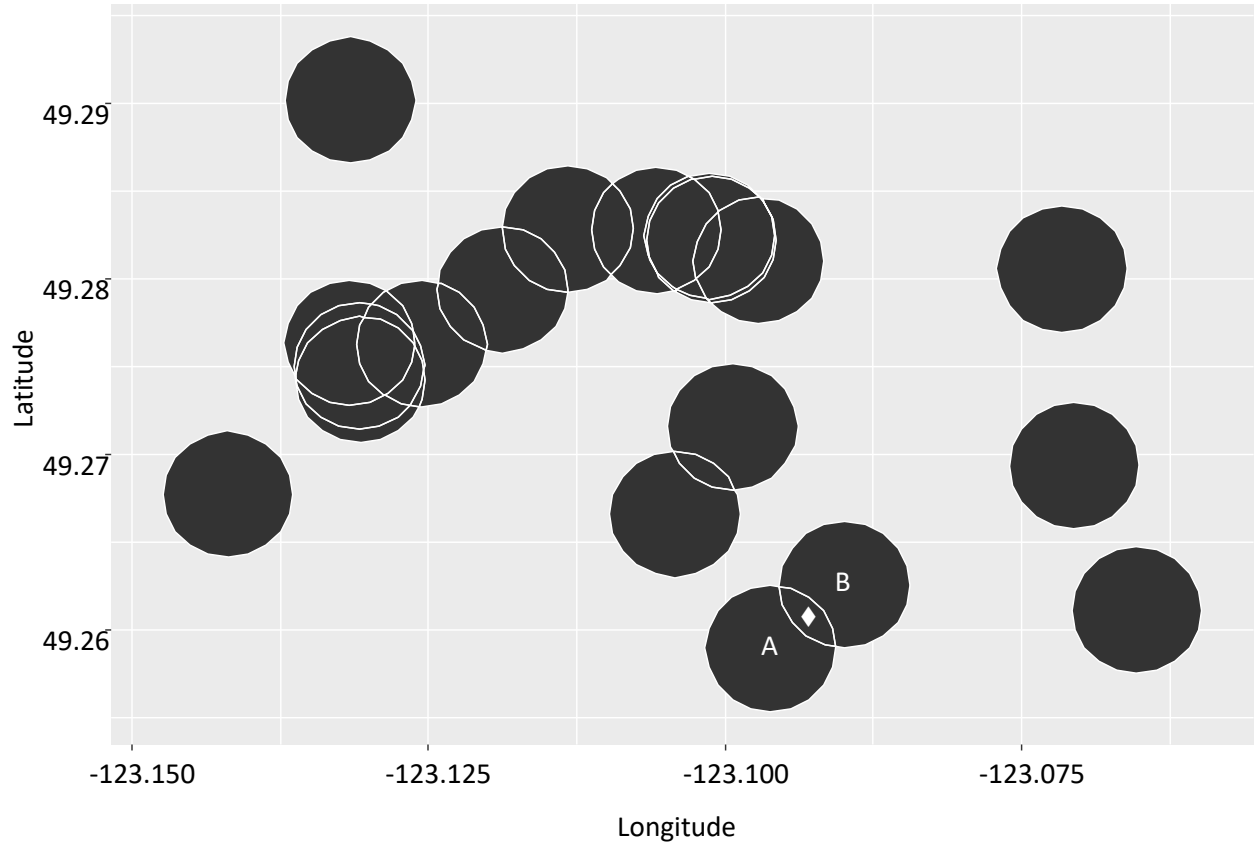
created conditions conducive to the opening of a shelter. For example, an office building may have closed down due to crime, thus providing available space for a shelter to move in. Consequently, in our analyses, we treat the shelter openings and closings as exogenous shocks to the community, but we also check for signals of crime trends in advance of the shelter openings.

5 Data and Methods

Vancouver publishes data on crimes reported to the Vancouver Police Department (VPD) (City of Vancouver, Canada, 2017). For every crime incident, the data indicate the type of offense as well as the year and the month in which it occurred. The reported crimes fall into eight categories: Commercial breaking and entering, residential breaking and entering, homicide, mischief (vandalism or property destruction), attacks against a person, theft from vehicle, theft of vehicle, and non-vehicle related theft. The dataset also included the geographic location of each property crime by indicating its approximate address and geographic coordinates. For privacy concerns, VPD does not make publicly available the location of offenses against a person. Therefore, our analysis focuses on property crimes. We included data from 2006 through 2016. We started with 2006 to provide three years of data before the start of the emergency winter shelter program.

Combining the crime timing and locations with the shelter openings and locations shown in Table 1, we aim to discern whether having an active homeless shelter influences crime in the surrounding community. Because shelters open and close at various times and places, we can use each area as its own control and contrast crime in an area when the shelter is open and when it is closed. We considered an area to have a shelter if it was within a given radius around an active shelter. We used radii of 100m, 200m, 300m, 400m, and 500m and report the results for each of these. We included a crime in the analysis only if it occurred between January and March (when the shelter program was active) and occurred in an area that was within the buffer radius of a location that had a shelter at some time during the study period. Figure 1 shows the geography for a 400m buffer radius. These are the buffers for all 19 shelters that were active between 2009 and 2016, but not all of them were active in every year.

Figure 1: Shelter buffers for a 400m buffer radius. White outlines mark areas where shelter buffers overlap.



Buffers around each shelter can overlap and occurs to a greater extent when considering larger radii. To accommodate the overlap in the analysis we carved the collection of circles into the set of non-overlapping regions. In Figure 1 this produced 41 non-overlapping regions. A crime occurring in the location marked with a diamond in Figure 1 will be labeled as a crime near an open shelter if shelter A is open, shelter B is open, or both shelter A and shelter B are open (and not near a shelter if both shelter A and B are closed).

We organized the data so that for each year, for each of the 41 regions, we had an indicator of whether there was an active shelter within the buffer radius and the number of crimes reported within the region. We used a Poisson regression model to model the crime counts

$$y_{it} \sim \text{Poisson}(\lambda_{it})$$

$$\log(\lambda_{it}) = \beta_1 \text{shelter}_{it} + \alpha_i + \gamma_t \quad (1)$$

where y_{it} is the number of crimes reported in region i at time t , shelter_{it} is a 0/1 indicator of whether there was an active shelter within the buffer radius for region i at time t , α_i is a fixed effect for region i , and γ_t is a fixed effect for year t , with γ_1 fixed at 0 making 2006 the reference year. Since α_i captures the crime rate for region i and γ_t captures the crime trends, $\exp(\beta_1)$ measures how many times larger the crime rate is with an active shelter nearby. We used a sandwich estimator for the standard errors to

account for overdispersion in the crime count outcome, but not to account for spatial or temporal correlation. We used a Poisson model with robust standard errors instead of a negative binomial model because the former is more efficient and robust (Wooldridge, 2010). We relied on a permutation test to address spatial and temporal correlation.

We conducted a permutation test of $\beta_1 = 0$. Confidently estimating the correct null distribution for $\hat{\beta}_1$ using traditional statistical theory is challenging. The null distribution would need to address correlation in space and time while also addressing areas that multiple shelters overlap. Permutation tests sidestep these issues by simulating the reference distribution under the null hypothesis that shelter timing and placement are uncorrelated with crime. Fisher's exact test for testing the independence of two categorical variables is the best known permutation test (Fisher, 1935). In this special case, Fisher showed that, rather than having to simulate or enumerate all the possible permutations of the observed categories yielding a contingency table matching the observed table margins, the hypergeometric distribution could compute tail probabilities over the permutation distribution.

We cannot enumerate all possible permutations of the timing and locations of shelters. Instead to simulate the reference distribution we randomly shuffled the timing and locations of the active shelters, effectively randomly shuffling the checkmarks in Table 1. We fixed the marginal distribution of the number of open shelters in each year to match the observed number of open shelters that year and permuted the shelter openings using Patefield's algorithm (Patefield, 1981). This restricts the permutation test from considering implausible scenarios, such as having all shelters open or all shelters closed in a given year. For each permutation, we relabeled all of the regions (like those shown in Figure 1) as having an active shelter or no shelter. Then we refit the model (1), storing the estimated coefficient $\hat{\beta}_1$ from each model fit. We repeated this 2,000 times and used the collection of 2,000 estimates of $\hat{\beta}_1$ as the null distribution. This process generates the null distribution showing us the distribution of $\hat{\beta}_1$ we should expect when shelter timing and locations are random and unrelated to crime (Figure 2 in the results shows an example).

Permutation tests can be underpowered in designs such as equation (1) when the error structure is complex, so permutation test p-values will be conservative (Wang & DeGruttola, 2016). While most traditional tests provide a test that the average treatment effect is 0, the permutation test described here (as with Fisher's exact test) provides a test of the sharp null hypothesis that there is no effect on crime for any of the shelters (Imbens & Rubin, 2015).

We conducted these analyses for total property and mischief crime as well as separately for each individual crime type.

6 Results

We found strong evidence that the presence of a shelter is associated with an increase in property and mischief crime, with a decreasing effect with increasing distance from the shelter. When shelters open we find that within 100 meters of the shelter total property and mischief crimes increase by 56.3%. The permutation test assures us that an effect of this magnitude is outside of what we should expect from chance variation. Figure 2 shows the permutation test null distribution for what the model in (1) would

estimate to be the percent increase in property crime attributable to a shelter opening if in fact shelters and crime were unrelated. When we randomly shuffle the shelter openings (and break any relationship between crime and shelters) the histogram in Figure 2 shows the estimates that we should expect if shelters have no effect. Estimated effects between a decrease of 30% or an increase of 30% in property crime could reasonably occur by random chance. However, our estimate was an increase of 56.3%, marked in Figure 2 by a vertical line, well outside the normal random variation we would expect by chance. Because we generated the null distribution through simulation, the histogram's spread properly accounts for spatial and temporal correlation and for multiple shelters operating within the same areas.

Figure 2: Null distribution for the effect of shelters on total property crime within 100m

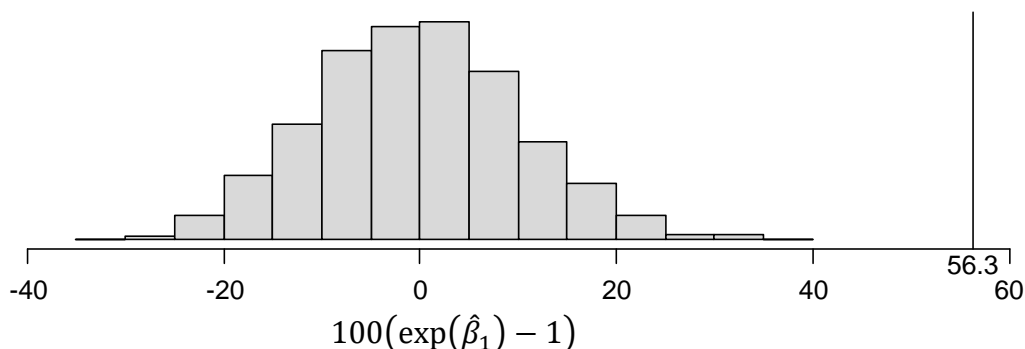


Table 2 shows the percent increase in crime attributable to the opening of an emergency winter homeless shelter for each of the property crime categories. We varied the size of the radius around each homeless shelter in order to assess the range of the shelter's effect. The primary drivers of the increase were thefts from vehicles, other thefts, and mischief to some degree. Other thefts appear to double after the opening of a shelter compared to years when the shelters are not open.

Shelters did not affect all crime categories in the same direction. We find strong evidence that rates of breaking and entering commercial buildings was substantially lower when a homeless shelter was nearby. Within 200 meters of a shelter, the percentage of break-ins of commercial establishments declined by 27%.

Table 2: Percent increase in crime for areas within a given radius of an open homeless shelters

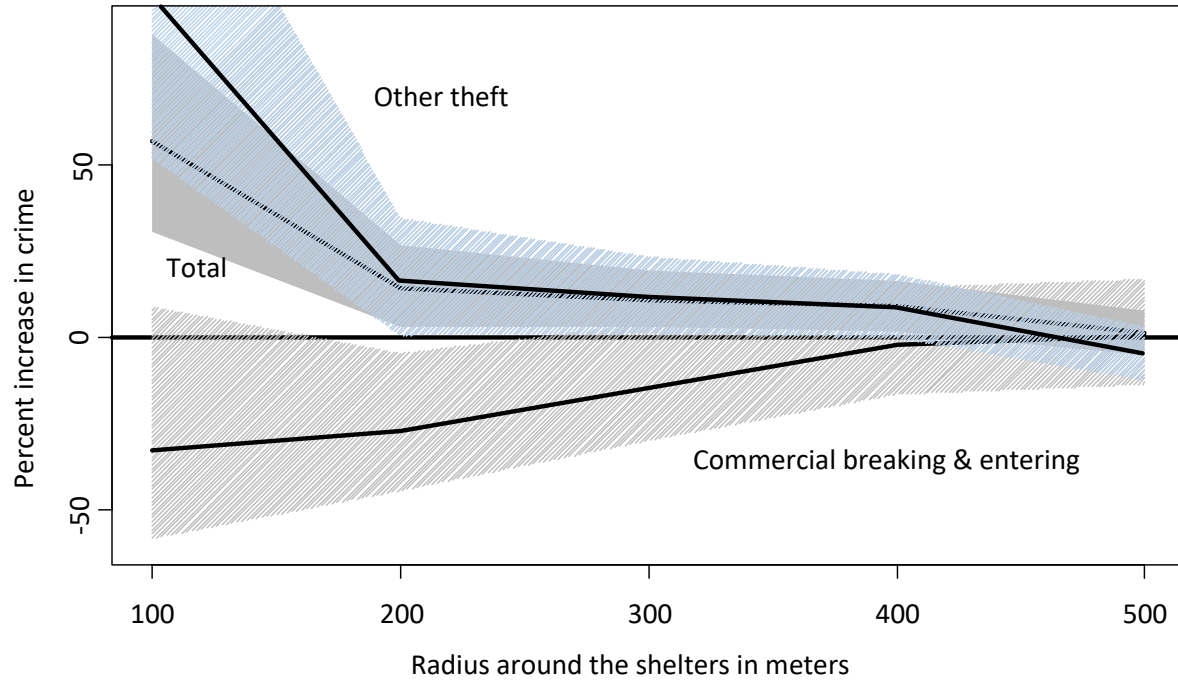
	Average crime count per year within 300m of shelters	Radius around shelters				
		100m	200m	300m	400m	500m
Total Property and Mischief Crime	1780	56.3 (30.2, 87.7) <0.001*	14.0 (2.9, 26.4) 0.005*	10.8 (2.9, 19.3) 0.007*	8.7 (1.5, 16.5) 0.009*	0.9 (-5.3, 7.6) 0.444
Break and Enter Residential	75	82.5 (-13.8, 286.3) 0.009*	9.4 (-22.0, 53.4) 0.295	-0.7 (-21.6, 25.9) 0.430	-1.4 (-18.4, 19.1) 0.444	2.5 (-14.4, 22.9) 0.433
Break and Enter Commercial	137	-33.5 (-58.9, 7.5) 0.035	-27.1 (-44.4, -4.5) 0.001*	-14.9 (-30.1, 3.7) 0.040	-2.5 (-16.7, 14.1) 0.467	0.3 (-13.8, 16.7) 0.397
Theft from Vehicle	538	42.9 (2.2, 99.9) 0.007*	15.8 (-1.5, 36.1) 0.024	20.7 (7.3, 35.8) <0.001*	15.1 (2.0, 29.9) 0.012*	12.0 (0.6, 24.7) 0.053
Theft of Vehicle	57	-39.9 (-72.2, 29.8) 0.059	-19.8 (-47.7, 23.1) 0.088	-2.4 (-26.6, 29.9) 0.376	-11.0 (-29.7, 12.6) 0.099	-9.5 (-26.2, 11.0) 0.157
Other Theft	709	98.1 (51.0, 159.7) <0.001*	16.4 (0.7, 34.6) 0.023	11.5 (1.0, 23.1) 0.015*	8.5 (-0.3, 18.0) 0.040	-5.1 (-12.5, 2.9) 0.104
Mischief	264	26.3 (-9.7, 76.7) 0.033	28.3 (8.2, 52.1) <0.001*	8.5 (-4.8, 23.7) 0.097	7.8 (-4.0, 21.0) 0.060	2.3 (-7.9, 13.6) 0.428

Note: For each crime type and for each radius we show the estimated percent change in crime ($100(\exp(\hat{\beta}_1) - 1)$), a 95% confidence interval accounting for overdispersion (but are not valid since they do not account for spatial/temporal correlation or shelter overlap), and the permutation test p-value (without any adjustment for multiple comparisons). The p-values marked with * remain significant after a Benjamini-Hochberg adjustment for multiple comparisons. The second column shows the average number of crimes per year within 300 meters of the shelter areas to give the reader an idea of the additional number of crimes that occur when shelters open.

When arguing for cause of an observed effect, the gradient criterion, one of the Hill criteria for providing evidence of a causal relationship, suggests that higher doses of a treatment should result in a larger corresponding response (Hill, 1965). In the case of shelters, we should see a stronger effect of the shelters in areas closest to them and a smaller effect as we expand the radius to include areas farther away from the shelters. Indeed, Table 2 demonstrates a decreasing effect with increasing radius. Figure

3 shows graphically the Table 2 results for other theft, commercial breaking and entering, and in the background, total property and mischief crime. All of these crime categories show that near the shelter the effect is strong, but converges toward a null effect once we consider a radius of 500 meters, further supporting the conclusion that shelters are causing the changes in crime.

Figure 3: Percent change in crime as a function of the shelter buffer radius



Note: The figure shows the point estimate and the pointwise 95% confidence intervals

The observed effects potentially could be attributable to city officials placing shelters in areas that are already experiencing crime changes. If this is the case, then the opening of a shelter should be correlated with the crime in the *prior* year. As a falsification test we dropped the data from 2006 and replaced the model (1) with a model predicting crime the year prior as shown in (2).

$$\log(\lambda_{i,t-1}) = \beta_0 + \beta_1 \text{shelter}_{it} + \alpha_i + \gamma_{t-1} \quad (2)$$

For almost all crime types and at all radii around shelters we find shelters not to be predictive of crime levels in the prior year. The one exception might be mischief crimes at 100 meters (p-value = 0.01, but Benjamini-Hochberg adjusted p-value = 0.19). That is, increases in vandalism and property damage may precede the placement of shelters. Though not statistically significant after accounting for multiple comparisons, there is a decreasing relationship with the prior year's mischief crimes with an increasing radius, indicating that disorder already may be developing in places where shelters open. For other crime types we see no trend by distance from shelter in the relationship between shelter openings and the prior year's crime, with point estimates equally likely to be positive or negative and generally large p-values.

7 Discussion

This study aimed to examine the effect of homeless shelters on crime in Vancouver. The opening of a shelter appears to be linked with a significant increase in property crime in the shelter's immediate vicinity. An exception to this finding was that incidences of commercial breaking and entering decreased. The effect of the shelter decreases with distance from the shelter offering further support that the observed effect is causal.

In an attempt to further explore the commercial environment and the relationship with commercial breaking and entering, we gathered data on the number of business licenses within 200m of each shelter location. All but three shelters were in heavily commercial areas with 50 or more businesses licensed within 200m of the shelter. While we are interested in uncovering more about the impact of siting shelters in different kinds of neighborhoods and how this moderates the treatment effect, the lack of variation in Vancouver makes this infeasible.

Routine activity theory may offer an explanation for the observed decrease in the occurrences of commercial breaking and entering. Local businesses may increase security, such as using roll-up sheet doors, cameras, and security personnel. It is also possible that by providing shelter to homeless people, these individuals may be less motivated to seek shelter in empty businesses during the night. Indeed, the CEO of the Downtown Vancouver Business Improvement Association noted that many fewer homeless were sleeping in the alcoves of retail storefronts and the downtown had a sharp decline in trespassing after the shelters opened (Gauthier, 2017).

The increase in property crimes could be explained by one or a combination of three mechanisms. First, these results may provide support for the broken windows theory. The presence of homeless shelters and the potential increase of the homeless population could increase social disorder, which could consequently increase crime committed by the homeless and non-homeless. Second, it is possible that homeless shelters encourage the convergence of suitable targets, motivated offenders, and a lack of guardians, therefore resulting in crime. Third, there is a possibility that homeless shelters generate crime by attracting a homeless population whose lifestyle choices put them at risk of being victimized. However, because we do not have data on the circumstances leading to each crime, we are not able to identify which of these three mechanisms contributed to these changes in crime.

It is possible that these results do not reflect an increase in new crime. Indeed, crime that would have been committed elsewhere in the city might have been displaced to the area surrounding homeless shelters. Moreover, crime might have been affected by increased detection associated with changes in police presence and in the behavior of the people present in the area near shelters.

Regardless of the reason for the increase in crime rates, these findings indicate that greater security or policing intervention may be necessary to minimize the potential negative effects shelters have on the surrounding community and to address crime that was committed, but had remained undetected until the implementation of homeless shelters. Police interventions such as place-based interventions focusing on crime and disorders associated with the homeless could potentially reduce crime, as it appears to have done in Los Angeles (Berk & MacDonald, 2010). Since our research demonstrates a rapidly decreasing effect with increasing radius away from the shelters, security measures and police

interventions need not be extensive and may be confined to a small area within 400 meters (2 to 3 blocks in Vancouver) of the shelters.

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Exploring the Experiences of Violence Among Individuals Who Are Homeless Using a Consumer-Led Approach

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Homelessness increases vulnerability to violence victimization; however, the precise factors associated with victimization and injury are not clearly understood. Thus, this study explores the prevalence of and characteristics associated with violence victimization among homeless individuals by surveying approximately 500 individuals experiencing homelessness in 5 cities across the United States. Our findings reveal that nearly one-half of our sample reported experiencing violence and that prolonged duration of homelessness (greater than 2 years) and being older increased the risk of experiencing a violent attack. In addition, increased length of homelessness and female gender predicted experiencing rape. Women were also significantly more likely to know one's perpetrator and experience continued suffering after a violent attack. We conclude that certain subpopulations within the homeless population are at an increased risk for victimization and, subsequently,

require added protective services; implications for health care and policy recommendations are also discussed.

Keywords: homeless; homelessness; violence; victimization; rape

Individuals who are homeless have an increased risk of experiencing myriad social problems including victimization and violence (Centers for Disease Control and Prevention, 2010; D'Ercole & Struening, 1990; Fazel, Khosl, Doll, & Geddes, 2008; Fitzpatrick, LaGory, & Ritchey, 1999; Kerker et al., 2011; Kushel, Evans, Perry, Robertson, & Moss, 2003; Lee & Schreck, 2005; Raoult, Foucault, & Brouqui, 2001; Simons, Whitbeck, & Bales, 1989; Tsai & Rosenheck, 2012; Welsh et al., 2012; Wright, 1990). The prevalence of violence victimization in the homeless population has been estimated to range from 14% to 21% and approximately one-third report having witnessed a physical attack on another person who was homeless (Fitzpatrick, LaGory, & Ritchey, 1999; Lee & Schreck, 2005). This rate of violence is highly disparate when compared to the general population in which only 2% report experiencing a violent crime (Truman, 2011). In addition, research has demonstrated that some subpopulations of homeless individuals are at even increased risk of experiencing violence. For instance, those who experience longer bouts of homelessness have increased risk of victimization (Kipke, Montgomery, Simon, & Palmer, 1997; Lee & Schreck, 2005; Simons & Whitbeck, 1991). Those who have been previously turned away from a shelter or reported committing a crime since becoming homeless are also significantly more likely to experience victimization (Garland, Richards, & Clooney, 2010).

Research has also shown that experiencing violence can have serious prolonged effects (Lindhorst & Beadnell, 2011; Sousa, Herrenkohl, & Moylan, 2011). Physical assault on individuals experiencing homelessness has the potential to cause physical and psychological injuries, extend homelessness, and may require considerable medical treatment that most homeless individuals are unable to afford. The aftereffects of violence also include lower levels of perceived safety and an exacerbation of preexisting mental health issues (Kilpatrick & Acierno, 2003; Perron, Alexander-Eitzman, Gillespie, & Pollio, 2008; Sorenson & Golding, 1990).

Given these increased risks of experiencing violence and the understanding that violence can have long-term prolonged consequences, this study specifically aims to (a) describe the experiences of violence among individuals who are homeless, (b) create a sociodemographic profile of individuals who have experienced violence, (c) identify the factors that predict increased risk of experiencing violence and suffering consequences after an attack, and (d) to craft health practice and policy recommendations that illuminate solutions to addressing and stemming the increased rate of violence experienced and the related negative effects both at the macro and micro individual level.

In contrast to previous research, this study takes a consumer-led approach in which currently or formerly homeless individuals were integrally involved in each stage of research (design, administration of the survey, and data analysis and interpretation). This sets our study apart in that the critical perspectives of individuals who have experienced homelessness helped to illuminate not only the issues that are of importance but what the results of this study mean and how they can be incorporated into applied practice and affect relevant policy change.

METHODS

The data used in this study draw on a survey regarding experiences of violence by individuals who were homeless in five cities across the United States (Detroit, Fort Lauderdale, Nashville, Houston, and Worcester). This study was originally conceptualized, designed, and administered by the National Consumer Advisory Board (NCAB) of the National Health Care for the Homeless Council. NCAB comprises individuals who are currently and formerly homeless, many of whom participate in the governance of their local Healthcare for the Homeless (HCH) projects. HCH projects are grantees or subcontractors of the federally funded community health center program. Some are stand-alone sites, whereas others are housed within community health centers, public health departments, or hospitals. Many HCH projects have multiple sites in one community and mobile units or outreach workers travelling to different parts of a community to provide health care services. For example, the HCH project in Nashville is part of a network of primary care clinics with community, school, and mobile clinics. This project provides medical, dental, and behavioral health services to men, women, and children who are homeless through their Downtown Clinic (a brick and mortar clinic located in an impoverished neighborhood), a mobile medical van, evening clinics at a local shelter, and other community health center facilities. NCAB exists to voice the needs of the people who are homeless on a national level, assist new projects in developing local consumer advisory boards, and provide support to individuals who are currently homeless (National Health Care for the Homeless Council, 2009).

Data Collection

The interviewers associated with NCAB recruited individuals at their local HCH projects and sites where health care services relevant to homeless populations are provided. Eligibility to participate in the study was met if individuals were currently homeless, older than the age of 18 years, and self-reported that they were an enrolled patient of the specified HCH project. If an individual met all three eligibility criteria, the interviewer read the informed consent aloud, answered any questions or concerns about the study, and asked for verbal consent from the potential participant. Research interviewers informed individuals that participation in the study was voluntary and that they could discontinue participation at any time.

The institutional review board of the Metro Public Health Department of Nashville and Davidson County approved this study and allowed use of a verbal consent because of the sensitive nature of the survey content and the vulnerable population being surveyed. If an individual did not understand the informed consent for any reason, then interviewers did not continue with the survey and documented the event. If an individual did not wish to participate, interviewers recorded the refusal on a tracking form, including specific reasons why. If a participant knew the interviewer or felt uncomfortable with a specific interviewer, given the sensitivity of the survey questions, attempts were made to find a different individual to administer the survey. All participants were offered a copy of the consent form for future reference. Most surveys were administered in English. However, when non-English, Spanish-speaking individuals were eligible to participate, attempts were made to find a Spanish-speaking interviewer to administer the survey.

Because of the possibility that participants could become emotionally distressed and retraumatized recalling violent experiences, research interviewers provided a list of local

resources after participants completed their surveys. Each site developed a list of resources tailored to the specific services offered by the local community and HCH project (e.g., domestic violence shelters, legal assistance, and mental health services). Interviewers received research training from the National Health Care for the Homeless Council, which included topics such as research with human subjects, informed consent, data collection, and confidentiality. One of the NCAB interviewers was principal investigator of the study and received Collaborative Institutional Training Initiative (CITI) certification as well. Personally identifiable information was not collected through the survey and all responses were anonymous.

The total number of participants in the final sample was 516. This number represents roughly 100 participants from each city. Fifty-eight percent of participants required the assistance of the survey administrator to complete the survey and 89% completed the survey in English.

Analytic Plan

Descriptive statistics were computed on all study variables. Three dependent variables were used: experience of violence, experience of rape, and suffering after an attack. Bivariate analysis was conducted to evaluate the associations between the three dependent variables and myriad sociodemographic characteristics. Because the three dependent variables were dichotomous indicators, four multivariate logistic regressions were conducted to evaluate whether certain characteristics increased the odds of violence, knowing one's perpetrator, and suffering after an attack. A series of logistic regression analyses were then performed using groups of conceptually related independent variables (e.g., regressing experience of violence on gender and race). These exploratory models were used to guide selection of variables for inclusion into the final regression models. The following variables were selected as independent variables: race, sex, length of homelessness, place of attack, and knowing the perpetrator. Evidence of significant predictors (p values) was derived using chi-square. All data analysis was conducted using SPSS 19.0.

RESULTS

Of the total sample, 64% of participants were male, 35% female, and 1% transgender. Nearly one-half (49%) of the participants self-reported as African American, 36% as White, 12% as Hispanic/Latin American, and 3% reported they fell into the category of Other. The median age of participants was 43 years old, with a range of 18–87 years. The median length of homelessness reported by participants was 1.75 years, with a range of 1 day to 47 years.

Witnessing Violence

Participants were asked if they had ever witnessed a violent attack on another homeless individual. For the purpose of this survey, a *violent attack* was defined as an event in which one individual uses force to intentionally harm another individual physically, sexually, or psychologically. Sixty-two percent of respondents reported witnessing an attack. Of those, 32% witnessed an attack in the 30 days prior to the survey and 81% witnessed an attack within the past year. More than half (56%), who responded that they had witnessed a violent attack, reported witnessing an attack on another homeless individual 1–3 times.

TABLE 1. Time Elapsed Since Most Recent Attack and Number of Times Victimized

	Frequency	Percentage (Cumulative) ^a
Most recent attack		
Within past 30 days	71	30%
Within past 6 months	65	27% (56%)
Within past year	39	16% (73%)
More than 1 year ago	60	25% (98%)
Number of times victimized		
1–3 times	179	72%
4–6 times	26	11%
7–9 times	7	3%
10 or more times	14	6%

^aPercentages do not add up to 100 because response categories were created based on open-ended responses. Responses that could not be categorized are not presented.

Personal Experience of Violent Attack

Participants were also asked if they had ever been the *victim* of a violent attack while homeless. Forty-nine percent of respondents reported being the victim of an attack. When victims were asked about the most recent time they were attacked, 30% reported being attacked within 30 days of the survey and 73% within the past year (this percentage is cumulative and includes those who reported being attacked with 30 days of the survey). Seventy-two percent of victims reported being attacked 1–3 times while homeless (see Table 1).

Males and females experienced violence at virtually the same rate (49% and 48%, respectively), whereas African American participants experienced violence more (51%) than White participants (46%). However, White participants reported experiencing more violence than Hispanic/Latino participants (46% and 44%, respectively). When experience of violence was stratified by age and length of homelessness, the average age for victims was 4 years higher than that for nonvictims (44 vs. 40 years old, respectively) and the average length of homelessness for victims was 1.6 times greater than for nonvictims (4.5 vs. 2.9 years, respectively). In addition, there was a statistically significant difference in median age and length of homelessness between those participants who reported experiencing violence while homeless and those who did not (see Table 2).

Characteristics of Violent Attacks

More than half of victims (58%) reported that they were attacked in a street or alley, whereas 16% reported being attacked in a public park and 13% reported being attacked in a homeless shelter. Victims were also asked to provide the types of injuries they incurred as a result of their most recent attack from a predetermined list of injuries. Although

TABLE 2. Demographic Characteristics of Those Who Have and Have Not Experienced Violence

	Experienced Violence (n = 253)	Never Experienced Violence (n = 287)	χ^2
Race			3.70
African American	127 (51%)	124 (49%)	
Latino	27 (44%)	34 (56%)	
White	85 (46%)	101 (54%)	
Gender			2.67
Male	161 (49%)	167 (51%)	
Female	87 (48%)	94 (52%)	
Age (years)	Median age: 43		11.09**
≥ 43 Years	144 (56%)	115 (44%)	
<43 Years	103 (41%)	149 (59%)	
Number of years homeless	Median length of homelessness: 2 years		11.63**
≥ 2 Years	139 (57%)	107 (43%)	
<2 Years	103 (41%)	147 (59%)	

** $p < .01$.

16% of victims were not injured, more than half of respondents (56%) reported bruising. Approximately 30% were mentally traumatized, 15% were raped or sexually assaulted, and 13% incurred a head or brain injury. Victims also reported broken bones, broken teeth, being stabbed, and being shot (see Table 3). In addition, victims were asked if they were robbed during their most recent attack and, if so, what specific items were stolen. Forty-nine percent of victims reported that they were, in fact, robbed during the attack. Commonly reported items stolen were money (75%), personal identification documents (28%), medication (21%), and clothing (21%).

Victims were also asked to list reasons why they thought they were attacked. Again, the responses came from a predetermined list, which included space for participants to report additional reasons. The top four reasons victims thought they were attacked included the following: robbery (32%), attacker was under the influence of alcohol or drugs (28%), hate crime (15%), attacker had a mental illness (12%), and competition for space (5%). The following explanations were additional qualitative responses provided by victims and each reported by less than 5% of the sample: sexual assault, because of an argument, racially motivated, and to prevent victim from helping another person. Almost a quarter of the victims (24%) were not sure why they were attacked.

In addition, 31% of victims reported that they knew their attackers. Of those, a substantial minority (40%) identified the attacker as a friend; a small minority reported their attacker was an intimate partner; and a very small minority reported that their attacker was a family member (see Table 4). Victims were also asked about the housing status of their

TABLE 3. Locations Where Violent Attacks Occurred and Injuries Incurred as a Result of Attacks

	Frequency	Percentage ^a
Location of attacks		
Street or alley	141	58%
Public park	38	16%
Shelter	32	13%
Abandoned building	18	7%
House ^b	10	4%
Jail	7	3%
Parking lot ^b	6	2%
Bus station ^b	4	2%
Clinic	3	1%
Other	13	5%
Injuries from attacks		
Bruises	137	56%
Mental trauma	76	31%
Raped/sexually assaulted	36	15%
Concussion/head injury	32	13%
Broken bones	32	13%
Tooth/teeth broken	22	9%
Stabbed	20	8%
Scraped or cut ^b	8	3%
Shot ^b	2	1%
Other	12	5%
Not injured	38	16%

^aPercentages do not add up to 100 because participants could choose more than one response.

^bThese responses arose from themes found in the qualitative data.

TABLE 4. Relationships of Attackers to Victims—Out of Those Who Reported Knowing Their Attackers (*n* = 72)

	Frequency	Percentage
Friend	29	40%
Intimate partner	11	15%
Family member	4	6%
Other	4	6%
No formal relationship ^a	24	33%

^aThis response arose from a theme found in the qualitative data.

TABLE 5. Where Victims Sought Assistance Sought After Attacks ($n = 105$)

	Frequency	Percentage ^a
Emergency room	63	60%
Police	35	33%
Community clinic	11	11%
Friend/family member	10	10%
Health care for the homeless clinic	9	9%
Shelter ^b	3	3%
Other	12	11%

^aPercentages do not add up to 100 because participants could choose more than one response.

^bThis response arose from themes found in the qualitative data.

attackers. Thirty-two percent reported that the attacker was also homeless and 30% reported the attacker was housed, a quarter of whom were reported to be police officers.

Assistance After the Attack

Forty-six percent of victims sought help after their most recently reported attack. More than half of victims (60%) who sought assistance used the emergency room, more than 30% went to the police, and 30% went to a friend/family member or clinic (see Table 5). Eighty-two percent of those individuals who reported seeking assistance stated that they were successful in receiving assistance.

Sixty-eight percent of those who sought and received help were unable to pay the associated medical bills. We asked victims if they were currently (at the time of the survey) suffering consequences from a violent attack. Half of the victims (49%) reported that they were still suffering. Choosing from a predetermined list, 73% of those reported suffering from psychological trauma, 32% from resultant physical disability, and 28% from burdensome financial debt.

Finally, we asked victims if they were familiar with the Crime Victims Fund, which is a federal program to assist victims of violent crime (and sometimes family members of victims) with resulting medical bills, mental health services, and lost wages. However, only 14% of victims were aware of the Crime Victims Fund—9% of which had actually attempted to receive funds. None were successful.

Multivariate Modeling

Four multivariate logistic regressions were conducted on the study sample to estimate the risk factors for experiencing violence, experiencing rape, knowing the perpetrator, and suffering after an attack. Table 6 shows the results of these multivariate logistic regressions. The results demonstrate that being homeless for a long time (more than 2 years) and older age led to an increased risk of experiencing violence. Moreover, increased length of homelessness and female gender predicted experiencing rape specifically. Finally, only female gender was a significant predictor of knowing one's perpetrator and suffering consequences after an attack.

TABLE 6. Multivariate Logistic Regression Models for Predicting Violence, Experiencing Rape, Knowing the Perpetrator, and Experiencing Suffering After an Attack

Characteristic	Violent Victimization		Experiencing Rape		Knowing the Perpetrator		Suffering After Attack	
	Regression Coefficient	SE	Regression Coefficient	SE	Regression Coefficient	SE	Regression Coefficient	SE
African American (<i>n</i> = 127)	.994	0.188	.549	0.488	0.870	0.306	1.424	0.287
Female (<i>n</i> = 87)	1.131	0.197	89.770***	0.814	2.122*	0.313	2.138*	0.309
≥43 years (<i>n</i> = 144)	1.650**	0.194	1.374	0.503	0.841	0.275	1.680	0.317
Homeless ≥2 years (<i>n</i> = 139)	1.676**	0.189	3.308*	0.517	1.740	0.325	1.087	0.303
Knowing the attacker (<i>n</i> = 75)			0.166**	0.586			−1.796	0.586
Sheltered during attack (<i>n</i> = 55)			0.618	0.596	0.370	0.108	1.521	0.354

p* < .05. *p* < .01. ****p* < .001.

DISCUSSION

The results from this study provide a national picture of the prevalence of violence among individuals who are homeless and the particular characteristics that predict increased risk of experiencing a violent attack, experiencing rape, knowing one's attacker, and suffering consequences after an attack. Half of the participants in this study reported being the victim of a violent attack while homeless. This corroborates findings from previous research demonstrating that homeless individuals may be at increased risk of experiencing violence (Hwang, Orav, O'Connell, Lebow, & Brennan, 1997; National Coalition for the Homeless, 2012). Our results also demonstrate that specific populations within the homeless community are at increased risk to experience violence. Those who have been homeless for a longer time and are older in age were most likely to experience violence. This highlights the importance of targeted outreach and violence prevention efforts for specific populations such as those experiencing chronic homelessness. Thus, our findings indicate that homeless health care providers may need to increase screening for experiences of violence during primary care visits. Screening tools have been developed that can be used during intake assessments by providers or social service agencies that ask about various experiences, health, or social conditions that may be plaguing individuals or families (Helfrich & Beer, 2007; Martinez, Hosek, & Carleton, 2009). The development of a screener that

specifically asks about the incidence of violence and associated characteristics would aid health care practitioners in identifying those who are at increased risk.

Relatedly, research has found that social support is associated with a lower likelihood of victimization (Hwang et al., 2009; McCarthy, Hagan, & Martin, 2002; Wenzel, Tucker, Elliott, Marshall, & Williamson, 2004). This may indicate a need to provide victimization prevention programs and interventions that focus on developing and harnessing social or familial support to aid in a reduction in the rate of violence among individuals who are experiencing homelessness. Social support based interventions have been successful in increasing physical activity, improving diabetes self-management, and bettering health outcomes for domestic violence shelter residents (Constantino, Kim, & Crane, 2005; Kahn et al., 2002; McEwen, Pasvogel, Gallegos, & Barrera, 2010). These interventions can take the form of support groups, risk-factor screening counseling, and group education sessions at community events (Kahn et al., 2002). Based on our results, these types of preventative programs should be aimed at those who have been homeless for a considerable amount of time, those who are older, and women who are at increased risk of experiencing rape, knowing one's attacker, and to suffer consequences after an attack.

Individuals who are chronically homeless are less likely to engage in primary care and mental health services; therefore, clinic directors should ensure dedicated staff time to conduct outreach to identify those individuals who are chronically homeless (Caton, Wilkins, & Anderson, 2007). These outreach workers should be aware of the high likelihood for victimization and use trauma-informed approaches to assess and refer individuals to treatment. Trauma-informed care is a valuable health care delivery technique that can be used to create a safe environment and avoid retraumatization for patients who have been victims to adverse events. This might include first screening for trauma among those who are known to be at increased risk and then providing educational materials, a sense of safety, and support to aid in mobilization and realization of their own strength and resources. In addition, providers can provide guidance to aid in development of positive coping mechanisms for those who report violence victimization. A large portion of the chronically homeless population has mental health issues and previous research has found that persons with severe mental illnesses are more likely to be victimized than the general population (Caton et al., 2007, Teplin, McClelland, Abram, & Weiner, 2005). Although we did not ask about mental health diagnoses, this could explain the higher rate of victimization in our study among those who were chronically homeless.

Our findings also revealed that homeless women should also be targeted by preventive and treatment interventions. The results of this study demonstrate that women are more likely to experience rape. Relatedly, to our knowledge, this is the first study to examine whether rape within homeless populations is related to knowing your attacker. Seventy-nine percent of women who reported a rape in the United States in 2009 indicated that they knew their attacker and only 21% of all rapes and sexual assaults were committed by strangers (Rand & Truman, 2010). This is strikingly different from our findings that 21% of the female victims reported knowing their attacker and 78% of all rapes were committed by strangers, indicating that rape committed by strangers is much more prevalent in homeless populations (Catalano, Smith, Snyder, & Rand, 2009). This difference could be explained by the fact that women who are homeless are unsheltered and lacking a private residence to protect them from perpetrators who otherwise would not have access to them. Thus, management personnel of shelters and clinical providers serving females and families should look for signs that their residents have been victims of sexual assault and be prepared to

connect victims to medical care and mental health services. Mental health consequences of violence victimization include posttraumatic stress disorder (PTSD), depression, anxiety, substance abuse, and panic disorders, with females at a much higher risk for PTSD and depression than males (Kilpatrick & Acierno, 2003). In addition, health care providers should increase access to STD and pregnancy screening for victims of sexual assault and rape. Cross-sector collaboration between public health agencies, homeless service providers, and women and family service entities is needed to address and stem the prevalence of rape against individuals experiencing homelessness. Interdisciplinary partnerships of this kind have been demonstrated to promote health on various levels (individual *and* community) long term (Gillies, 1998). Accordingly, agencies that serve homeless women should provide wraparound, comprehensive services that can help prevent and, if necessary, identify and treat sexual assault and the long-term suffering associated (e.g., resultant mental health issues) with victimization.

Finally, providers and clinics frequented by individuals who are homeless may need to increase support for victims of violence who are seeking medical and wage reimbursement from state victim compensation programs (Office of Justice Programs, Office for Victims of Crime, 2004). This study found that almost 70% of victims who received medical help were unable to pay their medical bills and only 14% were aware of the victim compensation fund and none were successful in receiving funds from it. This indicates a need for education-related outreach that brings awareness to the existence of programs that are available to assist individuals who have experienced violence. The Office for Victims of Crime provides educational materials for providers regarding the Crime Victims Fund and may be a possible resource for providers to increase awareness of violence and victim-related programs and outreach. In addition, many police departments have crime victim advocates whose sole mission is to provide support to victims of crime. Partnerships between homeless service providers may aid in increased awareness of victim financial assistance.

Macro Level Implications

It has long been recognized that providing health insurance and access to health services to individuals in need would aid in the treatment of physical and psychological injuries (Andrulis, 1998; Bernstein, Chollet, & Peterson, 2010). Ongoing treatment, appropriate referrals, and appropriate use of medical services without fear of large medical bills would improve access to health care and, subsequently, the health outcomes for victims of violence. The 2014 Medicaid expansion provided for in the Affordable Care Act will result in health insurance eligibility for persons experiencing homelessness, but adequate outreach, education, and benefit design will be required to address the extensive health care needs of victims of violence (Kaiser Commission on Medicaid and the Underinsured, 2011). Treatment for psychological disorders associated with violence, physical therapy, recuperative care, and other services are needed to eliminate extended suffering of those who have experienced violence and should be more widely available for vulnerable and at-risk populations to access.

In the last several decades, laws have been passed that criminalize homelessness. This trend may have led to decreased use of public spaces, forced homeless individuals to the edges of society where they may be more likely to be victimized, and created a more antagonistic relationship between homeless populations and law enforcement. Moreover, previous research reports that individuals who are homeless may be less likely to report

acts of violence because of strained law enforcement relationships or fear of imprisonment (Murray, 1996; Zakrison, Hamel, & Hwang, 2004). Our findings corroborate these findings in that only 33% of victims who sought help after their attacks went to the police, and 30% of those who were attacked by a nonhomeless individual reported being attacked by a police officer. This implies that efforts are needed to strengthen relationships between local law enforcement officers and individuals who are homeless. This could take the shape of organizing around initiatives that attempt to decriminalize homelessness and sensitize law enforcement officers. For instance, Maine and California have implemented police training protocols specifically geared toward ameliorating the strained relationship between law enforcement officials and homeless populations, and Los Angeles has implemented the tracking and reporting of crimes that are specifically aimed toward individuals who are homeless (National Coalition for the Homeless, 2012). More organizing of this kind is needed.

Limitations of the Current Study and Future Research Needed

There are various limitations to this study. All data was self-reported by participants, meaning injuries and suffering could not be verified by clinical diagnosis. Also, we limited eligibility to individuals who were enrolled patients within local Health Care for the Homeless projects. Therefore, we did not get an accurate rate of victimization within the homeless population for each community sampled. Surveying outside of this patient population would provide a better understanding of the experiences of violence of individuals who are homeless and not currently engaged in care. In addition, the survey did not include a follow-up question on why those who reported being victimized did not seek treatment if they reported not doing so. This information could have helped us to better understand the barriers that individuals who are homeless face in trying to seek care when victimized. The biggest strength of this study was that its design and data collection were led by individuals who have experienced homelessness. The NCAB members initiated this project, developed the survey questions, recruited participants, and administered surveys. NCAB strives to provide a voice to those who are marginalized because of their housing status. Leading a study to explore the experiences of violence among those who are homeless has enabled NCAB to teach others about the vulnerability of this population and potentially make an impact on the health care and policy practices that affect it.

Future research is needed to better understand the root causes of violence against individuals who are homeless and to investigate the circumstances and motivators of perpetrators. In addition, the implementation of programs that are targeted toward those who are at increased risk is needed and program efficacy evaluation must be carried out to understand what specific prevention strategies are most effective.

CONCLUSION

In combination, the findings from this study identify that certain individuals are at an increased risk of experiencing violence, knowing one's attacker, and experiencing consequences after an attack. Results from this study should be used to develop health practice and policy recommendations to reduce the incidence of violence against people who are homeless and to promote just and humane recourse for victims of violence. The potential

programmatic, policy, and intervention implications for this study include the need for the following: development of screening tools to aid in the identification of those most at risk of experiencing violence; increased awareness of crime victim funding; creation and maintenance of cross-sector relationships to aid in the prevention of violence; and, finally, amelioration of the relationship between law enforcement agencies and homeless populations.

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APPENDIX S

Good Neighbor Agreement terms may include but will not be limited to the following:

1. **Designated 24-hr. dispatch line**
2. **Added resources and personnel (from APD, ACS, and FCS Street Outreach) will be designated to the Public Safety District encompassing Siesta Hills, Elder Homestead, South San Pedro, and Parkland Hills neighborhoods to patrol, conduct outreach, and do daily cleanup of the neighborhoods. The Public Safety District will be prioritized in terms of FCS Street Outreach.**
3. **There will be a comprehensive 24-hr. shuttle service in place upon the opening and throughout the operation of the Gateway Center** - this is not just for bringing people to Gateway and to the westside shelter, but to take them off-site to other services OR if they leave/choose not to accept services at Gateway - must be put on shuttle. Must run frequently and be easy to access.
4. **People must be referred to get into Gateway - it is not just a walk-up/first-come first-serve operation** (esp. in the case it could fill up, people can't get in, where do they go?). This center is not for people not checked into a program. There must be a designated intake officer or team of intake officers onsite. This includes referral by other homeless support providers and law enforcement.
5. **Residents will engage in sustained programming - this is not just a bed to sleep in, clients are there to engage in services** (i.e. job/workforce training, trauma mitigation, parenting classes, financial education, service learning - structured environment). There should be provisions for daycare to provide for residents.
6. **No daily services - i.e. food service/meal site except for persons who are residents of Gateway**
7. **Relationships of partner providers must be clearly defined in writing, including responsibilities and expectations.**
8. **Implementation of a Community Oversight Committee - serves as guidance/advisory/oversight council** (can establish guidelines/standards; outline what we hope to achieve; establish Corrective Action Plans, etc.) This should include the following:
 - Should have two spots for reps from each neighborhood - South San Pedro, Parkland Hills, Siesta Hills, Elder Homestead, Trumbull Village. Open/standing slots that cannot be replaced by others
 - City designated Manager of or Contracted Provider manager of Overnight Shelter Services,
 - Liaison for Providers in Building
 - Liaison for Neighborhood Businesses
 - City, County, State reps
 - Gateway graduate or resident in program
 - Exec Director of Gateway
9. **TRANSPARENCY of population being served, and how people are receiving treatment - via HCC or CABQ website.** Shows numbers of people coming in, what services they are being provided, where they get referred, their timeline of services, etc. (no identifying info such as names, but basic demographic information - age, sex, homeless status, addiction y/n). Data that shows the effectiveness of the Gateway model. This will help to quantify part of the success rate when the population is to be increased, allowing for assessment of the effectiveness of the overnight shelter.
10. **Provide 24/7 onsite, non-resident professional staff for the front desk for the overnight shelter.**
11. **Provide 24/7 on-site trained mental health professionals.**
12. **Secure Fencing for the overnight shelter resident's exterior area to maintain safety and security of current and incoming residents.**
13. **Provide 24/7 on-site professional security including exterior "centrally monitored" security cameras for the full perimeter of the facility.**
14. **Property Maintenance** - Property shall be kept maintained, clean, and in good condition; no personal property of tenants or guests shall be permitted outside the gated property boundaries; public sidewalks and pathways to property will be monitored and remain clear of debris

APPENDIX T

PARKS, SCHOOLS, AND DAYCARES WITHIN 1.5 MILES OF PROPOSED GATEWAY FACILITY

CITY PARKS

1. Ross Park	.24 miles
2. Wilson Park (next to Wilson Middle School)	.29 miles
3. Siesta Hills Lassetter Park(near New Day youth Shelter)	.34 miles
4. New Day Park (next to New Day youth Shelter)	.44 miles
5. Eunice Kalloch Park (across Whittier Elem School)	.48 miles
6. Vail Park	.51 miles
7. Park@ Ross Pl, Pampas Dr., Monroe Intersection	.54 miles
8. Phil Chacon Park (nest to Van Buren Middle School)	.72 miles
9. Jack and Jill Park (past Westside pickup)	1.03 miles
10. Bullhead Park	.24 miles
11. John Carillo Park (next to Emerson)	1.25 miles

SCHOOLS

1. Cesar Chavez Community School -	500 feet
2. Wilson Middle School -	.14 miles
3. Holy Ghost Catholic school -	.4 miles
4. Whittier Elementary School -	.47 miles
5. Kirtland Elementary School -	1.04 miles
6. Emerson Elementary School -	1.07 miles
7. Van Buren Middle School -	1.2 miles
8. Highland High School -	1.21 miles
9. The Church Christian Childrens Academy	1.3 miles

CHILDCARE AND PRESCHOOLS (might include after school care)

1. Eastern Childhood Development Center -	.1 mile
2. Happy Feet Daycare –	.5 miles
3. La Petite Academy of Albuquerque	.6 miles
4. Little Flower Learning Center -	1.2 miles
5. Alvarado Day School Day Care	1.2 miles
6. Head Start Center – 3530 Gibson SE -	1.4 miles
7. Mary Francis School	1.5 miles

Not included due to on base or at base entrance

1. Abq Bear Middle School	.4 miles at Truman Gate
2. Wherry Elementary School	1.3 miles at Louisiana Base Pass
3. AFRL Stem Outreach	ON BASE

APPENDIX U

PROVIDERS OF SERVICES TO THE HOMELESS BY CITY COUNCIL DISTRICT

Refer to Google Map at the bottom of this document and also found at this link:

<https://www.google.com/maps/d/edit?mid=1UY2rBBJvh4sJwsmQwN0ieemwGcaivFPT&usp=sharing>

Code Key (each map entry was designated to the category it best fit to avoid multiple listings. Each number correlates to that category:

- 1: Men's Shelter
- 2: Women's Shelter
- 3: Youth Shelter
- 4: Behavioral & Mental Health Services
- 5: Drug/Alcohol Treatment
- 6: Health Centers
- 7: Social Services

DISTRICT 1- Lan Sena: 1 Service

Westside Emergency Shelter (1)

DISTRICT 2- Isaac Benton: 17 Services

Albuquerque Center for Hope and Recovery (5)
Albuquerque Opportunity Center (1)
Albuquerque Healthcare for the Homeless: Harm Reduction Outreach (6)
Central New Mexico Treatment Center (5)
Child & Family Development Division (7)
Coronado Park Homeless Ministry: Meal Site (7)
Crossroads for Women (2)
Family Promise of Albuquerque (2)
Good Shepherd Center (1)
John Marshall Health and Social Services Center: Meal Site (7)
NM Human Services Department (7)
S.A.F.E. House (2)
St. Martin's Hospitality Center (1)
Steelbridge (1)
Steelbridge Resource Center (1)
The Rock at NoonDay (1)
UNM Psychiatric Center (4)

DISTRICT 3- Klarissa Pena: 1 Service

Catholic Charities of New Mexico (7)

DISTRICT 4- Brook Bassan: 1 Service

Central Desert Behavioral Health Hospital (4)

DISTRICT 5- Cynthia D. Borrego: 0 Services

DISTRICT 6- Pat Davis: 41 Services

Addiction Solutions (5)

Albuquerque Family Mental Health Clinic (4)

Albuquerque Heath Services (5)

Albuquerque Indian Center (6)

All Nations Wellness and Healing Center (6)

Bernalillo County Department of Behavioral Health Services (4)

Calamus Center for Integrative Mental Health (4)

CARE Detox (5)

Compassion Center with Rev. Joanne Landry (7)

Conciencia Mental Health LLC (4)

County Abuse Programs (5)

County Social Services (7)

Department of Veterans Affairs (7)

East Central Health and Social Service Center (6)

East Central Multi Services Center (4)

First Nations Community Health Source (6)

First Nations Community Healthsource- Zuni Clinic (6)

Food Distribution Center- Fray Antonio Kitchen: Meal Site (7)

Gateway Gibson Heath Hub (coming soon) (1)

God's Warehouse: Meal Site (7)

Haven Behavioral Hospital of Albuquerque (4)

Hopeworks (1)

La Mesa Presbyterian Church: Meal Site (7)

Maya's Place (2)

New Creation Church: Meal Site (7)

New Day & Drop In Outreach (7)

New Day Youth & Family Services (3)

One Hope Centro de Vida Health Center (6)

Perfectly Imperfect LLC NM (4)

Public Health Department (4)

Restorations Ministry Church: Meal Site (7)

Shadow Mountain Recovery at Albuquerque (5)

St. Martin's Hospitality Center- Yale Campus (1)

Therapeutic Living Services Inc. (4)

Transgender Resource Center of New Mexico (7)

Turquoise Lodge Hospital (5)

UNM Women's Resource Center (2)

VA Hospital- Healthcare for Homeless Veterans (6)

Vocational Rehabilitation (7)
Young Children's Health Center (6)
Zia Community Cares LLC (7)

DISTRICT 7- Diane Gibson: 15

ABQ Behavioral Services/ABQ Psychiatric Services LLC (4)
Albuquerque Behavioral Health (4)
Bernalillo County Wellesley Health Center (6)
Child Protective Services (7)
Coalition to Stop Violence Against Native Women (2)
Family Promise (2)
First Nations Community Healthsource Truman Clinic (6)
Focused Recovery of New Mexico (5)
Heights Mental Health (4)
New Mexico Coalition to End Homelessness (7)
NMAIMH (4)
NM Income Support Division- Human Services Department (7)
Recovery Based Solutions (5)
Shadow Mountain Recovery Intensive Outpatient Center (5)
Women's Housing Coalition (2)

DISTRICT 8- Trudy E. Jones: 1 Service

Turning Point Recovery Center (5)

DISTRICT 9- Don Harris: 3 Services

Barrett House (2)
Catholic Community Services (7)
Veterans Integration Centers (VIC) (1)

UNINCORPORATED/No Council Representation (South Valley): 5 Services

Amistad Runaway Facility (3)
First Choice Community Healthcare South Valley Medical Center (6)
Joy Junction Shelter (1)
Recovery Services of New Mexico Five Points Clinic (5)
Recovery Services of New Mexico Isleta (5)

DISTRICT 1- Lan Sena: 1 Service	1.25% of Providers
DISTRICT 2- Isaac Benton: 17 Services	21.25% of Providers
DISTRICT 3- Klarissa Pena: 1 Service	1.25% of Providers
DISTRICT 4- Brook Bassan: 1 Service	1.25% of Providers
DISTRICT 5- Cynthia D. Borrego: 0 Services	0.0 % of Providers
DISTRICT 6- Pat Davis: 41 Services	51.25% of Providers
DISTRICT 7- Diane Gibson: 15	18.75% of Providers
DISTRICT 8- Trudy E. Jones: 1 Service	1.25% of Providers

DISTRICT 9- Don Harris: 3 Services

3.75% of Providers

Total providers of Homeless services = 80

Percentage of Providers located in District 6 = 68.3%

OTHER FACILITIES OF NOTE: Halfway Homes, recovery homes, pickup-dropoff sites

DISTRICT 1: 0

DISTRICT 2:

La Posada Halfway House

Oxford House Hazeldine

DISTRICT 3: 0

DISTRICT 4: 0

DISTRICT 5:

Oxford House Oasis

Oxford House Oasis Hills

DISTRICT 6:

Crossroads for Women (Maya's Place & The Pavillions)

Oxford House Pennsylvania

Oxford House Tahiti

Oxford House Turquoise

Tiny Home Village

Transitional Living Services- Central

Transition for Living Federal Halfway House

Wainwright Manor

Jack and Jill Park Shelter Transfer Point

Phil Chacon Shelter Transfer Point

Wilson Park Shelter Transfer Point (It should be noted that the City claims that these shelter PU/DO points are now closed. However, residents of the area report no cessation in the frequency of homeless camping in these parks, and that the damage due to magnetization has not been mitigated by the City)

DISTRICT 7:

Oxford House Candelaria

Oxford House Fair Heights

Oxford House Indian School

Oxford House Montgomery Park

Oxford House Mountain Vista

Oxford House Palomas
Oxford House Zimmerman

DISTRICT 8: 0

DISTRICT 9:
Oxford House Constitution
Oxford House Elizabeth
Oxford House Ponderosa
Oxford House Snowheights

City-wide Services Map

Men's Shelter

Albuquerque Opportunity Center

Gateway Shelter

Good Shepherd Center

HopeWorks

Joy Junction Shelter

St Martin's Hospitality Center

St. Martin's Hospitality Center - Yale Campus

SteelBridge

Steelbridge Resource Center

The Rock at NoonDay

Veterans Integration Centers (VIC)

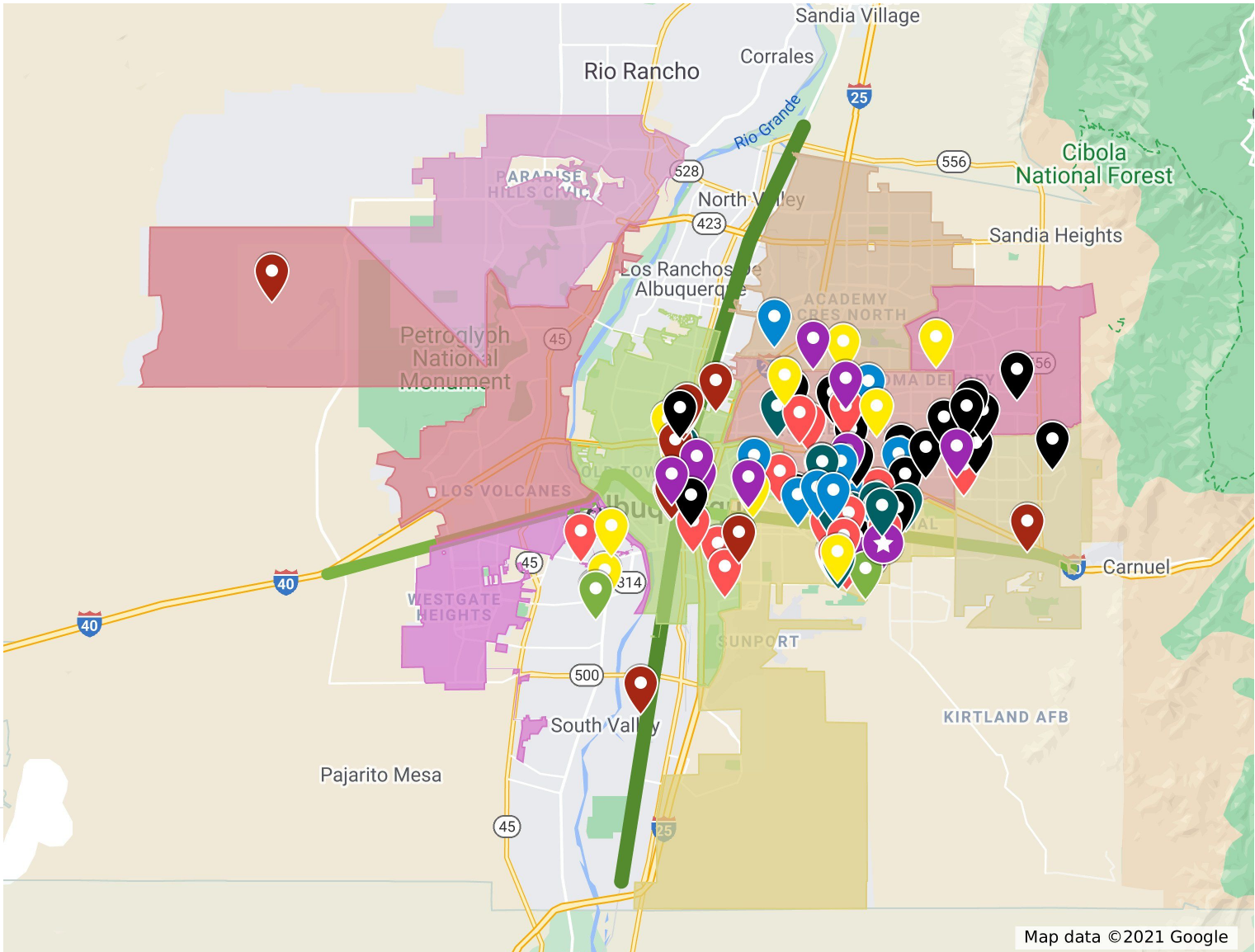
Westside Emergency Shelter

Women's Shelter

Barrett House

Coalition To Stop Violence Against Native Women

Crossroads for Women



Locations of City, County, Federal, private, and faith-based services for the unhoused population of Albuquerque. To avoid confusion or double-counting, each site is assigned to only one category, which is best suited to the service based on description or website

Family Promise of Albuquerque



Family Promise of Albuquerque



Maya's Place



S.A.F.E. House



UNM Women's Resource Center



Women's Housing Coalition

information.

Current Breakdown, # of Misc Services and # of Transitional homes, public & private:

D1- 1,0

D2- 15,2

D3- 0,0

D4- 1,0

D6- 37,7

D7- 13, 7

D8- 1,2

D9- 2,5

Youth Shelters



Amistad Runaway Facility



New Day Youth & Family Services

Behavioral & Mental Health Services



Albuquerque Behavioral Health



ABQ Behavioral Services/ABQ Psychiatric Services, LLC



Albuquerque Family Mental Health Clinic



Bernalillo County Department of Behavioral Health Services



Calamus Center for Integrative Mental Health



Central Desert Behavioral
Health Hospital



Conciencia Mental Health LLC



East Central Multi Services
Center



Haven Behavioral Hospital of
Albuquerque



Heights Mental Health



NMAIMH



Perfectly Imperfect LLC, NM



Public Health Department



Therapeutic Living Services
Inc



UNM Psychiatric Center

Drug/Alcohol Treatment



Addiction Solutions



Albuquerque Center for Hope
and Recovery



Albuquerque Health Services



CARE Detox




Central New Mexico
Treatment Center



County Abuse Programs



Focused Recovery of New
Mexico

 Recovery Based Solutions



Recovery Services of New
Mexico Isleta



Shadow Mountain Recovery at
Albuquerque



Shadow Mountain Recovery
Intensive Outpatient Center



Turning Point Recovery Center



Turquoise Lodge Hospital



Recovery Services of New
Mexico Five Points Clinic

Halfway Houses/Transitional Housing



ABQ Indian Center/Tiny Home
Village



Crossroads for Women
Transitional Living



Wainwright Manor



Oxford House Montgomery
Park
















Transition For Living



Transitional Living Services
Inc







Oxford House Fair Heights

-  Oxford House Palomas
-  Oxford House Constitution
-  Oxford House Snowheights
-  Oxford House Morris
-  Oxford House Pennsylvania
-  Oxford House Turquoise
-  Oxford House Candelaria
-  Oxford House Indian School
-  Oxford House Zimmerman
-  Oxford House Elizabeth
-  La Pasada Halfway House
-  Oxford House Tahiti
- 

Oxford House Mountain Vista

-  Oxford House Ponderosa
-  Oxford House Hazeldine
-  Oxford House Oasis Hills
-  Tiny Home Village
-  La Pasada Halfway House

Health Centers

- 
Albuquerque Healthcare for
the Homeless: Harm
Reduction Outreach
-  Albuquerque Indian Center
- 
All Nations Wellness and
Healing Center
- 
Bernalillo County Wellesley
Health Center



East Central Health and Social
Service Center



First Choice Community
Healthcare - South Valley
Medical Center



First Nations Community
HealthSource



First Nations Community
HealthSource (Zuni Clinic)



First Nations Community
Healthsource Truman Clinic



One Hope Centro de Vida
Health Center



Young Children's Health
Center



VA Hospital- Health Care for
Homeless Veterans

Social Services



Catholic Charities of Central
New Mexico





Catholic Community Services




Child & Family Development
Division


 Child Protective Services



Compassion Center w/Rev.
Joanne Landry



Coronado Park Homeless
Ministry: Meal Site


 County Social Services



Department-Veteran Affairs
Lib



Food Distribution Center - Fray
Antonio Kitchen: Meal Site


 God's Warehouse: Meals



John Marshall Health and
Social Services Center: Meal
Site


La Mesa Presbyterian Church:
Meal Site


New Creation Church: Meal
Site


New Day and Drop In Outreach


New Mexico Coalition to End
Homelessness


NM Human Services
Department



NM Income Support Division -
Human Services Department



Restoration Ministries Church:
Meal Site



Transgender Resource Center
of New Mexico



Vocational Rehabilitation



Zia Community Cares LLC



Jack and Jill Park: Shelter
Pickup Point



Phil Chacon Park: Pick-up
point for shelters



Wilson Park: Shelter Pickup
Point

Districts & Quadrants



Lan Sena



Isaac Benton



Klarissa Peña



Brook Bassan



Cynthia D. Borrego



Pat Davis



Diane G. Gibson



Trudy E. Jones



Don Harris




NW/NE Line



NW/SW Line

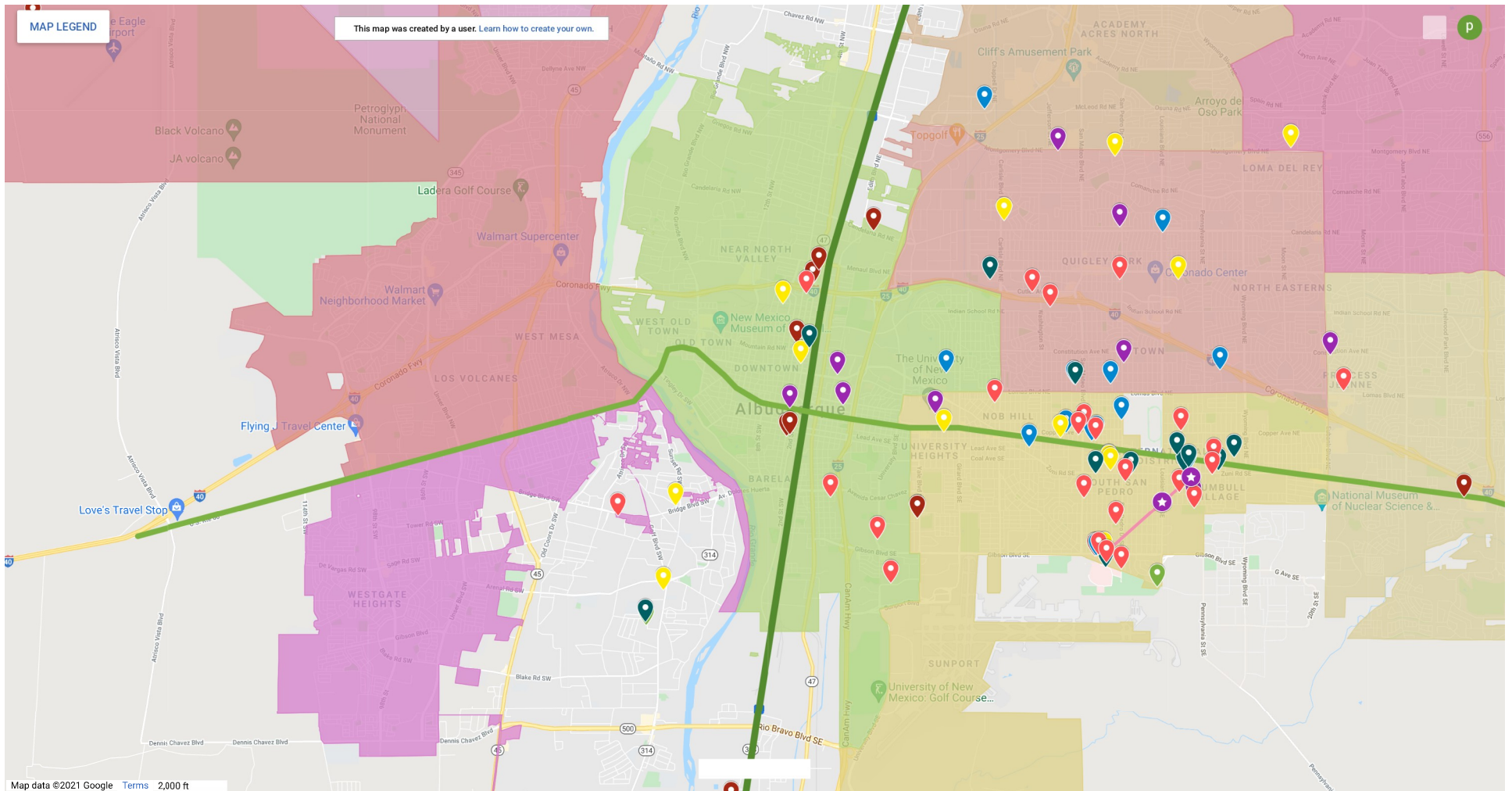


One Mile

 One Mile

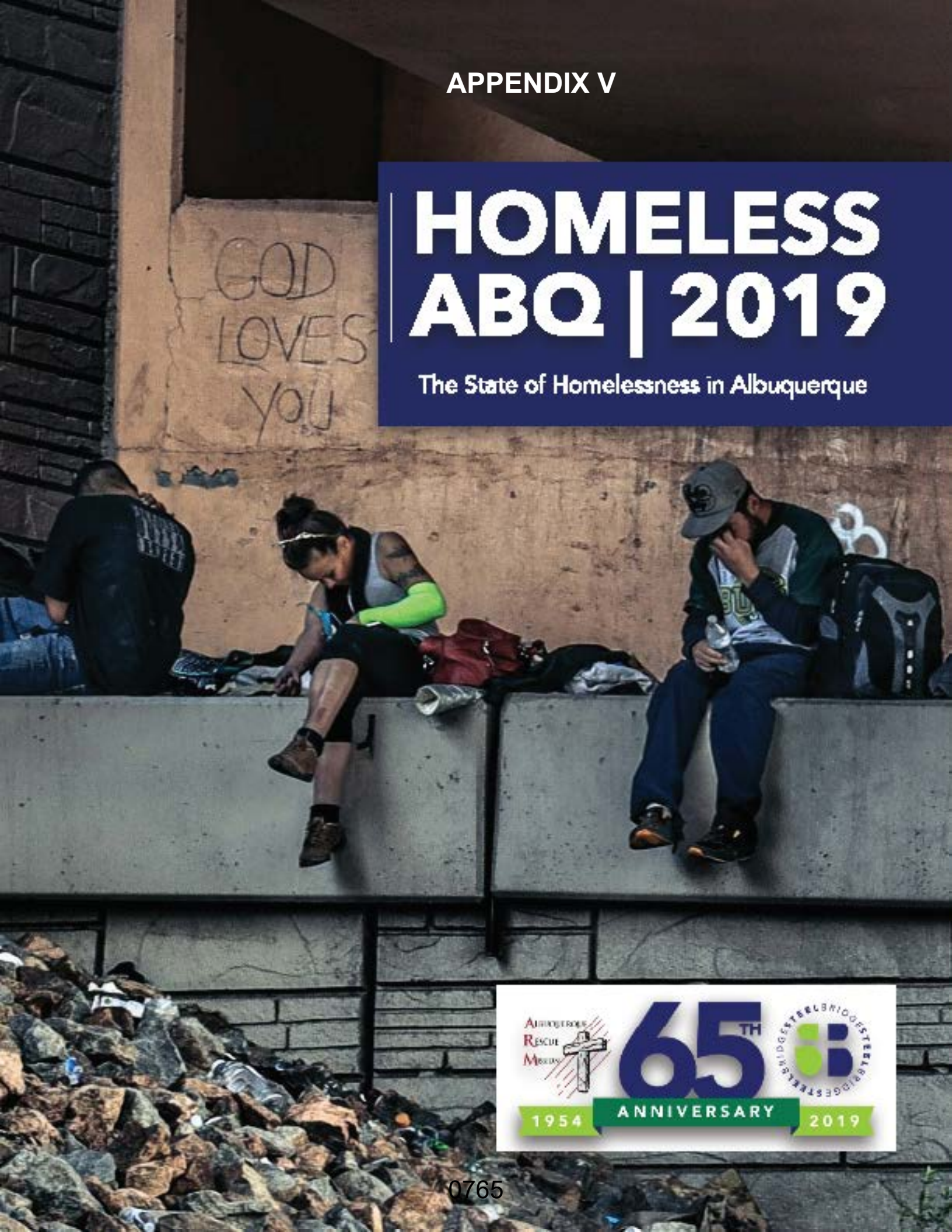
 1.5 mile

 1.5 mile



HOMELESS ABQ | 2019

The State of Homelessness in Albuquerque



Homeless people are moving into areas of Albuquerque they've never been before. Many residents feel like homelessness is worse than it's ever been before. So, is homelessness really increasing?

Encampments are cropping up in parking lots, city parks, the bosque and in vacant plots of land from the far West Side to east of Tramway. Panhandlers at busy intersections and along interstates are part of the landscape just about everywhere.

"Is homelessness worse now?"



Coronado Park, just south of I-40 between 2nd and 4th streets, may be the most severe example of what happens when a neighborhood park is taken over by homeless people, but

sizeable homeless populations regularly hang out at Downtown's Robinson Park at 8th Street and Central, and at Los Altos Park at Lomas and Eubank NE, among others.

People facing homelessness are also especially visible walking daily along Central Avenue, with large concentrations Downtown, in the university area and east of Louisiana.

The Albuquerque Indian Center provides services to more than 18,000 people a year, 92 percent of whom are Native American. Many of the homeless people seen east of Louisiana are Native Americans, who get services and free meals offered at the center, located in the area east of the International District, and for medical, dental, and other social services from First Nations Community HealthSource on Zuni SE.

Service providers generally agree that the number of homeless people in Albuquerque is increasing.

Chronically Homeless

There are an estimated 5,000 to 8,000 individuals that are homeless in Albuquerque.

New Mexico is at the top nationally when it comes to the percentage of people who are chronically homeless.

The findings are based on surveys done in shelters and on the street during a single night in January.

In New Mexico, about 12 of every 10,000 people were experiencing homelessness, an increase of 2.8 percent from 2017. About 42 percent of them had been continuously homeless for a year or more.

Only the District of Columbia had as high of a percentage of chronically homeless people.

Veterans

Trailing only Montana, New Mexico had the second highest percentage of homeless adults who were veterans at 15 percent.

Families

Some non-profits report seeing more families in its shelters – families who have come to Albuquerque from elsewhere after experiencing an economic or personal crisis.

Children

When it comes to homeless children, Albuquerque Public Schools keeps their own count. In 2018, APS counted roughly 2,000 homeless students – that's down from about 4,000 the previous year. If a child lives in a home with 2 or more families, without a home of their own, they are counted homeless. Or living in a car. Or renting a motel a few nights a week.

**"NEW MEXICO HAD
THE 2ND HIGHEST
PERCENTAGE OF
HOMELESS ADULTS
WHO WERE
VETERANS"**



"BECAUSE HOMELESS PEOPLE MUST CONSENT TO BE COUNTED, THE COUNT IS MUCH LOWER THAN REALITY."

Under-Reported

Because homeless people must **consent** to be counted, the count is much lower than reality. Several nonprofits and government agencies keep track of the homeless but not all their numbers add up because keeping an accurate count of the homeless population can be challenging given their transient nature.

Dr. Jeremy Reynolds, the late founder of Joy Junction, the state's largest homeless shelter, said that it is difficult to get a handle on how many people are homeless, in part because of differing definitions. He raised the question of whether people are homeless if they sleep on a friend's couch, live out of their car, rent a motel room for part of each month or are in a long-term rehab program at a shelter?

2008 Recession

New Mexico Coalition to End Homelessness conducts the "point-in-time" count of the homeless. Data from 2007 shows the nonprofit counted 1,276 homeless people in Albuquerque. The numbers **peaked** at 2,002 homeless persons in 2009 – the same year New Mexico experienced the Great Recession.

The numbers dropped in the following years but went up slightly again in 2017 with 1,318 homeless people counted.

The national count showed 552,800 people without homes across the U.S., marking the second consecutive increase after seven straight years of declines.

According to the data collected by the Department of Housing and Urban Development, there were 2,551 people counted in New Mexico as part of the annual homeless survey. That included 290 veterans, 182 unaccompanied youth and more than 600 people in families with children.

While the Point-in-Time count may be the "official" number used by the U.S. Department of Housing and Urban Development, it falls **far short of painting an accurate picture.**



Panhandling, Parks, and Shopping Carts

They panhandle along busy streets, push shopping carts with all their worldly possessions, and sleep in parks, under bridges and other places not intended for human habitation. Albuquerque's homeless can be seen in all parts of the city.

Customers Leaving, Businesses Closing

Businesses that survive on walk-in clientele are negatively impacted because of homeless people sleeping or camping out on private property or living out of their cars parked in their parking lot.

Many business owners and individuals report that no matter how many times they call the police to chase off unwanted trespassers, homeless people seem to always return.

Consumers Pay Cost

Some businesses have to put up fences all around their property. Panhandlers can be a constant presence in the parking lot, and many of them can be aggressive and chase away shoppers. Businesses then hire full-time security during the day because of loitering and people being inebriated or under the influence of other substances. Employees face people who are passed out on the sidewalk and have to wake them and up and nudge them along.

Customers end up having to pay the extra costs incurred by the business. Businesses end up closing or moving. Buildings then become vacant and property values fall.

Ordinary People

Some of us witness or are involved in altercations, sometimes violent, involving people who are clearly drunk, on drugs or mentally ill.

Crime

Other criminal issues are: drug trafficking; prostitution; human trafficking; the preying on the homeless by criminal elements; graffiti; panhandling; vandalism; theft; and increased danger as impaired homeless people fall into the street or carelessly walk into traffic.



Jails, Courts, and the ER

Homeless individuals with higher needs cycle through the criminal justice system - including limited law enforcement resources - and hospital emergency rooms.

Neighborhoods

Property values fall when homeless people begin to camp in parks and near schools, residents get concerned about the safety of their children. Residents worry about crime and how it would change the character of a neighborhood.

Environment

There is the debris left behind – trash, empty booze bottles, used syringes and walls and sidewalks smelling of urine and fecal matter.

What Causes Homelessness?

Perhaps one of the reasons there are so many different organizations working to end homelessness in different ways is because they **differ** in what they believe are the root causes.

Is It The System?

Regardless of where people identify on the political spectrum, Right or Left, Democrat, Republican, Capitalist or Socialist, they will lay some of the blame for homelessness on the current political, economic, and **government** system.

Some of the listed systemic causes or reasons for homelessness are:

- **Poverty** - lack of financial resources, not enough jobs, wages are too low
- **Housing** - not enough safe, high quality and affordable housing
- **Health Care** - lack of access to health care, including behavioral and mental health



A "system" homeless advocate usually seeks to influence and use the **government's legislative powers** to **require** businesses to pay higher wages and use **taxpayer funds** to provide jobs, housing, and health care for homeless individuals.

Basically, when the system does it's job, homelessness will end.

Is It The Individual?

"For many people living on the streets, homelessness is not an issue of a access to a meal or four walls and a roof - it's an issue of the heart" says a former homeless person at Steelbridge Ministries.

Some organizations believe the root cause of homelessness goes far deeper than material things like wages, health care, and housing.

They would list the following as some of the root causes:

- **Spiritual** - emotional pain, feeling unfulfilled and restless, lacking purpose
- **Family** - unsafe, abusive home life
- **Mental** - mental illness (either biological or developed as a survival mechanism to cope with trauma from living on the streets - drug or sexual abuse, for example)
- **Self Destructive Choices** - selfish and irresponsible decision making
- **Social** - never equipped with the tools to thrive independently

Some homeless people are highly educated and once held executive level positions in corporate America with six figure salaries, beautiful homes, and nice cars but used drugs to numb the pain of emptiness, disappointment, and the pressure to succeed.

Those who focus on addressing individual causes believe that taxpayer funding can provide a house but **not** a home. That public policy can require a higher wage but for a job but **cannot** inspire a person to work creatively, faithfully, and with excellence.

Their belief is that the problem of homelessness can be only be solved through connecting to a **loving community** and **spiritual renewal**, in addition to providing for all of the material and physical needs of a homeless person.



0771

Why Do Transient Homeless People Choose ABQ?

Homeless people have been drawn to Albuquerque's warm climate and many social services for decades, they're not going away. They either connect with local social service providers that can help them break the cycle of homelessness or will figure out their own way to survive.

Some homeless persons have been in Albuquerque their whole lives, others have recently moved to town.

Years ago, parts of downtown Albuquerque were home to large groups of homeless people living on the streets. However, many homeless people have spread out all over the city.

Why? One possible answer: some homeless service providers have moved out of downtown Albuquerque.

Solutions: What's Being Done?

Homeless Service Providers

Over the years, many homeless service providers have opened and expanded to provide care for homeless persons in Albuquerque.

The largest concentration of homeless service providers is located along a corridor running across the eastern portion of the Barelás neighborhood, through Downtown and into Wells Park and the Near North Valley Neighborhoods – an area bounded roughly by Avenida César Chávez on the south, Menaul on the north, 1st Street to the east and 12th Street to the west.

Do We Just Need More Shelters?

Not always. For example, many homeless service providers report having safe, clean, easily accessible bathrooms - and still have people who urinate outside behind the building.

Homelessness is a complex issue. Are addiction and mental illness solved with more toilets and housing alone?

What About Tents?

One reason homeless providers do not allow tents is because there are no portable **toilets** provided for the sidewalk campers. Those who have provided public toilets report some homeless individuals locking the door and using it as a place for shooting up and not let anybody else in. Ultimately, the toilets are destroyed and rendered unusable unless they are constantly monitored.



Non-Profit Service Providers

The **housing first** model is how most non-profit organizations are serving homeless people in Albuquerque. Their priority is to get persons experiencing homelessness into shelter and housing first, before any treatment begins. **Ending homelessness, for them, means getting homeless people off the streets and into shelter and housing.** Most, if not all, of these organizations receive taxpayer funding through various government agencies.

Below are a few of these organizations.

ABQ Health Care for the Homeless

Barrett Foundation

Crossroads for Women

Heading Home

HopeWorks

New Day

SAFE House

Supportive Housing Coalition

Therapeutic Living Services

Family Promise

Taxpayer Funded - Government Solutions

The City of Albuquerque and Bernalillo County are getting ready to spend millions of dollars on a project they hope can help get the most chronically homeless people off the streets for good.

It is a homeless housing project - 40-unit, apartment-style complex - that offers permanent housing alongside on-site professional medical and social help for its tenants.

Taxpayer Funded Facilities (continued)

It will provide housing and care for people who experience:

- homelessness or severe housing instability
- frequent admission to Metropolitan Detention Center's psychiatric unit
- frequent utilization of detox services
- frequent use of emergency medical services for behavioral health needs

All the money for the project comes from taxpayers. The county's \$2 million share is from the voter approved sales tax increase for behavioral health programs. The city's \$1.97 million share came from existing city funds.

City of Albuquerque

Albuquerque's mayor has highlighted homelessness as one of the city's legislative priorities. The Mayor's office has several programs in place. One, is the ECHO project is a data-driven project that brings together organizations and agencies that interface with homeless people to identify solutions. Another is a staff member who responds to calls about homeless encampments to provide support and clean up.

24/7 Solution

City officials believe Albuquerque needs a place where anyone could go 24/7 with no questions asked, regardless of state of mind or condition.

The City of Albuquerque will be working with the University of New Mexico and UNM's Health Sciences Center to explore the potential development of a 24/7 emergency shelter with supportive services - health care and social services via nonprofits and charities represented there.

Temporary Band Aid?

Currently, the West Side emergency shelter - located about 20 miles from Downtown – provides overnight shelter for more than 300 homeless individuals. Some believe the shelter could keep some people healthy, safe, even alive. But the Mayor believes this solution is temporary until a shelter or shelters are built closer to or in the city.

Voters Get To Decide

Albuquerque voters will have a say in whether the city builds a centralized, 24/7 shelter (or smaller satellite shelters spread out in several sites around the city). It's phase one of the project, expected to cost **\$14 million**. The entire project could end up costing **\$28 million**.

Bernalillo County

County Commissioners are considering approval of a tiny homes village to provide transitional housing. They are implementing multiple mental health programs for members of the homeless population, including veterans and those with behavioral health challenges. Some of the vouchers for the program are available to veterans through taxpayer-funded federal programs.



Faith Based Service Providers

The highest expression of humanity, for faith based agencies, is **more than material**. Many of the homeless persons on Albuquerque's streets - addicted and suffering mental illness - **have experienced the success associated with the American Dream** - an educated mind, hands with vocational skills, a full stomach, and being sheltered in four walls with a roof. They found that the promise of financial prosperity was **not** enough to satisfy the deepest longings of their souls.



Spiritual renewal and restoration is what every story of a life saved from the streets is based on for faith-based agencies. For them, the root cause of the various maladies and pathologies experienced by homeless persons, including addiction, is being disconnected from love and a life without purpose.

All of their services - food to residential programs - is built upon the belief that when the human spirit comes to life, the mind and the body will follow. For them, the universe is more than random scientific data and mankind more than a machine. To them, the universe is intentional and relational and it's greatest force is love. The highest expression of their faith means loving people - especially the most vulnerable.

They are mostly funded through private donations from individuals, foundations, and churches.

Below are a few of these organizations.

Steelbridge Ministries

Expect A Miracle

Joy Junction

U Turn For Christ

Catholic Charities

Victory Outreach

Good Shepherd Center

God's Warehouse

The Rock at Noonday

For more information on Homeless Service Providers -

Homeless Service Directory for Men, Women, Children, and Families:

<https://www.cabq.gov/family/services/homeless-services>

How to Use This Report

This report does not contain new research or information. It is a **guide** - a summary of public information. It is anecdotal. It is **not** comprehensive.

The report is a snapshot of the complex issue of homelessness in Albuquerque simplified for the ordinary resident seeking to understand the issue.

It has been compiled by [Steelbridge Ministries](#), formerly the Albuquerque Rescue Mission. Steelbridge has been working to feed, house, clothe, care for, and rescue the homeless in Albuquerque since 1954.

Some information for this report was pulled together from the following sources:

Video: KOB TV News Investigative Story

<https://www.kob.com/albuquerque-news/4-investigates-is-homelessness-getting-worse-in-albuquerque/5164918/>

Homelessness Up in NM by Susan Montoya/ABQ Journal

<https://www.abqjournal.com/1258672/new-mexico-sees-uptick-in-homelessness.html>

City, UNM Unite to Take On Homelessness by Jessica Dyer/ABQ Journal

<https://www.abqjournal.com/1280483/city-unm-unite-to-tackle-homelessness.html>

Ground zero for the homeless by Rick Nathanson/ABQ Journal

<https://www.abqjournal.com/1213425/ground-zero-for-the-homeless-issue-a-constant-struggle-for-residents-businesses.html>

People without housing visible throughout the city by Rick Nathanson/ABQ Journal

<https://www.abqjournal.com/1213426/people-without-housing-visible-throughout-city.html>



65TH



1954

ANNIVERSARY

2019



214 Coal Ave SW
Albuquerque, NM 87102
505.346.4673
www.mysteelbridge.org
0778

Sanchez, Suzanna A.

From: Scott Benavidez <scott@mrbsnm.com>
Sent: Tuesday, September 14, 2021 12:26 PM
To: Sanchez, Suzanna A.
Subject: The Zoning Hearing for the Conditional Use Permit application for Gateway

My name is Scott Benavidez; my dad Raymond Benavidez opened Mr. B's Paint & Body Shop Inc. in 1978. Our family has been members of the SE Heights community for over 40 years.

These comments are in regards to the Permit application for Gateway. On Saturday, June 12, 2021, there was a community input meeting. The only reason that we know this is because it was on the City of Albuquerque website. Other than that, our business **NEVER** received contact from the city or any other parties regarding meetings or discussions. However, on slide 7 of the PowerPoint online, it states that:

5- Offers a least two community input sessions within the next 45 days specifically for neighbors, neighborhood associations, and businesses

Community input for businesses **never** happened once more, less twice.

We are one of the longest-tenured businesses in this community and are direct across the street from Gateway. Yet, we have **NEVER** been contacted about a single meeting and never asked about our input. The only way we find information is after it has already happened in the news. The city of Albuquerque must not grant this permit until all parties have been included and heard. These decisions will directly affect our businesses and our community.

In closing, I was hoping you could add me to the public hearings via Zoom. After 43 years in this community and being located across the street on Gibson, it would only make sense that the city hear us.

Thank you,

Scott Benavidez



(505)255.7022 www.MrBsNM.com



Sanchez, Suzanna A.

From: sandra perea <sp-wonderwoman@comcast.net>
Sent: Wednesday, September 15, 2021 3:21 PM
To: Sanchez, Suzanna A.
Subject: EHNA Statement and Evidence
Attachments: EHNA WRITTEN STATEMENT AND EVIDENCE.pdf

Follow Up Flag: Follow up
Flag Status: Flagged

Hello-

I am writing to you as the President of Elder Homestead Neighborhood Association. Please find attached a written statement and evidence I have compiled regarding the City of Albuquerque Family & Community Services' application for a Conditional Use Permit for the City of Albuquerque's proposed Gateway Center at 5400 and 5006 Gibson Blvd SE.

Please let me know you have received this email and attached document, and that you have no problems downloading and viewing it.

Thank you,
Sandra Perea
President, Elder Homestead Neighborhood Association

September 15, 2021

Attn: Robert Lucero, Zoning Hearing Examiner

As the President of Elder Homestead Neighborhood Association, and a representative of residents and businesses in my community, I am writing to ask you to reject Family & Community Services' application for a Conditional Use Permit at 5400 and 5006 Gibson Blvd SE as they have not met the requirements for issuance of the permit as mandated by City Council Bill No. R-21-141, Enactment No. R-2021-021
[APPENDIX A]:

WHEREAS, those neighbors and businesses bearing the greatest impacts should be offered additional avenues for information sharing and gathering, on-going updates, and an ongoing point of contact for presenting concerns that might be reasonably addressed by the City; and

WHEREAS, a good neighbor program should be established for these purposes before the City takes any further steps toward development of the Gateway Center.

BE IT RESOLVED BY THE COUNCIL, THE GOVERNING BODY OF THE CITY OF ALBUQUERQUE:

Section 1: The City shall establish a good neighbor program for the Gateway Center that:

- Offers at least two community input sessions within the next 45 days specifically for neighbors, neighborhood associations, **and businesses** located within communities adjoining the Gateway Center; and
- Kicks off or advances discussions towards additional components of a Good Neighbor Agreement by the City with area residents **and businesses** to be in place for so long as the Gateway Center operates at this location. This discussion will, at a minimum, address:
 - Overnight capacity;
 - Security protocols;
 - Land use changes that will be required to authorize proposed uses at the site;
 - Acceptable methods for the dissemination of project programming updates for interested persons within communities adjoining the Gateway Center for the duration of its operation; and
 - A point of contact where persons can direct their concerns and have questions answered about the Gateway Center.

Section 2: the City shall not issue a certificate of occupancy or any Conditional Use Permits for the Gateway Center until the two community input sessions have occurred and the good neighbor program described in Section 1, above, has been completed.

The City failed to communicate and engage the businesses surrounding the property, and the City did not notify or invite neighborhood businesses to partake in input meetings mandated by this Resolution. Due to the City's lack of communication, community businesses were not notified of the two input meetings mandated by R-21-141, and therefore were unable to participate in the two input sessions. All businesses in the attached petition **[APPENDIX B]** have received minimal to no communication from the City regarding on-going updates, information sharing and gathering, and notification of input meetings. They have received minimal to no information regarding a point of contact at the City for presenting their concerns.

I ask that you reject the application of Family & Community Services for their Conditional Use Permit for the Gateway Center at 5400 and 5006 Gibson Blvd SE on these grounds.

Thank you for your consideration of this request.

Sandra Perea
President, Elder Homestead Neighborhood Association

APPENDIX A

CITY of ALBUQUERQUE TWENTY FOURTH COUNCIL

COUNCIL BILL NO. R-21-141 ENACTMENT NO. R-2021-021

SPONSORED BY: Pat Davis

1 RESOLUTION

2 CALLING FOR ADDITIONAL COMMUNITY INPUT AND GOOD NEIGHBOR
3 MEASURES BY THE CITY FOR THE PROPOSED GATEWAY CENTER AT THE
4 FORMER LOVELACE HOSPITAL SITE.

5 WHEREAS, the City of Albuquerque is acquiring or has acquired the former
6 Lovelace Hospital site at 5400 Gibson Boulevard SE with intent that it house
7 the City's anticipated Gateway Center for Homeless Services (the "Gateway
8 Center"); and

9 WHEREAS, a Gateway Center will offer much needed support and services
10 to assist the homeless and promote the health and welfare of the City; and

11 WHEREAS, notwithstanding the need for homeless resources and services,
12 the City recognizes that the Gateway Center will present new land use and
13 community impacts within the City; and

14 WHEREAS, the City has previously collected online comment and held an
15 input session for the project on December 14, 2020, in order to gather general
16 feedback about the project; and

17 WHEREAS, notwithstanding the prior input session, the City has not yet
18 offered individualized attention to the neighborhoods and businesses in
19 closest proximity to the Gateway Center; and

20 WHEREAS, those neighbors and businesses bearing the greatest impacts
21 should be offered additional avenues for information sharing and gathering,
22 on-going updates, and an ongoing point of contact for presenting concerns
23 that might be reasonably addressed by the City; and

24 WHEREAS, a good neighbor program should be established for these
25 purposes before the City takes any further steps toward development of the
26 Gateway Center.

1 BE IT RESOLVED BY THE COUNCIL, THE GOVERNING BODY OF THE CITY OF
2 ALBUQUERQUE:

3 SECTION 1. The City shall establish a good neighbor program for the
4 Gateway Center that:

5 • Offers at least two community input sessions within the next 45 days
6 specifically for neighbors, neighborhood associations, and businesses
7 located within communities adjoining the Gateway Center; and
8 • Kicks off or advances discussions towards additional components of
9 a Good Neighbor Agreement by the City with area residents and businesses to
10 be in place for so long as the Gateway Center operates at this location. This
11 discussion will, at a minimum, address:

- 12 ○ Overnight capacity;
- 13 ○ Security protocols;
- 14 ○ Land use changes that will be required to authorize proposed
15 uses at the site;
- 16 ○ Acceptable methods for the dissemination of project and
17 programming updates for interested persons within communities adjoining
18 the Gateway Center for the duration of its operation; and
19 ○ A point of contact where persons can direct their concerns
20 and have questions answered about the Gateway Center.

21 SECTION 2. The City shall not issue a certificate of occupancy or any
22 Conditional Use Permits for the Gateway Center until the two community input
23 sessions have occurred and the good neighbor program described in Section
24 1, above, has been completed.

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32 X:\CL\SHARE\CL-Staff\Legislative Staff\Legislation\24 Council\R-141final.docx

1 PASSED AND ADOPTED THIS 3rd DAY OF May, 2021
2 BY A VOTE OF: 9 FOR 0 AGAINST.
3
4
5
6

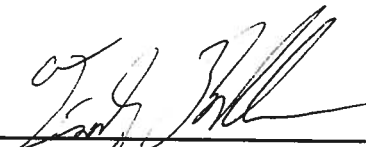
7 
8
9 Cynthia D. Borrego, President

10 City Council
11
12

13
14 APPROVED THIS 13 DAY OF May, 2021
15

16 

17 Bill No. R-21-141
18

19
20
21 
22
23 Timothy M. Keller, Mayor
24 City of Albuquerque
25
26
27

28 ATTEST:
29 
30

31 Ethan Watson, City Clerk
32
33
34

Attn: Robert Lucero, Zoning Hearing Examiner

APPENDIX B

Re: City's insufficient communication with local area businesses regarding Family & Community Services' application for a Conditional Use Permit for the City of Albuquerque's proposed Gateway Center at 5400 and 5006 Gibson Blvd

Please take into consideration deferring Conditional Use Application for the above referenced project. Our area business have received minimal to no communications regarding this project by the City of Albuquerque regarding this project.

For this reason, we are requesting deferring the application for conditional use until such time that The City of Albuquerque has demonstrated that they have acted in good faith in communicating and addressing our concerns about this project and making sure that does not create significant adverse impacts to the surrounding neighborhood businesses.

Name of Business	Business Representative	Business Address	Phone #	Signature
Starbucks	Lex C.	5301 Gibson Blvd	505-255-6773	AC
Edwards Gibson Mort		5501 Gibson Blvd	505-850-0186	ETH
Subway	Mark Smith	5525 Gibson Blvd	505-239-9000	MS
Mr. B's Pain & Body	Scott Benavidez	1410 Valencia Dr SE	505-255-7022	SES
Cervantes Restaurant	Iris Metzgar	5801 Gibson Blvd SE	505-262-2253	IM
Copper Canyon Cafe	Michelle Raus	5455 Gibson Blvd SE	505-266-6318	MR
Global Beauty	Sinh Nguyen	5311 Gibson Blvd	505-266-3459	SN
Bird of Paradise	Peter Kees	5409 GIBSON	505-268-1424	PK
AMERICAN PRIDE CLEANERS	ALEX. ALCAVA	1349 SAN MATEO	(505) 256-1140	AA
Raymond Lamora Hair & Beauty		1201 SAN MATEO SE	505-688-6640	RL

Name of Business	Business Representative	Business Address	Phone #	Signature
SACCO Automotive	STEVE SACCO	6461 GIBSON SE	255-3248	SS
La Petite Academy	Rhannon Antonio	6240 Gibson SE	265-5116	RA
DAVE CYCLES	Daniel Godwin	6121 GIBSON SE	256-7230	DG
Pollito Con Papas	Rene Coronado	6105 Gibson SE	765-5486	RC
CHELITO LINDO	GERMAN PERA	4116 SAN PEDRO SE	505-266-1800	GP
Happy Feet Children	Rosa Mondragon	1133 Dakota St SE	505-508-5409	RM
Good Eggs & More	Donald Lopez	5910 GIBSON SE	255-9298	DL
La Cocinita Mexican Food	Israel Ortega	5901 Gibson Blvd SE	200-0391	IO
WASH BRITE	Antonette Otero	901 San Pedro SE	331-6697	AO
GIOVANNI S	ROSARIO ZITO	921 SAN PEDRO SE	255-1233	RZ

Name of Business	Business Representative	Business Address	Phone #	Signature
AHL Garden Supply	Brian Baca	1051 San Mateo SE	970-799-3608	BB
A Plus Auto	Robert Robinson	1408 San Mateo St	505-266-6070	RR
Emotional Parlor	John Campbell	1021 San Mateo St	505-255-0546	JC
Acapulco Taco	Cindy Darnell	840 San Mateo SE	505-379-1496	CD

Sanchez, Suzanna A.

From: Patten-Quintana, Lorena
Sent: Wednesday, September 15, 2021 9:28 AM
To: Schultz, Shanna M.; Sanchez, Suzanna A.
Subject: Fw: VA-2021-00316 & VA-2021-00317
Attachments: R-141Enacted (5).pdf

Good call, Shanna. Thanks for alerting us.

Suzie - please place the attached into the record.

-Lorena

From: Schultz, Shanna M.
Sent: Wednesday, September 15, 2021 9:20 AM
To: Patten-Quintana, Lorena
Subject: VA-2021-00316 & VA-2021-00317

Good morning Lorena,

In reviewing the Sept 21 ZHE agenda, I noticed the two items related to the Gateway Center. In May, the City Council adopted a resolution that may provide guidance on the ZHE's decision on the matter – please see attached legislation. Section 2, found on Page 2, Line 21 contains some language related to the issuance of a Conditional Use Permit.

If this legislation is not already in the record for the hearing officer to consider, I would like to please request it be added.

Thank you,
Shanna



Shanna Schultz, AICP
Council Senior Planner
Albuquerque City Council
505.768.3185
smschultz@cabq.gov

CITY of ALBUQUERQUE

TWENTY FOURTH COUNCIL

COUNCIL BILL NO. R-21-141 ENACTMENT NO. R-2021-021

SPONSORED BY: Pat Davis

1 RESOLUTION

2 CALLING FOR ADDITIONAL COMMUNITY INPUT AND GOOD NEIGHBOR
3 MEASURES BY THE CITY FOR THE PROPOSED GATEWAY CENTER AT THE
4 FORMER LOVELACE HOSPITAL SITE.

5 WHEREAS, the City of Albuquerque is acquiring or has acquired the former
6 Lovelace Hospital site at 5400 Gibson Boulevard SE with intent that it house
7 the City's anticipated Gateway Center for Homeless Services (the "Gateway
8 Center"); and

9 WHEREAS, a Gateway Center will offer much needed support and services
10 to assist the homeless and promote the health and welfare of the City; and

11 WHEREAS, notwithstanding the need for homeless resources and services,
12 the City recognizes that the Gateway Center will present new land use and
13 community impacts within the City; and

14 WHEREAS, the City has previously collected online comment and held an
15 input session for the project on December 14, 2020, in order to gather general
16 feedback about the project; and

17 WHEREAS, notwithstanding the prior input session, the City has not yet
18 offered individualized attention to the neighborhoods and businesses in
19 closest proximity to the Gateway Center; and

20 WHEREAS, those neighbors and businesses bearing the greatest impacts
21 should be offered additional avenues for information sharing and gathering,
22 on-going updates, and an ongoing point of contact for presenting concerns
23 that might be reasonably addressed by the City; and

24 WHEREAS, a good neighbor program should be established for these
25 purposes before the City takes any further steps toward development of the
26 Gateway Center.

1 BE IT RESOLVED BY THE COUNCIL, THE GOVERNING BODY OF THE CITY OF
2 ALBUQUERQUE:

3 SECTION 1. The City shall establish a good neighbor program for the
4 Gateway Center that:

- 5 • Offers at least two community input sessions within the next 45 days
6 specifically for neighbors, neighborhood associations, and businesses
7 located within communities adjoining the Gateway Center; and
- 8 • Kicks off or advances discussions towards additional components of
9 a Good Neighbor Agreement by the City with area residents and businesses to
10 be in place for so long as the Gateway Center operates at this location. This
11 discussion will, at a minimum, address:
 - 12 ○ Overnight capacity;
 - 13 ○ Security protocols;
 - 14 ○ Land use changes that will be required to authorize proposed
15 uses at the site;
 - 16 ○ Acceptable methods for the dissemination of project and
17 programming updates for interested persons within communities adjoining
18 the Gateway Center for the duration of its operation; and
 - 19 ○ A point of contact where persons can direct their concerns
20 and have questions answered about the Gateway Center.

21 SECTION 2. The City shall not issue a certificate of occupancy or any
22 Conditional Use Permits for the Gateway Center until the two community input
23 sessions have occurred and the good neighbor program described in Section
24 1, above, has been completed.

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32 X:\CL\SHARE\CL-Staff\Legislative Staff\Legislation\24 Council\R-141final.docx

1 PASSED AND ADOPTED THIS 3rd DAY OF May, 2021
2 BY A VOTE OF: 9 FOR 0 AGAINST.

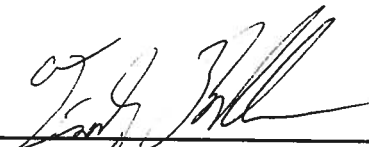
3
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9 Cynthia D. Borrego, President

10 City Council
11
12

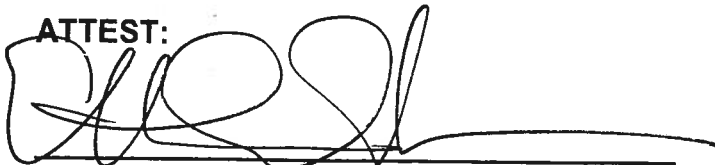
13
14 APPROVED THIS 13 DAY OF May, 2021

15 
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17 Bill No. R-21-141
18

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22
23 Timothy M. Keller, Mayor
24 City of Albuquerque
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26
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28 ATTEST:

29 
30

31 Ethan Watson, City Clerk
32
33
34

Sanchez, Suzanna A.

From: t-p-w@comcast.net
Sent: Wednesday, September 15, 2021 1:04 PM
To: Sanchez, Suzanna A.
Subject: Gateway Conditional Use Permit Zoning Hearing
Attachments: SHNA_Lovelace (003).docx

Follow Up Flag: Follow up
Flag Status: Flagged

Please find the attached comments pertaining to the Conditional Use Permit Zoning Hearing for the Gateway Center.

Thanks,

- Tim

Tim Roberts

New Mexico Airmarshal ABC #12059

mojo-airhead@comcast.net

505-228-0663



Virus-free. www.avg.com

Dear Ms. Sanchez,

I am a resident of Siesta Hills, a neighborhood located less than one mile from the proposed Gateway Center project. I am writing to voice my concern over the impact this development will have on our neighborhood and the adjacent International District neighborhoods. This area is currently home to many agencies that undoubtedly are needed to provide services to folks who are less advantaged/unhoused/addicted/recently released from incarceration/etc. I am extremely concerned about the impact another such facility will have on the area. Although the residents of the area have largely been portrayed as having the "Not In My Backyard" mindset, the apprehension that most are experiencing has more to do with the fear of the unknown. As of yet the city has been unable to tell us very little about this proposed facility other than the logistics are still being decided. This does not answer the multitude of questions that we have that no one seems to be able to answer.

One example: the International District is lucky enough to have many parks located within its boundaries. Will our parks end up looking like Coronado Park which was once a gathering place for families and children, covered with grass, and a safe space for all? Wilson Park, which is adjacent to a middle school, across the street from another multi grade private school, houses a public swimming pool, tennis courts, and is the home of the summer lunch program, was well on its way to becoming a space similar to Coronado park. Perhaps the recent renovation will halt that progression, but can we trust the city of Albuquerque to be a responsible steward of this park, and others?

The streets and underpasses of the area around Coronado Park are littered with garbage, needles, and many other items that are detrimental to the safety, security and aesthetics of the vicinity. After watching this area be allowed to decline into what it has become, how can we have faith that the city won't allow the same thing to occur in the International District? How can we have faith that this center will not attract this type of decline to an already overburdened area? Will the clients of the Gateway center be allowed to set up camps in adjacent parks and alleys? Will the International District be allowed to further decline? Our citizens need to have some guarantee that there will be a concrete long-term plan that will remain in place for the future of the center, across time and changes in city government.

How many will be served at the center? Will they have a curfew? Will the residents be families? Will addiction treatment be part of the curriculum? Will the center address security issues if its presence draws crime to the area? Can the surrounding areas be assured that we will not become another Wells Park neighborhood? Will the residents/clients be vetted? What happens to the people who are turned away? Where will they go? There are so many more unanswered questions, these are just a few. We want to know that our homes and families will be able to feel safe in the area that many of us have called home for many years.

I thank you for taking all of this into consideration, and for taking the time to read this.

Priscilla Roberts

Sanchez, Suzanna A.

From: CUNNINGHAM-STEPHENS, JANET L CTR USAF AFGSC 377 MSG/CEN-CP
<janet.cunningham-stephens.ctr@us.af.mil>
Sent: Friday, September 17, 2021 3:44 PM
To: Sanchez, Suzanna A.
Cc: BOHANNON, HERBERT C III GS-14 USAF AFGSC 377 MSG/CEN; FIFE, JAMES M CIV USAF AFGSC 377 MSG/CEN; LECHEMINANT, PAUL T CTR USAF AFGSC 377 MSG/CEN-CE; SANDOVAL, DONNA S CTR USAF AFGSC 377 MSG/CEN-CE
Subject: RE: [Non-DoD Source] FW: ZHE Application Notice for 5400 Gibson BLVD SE and 5006 Gibson BLVD SE

Follow Up Flag: Follow up
Flag Status: Completed

Good Afternoon,

Regarding Agenda Items 28 and 29 mentioned below, Kirtland AFB concerns would be with incursions by unauthorized persons onto the military installation. In order for persons to be allowed access to the base, certain protocols must be followed. Should incursions occur, proper procedures will be used to detain/remove those individuals.

Thank you for the opportunity to provide input into this matter.

Best regards,

Janet Cunningham-Stephens

Lead Community Planner

NetCentric Technology, LLC

JCunningham-Stephens@asrcfederal.com | janet.cunningham-stephens.ctr@us.af.mil

📞: (505) 853-2747

2050 Wyoming Blvd SE, Bldg. 20686, Kirtland Air Force Base, NM 87117-5005

asrcfederal.com | Purpose driven. Enduring Commitment

From: Sanchez, Suzanna A. <suzannasanchez@cabq.gov>
Sent: Thursday, September 16, 2021 9:43 AM
To: CUNNINGHAM-STEPHENS, JANET L CTR USAF AFGSC 377 MSG/CEN-CP <janet.cunningham-stephens.ctr@us.af.mil>
Subject: [Non-DoD Source] FW: ZHE Application Notice for 5400 Gibson BLVD SE and 5006 Gibson BLVD SE

Good morning Janet,

Per the new Integrated Development Ordinance, (see citation below) the City is required to notify you of an application for a variance at the property located at 5400 Gibson and 5006 Gibson and I have attached the file for you to review. Please let me know if you have any questions.

6-4(I) REFERRALS TO COMMENTING AGENCIES

Following a determination that the application is complete, the Planning Director, ZEO, or any City staff designated to review applications in Table 6-1-1 shall refer applications for comment to the following departments or agencies, as noted below. Any comments received within 15 consecutive days after such a referral shall be considered with the application materials in any further review and decision-making procedures.

6-4(I)(3) Kirtland Air Force Base and City Aviation Department staff for applications that include development in the Kirtland Air Force Base Military Influence.

Agenda Item #28. VA-2021-00316 PR-2021-005834

City of Albuquerque Family and Community Services (Agent, Consensus Planning) requests a conditional use to allow an overnight shelter for Lot A1A1A/Lovelace Hospital, Lovelace Hospital, located at 5400 Gibson BLVD SE, zoned MX-H [Section 14-16-4-2]

Agenda Item #29. VA-2021-00317 PR-2021-005834

City of Albuquerque Family and Community Services (Agent, Consensus Planning) requests a conditional use to allow an overnight shelter for Lot 1, Swift Addn, located at 5006 Gibson BLVD SE, zoned MX-H [Section 14-16-4-2]

Thank you,

Suzie Sanchez



SUZIE SANCHEZ

zhe administrative assistant

o 505.924.3894

e suzannasanchez@cabq.gov

cabq.gov/planning

Sanchez, Suzanna A.

From: Robert Pierson <rpierson@iglide.net>
Sent: Wednesday, September 15, 2021 4:37 PM
To: Sanchez, Suzanna A.
Subject: City of Albuquerque application by Consensus Planning
Attachments: Attachment 1 Shelters by Council District - Copy.pdf; Attachment 2 nov2020areacommandcomparison.pdf; Response to ZHE Application.pdf

Good afternoon,

Please find the following attached documents in opposition to the City's application for an overnight shelter on Gibson SE.

Please add these to the record and if you would please let me know that you received these I would be grateful.

Thank you,

Robert Pierson

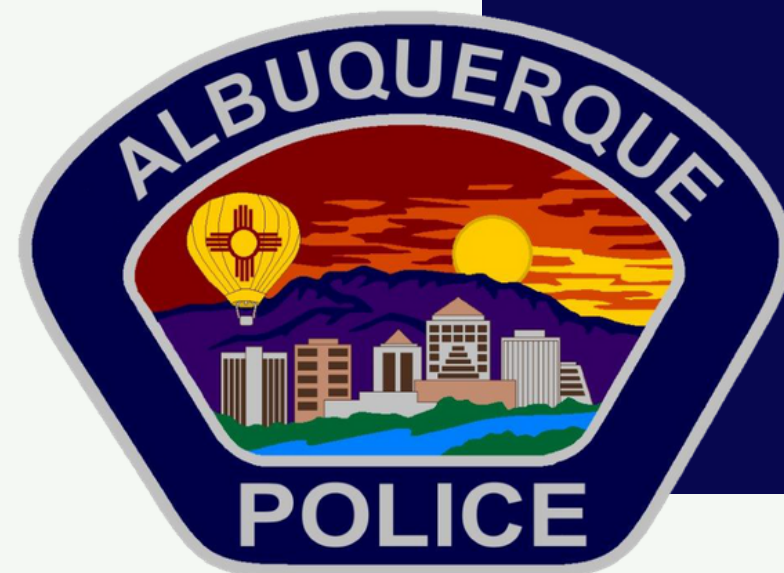
District	Type	Name	Zipcode	Address	
1	Men's Shelter	Westside Emergency Shelter	87121	7440 Jim McDowell Rd, Albuquerque, NM 87121	Lan Sena
2	Men's Shelter	Albuquerque Opportunity Center	87107	715 Candelaria Rd NE, Albuquerque, NM 87107	Isaac Benton
2	Men's Shelter	S.A.F.E. House	87102	Albuquerque, NM 87102	Isaac Benton
2	Men's Shelter	Good Shepherd Center	87102	218 Iron Ave SW, Albuquerque, NM 87102	Isaac Benton
2	Men's Shelter	Steelbridge Resource Center	87102	2021 2nd St NW, Albuquerque, NM 87102	Isaac Benton
2	Men's Shelter	St Martin's Hospitality Center	87102	1201 3rd St NW, Albuquerque, NM 87102	Isaac Benton
2	Men's Shelter	SteelBridge	87102	525 2nd St SW, Albuquerque, NM 87102	Isaac Benton
2	Men's Shelter	Albuquerque Healthcare for the Homeless: Harn	87102	1217 1st St NW, Albuquerque, NM 87102	Isaac Benton
2	Men's Shelter	The Rock at NoonDay	87102	2400 2nd St NW, Albuquerque, NM 87102	Isaac Benton
2	Women's Shelter	S.A.F.E. House	87102	Albuquerque, NM 87102	Isaac Benton
2	Women's Shelter	Albuquerque Opportunity Center	87107	715 Candelaria Rd NE, Albuquerque, NM 87107	Isaac Benton
2	Women's Shelter	SteelBridge	87102	525 2nd St SW, Albuquerque, NM 87102	Isaac Benton
2	Women's Shelter	Good Shepherd Center	87102	218 Iron Ave SW, Albuquerque, NM 87102	Isaac Benton
2	Women's Shelter	Crossroads for Women	87102	235-239 Elm St NE, Albuquerque, NM 87102	Isaac Benton
2	Behavioral & Mental Health Services	UNM Psychiatric Center	87106	2600 Marble Ave, Albuquerque, NM 87106	Isaac Benton
2	Behavioral & Mental Health Services	St Martin's Hospitality Center	87102	1201 3rd St NW, Albuquerque, NM 87102	Isaac Benton
2	Drug/Alcohol Treatment	Central New Mexico Treatment Center	87102	630 Haines Ave NW, Albuquerque, NM 87102	Isaac Benton
2	Drug/Alcohol Treatment	Albuquerque Center for Hope and Recovery	87102	913 2nd St NW, Albuquerque, NM 87102	Isaac Benton
2	Halfway Houses/Transitional Housing	La Pasada Halfway House	87102	2206 4th St NW, Albuquerque, NM 87102	Isaac Benton
2	Halfway Houses/Transitional Housing	Oxford House Hazeldine	87102	629 Walter St SE, Albuquerque, NM 87102	Isaac Benton
2	Health Centers	Albuquerque Health Care for the Homeless	87102	1217 1st St NW, Albuquerque, NM 87102	Isaac Benton
2	Social Services	Child & Family Development Division	87106	Albuquerque, NM 87106	Isaac Benton
2	Social Services	John Marshall Health and Social Services Center	87102	1500 Walter St SE, Albuquerque, NM 87102	Isaac Benton
2	Social Services	NM Human Services Department	87106	1711 Randolph Rd SE, Albuquerque, NM 87106	Isaac Benton
2	Social Services	Coronado Park Homeless Ministry: Meal Site	87102	301 McKnight Ave, Albuquerque, NM 87102	Isaac Benton
3	Social Services	Catholic Charities of Central New Mexico	87105	2010 Bridge Blvd SW, Albuquerque, NM 87105	Klarissa Peña
4	Behavioral & Mental Health Services	Central Desert Behavioral Health Hospital	87107	1525 N Renaissance Blvd NE, Albuquerque, NM 87107	Brook Bassan
5					Cynthia D. Borrego
6	Men's Shelter	Gateway Shelter (proposed)	87108	5400 Gibson Blvd SE, Albuquerque, NM 87108	Pat Davis
6	Men's Shelter	HopeWorks	87106	1515 Yale Blvd SE, Albuquerque, NM 87106	Pat Davis
6	Men's Shelter	St. Martin's Hospitality Center - Yale Campus	87106	1515 Yale Blvd SE, Albuquerque, NM 87106	Pat Davis
6	Women's Shelter	Maya's Place	87108	640 Grove St SE, Albuquerque, NM 87108	Pat Davis
6	Women's Shelter	UNM Women's Resource Center	87131	302 Cornell Dr, Albuquerque, NM 87131	Pat Davis
6	Youth Shelters	New Day Youth & Family Services	87108	2820 Ridgecrest Dr SE, Albuquerque, NM 87108	Pat Davis
6	Behavioral & Mental Health Services	Albuquerque Family Mental Health Clinic	87108	401 San Pedro Dr NE, Albuquerque, NM 87108	Pat Davis
6	Behavioral & Mental Health Services	Calamus Center for Integrative Mental Health	87108	120 Madeira Dr NE, Albuquerque, NM 87108	Pat Davis
6	Behavioral & Mental Health Services	Conciencia Mental Health LLC	87108	219 Sierra Dr SE, Albuquerque, NM 87108	Pat Davis
6	Behavioral & Mental Health Services	Haven Behavioral Hospital of Albuquerque	87108	5400 Gibson Blvd SE, Albuquerque, NM 87108	Pat Davis
6	Behavioral & Mental Health Services	Perfectly Imperfect LLC	87108	146 Quincy St NE, Albuquerque, NM 87108	Pat Davis
6	Behavioral & Mental Health Services	Therapeutic Living Services Inc	87108	5601 Domingo Rd NE, Albuquerque, NM 87108	Pat Davis
6	Behavioral & Mental Health Services	Public Health Department	87108	7525 Zuni Rd SE B, Albuquerque, NM 87108	Pat Davis
6	Behavioral & Mental Health Services	East Central Multi Services Center	87108	306 San Pablo St SE, Albuquerque, NM 87108	Pat Davis

6	Behavioral & Mental Health Services	Bernalillo County Department of Behavioral Health	87108	5901 Zuni Rd SE, Albuquerque, NM 87108	Pat Davis
6	Drug/Alcohol Treatment	Addiction Solutions	87106	3631, 110 Columbia Dr SE #53, Albuquerque, NM 87106	Pat Davis
6	Drug/Alcohol Treatment	Albuquerque Health Services	87108	112 Monroe St NE, Albuquerque, NM 87108	Pat Davis
6	Drug/Alcohol Treatment	Turquoise Lodge Hospital	87108	5400 Gibson Blvd SE, Albuquerque, NM 87108	Pat Davis
6	Drug/Alcohol Treatment	County Abuse Programs	87108	5901 Zuni Rd SE, Albuquerque, NM 87108	Pat Davis
6	Drug/Alcohol Treatment	CARE Detox	87108	5901 Zuni Rd SE, Albuquerque, NM 87108	Pat Davis
6	Drug/Alcohol Treatment	Shadow Mountain Recovery at Albuquerque	87108	5400 Gibson Blvd SE, Albuquerque, NM 87108	Pat Davis
6	Halfway Houses/Transitional Housing	ABQ Indian Center	87108	105 Texas St SE, Albuquerque, NM 87108	Pat Davis
6	Halfway Houses/Transitional Housing	Wainwright Manor	87108	5601 Gibson Blvd SE, Albuquerque, NM 87108	Pat Davis
6	Halfway Houses/Transitional Housing	Transition For Living	87108	6231 Gibson Blvd SE, Albuquerque, NM 87108	Pat Davis
6	Halfway Houses/Transitional Housing	Transitional Living Services Inc	87108	4020 Central Ave SE, Albuquerque, NM 87108	Pat Davis
6	Halfway Houses/Transitional Housing	Oxford House Pennsylvania	87108	8406 San Juan Rd NE, Albuquerque, NM 87108	Pat Davis
6	Halfway Houses/Transitional Housing	Oxford House Turquoise	87108	633 Arizona St SE, Albuquerque, NM 87108	Pat Davis
6	Halfway Houses/Transitional Housing	Oxford House Tahiti	87108	6512 Anderson Ave SE, Albuquerque, NM 87108	Pat Davis
6	Halfway Houses/Transitional Housing	Tiny Home Village	87108	105 Texas St SE, Albuquerque, NM 87108	Pat Davis
6	Health Centers	One Hope Centro de Vida Health Center	87108	133 Virginia St NE, Albuquerque, NM 87108	Pat Davis
6	Health Centers	East Central Health and Social Service Center	87108	7525 Zuni Rd SE, Albuquerque, NM 87108	Pat Davis
6	Health Centers	Young Children's Health Center	87108	306 San Pablo St SE # A, Albuquerque, NM 87108	Pat Davis
6	Health Centers	Albuquerque Indian Center	87108	105 Texas St SE, Albuquerque, NM 87108	Pat Davis
6	Health Centers	All Nations Wellness and Healing Center	87108	ABQ161076, Albuquerque, NM 87108	Pat Davis
6	Health Centers	First Nations Community HealthSource	87108	7317 Central Ave NE, Albuquerque, NM 87108	Pat Davis
6	Health Centers	First Nations Community HealthSource (Zuni Clinic)	87108	5608 Zuni Rd SE, Albuquerque, NM 87108	Pat Davis
6	Social Services	County Social Services	87106	435-499 Amherst Dr NE, Albuquerque, NM 87106	Pat Davis
6	Social Services	Vocational Rehabilitation	87108	5400 Gibson Blvd SE, Albuquerque, NM 87108	Pat Davis
6	Social Services	New Creation Church: Meal Site	87108	8016 Zuni Rd SE, Albuquerque, NM 87108	Pat Davis
6	Social Services	Food Distribution Center - Fray Antonio Kitchen:	87108	404 San Mateo Blvd NE, Albuquerque, NM 87108	Pat Davis
6	Social Services	La Mesa Presbyterian Church: Meal Site	87108	7401 Copper Ave NE, Albuquerque, NM 87108	Pat Davis
6	Social Services	Transgender Resource Center of New Mexico	87108	5600 Domingo Rd NE, Albuquerque, NM 87108	Pat Davis
6	Social Services	God's Warehouse: Meals	87108	8011 Central Ave NE, Albuquerque, NM 87108	Pat Davis
6	Social Services	Compassion Center w/Rev. Joanne Landry	87108	7501 Trumbull Ave SE, Albuquerque, NM 87108	Pat Davis
6	Social Services	Restoration Ministries Church: Meal Site	87108	824 San Mateo Blvd SE, Albuquerque, NM 87108	Pat Davis
6	Social Services	Phil Chacon Park: Pick-up point for shelters	87108	7600 Southern Ave SE, Albuquerque, NM 87108	Pat Davis
6	Social Services	New Day and Drop In Outreach	87108	142 Truman St NE, Albuquerque, NM 87108	Pat Davis
6	Social Services	Jack and Jill Park: Shelter Pickup Point	87108	Albuquerque, NM 87108	Pat Davis
6	Social Services	Wilson Park: Shelter Pickup Point	87108	6000 Anderson Ave SE, Albuquerque, NM 87108	Pat Davis
6	Social Services	Zia Community Cares LLC	87108	5400 Gibson Blvd SE Building 11, Albuquerque, NM 87108	Pat Davis
6	Halfway Houses/Transitional Housing	Crossroads for Women	87108	640 Grove St SE, Albuquerque, NM 87108	Pat Davis
7	Men's Shelter	VA Hospital- Health Care for Homeless Veterans	87108	1501 San Pedro Dr SE, Albuquerque, NM 87108	Diane G. Gibson
7	Women's Shelter	Coalition To Stop Violence Against Native Women	87109	4600 Montgomery Blvd NE b202, Albuquerque, NM 87109	Diane G. Gibson
7	Women's Shelter	Women's Housing Coalition	87110	3005 San Pedro Dr NE, Albuquerque, NM 87110	Diane G. Gibson
7	Behavioral & Mental Health Services	Albuquerque Behavioral Health	87110	8200 Mountain Rd NE, Albuquerque, NM 87110	Diane G. Gibson
7	Behavioral & Mental Health Services	Heights Mental Health	87110	1101 Cardenas Dr NE #206, Albuquerque, NM 87110	Diane G. Gibson
7	Behavioral & Mental Health Services	ABQ Behavioral Services/ABQ Psychiatric Services	87110	2900 Louisiana Blvd NE Suite C1, Albuquerque, NM 87110	Diane G. Gibson

7	Behavioral & Mental Health Services	NMAIMH	87110	630 Manzano St NE B, Albuquerque, NM 87110	Diane G. Gibson
7	Drug/Alcohol Treatment	Recovery Based Solutions	87110	3200 Carlisle Blvd NE # 228, Albuquerque, NM 87110	Diane G. Gibson
7	Drug/Alcohol Treatment	Shadow Mountain Recovery Intensive Outpatient	87110	7005 Prospect Pl NE, Albuquerque, NM 87110	Diane G. Gibson
7	Drug/Alcohol Treatment	Focused Recovery of New Mexico	87110	3939 San Pedro Dr NE, Albuquerque, NM 87110	Diane G. Gibson
7	Halfway Houses/Transitional Housing	Oxford House Montgomery Park	87110	1402 Hendola Dr NE, Albuquerque, NM 87110	Diane G. Gibson
7	Halfway Houses/Transitional Housing	Oxford House Fair Heights	87110	2833 Bel Air Dr NE, Albuquerque, NM 87110	Diane G. Gibson
7	Halfway Houses/Transitional Housing	Oxford House Palomas	87110	2729 Palomas Dr NE, Albuquerque, NM 87110	Diane G. Gibson
7	Halfway Houses/Transitional Housing	Oxford House Candelaria	87112	1209 Childers Dr NE, Albuquerque, NM 87112	Diane G. Gibson
7	Halfway Houses/Transitional Housing	Oxford House Indian School	87112	9600 Euclid Ave NE, Albuquerque, NM 87112	Diane G. Gibson
7	Halfway Houses/Transitional Housing	Oxford House Zimmerman	87110	6105 Zimmerman Ave NE, Albuquerque, NM 87110	Diane G. Gibson
7	Halfway Houses/Transitional Housing	Oxford House Mountain Vista	87110	1309 Florida St NE, Albuquerque, NM 87110	Diane G. Gibson
7	Health Centers	Bernalillo County Wellesley Health Center	87107	2400 Wellesley Dr NE, Albuquerque, NM 87107	Diane G. Gibson
7	Health Centers	First Nations Community Healthsource Truman	87110	625 Truman St NE, Albuquerque, NM 87110	Diane G. Gibson
7	Social Services	Child Protective Services	87110	4501 Indian School Rd NE, Albuquerque, NM 87110	Diane G. Gibson
7	Social Services	New Mexico Coalition to End Homelessness	87110	2501 San Pedro Dr NE suite 111, Albuquerque, NM 87110	Diane G. Gibson
7	Social Services	NM Income Support Division - Human Services C	87110	4330 Cutler Ave NE, Albuquerque, NM 87110	Diane G. Gibson
8	Drug/Alcohol Treatment	Turning Point Recovery Center	87111	9201 Montgomery Blvd NE #5, Albuquerque, NM 87111	Diane G. Gibson
8	Halfway Houses/Transitional Housing	Oxford House Morris	87112	2413 Elizabeth St NE, Albuquerque, NM 87112	Diane G. Gibson
8	Halfway Houses/Transitional Housing	Oxford House Oasis Hills	87111	12001 Golden Gate Ave NE, Albuquerque, NM 87111	Trudy E. Jones
9	Women's Shelter	Barrett House	87112	10300 Constitution Ave NE, Albuquerque, NM 87112	Trudy E. Jones
9	Halfway Houses/Transitional Housing	Veterans Integration Centers (VIC)	87123	13032 Central Ave SE, Albuquerque, NM 87123	Trudy E. Jones
9	Halfway Houses/Transitional Housing	Oxford House Constitution	87112	11013 Constitution Ave NE, Albuquerque, NM 87112	Don Harris
9	Halfway Houses/Transitional Housing	Oxford House Snowheights	87112	2113 June St NE, Albuquerque, NM 87112	Don Harris
9	Halfway Houses/Transitional Housing	Oxford House Elizabeth	87112	2207 Elizabeth St NE, Albuquerque, NM 87112	Don Harris
9	Halfway Houses/Transitional Housing	Oxford House Ponderosa	87112	1608 Singletary Dr NE, Albuquerque, NM 87112	Don Harris
9	Social Services	Catholic Community Services	87112	10601 Lomas Blvd NE # 112, Albuquerque, NM 87112	Don Harris
BC	Men's Shelter	Joy Junction Shelter	87105	4500 2nd St SW, Albuquerque, NM 87105	
BC	Women's Shelter	Joy Junction Shelter	87105	4500 2nd St SW, Albuquerque, NM 87105	
BC	Youth Shelters	Amistad Runaway Facility	87105	1706 El Centro Familiar Blvd SW, Albuquerque, NM 87105	
BC	Drug/Alcohol Treatment	Recovery Services of New Mexico Isleta	87105	1711 Isleta Blvd SW, Albuquerque, NM 87105	
BC	Drug/Alcohol Treatment	Recovery Services of New Mexico Five Points Cli	87105	1528 5 Points Rd SW, Albuquerque, NM 87105	
BC	Health Centers	First Choice Community Healthcare - South Valle	87105	2001 N Centro Familiar Blvd SW suite a, Albuquerque, NM 87105	
Fed	Social Services	Department-Veteran Affairs Lib			

2020

Area Command Comparison



Crime Stats

Information About Albuquerque Crime Stats

In 2018, the Albuquerque Police Department began reporting crime statistics using the Federal Bureau of Investigation's National Incident-Based Reporting System (NIBRS). NIBRS is the most current national framework for reporting crime and replaces the FBI's Summary Reporting System (SRS). This change is important because NIBRS provides more comprehensive and detailed information about crimes against person, crimes against property and crimes against society occurring in law enforcement jurisdictions across the country.

The data in this report is based on the official data that APD sends to the FBI. But it is important to note that the numbers in this report differ slightly from the numbers published in the FBI reports. APD sends NIBRS data to the FBI on a semiannual basis and this data is based on the reports available at that point in time. The APD's crime data system is dynamic and additional information may be added or refined after the data are sent to the FBI. Although the FBI updates its data bases regularly it does not update published reports.

The data in this report were obtained from APD's Tiburon RMS computer system on Oct. 16, 2020. Crime statistics in future reports will differ somewhat from these statistics because this report is also based on a fixed point in time.

Crime Definitions

Source: FBI Uniform Crime Reporting Program, National Incident-Based Reporting System

Aggravated Assault: An unlawful attack by one person upon another wherein the offender uses a weapon or displays it in a threatening manner, or the victim suffers obvious severe or aggravated bodily injury involving apparent broken bones, loss of teeth, possible internal injury, severe laceration, or loss of consciousness. In the definition above, a weapon is a commonly known weapon (a gun, knife, club, etc.) or any other item becoming one, although not usually thought of as a weapon, when used in a manner which could cause the types of severe bodily injury described.

Murder and Nonnegligent Manslaughter: The willful (nonnegligent) killing of one human being by another. As a general rule, agencies should classify in this category any death due to injuries received in a fight, argument, quarrel, assault, or commission of a crime. Although LEAs may charge offenders with lesser offenses, e.g., Negligent Manslaughter, agencies should report the offense as Murder and Nonnegligent Manslaughter if the killing was willful or intentional.

Burglary/Breaking & Entering: The unlawful entry into a building or other structure with the intent to commit a felony or a theft. LEAs should classify offenses locally known as Burglary (any degree), unlawful entry with intent to commit a larceny or felony, breaking and entering with intent to commit a larceny, housebreaking, and safecracking as burglary. However, because Larceny/Theft is an element of Burglary, agencies should not report the Larceny as a separate offense if it is associated with the unlawful entry of a structure. The element of trespass is essential to the offense of Burglary/ Breaking and Entering.

Larceny/Theft Offenses: The unlawful taking, carrying, leading, or riding away of property from the possession or constructive possession of another person.

Crime Definitions

Source: FBI Uniform Crime Reporting Program, National Incident-Based Reporting System

Motor Vehicle Theft: The theft of a motor vehicle.

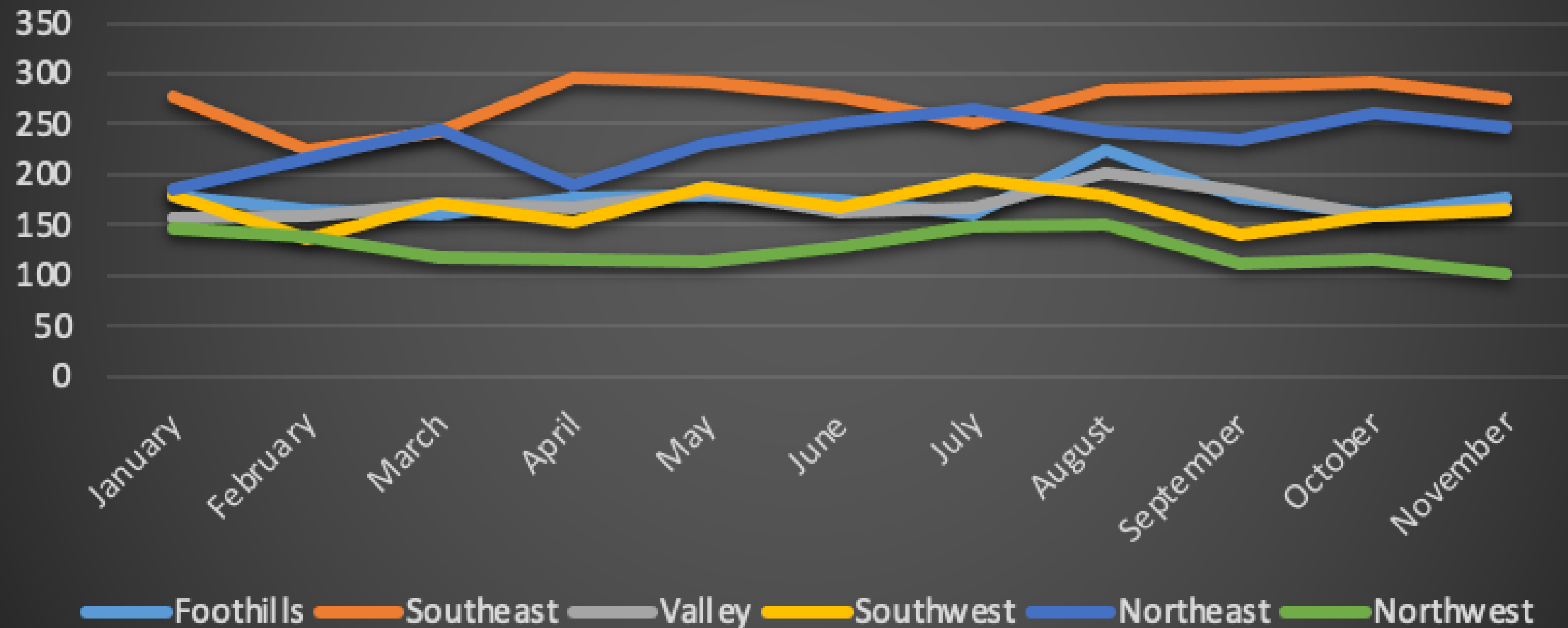
The national UCR Program defines motor vehicle as a motor vehicle is a self-propelled vehicle that runs on the surface of land and not on rails and that fits one of the following descriptions:

- Automobiles—sedans, coupes, station wagons, convertibles, taxicabs, or other similar motor vehicles serving the primary purpose of transporting people

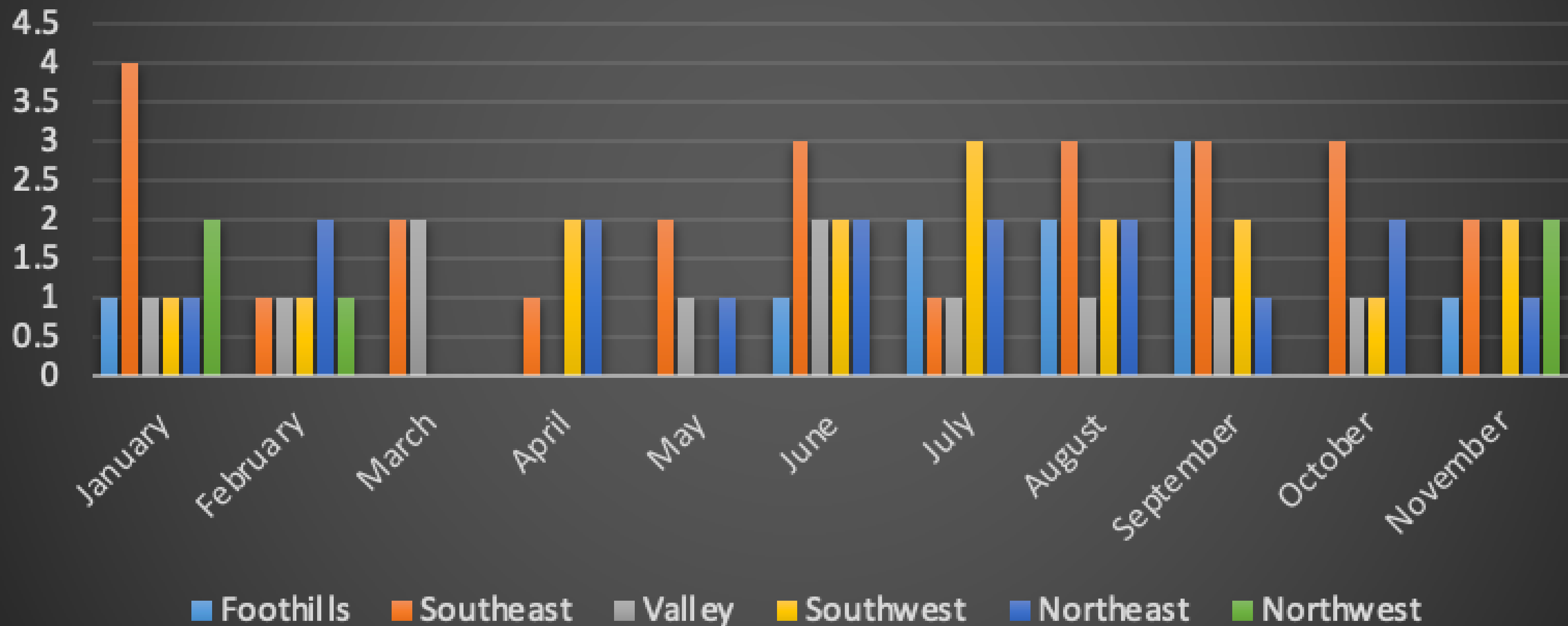
Robbery: The taking or attempting to take anything of value under confrontational circumstances from the control, custody, or care of another person by force or threat of force or violence and/or by putting the victim in fear of immediate harm

Robbery involves the offender taking or attempting to take something of value from a victim, usually the property owner or custodian, by the use of force or threat of force. (The victim must be present.) If there is no direct confrontation and the victim is not in fear of immediate harm, LE should report Extortion. Though direct confrontation occurs in Pocket-pickings or Purse-snatchings, force or threat of force is absent. However, if during a Purse-snatching or other such crime, the offender uses force or threat of force to overcome the active resistance of the victim, LE should classify the offense as Robbery.

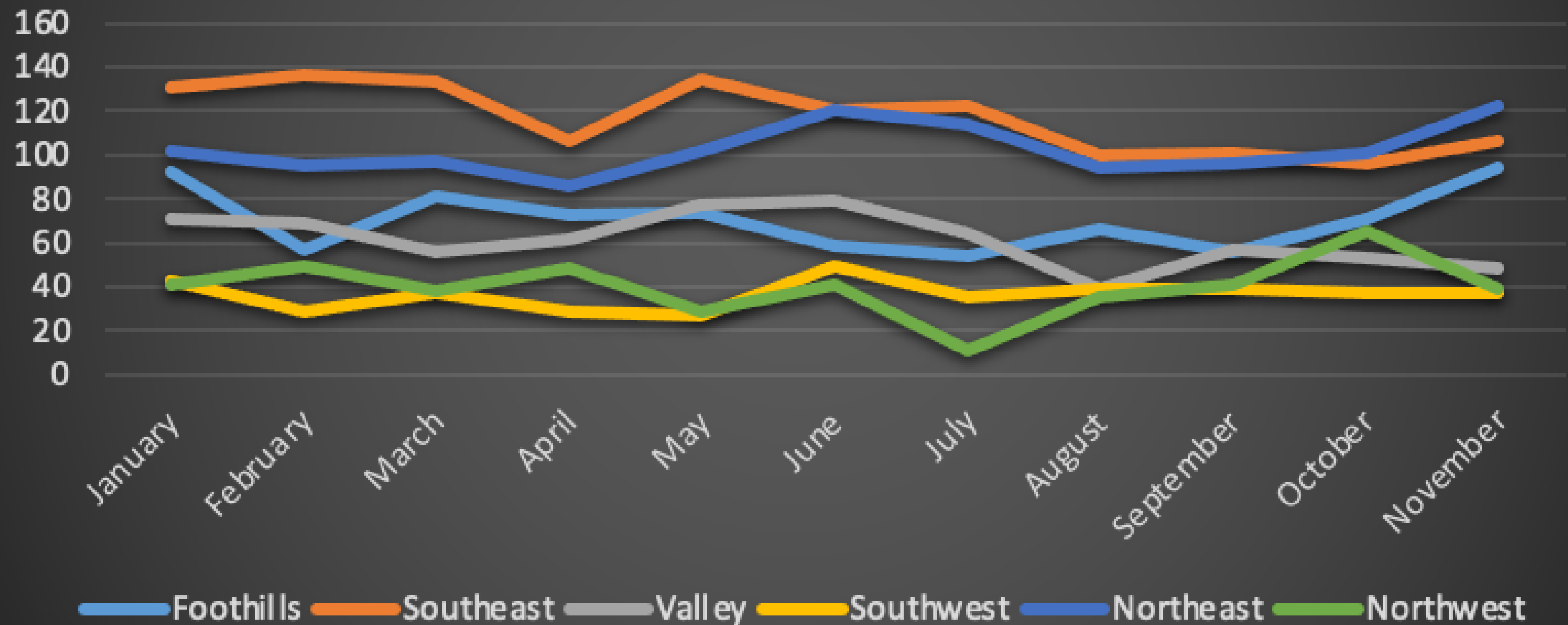
Aggravated Offenses 2020 by Area Command



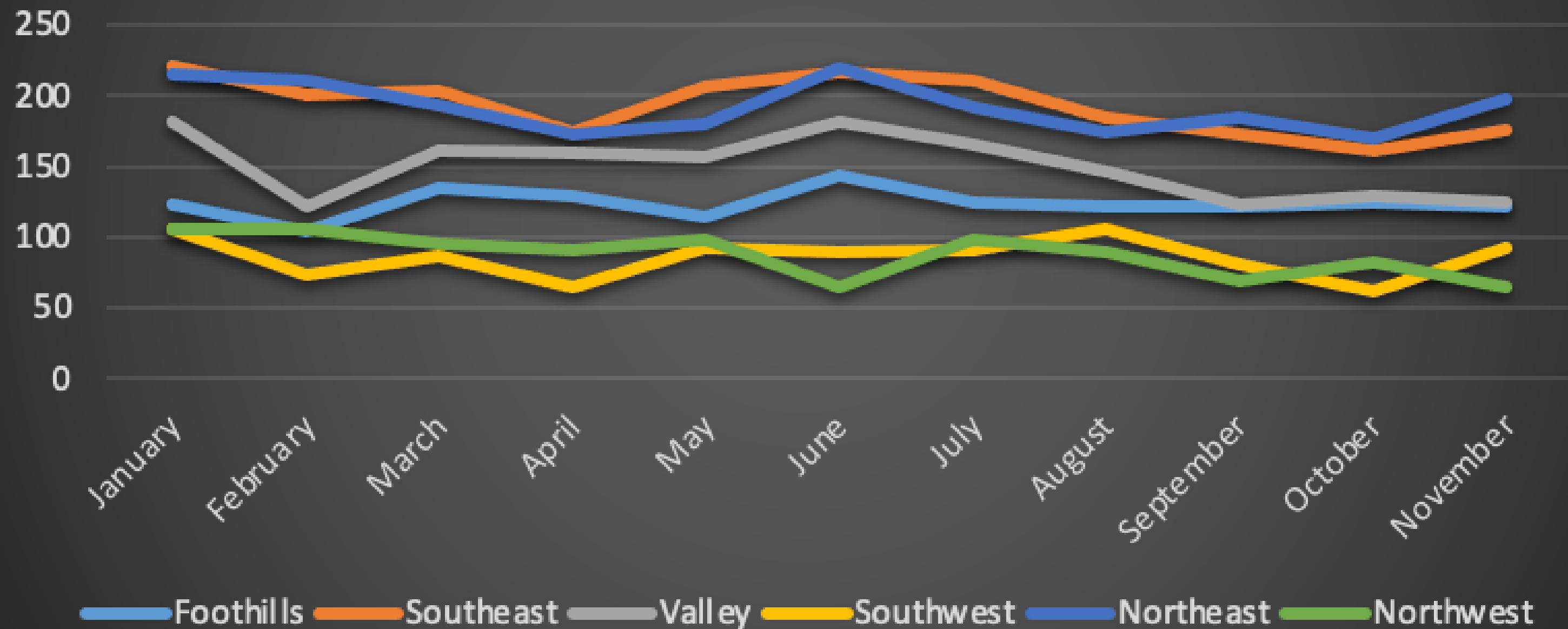
Homicide Offenses 2020 by Area Command



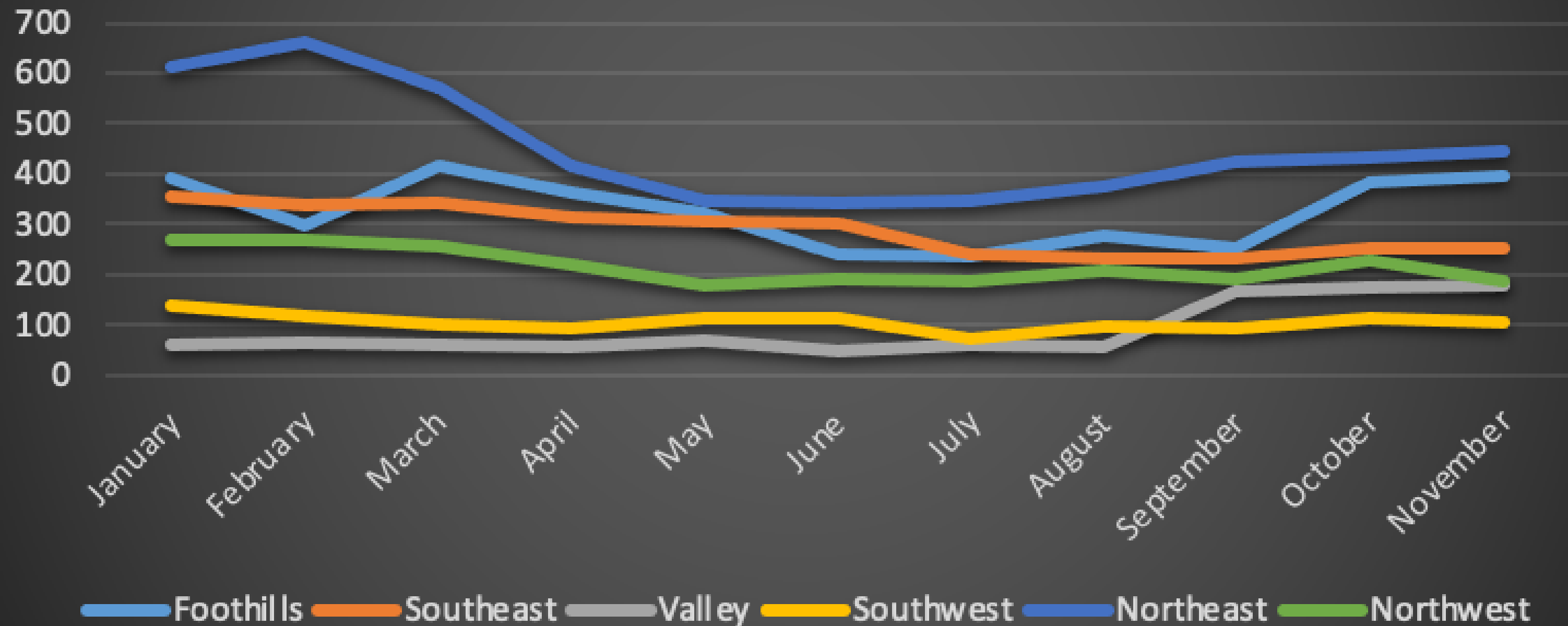
Burglary/Breaking & Entering 2020 by Area Command



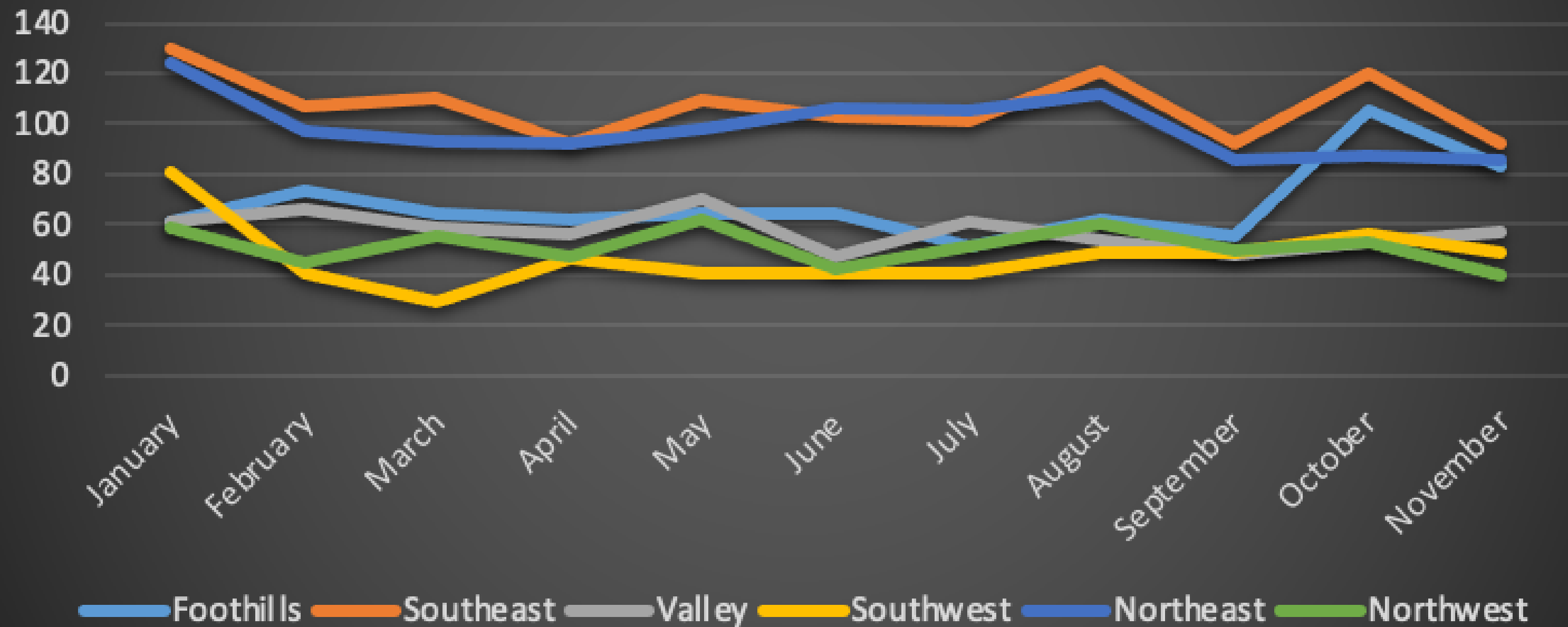
Destruction/Damage/Vandalism 2020 by Area Command



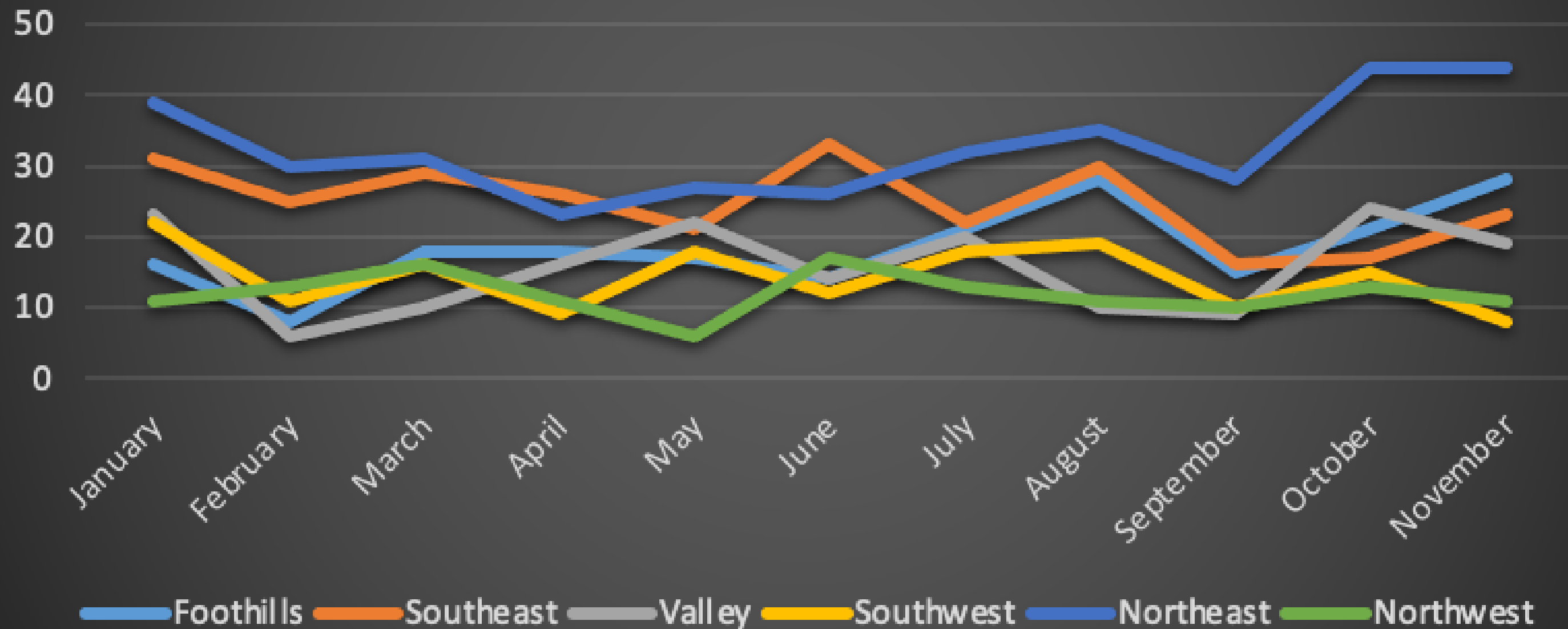
Larceny/Theft Offenses 2020 by Area Command



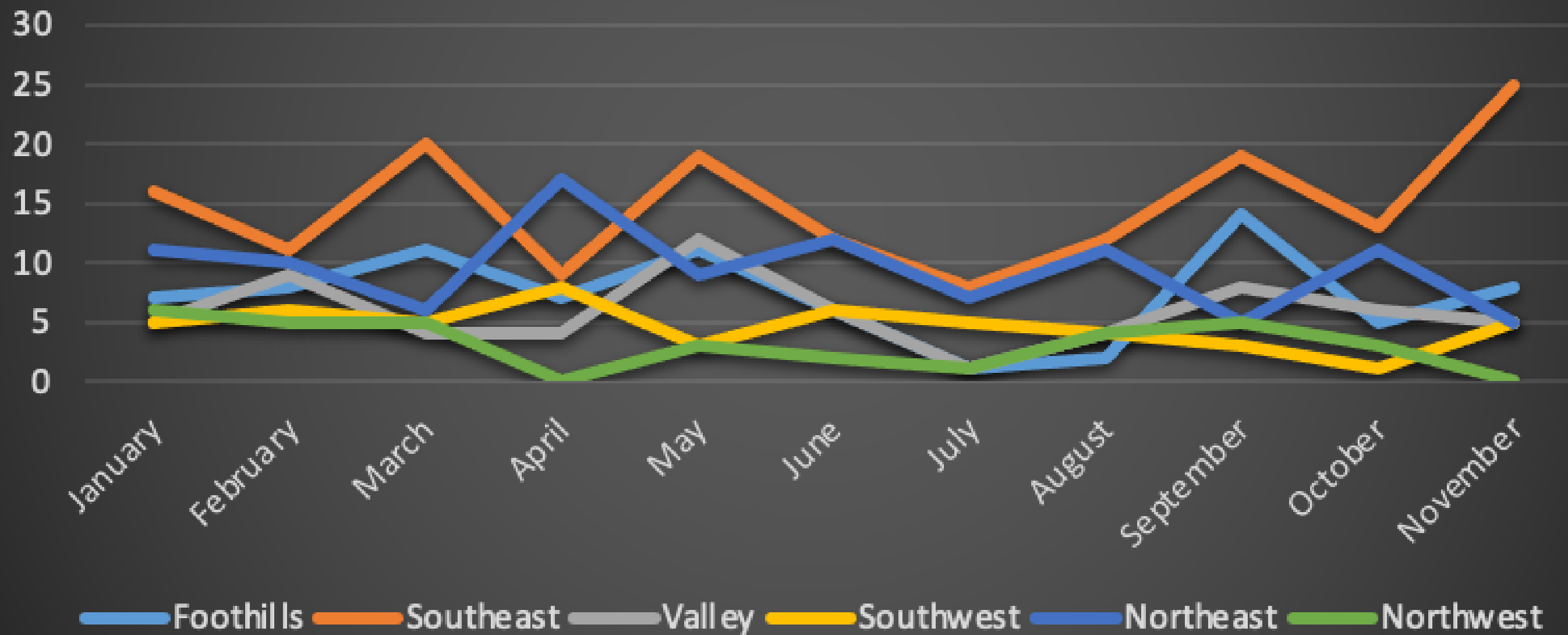
Motor Vehicle Theft 2020 by Area Command



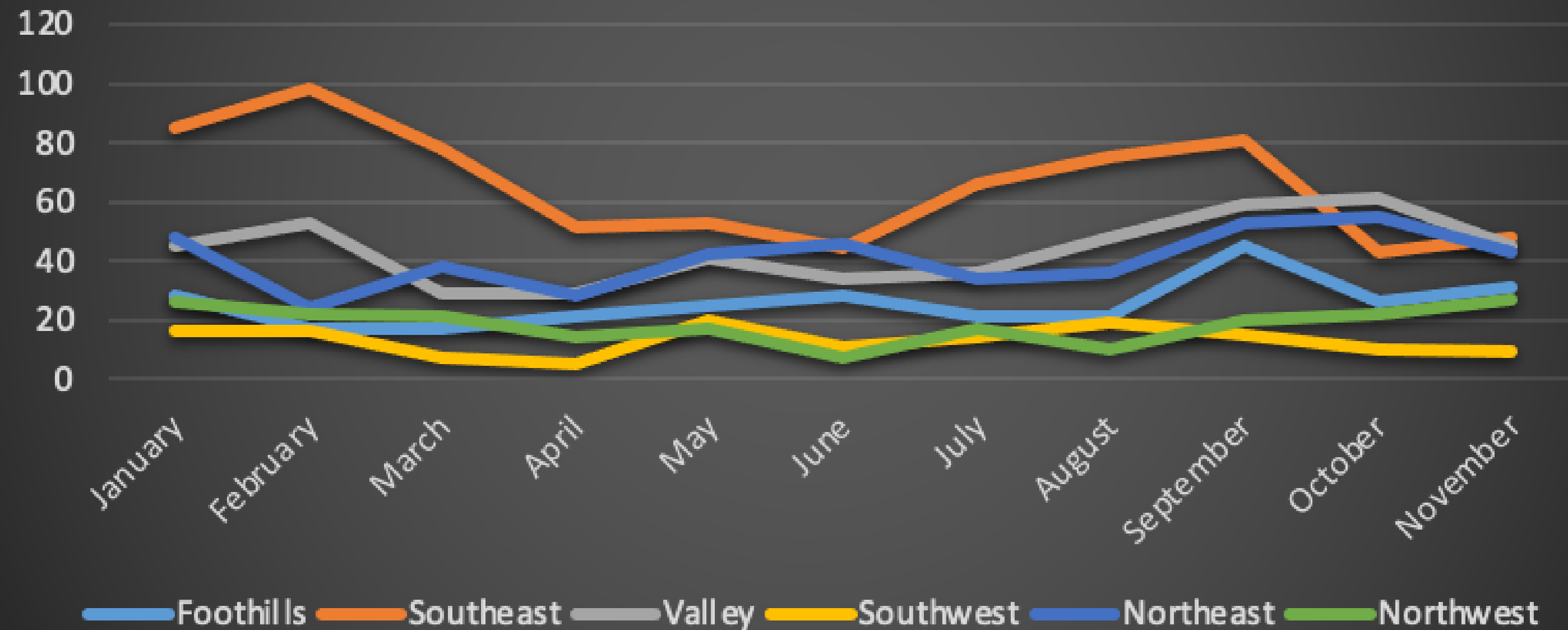
Robbery 2020 by Area Command



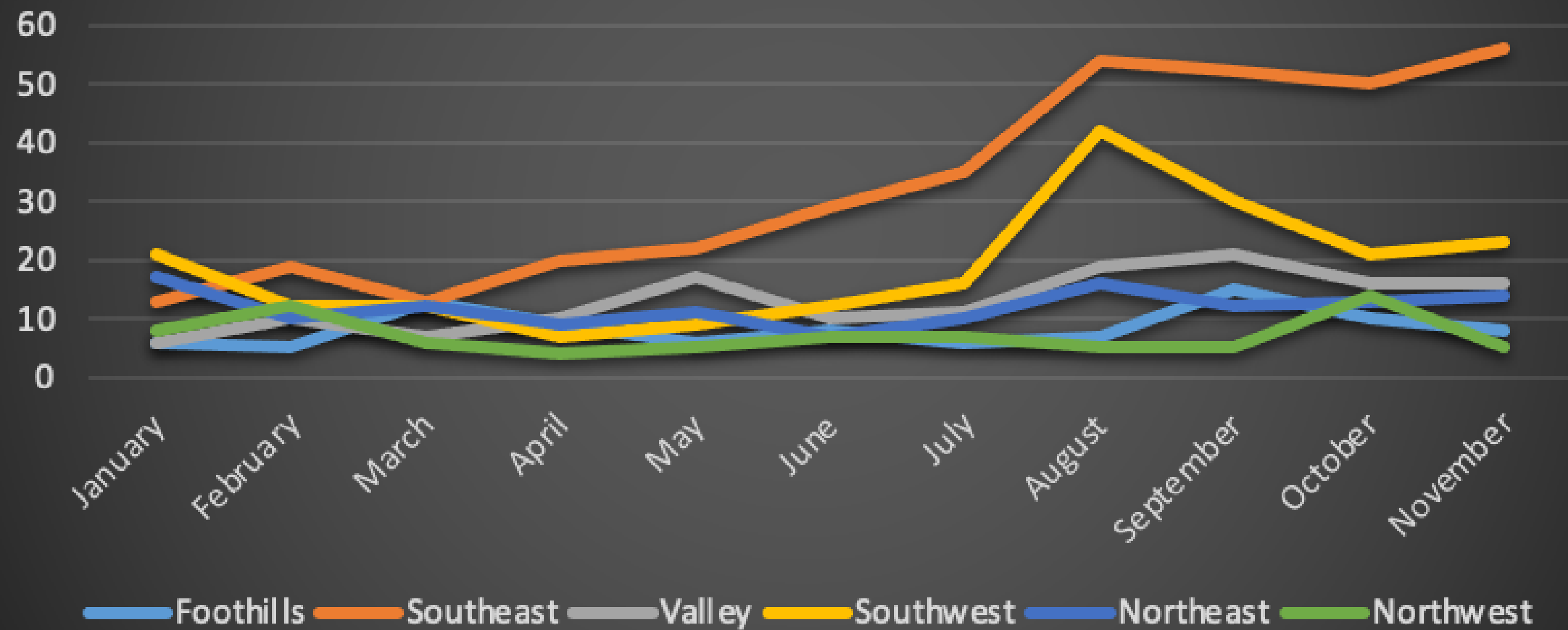
Stolen Property 2020 by Area Command



Drugs/Narcotics 2020 by Area Command



Weapons Violations 2020 by Area Command



Robert Lucero, Zoning Hearing Examiner

Zoning Hearing Examiner Lucero,

SUMMARY

This letter is to address an application by the City of Albuquerque for an Overnight Shelter in Council District 6. There are many reasons that this request is inappropriate and will be covered in detail in the following letter, along with the attachments. The request is inappropriate for the following reasons:

1. The application is inconsistent with City Policies from the Comprehensive Plan
2. The application is inconsistent with the Integrated Development Ordinance (IDO)
3. The request is injurious to the neighborhood and the surrounding community
4. It will negatively affect pedestrian connectivity in the area.
5. This site was not considered at any location within the city north of Menaul Blvd and all the areas that were considered already have homeless communities.
 - a. The old Lovelace hospital on Gibson
 - b. University of New Mexico property near Lomas and Interstate 25
 - c. Montessa Park, south of the Sunport
 - d. An area near Second and Interstate 40
 - e. Continue to use the old West Side Jail 20 miles outside the city limits and build new facilities at that location.

No locations along other significant transit routes north of Menaul Blvd were considered.

The request is inconsistent with the MX-H zone as the Conditional Use Approval will create an inappropriate use of the area. The proposed Overnight Shelter is being proposed in Council District 6 which already *has the highest level of homeless shelters*, and homeless living on the streets (See Attachment 1).

ANALYSIS

The proposal to add an additional shelter to the area is likely to cause additional violent crime in the area according an article in the American Psychological Association- New insights on homelessness and violence

“Fischer and his team didn't find any difference between street homelessness and sheltered homelessness when it came to incidence of non-violent crime, but things were different for violent criminal activity. They found that homeless people bouncing from shelter to shelter were more likely than homeless people living on the street to commit

violent crimes, such as robbery and assault. One explanation for that could be that for people who are already stressed, living in close quarters with other similarly stressed individuals can lead to conflict and violence, Fischer says.”

<https://www.apa.org/monitor/2009/12/violence>

Response

It appears the key issue identified here is movement from shelter to shelter causes a rise in violence, this shelter theoretically would move people from this location to another more permanent location, but the City cannot identify where the homeless would be placed.

There is a large portion of the homeless population that have addictions and criminals prey on these addictions. Utah considered a Bill to increase penalties (making it a felony) for criminals selling drugs within 100 feet of a homeless shelter.

<https://www.deseret.com/2017/2/22/20606802/lawmakers-support-making-drug-dealing-near-homeless-shelters-a-felony>

Additionally, Council District 6 has the highest overall crime rates in the City (attachment 2) adding another homeless shelter to the area that has been shown to have elevated rates of crime. The City should place this use in a District with lower crime rates so that the burden on the Southeast Area Command (which is overworked and understaffed) is not added to.

City Conditional Use Approval Criteria and Responses

IDO language for Conditional use Approval

6-6(A) CONDITIONAL USE APPROVAL

All applicable provisions of Section 14-16-6-4 (General Procedures) apply unless specifically modified by the provisions of this Subsection 14-16-6-6(A) or the DPM.

6-6(A)(1) Applicability

6-6(A)(1)(a) This Subsection 14-16-6-6(A) applies to all applications for a use listed as conditional (i.e. Conditional Primary, Conditional Accessory, or Conditional Vacant if the application is filed after the primary building on the property has been vacant for 5 years or more) in Table 4-2-1.

Conditional uses are only allowed if approved pursuant to this Subsection 14-16-6-6(A).

6-6(A)(1)(b) A Conditional Use Approval is only valid for the location stated in the application and cannot be transferred to a new location.

6-6(A)(1)(c) If an approved conditional use is discontinued for a period of 12 consecutive months, it may not be reestablished without a new Conditional Use Approval.

6-6(A)(2) Procedure

6-6(A)(2)(a) The City Planning Department staff shall review the application and forward a recommendation to the ZHE pursuant to all applicable provisions of Section 14-16-6-4 (General Procedures).

6-6(A)(2)(b) The ZHE shall conduct a public hearing on the application and make a written decision on the application pursuant to all applicable provisions of Section 14-16-6-4 (General Procedures).

6-6(A)(3) Review and Decision Criteria

An application for a Conditional Use Approval shall be approved if it meets all of the following criteria:

6-6(A)(3)(a) It is consistent with the adopted ABC Comp Plan (City Comprehensive Plan), as amended.

City Comprehensive Plan

Under “A Vision for Albuquerque & Bernalillo County” page 3-3

“As the county and city grow in population over the next 20 years, neighborhoods will be safer and easier places to walk through and between. The positive characteristics that contribute to their unique identities will be protected and enhanced”

“The City and the County commit to analyzing the health of our communities and the geographic distribution of our public investments and assets. Where gaps are identified, governments will collaborate with communities, nonprofits, public agencies, and private enterprises to address them.”

Response

This request does not help the positive characteristics of the neighborhood as it adds a further potential crime element to the area, (in an area with the highest overall crime in the City) increases the likelihood of encampments along Gibson Blvd, and fails to create a distribution of investments, and assets for the homeless throughout the City.

This request appears to be clearly contradictory to this vision.

Gibson Blvd is designated a Commuter Corridor by the Comprehensive Plan and is explained as follows.

“Commuter Corridors are higher-speed and higher-traffic volume with routes for people going across town (e.g. limited-access roadways). These Corridors accommodate faster and longer trips for personal vehicles, commuter bus service, and

often bicycling. “

Placing a homeless shelter along a corridor designated for higher speeds is not appropriate as a homeless shelter would be better placed along a Premium Transit Corridors defined as:

Premium Transit Corridors are intended to be served eventually by high-quality, high-capacity, high-frequency public transit (e.g. bus rapid transit). These Corridors are planned for mixed-use and transit-oriented development within walking distance from transit stations at strategic locations along the corridor.

Gibson has longer distances between bus stops and higher traffic speeds and is the only commuter corridor available to the SE area of Albuquerque and as a result has very high traffic in the morning and the evenings. Zuni and Central are problematic roads for transportation due to slow traffic speeds, congestion due to lane restrictions and the Rapid Transit System.

City Comprehensive Plan

Guiding Principles found on page 3-8 state the following:

STRONG NEIGHBORHOODS New development creates desirable places to live and encourages diverse housing and amenities, while respecting the unique history and character of each neighborhood.

MOBILITY Residents have improved options to move throughout Albuquerque for work, school, recreation, and services.

ECONOMIC VITALITY The local economy supports a mix of market activities and promotes financial security for all residents.

EQUITY All residents have access to good public services, a range of housing options, and healthy places to live, work, learn, and play.

SUSTAINABILITY Natural and cultural resources are protected and conserved to build a future that is physically, environmentally, and socially sustainable.

COMMUNITY HEALTH All residents are protected from harm where they live, work, learn, and play. Everyone has convenient access to healthy food, parks and open space, and a wide range of amenities and services.

On page 4-3 of the Comprehensive Plan the following is provided under “Applying the Guiding Principles”

STRONG NEIGHBORHOODS

- Neighborhoods provide quality of life and remain distinct, vibrant places to live.

- Development in established neighborhoods matches existing character and promotes revitalization where desired.
- Established neighborhoods are protected, preserved, and enhanced.

MOBILITY

- Complete, walkable neighborhoods with a range of housing and amenities make non-auto transportation options safer and more accessible.
- Planning efforts identify improvements needed in areas with limited mobility.

ECONOMIC VITALITY

- Neighborhoods with locally-serving businesses promote sustainable economic growth and reinvestment of local dollars.

EQUITY

- Community Planning Area assessments in the City and Sector Planning in the County identify existing conditions and use equity measures to prioritize revitalization.

SUSTAINABILITY

- Strong and vibrant neighborhoods foster social connections and encourage resource-sharing.
- Sustainable neighborhood design integrates green infrastructure.

COMMUNITY HEALTH

- Healthy neighborhoods protect residents from hazards, encourage physical activity, and foster positive social interactions.
- A range of amenities in neighborhoods reduces the need to drive, increasing active transportation opportunities.

RESPONSE

First “Strong Neighborhoods” does not increase the quality of life as it adds another homeless shelter to Council District 6 which already has the highest number of homeless shelters. This does not increase the quality of life of the residents as the area is suffering from homeless encampments, public urination, defecation and other undesirable activities.

The next statement is very important “Development in established neighborhoods matches existing character and promotes revitalization where desired.” The City could argue that this development is consistent with the existing development as there are numerous homeless shelters

in the area, but that does not promote revitalization of the area. Which leads to the question: is The City not interested in revitalization of the area?

Second is “Mobility.” The homeless encampments along Zuni make the area difficult to walk as there is extensive amounts of debris on the sidewalks, this particularly affects our residents with disabilities as it creates an additional hazard while they are attempting to get from their home to their destination and back again.

Third, the “Economic Vitality” is suffering due to high crime in the area. Additionally homeless encampments do not help to encourage new businesses to open in the area.

Fourth, how does adding an additional homeless shelter in this area create “Equity”? For all of the reasons listed above we argue that it does not.

Next social connections are made more difficult when neighbors are expressing fears about working in their own yards. This is already a problem in the area. Why is a use that creates additional problems appropriate?

Finally, this application does not further “Community Health,” as it would cause additional concern about outdoor physical activity, walking is a popular activity around Bullhead park, and that activity does foster social interactions. The additional homeless encampments that could arise would put this in jeopardy.

City Comprehensive Plan

On Page 4-5 Community Identity are the following “STRATEGIES”

- Creating complete communities and neighborhoods.
- Highlighting the variety of housing types that match the distinct character of different neighborhoods
- Demonstrating the feasibility of diverse housing types in various neighborhoods to the community and developers.

RESPONSE

The City does not appear to be encouraging homeless housing in various other neighborhoods; the northeast heights and northwest heights seem to not be included in this drive to create diversity of housing.

City Comprehensive Plan

Goal 4.1 Character

POLICY 4.1.2 Identity and Design: Protect the identity and cohesiveness of

neighborhoods by ensuring the appropriate scale and location of development, mix of uses, and character of building design. [ABC]

RESPONSE

The request is contradictory to this policy as it fails to protect the identity and cohesiveness of the neighborhoods around the site, and fails to ensure appropriate scale and location of development.

City Comprehensive Plan

POLICY 4.1.4 Neighborhoods: Enhance, protect, and preserve neighborhoods and traditional communities as key to our long-term health and vitality. [ABC]

RESPONSE

This application fails to enhance, protect or preserve the surrounding neighborhoods.

City Comprehensive Plan

POLICY 4.2.2 Community Engagement: Facilitate meaningful engagement opportunities and respectful interactions in order to identify and address the needs of all residents. [ABC]

RESPONSE

While there were meetings held, the application proceeded despite the request not furthering the needs of the area residents and businesses.

City Comprehensive Plan

Goal 5.4 Jobs-Housing Balance

Balance jobs and housing by encouraging residential growth near employment across the region and prioritizing job growth west of the Rio Grande.

RESPONSE

Potentially this was a chance for the City to create jobs on the west side of the river, but no sites on the westside were contemplated.

City Integrated Development Ordinance (Conditional Use Approval)

6-6(A)(3)(b) It complies with all applicable provisions of this IDO, including but not limited to any Use-specific Standards applicable to the use in Section 14-16-4-3; the DPM; other adopted City regulations; and any conditions specifically applied to development of the property in a prior permit or approval affecting the property.

City Integrated Development Ordinance (Condition for Approval)

The only criteria for the approval of an overnight shelter in the IDO is simply:

4-3(C)(7) Overnight Shelter-This use shall be located a minimum of 1,500 feet from any other overnight shelter.

RESPONSE

This is the extent to which the City regulates the location of Overnight Shelters after Conditional Use Approval. If this standard worked there would be Overnight Shelters all over Albuquerque, but the shelters are primarily located in two places, downtown and Council District 6. This places an undue burden on these two parts of town. The City's decision to add another homeless shelter to Council District 6 indicates a lack of desire to help this area improve. The only areas considered for this shelter were in areas of existing high homelessness and low income housing.

Additionally the City has approved funding to help rehabilitate certain facilities along Central. None were approved for a commercial project that could have brought jobs to the area. Instead, additional low income housing was approved in an area that already has a lot of low income housing. This creates an undue burden for neighborhoods along Central Ave. The City funding used for these projects was approved by the Redevelopment Agency Board.

City Integrated Development Ordinance

The property is zoned MX-H per the IDO.

"2-4(D)(1) Purpose

The purpose of the MX-H zone district is to provide for large-scale destination retail and high-intensity commercial, residential, light industrial, and institutional uses, as well as high-density residential uses, particularly along Transit Corridors and in Urban Centers. The MX-H zone district is intended to allow higher-density infill development in appropriate locations. Allowable uses are shown in Table 4-2-1."

Overnight shelter is the Conditional Use in the IDO that the City is applying for. Overnight Shelter is defined as "a facility that provides sleeping accommodations for 6 or more persons with no charge or a charge substantially less than market value; it may provide meals and social services."

RESPONSE

The key words in the MX-H zone are "appropriate locations". This location is not appropriate as it creates an additional burden on a Council district that already has the highest crime in the City over all (See City Crime Statistics PowerPoint Attachment 2) along with a prevalence of shelters and services for the homeless and low income.

The request is in conflict with the the following Comprehensive Plan goals and policies:

- Goal 9.2 Sustainable Design- Promote housing design that is sustainable and compatible with the natural and built environments. While this is an existing building, and would be consistent with the built environment, the proposed use does not further a housing design that is sustainable and compatible with the surrounding neighborhoods. The area has a large amount of low income housing, homeless and crime. Additionally, a new homeless shelter was built by Bernalillo County on Zuni Rd, not far from this site.

ANALYSIS

From HUD article Understanding Neighborhood Effects of Concentrated Poverty

“Neighborhoods of concentrated poverty isolate their residents from the resources and networks they need to reach their potential and deprive the larger community of the neighborhood’s human capital. Since the rise of inner-city poverty in the United States, researchers have sought to interpret the dynamic between neighborhood and residents in communities of concentrated poverty. Through articles and books such as *The Truly Disadvantaged* and *When Work Disappears*, sociologist William Julius Wilson has been a key figure in first popularizing the discussion of neighborhood effects. Wilson emphasizes that a “spatial mismatch” between increasingly suburban job opportunities and the primarily minority residents of poor urban neighborhoods has magnified other challenges, such as crime, the movement of middle-class residents to better neighborhoods, and a perpetual shortage of finance capital, stores, employment opportunities, and institutional resources.¹ This combination of barriers creates communities with serious crime, health, and education problems that, in turn, further restrict the opportunities of those growing up and living in them. Wilson also consistently addresses the effect of family structure on the outcomes of residents in such communities, cautioning against both “culture of poverty” arguments and the assumption that individuals are helpless victims of racism.”

RESPONSE

Council District 6 has a disproportionate amount of low income housing and homelessness as compared to other Council Districts with the exception of the Downtown Area, which is in 2nd place.

The City is aware of the disproportionate dispersal of low income housing, and homelessness but they do not try to reduce this hardship on Council District 6 by placing the facility in an area of influence where the many studies have found that having a mix of housing types benefits the community, but areas like North Albuquerque Acres, and the far northeast heights along with the Westside do not have the housing opportunities that are being constantly developed downtown

and in Council District 6.

City Integrated Development Ordinance (Conditional Use Approval)

6-6(A)(3)(c) It will not create significant adverse impacts on adjacent properties, the surrounding neighborhood, or the larger community.

RESPONSE

The adverse impacts are numerous, from an increase in crime as the new shelter opens up and predatory criminals move into the area to take advantage of the newly released homeless population (See research by Fisher cited above).

ANALYSIS

According to the Journal of Experimental Criminology an article title ‘Effect of Emergency Winter Homeless Shelters on Property Crime’

Methods. Every winter between 2009 and 2016, the City of Vancouver, Canada opened shelters to protect the homeless from harsh winter conditions. The city opened 19 shelters, but only five to nine of them were open in any one winter. Using the variation in timing and placement of the shelters, we contrast crime rates in the surrounding areas when the shelters are open and closed.

Results. The presence of a shelter appears to cause property crime to increase by 56% within 100m of that shelter, with thefts from vehicles, other thefts, and vandalism driving the increase. However, when a homeless shelter opened, rates of breaking and entering commercial establishments were 34% lower within 100m of that shelter. The observed effects are concentrated close to shelters, within 400 meters, and dissipate beyond 400 meters. Consistent with a causal effect, we find a decreasing effect of shelters with increasing distance from the shelter.

Conclusions. While homeless shelters are a critical social service, in Vancouver they appear to impact property crime in the surrounding community. Shelters may warrant greater security to control property crime, but the data suggest any increase in security need not extend beyond 400 meters, about 2 to 3 blocks, from the shelters.

https://crim.sas.upenn.edu/sites/default/files/Ridgeway_Effect%20of%20Emergency%20Shelters-v5_1.2.2018.pdf

RESPONSE

While this research was not done on permanent shelter the results are worth noting. An increase

in property crimes was noted within 400 meters of the homeless shelters after opening. To reiterate, Council District 6 has the highest crime rate in the City, allowing another shelter to open in the area is injurious to the surrounding community and property owners.

While these impacts would be unchanged in all areas in the City, it is significantly more injurious to a community that already has the highest crime rate in the City.

City Integrated Development Ordinance (Conditional Use Approval)

6-6(A)(3)(d) It will not create material adverse impacts on other land in the surrounding area through increases in traffic congestion, parking congestion, noise, or vibration without sufficient mitigation or civic or environmental benefits that outweigh the expected impacts.

6-6(A)(3)(e) It will not increase non-residential activity within 300 feet of a lot in any Residential zone district between the hours of 8:00 P.M. and 6:00 A.M.

6-6(A)(3)(f) It will not negatively impact pedestrian or transit connectivity without appropriate mitigation.

RESPONSE

The homeless community in the area block sidewalks with shelters of their own creation, making an area that has a high pedestrian level, as many of the local residents do not have their own vehicles. Central Ave, Zuni Rd, Louisiana, San Pedro and Gibson Blvd all have a high level of pedestrian traffic as compared to other areas of the City.

At this time Gibson is relatively free of these sidewalk encampments allowing the local residents to walk up and down Gibson without having to go around homeless campers. If this facility is added there is a high likelihood that these encampments will begin to show up along Gibson as well as the surrounding community.

It is unclear how the City will mitigate this impact as it has not been able to mitigate this impact in the surrounding community.

Federal Fair Housing Act

While the Federal Government made it illegal to discriminate against race, sexual orientation etc, the law did not include class discrimination.

While the City has no legal obligation to place this shelter in a more affluent part of town there is more good reasons to do so than to place it in an area that is already struggling with crime and poverty. (see attachments 2 and 3)

Summary

The City's decision to locate this facility at this location is in direct conflict with the Albuquerque Comprehensive Plan as it is contradictory to many of the Visions, Strategies, Goals and Policies of the Plan.

Additionally, the request does not comply with IDO Zoning for the area as the use is inappropriate for the area.

Thank you for your time and consideration

Robert Pierson

Monica Salas-Pierson

Kathleen Pierson

And the Council District 6 neighbors that are concerned about this request.

Sanchez, Suzanna A.

From: President Siesta <siesta2na.pres@gmail.com>
Sent: Tuesday, September 21, 2021 10:27 AM
To: Sanchez, Suzanna A.
Subject: Rachel Baca shared screen for conditional use hearing
Attachments: Rachel Baca_Zuni and Louisiana to Pennsylvania.pdf

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Rachel Conger Baca
President, SHNA
www.siestahills.org

Zuni and Louisiana-Pennsylvania



Zuni and Louisiana-Pennsylvania



Zuni and Louisiana-Pennsylvania





CITY OF ALBUQUERQUE
OFFICE OF ADMINISTRATIVE HEARINGS
ZONING HEARING EXAMINER
NOTIFICATION OF DECISION

City of Albuquerque Family and Community Services (Agent, Consensus Planning) requests a conditional use to allow an overnight shelter for Lot A1A1A/Lovelace Hospital, Lovelace Hospital, located at 5400 Gibson BLVD SE, zoned MX-H [Section 14-16-4-2]

Special Exception No:..... **VA-2021-00316**
Project No: **Project#2021-005834**
Hearing Date: 09-21-21
Closing of Public Record: 09-21-21
Date of Decision: 10-06-21

On the 21st day of September, 2021, Consensus Planning, agent for property owner, City of Albuquerque Family and Community Services (“Applicant”) appeared before the Zoning Hearing Examiner (“ZHE”) requesting a conditional use to allow an overnight shelter (“Application”) upon the real property located at 5400 Gibson BLVD SE (“Subject Property”). Below are the ZHE’s finding of fact and decision:

FINDINGS:

1. Applicant is requesting a conditional use to allow an overnight shelter.
2. The City of Albuquerque City of Albuquerque Integrated Development Ordinance (“IDO”), Section 14-16-7-1 defines an overnight shelter as *“A facility that provides sleeping accommodations for 6 or more persons for a period of less than 24 hours with no charge or a charge substantially less than market value; it may provide meals and social services. Any such facility open to clients between 10:00 P.M. and 7:00 A.M. is considered an overnight shelter.”*
3. The Subject Property is zoned MX-H, the purpose of which under the IDO is to *“provide for large-scale destination retail and high-intensity commercial, residential, light industrial, and institutional uses, as well as high-density residential uses, particularly along Transit Corridors and in Urban Centers. The MX-H zone district is intended to allow higher-density infill development in appropriate locations.”*
4. Table 4-2-1 of the IDO states that an overnight shelter in the MX-H zone requires a conditional use approval.
5. IDO Section 14-16-6-6(A)(3) (Review and Decision Criteria– Conditional Use) reads: *“An application for a Conditional Use Approval shall be approved if it meets all of the following criteria:*
 - (a) *It is consistent with the ABC Comp. Plan, as amended;*
 - (b) *It complies with all applicable provisions of this IDO, including but not limited to any Use-specific Standards applicable to the use in Section 14-16-4-3; the DPM; other adopted City regulations; and any conditions specifically applied to development of the property in a prior permit or approval affecting the property, or there is a condition of approval that any Variances or Waivers needed to*

comply with any of these provisions must be approved or the Conditional Use Approval will be invalidated pursuant to Subsection (2)(c)2 above.

- (c) *It will not create significant adverse impacts on adjacent properties, the surrounding neighborhood, or the larger community.*
 - (d) *It will not create material adverse impacts on other land in the surrounding area through increases in traffic congestion, parking congestion, noise, or vibration without sufficient mitigation or civic or environmental benefits that outweigh the expected impacts.*
 - (e) *On a project site with existing uses, it will not increase non-residential activity within 300 feet in any direction of a lot in any Residential zone district between the hours of 10:00 P.M. and 6:00 A.M.*
 - (f) *It will not negatively impact pedestrian or transit connectivity without appropriate mitigation.*
6. The applicant bears the burden of providing a sound justification for the requested decision, based on substantial evidence, pursuant to IDO Section 14-16-6-4(E)(3).
 7. The applicant bears the burden of showing compliance with required standards through analysis, illustrations, or other exhibits as necessary, pursuant to IDO Section 14-16-6-4(E)(4).
 8. Applicant timely submitted a written authorization for Agent to act on Applicant's behalf.
 9. Applicant's community outreach regarding the proposed Gateway Center dates back to 2018, and that outreach utilized community input sessions, online surveys, focus groups with people experiencing homelessness, and neighborhood community meetings.
 10. On March 15, 2021, the Albuquerque City Council approved Resolution R-21-141, which required two community input sessions within 45 days and advancement towards a Good Neighbor Agreement by the City with area residents and businesses to be in place for so long as the Gateway Center operates at the Gibson Health Hub site. The City held the two community input meetings on June 10 and June 12, 2021. The first meeting was held online and the second was held at the Gibson Health Hub Educational Building. Input from the meetings is posted on the City website at www.cabq.gov/gateway.
 11. Applicant provided evidence that all property owners and neighborhood associations entitled to notice were notified of the Application. Although a neighboring business owner complained that he did not receive notice, his business was not listed on the list of properties located within the required notice perimeter pursuant to the IDO, and it appears from evidence in the record, including without limitation the perimeter buffer map for the Subject Property, that the complainant's business is located outside the required notice perimeter. Further, the complainant clearly had notice, given that he submitted written evidence before the ZHE hearing and oral testimony at the ZHE hearing. Based on evidence in the record, Application provided the required timely notice to all property owners whose properties are within the required notice perimeter. Opponents submitted a petition signed by business owners who complained of inadequate notice. Nevertheless, based on evidence of mailings, emails, publication, and sign porting, the ZHE finds that the notice given by Applicant was compliant with the requirements of the IDO.
 12. Applicant timely mailed neighborhood meeting requests on June 4, 2021.
 13. On June 22, 2021, the City Land Use Facilitation Program conducted a facilitated pre-application meeting with community members, online via Zoom, to which were invited representatives of the affected neighborhood associations and the community at large.

According to the facilitated meeting report dated June 24, 2021, approximately 98 people registered for the meeting and as many as 80 participated in the meeting at the highest participation.

14. Applicant attended a pre-application meeting with City staff on June 29, 2021.
15. Regarding the requirement under IDO Section 14-16-6-6(A)(3)(a) that the requested conditional use be “*consistent with the ABC Comp. Plan, as amended*”:
 - a. Applicant and supporters of the Application submitted, among other things, the following:
 - i. Goal 6.2 Multi-Modal System: Encourage walking, biking, and transit, especially at peak-hour commuting times, to enhance access and mobility for people of all ages and abilities. Applicant Response: The proposed Gateway Center overnight shelter at the Gibson Health Hub furthers Goal 6.2 Multi-Modal System by placing it in an area with excellent multi-modal access, including transit services, major street network, and pedestrian and bicycle access and connections. The subject property is along Gibson Boulevard, an Urban Principal Arterial, and designated as a Commuter Corridor by the Comprehensive Plan. It is within the designated San Mateo Boulevard Major Transit Corridor area and a 1/2-mile west of the Louisiana Boulevard Major Transit Corridor area.
 - ii. Goal 9.4 Homelessness: Make homelessness rare, short-term, and non-recurring. Applicant Response: The Gateway Center overnight shelter will further Goal 9.4 Homelessness by being a critical component of the City's comprehensive approach to making homelessness rare, short-term, and non-recurring. The City estimates that there are at least 1,525 people in shelters or on the streets in Albuquerque each night, and at least 5,000 households experienced homelessness in 2020. The Gateway Center will address chronic homelessness in Albuquerque by providing safe, dignified emergency shelter within a central, developed area of Albuquerque. In addition, clients will receive wraparound services that help them exit the overnight shelter into stable, permanent housing and other community resources.
 - iii. POLICY 9.4.1: Best Practices: Implement an appropriate and effective model to address chronic homelessness. Applicant Response: The Gateway Center overnight shelter furthers Policy 9.4.1 Best Practices by providing emergency shelter for those experiencing homelessness and work with them to transition into permanent housing. The proposed Gateway Center overnight shelter will function as a "gateway" to end chronic homelessness through the use of three models to effectively transition unhoused community members into housing
 - iv. POLICY 9.4.2 Services: Provide expanded options for shelters and services for people experiencing temporary homelessness. Applicant Response: The proposed Gateway Center overnight shelter will further Policy 9.4.2 Services by expanding options for temporary shelter and services for the City's unhoused populations. Although there are many service providers in Albuquerque that serve the unhoused populations, the City does not currently have a centralized 24/7 center that can connect

unhoused individuals to the support organizations they need, often creating a "gap" in services. By building strong partnerships with existing providers, the City's proposed Gateway Center can serve as a centralized center, allowing for a more efficient connection to essential services and reducing the potential gap in services.

- v. POLICY 9.4.3 Equitable Distribution: Support a network of service points that are easily accessible by residents and workers, geographically distributed throughout the City and County, and proximate to transit. Applicant Response: Locating the proposed Gateway Center overnight shelter at the Gibson Health Hub furthers Policy 9.4.3 Equitable Distribution as reflected in comments from the individuals experiencing homelessness focus groups. The Gateway Center location is accessible to trusted nearby service providers in the International District and is located within the San Mateo Major Transit Corridor area. The proposed Gateway Center is the City's first step towards a dispersed shelter model that will add more shelters and supportive services in other locations within Albuquerque.
- vi. Goal 9.5 Vulnerable Populations: Expand capacity to provide quality housing and services to vulnerable populations. Applicant Response: The proposed Gateway Center will expand the City's capacity to provide services and access to quality housing to vulnerable populations, thereby furthering Goal 9.5 Vulnerable Populations.
- vii. POLICY 9.5.1 Quality Housing: Ensure well maintained, safe transitional and permanent housing for the lowest income households that are most at risk of homelessness. Applicant Response: The proposed Gateway Center furthers Policy 9.5.1 Quality Housing by providing the first step to permanent housing for the most vulnerable in our community. The Time-Limited Model ensures that clients of the overnight shelter have secured permanent housing before they leave the shelter. Low-income clients will have Wraparound services, including case management and assistance securing financial support for housing expenses. The goal of the Gateway Center is to reduce the risk of homelessness by ensuring clients have the support to maintain stable, permanent housing.
- viii. POLICY 9.5.2 Transitional Services: Encourage on-site transitional services with culturally competent service delivery that respects the dignity of individuals and families and fosters self-determination and self-sufficiency, including job training, financial education, and behavioral health assistance. Applicant Response: The services provided at the Gateway Center will support Policy 9.5.2 Transitional Services by providing Wraparound services for individuals and families. The individual leads the team-based, collaborative Wraparound approach to case management. The program is flexible, comprehensive, and can involve a number of organizations. The City will partner with existing community organizations and service providers specializing in delivering culturally competent services that will respect the individual and prepare individualized transition plans.

- b. Opponents of the Application submitted, among other things, the following:
 - i. Under “A Vision for Albuquerque & Bernalillo County” page 3-3 “As the county and city grow in population over the next 20 years, neighborhoods will be safer and easier places to walk through and between. The positive characteristics that contribute to their unique identities will be protected and enhanced.” “The City and the County commit to analyzing the health of our communities and the geographic distribution of our public investments and assets. Where gaps are identified, governments will collaborate with communities, nonprofits, public agencies, and private enterprises to address them.” Opponent Response: This request does not help the positive characteristics of the neighborhood as it adds a further potential crime element to the area, (in an area with the highest overall crime in the City) increases the likelihood of encampments along Gibson Blvd, and fails to create a distribution of investments, and assets for the homeless throughout the City.
 - ii. Guiding Principles found on page 3-8 state the following:
 - 1. **STRONG NEIGHBORHOODS** New development creates desirable places to live and encourages diverse housing and amenities, while respecting the unique history and character of each neighborhood. Opponent Response: does not increase the quality of life as it adds another homeless shelter to Council District 6 which already has the highest number of homeless shelters. This does not increase the quality of life of the residents as the area is suffering from homeless encampments, public urination, defecation and other undesirable activities.
 - 2. **MOBILITY** Residents have improved options to move throughout Albuquerque for work, school, recreation, and services. Opponent Response: homeless encampments along Zuni make the area difficult to walk as there is extensive amounts of debris on the sidewalks, this particularly affects our residents with disabilities as it creates an additional hazard while they are attempting to get from their home to their destination and back again.
 - 3. **ECONOMIC VITALITY** The local economy supports a mix of market activities and promotes financial security for all residents. Opponent Response: Economic Vitality is suffering due to high crime in the area. Additionally homeless encampments would not help to encourage new businesses to open in the area.
 - 4. **EQUITY** All residents have access to good public services, a range of housing options, and healthy places to live, work, learn, and play. Opponent Response: Concentration of homeless services in this sector of the city does not balance negative impact equally across the City.
 - 5. **COMMUNITY HEALTH** All residents are protected from harm where they live, work, learn, and play. Everyone has convenient access to healthy food, parks and open space, and a wide range of

amenities and services. Opponent Response: Increasing homeless encampments would discourage use of parks and open space.

16. Although opponents point out that homeless and behavioral health services are not spread equally throughout the City, the Comp Plan *“uses the term ‘equity’ to describe ensuring that different people or places have the opportunities, access, and services they most need. Many people think ‘equity’ and ‘equality’ are interchangeable terms. ‘Equality’ aims to ensure that all people or places have the same opportunities, access, and services – a laudable goal. Distributing an equal amount to each would be fair if people and places had the same starting amounts. Discussions of “equity” acknowledge that people and places might need and want different things – and have different starting places. The equity approach involves assessing the different needs that people and places have and prioritizing resources and efforts to address them in the order of urgency that best matches those needs to move toward equality over time.”* See Comp Plan at 4-2. Accordingly, the Comp Plan does not require distribution of resources and unwanted land uses equally throughout the City, but rather institutes the policy that resources and unwanted land uses be located equitably, in consideration of the totality of the circumstances.
17. Further, Comp Plan POLICY 5.3.7 states *“Locally Unwanted Land Uses: Ensure that land uses that are objectionable to immediate neighbors but may be useful to society are located carefully and equitably to ensure that social assets are distributed evenly and social responsibilities are borne fairly across the Albuquerque area. (a) Minimize the impacts of locally unwanted land uses on surrounding areas through policies, regulations, and enforcement. (b) Ensure appropriate setbacks, buffers, and/or design standards to minimize offsite impacts.”* Applicant has demonstrated, by the evidence cited in the Notification of Decision and other evidence in the record, its efforts to locate its proposed overnight shelter carefully and equitably in an area of need surrounded by social and governmental assets, and that its operations will benefit not only people suffering homelessness in the immediate area, but in the community as a whole. Also, Applicant has submitted that policies, regulations, enforcement, setbacks, buffers, and design standards will be implemented to minimize any negative impacts.
18. On balance, the ZHE finds that Applicant has provided a sound justification showing compliance with IDO Section 14-16-6-6(A)(3)(a) based on substantial evidence.
19. Regarding the requirement under IDO Section 14-16-6-6(A)(3)(b) that the requested conditional use comply *“with all applicable provisions of this IDO, including but not limited to any Use-specific Standards applicable to the use in Section 14-16-4-3; the DPM; other adopted City regulations; and any conditions specifically applied to development of the property in a prior permit or approval affecting the property, or there is a condition of approval that any Variances or Waivers needed to comply with any of these provisions must be approved or the Conditional Use Approval will be invalidated pursuant to Subsection [14-16-6-6(A)(2)(c)2]”*:
 - a. Applicant and supporters of the Application submitted, among other things, the following:
 - i. The proposed overnight shelter is allowed under the MX-H zone as a Conditional Use. There are ongoing functions at the Gibson Health Hub that fall under hospital use, which is permissive under the MX-H zone. The proposed Gateway Center overnight shelter will comply with the Use-Specific Standards contained in Section 4-3-(C)(6) Overnight Shelter.

- b. Opponents of the Application submitted, among other things, the following:
 - i. The intent of the MX-H zone is undermined because, in the estimation of opponents, the proposed use is not appropriately sited at the Subject Property.
- 20. On balance, the ZHE finds that Applicant has provided a sound justification showing compliance with IDO Section 14-16-6-6(A)(3)(b) based on substantial evidence.
- 21. Regarding the requirement under IDO Section 14-16-6-6(A)(3)(c) that the requested conditional use “*will not create significant adverse impacts on adjacent properties, the surrounding neighborhood, or the larger community*”:
 - a. Applicant and supporters of the Application submitted, among other things, the following:
 - i. By providing secure shelter and services for individuals living in vulnerable situations, the Gateway Center will positively impact the adjacent properties, surrounding neighborhoods, and the larger community that are currently dealing with the unhoused population.
 - ii. The City has been working diligently on the draft Operations Plan for the Gateway Center, which is attached to the Application and posted on the City's website (www.cabq.gov/gateway) as of 7/3/2021. The draft Operations Plan addresses many community concerns, including impacts on adjacent properties, surrounding neighborhoods, and the larger community, and contains provisions concerning, among other things:
 - 1. Transportation - A shuttle system will be in place to transport referred guests for intake and assessment as well as transport guests to their exit destination, with pick-up and drop-off points at the Gateway Center.
 - 2. Secure entrance - The Gateway Center will have a secured entrance that is staffed 24 hours a day, 7 days a week, to ensure only enrolled guests, staff, and volunteers enter the facility.
 - 3. Physical design - The Gateway Center will utilize Trauma-informed Design and Crime Prevention through Environmental Design (CPTED) design principles. The City's intent is to upgrade all building-mounted lighting and parking lot lighting prior to opening the Gateway Center. Appropriate fencing, landscaping, and other design features will be incorporated to ensure curb appeal and low visual impact.
 - 4. Security - Onsite professional security is currently provided at the Gibson Health Hub and will continue to be once the Gateway Center is open.
 - 5. Weapons - Weapons will not be allowed at the Gateway Center.
 - 6. Entry and Exit - A team of intake officers and front desk staff will be stationed at the entrance, with only enrolled shelter guests, staff, program staff and volunteers, and registered partner agency staff and volunteers allowed to enter the facility.
 - 7. Shelter capacity - If the Gateway Center reaches capacity, single adults seeking shelter will be referred to the Westside Emergency Housing Center or other appropriate shelter options. Transportation

will be provided, if needed. Emergency overflow for families will be established in the community or through the use of motel vouchers.

8. Critical Incidence Response - Procedures addressing threats and assaults to clients and staff will be established. Guests that threaten or assault another client or staff will be exited from the Gateway Center and will receive transportation to their exit destination. In addition, de-escalation procedures will be established, with staff receiving training in conflict resolution and de-escalation techniques. The procedures will address the appropriate use of the Albuquerque Police Department resources to resolve safety issues at the Gateway Center.
9. Trash removal - The Solid Waste Department will clean and remove trash on a daily basis from surrounding areas, including sidewalks, bus stops, store fronts, and area parks.
10. Pedestrian safety - Pedestrian crosswalks in the vicinity of the Gateway Center will be improved to promote use, ease, and safety of crossing roadways. Roadway medians will be improved to prevent jaywalking.
11. Encampments - Encampments are expressly prohibited on the Gibson Health Hub property. The Family and Community Services public outreach team will monitor a 14-mile radius for encampments on public and private property. The public outreach team will refer encampments on private property to the City's Code Enforcement Division and a notice for encampments on public property will be posted by the public outreach team on the same day the encampment is observed.
12. Good Neighbor Agreement - The City intends to enter into a Good Neighbor Agreement with the Elder Homestead, Parkland Hills, Siesta Hills, South San Pedro, and Trumbull neighborhood associations. The following will be established through the Good Neighbor Agreement:
 - a. A phone number where residents can report any issues related to the Gateway Center.
 - b. A community dispute resolution process.
13. A Neighborhood Advisory Committee. The Agreement will set the membership of the Committee, which will include neighborhood representatives, City representatives from the organization(s) operating the Gateway Center, and current or former guests of the Gateway Center. The Committee will meet at least quarterly and will issue an annual survey to community members. The Committee will review and update as needed the Good Neighbor Agreement annually. The Neighborhood Advisory Committee will review baseline data and information over time to provide feedback on high impact strategies to keep community, staff, and clients safe.

- b. Opponents of the Application submitted, among other things, the following:
 - i. The operations plan is merely a draft and the community has no guaranties as to what the final version, if any, will contain.
 - ii. The Good neighbor Agreement has not been finalized and signed, and the community has no guaranties as to what the final version, if any, will contain.
 - iii. Articles have shown that crime increases in the area of overnight shelters (however, the research cited was not done on permanent shelters).
- 22. Applicant's justification showing compliance with IDO Section 14-16-6-6(A)(3)(c) is based largely on its draft operations plan.
- 23. Regarding the requirement under IDO Section 14-16-6-6(A)(3)(d) that the requested conditional use *"will not create material adverse impacts on other land in the surrounding area through increases in traffic congestion, parking congestion, noise, or vibration without sufficient mitigation or civic or environmental benefits that outweigh the expected impacts"*:
 - a. Applicant and supporters of the Application submitted, among other things, the following:
 - i. Development of the Gateway Center will focus on interior renovations. No increases in noise or vibrations will occur or create adverse impacts to the surrounding area. People utilizing the services at the Gateway Center will primarily be relying on shuttles from pick-up locations and service provider facilities, and public bus transit, which will decrease the potential for traffic congestion. The site contains large parking areas, which are more than adequate to support the parking needs of the Gateway Center and the existing tenants.
 - b. Opponents of the Application submitted, among other things, the following:
 - i. The Gateway Center will attract homeless and other pedestrians that will have an increased burden on traffic safety and congestion.
- 24. IDO Table 5-5-1 contains no off-street parking requirement for an overnight shelter.
- 25. On balance, the ZHE finds that Applicant has provided a sound justification showing compliance with IDO Section 14-16-6-6(A)(3)(d) based on substantial evidence.
- 26. Regarding the requirement under IDO Section 14-16-6-6(A)(3)(e) that *"on a project site with existing uses, [the requested conditional use] will not increase non-residential activity within 300 feet in any direction of a lot in any Residential zone district between the hours of 10:00 P.M. and 6:00 A.M."*:
 - a. Applicant and supporters of the Application submitted, among other things, the following:
 - i. The overnight shelter use at the Gibson Health Hub will not increase non-residential activity within 300 feet of a residential zone district between the hours of 10:00 P.M. and 6:00 A.M. The overnight shelter use will be a relatively small portion of the Gibson Health Hub premise. The initial phase of the Gateway Shelter is anticipated to limit intakes to between 8:00 A.M to 8:00 P.M. for most community partner referrals, but intakes will be conducted at all hours for referrals from hospitals, first responders, and law enforcement. The intake activity will be more than 500 feet from the R-ML zoned property to the east and buffered by a large parking lot.

The closest apartment building within the R-ML site is setback approximately 67 feet east of its shared property line with the Gibson Health Hub. These existing physical conditions and separation between uses, and operating procedures will ensure the adjacent residential use will not be impacted by the overnight shelter use at the Gibson Health Hub facility.

- b. Opponents of the Application submitted, among other things, the following:
 - i. The proposed overnight shelter will operate 24 hours a day.
- 27. On balance, the ZHE finds that Applicant has provided a sound justification showing compliance with IDO Section 14-16-6-6(A)(3)(e) based on substantial evidence.
- 28. Regarding the requirement under IDO Section 14-16-6-6(A)(3)(f) that the requested conditional use “*will not negatively impact pedestrian or transit connectivity without appropriate mitigation*”:
 - a. Applicant and supporters of the Application submitted, among other things, the following: The Gateway Center overnight shelter will draw pedestrians, transit riders, shuttles, and vehicles to the site. Impacts on pedestrian and transit connectivity will be appropriately mitigated by various City departments through services and actions that include:
 - i. Shuttle service to and from the site from designated pick-up sites and community partner organizations;
 - ii. Designated onsite pick-up and drop-off location;
 - iii. Evaluation and prioritization of improvements to sidewalks, pedestrian crossings, and medians in Gibson Boulevard and San Mateo by the Department of Municipal Development to ensure pedestrians, neighborhood residents, and visitors have a safe and comfortable walking experience in the area;
 - iv. Evaluation and potential modification to existing transit routes by the City Transit Department to accommodate a potential increase in ridership; and
 - v. Conducting a speed study of Gibson Boulevard and taking appropriate measures as determined by the study.
 - b. Opponents of the Application submitted, among other things, the following:
 - i. The Gateway Center will attract homeless and other pedestrians that will have an increased burden on traffic safety and congestion.
- 29. On balance, the ZHE finds that Applicant has provided a sound justification showing compliance with IDO Section 14-16-6-6(A)(3)(f) based on substantial evidence.
- 30. The City Traffic Engineering Division stated no objection to the Application.
- 31. IDO Section 14-16-4-3(C)(6) requires the following Use-Specific Standards for an Overnight Shelter: *This use is prohibited within 1,500 feet in any direction of any other overnight shelter.*
- 32. Applicant has satisfied the use specific criteria by establishing that no other overnight shelter is located within 1,500 feet in any direction of the Subject Property, as the closest overnight shelter to the Subject Property is located 2,308 feet away.
- 33. It would appear that Applicant has met its burdens of providing a sound justification for the requested decision, and of showing compliance with required standards, based on substantial evidence. However, Applicant’s justification showing compliance with IDO Section 14-16-6-6(A)(3)(c) (that the requested conditional use “*will not create significant*

adverse impacts on adjacent properties, the surrounding neighborhood, or the larger community”) is based largely on Applicant’s draft operations plan, which draft would appear subject to change until finalized.

34. This matter should be deferred to allow Applicant the opportunity to finalize and adopt the operations plan on which rests a significant portion of the justification of the Application.

DECISION:

CONTINUANCE of the Application to the ZHE hearing to take place on October 19, 2021, which begins at 9:00 a.m.

APPEAL:

If you wish to appeal this decision, you must do so by October 21, 2021 pursuant to Section 14-16-6-4(V), of the Integrated Development Ordinance, you must demonstrate that you have legal standing to file an appeal as defined.

Successful applicants are reminded that other regulations of the City must be complied with, even after approval of a special exception is secured. This decision does not constitute approval of plans for a building permit. If your application is approved, bring this decision with you when you apply for any related building permit or occupation tax number. Approval of a conditional use or a variance application is void after one year from date of approval if the rights and privileges are granted, thereby have not been executed, or utilized.



Robert Lucero, Esq.
Zoning Hearing Examiner

cc:

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CITY OF ALBUQUERQUE
OFFICE OF ADMINISTRATIVE HEARINGS
ZONING HEARING EXAMINER
NOTIFICATION OF DECISION

City of Albuquerque Family and Community Services (Agent, Consensus Planning) requests a conditional use to allow an overnight shelter for Lot 1, Swift Addn, located at 5006 Gibson BLVD SE, zoned MX-H [Section 14-16-4-2]

Special Exception No:..... **VA-2021-00317**
Project No: **Project#2021-005834**
Hearing Date: 09-21-21
Closing of Public Record: 09-21-21
Date of Decision: 10-06-21

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FINDINGS:

1. Applicant is requesting a conditional use to allow an overnight shelter.
2. The City of Albuquerque City of Albuquerque Integrated Development Ordinance (“IDO”), Section 14-16-7-1 defines an overnight shelter as “*A facility that provides sleeping accommodations for 6 or more persons for a period of less than 24 hours with no charge or a charge substantially less than market value; it may provide meals and social services. Any such facility open to clients between 10:00 P.M. and 7:00 A.M. is considered an overnight shelter.*”
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comply with any of these provisions must be approved or the Conditional Use Approval will be invalidated pursuant to Subsection (2)(c)2 above.

- (c) *It will not create significant adverse impacts on adjacent properties, the surrounding neighborhood, or the larger community.*
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 7. The applicant bears the burden of showing compliance with required standards through analysis, illustrations, or other exhibits as necessary, pursuant to IDO Section 14-16-6-4(E)(4).
 8. Applicant timely submitted a written authorization for Agent to act on Applicant's behalf.
 9. Applicant's community outreach regarding the proposed Gateway Center dates back to 2018, and that outreach utilized community input sessions, online surveys, focus groups with people experiencing homelessness, and neighborhood community meetings.
 10. On March 15, 2021, the Albuquerque City Council approved Resolution R-21-141, which required two community input sessions within 45 days and advancement towards a Good Neighbor Agreement by the City with area residents and businesses to be in place for so long as the Gateway Center operates at the Gibson Health Hub site. The City held the two community input meetings on June 10 and June 12, 2021. The first meeting was held online and the second was held at the Gibson Health Hub Educational Building. Input from the meetings is posted on the City website at www.cabq.gov/gateway.
 11. Applicant provided evidence that all property owners and neighborhood associations entitled to notice were notified of the Application. Although a neighboring business owner complained that he did not receive notice, his business was not listed on the list of properties located within the required notice perimeter pursuant to the IDO, and it appears from evidence in the record, including without limitation the perimeter buffer map for the Subject Property, that the complainant's business is located outside the required notice perimeter. Further, the complainant clearly had notice, given that he submitted written evidence before the ZHE hearing and oral testimony at the ZHE hearing. Based on evidence in the record, Application provided the required timely notice to all property owners whose properties are within the required notice perimeter. Opponents submitted a petition signed by business owners who complained of inadequate notice. Nevertheless, based on evidence of mailings, emails, publication, and sign porting, the ZHE finds that the notice given by Applicant was compliant with the requirements of the IDO.
 12. Applicant timely mailed neighborhood meeting requests on June 4, 2021.
 13. On June 22, 2021, the City Land Use Facilitation Program conducted a facilitated pre-application meeting with community members, online via Zoom, to which were invited representatives of the affected neighborhood associations and the community at large.

According to the facilitated meeting report dated June 24, 2021, approximately 98 people registered for the meeting and as many as 80 participated in the meeting at the highest participation.

14. Applicant attended a pre-application meeting with City staff on June 29, 2021.
15. Regarding the requirement under IDO Section 14-16-6-6(A)(3)(a) that the requested conditional use be “*consistent with the ABC Comp. Plan, as amended*”:
 - a. Applicant and supporters of the Application submitted, among other things, the following:
 - i. Goal 6.2 Multi-Modal System: Encourage walking, biking, and transit, especially at peak-hour commuting times, to enhance access and mobility for people of all ages and abilities. Applicant Response: The proposed Gateway Center overnight shelter at the Gibson Health Hub furthers Goal 6.2 Multi-Modal System by placing it in an area with excellent multi-modal access, including transit services, major street network, and pedestrian and bicycle access and connections. The subject property is along Gibson Boulevard, an Urban Principal Arterial, and designated as a Commuter Corridor by the Comprehensive Plan. It is within the designated San Mateo Boulevard Major Transit Corridor area and a 1/2-mile west of the Louisiana Boulevard Major Transit Corridor area.
 - ii. Goal 9.4 Homelessness: Make homelessness rare, short-term, and non-recurring. Applicant Response: The Gateway Center overnight shelter will further Goal 9.4 Homelessness by being a critical component of the City's comprehensive approach to making homelessness rare, short-term, and non-recurring. The City estimates that there are at least 1,525 people in shelters or on the streets in Albuquerque each night, and at least 5,000 households experienced homelessness in 2020. The Gateway Center will address chronic homelessness in Albuquerque by providing safe, dignified emergency shelter within a central, developed area of Albuquerque. In addition, clients will receive wraparound services that help them exit the overnight shelter into stable, permanent housing and other community resources.
 - iii. POLICY 9.4.1: Best Practices: Implement an appropriate and effective model to address chronic homelessness. Applicant Response: The Gateway Center overnight shelter furthers Policy 9.4.1 Best Practices by providing emergency shelter for those experiencing homelessness and work with them to transition into permanent housing. The proposed Gateway Center overnight shelter will function as a "gateway" to end chronic homelessness through the use of three models to effectively transition unhoused community members into housing
 - iv. POLICY 9.4.2 Services: Provide expanded options for shelters and services for people experiencing temporary homelessness. Applicant Response: The proposed Gateway Center overnight shelter will further Policy 9.4.2 Services by expanding options for temporary shelter and services for the City's unhoused populations. Although there are many service providers in Albuquerque that serve the unhoused populations, the City does not currently have a centralized 24/7 center that can connect

unhoused individuals to the support organizations they need, often creating a "gap" in services. By building strong partnerships with existing providers, the City's proposed Gateway Center can serve as a centralized center, allowing for a more efficient connection to essential services and reducing the potential gap in services.

- v. POLICY 9.4.3 Equitable Distribution: Support a network of service points that are easily accessible by residents and workers, geographically distributed throughout the City and County, and proximate to transit. Applicant Response: Locating the proposed Gateway Center overnight shelter at the Gibson Health Hub furthers Policy 9.4.3 Equitable Distribution as reflected in comments from the individuals experiencing homelessness focus groups. The Gateway Center location is accessible to trusted nearby service providers in the International District and is located within the San Mateo Major Transit Corridor area. The proposed Gateway Center is the City's first step towards a dispersed shelter model that will add more shelters and supportive services in other locations within Albuquerque.
- vi. Goal 9.5 Vulnerable Populations: Expand capacity to provide quality housing and services to vulnerable populations. Applicant Response: The proposed Gateway Center will expand the City's capacity to provide services and access to quality housing to vulnerable populations, thereby furthering Goal 9.5 Vulnerable Populations.
- vii. POLICY 9.5.1 Quality Housing: Ensure well maintained, safe transitional and permanent housing for the lowest income households that are most at risk of homelessness. Applicant Response: The proposed Gateway Center furthers Policy 9.5.1 Quality Housing by providing the first step to permanent housing for the most vulnerable in our community. The Time-Limited Model ensures that clients of the overnight shelter have secured permanent housing before they leave the shelter. Low-income clients will have Wraparound services, including case management and assistance securing financial support for housing expenses. The goal of the Gateway Center is to reduce the risk of homelessness by ensuring clients have the support to maintain stable, permanent housing.
- viii. POLICY 9.5.2 Transitional Services: Encourage on-site transitional services with culturally competent service delivery that respects the dignity of individuals and families and fosters self-determination and self-sufficiency, including job training, financial education, and behavioral health assistance. Applicant Response: The services provided at the Gateway Center will support Policy 9.5.2 Transitional Services by providing Wraparound services for individuals and families. The individual leads the team-based, collaborative Wraparound approach to case management. The program is flexible, comprehensive, and can involve a number of organizations. The City will partner with existing community organizations and service providers specializing in delivering culturally competent services that will respect the individual and prepare individualized transition plans.

- b. Opponents of the Application submitted, among other things, the following:
- i. Under “A Vision for Albuquerque & Bernalillo County” page 3-3 “As the county and city grow in population over the next 20 years, neighborhoods will be safer and easier places to walk through and between. The positive characteristics that contribute to their unique identities will be protected and enhanced.” “The City and the County commit to analyzing the health of our communities and the geographic distribution of our public investments and assets. Where gaps are identified, governments will collaborate with communities, nonprofits, public agencies, and private enterprises to address them.” Opponent Response: This request does not help the positive characteristics of the neighborhood as it adds a further potential crime element to the area, (in an area with the highest overall crime in the City) increases the likelihood of encampments along Gibson Blvd, and fails to create a distribution of investments, and assets for the homeless throughout the City.
 - ii. Guiding Principles found on page 3-8 state the following:
 1. **STRONG NEIGHBORHOODS** New development creates desirable places to live and encourages diverse housing and amenities, while respecting the unique history and character of each neighborhood. Opponent Response: does not increase the quality of life as it adds another homeless shelter to Council District 6 which already has the highest number of homeless shelters. This does not increase the quality of life of the residents as the area is suffering from homeless encampments, public urination, defecation and other undesirable activities.
 2. **MOBILITY** Residents have improved options to move throughout Albuquerque for work, school, recreation, and services. Opponent Response: homeless encampments along Zuni make the area difficult to walk as there is extensive amounts of debris on the sidewalks, this particularly affects our residents with disabilities as it creates an additional hazard while they are attempting to get from their home to their destination and back again.
 3. **ECONOMIC VITALITY** The local economy supports a mix of market activities and promotes financial security for all residents. Opponent Response: Economic Vitality is suffering due to high crime in the area. Additionally homeless encampments would not help to encourage new businesses to open in the area.
 4. **EQUITY** All residents have access to good public services, a range of housing options, and healthy places to live, work, learn, and play. Opponent Response: Concentration of homeless services in this sector of the city does not balance negative impact equally across the City.
 5. **COMMUNITY HEALTH** All residents are protected from harm where they live, work, learn, and play. Everyone has convenient access to healthy food, parks and open space, and a wide range of

amenities and services. Opponent Response: Increasing homeless encampments would discourage use of parks and open space.

16. Although opponents point out that homeless and behavioral health services are not spread equally throughout the City, the Comp Plan *“uses the term ‘equity’ to describe ensuring that different people or places have the opportunities, access, and services they most need. Many people think ‘equity’ and ‘equality’ are interchangeable terms. ‘Equality’ aims to ensure that all people or places have the same opportunities, access, and services – a laudable goal. Distributing an equal amount to each would be fair if people and places had the same starting amounts. Discussions of “equity” acknowledge that people and places might need and want different things – and have different starting places. The equity approach involves assessing the different needs that people and places have and prioritizing resources and efforts to address them in the order of urgency that best matches those needs to move toward equality over time.”* See Comp Plan at 4-2. Accordingly, the Comp Plan does not require distribution of resources and unwanted land uses equally throughout the City, but rather institutes the policy that resources and unwanted land uses be located equitably, in consideration of the totality of the circumstances.
17. Further, Comp Plan POLICY 5.3.7 states *“Locally Unwanted Land Uses: Ensure that land uses that are objectionable to immediate neighbors but may be useful to society are located carefully and equitably to ensure that social assets are distributed evenly and social responsibilities are borne fairly across the Albuquerque area. (a) Minimize the impacts of locally unwanted land uses on surrounding areas through policies, regulations, and enforcement. (b) Ensure appropriate setbacks, buffers, and/or design standards to minimize offsite impacts.”* Applicant has demonstrated, by the evidence cited in the Notification of Decision and other evidence in the record, its efforts to locate its proposed overnight shelter carefully and equitably in an area of need surrounded by social and governmental assets, and that its operations will benefit not only people suffering homelessness in the immediate area, but in the community as a whole. Also, Applicant has submitted that policies, regulations, enforcement, setbacks, buffers, and design standards will be implemented to minimize any negative impacts.
18. On balance, the ZHE finds that Applicant has provided a sound justification showing compliance with IDO Section 14-16-6-6(A)(3)(a) based on substantial evidence.
19. Regarding the requirement under IDO Section 14-16-6-6(A)(3)(b) that the requested conditional use comply *“with all applicable provisions of this IDO, including but not limited to any Use-specific Standards applicable to the use in Section 14-16-4-3; the DPM; other adopted City regulations; and any conditions specifically applied to development of the property in a prior permit or approval affecting the property, or there is a condition of approval that any Variances or Waivers needed to comply with any of these provisions must be approved or the Conditional Use Approval will be invalidated pursuant to Subsection [14-16-6-6(A)(2)(c)2]”*:
 - a. Applicant and supporters of the Application submitted, among other things, the following:
 - i. The proposed overnight shelter is allowed under the MX-H zone as a Conditional Use. There are ongoing functions at the Gibson Health Hub that fall under hospital use, which is permissive under the MX-H zone. The proposed Gateway Center overnight shelter will comply with the Use-Specific Standards contained in Section 4-3-(C)(6) Overnight Shelter.

- b. Opponents of the Application submitted, among other things, the following:
 - i. The intent of the MX-H zone is undermined because, in the estimation of opponents, the proposed use is not appropriately sited at the Subject Property.
- 20. On balance, the ZHE finds that Applicant has provided a sound justification showing compliance with IDO Section 14-16-6-6(A)(3)(b) based on substantial evidence.
- 21. Regarding the requirement under IDO Section 14-16-6-6(A)(3)(c) that the requested conditional use “*will not create significant adverse impacts on adjacent properties, the surrounding neighborhood, or the larger community*”:
 - a. Applicant and supporters of the Application submitted, among other things, the following:
 - i. By providing secure shelter and services for individuals living in vulnerable situations, the Gateway Center will positively impact the adjacent properties, surrounding neighborhoods, and the larger community that are currently dealing with the unhoused population.
 - ii. The City has been working diligently on the draft Operations Plan for the Gateway Center, which is attached to the Application and posted on the City's website (www.cabq.gov/gateway) as of 7/3/2021. The draft Operations Plan addresses many community concerns, including impacts on adjacent properties, surrounding neighborhoods, and the larger community, and contains provisions concerning, among other things:
 - 1. Transportation - A shuttle system will be in place to transport referred guests for intake and assessment as well as transport guests to their exit destination, with pick-up and drop-off points at the Gateway Center.
 - 2. Secure entrance - The Gateway Center will have a secured entrance that is staffed 24 hours a day, 7 days a week, to ensure only enrolled guests, staff, and volunteers enter the facility.
 - 3. Physical design - The Gateway Center will utilize Trauma-informed Design and Crime Prevention through Environmental Design (CPTED) design principles. The City's intent is to upgrade all building-mounted lighting and parking lot lighting prior to opening the Gateway Center. Appropriate fencing, landscaping, and other design features will be incorporated to ensure curb appeal and low visual impact.
 - 4. Security - Onsite professional security is currently provided at the Gibson Health Hub and will continue to be once the Gateway Center is open.
 - 5. Weapons - Weapons will not be allowed at the Gateway Center.
 - 6. Entry and Exit - A team of intake officers and front desk staff will be stationed at the entrance, with only enrolled shelter guests, staff, program staff and volunteers, and registered partner agency staff and volunteers allowed to enter the facility.
 - 7. Shelter capacity - If the Gateway Center reaches capacity, single adults seeking shelter will be referred to the Westside Emergency Housing Center or other appropriate shelter options. Transportation

will be provided, if needed. Emergency overflow for families will be established in the community or through the use of motel vouchers.

8. Critical Incidence Response - Procedures addressing threats and assaults to clients and staff will be established. Guests that threaten or assault another client or staff will be exited from the Gateway Center and will receive transportation to their exit destination. In addition, de-escalation procedures will be established, with staff receiving training in conflict resolution and de-escalation techniques. The procedures will address the appropriate use of the Albuquerque Police Department resources to resolve safety issues at the Gateway Center.
9. Trash removal - The Solid Waste Department will clean and remove trash on a daily basis from surrounding areas, including sidewalks, bus stops, store fronts, and area parks.
10. Pedestrian safety - Pedestrian crosswalks in the vicinity of the Gateway Center will be improved to promote use, ease, and safety of crossing roadways. Roadway medians will be improved to prevent jaywalking.
11. Encampments - Encampments are expressly prohibited on the Gibson Health Hub property. The Family and Community Services public outreach team will monitor a 14-mile radius for encampments on public and private property. The public outreach team will refer encampments on private property to the City's Code Enforcement Division and a notice for encampments on public property will be posted by the public outreach team on the same day the encampment is observed.
12. Good Neighbor Agreement - The City intends to enter into a Good Neighbor Agreement with the Elder Homestead, Parkland Hills, Siesta Hills, South San Pedro, and Trumbull neighborhood associations. The following will be established through the Good Neighbor Agreement:
 - a. A phone number where residents can report any issues related to the Gateway Center.
 - b. A community dispute resolution process.
13. A Neighborhood Advisory Committee. The Agreement will set the membership of the Committee, which will include neighborhood representatives, City representatives from the organization(s) operating the Gateway Center, and current or former guests of the Gateway Center. The Committee will meet at least quarterly and will issue an annual survey to community members. The Committee will review and update as needed the Good Neighbor Agreement annually. The Neighborhood Advisory Committee will review baseline data and information over time to provide feedback on high impact strategies to keep community, staff, and clients safe.

- b. Opponents of the Application submitted, among other things, the following:
 - i. The operations plan is merely a draft and the community has no guaranties as to what the final version, if any, will contain.
 - ii. The Good neighbor Agreement has not been finalized and signed, and the community has no guaranties as to what the final version, if any, will contain.
 - iii. Articles have shown that crime increases in the area of overnight shelters (however, the research cited was not done on permanent shelters).
- 22. Applicant's justification showing compliance with IDO Section 14-16-6-6(A)(3)(c) is based largely on its draft operations plan.
- 23. Regarding the requirement under IDO Section 14-16-6-6(A)(3)(d) that the requested conditional use *"will not create material adverse impacts on other land in the surrounding area through increases in traffic congestion, parking congestion, noise, or vibration without sufficient mitigation or civic or environmental benefits that outweigh the expected impacts"*:
 - a. Applicant and supporters of the Application submitted, among other things, the following:
 - i. Development of the Gateway Center will focus on interior renovations. No increases in noise or vibrations will occur or create adverse impacts to the surrounding area. People utilizing the services at the Gateway Center will primarily be relying on shuttles from pick-up locations and service provider facilities, and public bus transit, which will decrease the potential for traffic congestion. The site contains large parking areas, which are more than adequate to support the parking needs of the Gateway Center and the existing tenants.
 - b. Opponents of the Application submitted, among other things, the following:
 - i. The Gateway Center will attract homeless and other pedestrians that will have an increased burden on traffic safety and congestion.
- 24. IDO Table 5-5-1 contains no off-street parking requirement for an overnight shelter.
- 25. On balance, the ZHE finds that Applicant has provided a sound justification showing compliance with IDO Section 14-16-6-6(A)(3)(d) based on substantial evidence.
- 26. Regarding the requirement under IDO Section 14-16-6-6(A)(3)(e) that *"on a project site with existing uses, [the requested conditional use] will not increase non-residential activity within 300 feet in any direction of a lot in any Residential zone district between the hours of 10:00 P.M. and 6:00 A.M."*:
 - a. Applicant and supporters of the Application submitted, among other things, the following:
 - i. The overnight shelter use at the Gibson Health Hub will not increase non-residential activity within 300 feet of a residential zone district between the hours of 10:00 P.M. and 6:00 A.M. The overnight shelter use will be a relatively small portion of the Gibson Health Hub premise. The initial phase of the Gateway Shelter is anticipated to limit intakes to between 8:00 A.M to 8:00 P.M. for most community partner referrals, but intakes will be conducted at all hours for referrals from hospitals, first responders, and law enforcement. The intake activity will be more than 500 feet from the R-ML zoned property to the east and buffered by a large parking lot.

The closest apartment building within the R-ML site is setback approximately 67 feet east of its shared property line with the Gibson Health Hub. These existing physical conditions and separation between uses, and operating procedures will ensure the adjacent residential use will not be impacted by the overnight shelter use at the Gibson Health Hub facility.

- b. Opponents of the Application submitted, among other things, the following:
 - i. The proposed overnight shelter will operate 24 hours a day.
- 27. On balance, the ZHE finds that Applicant has provided a sound justification showing compliance with IDO Section 14-16-6-6(A)(3)(e) based on substantial evidence.
- 28. Regarding the requirement under IDO Section 14-16-6-6(A)(3)(f) that the requested conditional use “*will not negatively impact pedestrian or transit connectivity without appropriate mitigation*”:
 - a. Applicant and supporters of the Application submitted, among other things, the following: The Gateway Center overnight shelter will draw pedestrians, transit riders, shuttles, and vehicles to the site. Impacts on pedestrian and transit connectivity will be appropriately mitigated by various City departments through services and actions that include:
 - i. Shuttle service to and from the site from designated pick-up sites and community partner organizations;
 - ii. Designated onsite pick-up and drop-off location;
 - iii. Evaluation and prioritization of improvements to sidewalks, pedestrian crossings, and medians in Gibson Boulevard and San Mateo by the Department of Municipal Development to ensure pedestrians, neighborhood residents, and visitors have a safe and comfortable walking experience in the area;
 - iv. Evaluation and potential modification to existing transit routes by the City Transit Department to accommodate a potential increase in ridership; and
 - v. Conducting a speed study of Gibson Boulevard and taking appropriate measures as determined by the study.
 - b. Opponents of the Application submitted, among other things, the following:
 - i. The Gateway Center will attract homeless and other pedestrians that will have an increased burden on traffic safety and congestion.
- 29. On balance, the ZHE finds that Applicant has provided a sound justification showing compliance with IDO Section 14-16-6-6(A)(3)(f) based on substantial evidence.
- 30. The City Traffic Engineering Division stated no objection to the Application.
- 31. IDO Section 14-16-4-3(C)(6) requires the following Use-Specific Standards for an Overnight Shelter: *This use is prohibited within 1,500 feet in any direction of any other overnight shelter.*
- 32. Applicant has satisfied the use specific criteria by establishing that no other overnight shelter is located within 1,500 feet in any direction of the Subject Property, as the closest overnight shelter to the Subject Property is located 2,308 feet away.
- 33. It would appear that Applicant has met its burdens of providing a sound justification for the requested decision, and of showing compliance with required standards, based on substantial evidence. However, Applicant’s justification showing compliance with IDO Section 14-16-6-6(A)(3)(c) (that the requested conditional use “*will not create significant*

adverse impacts on adjacent properties, the surrounding neighborhood, or the larger community”) is based largely on Applicant’s draft operations plan, which draft would appear subject to change until finalized.

34. This matter should be deferred to allow Applicant the opportunity to finalize and adopt the operations plan on which rests a significant portion of the justification of the Application.

DECISION:

CONTINUANCE of the Application to the ZHE hearing to take place on October 19, 2021, which begins at 9:00 a.m.

APPEAL:

If you wish to appeal this decision, you must do so by October 21, 2021 pursuant to Section 14-16-6-4(V), of the Integrated Development Ordinance, you must demonstrate that you have legal standing to file an appeal as defined.

Successful applicants are reminded that other regulations of the City must be complied with, even after approval of a special exception is secured. This decision does not constitute approval of plans for a building permit. If your application is approved, bring this decision with you when you apply for any related building permit or occupation tax number. Approval of a conditional use or a variance application is void after one year from date of approval if the rights and privileges are granted, thereby have not been executed, or utilized.



Robert Lucero, Esq.
Zoning Hearing Examiner

cc:

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Zoning Enforcement
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October 4, 2021

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Zoning Hearing Examiner
City of Albuquerque
600 Second Street NW
Albuquerque, New Mexico 87102

RE: Gateway Center @ Gibson Health Hub - Project #2021-005834; VA #2021-00316 and Project 2021-005834; VA #2021-00317

Landscape Architecture
Urban Design
Planning Services

302 Eighth St. NW
Albuquerque, NM 87102

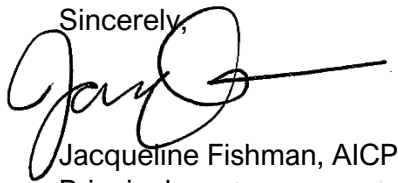
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Dear Mr. Lucero:

The purpose of this letter is to inform you that the Operations Plan and Administrative Policies created by the Family and Community Services (FCS) Department (provided as exhibits and/or referenced in our original application for conditional use at 5400 and 5006 Gibson Boulevard SE) are no longer in draft format. FCS created the drafts for public review and comment and has now made the final versions of both documents. The City's webpage for the Gateway Center has been updated as well to reflect this change.

I have attached both documents to this letter for your reference.

Sincerely,



Jacqueline Fishman, AICP
Principal

C: Carol Pierce, Director, Family and Community Services

Att: Gateway Center Administrative Policies and Gateway Center Operations Plan

PRINCIPALS

James K. Strozier, FAICP
Christopher J. Green, PLA,
ASLA, LEED AP
Jacqueline Fishman, AICP



Gateway Center at Gibson Health Hub Administrative Policies

September 2021

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Introduction

The City of Albuquerque acquired Gibson Health Hub in April 2021 with a vision to provide an anchor facility to fill healthcare and social service gaps. The Gibson Health Hub will provide a wide array of services that promote health, healing and recovery, building on the historical uses of the facility to provide essential services such as primary medical care, inpatient and outpatient behavioral health treatment and other services. The vision also includes adding services through a new Gateway Center to help fill community gaps for shelter with person-centered case management services for people without homes.

This document provides an overview of administrative policies that provides a view of daily functions of the two major components of the Gateway Center - the Gateway Shelter and Gateway Engagement Center. This document is a preliminary draft from which a later set of standard operating procedures will be developed with specific guidelines for staff to operate a safe, welcoming and orderly location. The administrative policies presented in this document are based on many years of direct experience, national best practices, and recent innovations field-tested by the City and community non-profit partners to operate congregate and non-congregate shelters with case management and housing programs.

Clarifying Terms

The **Gibson Health Hub (GHH)** refers to the entire 572,000 square foot facility and will include both current and new health providers that serve both Gateway Center and non-Gateway Center populations.

The **Gateway Center** is an element of the Gibson Health Hub and will occupy a portion of facility to serve unhoused populations with temporary living areas and support services through two main components, an Engagement Center and Gateway Shelter.

The **Engagement Center** will help connect Gateway Shelter guests to resources and services needed to exit to permanent housing and maintain housing. The Engagement Center will also connect people who come to Gibson Health Hub seeking help to needed resources and services.

The **Gateway Shelter** will provide low barrier, trauma-informed shelter that meets people where they are at with a person-centered approach to develop a plan that focuses on a successful exit to permanent housing. The Gateway Shelter will provide distinct and secure living areas for families with children, adults (men, women, and non-binary) as well as couples.

The **Gateway Center Operations Plan** provides information about the scope of the project on how it relates to the community externally.

The **Gateway Center Administrative Policies** provide detail about the internal day-to-day operations.

Trauma-Informed Design is an evolving concept that intentionally considers the effects of the physical interior environment on persons who have experienced trauma. Trauma-informed design principles focus on space perception that inspires a feeling of safety and dignity in the design of interior physical environment including: space planning and layouts, materials (furnishings, fixtures, and equipment), lighting, color, removal of adverse stimuli, wayfinding, design details and enhancements (art, plants, signage). In addition, the needs of particular subpopulations of homeless individuals are considered.¹ This design principle aims to promote successful access to support services by eliminating or mitigating elements in the environment that could trigger or contribute to trauma.

Trauma-Informed Programming² incorporates key principles: 1. Safety, 2. Trustworthiness and Transparency; 3. Peer Support, 4. Collaboration and Mutuality, 5. Empowerment, Voice and Choice, and 6. Cultural, Historical and Gender Issues.

Implementation domains include: 1. Governance and Leadership, 2. Policy, 3. Physical Environment, 4. Engagement and Involvement, 5. Cross Sector Collaboration, 6. Screening Assessment and Treatment Services, 7. Training and Workforce Development, 8. Progress Monitoring and Quality Assurance, 9. Financing and 10. Evaluation.

Person-Centered Approach is an approach founded by the influential psychologist, Carl R. Rogers, Ph.D. that acknowledges that each individual has within him or herself vast resources for self-understanding, for altering the self-concept basic attitudes, and his or her self-directed behavior - and that these resources can be tapped if only a definable climate of facilitative psychological attitudes can be provided.³ A person-centered case management approach ensures that the person who has experienced homelessness has a major say in identifying goals and service needs, and that there is shared accountability. The goal of case management is to empower people, draw on their strengths and capabilities, and promote an improved quality of life by facilitating timely access to the necessary supports, thus reducing the risk of homelessness and/or enhancing housing stability.⁴

¹ Designing the Built Environment for Recovery from Homelessness, A REVIEW OF RESEARCH; Prepared by Michael J. Berens; http://designresourcesforhomelessness.org/wp-content/uploads/2015/11/FINAL1_8_2017.pdf Accessed August 10, 2021

² Substance Abuse and Mental Health Services Administration. SAMHSA's Concept of Trauma and Guidance for a Trauma-Informed Approach. HHS Publication No. (SMA) 14-4884. Rockville, MD: Substance Abuse and Mental Health Services Administration, 2014

³ Rogers, Carl R. "The Foundations of the Person-Centered Approach." Education 100, no. 2 (1979): 98-107

⁴ <https://www.homelesshub.ca/about-homelessness/service-provision/case-management> Accessed August 10, 2021

Gateway Center Mission and Principles

Gateway Center Mission

The mission of the Gateway Center is to provide a safe and welcoming place that provides a low-barrier, trauma-informed shelter along with trauma-informed services to meet people where they are at, using a person-centered approach to support individual paths to housing stability.

Gateway Center Principles

The design of the Gateway Center will be trauma-informed to reinforce a safe and welcoming atmosphere and be ADA compliant.

Gateway Center programming will incorporate a person-centered, trauma-informed approach that is equitable, culturally and spiritually accommodating, and supportive of LGBTQ+, people of color and people living with disabilities. Programs will embody a person-centered approach to support connections to community, and attain housing and behavioral health stability so that homelessness is a brief, rare, one-time experience.

The Gateway Center will provide multiple opportunities for each participant to develop an exit strategy such as to supportive housing, treatment, or another shelter.

The Gateway Center will be a low barrier shelter that follows the Housing First principles to address immediate and long-term housing needs. As a low-barrier and inclusive shelter, the Gateway Center will accept unhoused people who may have complex histories, including a criminal history.

The Gateway Center will leverage existing services and develop partnerships for referrals into the community to foster collaboration and not competition. This includes creating space within the Gateway Center for other community partners to connect with guests and provide services, such as satellite office space.

The Gateway Center will operate with a harm reduction philosophy to address substance use disorders. Guests do not need to be clean and sober to access the Engagement Center or Shelter, but they cannot use drugs on site.

Gateway Center Administrative Structure

The City of Albuquerque's Department of Family and Community Services (DFCS) will provide administrative oversight for the Gibson Health Hub and the Gateway Center. The City Department of Municipal Development (DMD) will oversee operation and maintenance of the entire Gibson Health Hub facility. The Department leaders will huddle daily and coordinate their work through the GHH Operations Manager.

Administrative oversight of Gateway services will be conducted by City employees, such as the DFCS Deputy Director for Homeless Policy and Solutions, the Gateway Administrator, the Gateway System Analyst, the GHH Gateway Community Outreach Coordinator, and the Social Services Coordinator (see Figure 1 below for an illustration of the structure).

Direct services will be provided through contracts through the City's procurement process with oversight by DFCS staff. This structure builds on the existing service model, in which the City provides direct and indirect oversight of services conducted through social service and professional-technical contracts with local non-profit agencies procured through the City's bidding process. By locating oversight staff at the facility, the City will be able to exercise continued quality assurance of service provision and collaboration.

The physical space of the Gibson Health Hub facility will be operated and maintained by DMD staff similar to the day-to-day building operation and maintenance of other City-owned facilities, contracting for specialized services as needed through a standard procurement process. The administrative oversight of the Gibson Health Hub tenants and project management of the build-out is overseen by DFCS and DMD staff.

Key Roles

The FCS Gateway Center Administrator will provide development, oversight and administration of programs and services. This individual will oversee service providers and other City staff to ensure that programs and services operate as intended to move guests forward on their paths to housing and health stability. The Administrator plays a key role to ensure collaboration among service providers and various activities conducted in the Gateway Engagement Center and Gateway Shelter and will be responsible for coordinating day-to-day operations with the organizations selected to operate the Gateway Center to support a smooth and user-friendly experience by guests.

An onsite Gateway Community Outreach Coordinator will coordinate with outreach teams active in the community that support unhoused populations, including Albuquerque Community Safety teams and outreach teams operated by local non-profit agencies. This individual will also focus on ensuring that teams provide positive engagement with individuals who are reluctant to access shelter or have high barriers to permanent housing, including those

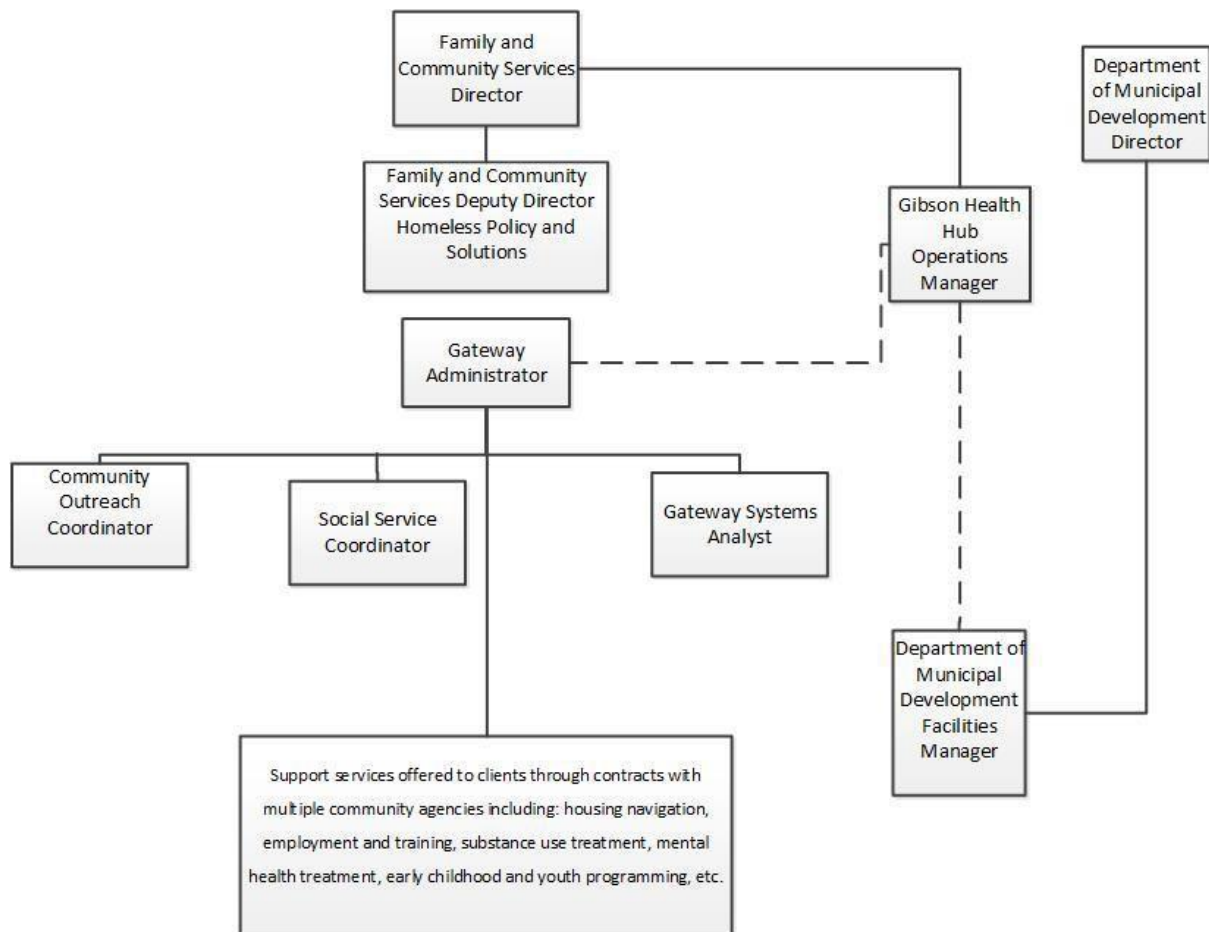
who are living in the International District. This will likely involve seeking to understand the reasons for their reluctance and, if possible, addressing those concerns.

The Gateway Systems Analyst will be responsible for evaluation of Gateway services and to ensure that effective and efficient systems are in place to implement and evaluate service delivery, including the evaluation of services to inform improved practices as programs and services phase in, and the development of trauma-informed HIPAA compliant data systems. The Analyst will work with the DFCS Senior Policy Advisor to measure and monitor neighborhood impact. Together with the Gateway Center Administrator, the Gateway System Analyst will work with the organizations operating the Gateway Center to develop and implement a Data and Quality Assurance Plan.

Direct services will be implemented by local non-profit entities and will be selected through City-issued competitive request for proposals (RFP). The current vision includes a model in which one or more organizations are selected to operate the Gateway Shelter and Engagement Center to provide culturally competent services that address distinct needs of subpopulations.

City-employed team leads will coordinate on a constant basis with agencies providing the support services included in Figure 1.

Figure 1 Administrative Organizational Structure



Gateway Engagement Center

Purpose

The Gateway Engagement Center will help connect Gateway Shelter guests to resources and services needed to exit to permanent housing and maintain housing. The Engagement Center will also connect people who come to Gibson Health Hub seeking help to needed resources and services.

Access to and Use of the Engagement Center

The Engagement Center will host local service providers from the community, in order to help Gateway Shelter guests strengthen their existing connections with providers and to help facilitate new connections to other services. Partner agencies at the Engagement Center will help Gateway Shelter guests establish medical and behavioral health care, obtain benefits such as Medicaid and Supplemental Nutrition Assistance Program (SNAP), obtain employment and educational services and support, in addition to other resources and supports. Service providers may opt to have a main or satellite office within the Engagement Center, and there will also be flexible office space for outreach staff from various agencies to meet with guests on site. Guests will be connected to the Engagement Center through the case management staff at the Shelter.

The Gibson Health Hub will be a central point for medical, behavioral health and wellness services for the community. The Engagement Center will serve those who present seeking help. The Gateway Engagement Center will establish rules and parameters to manage expectations about what is (and is not) offered and how to best access services.

Skilled staff will engage with people seeking services. Sample approaches include:

- Engaging in conversation to support a feeling of safety and build rapport;
- Problem-solving together using best-practice strategies including *Diversion* that prevents homelessness by helping to identify immediate alternate housing arrangements and, if necessary, connecting people with services and financial assistance to help them return to permanent housing;
- If shelter is the most appropriate solution, assessing a match to Gateway or other shelters, bed availability, and facilitating a warm hand-off;
- Conducting an assessment to identify existing service connections and working together to develop and support next steps; and/or
- Offering engagement to connect with services. Guests who choose not to engage will be offered transportation options and asked to leave with the option to return when ready to access services.

The Gateway Engagement Center will not be a “day shelter,” meaning it will not provide options for drop-in where people without homes may spend part of their day (such as facilities operated by other community agencies).

The Engagement Center will provide restrooms and water (including bottle refill stations) and may provide locked charging stations during its operating hours.

Operating Hours

The Engagement Center will operate daily from 8:00am - 5:00pm. The days and hours will be assessed to determine if they meet guest need and adjustments will be made as needed. First responder drop-off for the Shelter will be available 24 hours a day, 7 days a week.

Gateway Shelter

Gateway Shelter Intake Policy and Process

The process to access a Gateway Shelter bed would be through community agencies that work with the unhoused population. Service agencies access online forms to conduct initial pre-admission and screening process to assess if the guest fits Gateway Shelter criteria (for instance, can take care of daily living tasks). The goal is to have an online system that would provide current bed availability for the populations that the Shelter serves.

The standard referral process is through a community agency. Community agencies will be provided with a system to enter basic information that communicates with the Gateway Center database in a manner that protects access to personal data. To make the connection as smooth as possible, and to determine whether appropriate shelter and/or services are available for the guest, community agencies will have the option to conduct an initial screening. If a bed is available and the prospective guest agrees to comply with the terms of the Gateway Shelter Guest Agreement, the community agency will schedule an intake appointment and arrange transportation to the Gateway Center. The Gateway intake process will continue where the referring agency left off.

Intake Details

- An intake and orientation policy and procedure will be established in partnership with the organization(s) operating the Gateway Shelter.
- During the initial phase, the Gateway Shelter will conduct intakes daily between 8:00am – 8:00pm for most community partner referrals.
- The Gateway Center Shelter will conduct intakes 24 hours a day, 7 days a week for referrals from hospitals, first responders and law enforcement. Physical space will be created to receive referrals from first responders (e.g., AFR, ACS), law enforcement and hospitals outside of the regular 8am – 8pm intake hours. Gateway Center staff will conduct a person-centered assessment the following morning to connect the individual or family to needed resources. Transportation will be provided if needed.
- New guests will be asked to provide basic identifying information, such as name and date of birth for all household members but will not be required to provide proof of identification.
- New guests will receive an orientation to the Gateway Shelter and will be asked to sign a Guest Agreement that addresses respectful interaction with the staff, other guests, the physical space and surrounding neighborhoods. (See Appendix for sample agreement deployed at Wellness Hotels.)
- Guest Rights & Responsibilities will be posted.

- Pets will be welcome. Guests will sign a Pet Agreement upon entry and be responsible to take care of their exercise, feeding and pick up their waste in designated outdoor areas.
- Weapons will not be allowed in the facility. Guest will sign an acknowledgement of the weapons policy upon entry.
- Medications will be stored in a safe location for guest access.
- The priority for the first 24-48 hours at the Gateway Center is to allow new residents to get oriented, to rest, take care of basic needs like food, hygiene and laundry, and create a sense of safety.
- New residents will be offered a safe place to store their belongings after entering the Gateway Center. Guest items that exceed the storage space in each cubicle/room will be located in a separate secure area. Guests can access their items during designated hours with staff.
- All personal belongings will be heat-treated upon entry for pest control.

Operational Policies and Procedures

Gateway Center will develop policies and procedures to guide staff on daily operations. The detailed policies and procedures and training protocols will be developed in partnership with organizations under contract to provide services at the Gateway Engagement Center and Gateway Shelter. Examples of policy and procedure topics that could be included in a staff guidance manual may include:

- Occupancy Eligibility and Duration of Stay
- Guest Agreement Terms
- De-Escalation Protocols
- Responding to Difficult Behaviors
- Dispute resolution
- Guest Requests, Disturbances and Incident Reporting
- Drug and Alcohol Policy
- Sex Offender Notification Policy
- Suspension and Termination of Services
- Record keeping and retention

Critical incident policies and procedures may include:

- Emergency Procedures
- Fire Procedure
- Emergency Evacuation Plan
- Infectious Disease Outbreak Policy and Procedure

- First Aid Policy and Procedure
- Naloxone Policy & Procedure
- Threat and Assault to Staff and Guests Policy and Procedure

For illustration purposes, a limited sample of policy/procedures developed for the City of Albuquerque's Wellness Motels is included in the appendix.

Phasing and Bed Capacity

The Gateway Center will be implemented in phases for target populations and services as illustrated in Figure 2 below. Each phase will be evaluated to inform next phase of implementation:

- The Gateway Shelter will ramp up in phases to serve approximately 25 families and 100 adults on a nightly basis⁵. The Engagement Center and person-centered case management services will initiate implementation to coincide with the shelter coming online. The first phase operating start date aims to start winter 2022.
- The implementation and outcomes of each phase will be evaluated to improve current operations and inform rollout of subsequent phases. Quantitative and qualitative data will be collected through the implementation process assess program progress and how to improve continued operations.
- The proportion of beds anticipated to serve men and women is based on current male to female ratios at the Westside Emergency Housing Center (WEHC), with approximately 70% of the shelter beds for men (70 out of 100) and 30% of bed for women (30 out of 100). This ratio is consistent with national trends.

The architectural and construction team will develop a trauma-informed layout that fosters a sense of community and pride among shelter residents. The City is working with the architect to determine ways to maintain safe spaces and physical separation between families, women, and men, with the goal of establishing separate entrances if feasible. The City and design team have visited shelters and other facilities here in Albuquerque and in a number of other locations - including San Antonio, San Diego, Salt Lake City, Seattle, Vancouver, Phoenix, Tucson, Denver and Las Cruces - to develop best practices.

Sleeping Areas

Sleeping areas will be designed to reflect best practice and trauma informed designs. Guests will be assigned to a specific sleeping area and bed during their stay to provide stability. Current design considerations include single beds rather than bunk beds, and a reduced number of beds

⁵ Medically-based services in the Gibson Health Hub are separate from the Gateway Shelter.

per room. These design considerations will provide an improved atmosphere as compared with the common congregate shelter design that locate multiple bunk beds in a large room. Other design considerations to increase the sense of dignity includes the possibility of low partitions between beds to provide a sense of personal space.

Quiet times will be established to provide guests with opportunity to full rest. Guests will have access to a secure locker area to store personal items located near their sleeping area. There will be recuperative spaces for guests who are ill, to help promote healing and recovery and to reduce the spread of infection.

Sleeping areas for different populations will be located in separate areas and possibly separate floors of the facility. Security personnel and electronic badges will ensure that guest areas are kept private and secure from residents on other floors and non-residents. In the development of these floor plans, the City and design team will bear in mind the special needs of people experiencing domestic violence and other safety threats as well as the principles of trauma-informed design.

Resource Rooms and Service Offices

Each Gateway Shelter population area will be provided with a multi-purpose resource room that can provide areas for group or individual meetings as well as computers to seek employment and register for documents needed to obtain housing and other services. The resources brought into the room may include art therapy, financial literacy, support groups, skill-building and training activities, etc. Site operations staff will monitor activities and continued guest safety.

Person-centered case management will be available to all sheltered populations, consisting of case managers, peer support workers, and housing navigators, located with offices located strategically on shelter floors to allow for access, privacy, safety and efficiency.

Social service agencies will also be provided with space to meet with guests in private areas to work on their individual goals.

Program Model

The Gateway Shelter will incorporate best-practice philosophies into administrative policies including Housing First,⁶ which is a low-barrier approach that allows anyone experiencing homelessness to access shelter without prerequisites, regardless of their background or current

⁶ Housing First is guided by the belief that people need basic necessities like food and a place to live before attending to other issues, such as getting a job, or attending to substance use issues. Additionally, Housing First is based on the theory that client choice is valuable in housing selection and supportive service participation, and that exercising that choice is likely to make a client more successful in remaining housed and improving their life. For further information, see <https://endhomelessness.org>

level of sobriety and that recognizes that issues that may have contributed to a person or family's homelessness can best be addressed once they are permanently housed. A main tenet of the Gateway Shelter Administrative Policies is to provide guests with opportunities to create a housing exit plan and to connect with services in the community that can be sustained when people leave the shelter. Housing navigation services will be available onsite. Administrative policies will align the approach between Gateway staff and other social service providers (e.g., case managers, outreach workers, housing navigators and peer support workers) to connect guests with community-based medical and behavioral health providers (for instance, the medical home⁷ model for primary care that is patient-centered, comprehensive, team-based, coordinated, accessible, and focused on quality and safety). Promoting long-term housing and health stability involves a warm handoff and connection to community agencies to support Gateway Shelter guests after they exit.

Length of Stay

To reinforce the shelter as a temporary living situation, the stay will be time-limited. Local and national best practice have demonstrated the efficacy of limiting shelter stays to focus services on assisting people to create a plan to access services and permanent housing options as quickly as possible. This approach is currently implemented locally at a Wellness Hotel and other community shelters.

The goal of the Gateway Shelter is to help guests transition to a safe, stable exit destination within 90 days.

Gateway Center staff will use best practices, such as motivational interviewing, to engage guests at entry and throughout their stay and to assist guests with setting and achieving their stated goals to achieve housing and behavioral health stability. Gateway Shelter staff will regularly meet with guests to support their progress, and will assess overall progress at least every 30 and 60 days.

Guests that are engaged in exit planning may be allowed to stay longer than 90 days for certain reasons (e.g. actively engaged in treatment, or they have a housing voucher but are still looking for an apartment).

In general, guests may stay at the Gateway Shelter for 90 days within every 365 days. Exceptions may be made under certain circumstances; the City in partnership with the organization(s) operating the Gateway Center will establish an exception policy.

⁷ For further information, see <https://www.pcpcc.org/about/medical-home>

Estimated Turnover

Once phase-in is fully implemented, and given the implementation of a 90-day stay, it is estimated that available beds would turn over four times during the course of a year.

Using these assumptions, the Gateway Shelter serving families that can serve 25 families at a time, could serve approximately 100 families over the course of a year.

Once phase-in has been fully implemented, the same assumptions could be applied to turnover of adult populations. As stated above, the estimated allocation of 100 beds to serve at one time would, in simple terms, provide shelter to 30 adult women and 70 adult men (assuming that couples without children and people who do not identify with a binary gender are included in this total). With a turnover of four times over the course of the year, an estimated 120 women and 280 men would be served in a year after full implementation.

Housing Supply

The City is committed to funding the additional permanent supportive housing and rapid rehousing needed to ensure Gateway Center guests are able to exit to permanent housing. The City has grown and continues to grow its supply of supportive housing vouchers and affordable housing units

Gateway Shelter Services

The Gateway Shelter will be a low barrier emergency shelter that uses a harm reduction philosophy. Some households have a long history of homelessness or have cycled in and out of homelessness, while others may be newly homeless. Some will have significant behavioral health issues or significant barriers to obtaining permanent housing, while others will have fewer barriers.

All Gateway Shelter guests will have access to person-centered peer support and case management services while staying at the Gateway Center. A guiding principle for Gateway services is to build and maintain a sustainable connection to community health and social service agencies (i.e., medical home and case management through community-based providers). If a person is not already connected with a local agency, then the staff can help connect them with an agency inside or outside the GHH facility. As needed, staff can provide a warm handoff and offer transportation to other sites that can provide available shelter or services.

Onsite services may include those outlined in the *Coordinated Community-Wide Framework On Homelessness* developed with the Homelessness Coordinating Council such as:

- Individualized support to target needs/needs assessment

- Storage space
- Housing coordinator, pathway to housing
- Support applying for disability benefits (e.g., SOAR representatives)
- Employment and education support
- Certified peer support workers, guest advocates, community health workers
- Skill building opportunities
- Healthcare personnel
- Child development support services

Gateway Center staff will regularly meet with guests to support their progress, and will assess overall progress at least every 30 and 60 days.

Gateway Shelter guests will have access to Housing Specialists while staying at the Gateway Center. Housing Specialists will help guests develop and implement a plan to exit to safe stable housing with 90 days.

The primary focus of services will be to help individuals and families develop a plan to exit to a safe, stable destination within 90 days. Peer support and case management staff will coordinate with the housing specialists and community partners, help guests enroll in benefits, secure documents needed for housing and income, and connect guests to resources needed for long term stability. Case management staff will assist families with young children in enrolling in school, accessing Title 1 benefits, establishing high quality early childhood development programs, child care and youth programming.

Short-term behavioral health services will also be offered on site. There will be on-site crisis intervention and de-escalation teams.

The City will work with the organization(s) operating the Gateway Shelter to establish a clear referral system with other services located in the Gibson Health Hub, including:

- Turquoise Lodge
- Haven Behavioral Health (in-patient and out-patient)
- NM Department of Vocational Rehabilitation

The Gateway Shelter will connect guests to resources and supports that they need to maintain housing, increase their income and that promote mental, emotional and physical well-being. For each household, this may include establishing a medical home, obtaining substance use or mental health treatment, employment and educational programs and legal services. This includes creating space within the Gateway Center for other community partners to connect with guests and provide services, such as satellite office space.

The Gateway Center will establish partnerships, including clear referral mechanics, with external services, including but not limited to:

- Intensive Case Management
- Behavioral health services
- CARE campus (crisis, substance abuse)
- Educational resources
- Job resources
- Counseling
- Substance abuse treatment
- Domestic violence services
- Legal resources
- Veterans Administration services
- Resources for spiritual wellness, such as mindfulness classes, yoga, etc.

A Resource Center will be open for extended hours each day and provide access to computers and printers. Staff will be available to help guests complete applications for housing, employment and benefits, and to assist with resumés, interview prep and other employment supports.

Services to support families will be provided, including early childhood development services with drop-in hours, parenting classes and individual coaching/support for parents.

Exit Strategies

The goal of the Gateway Shelter is to help guests transition to a safe and stable exit destination within 90 days. This could include permanent housing, family/friends, a recovery program or other option, and connection to needed community resources.

All Gateway Shelter guests will have the opportunity to meet with a case manager and begin developing a guest centered exit plan within 48 hours of entering the Gateway Center.

The Gateway Shelter case managers will work with each individual or family to develop person-centered goals for an exit to a safe, stable destination, to identify barriers to achieving those goals, and strategies for addressing those barriers. For guests able to pay for housing on their own, case managers will assist guests with identifying appropriate apartment options and completing rental applications, including assistance with rental application fees and security deposits.

For guests that need subsidized and/or supportive housing, case manager staff will assist guests with completing the appropriate applications. This will include completing the VI-SPDAT for the Coordinated Entry System.

For guests that need residential behavioral health care, case management staff will assist with connecting guests to behavioral health facilities, including in patient substance abuse treatment.

For guests who do not complete or implement an exit plan, Gateway Center staff will connect them to another appropriate exit destination which may include the Westside Emergency Housing Center.

Meals

A nutritious breakfast, lunch and dinner will be provided to Gateway Shelters guests. Snacks and sack lunches will be available. The Gateway Center will accommodate the needs of guests with special dietary needs for health, religious or other reasons. The Gateway Center will provide baby formula and pet food as needed for guests.

Meals will be served in a common dining area at set times for different populations. Meals will be for Gateway Center guests only. The Gateway Center will not be a meal site that serves the general community.

Guests will receive assistance from case managers to apply for food related benefits, including WIC, SNAP and APS free or reduced-price meals.

Any personal food will be stored in a central location and in a way that prevents insects or other pests.

The kitchen area will have its own delivery port and access apart from the GHH and Gateway Center.

Other amenities

Laundry facilities will be available in/near the living area for each population segment (e.g., families, adult men, adult women). A protocol will be established to ensure guests have access to the laundry facilities.

Resource centers with computers will be available to guests. A protocol will be established to ensure appropriate computer use.

Bathrooms and showers will be available for Gateway Center guests.

TV will be available in the common areas. A protocol will be established to ensure appropriate use of the TV.

The Gateway Center will have a library. A protocol will be established to ensure appropriate use of the library.

All populations at the Gateway Center will have access to an outdoor space with shade and amenities such as raised garden beds for Gateway guest use.

Guests will have access to a safe place to store belongings. A policy on abandoned personal belongings will be developed.

Water bottle filling stations, locked charging stations and wireless internet will be available.

Gateway Center residents will be able to receive mail at the Gateway Center. A procedure for handling residents' mail will be developed.

Pets will be allowed at the Gateway Center. All guests with pets will need to sign an agreement, agreeing to take care of their pet while at the Gateway Center. Coordination will occur with the City's Animal Welfare Dept. to assist with healthy pet practices (e.g. vaccinations). The outdoor spaces will be designed to accommodate pets.

Gateway Center amenities will serve guests staying at the Gateway Center. The Gateway Center will not be a "drop in" or "day shelter" location for people without homes who are not staying at the Gateway Center.

Guest Input

Mechanisms to solicit and implement guest input and suggestions will be implemented. These will include:

- Suggestion box
- Guest Ombudsman (designated staff position)
- Weekly guest meetings (Attendance encouraged but optional)
- Guest Advisory Council
- Quarterly guest surveys
- Dispute Resolution

APPENDIX A – Staffing Plan

Single Adult Shelters-Men, women and non-binary adults

- Director of adult shelter operations for all 1:100
- Program Director for shelters - 3:100
- Donation/volunteer coordinator – 1:100
- HMIS data manager – 1:100
- Supervisors – One would be a lead supervisor who handles HR and staff scheduling – 1:25
- Shelter residential staff (front door, intake and floaters) 4:100
 - 6am-4pm – 1:33
 - 4pm-10pm – (these are usually the most active times) – 1:25
 - 10pm-6am – 1:50
 - Ratio including supervisor = 1:50
- Diversion/Rapid Exit Specialists to ensure 7-day 9am-5pm coverage – 1:50
- Resource Center coordinators - ensure 7-day 9am-9pm coverage computer lab in each shelter same 1:33
- Housing Navigators - 1:15
- Case management - 1:15
- Employment Specialist -1:50
- Peer specialists – 1:15
- Ombud's officer – 1:100

Family Shelter

- Program director – 1:25
- Donation/volunteer coordinator – 1:25
- 1 HMIS data manager (share with adult shelter)
- Supervisors – One would be a lead supervisor who handles HR and staff scheduling (front door, intake, and floaters) – 2:25
 - 6am-4pm – 2:25
 - 4pm-10pm – 3:25 (these are usually the most active times)
 - 10pm-6am – 2:25
- Program services manager (supervises case managers, coordinates visiting organizations) – 1:25
- Diversion/Rapid Exit Specialists to ensure 7-day 9-5 coverage – 2:25
- Resource Center coordinators - ensure 7-day 9-9 coverage – 3:25
- Housing Navigators – 1:15
- Case management – 1:15
- Peer specialists – 1:15
- Employment Specialist -1:50
- Child & youth services coordinator – 1:25
- Ombud's officer (share with adult shelter)



Gateway Center at Gibson Health Hub Operations Plan

August 2021

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Executive Summary

In April 2021, the City of Albuquerque acquired Gibson Health Hub, a 572,000 square foot facility located in the International District. The City's vision for Gibson Health Hub is to provide services to the surrounding community that promote health, healing and recovery, including but not limited to primary care services, inpatient treatment, behavioral health services, and shelter and services for people without homes.

One component of the Gibson Health Hub will be a Gateway Center, that will provide an Engagement Center and Shelter for families, women and men experiencing homelessness. This document serves as the operations plan for the Gateway Center at Gibson Health Hub.

This Operations Plan has been developed with extensive public input from neighborhood residents and service providers, including:

- Two community meetings (one virtual and one in-person) with over 60 people at each meeting and co-hosted by the District 6 Coalition
- A facilitated meeting that was held as part of the City's Conditional Use request
- Meetings with Parkland Hills, Trumbull, South San Pedro, Elder Homestead and Siesta Hill Neighborhood Associations
- Meetings with District 6 neighborhood members, service providers, and other local homeless service providers
- Domestic Violence Task Force
- Homeless Advisory Council meetings
- Homeless Coordinating Council (HCC) and HCC Homeless Services System Committee meetings

This Operations Plan has also been informed by the City of Albuquerque's own experience operating the Westside Emergency Housing Center and three "Wellness Motels" that have provided non-congregate shelter to vulnerable people during the COVID pandemic. The City has partnered with a local nonprofit to expand operations at the WEHC to a year-round shelter since April 2018, and began operating the Wellness Motels in June 2020. Finally, this operation plan has been informed by the expertise of the team at Barbara Poppe Associates; Ms. Poppe is the former director of the U.S. Interagency Council on Homelessness under President Obama.

The City recognizes that while a system of care to help people without homes already exists in our community, including an existing network of emergency shelters, there are not enough of the right type of shelter beds to meet the needs of our City. That is, while there is shelter capacity in Albuquerque on any given night, the available beds do not meet the needs of the community for a number of reasons, including the far travel distance to the WEHC. The Gateway Center will expand and strengthen that system of care. This plan addresses how services will be provided at the Gateway Center, while ensuring the safety and quality of life for guests and those who live and work in the surrounding neighborhoods.

Gateway Health Hub Vision

The Gibson Health Hub (GHH) will be an anchor facility to fill healthcare and social service gaps. The Gateway Center will comprise a portion of the GHH to provide shelter and services for our unhoused neighbors.

Clarifying Terms

The Gibson Health Hub (GHH) refers to the entire 572,000 square foot facility and will include both current and new health providers that serve the community for Gateway Center and non-Gateway Center populations. There are currently ten tenants at Gibson Health Hub (occupying approximately 140,000 square feet), of whom seven provide medical or behavioral health services. These tenants are AMG, Fresenius Medical Care, Haven Behavioral Health, NM Department of Vocational Rehabilitation, Optum, Turquoise Lodge, and Zia Community Health. In addition, new services will be added to Gibson Health Hub to address gaps in the community such as medical respite and medical sobering.

The Gateway Center will occupy a portion of the Gibson Health Hub facility to serve unhoused populations with temporary living areas and support services.

The Gateway Center will be comprised of an Engagement Center and Shelter. All portions of the Gibson Health Hub will incorporate design and operations that provide a safe and secure environment for different populations with different needs. The renovation design will use the advantages provided by the building size and layout of the facility so people with different needs can use separate entrances.

24/7 security operations will maintain safety for the wide variety of customers served at the facility.

Gateway Center Overview

Gateway Center Mission

The mission of the Gateway Center is to provide a safe and welcoming place that provides a low-barrier, trauma-informed shelter along with services to meet people where they are at, using a client-centered approach to support individual paths to housing stability.

Gateway Center Principles

The design of the Gateway Center will be trauma-informed to reinforce a safe and welcoming atmosphere and be ADA compliant.

Gateway Center programming will incorporate a trauma-informed approach that is equitable, culturally and spiritually accommodating, and supportive of LGBTQ+, people of color and people living with disabilities.

Through the Engagement Center, the Gateway Center will provide person-centered services that “meet people where they are at” in their journey to achieve housing and behavioral health stability. Intake to services will be staged according to client need and interest.

Programs will embody a person-centered approach to support connections to community, and attain housing and behavioral health stability so that homelessness is a brief, rare, one-time experience.

The Gateway Center will provide multiple opportunities for each participant to develop an exit strategy such as to supportive housing, treatment, or another shelter.

The Gateway Center will be a low barrier shelter that follows the Housing First principles to address immediate and long-term housing needs. As a low-barrier and inclusive shelter, the Gateway Center will accept unhoused people who may have complex histories, including a criminal history.

The Gateway Center will leverage existing services and develop partnerships for referrals into the community to foster collaboration and not competition. This includes creating space within the Gateway Center for other community partners to connect with guests and provide services, such as satellite office space.

The Gateway Center will operate with a harm reduction philosophy to address substance use disorders. Guests do not need to be clean and sober to access the Engagement Center or Shelter, but they cannot use drugs on site.

Components

The Gateway Center will have two major components: an Engagement Center and the Shelter.

- a. The Engagement Center will serve as a warm and welcoming access point to services, while also helping to meet the most immediate needs of unhoused people coming to the Shelter.
- b. The Shelter will provide low barrier, trauma-informed shelter that meets people where they are at with a client-centered approach to develop a plan to achieve housing stability.

Administration

The City will have an onsite Gateway Center Administrator to oversee operations. One onsite Community Outreach Coordinator and a Gateways Systems Analyst will report to the Administrator. The Gateway Center Administration will be responsible for overseeing all Gateway Center Operations. The Systems Analyst will be responsible for ensuring systems are place to implement and evaluate effective service delivery, including data systems. The Community Outreach Coordinator will be responsible for coordinating day-to-day operations with the organizations selected to operate the Gateway Center.

The City will issue an RFP to select one or more organizations to operate the Gateway Center Shelter and Engagement Center. The City will work with the organization(s) operating the Gateway Center to develop and implement a Data and Quality Assurance Plan.

Transportation

The Gateway Center will operate a shuttle system. The shuttle system will transport referred guests to the Gateway Center for intake and assessment. The shuttle system will provide transportation to

individuals and families exiting the Gateway Center to their exit destination. There will be clear, safe and well designed, pick up and drop off points at Gateway Center

The Gateway Center will be a stop for the current Community Support Shuttle, operated by the Veterans Integration Center with funding from the City, which provides a regular route to services, primarily for people experiencing homelessness.

Case managers and other services staff will also transport guests as they apply for housing, employment, benefits and other resources.

Case managers and other service staff will help guests obtain transportation for which they are eligible, such as the City Sun Van, Medicaid reimbursed transportation, or transportation to school via APS Title I.

Some Gateway Center guests will also utilize public transportation. The City recognizes that the current bus route closest to Gibson Health Hub, Route 16, is not sufficient to meet the needs of Gateway Center guests and is committed to improving public transportation for guests. The Albuquerque Transit Department is exploring several options, including expanding the frequency of service on the Route 16 line or extending nearby bus lines with more frequent services to the Gateway Center, including the 140, 141 or 157. The City will decide by fall 2021 on which option to implement.

Gateway Center Shelter

Operating Hours

The Gateway Center Shelter will be open 24 hours a day, 365 days a year.

In Phase 1, the Gateway Center Shelter will conduct intakes daily between 8:00am – 8:00pm for most community partner referrals. However, the Gateway Center Shelter will conduct intakes 24 hours a day, 7 days a week for referrals from hospitals, first responders and law enforcement.

The dining room will be open daily, with anticipated hours in Phase 1 of 7:00am-9:00am; 11:00am-1:00pm; 5:00pm-7:00pm

In Phase 1, donations may be dropped off daily between 8:00am-5:00pm.

The Gateway Center Shelter's secure entrance will be staffed 24 hours a day, 7 days a week to ensure that only enrolled guests (shelter & engagement center), program, staff and volunteers and registered partner agency staff/volunteers enter the facility.

Referral to the Gateway Center Shelter

The Gateway Center Shelter will establish a referral process for community organizations, including other homeless assistance providers and other local service agencies.

The Engagement Center will make referrals to the Gateway Center Shelter.

If the Gateway Center Shelter is at capacity, single adults seeking shelter will be referred to the Westside Emergency Housing Center or other appropriate shelter options. Transportation will be provided if

needed. Emergency overflow for families will be established in the community or through the use of motel vouchers.

The City will coordinate with outreach teams to engage people who are reluctant to access shelter or have high barriers to permanent housing, including those who are living in the International District. This will likely involve seeking to understand the reasons for their reluctance and, if possible, addressing those concerns.

Screening & Pre-Admission Process

Gateway Center staff will conduct an assessment that will address any immediate issues that need to be resolved, including physical/or medical issues that may require a triage to more appropriate options. This may include, but is not limited to, medical respite, detox or recovery programs.

Gateway Center service staff will conduct a general assessment with individuals and families to verify that the Gateway Center is an appropriate option. As part of this assessment, Gateway Center staff will assess whether the presenting individual or family can be safely diverted to a non-shelter alternative.

Diversion is a proven strategy that helps people experiencing a housing crisis quickly identify and access safe alternatives to emergency shelter. This is most effectively implemented at access points to shelter, and will be part of the screening process at the Gateway Center. Diversion may include creative problem-solving conversations; connecting with community resources and family supports; housing search and placement; and flexible financial assistance to help people resolve their immediate housing crisis. Gateway Center staff will have access to a flexible source of funds that can be used to provide short-term, one time help to divert people seeking shelter to other safe housing options if needed.

The City shall comply with all federal, state and local laws that may pertain to its admission policies.

Entry and Exit

A team of intake and front desk staff will be situated at the Gateway Center entry to greet new and existing guests as they enter the Gateway Center. Only enrolled Gateway Center Shelter guests, staff, program staff and volunteers, and registered partner agency staff and volunteers will be allowed to enter the Gateway Center shelter.

Personal visitors will not be allowed at the Gateway Center Shelter, except under limited conditions with express permission. Front desk and security staff will monitor entry into the building to ensure only guests, service providers and permitted individuals enter the Gateway Center shelter.

Residents can come and go as needed while following a curfew policy, with exceptions to include work and personal needs (e.g., family obligations) and unanticipated issues (e.g., transportation, family crisis/urgency, etc.). The City's goal is to establish separate entrances to the shelter for families, women and men.

Safety and Security at the Gateway Center

Physical Design

The Gateway Center will be designed to promote safety and security, using both Trauma Informed Design and Crime Prevention through Environmental Design (CPTED) design principles. Trauma-informed design principles, such as open, safe and inviting floor plan can support the physical and emotional safety of clients. The design includes an open, safe, and inviting floor plan. The City intends to establish separate entrances to the shelter for families, women, and men, if design permits.

CPTED is a set of design principles used to discourage crime and promote building security. These design principles, which the City has adopted in other projects, will be integrated into the design of the Gateway Center and surrounding area. Key features of the design will include but not be limited to sufficient lighting, fencing, and technology (such as security cameras). Appropriate fencing, landscaping and other design features will be designed to ensure curb appeal and low visual impact.

The City, in partnership with contracted organization(s) operating the Gateway Center will establish appropriate security systems including: metal detection, fire system, an annunciator system, security cameras, and an alarm system. Clear signage will be provided to service providers along with ramps for gurneys and wheelchairs.

The Department of Municipal Development (DMD) completed an assessment of lighting attached to the building and the parking lot lights. Prior to opening, all exterior lighting will be upgraded.

Onsite Security Personnel

Gibson Health Hub currently has, and will continue to have, on site 24/7 professional security, provided by a private security firm and City personnel. Security staff will be adjusted to ensure that the appropriate ratio and balance is achieved. If the number of tenants increases, and the number of people served within Gibson Health Hub increase, the level of security provided will be adjusted accordingly.

Evaluation is an essential component of determining safety and security. Baseline data and continued data collection will be used to determine staffing needs specifically related to the critical incidence responses.

Gateway Center safety team staffing will include supervisors, case managers, peer supporters and navigators-all who are trained in de-escalation.

Weapons

Weapons will not be allowed at the Gateway Center. There will be a weapons policy & procedure to address weapons brought on site. Clients will be required to sign a form acknowledging that they are aware of the weapons policy & procedure.

Critical Incidence Response

The City of Albuquerque will work with the organization(s) operating the Gateway Center to establish procedures for critical incident response. Threats and assaults to staff and clients will not be tolerated. A

policy and procedure addressing threats and assaults to client and staff will be established. Any guest who threatens or assault staff or clients will be exited from the Gateway Center, and will receive transportation to their exit destination.

De-escalation procedures will be established. All Gateway Center staff will receive training in conflict resolution and de-escalation techniques. The procedures will address appropriate use of APD to resolve safety issues at the Gateway Center.

An emergency procedure, emergency evacuation plan, fire procedure, infectious disease and first aid policies and procedures will be established. There will be on-site crisis intervention and de-escalation teams.

Security and Safety in the Community Surrounding Gateway Center

The Role of Albuquerque Police Department (APD)

APD has a strong presence in southeast Albuquerque. The APD Substation located at Kathryn Avenue and Louisiana Boulevard is within close proximity to the Gateway Center. An expansion of this substation is underway and the next phase is planned for completion in 2022.

The City intends to establish a public safety district around the Gateway Center, which will be a concentrated, coordinated effort between City Departments that address public safety, including Albuquerque Community Safety, APD, Albuquerque Fire and Rescue, Family and Community Services, Parks and Recreation and Solid Waste. The purpose of the Public Safety District will be to better coordinate existing resources and efforts. Community policing will be included.

The APD Problem Response Team (PRT) dedicated to the Southeast Area Command will continue to work within the future Public Safety District to resolve issues in the area. Public Service Assistants will be assigned to the southeast area and serve alongside the Problem Response Team.

APD is dedicated to active community policing and conducting outreach to area residents, businesses, and organizations. Community policing efforts will continue as the Gateway Center is developed. APD will coordinate and communicate with the Nob Hill ECHO team and Street Connect to connect on issues related to Gateway Center in the area and Central Avenue corridor.

APD currently works closely with multiple city departments including Solid Waste, Parks and Recreation, Planning, and Family and Community Services to respond to identify issues which need responses and resources, including encampments and criminal trespassing. APD will work with the Department of Family and Community Services to conduct outreach to unsanctioned encampments and assist residents to seek shelter, resources and stable housing through the Gateway Center. APD will continue work with the Planning Department to investigate and clear out abandoned houses and ensure the safety of nearby residents and properties.

Role of Albuquerque Community Safety Department (ACS)

ACS will provide coordinated street outreach to meet the needs of people experiencing homelessness in the vicinity of the Gateway Center Shelter who are not using the shelter. ACS will participate in the efforts of the public safety district. ACS launches the fall of 2021, with staff that will serve all of Albuquerque. ACS will have in 2022, dedicated staff to serve the southeast area of Albuquerque including the International District.

The future site for the ACS Department is centered at Kathryn and San Mateo. This site is within minutes of the Gateway Center. All calls related to ACS are first qualified through 9-1-1. Upon assessment, appropriate calls for assistance will be sent to ACS.

ACS responders may transport people to the Gateway Center upon request. Transport will be voluntary only, people cannot be transported without consent.

Role of Albuquerque Fire and Rescue (AFR)

AFR has two stations within close proximity to the Gibson Health Hub and can respond to calls as designated through the 9-1-1 system. Station 11 on Kathryn Avenue SE is under one mile of distance. Station 5, located on Dallas NE is located within 2.5 miles to the Gateway Center. AFR will take service calls through 9-1-1 and provide basic medical screening to determine if transport to Gateway Center is appropriate. If so, AFR can provide transport. AFR will work closely with APD and ACS as members of the public safety district to evaluate and determine needs and resources for response systems.

Role of Solid Waste Department (SWD)

SWD will clean and remove trash daily from areas surrounding the Gateway Center. Priority locations include sidewalks, bus stops, store fronts and area parks. SWD also oversees median plantings and maintenance and will work with Department of Municipal Development for any improvements or changes needed to Gibson Blvd. medians. SWD will be a member of the public safety district team.

Role of Department of Municipal Development (DMD)

Investment in public safety infrastructure in the areas close to the Gibson Health Hub will be prioritized by DMD. DMD will review conditions that affect pedestrians, cyclists, and motorists to ensure that lighting, street and sidewalk design prioritize safety. DMD will conduct a road audit of Gibson Blvd and collector streets to assess the best design and potential interventions for ultimate street safety. DMD will conduct a speed study on Gibson Blvd. to assess current conditions and create interventions that ensure the proper speed limit is set and enforced.

As part of the road audit, DMD will address pedestrian safety which includes the examination of crash data within the vicinity. Resulting improvements could include pedestrian crosswalks to promote safe use and ease of crossing. Road medians will be designed to prevent jay-walking and promote the use of crosswalks for pedestrian safety.

Role of Transit Department

The Transit Department (Transit) will conduct a study evaluating current transit route/bus systems. Transit will consider modifications to routes connecting passengers to the Gateway Center and around Albuquerque to needed resources. Shuttle buses connecting clients to the Gateway Center from

providers and designated locations will be part of the transit evaluation, but will not necessarily be operated by the City's Transit Department.

Encampments

Encampments will not be allowed on the Gibson Health Hub property. The Department of Family and Community Services (DFCS) public outreach team is responsible for addressing encampments on all public property. Two of the public outreach team members will be based at the Gibson Health Hub. The DFCS public outreach team will monitor the ¼-mile radius from Gibson Health Hub daily for encampments on public or private property.

For encampments on public property, DFCS will post notice the same day the encampment is observed. The DFCS outreach team will refer any encampments located on private property to the Planning Department Code Enforcement Division. ACS will provide outreach to encampment residents to assist them with obtaining safe, stable shelter arrangements.

Evaluation

The City of Albuquerque will conduct ongoing evaluation of safety and security of Gibson Health Hub and surrounding neighborhoods.

Accountability to & Coordination with Neighborhoods

Good Neighbor Agreement

The City of Albuquerque intends to enter into a Good Neighbor Agreement with the Elder Homestead, Parkland Hills, Siesta Hills, South San Pedro and Trumbull Neighborhood Associations. All five neighborhood associations are adjacent to or very close to the Gibson Health Hub facility.

The City intends for the Good Neighbor Agreement to establish:

- A phone number where residents can report any issues related to the Gateway Center.
- A community dispute resolution process
- A Neighborhood Advisory Committee. The Agreement will set the membership of the Committee, which will include neighborhood representatives, City representatives from the organization(s) operating the Gateway Center, and current or former guests of the Gateway Center.
- The Committee will meet at least quarterly and will issue an annual survey to community members.
- The Neighborhood Advisory Committee will review community baseline data and information to provide feedback on the safety of the community.

Community Impact

The University of New Mexico will conduct a study and issue a report that includes recommendations for emergency shelters programming, and infrastructure, and strategies to anticipate and address community concerns. The report will be issued by February 2022.

The City will explore options for supporting businesses in the vicinity of the Gateway Center, including the strategies identified in the Homeless Coordinating Council's Community Coordinated Framework on Homelessness.

City of Albuquerque ZHE – September 21, 2021

Agenda Item #3

VA-2021-00316

PR-2021-005834

City of Albuquerque Family and Community Services (Agent, Consensus Planning) requests a conditional use to allow an overnight shelter for Lot A1A1A/Lovelace Hospital, Lovelace Hospital, located at 5400 Gibson BLVD SE, zoned MX-H [Section 14-16-4-2]

Ownership: Owner: GIBSON MEDICAL CENTER LLC

Zone District/Purpose: MX-H/The purpose of the MX-H zone district is to provide for large-scale destination retail and high-intensity commercial, residential, light industrial, and institutional uses, as well as high-density residential uses, particularly along Transit Corridors and in Urban Centers. The MX-H zone district is intended to allow higher-density infill development in appropriate locations.

Allowable Use:

Mixed-use				Non-residential							Use-specific Standards	
MX-T	MX-L	MX-M	MX-H	NR-C	NR-BP	NR-LM	NR-GM	NR-SU	NR-PO			
									A	B		C
			C	C	C	C	C					
												4-3(C)(6)

Applicable Comp Plan Designation(s): Area of Change; Lovelace Employment Center

Applicable Overlay Zones: APO

Applicable Use-Specific Standard(s): 4- 3(C)(6) Overnight Shelter

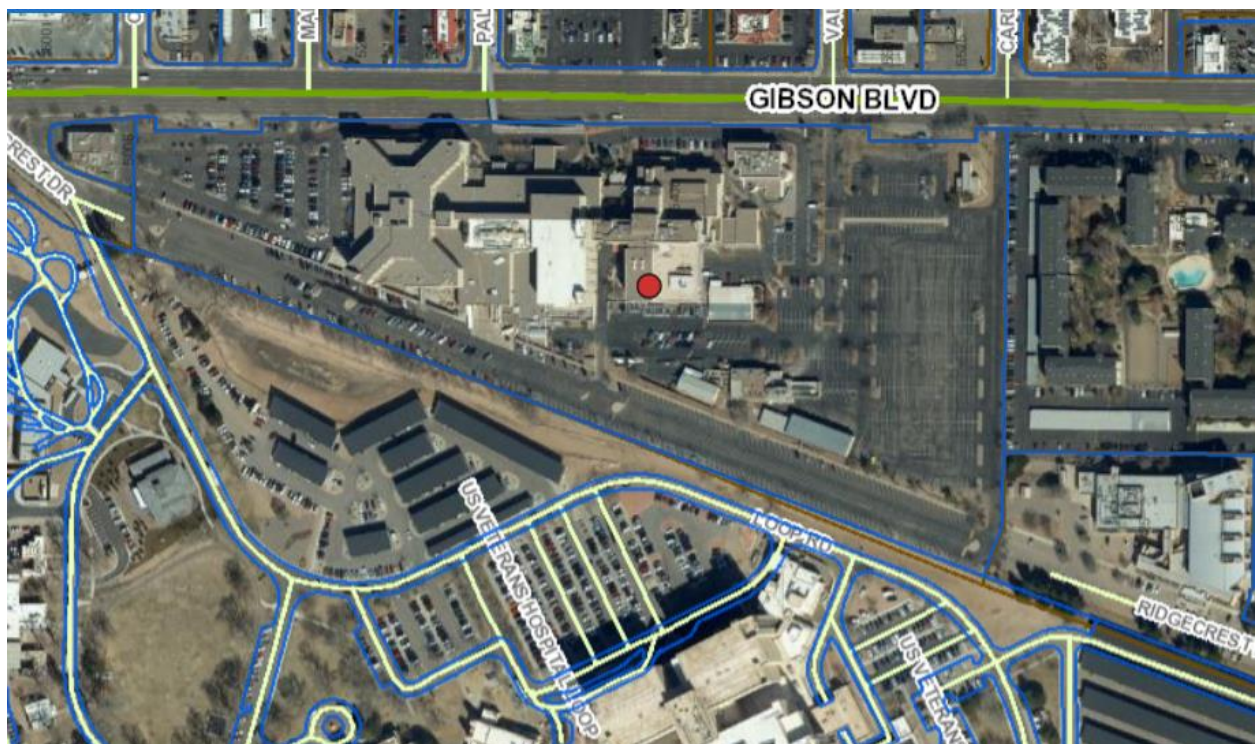
This use is prohibited within 1,500 feet in any direction of any other overnight shelter.

Applicable Dimensional/Development Standards: n/a

Prior Approval Conditions: No prior special exceptions listed

Traffic Recommendations: LETTERS OF SUPPORT AND OF OBJECTION

Planning Recommendation: This matter should proceed to a public hearing where the Zoning Hearing Examiner will hear additional evidence and make a written decision pursuant to applicable provisions of Section 14-16-6-4.



City of Albuquerque ZHE – September 21, 2021

Agenda Item #4

VA-2021-00317

PR-2021-005834

City of Albuquerque Family and Community Services (Agent, Consensus Planning) requests a conditional use to allow an overnight shelter for Lot 1, Swift Addn, located at 5006 Gibson BLVD SE, zoned MX-H [Section 14-16-4-2]

Ownership: Owner: GIBSON MEDICAL CENTER LLC

Zone District/Purpose: MX-H/The purpose of the MX-H zone district is to provide for large-scale destination retail and high-intensity commercial, residential, light industrial, and institutional uses, as well as high-density residential uses, particularly along Transit Corridors and in Urban Centers. The MX-H zone district is intended to allow higher-density infill development in appropriate locations.

Allowable Use:

Mixed-use				Non-residential							Use-specific Standards	
MX-T	MX-L	MX-M	MX-H	NR-C	NR-BP	NR-LM	NR-GM	NR-SU	NR-PO			
									A	B		C
			C	C	C	C	C					
												4-3(C)(6)

Applicable Comp Plan Designation(s): Area of Change; Lovelace Employment Center, San Mateo Major Transit Corridor

Applicable Overlay Zones: APO

Applicable Use-Specific Standard(s): 4- 3(C)(6) Overnight Shelter

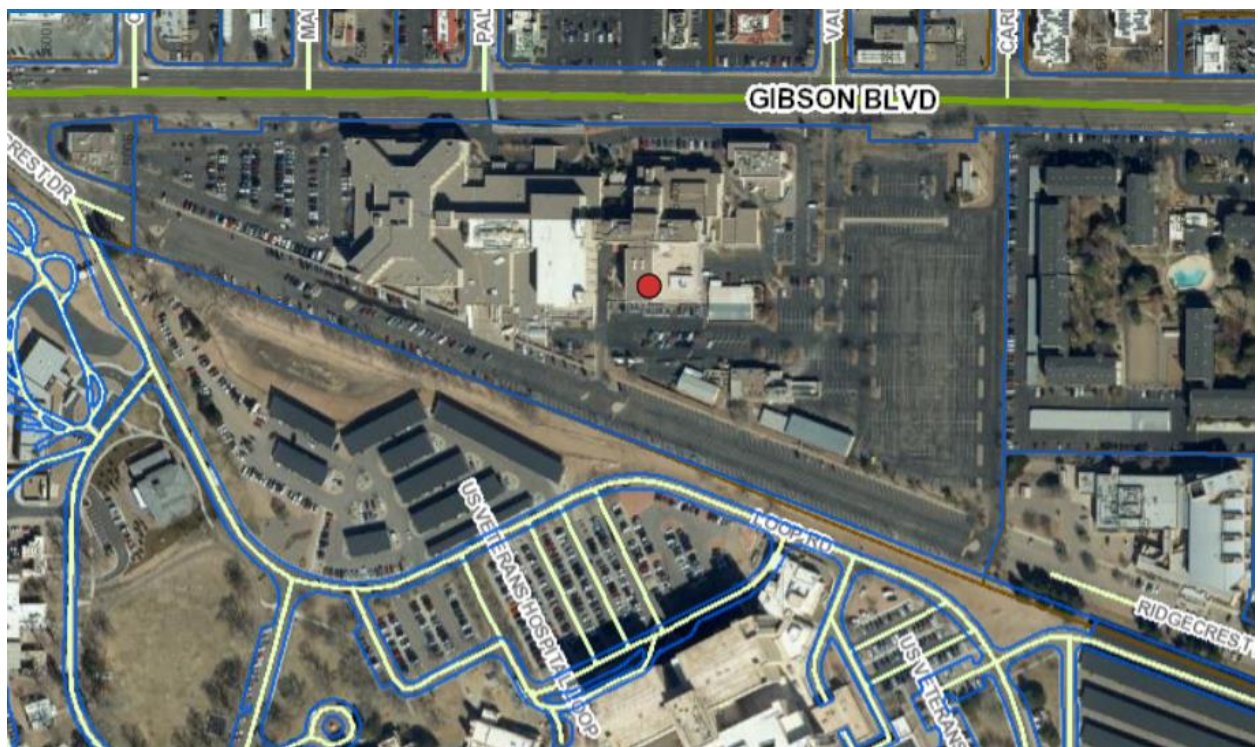
This use is prohibited within 1,500 feet in any direction of any other overnight shelter.

Applicable Dimensional/Development Standards: n/a

Prior Approval Conditions: No prior special exceptions listed

Traffic Recommendations: No objection

Planning Recommendation: This matter should proceed to a public hearing where the Zoning Hearing Examiner will hear additional evidence and make a written decision pursuant to applicable provisions of Section 14-16-6-4.



Sanchez, Suzanna A.

From: peter kalitsis <peterkalitsis@gmail.com>
Sent: Thursday, October 21, 2021 1:17 PM
To: Sanchez, Suzanna A.
Cc: Vera Watson; Melinda Frame; Rob Leming
Subject: Re: FW: Notice of Decision
Attachments: Vera Watcon Testimony 10 21 21 HEARING.pdf; PHNA TESTIMONY FOR 10 21 21 HEARING.pdf; HRT Scope with Timeline 6-1-21.pdf

Follow Up Flag: Follow up
Flag Status: Flagged

Suzie

Thank you for the reminder.

I am attached the following for the record:

1. PHNA TESTIMONY FOR 10 21 21 HEARING
Peter S. Kalitsis hearing testimony for Parkland Hills Neighborhood Association.
2. HRT Scope with Timeline 6-1-21
The referenced 6-1-21 slides re: purpose of UNM study being performed.
3. Vera Watson Testimony 10 21 21 HEARING
Vera Watson hearing testimony

Please let me know if you have any problems opening these documents.

Thank you,
Peter S. Kalitsis,
Cell - 505-463-4356

On Thu, Oct 21, 2021 at 11:37 AM Sanchez, Suzanna A. <suzannasanchez@cabq.gov> wrote:

Good morning,

Can you please send me the documents that were mentioned at Tuesday's hearing?

Thank you,
Suzie

Research Scope

Homeless Research Taskforce

6-1-21

Introduction

The following study design responds to a request for research from the Homelessness Coordinating Council (HCC) and is intended to build on findings from the Urban Institute Report¹, navigate concerns and opportunities related to the construction of the Gateway Center shelter, and inform future research directions.

Objective A

Review existing data to quantify permanent supportive housing needs (e.g., group homes, scattered-site and single site) for different populations.

Methods

Conduct a systematic literature review (peer-review and gray literature) on the known range of housing settings and options used as permanent supportive housing to address homelessness in the United States and factors that predict variable housing stability across settings. The review will be conducted in a systematic way with support from UNM research librarians. *Conducted by TBD w/Jenna Dole (UNM Sociology PhD student) with mentorship provided by HRT faculty Crisanti & Soto Mas.*

- 1.) Access and analyze Homelessness Management Information Systems (HMIS) data (2015-2020) through an agreement with the New Mexico Coalition to End Homelessness (NMCEH) in order to study trends in times from assessment to housing and factors predicting a return to homelessness. *Conducted by Kelli Kasper with mentorship provided by HRT faculty Erhardt.*
- 2.) Conduct qualitative interviews and/or structured dialogue groups/focus groups with housing services providers (N=12), community health workers (N=6), and adult individuals who have experienced/are experiencing homelessness (N=18) to understand predictive factors that influence success in varied existing or possible housing types and developing considerations and recommendations for newly allocated permanent supportive housing. *Conducted by the UNM Office for Community Health with mentorship provided by HRT Page-Reeves.*
- 3.) Synthesize findings into a report with recommendations that include an estimate for the number of permanent supportive housing units needed across varied housing types in Albuquerque.

¹ Assessing Shelter Capacity and Dynamics for Accommodating the Homeless Population in Albuquerque NM

Objective B

Evaluate impacts and benefits: People served, neighborhoods, community.

Methods

- 1.) Conduct a systematic literature review (peer-review and gray literature) on barriers and facilitators to successfully opening and operating new emergency shelters. The review will focus on community impact involving both risks and benefits associated. The review will be conducted in a systematic way with support from UNM research librarians. *Conducted by Jenna Dole (UNM Sociology PhD student) with mentorship provided by HRT faculty Crisanti & Soto Mas.*
- 2.) Hold listening sessions with the five Neighborhood Association representatives to the HCC and other relevant neighborhood stakeholders to obtain specific neighborhood perspectives and input: 1 session will be held in June/July at the beginning of the project, a second session will be held in January prior to development of the report and recommendations. *Facilitated by Michaela Pride, Professor of Architecture and co-facilitated by HRT faculty Ehrefocht.*
- 3.) Conduct qualitative interviews and/or structured dialogue groups/focus groups in Objective A with housing services providers (N=12), community health workers (N=6), and adult individuals who have experienced/are experiencing homelessness (N=18) to understand the positive impact of emergency shelters on individuals experiencing homelessness and on the community. *Interviews and focus groups will be conducted in a way to provide data for method #3 for this Research Objective and for Objective A (see method #3 above). Conducted by the UNM Office for Community Health with mentorship provided by HRT Page-Reeves.*
- 4.) Conduct a neighborhood impact assessment using the lit review in B1 above, input from the listening sessions and interviews, informal check-ins with community stakeholders, and relevant local data including crime statistics, property values, business disruption, and community health outcomes. The geographic area will include Wells Park from North of Lomas to I-40 and Gibson Medical Center. *Conducted by Post-Doc Matthew Schwartz with support from Andrew Gorvetzian and mentorship provided by HRT faculty Ehrefocht & O'Donnell.*
- 5.) Synthesize findings into a report that includes recommendations for emergency shelters programming and infrastructure, and for strategies to anticipate and address community concerns related to the allocation of new emergency shelter funds/sites.

Timeline

Objective	Activity	Month								
		June	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb
LOGISTICS	Submit IRB	X								
	Execute Data Sharing Agreement(s) & obtain data sets	X	X							
	Meet with UNM Leadership			X			X			X
	PRESENT RESULTS TO HCC									X
Objective 1	Conduct lit review	X	X	X						
	Revise/Finalize lit review				X	X	X			
	Analyze HMIS data			X	X	X	X	X		
	Conduct interviews/groups			X	X	X				
	Analyze qual data						X	X	X	
	Write report								X	X
Objective 2	Conduct literature review	X	X	X						
	Revise/Finalize lit review				X	X	X			
	Conduct Listening Sessions		X						X	
	Conduct interviews/groups			X	X	X				
	Analyze qual data						X	X	X	
	Analyze community impact			X	X	X	X	X		
	Write report								X	X

Date: October 19, 2021

Attn: Robert Lucero, Zoning Hearing Examiner

Statement and information presented at October 19, 2021 Zoning hearing by Peter Kalitsis, a member of the Parkland Hills Homelessness Solutions Committee, and am representing of our Neighborhood Association re:

Albuquerque's proposed Gateway Center at 5400 and 5006 Gibson Blvd SE

(See attached referenced file "HRT_Scope with Timeline 6-1-21")

Thank you. I am Peter Kalitsis, a member of the Parkland Hills Homelessness Solutions Committee, and am representing of our Neighborhood Association.

We are requesting you reject the City's Conditional Use Permit application for the proposed Gateway Center at 5400 and 5006 Gibson Blvd SE. for the following reasons:

1. Clarification of Ms. Huval testimony of purpose of UNM Study

The description that Lisa Huval presented at the prior Zoning hearing was incomplete. When Mr. Lucero asked if the UNM study was looking generally at emergency shelters or is it specifically to the subject matter of today's hearing, Ms. Huval stated that it was "LOOKING GENERALLY AT EMERGENCY SHELTERS." This is contradicted by the presentation to the Homeless Services System committee meeting on June 1, 2021 attended by the Parkland Hills Homelessness Solutions Committee member, Melinda Frame. Within this presentation, it was communicated that the study was intended to be used in the planning of the Gateway Overnight shelter to assess benefits and adverse impacts, therefore making this study critical to the success of Gateway Shelter and to mitigate significant adverse impacts upon the surrounding neighborhoods and community.

Ms. Huval stated at the hearing "The homeless services committee...the committee identified the need for an assessment of the impact of emergency shelter on local neighborhood and community... Assessment of both the benefits and the potentially adverse impacts of emergency shelter on surrounding neighborhoods and provide recommendations and steps that the city could take to mitigate those impacts." When Mr. Lucero asked if the study was generally as to all shelters or specifically as to the subject matter of today's hearing, Huval's response was that the researchers have been looking generally at emergency shelter. This contradicts the information presented during the Homeless Services System committee meeting on June 1, 2021 in which Janet Page Reeves from UNM discussed this study and presented the following attached slides:

The attached document titled "HRT_Scope with Timeline 6-1-21" is the slide presentation shared by Janet Page Reeves, and clearly states that the purpose of this study is to:

- a. navigate concerns and opportunities related to the construction of the Gateway Center shelter in addition to inform future research directions
- b. **Evaluate impacts and benefits: People served, neighborhoods, community.**

Additionally in the applicant's Operation Plan submitted to the ZHE, under "Community Impact" it references this same study.

2. Inconsistent Operations Plan language

The language of the Operational Plan is problematic in regard to Accountability to neighborhoods.

Throughout the plan, the City uses the definitive words "WILL" and "WILL NOT" for all other elements of operation. Except within re: a public safety district and under "ACCOUNTABILITY AND COORDINATION WITH NEIGHBORHOODS" definitive WILL is replaced with the irresolute "INTENDS." therefore not showing good faith. City needs to guarantee the measures under the Good Neighbor Agreement with a change in wording.

3. IDO legal requirement for PHNA Pre-Submittal Neighborhood Meeting Not Met

At the September 19th hearing, Ms. Fishman stated "we followed the IDO process." Though that was the initial intent, when an error in IDO procedure in scheduling the meeting was brought to Fishman's attention by Parkland Hills NA President, Rob Leming, no effort was made to rectify this and to reschedule the meeting according to the mandated IDO protocol. Ms. Fishman was aware of this as you will note in the email communication included in Parkland Hills Neighborhood Association previous evidence submittal where she states and recognizes their error in not including Parkland Hills NA as an affected neighborhood. Though Parkland Hills Neighborhood Association waited expectantly for an invitation per the procedure clearly outlined in the IDO, this error was never corrected.

This was identified in the following:

In the Parkland Hills Neighborhood Submittal dated September 14, 2021, on page 44, the email dated June 22, 2021 from Jackie Fishman, in the third paragraph, Ms. Fishman acknowledges that "Parkland Hills Neighborhood Association should be considered and affected neighborhood Association to be notified."

Per the IDO requirements identified on pages 42 and 43 of this submittal identifies, IDO Section 14-16-6-4(C), a meeting with the neighborhood is to be offered, and that the applicant "shall offer at least 1 meeting to all Neighborhood Associations whose boundaries include or are adjacent to the subject before filing the application" (see IDO paragraph at the bottom of this letter for reference). The above statement stating this notice is a "courtesy" is in error, unless there are plans to do future invite to Parkland Hills, as our neighborhood is adjacent to the property.

As section 6-4(C)(3) states a "meeting request shall be sent to the 2 representatives on file at the ONC for all applicable Neighborhood Associations via Certified Mail, return receipt requested, or via email" (see IDO paragraph at the bottom of this letter), we request that the Office of Neighborhood Coordination corrects Consensus Planning's error. Our Neighborhood Association would appreciate a follow-up to verify that this misinformation has been corrected.

To further clarify, the IDO section, following, lists the procedure to follow if Parkland Hills Neighborhood Association had received an invitation. As was clearly stated we were copied as a courtesy, not as an offer for us to respond per the IDO. We were never given this required opportunity.

6-4(C)(4) If the Neighborhood Association chooses to meet, the Neighborhood Association must respond within 15 calendar days of the request (Certified Mail or email) being sent. The meeting must be scheduled for a date within 30 calendar days but no fewer than 15 calendar days after the Neighborhood Association accepts the meeting request, unless an earlier date is agreed upon. If the Neighborhood Association declines the meeting, the applicant may proceed pursuant to Subsection (9) below.

4. Day shelter

As the city indicated that this facility will not be a day shelter, we request this be included in the conditions of the Conditional Use permit.

5. Overburden creating Significant Adverse Impact

6-6(A)(3)(c) It will not create significant adverse impacts on adjacent properties, the surrounding neighborhood, or the larger community.

RESPONSE:

Based upon sections

14-16-4-3(A)(2) nuisance conditions affecting other properties,

14-16-5-13(A) OPERATING STANDARDS,

14-16-6-9 (Violations, Enforcement, and Penalties) Property owner responsibilities under this Section.,

14-16-5-13(B) MAINTENANCE STANDARDS shall not create any public or private nuisance., and

5-13(B)(1) Alleys All alleys shall be maintained by the abutting property owner.

For 1 ½ miles, due to the increase in homeless and encampment outside the ¼ mile radius of the overnight shelter, the city is placing a burden on the residential and business neighbors within that area with the city requirement for the property owners to maintain the alley. As stated previously the city should not place that burden, including that of alleys, city parks with needles, trash, and feces on the surrounding neighborhoods, and as part of conditions for the Conditional Use Permit, the city should provide daily cleanup of the alleys and parks within 1 ½ miles rather than ¼ miles, rather than shifting this burden on residences and businesses. If this increase in activity is not clearly apparent, visits to parks and areas surrounding service providers such as the tiny home village clearly demonstrate these outcomes.

These are the specific referenced code sections cited above.

Based upon the following codes requirements that city ordinances regulating “other nuisance conditions” in 14-16-4-3(A)(2) and activities in any zone district... that would create adverse impacts... on neighboring properties.

14-16-4-3(A)(2) All uses shall comply with City ordinances regulating noise, odors, vibration, glare, heat, and other nuisance conditions affecting other properties, as well as the requirements of Section 14-16-5-13 (Operation and Maintenance) unless specifically exempted from one or more of those requirements.

14-16-5-13(A) OPERATING STANDARDS

All structures, uses, and activities in any zone district shall be used or occupied to avoid creating any dangerous, injurious, noxious, or otherwise objectionable condition that would create adverse impacts on the residents, employees, or visitors on the property itself or on neighboring

properties. Uses and activities that operate in violation of applicable State or federal statutes or this IDO are violations of this Section 14-16-5-13 and shall be subject to the penalties of Section 14-16-6-9 (Violations, Enforcement, and Penalties). Property owner responsibilities under this Section include, but are not limited to, compliance with the following standards.

14-16-5-13(B) MAINTENANCE STANDARDS

All property, buildings, and structures shall be maintained in a clean and safe condition and shall not create any public or private nuisance. When the standards and procedures of this IDO or the conditions attached to any permit, approval, or Variance require that any building or site feature be constructed or installed, the property owner is responsible for maintaining those buildings or site features in good repair as approved and for replacing required site features if they are damaged or destroyed or, in the case of living materials, if they become diseased or die after installation. Property owner obligations include, but are not limited to, the following.

5-13(B)(1) Alleys

All alleys shall be maintained by the abutting property owner.

RESPONSE: Parks that experience significant homelessness and surrounding neighborhoods have challenges of increased incidences of syringes, feces, and trash. As there are adjoining residential neighborhoods, with numerous parks within one mile of this facility, some of which have experienced problems with homeless presence with needles, feces, and trash, this facility, with persons using the facility in a city council district that has had over 50 percent of the providers of services to the homeless, prior to opening the overnight shelter facility at Gibson, should clearly be expected to dramatically increase these severe impacts on the surrounding neighborhoods and create a very potentially dangerous environment for the neighboring community and for the unhoused who will be utilizing these surrounding amenities.

As there are many alleys in the surrounding neighborhoods, we would like a condition of a conditional use permit to include daily cleanup by the city of parks, sidewalks, and alleys of needles, feces, weapons, and trash. If this is not done this would place significant adverse impacts on the residences whose properties abut these alleys, or are near these parks, and sidewalks.

If this increase in activity is not clearly apparent, visits to parks and areas surrounding service providers such as the tiny home village clearly demonstrate these outcomes.

For 1 ½ miles, due to the increase in homeless and encampment outside the ¼ mile radius of the overnight shelter, the city is placing a burden on the residential and business neighbors within that area of the city requirement for the property owners to maintain the alley. As stated previously the city should not place that burden, including that of city parks with needles, trash, and feces on the surrounding neighborhoods, and as part of conditions for the Conditional Use Permit, the city should provide daily cleanup of the alleys and parks within 1 ½ miles rather than ¼ miles.

Date: October 19, 2021

Attn: Robert Lucero, Zoning Hearing Examiner

Statement and information presented at October 19, 2021 Zoning hearing by Vera Watson,
re: **Albuquerque's proposed Gateway Center at 5400 and 5006 Gibson Blvd SE**

At this time, the language of the Operational Plan is problematic in regard to **Accountability to Neighborhoods**. It is worth noting that throughout the plan, the City uses the definitive words "WILL" and "WILL NOT" for ALL OTHER elements of operation. It is only within the sections re: **a public safety district** and under **"ACCOUNTABILITY AND COORDINATION WITH NEIGHBORHOODS"** that the definitive "WILL" is replaced with the irresolute "INTENDS." The City needs to guarantee the measures under the Good Neighbor Agreement with a change in wording. The lack of definitive language re: the Good Neighbor Agreement is why we want a legally-binding Good Neighbor Agreement as a condition of their permit approval.

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CITY OF ALBUQUERQUE
OFFICE OF ADMINISTRATIVE HEARINGS
ZONING HEARING EXAMINER
NOTIFICATION OF DECISION

City of Albuquerque Family and Community Services (Agent, Consensus Planning) requests a conditional use to allow an overnight shelter for Lot A1A1A/Lovelace Hospital, Lovelace Hospital, located at 5400 Gibson BLVD SE, zoned MX-H [Section 14-16-4-2]

Special Exception No:..... **VA-2021-00316**
Project No: **Project#2021-005834**
Hearing Date: 10-19-21
Closing of Public Record: 10-19-21
Date of Decision: 11-03-21

On the 19th day of October, 2021, Consensus Planning, agent for property owner, City of Albuquerque Family and Community Services (“Applicant”) appeared before the Zoning Hearing Examiner (“ZHE”) requesting a conditional use to allow an overnight shelter (“Application”) upon the real property located at 5400 Gibson BLVD SE (“Subject Property”). Below are the ZHE’s finding of fact and decision:

FINDINGS:

1. Applicant is requesting a conditional use to allow an overnight shelter.
2. The City of Albuquerque City of Albuquerque Integrated Development Ordinance (“IDO”), Section 14-16-7-1 defines an overnight shelter as “*A facility that provides sleeping accommodations for 6 or more persons for a period of less than 24 hours with no charge or a charge substantially less than market value; it may provide meals and social services. Any such facility open to clients between 10:00 P.M. and 7:00 A.M. is considered an overnight shelter.*”
3. The Subject Property is zoned MX-H, the purpose of which under the IDO is to “*provide for large-scale destination retail and high-intensity commercial, residential, light industrial, and institutional uses, as well as high-density residential uses, particularly along Transit Corridors and in Urban Centers. The MX-H zone district is intended to allow higher-density infill development in appropriate locations.*”
4. Table 4-2-1 of the IDO states that an overnight shelter in the MX-H zone requires a conditional use approval.
5. IDO Section 14-16-6-6(A)(3) (Review and Decision Criteria– Conditional Use) reads: “*An application for a Conditional Use Approval shall be approved if it meets all of the following criteria:*
 - (a) *It is consistent with the ABC Comp. Plan, as amended;*
 - (b) *It complies with all applicable provisions of this IDO, including but not limited to any Use-specific Standards applicable to the use in Section 14-16-4-3; the DPM; other adopted City regulations; and any conditions specifically applied to development of the property in a prior permit or approval affecting the property, or there is a condition of approval that any Variances or Waivers needed to*

comply with any of these provisions must be approved or the Conditional Use Approval will be invalidated pursuant to Subsection (2)(c)2 above.

- (c) *It will not create significant adverse impacts on adjacent properties, the surrounding neighborhood, or the larger community.*
 - (d) *It will not create material adverse impacts on other land in the surrounding area through increases in traffic congestion, parking congestion, noise, or vibration without sufficient mitigation or civic or environmental benefits that outweigh the expected impacts.*
 - (e) *On a project site with existing uses, it will not increase non-residential activity within 300 feet in any direction of a lot in any Residential zone district between the hours of 10:00 P.M. and 6:00 A.M.*
 - (f) *It will not negatively impact pedestrian or transit connectivity without appropriate mitigation.*
6. The applicant bears the burden of providing a sound justification for the requested decision, based on substantial evidence, pursuant to IDO Section 14-16-6-4(E)(3).
 7. The applicant bears the burden of showing compliance with required standards through analysis, illustrations, or other exhibits as necessary, pursuant to IDO Section 14-16-6-4(E)(4).
 8. Applicant timely submitted a written authorization for Agent to act on Applicant's behalf.
 9. Applicant's community outreach regarding the proposed Gateway Center dates back to 2018, and that outreach utilized community input sessions, online surveys, focus groups with people experiencing homelessness, and neighborhood community meetings.
 10. On March 15, 2021, the Albuquerque City Council approved Resolution R-21-141, which required two community input sessions within 45 days and advancement towards a Good Neighbor Agreement by the City with area residents and businesses to be in place for so long as the Gateway Center operates at the Gibson Health Hub site. The City held the two community input meetings on June 10 and June 12, 2021. The first meeting was held online and the second was held at the Gibson Health Hub Educational Building. Input from the meetings is posted on the City website at www.cabq.gov/gateway.
 11. Applicant provided evidence that all property owners and neighborhood associations entitled to notice were notified of the Application. Although a neighboring business owner complained that he did not receive notice, his business was not listed on the list of properties located within the required notice perimeter pursuant to the IDO, and it appears from evidence in the record, including without limitation the perimeter buffer map for the Subject Property, that the complainant's business is located outside the required notice perimeter. Further, the complainant clearly had notice, given that he submitted written evidence before the ZHE hearing and oral testimony at the ZHE hearing. Based on evidence in the record, Application provided the required timely notice to all property owners whose properties are within the required notice perimeter. Opponents submitted a petition signed by business owners who complained of inadequate notice. Nevertheless, based on evidence of mailings, emails, publication, and sign porting, the ZHE finds that the notice given by Applicant was compliant with the requirements of the IDO.
 12. Applicant timely mailed neighborhood meeting requests on June 4, 2021.
 13. On June 22, 2021, the City Land Use Facilitation Program conducted a facilitated pre-application meeting with community members, online via Zoom, to which were invited representatives of the affected neighborhood associations and the community at large.

According to the facilitated meeting report dated June 24, 2021, approximately 98 people registered for the meeting and as many as 80 participated in the meeting at the highest participation.

14. Applicant attended a pre-application meeting with City staff on June 29, 2021.
15. Regarding the requirement under IDO Section 14-16-6-6(A)(3)(a) that the requested conditional use be “*consistent with the ABC Comp. Plan, as amended*”:
 - a. Applicant and supporters of the Application submitted, among other things, the following:
 - i. Goal 6.2 Multi-Modal System: Encourage walking, biking, and transit, especially at peak-hour commuting times, to enhance access and mobility for people of all ages and abilities. Applicant Response: The proposed Gateway Center overnight shelter at the Gibson Health Hub furthers Goal 6.2 Multi-Modal System by placing it in an area with excellent multi-modal access, including transit services, major street network, and pedestrian and bicycle access and connections. The subject property is along Gibson Boulevard, an Urban Principal Arterial, and designated as a Commuter Corridor by the Comprehensive Plan. It is within the designated San Mateo Boulevard Major Transit Corridor area and a 1/2-mile west of the Louisiana Boulevard Major Transit Corridor area.
 - ii. Goal 9.4 Homelessness: Make homelessness rare, short-term, and non-recurring. Applicant Response: The Gateway Center overnight shelter will further Goal 9.4 Homelessness by being a critical component of the City's comprehensive approach to making homelessness rare, short-term, and non-recurring. The City estimates that there are at least 1,525 people in shelters or on the streets in Albuquerque each night, and at least 5,000 households experienced homelessness in 2020. The Gateway Center will address chronic homelessness in Albuquerque by providing safe, dignified emergency shelter within a central, developed area of Albuquerque. In addition, clients will receive wraparound services that help them exit the overnight shelter into stable, permanent housing and other community resources.
 - iii. POLICY 9.4.1: Best Practices: Implement an appropriate and effective model to address chronic homelessness. Applicant Response: The Gateway Center overnight shelter furthers Policy 9.4.1 Best Practices by providing emergency shelter for those experiencing homelessness and work with them to transition into permanent housing. The proposed Gateway Center overnight shelter will function as a "gateway" to end chronic homelessness through the use of three models to effectively transition unhoused community members into housing
 - iv. POLICY 9.4.2 Services: Provide expanded options for shelters and services for people experiencing temporary homelessness. Applicant Response: The proposed Gateway Center overnight shelter will further Policy 9.4.2 Services by expanding options for temporary shelter and services for the City's unhoused populations. Although there are many service providers in Albuquerque that serve the unhoused populations, the City does not currently have a centralized 24/7 center that can connect

unhoused individuals to the support organizations they need, often creating a "gap" in services. By building strong partnerships with existing providers, the City's proposed Gateway Center can serve as a centralized center, allowing for a more efficient connection to essential services and reducing the potential gap in services.

- v. POLICY 9.4.3 Equitable Distribution: Support a network of service points that are easily accessible by residents and workers, geographically distributed throughout the City and County, and proximate to transit. Applicant Response: Locating the proposed Gateway Center overnight shelter at the Gibson Health Hub furthers Policy 9.4.3 Equitable Distribution as reflected in comments from the individuals experiencing homelessness focus groups. The Gateway Center location is accessible to trusted nearby service providers in the International District and is located within the San Mateo Major Transit Corridor area. The proposed Gateway Center is the City's first step towards a dispersed shelter model that will add more shelters and supportive services in other locations within Albuquerque.
- vi. Goal 9.5 Vulnerable Populations: Expand capacity to provide quality housing and services to vulnerable populations. Applicant Response: The proposed Gateway Center will expand the City's capacity to provide services and access to quality housing to vulnerable populations, thereby furthering Goal 9.5 Vulnerable Populations.
- vii. POLICY 9.5.1 Quality Housing: Ensure well maintained, safe transitional and permanent housing for the lowest income households that are most at risk of homelessness. Applicant Response: The proposed Gateway Center furthers Policy 9.5.1 Quality Housing by providing the first step to permanent housing for the most vulnerable in our community. The Time-Limited Model ensures that clients of the overnight shelter have secured permanent housing before they leave the shelter. Low-income clients will have Wraparound services, including case management and assistance securing financial support for housing expenses. The goal of the Gateway Center is to reduce the risk of homelessness by ensuring clients have the support to maintain stable, permanent housing.
- viii. POLICY 9.5.2 Transitional Services: Encourage on-site transitional services with culturally competent service delivery that respects the dignity of individuals and families and fosters self-determination and self-sufficiency, including job training, financial education, and behavioral health assistance. Applicant Response: The services provided at the Gateway Center will support Policy 9.5.2 Transitional Services by providing Wraparound services for individuals and families. The individual leads the team-based, collaborative Wraparound approach to case management. The program is flexible, comprehensive, and can involve a number of organizations. The City will partner with existing community organizations and service providers specializing in delivering culturally competent services that will respect the individual and prepare individualized transition plans.

- b. Opponents of the Application submitted, among other things, the following:
 - i. Under “A Vision for Albuquerque & Bernalillo County” page 3-3 “As the county and city grow in population over the next 20 years, neighborhoods will be safer and easier places to walk through and between. The positive characteristics that contribute to their unique identities will be protected and enhanced.” “The City and the County commit to analyzing the health of our communities and the geographic distribution of our public investments and assets. Where gaps are identified, governments will collaborate with communities, nonprofits, public agencies, and private enterprises to address them.” Opponent Response: This request does not help the positive characteristics of the neighborhood as it adds a further potential crime element to the area, (in an area with the highest overall crime in the City) increases the likelihood of encampments along Gibson Blvd, and fails to create a distribution of investments, and assets for the homeless throughout the City.
 - ii. Guiding Principles found on page 3-8 state the following:
 - 1. **STRONG NEIGHBORHOODS** New development creates desirable places to live and encourages diverse housing and amenities, while respecting the unique history and character of each neighborhood. Opponent Response: does not increase the quality of life as it adds another homeless shelter to Council District 6 which already has the highest number of homeless shelters. This does not increase the quality of life of the residents as the area is suffering from homeless encampments, public urination, defecation and other undesirable activities.
 - 2. **MOBILITY** Residents have improved options to move throughout Albuquerque for work, school, recreation, and services. Opponent Response: homeless encampments along Zuni make the area difficult to walk as there is extensive amounts of debris on the sidewalks, this particularly affects our residents with disabilities as it creates an additional hazard while they are attempting to get from their home to their destination and back again.
 - 3. **ECONOMIC VITALITY** The local economy supports a mix of market activities and promotes financial security for all residents. Opponent Response: Economic Vitality is suffering due to high crime in the area. Additionally homeless encampments would not help to encourage new businesses to open in the area.
 - 4. **EQUITY** All residents have access to good public services, a range of housing options, and healthy places to live, work, learn, and play. Opponent Response: Concentration of homeless services in this sector of the city does not balance negative impact equally across the City.
 - 5. **COMMUNITY HEALTH** All residents are protected from harm where they live, work, learn, and play. Everyone has convenient access to healthy food, parks and open space, and a wide range of

amenities and services. Opponent Response: Increasing homeless encampments would discourage use of parks and open space.

16. Although opponents point out that homeless and behavioral health services are not spread equally throughout the City, the Comp Plan *“uses the term ‘equity’ to describe ensuring that different people or places have the opportunities, access, and services they most need. Many people think ‘equity’ and ‘equality’ are interchangeable terms. ‘Equality’ aims to ensure that all people or places have the same opportunities, access, and services – a laudable goal. Distributing an equal amount to each would be fair if people and places had the same starting amounts. Discussions of “equity” acknowledge that people and places might need and want different things – and have different starting places. The equity approach involves assessing the different needs that people and places have and prioritizing resources and efforts to address them in the order of urgency that best matches those needs to move toward equality over time.”* See Comp Plan at 4-2. Accordingly, the Comp Plan does not require distribution of resources and unwanted land uses equally throughout the City, but rather institutes the policy that resources and unwanted land uses be located equitably, in consideration of the totality of the circumstances.
17. Further, Comp Plan POLICY 5.3.7 states *“Locally Unwanted Land Uses: Ensure that land uses that are objectionable to immediate neighbors but may be useful to society are located carefully and equitably to ensure that social assets are distributed evenly and social responsibilities are borne fairly across the Albuquerque area. (a) Minimize the impacts of locally unwanted land uses on surrounding areas through policies, regulations, and enforcement. (b) Ensure appropriate setbacks, buffers, and/or design standards to minimize offsite impacts.”* Applicant has demonstrated, by the evidence cited in the Notification of Decision and other evidence in the record, its efforts to locate its proposed overnight shelter carefully and equitably in an area of need surrounded by social and governmental assets, and that its operations will benefit not only people suffering homelessness in the immediate area, but in the community as a whole. Also, Applicant has submitted that policies, regulations, enforcement, setbacks, buffers, and design standards will be implemented to minimize any negative impacts.
18. On balance, the ZHE finds that Applicant has provided a sound justification showing compliance with IDO Section 14-16-6-6(A)(3)(a) based on substantial evidence.
19. Regarding the requirement under IDO Section 14-16-6-6(A)(3)(b) that the requested conditional use comply *“with all applicable provisions of this IDO, including but not limited to any Use-specific Standards applicable to the use in Section 14-16-4-3; the DPM; other adopted City regulations; and any conditions specifically applied to development of the property in a prior permit or approval affecting the property, or there is a condition of approval that any Variances or Waivers needed to comply with any of these provisions must be approved or the Conditional Use Approval will be invalidated pursuant to Subsection [14-16-6-6(A)(2)(c)2]”*:
 - a. Applicant and supporters of the Application submitted, among other things, the following:
 - i. The proposed overnight shelter is allowed under the MX-H zone as a Conditional Use. There are ongoing functions at the Gibson Health Hub that fall under hospital use, which is permissive under the MX-H zone. The proposed Gateway Center overnight shelter will comply with the Use-Specific Standards contained in Section 4-3-(C)(6) Overnight Shelter.

- b. Opponents of the Application submitted, among other things, the following:
 - i. The intent of the MX-H zone is undermined because, in the estimation of opponents, the proposed use is not appropriately sited at the Subject Property.
- 20. On balance, the ZHE finds that Applicant has provided a sound justification showing compliance with IDO Section 14-16-6-6(A)(3)(b) based on substantial evidence.
- 21. Regarding the requirement under IDO Section 14-16-6-6(A)(3)(c) that the requested conditional use “*will not create significant adverse impacts on adjacent properties, the surrounding neighborhood, or the larger community*”:
 - a. Applicant and supporters of the Application submitted, among other things, the following:
 - i. By providing secure shelter and services for individuals living in vulnerable situations, the Gateway Center will positively impact the adjacent properties, surrounding neighborhoods, and the larger community that are currently dealing with the unhoused population.
 - ii. Applicant has worked diligently on and adopted a final Operations Plan for the Gateway Center, which was attached in draft form to the Application and was posted on the City's website (www.cabq.gov/gateway) as of 7/3/2021. Because the Operations Plan before the ZHE at the September 21, 2021 ZHE hearing was still only in draft form, the ZHE continued the hearing on the Application from the September 21, 2021 ZHE hearing to be heard at the October 19, 2021 ZHE hearing. Prior to the October 19, 2021 ZHE hearing, Applicant finalized and adopted the Operations Plan and timely submitted it into the ZHE record on the Application, where it has been available for public inspection. The final Operations Plan addresses many community concerns, including impacts on adjacent properties, surrounding neighborhoods, and the larger community, and contains provisions concerning, among other things:
 - 1. Transportation -A shuttle system will be in place to transport referred guests for intake and assessment as well as transport guests to their exit destination, with pick-up and drop-off points at the Gateway Center.
 - 2. Secure entrance - The Gateway Center will have a secured entrance that is staffed 24 hours a day, 7 days a week, to ensure only enrolled guests, staff, and volunteers enter the facility.
 - 3. Physical design - The Gateway Center will utilize Trauma-informed Design and Crime Prevention through Environmental Design (CPTED) design principles. The City's intent is to upgrade all building-mounted lighting and parking lot lighting prior to opening the Gateway Center. Appropriate fencing, landscaping, and other design features will be incorporated to ensure curb appeal and low visual impact.
 - 4. Security - Onsite professional security is currently provided at the Gibson Health Hub and will continue to be once the Gateway Center is open.

5. Weapons - Weapons will not be allowed at the Gateway Center.
6. Entry and Exit - A team of intake officers and front desk staff will be stationed at the entrance, with only enrolled shelter guests, staff, program staff and volunteers, and registered partner agency staff and volunteers allowed to enter the facility.
7. Shelter capacity - If the Gateway Center reaches capacity, single adults seeking shelter will be referred to the Westside Emergency Housing Center or other appropriate shelter options. Transportation will be provided, if needed. Emergency overflow for families will be established in the community or through the use of motel vouchers.
8. Critical Incidence Response - Procedures addressing threats and assaults to clients and staff will be established. Guests that threaten or assault another client or staff will be exited from the Gateway Center and will receive transportation to their exit destination. In addition, de-escalation procedures will be established, with staff receiving training in conflict resolution and de-escalation techniques. The procedures will address the appropriate use of the Albuquerque Police Department resources to resolve safety issues at the Gateway Center.
9. Trash removal - The Solid Waste Department will clean and remove trash on a daily basis from surrounding areas, including sidewalks, bus stops, store fronts, and area parks.
10. Pedestrian safety - Pedestrian crosswalks in the vicinity of the Gateway Center will be improved to promote use, ease, and safety of crossing roadways. Roadway medians will be improved to prevent jaywalking.
11. Encampments - Encampments are expressly prohibited on the Gibson Health Hub property. The Family and Community Services public outreach team will monitor a 14-mile radius for encampments on public and private property. The public outreach team will refer encampments on private property to the City's Code Enforcement Division and a notice for encampments on public property will be posted by the public outreach team on the same day the encampment is observed.
12. Good Neighbor Agreement - The City intends to enter into a Good Neighbor Agreement with the Elder Homestead, Parkland Hills, Siesta Hills, South San Pedro, and Trumbull neighborhood associations. The following will be established through the Good Neighbor Agreement:
 - a. A phone number where residents can report any issues related to the Gateway Center.
 - b. A community dispute resolution process.
13. A Neighborhood Advisory Committee. The Agreement will set the membership of the Committee, which will include neighborhood representatives, City representatives from the organization(s)

operating the Gateway Center, and current or former guests of the Gateway Center. The Committee will meet at least quarterly and will issue an annual survey to community members. The Committee will review and update as needed the Good Neighbor Agreement annually. The Neighborhood Advisory Committee will review baseline data and information over time to provide feedback on high impact strategies to keep community, staff, and clients safe.

- b. Opponents of the Application submitted, among other things, the following:
 - i. The Good neighbor Agreement has not been finalized and signed, and the community has no guaranties as to what the final version, if any, will contain.
 - ii. Articles have shown that crime increases in the area of overnight shelters (however, the research cited was not done on permanent shelters).
- 22. On balance, the ZHE finds that Applicant has provided a sound justification showing compliance with IDO Section 14-16-6-6(A)(3)(c) based on substantial evidence.
- 23. Regarding the requirement under IDO Section 14-16-6-6(A)(3)(d) that the requested conditional use “*will not create material adverse impacts on other land in the surrounding area through increases in traffic congestion, parking congestion, noise, or vibration without sufficient mitigation or civic or environmental benefits that outweigh the expected impacts*”:
 - a. Applicant and supporters of the Application submitted, among other things, the following:
 - i. Development of the Gateway Center will focus on interior renovations. No increases in noise or vibrations will occur or create adverse impacts to the surrounding area. People utilizing the services at the Gateway Center will primarily be relying on shuttles from pick-up locations and service provider facilities, and public bus transit, which will decrease the potential for traffic congestion. The site contains large parking areas, which are more than adequate to support the parking needs of the Gateway Center and the existing tenants.
 - b. Opponents of the Application submitted, among other things, the following:
 - i. The Gateway Center will attract homeless and other pedestrians that will have an increased burden on traffic safety and congestion.
- 24. IDO Table 5-5-1 contains no off-street parking requirement for an overnight shelter.
- 25. On balance, the ZHE finds that Applicant has provided a sound justification showing compliance with IDO Section 14-16-6-6(A)(3)(d) based on substantial evidence.
- 26. Regarding the requirement under IDO Section 14-16-6-6(A)(3)(e) that “*on a project site with existing uses, [the requested conditional use] will not increase non-residential activity within 300 feet in any direction of a lot in any Residential zone district between the hours of 10:00 P.M. and 6:00 A.M.*”:
 - a. Applicant and supporters of the Application submitted, among other things, the following:
 - i. The overnight shelter use at the Gibson Health Hub will not increase non-residential activity within 300 feet of a residential zone district between the hours of 10:00 P.M. and 6:00 A.M. The overnight shelter use will be a

relatively small portion of the Gibson Health Hub premise. The initial phase of the Gateway Shelter is anticipated to limit intakes to between 8:00 A.M to 8:00 P.M. for most community partner referrals, but intakes will be conducted at all hours for referrals from hospitals, first responders, and law enforcement. The intake activity will be more than 500 feet from the R-ML zoned property to the east and buffered by a large parking lot. The closest apartment building within the R-ML site is setback approximately 67 feet east of its shared property line with the Gibson Health Hub. These existing physical conditions and separation between uses, and operating procedures will ensure the adjacent residential use will not impacted by the overnight shelter use at the Gibson Health Hub facility.

- b. Opponents of the Application submitted, among other things, the following:
 - i. The proposed overnight shelter will operate 24 hours a day.
- 27. On balance, the ZHE finds that Applicant has provided a sound justification showing compliance with IDO Section 14-16-6-6(A)(3)(e) based on substantial evidence.
- 28. Regarding the requirement under IDO Section 14-16-6-6(A)(3)(f) that the requested conditional use “*will not negatively impact pedestrian or transit connectivity without appropriate mitigation*”:
 - a. Applicant and supporters of the Application submitted, among other things, the following: The Gateway Center overnight shelter will draw pedestrians, transit riders, shuttles, and vehicles to the site. Impacts on pedestrian and transit connectivity will be appropriately mitigated by various City departments through services and actions that include:
 - i. Shuttle service to and from the site from designated pick-up sites and community partner organizations;
 - ii. Designated onsite pick-up and drop-off location;
 - iii. Evaluation and prioritization of improvements to sidewalks, pedestrian crossings, and medians in Gibson Boulevard and San Mateo by the Department of Municipal Development to ensure pedestrians, neighborhood residents, and visitors have a safe and comfortable walking experience in the area;
 - iv. Evaluation and potential modification to existing transit routes by the City Transit Department to accommodate a potential increase in ridership; and
 - v. Conducting a speed study of Gibson Boulevard and taking appropriate measures as determined by the study.
 - b. Opponents of the Application submitted, among other things, the following:
 - i. The Gateway Center will attract homeless and other pedestrians that will have an increased burden on traffic safety and congestion.
- 29. On balance, the ZHE finds that Applicant has provided a sound justification showing compliance with IDO Section 14-16-6-6(A)(3)(f) based on substantial evidence.
- 30. The City Traffic Engineering Division stated no objection to the Application.
- 31. IDO Section 14-16-4-3(C)(6) requires the following Use-Specific Standards for an Overnight Shelter: *This use is prohibited within 1,500 feet in any direction of any other overnight shelter.*

32. Applicant has satisfied the use specific criteria by establishing that no other overnight shelter is located within 1,500 feet in any direction of the Subject Property, as the closest overnight shelter to the Subject Property is located 2,308 feet away.

DECISION:

APPROVAL of a conditional use to allow an overnight shelter.

APPEAL:

If you wish to appeal this decision, you must do so by November 18, 2021 pursuant to Section 14-16-6-4(V), of the Integrated Development Ordinance, you must demonstrate that you have legal standing to file an appeal as defined.

Successful applicants are reminded that other regulations of the City must be complied with, even after approval of a special exception is secured. This decision does not constitute approval of plans for a building permit. If your application is approved, bring this decision with you when you apply for any related building permit or occupation tax number. Approval of a conditional use or a variance application is void after one year from date of approval if the rights and privileges are granted, thereby have not been executed, or utilized.



Robert Lucero, Esq.
Zoning Hearing Examiner

cc:

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CITY OF ALBUQUERQUE
OFFICE OF ADMINISTRATIVE HEARINGS
ZONING HEARING EXAMINER
NOTIFICATION OF DECISION

City of Albuquerque Family and Community Services (Agent, Consensus Planning) requests a conditional use to allow an overnight shelter for Lot 1, Swift Addn, located at 5006 Gibson BLVD SE, zoned MX-H [Section 14-16-4-2]

Special Exception No:..... **VA-2021-00317**
Project No: **Project#2021-005834**
Hearing Date: 10-19-21
Closing of Public Record: 10-19-21
Date of Decision: 11-03-21

On the 19th day of October, 2021, Consensus Planning, agent for property owner, City of Albuquerque Family and Community Services (“Applicant”) appeared before the Zoning Hearing Examiner (“ZHE”) requesting a conditional use to allow an overnight shelter (“Application”) upon the real property located at 5006 Gibson BLVD SE (“Subject Property”). Below are the ZHE’s finding of fact and decision:

FINDINGS:

1. Applicant is requesting a conditional use to allow an overnight shelter.
2. The City of Albuquerque City of Albuquerque Integrated Development Ordinance (“IDO”), Section 14-16-7-1 defines an overnight shelter as “*A facility that provides sleeping accommodations for 6 or more persons for a period of less than 24 hours with no charge or a charge substantially less than market value; it may provide meals and social services. Any such facility open to clients between 10:00 P.M. and 7:00 A.M. is considered an overnight shelter.*”
3. The Subject Property is zoned MX-H, the purpose of which under the IDO is to “*provide for large-scale destination retail and high-intensity commercial, residential, light industrial, and institutional uses, as well as high-density residential uses, particularly along Transit Corridors and in Urban Centers. The MX-H zone district is intended to allow higher-density infill development in appropriate locations.*”
4. Table 4-2-1 of the IDO states that an overnight shelter in the MX-H zone requires a conditional use approval.
5. IDO Section 14-16-6-6(A)(3) (Review and Decision Criteria– Conditional Use) reads: “*An application for a Conditional Use Approval shall be approved if it meets all of the following criteria:*
 - (a) *It is consistent with the ABC Comp. Plan, as amended;*
 - (b) *It complies with all applicable provisions of this IDO, including but not limited to any Use-specific Standards applicable to the use in Section 14-16-4-3; the DPM; other adopted City regulations; and any conditions specifically applied to development of the property in a prior permit or approval affecting the property, or there is a condition of approval that any Variances or Waivers needed to*

comply with any of these provisions must be approved or the Conditional Use Approval will be invalidated pursuant to Subsection (2)(c)2 above.

- (c) *It will not create significant adverse impacts on adjacent properties, the surrounding neighborhood, or the larger community.*
 - (d) *It will not create material adverse impacts on other land in the surrounding area through increases in traffic congestion, parking congestion, noise, or vibration without sufficient mitigation or civic or environmental benefits that outweigh the expected impacts.*
 - (e) *On a project site with existing uses, it will not increase non-residential activity within 300 feet in any direction of a lot in any Residential zone district between the hours of 10:00 P.M. and 6:00 A.M.*
 - (f) *It will not negatively impact pedestrian or transit connectivity without appropriate mitigation.*
6. The applicant bears the burden of providing a sound justification for the requested decision, based on substantial evidence, pursuant to IDO Section 14-16-6-4(E)(3).
 7. The applicant bears the burden of showing compliance with required standards through analysis, illustrations, or other exhibits as necessary, pursuant to IDO Section 14-16-6-4(E)(4).
 8. Applicant timely submitted a written authorization for Agent to act on Applicant's behalf.
 9. Applicant's community outreach regarding the proposed Gateway Center dates back to 2018, and that outreach utilized community input sessions, online surveys, focus groups with people experiencing homelessness, and neighborhood community meetings.
 10. On March 15, 2021, the Albuquerque City Council approved Resolution R-21-141, which required two community input sessions within 45 days and advancement towards a Good Neighbor Agreement by the City with area residents and businesses to be in place for so long as the Gateway Center operates at the Gibson Health Hub site. The City held the two community input meetings on June 10 and June 12, 2021. The first meeting was held online and the second was held at the Gibson Health Hub Educational Building. Input from the meetings is posted on the City website at www.cabq.gov/gateway.
 11. Applicant provided evidence that all property owners and neighborhood associations entitled to notice were notified of the Application. Although a neighboring business owner complained that he did not receive notice, his business was not listed on the list of properties located within the required notice perimeter pursuant to the IDO, and it appears from evidence in the record, including without limitation the perimeter buffer map for the Subject Property, that the complainant's business is located outside the required notice perimeter. Further, the complainant clearly had notice, given that he submitted written evidence before the ZHE hearing and oral testimony at the ZHE hearing. Based on evidence in the record, Application provided the required timely notice to all property owners whose properties are within the required notice perimeter. Opponents submitted a petition signed by business owners who complained of inadequate notice. Nevertheless, based on evidence of mailings, emails, publication, and sign porting, the ZHE finds that the notice given by Applicant was compliant with the requirements of the IDO.
 12. Applicant timely mailed neighborhood meeting requests on June 4, 2021.
 13. On June 22, 2021, the City Land Use Facilitation Program conducted a facilitated pre-application meeting with community members, online via Zoom, to which were invited representatives of the affected neighborhood associations and the community at large.

According to the facilitated meeting report dated June 24, 2021, approximately 98 people registered for the meeting and as many as 80 participated in the meeting at the highest participation.

14. Applicant attended a pre-application meeting with City staff on June 29, 2021.
15. Regarding the requirement under IDO Section 14-16-6-6(A)(3)(a) that the requested conditional use be “*consistent with the ABC Comp. Plan, as amended*”:
 - a. Applicant and supporters of the Application submitted, among other things, the following:
 - i. Goal 6.2 Multi-Modal System: Encourage walking, biking, and transit, especially at peak-hour commuting times, to enhance access and mobility for people of all ages and abilities. Applicant Response: The proposed Gateway Center overnight shelter at the Gibson Health Hub furthers Goal 6.2 Multi-Modal System by placing it in an area with excellent multi-modal access, including transit services, major street network, and pedestrian and bicycle access and connections. The subject property is along Gibson Boulevard, an Urban Principal Arterial, and designated as a Commuter Corridor by the Comprehensive Plan. It is within the designated San Mateo Boulevard Major Transit Corridor area and a 1/2-mile west of the Louisiana Boulevard Major Transit Corridor area.
 - ii. Goal 9.4 Homelessness: Make homelessness rare, short-term, and non-recurring. Applicant Response: The Gateway Center overnight shelter will further Goal 9.4 Homelessness by being a critical component of the City's comprehensive approach to making homelessness rare, short-term, and non-recurring. The City estimates that there are at least 1,525 people in shelters or on the streets in Albuquerque each night, and at least 5,000 households experienced homelessness in 2020. The Gateway Center will address chronic homelessness in Albuquerque by providing safe, dignified emergency shelter within a central, developed area of Albuquerque. In addition, clients will receive wraparound services that help them exit the overnight shelter into stable, permanent housing and other community resources.
 - iii. POLICY 9.4.1: Best Practices: Implement an appropriate and effective model to address chronic homelessness. Applicant Response: The Gateway Center overnight shelter furthers Policy 9.4.1 Best Practices by providing emergency shelter for those experiencing homelessness and work with them to transition into permanent housing. The proposed Gateway Center overnight shelter will function as a "gateway" to end chronic homelessness through the use of three models to effectively transition unhoused community members into housing
 - iv. POLICY 9.4.2 Services: Provide expanded options for shelters and services for people experiencing temporary homelessness. Applicant Response: The proposed Gateway Center overnight shelter will further Policy 9.4.2 Services by expanding options for temporary shelter and services for the City's unhoused populations. Although there are many service providers in Albuquerque that serve the unhoused populations, the City does not currently have a centralized 24/7 center that can connect

unhoused individuals to the support organizations they need, often creating a "gap" in services. By building strong partnerships with existing providers, the City's proposed Gateway Center can serve as a centralized center, allowing for a more efficient connection to essential services and reducing the potential gap in services.

- v. POLICY 9.4.3 Equitable Distribution: Support a network of service points that are easily accessible by residents and workers, geographically distributed throughout the City and County, and proximate to transit. Applicant Response: Locating the proposed Gateway Center overnight shelter at the Gibson Health Hub furthers Policy 9.4.3 Equitable Distribution as reflected in comments from the individuals experiencing homelessness focus groups. The Gateway Center location is accessible to trusted nearby service providers in the International District and is located within the San Mateo Major Transit Corridor area. The proposed Gateway Center is the City's first step towards a dispersed shelter model that will add more shelters and supportive services in other locations within Albuquerque.
- vi. Goal 9.5 Vulnerable Populations: Expand capacity to provide quality housing and services to vulnerable populations. Applicant Response: The proposed Gateway Center will expand the City's capacity to provide services and access to quality housing to vulnerable populations, thereby furthering Goal 9.5 Vulnerable Populations.
- vii. POLICY 9.5.1 Quality Housing: Ensure well maintained, safe transitional and permanent housing for the lowest income households that are most at risk of homelessness. Applicant Response: The proposed Gateway Center furthers Policy 9.5.1 Quality Housing by providing the first step to permanent housing for the most vulnerable in our community. The Time-Limited Model ensures that clients of the overnight shelter have secured permanent housing before they leave the shelter. Low-income clients will have Wraparound services, including case management and assistance securing financial support for housing expenses. The goal of the Gateway Center is to reduce the risk of homelessness by ensuring clients have the support to maintain stable, permanent housing.
- viii. POLICY 9.5.2 Transitional Services: Encourage on-site transitional services with culturally competent service delivery that respects the dignity of individuals and families and fosters self-determination and self-sufficiency, including job training, financial education, and behavioral health assistance. Applicant Response: The services provided at the Gateway Center will support Policy 9.5.2 Transitional Services by providing Wraparound services for individuals and families. The individual leads the team-based, collaborative Wraparound approach to case management. The program is flexible, comprehensive, and can involve a number of organizations. The City will partner with existing community organizations and service providers specializing in delivering culturally competent services that will respect the individual and prepare individualized transition plans.

- b. Opponents of the Application submitted, among other things, the following:
 - i. Under “A Vision for Albuquerque & Bernalillo County” page 3-3 “As the county and city grow in population over the next 20 years, neighborhoods will be safer and easier places to walk through and between. The positive characteristics that contribute to their unique identities will be protected and enhanced.” “The City and the County commit to analyzing the health of our communities and the geographic distribution of our public investments and assets. Where gaps are identified, governments will collaborate with communities, nonprofits, public agencies, and private enterprises to address them.” Opponent Response: This request does not help the positive characteristics of the neighborhood as it adds a further potential crime element to the area, (in an area with the highest overall crime in the City) increases the likelihood of encampments along Gibson Blvd, and fails to create a distribution of investments, and assets for the homeless throughout the City.
 - ii. Guiding Principles found on page 3-8 state the following:
 - 1. **STRONG NEIGHBORHOODS** New development creates desirable places to live and encourages diverse housing and amenities, while respecting the unique history and character of each neighborhood. Opponent Response: does not increase the quality of life as it adds another homeless shelter to Council District 6 which already has the highest number of homeless shelters. This does not increase the quality of life of the residents as the area is suffering from homeless encampments, public urination, defecation and other undesirable activities.
 - 2. **MOBILITY** Residents have improved options to move throughout Albuquerque for work, school, recreation, and services. Opponent Response: homeless encampments along Zuni make the area difficult to walk as there is extensive amounts of debris on the sidewalks, this particularly affects our residents with disabilities as it creates an additional hazard while they are attempting to get from their home to their destination and back again.
 - 3. **ECONOMIC VITALITY** The local economy supports a mix of market activities and promotes financial security for all residents. Opponent Response: Economic Vitality is suffering due to high crime in the area. Additionally homeless encampments would not help to encourage new businesses to open in the area.
 - 4. **EQUITY** All residents have access to good public services, a range of housing options, and healthy places to live, work, learn, and play. Opponent Response: Concentration of homeless services in this sector of the city does not balance negative impact equally across the City.
 - 5. **COMMUNITY HEALTH** All residents are protected from harm where they live, work, learn, and play. Everyone has convenient access to healthy food, parks and open space, and a wide range of

amenities and services. Opponent Response: Increasing homeless encampments would discourage use of parks and open space.

16. Although opponents point out that homeless and behavioral health services are not spread equally throughout the City, the Comp Plan *“uses the term ‘equity’ to describe ensuring that different people or places have the opportunities, access, and services they most need. Many people think ‘equity’ and ‘equality’ are interchangeable terms. ‘Equality’ aims to ensure that all people or places have the same opportunities, access, and services – a laudable goal. Distributing an equal amount to each would be fair if people and places had the same starting amounts. Discussions of “equity” acknowledge that people and places might need and want different things – and have different starting places. The equity approach involves assessing the different needs that people and places have and prioritizing resources and efforts to address them in the order of urgency that best matches those needs to move toward equality over time.”* See Comp Plan at 4-2. Accordingly, the Comp Plan does not require distribution of resources and unwanted land uses equally throughout the City, but rather institutes the policy that resources and unwanted land uses be located equitably, in consideration of the totality of the circumstances.
17. Further, Comp Plan POLICY 5.3.7 states *“Locally Unwanted Land Uses: Ensure that land uses that are objectionable to immediate neighbors but may be useful to society are located carefully and equitably to ensure that social assets are distributed evenly and social responsibilities are borne fairly across the Albuquerque area. (a) Minimize the impacts of locally unwanted land uses on surrounding areas through policies, regulations, and enforcement. (b) Ensure appropriate setbacks, buffers, and/or design standards to minimize offsite impacts.”* Applicant has demonstrated, by the evidence cited in the Notification of Decision and other evidence in the record, its efforts to locate its proposed overnight shelter carefully and equitably in an area of need surrounded by social and governmental assets, and that its operations will benefit not only people suffering homelessness in the immediate area, but in the community as a whole. Also, Applicant has submitted that policies, regulations, enforcement, setbacks, buffers, and design standards will be implemented to minimize any negative impacts.
18. On balance, the ZHE finds that Applicant has provided a sound justification showing compliance with IDO Section 14-16-6-6(A)(3)(a) based on substantial evidence.
19. Regarding the requirement under IDO Section 14-16-6-6(A)(3)(b) that the requested conditional use comply *“with all applicable provisions of this IDO, including but not limited to any Use-specific Standards applicable to the use in Section 14-16-4-3; the DPM; other adopted City regulations; and any conditions specifically applied to development of the property in a prior permit or approval affecting the property, or there is a condition of approval that any Variances or Waivers needed to comply with any of these provisions must be approved or the Conditional Use Approval will be invalidated pursuant to Subsection [14-16-6-6(A)(2)(c)2]”*:
 - a. Applicant and supporters of the Application submitted, among other things, the following:
 - i. The proposed overnight shelter is allowed under the MX-H zone as a Conditional Use. There are ongoing functions at the Gibson Health Hub that fall under hospital use, which is permissive under the MX-H zone. The proposed Gateway Center overnight shelter will comply with the Use-Specific Standards contained in Section 4-3-(C)(6) Overnight Shelter.

- b. Opponents of the Application submitted, among other things, the following:
 - i. The intent of the MX-H zone is undermined because, in the estimation of opponents, the proposed use is not appropriately sited at the Subject Property.
- 20. On balance, the ZHE finds that Applicant has provided a sound justification showing compliance with IDO Section 14-16-6-6(A)(3)(b) based on substantial evidence.
- 21. Regarding the requirement under IDO Section 14-16-6-6(A)(3)(c) that the requested conditional use “*will not create significant adverse impacts on adjacent properties, the surrounding neighborhood, or the larger community*”:
 - a. Applicant and supporters of the Application submitted, among other things, the following:
 - i. By providing secure shelter and services for individuals living in vulnerable situations, the Gateway Center will positively impact the adjacent properties, surrounding neighborhoods, and the larger community that are currently dealing with the unhoused population.
 - ii. Applicant has worked diligently on and adopted a final Operations Plan for the Gateway Center, which was attached in draft form to the Application and was posted on the City's website (www.cabq.gov/gateway) as of 7/3/2021. Because the Operations Plan before the ZHE at the September 21, 2021 ZHE hearing was still only in draft form, the ZHE continued the hearing on the Application from the September 21, 2021 ZHE hearing to be heard at the October 19, 2021 ZHE hearing. Prior to the October 19, 2021 ZHE hearing, Applicant finalized and adopted the Operations Plan and timely submitted it into the ZHE record on the Application, where it has been available for public inspection. The final Operations Plan addresses many community concerns, including impacts on adjacent properties, surrounding neighborhoods, and the larger community, and contains provisions concerning, among other things:
 - 1. Transportation -A shuttle system will be in place to transport referred guests for intake and assessment as well as transport guests to their exit destination, with pick-up and drop-off points at the Gateway Center.
 - 2. Secure entrance - The Gateway Center will have a secured entrance that is staffed 24 hours a day, 7 days a week, to ensure only enrolled guests, staff, and volunteers enter the facility.
 - 3. Physical design - The Gateway Center will utilize Trauma-informed Design and Crime Prevention through Environmental Design (CPTED) design principles. The City's intent is to upgrade all building-mounted lighting and parking lot lighting prior to opening the Gateway Center. Appropriate fencing, landscaping, and other design features will be incorporated to ensure curb appeal and low visual impact.
 - 4. Security - Onsite professional security is currently provided at the Gibson Health Hub and will continue to be once the Gateway Center is open.

5. Weapons - Weapons will not be allowed at the Gateway Center.
6. Entry and Exit - A team of intake officers and front desk staff will be stationed at the entrance, with only enrolled shelter guests, staff, program staff and volunteers, and registered partner agency staff and volunteers allowed to enter the facility.
7. Shelter capacity - If the Gateway Center reaches capacity, single adults seeking shelter will be referred to the Westside Emergency Housing Center or other appropriate shelter options. Transportation will be provided, if needed. Emergency overflow for families will be established in the community or through the use of motel vouchers.
8. Critical Incidence Response - Procedures addressing threats and assaults to clients and staff will be established. Guests that threaten or assault another client or staff will be exited from the Gateway Center and will receive transportation to their exit destination. In addition, de-escalation procedures will be established, with staff receiving training in conflict resolution and de-escalation techniques. The procedures will address the appropriate use of the Albuquerque Police Department resources to resolve safety issues at the Gateway Center.
9. Trash removal - The Solid Waste Department will clean and remove trash on a daily basis from surrounding areas, including sidewalks, bus stops, store fronts, and area parks.
10. Pedestrian safety - Pedestrian crosswalks in the vicinity of the Gateway Center will be improved to promote use, ease, and safety of crossing roadways. Roadway medians will be improved to prevent jaywalking.
11. Encampments - Encampments are expressly prohibited on the Gibson Health Hub property. The Family and Community Services public outreach team will monitor a 14-mile radius for encampments on public and private property. The public outreach team will refer encampments on private property to the City's Code Enforcement Division and a notice for encampments on public property will be posted by the public outreach team on the same day the encampment is observed.
12. Good Neighbor Agreement - The City intends to enter into a Good Neighbor Agreement with the Elder Homestead, Parkland Hills, Siesta Hills, South San Pedro, and Trumbull neighborhood associations. The following will be established through the Good Neighbor Agreement:
 - a. A phone number where residents can report any issues related to the Gateway Center.
 - b. A community dispute resolution process.
13. A Neighborhood Advisory Committee. The Agreement will set the membership of the Committee, which will include neighborhood representatives, City representatives from the organization(s)

operating the Gateway Center, and current or former guests of the Gateway Center. The Committee will meet at least quarterly and will issue an annual survey to community members. The Committee will review and update as needed the Good Neighbor Agreement annually. The Neighborhood Advisory Committee will review baseline data and information over time to provide feedback on high impact strategies to keep community, staff, and clients safe.

- b. Opponents of the Application submitted, among other things, the following:
 - i. The Good neighbor Agreement has not been finalized and signed, and the community has no guaranties as to what the final version, if any, will contain.
 - ii. Articles have shown that crime increases in the area of overnight shelters (however, the research cited was not done on permanent shelters).
- 22. On balance, the ZHE finds that Applicant has provided a sound justification showing compliance with IDO Section 14-16-6-6(A)(3)(c) based on substantial evidence.
- 23. Regarding the requirement under IDO Section 14-16-6-6(A)(3)(d) that the requested conditional use “*will not create material adverse impacts on other land in the surrounding area through increases in traffic congestion, parking congestion, noise, or vibration without sufficient mitigation or civic or environmental benefits that outweigh the expected impacts*”:
 - a. Applicant and supporters of the Application submitted, among other things, the following:
 - i. Development of the Gateway Center will focus on interior renovations. No increases in noise or vibrations will occur or create adverse impacts to the surrounding area. People utilizing the services at the Gateway Center will primarily be relying on shuttles from pick-up locations and service provider facilities, and public bus transit, which will decrease the potential for traffic congestion. The site contains large parking areas, which are more than adequate to support the parking needs of the Gateway Center and the existing tenants.
 - b. Opponents of the Application submitted, among other things, the following:
 - i. The Gateway Center will attract homeless and other pedestrians that will have an increased burden on traffic safety and congestion.
- 24. IDO Table 5-5-1 contains no off-street parking requirement for an overnight shelter.
- 25. On balance, the ZHE finds that Applicant has provided a sound justification showing compliance with IDO Section 14-16-6-6(A)(3)(d) based on substantial evidence.
- 26. Regarding the requirement under IDO Section 14-16-6-6(A)(3)(e) that “*on a project site with existing uses, [the requested conditional use] will not increase non-residential activity within 300 feet in any direction of a lot in any Residential zone district between the hours of 10:00 P.M. and 6:00 A.M.*”:
 - a. Applicant and supporters of the Application submitted, among other things, the following:
 - i. The overnight shelter use at the Gibson Health Hub will not increase non-residential activity within 300 feet of a residential zone district between the hours of 10:00 P.M. and 6:00 A.M. The overnight shelter use will be a

relatively small portion of the Gibson Health Hub premise. The initial phase of the Gateway Shelter is anticipated to limit intakes to between 8:00 A.M to 8:00 P.M. for most community partner referrals, but intakes will be conducted at all hours for referrals from hospitals, first responders, and law enforcement. The intake activity will be more than 500 feet from the R-ML zoned property to the east and buffered by a large parking lot. The closest apartment building within the R-ML site is setback approximately 67 feet east of its shared property line with the Gibson Health Hub. These existing physical conditions and separation between uses, and operating procedures will ensure the adjacent residential use will not impacted by the overnight shelter use at the Gibson Health Hub facility.

- b. Opponents of the Application submitted, among other things, the following:
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- 28. Regarding the requirement under IDO Section 14-16-6-6(A)(3)(f) that the requested conditional use “*will not negatively impact pedestrian or transit connectivity without appropriate mitigation*”:
 - a. Applicant and supporters of the Application submitted, among other things, the following: The Gateway Center overnight shelter will draw pedestrians, transit riders, shuttles, and vehicles to the site. Impacts on pedestrian and transit connectivity will be appropriately mitigated by various City departments through services and actions that include:
 - i. Shuttle service to and from the site from designated pick-up sites and community partner organizations;
 - ii. Designated onsite pick-up and drop-off location;
 - iii. Evaluation and prioritization of improvements to sidewalks, pedestrian crossings, and medians in Gibson Boulevard and San Mateo by the Department of Municipal Development to ensure pedestrians, neighborhood residents, and visitors have a safe and comfortable walking experience in the area;
 - iv. Evaluation and potential modification to existing transit routes by the City Transit Department to accommodate a potential increase in ridership; and
 - v. Conducting a speed study of Gibson Boulevard and taking appropriate measures as determined by the study.
 - b. Opponents of the Application submitted, among other things, the following:
 - i. The Gateway Center will attract homeless and other pedestrians that will have an increased burden on traffic safety and congestion.
- 29. On balance, the ZHE finds that Applicant has provided a sound justification showing compliance with IDO Section 14-16-6-6(A)(3)(f) based on substantial evidence.
- 30. The City Traffic Engineering Division stated no objection to the Application.
- 31. IDO Section 14-16-4-3(C)(6) requires the following Use-Specific Standards for an Overnight Shelter: *This use is prohibited within 1,500 feet in any direction of any other overnight shelter.*

32. Applicant has satisfied the use specific criteria by establishing that no other overnight shelter is located within 1,500 feet in any direction of the Subject Property, as the closest overnight shelter to the Subject Property is located 2,308 feet away.

DECISION:

APPROVAL of a conditional use to allow an overnight shelter.

APPEAL:

If you wish to appeal this decision, you must do so by November 18, 2021 pursuant to Section 14-16-6-4(V), of the Integrated Development Ordinance, you must demonstrate that you have legal standing to file an appeal as defined.

Successful applicants are reminded that other regulations of the City must be complied with, even after approval of a special exception is secured. This decision does not constitute approval of plans for a building permit. If your application is approved, bring this decision with you when you apply for any related building permit or occupation tax number. Approval of a conditional use or a variance application is void after one year from date of approval if the rights and privileges are granted, thereby have not been executed, or utilized.



Robert Lucero, Esq.
Zoning Hearing Examiner

cc:

ZHE File
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BEFORE THE ZONING HEARING EXAMINER
FOR THE CITY OF ALBUQUERQUE

M I N U T E S

Agenda Items 3 & 4
Project Number PR-2021-005834
Case Numbers VA-2021-00316 and 317
October 19, 2021

HEARING EXAMINER:

ROBERT LUCERO, ESQ.

STAFF:

Lorena Patten-Quintana, ZHE Planner
Suzie Sanchez, ZHE Admin. Assistant

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THE HEARING EXAMINER: That concludes Agenda Item 2 and brings us to the old business portion of our agenda. And we'll begin the two agenda items that will be heard together. They're Agenda Items 3 and 4, and it's VA-2021-00316 and 317, both listed under Project Number PR-2021-005834, City of Albuquerque Family and Community Services, through agent Consensus Planning, requests a conditional use to allow an overnight shelter for Lot A1A1A, Lovelace Hospital, Lovelace Hospital, located at 5400 Gibson Boulevard, Southeast, zoned MX-H. And the same applicant and agent requesting the same use at Lot 1, Swift addition, located at 5006 Gibson Boulevard, Southeast, also zoned MX-H.

And just before we call the agent, I'd like to suggest that we proceed -- or just let everyone know that we're going to proceed in the same way that we did last month in this matter. We'll hear from the agent and the applicant, who will be allotted five minutes each. And then I would request that one representative of each neighborhood association follow that, and they would be allotted five minutes each. And then any other public comment will follow that, and they'll be allotted two minutes each.

So with that, I see we have Ms. Fishman, the agent with us.

Are you there?

MS. FISHMAN: Yes.

THE HEARING EXAMINER: Okay. Thank you. Would you please full name and mailing address for the record.

MS. FISHMAN: Yes. Good morning, Mr. Lucero. My name is Jackie Fishman. My address is 302 8th Street, Northwest, Albuquerque, 87102.

THE HEARING EXAMINER: Thank you. And please raise your right hand. And do you affirm under penalty of perjury that your testimony today will be true?

MS. FISHMAN: Yes, I do.

THE HEARING EXAMINER: Thank you. Okay. Would you like me to go ahead and swear in the applicant representatives at this point, or would you like to proceed with your presentation?

MS. FISHMAN: I would like to proceed with the presentation. I think the applicant which is, department of family and community services, is all together in -- in their department conference room. And they will be responding -- helping me to respond to questions. But in terms of the presentation, I'm going to be doing that myself.

THE HEARING EXAMINER: Okay. Very good. And would you like to do a screen-share?

MS. FISHMAN: No, I don't think I need one today.

THE HEARING EXAMINER: Okay. Thank you. Go ahead.

MS. FISHMAN: Okay. Thank you, Mr. Lucero and everybody else for allowing the applicant to address a request for conditional use of an overnight shelter of the Gibson Health Hub a second time. Since our September 21st hearing, the department of family and community services has finalized both the operations plan and administrative policies.

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As an agent, I think it's important to the process that the final documents be part of the ZHE's decision on this application. So we -- we appreciate this opportunity.

The applicant has heard and considered the concerns of the community and is confident that the final ops plan and administrative policies adequately address community concerns. This project represents an unprecedented level of coordination and commitment between city departments, and that includes Albuquerque Police Department, the community safety department, planning department, fire department, solid waste, department of municipal development and transit department.

We have heard a lot of concern about shelter capacity. It's been a major concern expressed throughout the process, and we've heard fears that it would house up to 500 people. This has been addressed with the shelter -- with the shelter being phased to serve approximately 25 families and 100 adults on a nightly basis.

We've also heard concerns about the Good Neighbor Agreement. That is progressing along. It's going to be with five area neighborhood associations, including Elder Homestead, Parkland Hills, Siesta Hills, South San Pedro and Trumbull. That agreement will -- includes a phone number for neighbors to report issues, a community dispute resolution process, and a neighborhood advisory committee that will meet at least quarterly. They'll also distribute an annual survey to community members and provide feedback to the city on community safety issues.

Transportation has also been a concern. This has been addressed with the shuttle system. It will have designated on-site pickup and drop-off locations and will provide transport -- transport for intake, and assessment into exit destinations when the guest leaves.

Security services are -- have been another concern. This has been addressed with professional security services that are currently provided on-site and will continue to be provided once the shelter opens. Also a safety team trained in de-escalation will be deployed, and metal detection, fire alarm, annunciator system, security cameras, an alarm system and way-finding system will be installed.

Entry and exit at the shelter has been addressed by the entrance being staffed at all times, 24/7, with intake personnel and front-desk staff. The entry will be limited to guests that -- that are receiving services there, staff, volunteers and partner agencies' staff.

Also, another concern we heard are about encampments. They will be prohibited on the property, and an FCS outreach team will monitor a quarter-mile radius for encampments on a daily basis on both public and private property.

Trash removal is being addressed by solid waste. They're going to be removing trash from surrounding sidewalks, bus stops, storefronts and area parks on a daily basis.

Another concern, parking and building lighting upgrades, fencing upgrades and other design features to the site will be part of the site improvements. And construction will be managed by the department of municipal development.

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Pedestrian safety in the area will be addressed by DMD through improvements to crosswalks at Gibson and San Mateo, and also modifying medians to prevent jaywalking.

Lastly, business support. FCS will be -- will have strategies for supporting businesses in the area, and those will include strategies identified in the homeless coordinating council's community coordinated framework on homelessness.

With that, Mr. Lucero, our team stands ready for any questions you may have.

THE HEARING EXAMINER: Thank you, Ms. Fishman. And thank you for submitting into the record that finalized operations plan.

I read through it and -- and I did see many of the items that you summarized now.

Were any significant changes made to this final plan from the draft that was initially submitted into the record?

MS. FISHMAN: Mr. Lucero, no, there weren't changes made. I think the idea was that the documents were draft while -- you know, while we had made application for this process and a lot of meetings were going on.

And the department feels very confident that the concerns that they've heard have been addressed and so they finalized both of the documents being, you know, cognizant of some comments that, "Well, it's only" -- "it's only a draft. How do we know that it's really going to be the final operations plan." And so that's what gave us the impetus to finalize those documents.

THE HEARING EXAMINER: Okay. Understood. Thank you.

Okay. I think that was the only question that I had. I'm sure some questions might come up during the public comment portion. But is -- would the applicant representatives like to add anything before we call for public comment?

MS. PIERCE: Thank you, Mr. Lucero. I'm Carol Pierce, director of family and community services. Nothing to add to what Ms. Fishman, our agent, has said. But we just thank you for this time today.

THE HEARING EXAMINER: Thank you, Ms. Pierce.

Let's go ahead and get you sworn in just in case you address anything substantive.

Would you please state your full name and mailing address for the record.

MS. PIERCE: Carol Pierce, 400 Marquette, Northwest.

THE HEARING EXAMINER: Thank you. And please raise your right hand. And do you affirm under penalty of perjury that your testimony today will be true?

MS. PIERCE: I do.

THE HEARING EXAMINER: Thank you. All right. Very good.

Well, let's go ahead and see -- call for public comment. I do see several of the speakers that spoke last month. And so, again, let's start with one representative of each neighborhood

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association, and then we'll go to all the other public comments after that.

So I see Khadijah Bottom.

Are you there, Ms. Bottom?

MS. BOTTOM: Yes, sir, I am.

THE HEARING EXAMINER: Thank you. Would you please state your full name and mailing address for the record.

MS. BOTTOM: Yes, my name is Khadijah Bottom. My mailing address is (inaudible) Valencia Drive, Southeast, Apartment 8, ZIP, 87108.

THE HEARING EXAMINER: Thank you, Ms. Bottom. And I seem to be getting a little bit of noise on your microphone. Do you think you could get a little closer maybe, or turn the volume up?

MS. BOTTOM: Okay.

THE HEARING EXAMINER: Oh, that's much better. Thank you.

MS. BOTTOM: Okay.

THE HEARING EXAMINER: And please raise your right hand. And do you affirm under penalty of perjury that your testimony today will be true?

MS. BOTTOM: Yes, sir.

THE HEARING EXAMINER: Thank you. And you're representing a neighborhood association; is that right?

MS. BOTTOM: Yes, sir.

THE HEARING EXAMINER: Which one is that?

MS. BOTTOM: South San Pedro

THE HEARING EXAMINER: Thank you. Go ahead, ma'am. Five minutes, please.

MS. BOTTOM: Good morning, everyone. Before I go into it, I would just like to share a situation I just found out about one of the shelters. September -- September the 10th, a young lady that I knew, that I had become acquainted with here in Wilson Park area was just killed on I-40. She was (inaudible) hit and run.

With that being said, sir, I have (inaudible) operation plan for the Gateway Center, as well as administrative policies. Being a person who has worked in agencies of this nature, I also have a nonprofit her in the International District that works a lot with the unsheltered and refugees resettled -- resettling here in Albuquerque.

I would just like to say to all that the Gateway Center is not going to be the one stop to eradicate homelessness in our area, but it will be a start to prevent others from meeting the fate that the young lady just did last month.

With the operations plan and administrative policy, for those of us who ran businesses, if it was to be open tomorrow, based on the operation plan and administrative policies, it could go

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forward.

There is no way that we could be able to identify every pitfall that may come (inaudible). But at least this would give us a start to help the unsheltered.

I'm not turning a deaf ear to the (inaudible) have their opposition, but this -- this is -- this -- if you just look at Albuquerque as a whole, you will see we have to do something for our unsheltered neighbors. And Gateway would be a great alternative to them living on the parks and in the streets.

We are looking now to collect items to help those (inaudible). But we have the opportunity to open a door to assist them.

I'm just saying, Mr. Lucero, with all due respect, sir, we need the Gateway Center.

I'd like to yield the remainder of my time to Enrique Cardiel.

THE HEARING EXAMINER: Thank you, Ms. Bottom. Before we -- before you go, I just had a question.

MS. BOTTOM: Yes.

THE HEARING EXAMINER: You know, the applicant and agent have referenced the Good Neighbor Agreement. And do you believe that that puts a -- a structure in place to address any future problems that may arise, given the continual sort of feedback with the community?

MS. BOTTOM: Yes, sir. I (inaudible) a much needed thing, because then that way, those that's concerned will actually have leverage to assure that their concerns are being met. And I -- I welcome the Good Neighbor Agreement.

THE HEARING EXAMINER: Thank you. And you mentioned you wanted to concede your time to a fellow representative. Who was that?

MS. BOTTOM: Enrique Cardiel.

THE HEARING EXAMINER: Enrique, are you there?

MR. CARDIEL: Yes, I am.

THE HEARING EXAMINER: Oh, there you are. Thank you, sir. Would you please state your full name and mailing address for the record.

MR. CARDIEL: Yes. And my camera is not working, so I apologize for that.

Enrique Cardiel, 420 Indiana, Southeast, 87108.

THE HEARING EXAMINER: Thank you, Mr. Cardiel. And please raise your right hand. And do you affirm under penalty of perjury that your testimony today will be true?

MR. CARDIEL: Yes.

THE HEARING EXAMINER: Thank you, sir. Go ahead.

MR. CARDIEL: Well, I want to follow up on what my neighborhood association president, Ms. Bottom, just said, and just really say that getting people off of the street will be important. And we

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know that there's a large number of folks already in the community. I doubt people will travel very far to -- to come here. There's already lots of folks here.

The more fencing we see around lots, like AMAFCA just did on Pennsylvania and Zuni, just pushes people onto the sidewalk, makes them more visible. It makes people feel like there's more unhoused people here.

So creating a space where people can have a place to be off the street will help us, both short-term and long term.

And we know that anybody who has worked with unhoused folks, people don't get housing in 90 days or 30 days, or even six months sometimes. There's a lot of issues to go -- to deal with, and there's also a large shortage of housing that's available for folks.

So we need to address those things, as well, and we need to realize the Gateway Center is just one component of this. And we need to build on it and we need to make sure that we also do all the different steps that need to be done, like push the city to create more housing, push the county to create more housing, and to make sure that people can actually have somewhere to live and get support.

You know, we've seen what the Tiny Home Village -- if you create too restrictive of a process to get in, then folks are still outside. And that's what we're trying to avoid. So hopefully, the center will be flexible enough to -- to serve folks and to help folks get to the proper services they need outside of the Gateway Center, as well as services that are there.

And that is all that I have for today. Thank you.

THE HEARING EXAMINER: Thank you, Mr. Cardiel.

I see Raven Del Rio with the hand raised. Hello.

MS. DEL RIO: Hello.

THE HEARING EXAMINER: Good morning. Are you representing a neighborhood association?

MS. DEL RIO: Yes. I'm representing Elder Homestead Neighborhood Association

THE HEARING EXAMINER: Thank you. Would you please state your full name and mailing address for the record.

MS. DEL RIO: Yes. I'm Raven Del Rio. My legal name is Kristen Green, and I live at 808 Florida Street, Southeast, here in Albuquerque

THE HEARING EXAMINER: Thank you. Please raise your right hand. And do you affirm under penalty of perjury that your testimony today will be true?

MS. DEL RIO: Yes, I do

THE HEARING EXAMINER: Thank you. Five minutes. Go ahead.

MS. DEL RIO: Thank you for having me speak today.

As our neighborhood is in close proximity to the proposed Gateway facility and has been included in this process from the very

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beginning, I request that you reject the City of Albuquerque Family and Community Services conditional-use application on the grounds that the applicant did not adequately complete the IDO's submission process for their permit for the proposed Gateway Center at 5400 and 5006 Gibson Boulevard, Southeast.

I have two reasons for this request. The first is the city's incomplete map of service providers for the homeless. The City of Albuquerque's map of service providers for the unhoused entered into evidence at the initial zoning hear on September 21st is woefully incomplete. Either by omission or accident, the city map does not appear to include many of the providers such as drug and alcohol treatment facilities, mental health providers, faith-based meal sites and so forth.

This severely skews the percentage of service providers in District 6, significantly downplaying the district's overburden of services versus what is contained in the remaining eight districts and unincorporated areas.

The map included in the PHNA submittal shows a very different story. I extensively researched not only the city's own resources online to build my map, but I also researched each entries website to ensure that they worked with the homeless in whole or in part.

The full map includes not only men's shelters, but women's, family, youth and runaway shelters, drug and alcohol treatment facilities, mental health services, meal sites, et cetera.

By this research, whose data was converted by Robert Pierson, District 6 holds a whopping 51.25 percent of the city's various services, a number which does not include the private, state nor federal halfway homes in the city.

The second is the overburden creating significant adverse impact.

In the Gateway meeting with Mayor Keller at Whittier Park on Monday, April 19th, the mayor promised that the five neighbors set into the Gateway would be the ones receiving preferential treatment as far as security and community policing. And he acknowledged the real threat of adverse impact. The mayor advocated for bicycle patrols and even Gateway's own security forces to be implemented to break up encampments and ensure that the neighborhood would not be affected by negatives commonly attributed to the unhoused and those that prey upon them.

Since that meeting the goal posts have been moved in ever-tightening perimeters around the Gateway, with the most recent, previously unheard-of number of just one quarter mile of mitigation appearing at the September 21st hearing, and, again, today, which will not adequately cover the adjoining five neighborhoods as originally promised.

By providing a near quarter mile of observations, cleanup of parks and alleys and displacing inevitable encampments, the city has placed and ever-greater burden on neighborhoods one quarter to one and a half miles from the shelter. This will intentionally move encampments into the five set-in neighborhoods and nearby businesses, creating significant adverse impact on these neighborhoods in particular and District 6, in general. Equity would not place over 50 percent of the services burden on a mere 11 percent of the city's neighborhoods.

Time and again, we've asked the city to consider the magnetization effect of shelters and services upon this area.

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But the city dismisses these concerns as beyond their control. But the threat is real -- sorry, I lost my place -- and can be seen in the unmitigated mess created by the city at Wells Park. Trumbull Village has seen encampments materialize at UNM services along the Zuni corridor, and pleas for help are often unheeded until an election year.

This year, a massive influx of encampments appeared near the Tiny Home Village, magnetizing into the area upon the groundbreaking and increasing throughout the building process. Tiny Homes is known for its strict requirement, so much so that it remains at less than 25 percent occupancy today. Despite this, ten clusters can be seen up and down the length of Tennessee between Central and Zuni, and down Zuni starting at Louisiana, increasing in numbers past the UNM facilities, where the tiny homes -- up to where the tiny homes are situated. And at this time, the problem remains ignored.

The neighborhoods surrounding the Gateway are not imagining a significant negative impact coming, they are already living the first wave of it. Given the city's lackluster response to the problems they, themselves, created in other shelter initiatives, we respectfully request that they be denied the conditional-use permit until independent studies are concluded, until they prove no significant adverse impact on surrounding neighborhoods, and that the city will, in timely fashion, remediate to the satisfaction of residents and businesses any and all negative impacts as they occur.

Thank you.

THE HEARING EXAMINER: Thank you, Ms. Del Rio.

I just had a question, Ms. Del Rio. That -- the quarter mile sort of patrol radius that you mentioned, what do you think would be a reasonable patrolled radius that would address the concerns you raised?

MS. DEL RIO: The reasonable patrol radius would be the original promise made by Mayor Keller on April 19th, and reiterated numerous times thereafter, which would cover Parkland Hills as an adjoining neighborhood, and the other four set-in neighborhoods of Trumbull village, Elder Homestead, South San Pedro, and, I'm sorry, just lost the last one. So there's five neighborhoods all together.

Those are the neighborhoods that should receive the preferential treatment, that should receive security, that should receive an ongoing patrol to make sure that we don't have the magnetization effect occurring.

I don't know how it keeps getting shrunken narrower and narrower and narrower. But a quarter of a mile doesn't even touch the edges of some of these neighborhoods that were promised treatment from the get-go. A quarter mile barely gets beyond the first couple of blocks.

I'm a runner, I run my neighborhood every day, and I can hit a quarter mile easily like three blocks from here. And that's not even getting me to Gibson. So as from what I can gather -- I mean, as the car drives, it is a mile and a half up Gibson and up Louisiana, just to the Southeast Heights -- I'm sorry, the southeast substation. So as the crow flies, that's got to be at least a mile. So that's the edge of Elder Homestead. A quarter mile isn't -- it's not even -- it's not going to cover our neighborhood.

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We're going to end up seeing the homeless encampments that come in being pushed into these neighborhoods. And what is immediately around the Gateway is going to look nice and clean. We know that the Gateway is going to have their on security. We know they're going to have their fencing. They're going to make sure their property is just fine. We want the same consideration. We want what was promised to us

THE HEARING EXAMINER: Thank you, Ms. Del Rio.

MS. DEL RIO: Thank you.

THE HEARING EXAMINER: Let's see. I see Peter Kalitsis with the hand raised. Are you there, sir?

MR. KALITSIS: Yes, I am.

THE HEARING EXAMINER: Thank you. Would you please state your full name and mailing address for the record.

MR. KALITSIS: I'm Peter S. Kalitsis, mailing -- my address is 921 Pampas, P, as in Paul, A, M as in Mark, P as in Paul, A, S as in Sam, Drive, southeast.

THE HEARING EXAMINER: Thank you, sir. And are you representing a neighborhood association?

MR. KALITSIS: Yes. I'm representing Parkland Hills Neighborhood Association.

THE HEARING EXAMINER: Thank you, sir. And please raise your right hand. Do you affirm under penalty of perjury that your testimony today will be true?

MR. KALITSIS: I do.

THE HEARING EXAMINER: Thank you, sir. Go ahead. Five minutes, please.

MR. KALITSIS: Okay. I want to make it clear, we -- our neighborhood association, we're in support of a well-planned shelter to support the unhoused. The key is well planned. And there are seven points I want to go over.

I want to quickly mention correction of Ms. Gonzales' testimony of the purpose of the UNM study, which I have paperwork that I can put online that actually states that it is for use for determining the Gateway shelter.

The second is inconsistent operation plan language when it comes to -- instead of saying "will" or "not," it goes to "intends" in the operations plan.

Third is the -- Jackie Fishman's statement that, "We followed the IDO process." They did not meet the law on the IDO process. Parkland Hills never had their meeting. We submitted the information, she acknowledged the error.

Four, we're requesting -- the city has put in that day -- there will be no day shelter. We request that's part of the conditional use.

Five, the good neighborhood agreement, we're waiting. Jackie says it's been progressing. Parkland Hills and I think other ones are waiting to be talked with. I don't know who they're

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talking with; possibly providers of services and other neighborhood associations.

And the -- six, we have over overburden, creating significant adverse impact, which has to do with neighbors being responsible for cleaning up the trash, debris, syringes, feces that may occur, which goes to the quarter mile versus the one and a half mile.

And the last is, it was mentioned incorrectly in reading the document that the administrative policies was the final -- was final. It needs to be read, because on Page 3, Paragraph 2, it says that this is a preliminary draft.

Okay. In going over those, as far as Ms. Huval's statement, I can share my screen to show at one of the meetings (inaudible) presented that the purpose of this study is to navigate concerns and opportunities related to the construction of Gateway Center shelter, in addition to inform future research directions; second, evaluate impacts and benefits, people, served neighbors, community.

So that's where correcting Ms. Huval's statement.

Operation language, it's stating throughout that "will" and "will not" for other elements, except public safety. And then accountability and coordination with neighborhoods, "will" is replaced with "intends." Therefore, not showing good faith. The city needs to guarantee measures under good neighborhood agreement.

Three, the IDO language, as I clearly stated, and I'll reiterate from last time, it is not -- has not been met. I know it was intended, but it didn't.

Day shelter is clearly stated. As I said, good neighborhood agreement, progress -- progressing where -- we're wondering, where are they meeting with the neighborhoods? Maybe they -- the only one -- we haven't talked to Trumbull or South San Pedro, but Elder Homestead, Siesta Hills and Parkland Hills, we have not had meetings regarding that.

And the last point, as far as overburden, there are sections of the IDO which talks about creating -- under conditional use, creating nuisance conditions affecting other properties, operating standards, violations and property owners responsible. Maintenance standards, they shall not create any public or private nuisance, and alleys shall be maintained by the abutting owners.

And so this reason is -- and people in Siesta Hills have been experiencing it with feces as far as we need the -- it's the -- the mile and a half that Ms. Del Rio was mentioning. The city to, on a daily basis, go about cleaning in the alleys those items. Not weeds. That's the owner's responsibility, but anything related to the -- to the homeless encampments.

And I can read all of the zoning parts if you want, but I do have it and I will be submitting it.

Do you want me to share screen as far as the -- the intent of the UNM study, or just submit it?

THE HEARING EXAMINER: It's up to you, sir. Either way. Yeah, would you like to --

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MS. SANCHEZ: Robert, the five minutes is up.

MR. KALITSIS: Oh, okay. That answers the question.

THE HEARING EXAMINER: Okay. Thank you, sir.

MR. KALITSIS: Thank you very much.

THE HEARING EXAMINER: (Inaudible) if you could get it by -- to -- by Friday, then it will be submitted. Thank you.

MR. KALITSIS: I will do that. Thank you very much.

THE HEARING EXAMINER: Okay. Let's see. I seeal Vera Watson with the hand raised.

Are you there, Ms. Watson? Hello. Oh, looks like you're muted there. I think the mute is on the lower left of the screen, if you could click the little microphone.

Okay. We'll come back to -- we'll come back to Ms. Watson.

Okay. I think I see -- it says IDED Media.

MR. HORTON: Hello, Robert Lucero. I'm Alex Horton, executive director of the International District Economic Development Center

THE HEARING EXAMINER: Thank you, Mr. Horton. Are you representing a registered neighborhood association?

MR. HORTON: Yes, South San Pedro.

THE HEARING EXAMINER: Okay. And, you know, I believe we already had a couple speakers from -- from that association; is that right?

MR. HORTON: We're as a neighbor -- as a resident.

THE HEARING EXAMINER: Okay. Mr. Horton, I'm going to come back to you after all the neighborhood associations have spoken. Thank you very much, sir. Please hold on the line. Thank you.

Is there any -- let's see. I see Sandra Perea.

MS. PEREA: Good morning.

THE HEARING EXAMINER: Good morning, Ms. Perea. Would you please state your full name and mailing address for the record.

MS. PEREA: Sandra Perea. And my mailing address is P.O. Box 4690. And the ZIP code is 87196.

THE HEARING EXAMINER: Thank you. And you're representing which neighborhood association?

MS. PEREA: So I'm actually not a representative. I'm going to speak as a resident.

THE HEARING EXAMINER: Okay. We'll come back to you as, as well, then.

MS. PEREA: Okay.

THE HEARING EXAMINER: Thank you.

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Is there -- are there any other residents from neighborhood associations who have not yet had a chance to speak? Let's see if Ms. Watson's there.

Are you there, Ms. Watson?

MS. WATSON: Yes, I'm there. But I'm a public comment, not a neighbor -- not for a neighborhood association. Thank you.

THE HEARING EXAMINER: Okay. I'll come back to you.

MS. WATSON: And my mute button would not work, Mr. Lucero. I apologize --

THE HEARING EXAMINER: Oh, no worries.

MS. WATSON: -- because I kept hitting. I sent a message to Susie also in the chat.

THE HEARING EXAMINER: (Inaudible)

MS. WATSON: I -- I -- I'm going to keep my hand raised. Thank you.

THE HEARING EXAMINER: Okay. All right. Any other neighborhood association representatives before we go to the public comment? Okay. Let's go back to Mr. Horton, since I had called on him first.

Are you there, sir?

MR. HORTON: Yes. Thank you, Mr. Lucero.

THE HEARING EXAMINER: Would you mind stating your full name again and your mailing address for the record.

MR. HORTON: Yes. Alex Horton, 111 Wyoming Boulevard, Northeast, 87108.

THE HEARING EXAMINER: Thank you, sir. And please raise your right hand. And do you affirm under penalty of perjury that your testimony today will be true?

MR. HORTON: Yes.

THE HEARING EXAMINER: Thank you, sir.

And just for the record, I wanted to disclose that I know Mr. Horton, and I have represented, as a lawyer, entities with which he is related. However, I do not represent him individually. I feel that I do not have any conflict of interest, and that my ability to fairly decide this matter on the law and the facts presented is not impaired in any way.

Go ahead, Mr. Horton.

MR. HORTON: Thank you. Thank you, Robert.

As a community member, resident, landlord, landowner and business owner in the district, we know that the unhoused is a -- is an issue in our area when it comes to a pure economic development standpoint, right?

I, for one, have had two dead bodies found on properties. And so I know that it's a huge -- it's a huge issue.

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My main thing is that there's no place for the unhoused to go. And now, with the colder months kind of coming, coming up, you know, that starts a lot of things, like fires really can create some unsafe areas. So there does need to be a place for individuals unhoused to go.

So for the shelter to be put in place, I'm talking as a person, not as an organization, that I'm in support of just what the opposite side can be. And will it be perfect, no. But I think that we have to try to make steps going forward to make it work and ultimately get the unhoused housed and have a safe place.

Hearing everyone's comments has been very eye-opening, eye-opening for me, but -- and we all live through the same thing. My thing is that we kind of have to have a place for unhoused to go.

And this center can also act as an economic driver. I remember when Lovelace was there and it was in full capacity, those restaurants up and down Gibson were ultimately filled up, right? There was a Blake's, there was tons of restaurants. There was JR's. And now, with it being vacant, a lot of those restaurants have closed down.

And so when we're just talking about pure things of economic drivers actually helping getting folks off the streets, during COVID, McDonald's closed down their lobby, and a lot of people were, like, "Oh, yeah, they closed down their lobby," well, a lot of the unhoused would buy a drink and go use the rest room. And since the pandemic, I've seen a massive increase in cleaning up feces, needles, and a bunch of other things that we have to do. And I've seen that uptick during that being closed. And so just a simple place to be able to use the rest room, be able to get shelter, get off the streets when it's cold.

I have can see it being a worse effect on the community if we don't get this thing open coming up here in these upcoming months.

And I will close with those remarks. And I'm happy to hear everyone else's comments. Thank you.

THE HEARING EXAMINER: Thank you, Mr. Horton.

Let's go next to Sandra Perea.

Are you there, ma'am?

MS. PEREA: Yes, I am.

THE HEARING EXAMINER: Thank you. Would you please state your full name and mailing address for the record.

MS. PEREA: Sandra Perea, mailing address P.O. Box 4690, ZIP code, 87196.

THE HEARING EXAMINER: Thank you. And please raise your right hand. And do you affirm under penalty of perjury that your testimony today will be true?

MS PEREA: Yes.

THE HEARING EXAMINER: Thank you. Go ahead, ma'am. Two minutes, please.

MS. PEREA: Okay. So thank you for allowing me to speak today.

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My name is Sandra Perea, and I am the president of the Elder Homestead Neighborhood Association.

The city has not met the requirements for issuance of the permit as mandated by the City Council Bill Number R-21-141, Enactment Number R-2021-021, Appendix A.

In Section 2, the city shall not issue a certificate of occupancy for any conditional use permits for the Gateway Center until two community input sessions have occurred and the good neighborhood program described in Section 1 of this bill has been completed.

In the hearing on September 21st, the applicant claimed that it was the responsibility of the neighborhood associations to do outreach to the businesses. This is a false claim, as the responsibility is on the applicant. That onus was acknowledged by Carol Pierce.

At a meeting on April 13th of 2021 at the homeless coordinating council, Carol stated they have a plan to reach to the businesses that are nearby; having good -- having good communication and good relationship with surrounding neighbors and businesses is really important. This includes the VA and the surrounding schools. We want to have these individual conversations with all the people close to us.

Up until the week of September 14th, six months after the purchase of the property, and one month after the submitted application, the city failed to engage, notify or invite businesses for input as mandated by this resolution. The city has boldly neglected to act in good faith toward our business community, to include a last-ditch effort handing out fliers at 3 o'clock on the day before the original hearing on September 21st.

And finally, I would ask that you reference my previously submitted evidence, Appendix B, which is the signed petition of the businesses that were not notified.

Thank you.

THE HEARING EXAMINER: Thank you, Ms. Perea.

All right. Let's go to Vera Watson.

Are you there, ma'am?

MS. WATSON: Yes.

THE HEARING EXAMINER: Thank you. Would you please state your full name and mailing address for the record

MS. WATSON: My name is Vera Watson. My address is 1715 Ridgecrest Drive Southeast, Albuquerque, New Mexico, 87108.

THE HEARING EXAMINER: Thank you. And raise your right hand. Do you affirm under penalty of perjury that your testimony today will be true?

MS. WATSON: Yes, I do.

THE HEARING EXAMINER: Thank you, ma'am. Go ahead. Two minutes, please.

MS. WATSON: Yes. Thank you for allowing me to speak, examiner Lucero.

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I'm a resident of Parkland Hills Neighborhood Association. I have been a board member of the association, a founding secretary. I've lived here 33 years, and I'm very interested in maintaining the quality of our neighborhood.

At this time, the language of the operational plan is problematic in regard to the accountability to the neighborhoods. It's worth noting that throughout the plan the city uses the definitive words "will," in quotes, sir, and "will not" in quotes, for all other elements of operation. It's only within the sections regarding a public safety district and under accountability and coordination with neighborhoods, those were in quotes, that the definitive "will" is replaced with a resolute "intends."

The city needs to guarantee the measures under the Good Neighbor Agreement with a change in this wording. "Intend" and "will" mean very different legal things, as you know, sir.

The lack of the definitive language regarding the Good Neighbor Agreement is why we want a legally binding Good Neighbor Agreement as a condition of their permit approval. And just -- that's what I'd like to say.

And just to add one more thing, and with all due respect, sir, could you -- I do not recall that Ms. Fishman was sworn in when she started giving her testimony today. Would you please see that she does that for the record.

Thank you for your time.

THE HEARING EXAMINER: Thank you, Ms. Watson. Appreciate you pointing that out.

MS. WATSON: Yes. And I noticed, also, sir, that I don't believe that she was sworn in for the first hearing on September 21st, either.

So I know Ms. Carol Pierce was. She's a city representative. And you've sworn in everyone else. But in order for this to be perfectly legal, Ms. Fishman also needs to be sworn in on this recording. Thank you.

THE HEARING EXAMINER: Thank you, Ms. Watson.

MS. WATSON: Thank you.

THE HEARING EXAMINER: Let's see. I see Sarah Fitzgerald with the hand raised.

Are you there.

MS. FITZGERALD: I'm here. Good morning. I'm Sarah Fitzgerald. I'm speaking -- I'm sorry. Go ahead.

THE HEARING EXAMINER: Oh, just if you could state your mailing address for the record.

MS. FITZGERALD: Yes. I'm speaking on behalf of the board of directors of the Greater Albuquerque Chamber of Commerce today. Our mailing address is 400 Tijeras, Avenue, 87102.

THE HEARING EXAMINER: Thank you. And please raise your right hand. And do you affirm under penalty of perjury that your testimony today will be true?

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MS. FITZGERALD: I do.

THE HEARING EXAMINER: Thank you. Go ahead.

MS. FITZGERALD: Thank you for the opportunity to speak to you all this morning.

So our city's challenge with homelessness is a really complex one. There are so many ideas on how we approach it as a community. But I think there are two things that we can really all agree on. The first is that our community desperately lacks overnight sheltering for the homeless, especially within city limits, and especially among single adults. We don't have enough overnight shelter beds in the Albuquerque area, and those we do have are often so far from the city, itself, that they're difficult to access. It's not really a practical option.

So equipping our city's infrastructure with beds to serve an additional 25 families and 100 single adults every night is a really important start for keeping our unhoused community members safe and off the streets.

Secondly, if we really want people experiencing homelessness to be able to find and transition into stable housing, we must improve the coordination of services and care. The chamber has studied the issue of homelessness for years, and we believe it's imperative that access to assistance and services be collocated on-site. So everything from ID recovery, to short-term medical care, to behavioral health screenings in order to adequately support a person and connect them to the full range of help that they probably need.

The Gateway Center is going to be that hub to connect people experiencing homelessness with the services they need, with the goal of decreasing over time the number of people who need that overnight sheltering.

So our Gateway Center on Gibson is a critical first step in addressing these challenges, and we urge you to approve this permit to help move this important project forward.

Thank you.

THE HEARING EXAMINER: Thank you, Ms. Fitzpatrick.

I see Leslie Padilla with the hand raised.

It looks like you're still muted there, ma'am.

MS. PADILLA: Leslie Padilla. Thank you, Mr. Hearing Examiner.

THE HEARING EXAMINER: Thank you, ma'am. And what's your mailing address, for the record?

MS. PADILLA: Certainly. It's 621 Valverde Drive, Southeast, 87108.

THE HEARING EXAMINER: Thank you. And please raise your right hand. AND do you affirm under penalty of perjury that your testimony today will be true?

MS. PADILLA: I do.

THE HEARING EXAMINER: Thank you. Go ahead. Two minutes, please.

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MS. PADILLA: Thank you, Mr. Hearing Examiner, for the opportunity to speak today.

I have several concerns about whether the city has actually met the requirements for the conditional-use permit. And I wanted to speak to both the general adverse impact requirement and the no specific adverse requirement on traffic.

The city -- it seems to me that the city is simply asserting that there will be no adverse impact. There have not been any studies done to ensure that there won't be any adverse impact. The operations plan, to me, reads as a long list of how the city intends to mitigate adverse impact, without actually first trying to understand what the adverse impact might be and how far it will extend.

Because the adverse impact conditional-use requirement speaks to not only adjacent property, but surrounding neighborhoods for the larger community. And the operations plan lists crime, garbage, encampments, traffic, weapons, police, de-escalation -- I heard that for the first time this morning -- fire. Simply outlining how the city might mitigate adverse impact, to me, is not sufficiently establishing that there will be no adverse impact.

Adverse impact on traffic, I'm particularly disappointed on this issue, actually, because it doesn't seem like there's been any actual traffic study done.

I live on Valverde. Folks over here will know that between San Mateo and Carlisle, there's no major north/south street. People use Valverde drive to get to Ridgecrest to go up to San Mateo. There's already speed bumps on Valverde. People exceed the speed limit fairly regularly here. And I think there will be traffic impact on Valverde.

The shuttle that the operations plan seems to rely on seems to not understand that a lot of people are experiencing homeless out of their own vehicles and will transport themselves. So how -- the city does need to do more in terms of ensuring -- studying the adverse impact first, and then ensuring that there will be no adverse impact on traffic.

I wanted to just talk briefly about the point that Ms. Del Rio made about equity, and it just --

MS. SANCHEZ: Excuse me, Robert. The two minutes is up.

MS. PADILLA: Okay. Thank you.

THE HEARING EXAMINER: Well, go ahead and finish your thought, Ms. Padilla.

MS. PADILLA: Well, I think just think the adverse -- the equity issue hasn't been well thought through. If this were a new gravel pit or a chemical refinery that were being placed in a neighborhood that already had those kinds of issues, environmental justice advocates would not stand for it; that would not be considered equitable.

So I don't know how putting a new shelter here, that is going to potentially exacerbate issues, all the issues that the city's operations plan addresses, is equitable for a neighborhood that is already, as Ms. Del Rio explained, providing far more than its fair share of accommodation for those kinds of issues.

And thank you very much.

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THE HEARING EXAMINER: Thank you, Ms. Padilla.

I see a Pierson with the hand raised.

MS. PIERSON: Good morning, Zoning Hearing Examiner Lucero. How are you today?

THE HEARING EXAMINER: Not bad, sir. How are you?

MS. PIERSON: Doing well.

THE HEARING EXAMINER: Thank you. Would you please state your full name and mailing address for the record

MS. PIERSON: My name is Robert Pierson. My mailing address is 1324 Odlum, O-d-l-u-m, Drive, Southeast, 87108.

THE HEARING EXAMINER: Thank you, sir. And please raise your right hand. And do you affirm under penalty of perjury that your testimony today will be true?

MS. PIERSON: I do.

THE HEARING EXAMINER: Thank you, sir. Go ahead.

MS. PIERSON: So there's a couple of issues that kind of trouble me with the initial presentation this morning.

And Jackie mentioned that the proposed development was going to be phased and it was going to start with 25 families and 100 people. Well, coinciding with that and all the proposed agreements that supposedly in place to help protect neighborhoods in relation to this conditional-use application, the city is proposing a change to the IDO that says overnight shelter changing from conditional to permissive in the MX-M and MX-H also allows overnight shelters in zones where multi-family dwellings and social services are permissive. See related changes for specific standards at Subsection 4-3(C)(6) for size limit in MX-M, indicating there will be no size limit in the MX-H zone, which is the current zone under consideration.

So this looks like an end-around the conditional use approval process to allow them to fully expand this facility as big as they want it by changing the zoning law.

So I'm not sure the city is going to be willing to honor their agreements after this becomes a permissive use and the conditional use standards are no longer applied to the property.

And as Ms. Del Rio pointed out, there are inaccuracies in the city's data when they did the mapping. The problem is, is that to the businesses are not registered as a homeless shelter or some sort of a homeless something or another. They don't find it on -- they don't run -- churches don't get tied to any sort of homeless shelters they provided, so their maps were inaccurate because they relied on the geographical information services in the Albuquerque -- that the City of Albuquerque provide their data.

And then the other thing, you know, everyone is kind of talking about how this is going to alleviate the housing problems and homelessness. Everything that the city has said is this is a temporary transitional thing. This may get some family off the street for a night or two, maybe even a week. But this isn't a family shelter that is permanent. This is transitional housing,

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where they're taking people off the street, having them live there for a few months while they get jobs, get back on their feet, and then they're able to move into an apartment somewhere else.

This is -- by their own admission, this is a transitional medical type thing, where somebody is coming out of a stay that isn't really capable of being, you know, put back out on the street or needs some additional help to finish recovery. And that's what they're saying.

So there's a lot of arguments being made as to the benefits of this, but I suspect that, you know, based on the fact that the city proposed a zone change to the IDO right after the conditional use approval request, or they knew they were going to have to go through the process, doesn't feel like they're planning on following what they're saying they're going to do. Because they are, you know, basically taking the end-around to this.

So if they were, for whatever reason, denied by you, they would then be able to move forward with it permissively if the council adopts the change to the IDO.

So I think the neighborhoods are right to have some serious concerns about this and the city's intentions.

THE HEARING EXAMINER: Thank you, Mr. Pierson.

I see Venice Ceballos.

Are you there?

MS. CEBALLOS: Yes, I am. This is Venice Ceballos

THE HEARING EXAMINER: Hi, Venice. Would you please state your mailing address for the record.

MS. CEBALLOS: Sure. Mailing address is, let's see, 1 University of New Mexico, MSCO-74410, Albuquerque, New Mexico, 87131.

THE HEARING EXAMINER: Thank you. And please raise your right hand. And do you affirm under penalty of perjury that your testimony today will be true?

MS. CEBALLOS: Yes.

THE HEARING EXAMINER: Thank you. Go ahead.

MS. CEBALLOS: Hi. So, again, I am from the University of New Mexico. I work for community health worker initiatives under the office for community health.

And I have read the ops plan and admin policies and are very comfortable with the principles of how the Gateway will operate. Again, we are planning on having space there, where we will provide case management services. The documents point to an effort that maintain collaboration between the city and the community partners to provide person-centered services, and we support that.

Thank you.

THE HEARING EXAMINER: Thank you, Ms. Ceballos.

Okay. Is there anyone else who has not yet spoken and would like

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to address Agenda Items 3 and 4? I'm scrolling through the participant list and I don't see anyone with their hand raised. Again, it's Agenda Items 3 and 4, City of Albuquerque Family and Community Services requesting a conditional use for overnight shelter, 5400 and 54 -- I'm sorry, 5006 Gibson. Please raise your hand if you'd like to address that matter and have not yet spoken. Last call for Agenda Items 3 and 4.

Okay. Ms. Fishman, are you there?

MS. FISHMAN: Yes, I am.

THE HEARING EXAMINER: Thank you. So we had a public comment that there was some uncertainty about you having been sworn in. And while I recall that I did, let's do it again, just to be sure.

MS. FISHMAN: Okay.

THE HEARING EXAMINER: So would you please raise your right hand?

MS. FISHMAN: And I would just respond, Mr. Lucero, to say that I was sworn in on both occasions. But I will swear in a third time.

THE HEARING EXAMINER: Thank you.

MS. FISHMAN: There you go.

THE HEARING EXAMINER: And do you affirm under penalty of perjury that your testimony both today and at the prior ZHE hearing on this matter will be true and was true?

MS. FISHMAN: Yes, I do. And it was and will be today.

THE HEARING EXAMINER: Thank you. Thank you. Very good.

So you've heard the public comment. And I just want to give you the opportunity to respond. And go ahead.

MS. FISHMAN: Sure. Thank you, Mr. Lucero. I will -- I've been taking notes as people have been commenting, and I'll try to hit on some of the high points.

And Carol Pierce may want to add some comments to my comments.

But I wanted to start with the definition of equity. I have been looking at that, and I think that's something that the IDO and the comprehensive plan speak to. And equity is defined -- related to racial and social justice, means meeting communities where they are and allocating resources and opportunities as needed to create equal outcomes for all community members.

And this is separate from the definition of equality, which means individual or a group of people are given the same resources and opportunities regardless of their circumstances.

So in -- in social and racial justice movements, equality can actually increase inequalities -- inequities, rather, in communities, as not every group of people needs the same level of resources or opportunities allocated to them in order to thrive.

So I wanted to get that out there.

In terms of what Ms. Del Rio spoke to about the Good Neighbor Agreement and coverage, the quarter-mile coverage, I'm going to

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try to address that. And Ms. Pierce -- director Pierce may want to add to that.

But the Good Neighbor Agreement will cover all five neighborhood associations. The department will be collecting community baseline data from all five neighborhoods. When we talk about the quarter-mile radius, this is reference to the outreach team monitoring for encampments. And I'm told that the quarter-mile radius is substantiated where there has been measurable impact on the neighborhoods. And, again, Carol may want to add to that.

I'm unclear what Ms. Del Rio and Mr. Kalitsis are referring to when they say our application was incomplete. As somebody that's been doing this for 30 years, I can tell you my firm followed the IDO notification process and the application requirements to the letter of the law. And I think that's evidenced by the findings in the notification of decision from the September hearing.

All five of the neighborhood associations were notified. Even though office of neighborhood coordination did not name all five, we did that anyways, at -- both at the time of preapplication and at the application notice. All associations were invited to the facilitated meeting, and to my knowledge, all -- all the five neighborhood associations were represented at the facilitated meeting, which is also part of the ZHE record.

In terms of Ms. Padilla referenced traffic impact and a traffic-impact study wasn't done, understanding the city's process for a traffic-impact study, this project would not warrant a traffic-impact study because those are based on level of -- of peak-hour traffic, and there is no way that the Gateway will -- will exceed peak-hour traffic and get to that threshold that requires a traffic study.

I would also add that not only will the Gateway have a shuttle service, but as I testified in the first hearing, the transit department is also looking at extending transit services on the routes in this area. So there will be multiple ways of transporting people.

In terms of Mr. Pierson's comments about we're going to start with 25 families and 100 individuals, actually what I said, both on the record for the last hearing in September and today, was that the city plans to ramp up in phases to 25 families and 100 individuals. So that -- that was a mischaracterization of my comment.

Also, Mr. Pierson probably should know that the conditional use will run with the property as long as the use is in place. You know, your decision to -- you know, based on this -- this application, we hope it's positive. If it is, you know, the findings will -- will be in place. You may have conditions of approval; those aren't going to go away if the IDO gets revised in the future. That will stay with -- with these on this property.

Also, there was some comment about medical care. My understanding is the respite care will be separate from the shelter use. Again, this still -- it's in the MX-H zone. Hospitals are permissive in MX-H. And the respite care is part of a hospital use, as determined by the city's ZEO, the zoning enforcement officer. I think that's on the record, as well. And if it's not, I can provide that.

And I believe, and Carol can correct me if I'm wrong, that shelter can be provided at the -- shelter services can be

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provided at the Gateway Center for up to 90 days. So this is not an overnight shelter, you know, one night kind of thing, a couple of days. It's really being designed in-- for longer shelter than just a couple of days.

So, Carol, would you like to add to anything that I said?

MS. PIERCE: Yes, I would. Thank you. Thank you, Jackie.

A couple of things. On the quarter-mile radius that we've sited in our plan at Page 11, that distance is substantiated in the literature review with our UNM partners. Throughout this hearing, as well as the prior one, we've heard about the UNM study on neighborhood impact. And so that -- that quarter-mile radius is really determined, and that's kind of the most impact that potentially related to homeless shelters. We can also provide that literature review if it's helpful.

Wanted to say, in our Good Neighbor Agreement, we've got some of the initial components also on Page 11. That will include all five neighborhood associations that Ms. Fishman has cited that we've been meeting with. And so the measures, the community measures, that we'll be looking at that will be in that contractually binding agreement, will be included in that Good Neighbor Agreement. So we'll go beyond the quarter mile.

Also in that quarter mile, we will have -- we have added five community outreach positions reaching out to people unhoused, in encampments. Two of those positions will have an office the Gateway. And we'll be doing that daily neighborhood walkabout within the quarter mile.

I also wanted to add that the traffic study that was mentioned, we are working in tandem with the department of municipal development to do a Gibson traffic study, with the company being Parametrix. And that should be completed in November. As well as I know transit is very important and we know there's multiple transit routes, and some would be improved. And we're also doing a transit study with our fellow transit department.

I wanted to also just speak to the beds, and I think -- Jackie, thanks for clarifying -- we're going to ramp up. We do know we need to have -- see how it works as we have people that are seeking shelter and how that flows and make improvements as we go.

I do want to say that while our model is a 90-day model, where -- and Mr. Pierson spoke to this very well, but people can get connected to services, get the support they need and ultimately to housing, while it is based on a 90-day model, there may be people that will stay less than that. But our model is based on a 90-day, meeting people where they're at, developing a plan to connect them to the services that they need, which includes housing, whether that's housing with family members or other kind of supportive housing options or affordable housing options.

And I think I will just end with one example. So during the pandemic, the city has housed more people than we ever have in the city's history, and they're unhoused people that can't shelter in place unless a shelter is provided.

And currently, in one of our wellness hotels, where we have housed 162 people, 82 are children, and that is that model, where they are seeking shelter. It's not permanent shelter. But then we're transitioning them with support and case management and all the surrounding support that they need to have more permanent

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housing.

And I thank you, Mr. Lucero, for this time today

THE HEARING EXAMINER: Thank you, Director.

I had a quick question. You just mentioned that hotel. And, you know, I guess what I'm getting at is, earlier, one of the public comments was that, you know, a lot of the submittals from the city seem to address mitigation of potential adverse impacts that might occur, but we don't really -- you know, obviously, we didn't -- we can't forecast everything that might happen. But in the city's experience with these hotels, have there been any adverse impacts, and what sorts of things have occurred, and is that kind of how these things have built out of?

MS. PIERCE: Thank you, Mr. Lucero for that question. Interestingly enough, on our wellness hotels, we have not had substantial numerous complaints. I can say we did have one complaint. It was related to panhandling. And that was occurring -- that was by a neighbor, and that was near one of our hotels. And then we addressed that with our resident. But overall, that's been very notable, that we haven't had substantial complaints.

I will say we're often asked by the media and other players and people where these hotels are. We don't disclose that because to really honor the people that are in those hotels. But we have not had numerous complaints at all.

THE HEARING EXAMINER: Okay. All right. And then I don't know whether -- who wants to address this, whether the applicant representatives or the agent. But there was some discussion about the Resolution R-21-141 and whether that has been -- has been met. Would you'd like to address that question?

MS. FISHMAN: I -- Mr. Lucero, this is Jackie Fishman. Either I can address that or director Pierce can address it.

But the resolution did require two community meetings within 45 days of the resolution. And we did meet that requirement. We had a community meeting on June 10th and June 12th. And then the other part of the resolution addressed making progress on a Good Neighbor Agreement and so that -- the Good Neighbor Agreement would be in place for as long as the Gateway Center is operational in this location.

And we believe that the department has met that requirement, as well. And I'm happy to pull up that resolution, if need be. But we looked at that very carefully, and -- and, again, sworn under testimony that I -- I believe it's been that.

THE HEARING EXAMINER: Okay. You mentioned a little bit -- oh, was that you, Director? Sorry?

MS. PIERCE: Yes. Excuse me, Mr. Lucero. The only thing I would add to Ms. Fishman's comment, I do agree that we have met the conditional use requirement, we did also provide a point of contact and ongoing contact for neighborhoods or community, an e-mail address to have that point of contact. As well as our department number is also used.

THE HEARING EXAMINER: Okay. Okay. And then there was some comment or question about the language of the -- of the adopted final op plan and policies, that there was some language in those that indicated that they were preliminary only.

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Is that something that needs to be revised? And maybe something could be submitted?

MS. PIERCE: Mr. Lucero, I can speak to that.

The language -- well, as I think one of the participants today spoke about the future language, we do use future language example on the traffic study. The traffic study will be done, but it's not done yet. But it is in our project management plan.

So I would certainly take advice -- we do believe -- these are our plans. These are what we're committed to. It's everything we've committed to so far. We know that things can be added as we move forward. But we are committed to completing everything that is in both of these plans

THE HEARING EXAMINER: Okay. All right. Anything else to add in closing from the agent or the applicant representatives?

MS. FISHMAN: Mr. Lucero, not from me. Thank you.

THE HEARING EXAMINER: Very good. Well, thank you. Everybody. I want to thank all of the speakers today, the neighborhood association representatives, all of the public comment providers, as well as the agent and the applicant. I appreciate the civil discourse, the manner in which you were very professional, all of you.

And it's clear that a lot of thought has gone into this from many sides, and so I will do my best to respect that and -- and make a decision that is well based on the facts presented and the law that applies.

And so with that, we'll go ahead and close the record on this matter and I'll take everything else under consideration and issue the written decision within 15 days. Thank you, everybody.

MS. FISHMAN: Thank you.

(Conclusion of partial transcript
of proceedings.)

**ZHE Minutes, Agenda Items 3 & 4
October 19, 2021**

RE: CITY OF ALBUQUERQUE ZHE HEARING MINUTES OF
OCTOBER 19, 2021, AGENDA ITEMS 3 & 4

TRANSCRIPTIONIST'S AFFIRMATION

I HEREBY STATE AND AFFIRM that the foregoing is a correct transcript of an audio recording provided to me and that the transcription contains only the material audible to me from the recording was transcribed by me to the best of my ability.

IT IS ALSO STATED AND AFFIRMED that I am neither employed by nor related to any of the parties involved in this matter other than being compensated to transcribe said recording and that I have no personal interest in the final disposition of this matter.

IT IS ALSO STATED AND AFFIRMED that my electronic signature hereto does not constitute a certification of this transcript but simply an acknowledgement that I am the person who transcribed said recording.

DATED this 13th day of December 2021.

/S/

Kelli A. Gallegos-----

ZHE Minutes, Agenda Items 6 & 7
September 21, 2021

BEFORE THE ZONING HEARING EXAMINER
FOR THE CITY OF ALBUQUERQUE

M I N U T E S

Agenda Items 6 & 7
Project Number PR-2021-005834
Case Numbers VA-2021-00316 and 317
September 21, 2021

HEARING EXAMINER:

ROBERT LUCERO, ESQ.

STAFF:

Lorena Patten-Quintana, ZHE Planner
Suzie Sanchez, ZHE Admin. Assistant

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THE HEARING EXAMINER: Okay. So that brings us to Agenda Items 6 and 7, and those are VA-2021-00316 and 317, and they're both listed under Project Number PR-2021-005834, City of Albuquerque Family and Community Services, through agent Consensus Planning, request a conditional use to allow an overnight shelter for Lot A1A1A, Lovelace Hospital, Lovelace Hospital located at 5400 Gibson Boulevard, Southeast, zoned MX-H, and the City of Albuquerque Family and Community Services, same agent, requesting a conditional use to allow an overnight shelter for Lot 1, Swift addition, located at 5006 Gibson Boulevard, Southeast, also zoned MX-H.

Now, before I call on the agent, I want to remind everybody that we're going to abide by the rules of procedure, and so, again, we're going to try to enforce the time limits. Suzie will let us know when the speaker's time is concluded.

And we did receive one request for an accommodation because of visual impairment, and so that speaker will be allotted additional time. But other than that, we will be abiding by the time requirements.

And, again, also, if you have any -- if you're on your computer and you have an exhibit that you'd like to show, you can request to do a screen-share.

And, again, I encourage all of you to keep your testimony limited to the merits of the case and to those matters that are germane to the required elements of the case.

Okay. So with that, let's go ahead and see if we have the agent with us. I think I see Jackie Fishman.

MS. FISHMAN: Yes.

THE HEARING EXAMINER: Good morning.

MS. FISHMAN: Good morning.

THE HEARING EXAMINER: Would you please state your full name and mailing address for the record.

MS. FISHMAN: Yes. Thank you, Mr. Lucero. My name is Jackie Fishman. My address is 302 8th Street, Northwest, Albuquerque, 87102.

THE HEARING EXAMINER: Thank you. And please raise your right hand. And do you affirm under penalty of perjury that your testimony today will be true?

MS. FISHMAN: I do.

THE HEARING EXAMINER: Thank you. Go ahead.

MS. FISHMAN: Mr. Lucero, if -- if I may, I would like to -- to have director Carol Pierce from family and community services say a couple words. I'm -- I'm hoping it's not going to take away from my -- my time. But if you would allow her to speak for about a minute that would be great.

THE HEARING EXAMINER: Oh, yes, yes. I -- that sounds good. I had originally thought you would speak first, and then any city commentary. But we can have the city speakers go first. That's fine.

MS. FISHMAN: Okay. Thank you.

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THE HEARING EXAMINER: Who do we have here. I see here conference room.

MS. PIERCE: Yes, thank you.

THE HEARING EXAMINER: Yes. Would you please state your full name and mailing address for the record.

MS. PIERCE: Yes, Carol Pierce, 400 Marquette, Suite 504, Albuquerque, 87102.

THE HEARING EXAMINER: Thank you. And please raise your right hand. And do you affirm under penalty of perjury that your testimony today will be true?

MS. PIERCE: Yes.

THE HEARING EXAMINER: Thank you.

You know, I should have asked, will any of the other folks in the room be speaking?

MS. PIERCE: When we come to the question and answer, yes, potentially.

THE HEARING EXAMINER: Okay. Very good. We can get them sworn in then.

And since the ZHE rules of procedure do allow for city staff commentary, we will go ahead and -- and allow five minutes of -- of commentary at this time. Go ahead

MS. PIERCE: Thank you so much. My name is Carol Pierce. I'm the director of family of community services here at the City of Albuquerque. And here in our room today, I've got our team from the department that have been working on this project.

We feel like that the City of Albuquerque was given a very clear mandate in 2019, when the voters overwhelmingly supported the bond issue for the creation of a shelter for people who are unhoused.

And since that time, we've been gathering community input, we sought out expertise, best practices for building and running a shelter and working with our community partners on how to plan and deliver these services for our unhoused neighbors.

The city right now is making a lot of investments in services, housing and resources for unhoused here in Albuquerque. And we believe that a trauma informed gateway center and the health hub at Gibson will be major pieces of this overall system of care that exists in Albuquerque today, but is needed to address the needs of people experiencing homelessness. So it can connect them to the resources and the housing that they need.

So thank you very much.

THE HEARING EXAMINER: Thank you. Thank you. We look forward to hearing more details as the -- as this matter progresses through the testimony.

MS. FISHMAN: Mr. Lucero, this is Jackie Fishman again. Could somebody share the screen? I have a presentation.

THE HEARING EXAMINER: Yes. Go ahead.

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MS. FISHMAN: Thank you. One moment, please.

THE HEARING EXAMINER: And -- and if you wouldn't mind, you and anyone else who does the share-screen, if they would e-mail to Suzie any document that they share on the screen, that would be very much appreciated so it could constitute part of the written record, as well.

MS. FISHMAN: Okay. All right. Well, thank you. I'm -- I'm going to get started. I will do my best to stay within our time allotment.

Again, the applicant here is family and community services department. We are requesting an approval of a conditional primary use for an overnight shelter at the Gibson Health Hub. The property is zoned MX-H, which allows overnight shelter as a primary conditional use.

As Ms. Pierce mentioned, in 2009 [sic], the city was given a mandate from voters, who approved \$14 million in GO bonds for a facility that provides temporary housing for people experiencing homelessness in Albuquerque.

Our initial community outreach effort for the Gateway Center was in December 2018, it was followed by an online survey, focus group meetings and community meetings. And then in April of 2021, the city purchased the Gibson property for the development of the Gateway Center.

Numerous meetings have been held to bring us to this point, but I'll come back to community outreach, if I can, at the end of my presentation.

THE HEARING EXAMINER: Sure.

MS. FISHMAN: The Gibson site, again, is zoned MX-H. It allows hospital as a permissive use. The facility currently has numerous tenants; seven of which already provide medical and/or behavioral health services to the community.

The site, as you know, is comprised of two parcels, with a combined acreage of 20.8 acres. The site is located along Gibson Boulevard, which is a designated community corridor -- or commuter corridor within an area of change in the Lovelace VA employment center. It's also within the designated San Mateo Boulevard major transit corridor area.

The existing facility is 572,000 square feet. The city is proposing to use a small portion, approximately 10 to 15 percent of the existing facility for the overnight shelter. A renovation to the facility will be to the interior with the existing building footprint proposed to remain as is.

The next couple slides just show an aerial view of the -- of the facility. This image is looking north, with the VA complex in the foreground, the Gibson Health Hub in the middle, and then Siesta Hills Shopping Center and beyond on the -- on the north.

Same thing here. This is looking south. We have Siesta Hills in our foreground, Gibson Health Hub in the center, and the VA complex in the back.

Also, you can see the Albuquerque Sunport runway all the way to the south. And also, buildings is part of Kirtland Air Force bases.

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Okay. So in terms of existing land use and zoning, to our north, we have -- along Gibson, we primarily are bordered by MX-M and a small amount of MX-L. It's primarily comprised of commercial and office uses. To the east is multi-family, zoned R-ML, and medical offices zoned MX-T. To the south is federal land within unincorporated Bernalillo County. And, again, containing the VA Hospital complex. To our west, south of Gibson, is vacant land owned by Kirtland Air Force Base, and then to the west, north of Gibson, is a mix of commercial development and light industrial uses.

I would also like to say there's no single family residential development abutting, adjacent to or within close proximity to the Gibson Health Hub.

My letter details how a request meets the IDO Criteria A through F for conditional uses. I'll try to be very brief.

The first criterion is about comprehensive plan policies. We addressed this in my letter. Multi-modal transportation invokes Goal 6.2 and Policy 6.2.7. There are obviously six transit routes serving the area, with bus stops on Gibson and San Mateo. We have sidewalks along San Mateo, Gibson and Louisiana, as well as an existing trail, a planned trail, proposed bike lane, and then lastly, the pedestrian bridge that spans Gibson. In addition, the Gibson center will operate a shuttle system.

Continuing with Criterion A, we also address goals and policies and further those goals and policies on homelessness, best practices and services. That's Goal 9.4, Policies 9.4.1, 9.4.2, and 9.4.3. We have services designed to help people transition into permanent housing.

Currently, there's no centralized 24/7 facility to connect unhoused people to support services. The Gateway Center will foster those partnerships with providers and serve as a centralized facility.

We also address and further Goal 9.5 and Policies 9.5.1 and 9.5.2 regarding vulnerable populations, quality housing and transitional services. We will be -- our intent is to ensure shelter, clients have secure permanent housing before they leave the shelter.

We're going to be using a team-based approach, which will involve partnering with community organizations and service providers to prepare individual transition plans.

Criterion B, the Gateway Center request complies with IDO MX-H zone and use-specific standards. Again, ongoing functions at the Gibson Health Hub fall under hospital use, which is permissive. And an overnight shelter is allowed under MX-H as a conditional use.

Our use-specific standards for overnight shelter prohibits this use within 1500 feet of any direction of another overnight shelter. Our closest shelter is Noon Day, which is approximately 2300 feet from the southeast corner of the Gibson Health Hub property.

I'm going to keep going here. You --

MS. SANCHEZ: Excuse me, Robert. The time is up.

THE HEARING EXAMINER: Okay. We'll allow Jackie to continue with the presentation.

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MS. FISHMAN: Okay. Sorry about that. I'll go as fast I can.

Criterion C is in regard to creating -- whether it would create an adverse impact on adjacent properties, surrounding neighborhood or larger community. My letter addresses this criterion in detail. We have a large and under-utilized 20-acre site here that's visible, accessible, and relatively separated from existing residential development.

Gibson Boulevard is a six-lane facility, you know, providing good separation from existing development to the south. The VA complex is to the south, Kirtland to the west. Our sensitive edge is to the east with the Pearl apartments, however, in this slide shows a photo of the large parking field between the Gibson Health Hub building and the apartments.

I'll try to real quickly go through this. We have a draft operations plan that addresses many of the community's concerns. We talked about in the operations plan transportation, operating hours, secure entrance, physical design, security, entry and exit, shelter capacity -- I think that's a big one. We have announced that in the administrative procedures document that's in draft form. The city intends to ramp up in phases to serve approximately 25 families and 100 adults on a nightly basis.

We also address trash removal, pedestrian safety, encampments, Good Neighbor Agreement, a very important aspect; and then community impact.

I'm not going to go through Criterion D, E, or F, given the time, and I will go to my last slide.

So Page 6 of my letter lists all of the community input, meetings, videos and newsletters that have been conducted or produced for the project. In addition, the city has a website that they continue to provide ongoing information about the center, Gateway Center.

As of the time of the application, we had 402 participants in public meetings. And since that time, we've had a health hub, Gibson Health Hub tour, a meeting with District 6 leadership, Indivisible forum on the Gateway Center. And then lastly, last night, family and community services had a meeting with business owners in the Cesar Chavez Community -- or I'm sorry -- Charter School.

With that, Mr. Chair -- I'm sorry, Mr. Lucero, I will step, given the time, and make time later for rebuttal. Thank you.

THE HEARING EXAMINER: Thank you, Ms. Fishman.

I had a couple of questions before we move to the public comment. And one was that I -- I saw in the -- in the file there was a very robust report from the land use facilitation program. And it highlighted several -- there, you know -- I guess they're noted as unresolved issues or concerns. And I was wondering if those -- how those have been addressed, in particular, I know you cited the Good Neighbor Agreement. But there were some that I just wanted to kind of flesh out a little more.

And one was the -- the coordination -- it says there was a need for better coordination with neighborhood, VA Hospital and veterans. Has that been -- has that been addressed?

MS. FISHMAN: Mr. Lucero, I'm -- I'm going to ask director Pierce to -- to answer that question.

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THE HEARING EXAMINER: Thank you.

MS. PIERCE: Thank you, Mr. Lucero.

Yes, we had conversations with the veterans integration center. We work with them currently. That is one of the partners that we would be working with to expand our shuttle service.

And through the homeless coordinating council, some conversations have occurred with Veterans Administration. There has been a change of leadership there, and we will be continuing those conversations with them.

THE HEARING EXAMINER: Thank you. Thank you.

Okay. And then -- and then I saw a lot of -- a lot of, you know -- we received many submittals from neighbors and community folks, you know, both in support and expressing concerns. And it seemed like a lot of the concerns had to do with security and crime. And I wanted to ask what measures have been put in place to address those concerns.

MS. FISHMAN: Mr. Lucero, this is Jackie Fishman again. I'll try to answer that, and I'm sure someone from family and community services can -- can fill in where I leave out.

But some of the things that I know are being done is, the city is putting in lighting, upgrading all the lighting in the parking area, as well as around the building. There is the new -- what is -- Carol, maybe you can help me with this. The new department.

MS. PIERCE: Yes. Albuquerque Community Safety.

MS. FISHMAN: Yeah, Albuquerque Community Safety, which will be very close to this site. There's a number of different departments that are going to be involved in this project: Solid waste; department of municipal development; parks and recreation.

Part of these things are addressed in the Good Neighbor Agreement. And it talks about monitoring an area of -- a quarter-mile radius around the site, for cleaning up trash, looking for encampments and making those encampments go away. Working with business owners, cleaning up the sidewalks, the bus stops. And transit is also involved in this.

So there's a number of different components to addressing that concern.

THE HEARING EXAMINER: Okay. All right. Well, I'm sure that will be fleshed out as we get the public comment and then the response.

Was there some additional testimony there?

MS. PIERCE: Yes, Mr. Lucero, if I may. I just want to add that currently the Gibson facility does have 24/7 security.

Some of the lighting that Ms. Fishman mentioned, has been already added. With the addition of staff which are being hired, they will be located at the Gibson facility to monitor that quarter-mile radius around. We've added to our outreach staff.

As well as with our Albuquerque Police Department looking to make that a public safety district, which bears new resources to that area.

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We also wanted to say our response team, that with the addition of the two staff, there will be a response team, which includes Albuquerque Community Safety Department.

Thank you.

THE HEARING EXAMINER: Thank you. Okay. And then I just wanted to verify my understanding, based on my review of the record that, you know, Criterion E of the conditional-use criteria says that, you know, on a project site with existing uses, the proposed conditional use will not increase nonresidential activity within 300 feet in any direction of a lot in any residential zone district between the hours of 10:00 and 6:00.

But it appears that the Gibson Health Hub is not -- or at least the area that would have activities in the -- you know, between 10:00 p.m. and 6:00 a.m. are not within 300 feet of a residential zone district; is that right?

MS. FISHMAN: Mr. Lucero, this is Jackie Fishman again. If I could address that.

My understanding was the criteria was: Not increase nonresidential activity within 300 feet of a residential zone between 8:00 p.m. and 6:00 a.m.

And, again, our -- well, and I wasn't able to explain this. But normally, the intakes will occur from 8:00 a.m. to 8:00 p.m. for most community partner referrals. But will be conducted at all hours for referrals from hospitals, first responders and law enforcement. However, intakes will occur more than 500 feet from the R-ML property to the east, and will be buffered by the large parking field.

THE HEARING EXAMINER: Okay.

MS. FISHMAN: So we -- and that is detailed in my letter.

THE HEARING EXAMINER: Very good. I see that. Thank you.

MS. FISHMAN: Okay.

THE HEARING EXAMINER: Okay. Well, with that, let's go ahead and call for the neighborhood association comment. And, again, I'd like to have, you know, one representative of each neighborhood association speak for the five minutes, and then any additional can speak in the public comment afterwards.

So let's see, I see a Melinda Frame.

MS. FRAME: Yes, hi. I'm representing Parkland Hills Neighborhood Association.

THE HEARING EXAMINER: Oh, very good. And are you the -- so you'll be the sole speaker for the five minutes for that; is that right? And then --

MS. FRAME: Yes.

THE HEARING EXAMINER: Okay. Very good. If you wouldn't mind, please state your full name and mailing address for the record.

MS. FRAME: Full name is Melinda Frame. My mailing address is 1721 Ridgcrest Drive, Southeast. ZIP code 87108.

THE HEARING EXAMINER: Thank you. And please raise your right

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hand. And do you affirm under penalty of perjury that your testimony today will be true?

MS. FRAME: Yes, I do.

THE HEARING EXAMINER: Thank you. Go ahead.

MS. FRAME: Okay. So thank you.

My name's Melinda Frame. And I'm the Chair of the Parkland Hills Homelessness Solutions Committee. And as a representative of our neighborhood association, which is an adjoining neighborhood of the proposed site of the Gateway facility, I am requesting you reject the City of Albuquerque Family and Community Services conditional-use permit application for 5400 and 5006 Gibson Boulevard, Southeast. These addresses are on the same premise with the same ownership, submitted on the same application.

Both should be rejected on the grounds that the applicant did not adequately complete the IDO submission process for their permit.

And though we recognize the need for homeless facilities in or city, and we are on board with the ideals behind gateway, in its execution, this process was rushed and the applicant abandoned the city's own rules and their procedures in its submission.

The applicant failed to meet the protocols set forth in the IDO for a presubmittal meeting with our neighborhood as per IDO 6-4(C)(3) and IDO 6-4(C)(4).

Additionally, though they abandoned proper protocol for the meeting, a meeting did occur and the applicant failed to address questions and provide the information mandated in IDO 6-4(C)(6), including, but not limited to, scope of uses, approximate footages for different uses, general site layout, design guidelines, et cetera.

Further details of these errors can be found in the written statement submitted by my committee in Appendix A.

Furthermore, the city has not adequately addressed how they will mitigate adverse impacts in the community. In IDO 6-6(A)(3)(c), it stipulates the property will not create significant adverse impacts on adjacent properties, the surrounding neighborhood or the larger community.

The impact study being conducted by the University of New Mexico, which is to inform and guide the applicant's operational plan on mitigating adverse effects to our neighborhoods, has not been completed. It is not projected to be complete until January of 2022.

Thus far, if research has been done, the city has not been able to adequately address to the community surrounding gateway how they will prevent significant adverse impacts or the studies and data guiding their operational plan.

Due to the city's inability to fulfill the mandated procedures of the IDO, we ask that you reject this application. Once the applicant's errors are rectified, we request that you include the following conditions for the approval of their conditional-use permit to help mitigate adverse impacts to our communities. Though these items have been discussed, there's only elusion or intent in the operational plan, with your guarantees.

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Condition Number 1, a mandated public safety district encompassing the neighborhoods of Siesta Hills, Elder Homestead, South San Pedro and Parkland Hills.

Budgeting for this public safety district would include added resources and personnel for dispatch and patrol within the district, including ACS and APD officers, added personnel and resources for street outreach teams, and added designated personnel for daily cleanup of our parks and alleyways.

Additionally, all schools and public parks should be excluded from being city shelter pickup and drop-off locations.

Number 2, the implementation of a legally binding good neighborhood agreement between the city as the property owner and the four neighborhoods within the public safety district. The conditions of the agreement must include the creation of a community oversight committee.

Number 3, a detailed operational plan and budget for a comprehensive 24/7 transportation system to and from Gateway, including but not limited to locations and schedule for pickup for drop-offs for the shelter shuttle system, how the city will be expanding the public bus system in routes to and from Gateway to accommodate clients and residents, and details and schedule on the van services.

Number 4, bed capacity limits. Due to the lack of behavioral health providers in our state and the city's track record with moving people out of the shelter system into transitional or permanent housing and to help prevent additional impacts to a district already saturated with more than 51 percent of the city's homeless services, we request an overnight shelter bed capacity limit at the property as a condition of approval.

Due to the abundance of providers already in this quadrant of this city, bed capacity limits for overnight shelter on the property are necessary to keep the premises and its operation in line with the city's comprehensive plan for neighborhood sustainability.

Initially, we would request the city be granted conditional use for 15 families and 30 individuals. After demonstrating the successful implementation of these numbers, whereby the city shows they can adequately meet the needs of residents and move them into housing within 90 days, while simultaneously proving the facility can operate without significant adverse impact to the surrounding communities, we would recommend in two years they request an increase in the number of beds at this facility.

All supporting data and evidence for the statement have been submitted to the zoning hearing examiner office as a written statement and evidenced by my committee and we appreciate your consideration of our requests. Thank you so much.

THE HEARING EXAMINER: Thank you, Ms. Frame. Thank you for your submittals, also.

Okay. I see Rachel Baca.

MS. BACA: Yes. Can you hear me?

THE HEARING EXAMINER: Yes, yes. And which neighborhood association are you representing?

MS. BACA: Siesta Hills.

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THE HEARING EXAMINER: Siesta Hills. And you'll be the five-minute representative for that organization?

MS. BACA: Yes.

THE HEARING EXAMINER: Very good. Thank you. Would you please state your full name and mailing address for the record.

MS. BACA: My name is Rachel Baca. It's 1301 Odium Drive, Southeast, Albuquerque, New Mexico, 87108.

THE HEARING EXAMINER: Thank you. And please raise your right hand. And do you affirm under penalty of perjury that your testimony today will be true?

MS. BACA: Yes.

THE HEARING EXAMINER: Thank you. Go ahead.

MS. BACA: As I said, my name is Rachel Baca. I'm president of the Siesta Hills Neighborhood Association. Siesta Hills is located between the old Lovelace Hospital and Kirtland Air Force Base. Thank you for letting me speak today.

Our belief is the committee should reject the conditional-use permit for the use of this facility as an overnight shelter because this submission is incomplete, lacks input from surrounding residents and businesses, and lacks the good-faith studies of adverse impact to surrounding neighborhoods and mitigation of those impacts.

The one study we were counting on to show the data about how this overnight shelter could impact our community is being conducted by the University of New Mexico for the city, and it isn't projected to be completed until January of 2022. The study promises to collect data on high impact strategies for addressing homelessness and to survey adverse impacts to communities surrounding overnight shelters. That could be a lot of good information to have on hand to come up with an operation plan.

How can the committee, the city, or we, as the residents near the proposed facility, have any kind of real discussion of operation and installation of an overnight shelter without that data?

The businesses along the Gibson corridor have been left out of the input meetings conducted by the city, either through intentional stonewalling or just sloppy planning through inadequate notice and outreach.

In the many input meetings I attended, this subject was raised many times with the city. We asked, "When will you be inviting the businesses to give their input?" But we saw no results until just last night, six months after the purchase of the old Lovelace Hospital, and one night before this hearing this morning.

The city did have a presentation before the Gibson businesses. The flyer for that presentation was circulated roughly six hours before the meeting happened. How does this show the city has a real interest in taking input from the people most likely to be impacted from an overnight shelter next to their business? How does the city incorporate any of the concerns raised by them in an operational plan already submitted to the committee?

The plan submitted offers no assurance that the city has a real plan for how to deal with the magnetization effect we know that

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an overnight shelter can have. The city has said there will be efforts to clean up the quarter mile around the property, but we've seen how these efforts work elsewhere. We see it happening around the new tiny houses installation on Zuni, which is a much more restrictive facility than the proposed low barrier Gibson center, the encampments surround the tiny houses and have multiplied over the summer.

I want to request to share my screen.

THE HEARING EXAMINER: Yes, go ahead. There you go.

MS. BACA: Okay. Am I sharing?

THE HEARING EXAMINER: I think you have to click on the bottom, where it says "Share Screen." And then you can pick which window you'd like everyone to see.

MS. BACA: All right.

THE HEARING EXAMINER: There, I can see your slide there

MS. BACA: Okay. Let's see. The encampments that surround the tiny houses and have multiplied over the summer.

As members of the community we are left with calling 311 and 242-COPS as our only means of voicing our concerns. And we have -- we see very -- very few efforts from the city or APD to discourage or deal with the litter or safety issues that come with encampments. The plan before the committee doesn't propose a different strategy for these encampments.

In fact, this plan emphasizes reallocating existing resources in an already overburdened District 6. How can we expect any different results when the encampments and the crime ramp up in the communities surrounding the Gibson facility?

If a private entity brought such an aspirational, incomplete plan, lacking hard evidence of adverse impact to this committee, I trust that it would be rejected. I now trust that this committee will reject this plan for an overnight shelter from the city on the grounds that it is incomplete and does not adhere to the city's own vision for creating sustainable neighborhoods.

Thank you.

THE HEARING EXAMINER: Thank you, Ms. Baca. And, like I said before, if you'd please share that slide -- e-mail it, rather, to Suzie Sanchez, the ZHE admin, so that we can add that to the record

MS. BACA: Done.

THE HEARING EXAMINER: Thank you.

Okay. Let's see. I see Enrique Cardiel.

MR. CARDIEL: Good morning. Thank you for having me here. My name is Enrique Cardiel. I live at 420 Indiana, Southeast.

THE HEARING EXAMINER: Thank you, sir. Are you representing a neighborhood association?

MR. CARDIEL: I'm a member of South San Pedro, but I'm not the official representative.

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THE HEARING EXAMINER: Okay. Let's hear from the official representatives first, and then we'll come back to you for public comment. Thank you, Mr. Cardiel.

I see Sandra Perea.

MS. PEREA: Yes.

THE HEARING EXAMINER: Good morning.

MS. PEREA: Good morning.

THE HEARING EXAMINER: Are you -- I see on your screen, it says president of EHNA.

MS. PEREA: That's correct.

THE HEARING EXAMINER: And so you'll be the designated speaker for the five minutes; is that right?

MS. PEREA: Yes.

THE HEARING EXAMINER: Thank you. Would you please state your full name and mailing address for the record.

MS. PEREA: Sandra Perea, 800 California Street, Southeast, Albuquerque, 87108.

THE HEARING EXAMINER: Thank you. And please raise your right hand. Do you affirm under penalty of perjury that your testimony today will be true?

MS. PEREA: Yes.

THE HEARING EXAMINER: Thank you. Go ahead.

MS. PEREA: So good morning, and thank you for letting me speak today. My name is Sandra Perea, and I'm the president of the Elder Homestead Neighborhood Association, and I'm here to speak as a representative of the residents and the businesses in my community.

I am asking you to reject the family and community services application for conditional-use permit at 5400 and 5006 Gibson Boulevard, Southeast, as they have not met the requirements for issuance of the permits mandated by the city council bill Number R-21-141, and enactment Number R-21-021. Please reference Appendix 8 of my written statement for full language of this bill.

In summary, this bill mandates that before a conditional-use permit be granted, the applicant must offer two input sessions within 45 days of its enactment for neighbors, neighborhood associations and businesses located within the communities adjoining Gateway. It also mandates that a Good Neighbor program must -- which must include businesses be underway before a permit is granted. This was not fulfilled.

On two separate occasions, I asked the applicant about outreach to the neighborhood businesses and how they would be getting their input. I first presented this question to Lisa Huval during the City of Albuquerque operations plan meeting on July 26th, 2021. I also presented this question to Carol Pierce at the panel hosted by Indivisible Nob Hill on August 30th, 2021.

On both occasions, I was told businesses would be getting fliers

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to ask (inaudible). As of September 15, more than six months after the purchase of the property, at least 24 neighborhood businesses, many of them directly across the street from the property, had minimal to no communication from the applicant, and they were not invited to participate in input meetings. If you please reference the petition submitted as Appendix B with my written statement. I would also like to note that seven of those businesses on that appendix are within my neighborhood association boundaries.

The stay failed to communicate and engage the businesses surrounding the property and the city did not notify or invite neighborhood businesses to partake in the required input meetings during the mandated time frame.

Due to the city's lack of communication, community businesses were not notified of the 21 input meetings and, therefore, were unable to participate in the two input sessions. All businesses within the petition received minimal to no communication from the city regarding ongoing updates, information sharing and gathering, and notification of input meetings or point of contact at the city for presenting their concerns.

It was not until yesterday, on September 20th, city employees entered neighborhood businesses and handed out fliers for a Zoom meeting taking place from 5:00 to 6:30 that very evening. Businesses had a mere -- had a mere few hours' notice to attend an input meeting. This is a last-ditch effort for the city to save face.

More than six months after the purchase of the property, more than a month after their application had been submitted and the night before their zoning hearing, this gesture cannot be considered a sincere, good-faith effort by the applicant to engage businesses in this process.

Can this be considered a reasonable opportunity to participate in the process? I think not.

It would also appear that a scrambling to call a last-minute meeting. The applicant needs more time to collect data for their submission.

I once again asking to reject the application of family and community services for their conditional-use permit for the Gateway Center at 5400 and 5006 Gibson Boulevard on these grounds.

Thank you.

THE HEARING EXAMINER: Thank you, Ms. Perea.

Okay. I see -- is it Khadijah Bottom. Hello.

MS. BOTTOM: Good morning, sir.

THE HEARING EXAMINER: Good morning.

MS. BOTTOM: I would like to make a request to share my five minutes with Enrique, if that's okay.

THE HEARING EXAMINER: Oh, sure. You mean Enrique Cardiel?

MS. BOTTOM: Yes.

THE HEARING EXAMINER: Okay. Yes. Let's get you sworn in.

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Would you please state your full name and mailing address for the record.

MS. BOTTOM: My name is Khadijah Bottom. My mailing address is 900 Gibson Drive, Southeast, Apartment 8, ZIP 87108.

THE HEARING EXAMINER: Thank you, and I -- you're representing the South San Pedro Neighborhood Association?

MS. BOTTOM: Yes. I'm the acting president of South San Pedro Neighborhood Association.

THE HEARING EXAMINER: Thank you, ma'am. And please raise your right hand. And do you affirm under penalty of perjury that your testimony today will be true?

MS. BOTTOM: Yes, sir.

THE HEARING EXAMINER: Very good. You know -- well, let's have you go ahead and then we can get Mr. Cardiel sworn in. Go ahead

MS. BOTTOM: Okay. I'm here on behalf of asking you to grant the conditional use of the Gateway. I live in the South San Pedro area, I work in the South San Pedro area, my grandkids go to school in this area.

I'm also here to advocate for the unsheltered. I'm very much aware and understand all the comments and concerns from the adjoining neighborhood associations, but at the same time, we're talking about human beings. And I just don't understand how it can be so technical to try to deny the owning of a building that can help these individuals.

I understand about the businesses. But my take on the businesses that feel like they were left out, they had as much right to contact family and community services, the city, because it wasn't like it was a hidden situation. Everybody knew about it. That's why we have so many folks on the phone to discuss it.

So no one intentionally left out anybody, you know. More time was spent with the city trying to (inaudible) that opposed it. And I just -- you know, I understand, but also, I look at the fact that these people need help. You know, we know that this is not the cure-all, that this is not going to just eradicate homelessness overnight. But something has to be done, and if we don't try, we already have failed. And I ask that you grant the condition.

I yield to Enrique.

THE HEARING EXAMINER: Thank you, Ms. Bottom.

Mr. Cardiel, are you there?

MR. CARDIEL: Yes.

THE HEARING EXAMINER: Thank you, sir. Would you please state your full name and mailing address for the record.

MR. CARDIEL: Yes. Enrique Cardiel, 420 Indiana, Southeast, 87108.

THE HEARING EXAMINER: Thank you, sir. And please raise your right hand. Do you affirm under penalty of perjury that your testimony today will be true?

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MR. CARDIEL: Yes, I do.

THE HEARING EXAMINER: Thank you, sir. Go ahead.

MR. CARDIEL: Yes, I also -- for transparency, am also the director of the health equity council.

I'm here because I live within walking distance of Tiny Home Village. The homeless situation has gotten worse since 2008 in our community. It's not new, it's not sparked by additional services. It's growing and it's going to grow more, as we know, with the pandemic that's caused more issues. So we need this center and we need many more centers.

And I think that one of the issues is that there's concern that this is going to be the only center and everything is going to be here. No, it needs to happen across the city and across the county. But this center needs to happen. And I think it's important that we provide support for folks and that ultimately, we provide housing. Because services only do so much if there's not enough housing and if it's not affordable.

So some of these folks on the street haven't moved here because there's some kind of services. A lot of them are people that grew up in this neighborhood, are struggling with substance abuse or mental health issues. They're already part of our community, and I think it's important for us that we support them.

This is going to be an ever-growing public health issue, and if we're not willing to invest this now, we're just going to stay behind the ball. Thank you.

THE HEARING EXAMINER: Thank you, Mr. Cardiel.

I see Adriann Barboa, with a hand raised.

MS. BARBOA: Thank you --

THE HEARING EXAMINER: You're welcome.

MS. BARBOA: -- very much. My name is Adriann Barboa. I currently serve as the county commissioner for District 3. The current Gibson Medical Center is inside my district as county commissioner.

I would start by saying I am --

THE HEARING EXAMINER: Let -- let -- oh, let's get you sworn in before we --

MS. BARBOA: Oh, sorry. Thank you.

THE HEARING EXAMINER: Would you please -- we've got your name. Now, are you speaking on behalf of a neighborhood association?

MS. BARBOA: No, I'm speaking --

THE HEARING EXAMINER: As a?

MS. BARBOA: Bernalillo County commissioner.

THE HEARING EXAMINER: As a commissioner. Okay. And so would you please state your mailing address so that we get you a copy of the notice of decision.

MS. BARBOA: Yes. 1517 Cornell Drive, Southeast, 87106.

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THE HEARING EXAMINER: Thank you. And I see you have your hand raised. Do you affirm under penalty of perjury that your testimony today will be true?

MS. BARBOA: Affirm, yes.

THE HEARING EXAMINER: Thank you. Go ahead.

MS. BARBOA: Thank you. So agree with the comments of neighborhood -- neighbors that have just -- Khadijah and Enrique, Mr. Cardiel.

I would like to start by saying I have also lived in this community my whole entire life. I got to raise my kids here. I actually live in the home I grew up in, which is just right here off of Gibson and Girard.

And I would start by talking about my mother and grandmother, who are also -- I'm a multi-generation New Mexican. And one time, many people know, my own father struggled with alcohol and drug use, four of my uncles, and they've all passed from that, from health-related issues from their drug and substance use.

And I remember when I was 18 years old, my mother, her brother, my uncle, was out on the streets. He had gotten divorced. He had been for many years on disability because of a worker -- a work problem that he had hurt his back, which led to pills, then led to alcohol because he couldn't afford the pills because of health care. And he was literally on the street.

And we couldn't find him. My mom was worried about him, so she went and found him. She found him at one of the local places that thankfully offer services. She took him in. She gave him food, she gave him some love, gave him some confidence. And so he lived with us here at the time. I was going to UNM, and he lived with us for about four months.

My mom did all the things to get him some resources, got him back on his disability, got him a little studio apartment just down the road from us, and he continued to live a sober, healthy life that he deserved.

So that's what this Gateway Center represents for me, is more access to more services that our communities can access like that. I think people like my uncle, like my father, that can access services when they need it in this big beautiful place that we're trying to put services in that can service the community and the whole entire county.

I am proud of this --

MS. SANCHEZ: Excuse me, Robert. The time is up.

THE HEARING EXAMINER: Thank you, Ms. Barboa. Would you go ahead and conclude your thought there, please.

MS. BARBOA: Yes. I support the zoning hearing from my district, and I believe our voters support -- I know that the voters in my district have largely voted in support of these kind of services. Thank you.

THE HEARING EXAMINER: Thank you. Okay. Again, everyone, right now I'd like to entertain any neighborhood association representatives that are designated and any governmental folks. Then we'll get to the public comment after that. Okay? Thank you everybody.

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So, let's see, I see -- I think -- is it Raven Del Rio?

MS. DEL RIO: I was just about to take my hand down, since I'm part of the public commentary.

THE HEARING EXAMINER: Okay. We'll come back to you. Thank you.

All right. And I see -- is it Venice? Am I saying that right?

MS. CEBALLOS: Almost.

THE HEARING EXAMINER: Ceballos?

MS. CEBALLOS: Yes. So I represent the government. So it is our turn, right, UNM, university?

THE HEARING EXAMINER: Yes. Would you go ahead and give your full name and mailing address, and then who you're representing.

MS. CEBALLOS: Absolutely. So my name is Venice Ceballos, and I am representing the University of New Mexico Health and Sciences Center. Address is Office For Community Health, MSCO-744101 University of New Mexico, Albuquerque, New Mexico, 87131.

THE HEARING EXAMINER: Thank you. And please raise your right hand. Do you affirm under penalty of perjury that your testimony today will be true?

MS. CEBALLOS: Yes.

THE HEARING EXAMINER: Thank you. Go ahead.

MS. CEBALLOS: Sure. So unfortunately, our vice chancellor, Dr. Art Kaufman was not able to be here today. He's actually seeing patients with the Delta variant going up. And I am representing and sitting for him.

I am the director of community health worker initiatives under the health and science center, and we currently support this effort and initiative to 100 percent. We are actually in the negotiation stages right now of leasing space at the Gateway Center, where we will have the great pleasure of serving those individuals there at the Gateway Center.

We plan on offering and having nine case management programs available for the residents there. And, again, we're in the negotiation stages.

But from the University of New Mexico side, we support this initiative, as this is something that we really believe in helping all individuals, not individuals that just come to the hospital, but also community members at all levels. Thank you.

THE HEARING EXAMINER: Thank you. Thank you very much.

I see a hand raised from family and community services department. It's the applicant.

MS. HUVAL: Hi there. My name is Lisa Huval, and I (inaudible) --

THE HEARING EXAMINER: And are -- are you speaking on behalf of the applicant, the family and community services department?

MS. HUVAL: I am, yes.

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THE HEARING EXAMINER: Let -- let's -- because you'll get a chance to respond to all the public comment, let's -- let's go ahead and defer until that -- that point. We'll give you --

MS. HUVAL: (Inaudible).

THE HEARING EXAMINER: -- plenty of time to respond. Thank you so much.

MS. HUVAL: Okay. Thank you.

THE HEARING EXAMINER: Okay. Are there any other representatives of neighborhood association or other governmental entities, other than the applicant, who have not yet spoken? Please raise your hand. And I'm scrolling through the participant list and I don't see anyone.

So with that, let's go ahead and go on to the public comment, and we'll begin with Raven Del Rio. Can you hear me? Looks like you're muted again there.

MS. DEL RIO: Is that good?

THE HEARING EXAMINER: Yes, there we go. Thank you. 0

MS. DEL RIO: Excellent. Thank you.

THE HEARING EXAMINER: Would you please state your full name and mailing address for the record.

MS. DEL RIO: Yes. My name is Raven Del Rio. My legal name is Kristen Green. I'm at 808 Florida Street in Albuquerque, 87108, Elder Homestead neighborhood.

THE HEARING EXAMINER: Thank you. And please raise your right hand. Do you affirm under penalty of perjury that your testimony today will be true?

MS. DEL RIO: Yes, I do.

THE HEARING EXAMINER: Thank you. Go ahead. Two minutes, please.

MS. DEL RIO: Good morning. And thank you for the opportunity to speak today. My name is Raven Del Rio, and I'm a board member of the Elder Homestead Neighborhood Association and chair of the homeless solutions committee. Our concerns for the Gateway Center are many, but most troubling is the severely imbalanced distribution of homeless, behavioral health and substance abuse services in District 6, in the International District, and adjoining the Gateway Center specifically.

Based on Siesta Hills resident Tamaya Toulouse's research of services in the Southeast quadrant, I've built a citywide comprehensive map of these providers. At this time, District 1 is home to only one service. District 2 has 17, Districts 3 and 4 have one each. While District 5 has zero. District 7 has 15 services. District 8 has one. And District 9 has three. Meanwhile, District 6 is home to 41 individual providers, which is 51.25 percent of the city services in just one district.

This does not include secondary services such as local and federal halfway houses, sober living facilities and so forth, of which District 6 also has the highest concentration. Yet, there are very few services north of Menaul, nor west of 4th Street,

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despite the glaring need for them beyond those borders. From the beginning of Gateway three years ago, the residents of District 6 have asked the city time and again how much is too much for one area, only to be told that everyone must take their fair share of the burden. But if just one district has more than 51 percent of the fair share, how can this possibly be in keeping with the city's own comprehensive plan for creating sustainable neighborhoods? How does this keep in line with the IDO?

Tasking just one out of nine districts with more than half the homeless and treatment facilities, with many more promised to be housed within Gateway shelter, which will not condense existing providers into its building does not seem like a sustainable solution for this neglected corner of Albuquerque.

Thank you.

THE HEARING EXAMINER: Thank you, Ms. Del Rio.

I see Scott Benavidez with a hand raised. Are you there?

MS. BENAVIDEZ: Yes, sir.

THE HEARING EXAMINER: Thank you. Would you please state your full name and mailing address for the record.

MR. BENAVIDEZ: Ronald Scott Benavidez. My business is directly across the street at 1410 Valencia Drive, Southeast, Albuquerque, New Mexico, 87108.

THE HEARING EXAMINER: Thank you, sir. And raise your right hand. Do you affirm under penalty of perjury that your testimony today will be true?

MS. BENAVIDEZ: Yes.

THE HEARING EXAMINER: Thank you, sir. Go ahead. Two minutes, please.

MS. BENAVIDEZ: Thank you, Mr. Lucero, for letting me talk. I own a business, and we've within the longest tenured business here in the Southeast Heights. 43 years directly across the street from where Gateway is going in.

On 9/14, that was just last Friday -- I mean, last Thursday, I think, 9/14, I wrote an e-mail to let everybody know that we have never been contacted, not once, through this process.

On 9/17, Carol Pierce and Christy Hernandez came by my office to meet with me. That was a Friday. They never once said anything about a meeting on Monday. They came into my office on Monday to drop off a flyer for a meeting at noon that was supposed to happen at 5:00.

We have never once been contacted by the city, by anybody about any kind of meetings, about anything that's going on with this. And keep in mind, I've been here for 43 years. I'm within yards of where this is going in. Not one person knocked on my door, not one person contacted us. We have not had one meeting.

But all of a sudden, in the last four days, I've received -- after -- after writing my letter, I received two visits. And this is all to save face. This cannot go through. In that Council Bill R-21-141, it says that they will notify us, they will be able to talk to us, and we will be able to have input.

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And we've had zero input as businesses. All the businesses that I've talked to around the area have had zero input, zero talk, zero -- nobody has come to visit us.

Again, I've been here for 43 years. I've grown up right here where I work, and zero contact from the city. I'm actually embarrassed that they're using the meeting that happened yesterday as part of their slide, because that was only done after I wrote my letter. So it is absolutely appalling that they used that meeting as one of their meetings, and this should not go through.

They need more planning. There needs to be more planning involved in this for us businesses and this area. And I thank you for letting me have some time.

THE HEARING EXAMINER: Thank you, Mr. Benavidez.

I see a gentleman named Pierson with the hand raised

MR. PIERSON: Good morning, Hearing Examiner Lucero.

THE HEARING EXAMINER: Good morning.

MR. PIERSON: How are you today?

THE HEARING EXAMINER: Great. How are you?

MR. PIERSON: I'm good.

THE HEARING EXAMINER: Would you please state your full name and mailing address for the record.

MR. PIERSON: Yes. My name is Robert Pierson. My address is 1324 Odium Drive, Southeast, Albuquerque, New Mexico, 87108.

THE HEARING EXAMINER: Thank you, sir. And please raise your right hand. Do you affirm under penalty of perjury that your testimony today will be true?

MR. PIERSON: Yes, I do.

THE HEARING EXAMINER: Thank you, sir. Go ahead. Two minutes, please.

MR. PIERSON: There are many reasons this request is inappropriate. The application is inconsistent with city policies from the comprehensive plan and the Integrated Development Ordinance. The request is injurious to the neighborhood and the surrounding community. It'll negatively affect pedestrian connectivity in the area. The site is not consistent at any location -- was not considered at any location within the city north of Menaul Boulevard. All the areas that were considered already have homeless communities.

The request is inconsistent with the MX-H zone as the approval will create inappropriate use in the area. The proposed overnight shelter has been proposed in Council District 6, which was already mentioned contains 51 percent of these shelters contained within the entire city. Adding to it again, once again, it seems unreasonable.

In addition to the many homeless already living on the street, there's evidence of movement from shelter to shelter can cause violence around shelters. The shelter theoretically has moved people from this location to other more permanent locations but

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the city cannot identify where the homeless would be placed. Council District 6 has the highest overall crime rate in the city. Adding another homeless shelter is inappropriate. The city would place -- should place this use in a district with lower crime rates so that the burden on the Southeast Area Command, which is already overworked and understaffed is not added to.

The request, once again, is inconsistent with the majority of land use goals and policies for the city, such as strong neighborhoods. This does not increase the quality of life for the residents in the area already suffering from homeless encampments, public urination, defecation and other undesirable activities.

(Inaudible) within that stable communities is developing an established neighborhood that matches the existing character and promote revitalization where desired. The city could argue that the development is consistent with the existing development as there are numerous homeless shelters in the area, but that does not promote revitalization in the area.

Our federal government makes it illegal to discriminate against race, sexual orientation, et cetera (inaudible) include class discrimination.

While the city has no legal obligation to place a shelter in a more affluent part of town, there are plenty of good reasons to do so, including things that are outlined in the letter I submitted. But it is inappropriate to place it in an area that is already struggling with crime and poverty.

The city's decision to locate the facility in this location is in direct conflict with the Albuquerque comprehensive plan and is contradictory with many of the missions, strategies goals and policies of the plan. Additionally, it does not comply with the IDO zoning for the area, as the use is, indeed, inappropriate for the area.

I stand for any questions if you have any.

THE HEARING EXAMINER: Thank you, Mr. Pierson. Appreciate your testimony.

MR. PIERSON: Thank you, sir.

THE HEARING EXAMINER: One comment, before we proceed, everyone. I appreciate all of the participation. And just -- just a request on my part, because there -- there is -- there are literally hundreds of pages in the record, and we're going to have a lot of testimony today. And so I would -- I would request that you please focus your testimony on anything that's new or different than what others have said. It's fine to repeat things for emphasis that I've heard, but I would encourage you to spend the majority of your time on anything new or different. Thank you.

With that, I see Regina Mead with a hand raised.

MS. MEAD: Yes, I'm here.

THE HEARING EXAMINER: Thank you. Would you please state your full name and mailing address for the record.

MS. MEAD: My name is Regina Mead, 921 Campus Drive, Southeast, Albuquerque, 87108.

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THE HEARING EXAMINER: Thank you, ma'am. And would you please raise your right hand. And do you affirm under penalty of perjury that your testimony today will be true?

MS. MEAD: I do.

THE HEARING EXAMINER: Thank you. Go ahead. Two minutes, please.

MS. MEAD: Thank you. Hello. My name is Regina Mead, and I live in the Parkland Hills neighborhood. If you refer to the letter of support from Enrique Cardiel of the health equity council, the e-mail (inaudible) of correspondence reveals the city has solicited letters of support for their permit.

In addition to the letter from Enrique Cardiel and the Health Equity Council, the other letters of support are from providers representing organizations who are involved in similar and different services provided to the homeless: Life Link Training Institute and Arthur Kaufman from UNM Health Sciences Center and others. Each of these organizations has the potential of providing services for the homeless.

Consequently, these letters of support are from organizations focused -- I'm sorry -- focused on meeting the needs of the homeless, without considering the needs of the adjoining communities.

I'm sorry. I have a little trouble seeing this. Bear with me.

THE HEARING EXAMINER: Okay.

MS. MEAD: The needs -- without the -- of the adjoining communities to maintain or achieve the highest standard of living.

While the need for more facilities and services for our homeless population are undisputed, the public safety needs of the housed residents and businesses in the neighborhoods surrounding the Gateway Center must also be addressed. As of yet, the applicant has failed to address these needs as required by the IDO and Councilor Davis enacted Resolution R-21-141.

Additionally, the ballot was a combined senior center and homeless center. It was not just for the homeless, the \$4 million. I voted for it and so did my friends because we had no choice. If we wanted one part of the bond, we had to vote for the both.

Thank you very much for letting me speak. I really appreciate it.

THE HEARING EXAMINER: Thank you for your testimony, Ms. Mead.

I see Ben Fox with the hand raised.

MR. FOX: Yes, thank you. My name is Benjamin Fox, and my address is 1100 Richmond Drive, Northeast, Albuquerque, New Mexico, 87106.

THE HEARING EXAMINER: Thank you, sir. And please raise your right hand. And do you affirm under penalty of perjury that your testimony today will be true?

MR. FOX: Yes, I do.

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THE HEARING EXAMINER: Thank you. Go ahead. Two minutes.

MR. FOX: I am here today to express my full and enthusiastic support for the an overnight shelter at the former Lovelace Gibson Medical Center.

As a public health worker, I've seen a tremendous need for support, shelter and services for our community members that are experiencing homeless. As Mr. Enrique stated earlier, these individuals are our neighbors, they're our friends and they're our family.

While shelters exist that help provide services to our unhoused community, there continues to be a desperate need for more of these services. By developing a new multi-bed shelter located within Albuquerque, we can help ensure that our community members have access to shelter, as well as vitally needed supportive and wraparound services. Some of these services, director Pierce and Jackie Fishman have already briefly touched on.

And Venice Ceballos stated, health care -- existing health care partners, community partners and federally qualified health centers, already help provide care to our unhoused community and stand ready and poised to continue their support and these services at the Gateway Center.

According to the department of housing and urban development, New Mexico has the highest increase in homelessness in the country in 2019, and homeless [sic] has been increasing an average -- at an annual average rate of over 7 percent in Albuquerque since 2013.

Additionally, the 2020 HUD Point-in-Time Count found that for the first time since that government began doing their annual counts, the number of single adults living outside exceeded the number of those living in shelters.

With the significant economic impact of the pandemic, the financial stress our community may face will likely only worsen. Some organizations predict that the fallout of the pandemic may cause chronic homelessness to rise by 49 percent across the nation. There are already a clear need for supportive services for our unhoused population here in Albuquerque, and this need will likely only get more desperate due to the impact of COVID-19.

Please consider the critical need for unhoused community members here in Albuquerque. I urge you to support the -- and grant the conditional-use permit for this overnight shelter. Let us come together and support those in our community who are experiencing homelessness. Let us hold ourselves to the ideal of One Albuquerque and those lofty goals.

Thank you for your time.

THE HEARING EXAMINER: Thank you, sir.

I see Peter Kalitsis with the hand raised. Hello. Are you there?

MR. KALITSIS: Am I unmuted now?

THE HEARING EXAMINER: Yes. I can hear you.

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MR. KALITSIS: Okay.

THE HEARING EXAMINER: Thank you, sir. Would you please state your full name and mailing address for the record.

MR. KALITSIS: Peter S. Kalitsis, 921 Pampas, P, as in Paul, A, M as in Mark, P as in Paul, A, S as in Sam, Drive, Southeast, Albuquerque, 87108.

THE HEARING EXAMINER: Thank you, sir. Please raise your right hand. And do you affirm under penalty of perjury that your testimony today will be true?

MR. KALITSIS: I do.

THE HEARING EXAMINER: Thank you, sir. Go ahead.

MR. KALITSIS: Okay. I have attended many meetings where the homeless coordinating council personnel stated this facility was full service for residents of the overnight shelter, with wraparound -- to have wraparound and shall be trauma informed.

In the meeting yesterday, Carol Pierce stated that the clinical counseling will not be part of the core services. Since the majority of homeless have behavioral health issues the need for these services within the Gateway is crucial to success. By the city not including it, they demonstrate this city -- this facility is not set up for success.

A large population of these residents will need 90 days or less to go back into the community and not having been fully served. The proposed overnight capacity out of 200 people that the city has proposed is not including the services for the overnight residents, 30-day residents at the respite care, which would result in 350 overnight homeless every 90 days. This is from what Carol was saying.

For this reason, and the fact is it's the responsibility of the city to outreach as part of the process, not the businesses to go searching. And in relation to what was stated, voters vote in favor, but the thing is, they're in support of homeless services, but they don't want to be overwhelmed.

For these reasons stated and the factual submittals by the neighborhood associations, and not the other speakers who -- and the other speakers who do not have a vested financial business interest with the city in this facility, I propose that you reject the application in its entirety.

Thank you very much for your time. I appreciate it.

THE HEARING EXAMINER: Thank you, Mr. Kalitsis.

Excuse me.

I see Jeremy -- is it Lihte? Am I pronouncing that correctly?

MR. LIHTE: Yes, sir, and you might be the only one that has.

THE HEARING EXAMINER: Thanks. Would you please state your full name and mailing address for the record.

MR. LIHTE: Yes, sir. My name is Jeremy Lihte. My mailing address is 7236 Cascada Road, Northwest, 87114.

THE HEARING EXAMINER: Thank you, sir. And please raise your right hand. And do you affirm under penalty of perjury that your

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testimony today will be true?

MR. LIHTE: Yes, I do.

THE HEARING EXAMINER: Thank you. Go ahead, sir.

MR. LIHTE: Yes, sir. I'm speaking on behalf of the coalition of behavioral health providers New Mexico Leaders in Recovery. And I -- it want to speak enthusiastically in support of the Gateway Center and all that's planned for it.

The work I do -- the work I do on the side of our behavioral health providers a lot of times brushes up with the applicants at family and community services. I'm not going to repeat what so many have already said. The statement has been made that this is not just a shelter, this is a shelter that promises to provide some of those wraparound services.

As stated multiple times in this hearing, we do already have many services in the area. Now, when we're talking about individuals that are struggling with homelessness, we are -- and in regard to the Gateway Center plans, we aren't speaking about just another place to put these individuals. We are speaking of a place with these wraparound services, ideally situated not only to house, but to restore and enable them to step out of those situations of homelessness and into conditions of being tax paying contributors mem- -- taxpayers and contributing members of our society.

That is the goal of the Gateway Center, is to take these services that we have and to sort of, from my understanding, do some consolidating and get these wraparound services into one building so they are far more accessible through case management and all of these other behavioral health and physical health services provided.

That's all I have. Thank you.

THE HEARING EXAMINER: Thank you, Mr. Lihte.

Okay. Let's see, I don't -- I'm looking for any other hands raised for public. And these are Agenda Items 6 and 7. If you haven't yet spoken and would like to address Agenda Items 6 and 7, please raise your hand.

I'm scrolling through the participant list and I don't see anyone with their hand raised. Again, Agenda Items 6 and 7, City of Albuquerque Family and Community Services request a conditional use for an overnight shelter. 5400 and 5006 Gibson. Last call for agenda item 6 and 7.

I see Jennifer Jones with a hand raised.

Can you hear me, Ms. Jones? Looks like you're muted there. Hello, Ms. Jones?

Looks like her hand went down. Oh, it's up again.

Hello, Ms. Jones. You need to unmute in order to speak. If you go down to the lower left of your screen, there's a microphone button, you can click on that to unmute.

Okay. Let's see. We'll see if Ms. Jones can join us. But I see another hand raised. Paul Mahoney.

Can you hear me?

MR. MAHONEY: Yes, I can. Can you hear me all right?

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THE HEARING EXAMINER: Yes. Please would you please state your full name and mailing address for the record.

MR. MAHONEY: It's Paul Mahoney. My address is 30 Adams Street, Milton, Massachusetts. And I wanted to just -- go ahead and if you can swear me in.

THE HEARING EXAMINER: Oh, yes. And I -- I didn't catch the whole address. Would you mind repeating it.

MR. MAHONEY: Yes. That's 30 Adams Street, Milton, Massachusetts, 02186.

THE HEARING EXAMINER: Thank you, sir. And please raise your right hand. And do you affirm under penalty of perjury that your testimony today will be true?

MR. MAHONEY: I do.

THE HEARING EXAMINER: Thank you. Go ahead, sir. Two minutes.

MR. MAHONEY: Thank you. Actually, I'll be very brief so it's not terribly repetitive.

I manage the Siesta Hills complex across the street, the shopping center. And just on behalf of my tenants, I do believe that -- that we cannot handle the additional problem of more and more -- more and more security issues, more and more police issues, and more and more sanitation issues and drug issues than we have now.

So I do believe that the section of the city has done their part already by taking on so much to try to help this part of the community, and I just think it's time to share. And I'll leave it at that.

THE HEARING EXAMINER: Thank you, Mr. Mahoney.

All right. Let's go back to Jennifer Jones.

You're going to need to click your unmute button in order to speak. And, Ms. Jones, if you are having a problem with the Zoom, maybe you could call in.

Let's see, I see Ryan Kiouss with the hand raised. Are you there?

MS. JONES: I am now. Sorry about that. It was in my settings.

THE HEARING EXAMINER: Is that Jennifer?

MS. JONES: Yes, I'm not sure --

THE HEARING EXAMINER: No problem. Let's get -- let's -- would you please would you please state your full name and mailing address for the record.

MS. JONES: My name is Jennifer Jones, and I live at 528 Torrance Street, Southeast, Albuquerque, New Mexico, 87108.

THE HEARING EXAMINER: Thank you. And please raise your right hand. And do you affirm under penalty of perjury that your testimony today will be true?

MS. JONES: Yes.

THE HEARING EXAMINER: Go ahead. Two minutes, please.

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MS. JONES: So I just wanted to voice my support for the Gateway Center, because I live a few blocks away from the Tiny Home Village in Trumbull, and I also am an employee of the state public defender's office, and which we continually see people that are in and out of the system, but mainly because a lot of the services that, you know, the opposition is suggesting that we have a great number of services, they deal with lack of budgeting and oftentimes have such full waiting lists, that some of our clients can't even get out of jail in part because they have no residence to go to.

And so that's part of the reason why we continue to see them in the system, but as well as why they're on the street, is because they don't have any place to go. And so until we move forward with something that is going to benefit everybody as a whole, we will continue to see these numbers increase throughout our city and in particular, in my neighborhood, which is Trumbull, Trumbull Village.

And I think it's just, you know, a great reason why we're seeing such large numbers, is because of the resistance that has taken place in the past to provide services or a great number of services to address not just the mental health problem, but the drug addiction-related problem that is really seeming to cripple -- cripple that population.

And I -- I, in particular, grew up in this community. I have seen, you know, the number of crime that has taken place. But, as well, I have very fond childhood memories here. And I would like to see my neighborhood in particular get back to that place, where we can have kids playing in the street and in the park and, you know, have your unsheltered families and neighbors be a part of our community and be productive members and not in and out of the criminal justice system, where a great majority of our funding is going to.

And there are no services for them when they're getting out. And that's been the biggest hurdle, I think, trying to address, you know, the criminal element problem, but also what is causing it.

So that's -- that was my -- that's my support of the Gateway community.

THE HEARING EXAMINER: Thank you, Ms. Jones.

Excuse me.

I see Ryan. Is it Kious? Am I pronouncing that right? Can you hear me, sir?

MR. KIOUS: Yeah, you got it right.

THE HEARING EXAMINER: Oh, good. Thank you, sir. Would you please state your full name and mailing address for the record.

MR. KIOUS: My name is Michael Ryan Kious. I live at 1108 Georgia Street, Southeast, 87108.

THE HEARING EXAMINER: Thank you, sir. Please raise your right hand. Do you affirm under penalty of perjury that your testimony today will be true?

MR. KIOUS: I do.

THE HEARING EXAMINER: Thank you, sir. Go ahead. Two minutes,

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please.

MR. KIOUS: All right. I'm the vice president of the Elder Homestead Neighborhood Association. I'd like to read a letter given to me -- a statement given to me by a local business down the street from me. He couldn't attend today, so he asked if I could read something on his behalf, if that's okay.

THE HEARING EXAMINER: Sure.

MR. KIOUS: It says: To whole it may concern, my name is Steve Sacco. I serve as an Elder Homestead Neighborhood Association board member. My father and I have owned and operated a small business on Gibson for the past 48 -- 49 years. I've seen this neighborhood grow and change over time. It has been home to many good individuals and families. Over the last few years, I've witnessed changes. Crime is increasing and the homeless condition has grown.

Our city leaders have pushed this project on us without having the consent of most of the residents and businesses; take, for example, having meetings on very short notice.

Yesterday I was handed a flyer at noon about a Gateway's (inaudible) session at 5:00 in the evening -- 5:00 that evening. I was not able to prepare for that meeting or rearrange my schedule to accommodate it. So as a result, I was not able to participate properly. There were only three or four -- maybe four businesses that were actually able to attend.

The city, if they go along with the plans for this facility, I would like to see a flow chart or business plan that completely outlines the day-to-day flow of the center. As far as I'm concerned, this project is not going to help correct the problems that we have with homelessness in our neighborhoods and will bring more problems to our area and drive residences and businesses out.

I implore the committee to vote no to giving the Gateway Center the permit. I hope in the future that the city can be more truthful, timely and transparent in their dealings with the local neighborhoods. Respectfully submitted, Steve Sacco.

Mr. Sacco is just one of dozens of what we have of remaining local businesses that we have in this part of town that's expressed concern with the improper way the city went about -- went about this process of contacting them.

We live in a part of town that faces constant economic degradation, and with that, we have absentee landlords. We have almost no code enforcement in this part of town. And this is an environment that at-risk population that Gateway services hopes to help.

These -- this average population is going to be moving in and out of this environment, an environment that's littered with abandoned properties, and then the crime and the trash that comes with it, and the drugs. So that's just something to consider. Now, we -- like I said, this part of town is very much neglected. It's at risk itself.

And the way the Gateway went about dealing with local businesses, something that we have in very short supply (inaudible), by the way, was insufficient, as you can see by the letter I've written -- I mean, I've read. And you've gotten -- as I mentioned, there was a petition, I believe, that was submitted to you guys with 30 local bills signatures expressing concern over

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this.
So that's all I have. Thanks so much.

THE HEARING EXAMINER: Thank you, Mr. Kiious.

Okay. Again, these are Agenda Items 6 and 7. Let's see if there's any -- any more public comment. I don't see any hands raised, but if you'd like to speak on 6 and 7, please raise your hand if you haven't already spoken.

I'm scrolling through the participant list, I don't see anyone raising their hand. Last call for Agenda Items 6 and 7.

Okay. Now, I know the city staff had wanted to speak earlier. Why don't we give them an opportunity to speak before we call on the agent again.

MS. FISHMAN: Mr. Lucero, if -- this is Jackie Fishman again. I would like to start with that, and myself and family and community services have coordinated our responses, so --

THE HEARING EXAMINER: Okay.

MS. FISHMAN: -- if you don't mind, if I could start, and then I will turn it over to various staff.

THE HEARING EXAMINER: That's fine. Yes. Go ahead.

MS. FISHMAN: Okay. So we've listened very carefully to all the speakers today, and we have a few rebuttal points. I'll go through those quickly. And, like I said, we have some others from family and community services that will also address those.

I just want to remind Mr. Lucero, you know this, the impetus behind this application, well, is to improve the existing conditions for the unhoused. I live and own a business in District 2. There's -- I don't think there's more services anywhere in the city than downtown and in District 2.

But that aside, we believe this application for conditional use will improve conditions by creating a centralized facility that brings these -- these providers together in one location. And you've heard from a number of providers today, both who have spoken and who have submitted letters of support.

Mr. Lucero, as the ZHE, you're making a land use decision, a conditional use, which is allowed in -- in the MX-H zone. But, you know, you -- it has to go through this process. It's not a decision made -- being made on an operations plan. That is the task at hand, is to answer whether this use is appropriate for this property. We believe it is by being relatively physically separated from the neighborhoods.

We've demonstrated how the proposal is furthering the comp plan, which is very strong goals and policies that address homelessness.

I would also note family and community services did comply with Resolution 21-141, which required two community input meetings. I showed that on my slide during my initial presentation. Those were done June 10th and June 12th. And then also, progress towards the Good Neighbor Agreement. And that's been done. And we've talked a little bit about that.

And I would just emphasize, this process that we're in right now

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is the beginning, it's not the end. This effort will be ongoing. There will be lots of meetings and lots of coordination with business owners and people from the neighborhood.

As for the business owners, I would just like to really emphasize that all -- everybody was invited to these meetings. I mean, we have people from all over the city that came to the meetings and even are on this call. No one was left out, no one was excluded from coming to the meetings or giving input.

I would also add for the speakers that talked about business owners and their associations, if -- if those business owners are members of their associations, it's also the responsibility of -- of the neighborhood associations to get the word out.

We've -- we've notified people per the IDO. Requirement, this is a conditional-use process, we've followed it to the letter of the law. And, you know, I would just end with that.

In terms of family and community services, Carol Pierce wants to talk a little bit more about outreach. Lisa Huval wants to talk a little bit more about the encampments. And then Myra Segal will be talking a little bit about the distribution of service providers.

THE HEARING EXAMINER: Okay. Thank you, Ms. Fishman.

Let's see, it looks like family -- there we go.

MS. SEGAL: Yes. Thank you, Mr. Lucero.

THE HEARING EXAMINER: Before -- Ms. Segal, could I get those speakers who have not yet been sworn in sworn in. If you could state your names and then give the mailing address, please.

MS. HUVAL: Sure thing. My name is Lisa Huval, and my mailing address is 400 Marquette Avenue, Northwest, Albuquerque, New Mexico, 87102.

THE HEARING EXAMINER: Thank you.

MS. SEGAL: And I'm Myra Segal. And I work at family and community services. My address is 400 Marquette Avenue, Northwest, Room 504, Albuquerque, 87102.

THE HEARING EXAMINER: Thank you, both. And please raise your right hand. Do you affirm under penalty of perjury that your testimony today will be true.

MS. HUVAL: Yes.

MS. SEGAL: Yes.

THE HEARING EXAMINER: Thank you. Go ahead

MS. SEGAL: Great. Thank you, Mr. Lucero. I want to just begin with that every night in our community, 1500 people are unhoused. They're on our streets. And about a third of those are on the street and two-thirds are in shelter. It's really speaking to the need that we do need more overnight shelter in our community to address these unhoused neighbors.

We are very proud of the public meetings that we have done over the last several years. And the recent ones, as well. Since April, we have spoken to over 500 people. A lot of those folks are here at these meetings today. How we publicize those was

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working with the neighborhood associations, our newsletter, our website.

And I do, in fact, just want to cite that the letter read by Mr. Sacco, a businessman in the area, did attend our meeting on June 12th, and also attended a tour of Gibson with the Parkland Hills.

We welcome the continued conversation with these neighborhood groups and businesses. It is through those conversations that we have posted our operational plan, the draft, as well as the administrative policy. And I'd like to say those were really informed by these robust conversations that we've had and that we will continue to have. And many of the items that are stated in there that are addressed, whether it be a road audit for Gibson, whether it be a bus route system assessment, whether it be the establishment of a public safety district, all those are really included in those draft plans and were really informed by our conversations with the neighborhood.

And we look forward to continue the dialogue as we move forward. And I'll hand it to deputy Huval.

THE HEARING EXAMINER: Thank you.

MS. HUVAL: Thank you, Mr. Lucero, I wanted to respond to some of the comments regarding encampments. Encampments are not allowed on public or private property within the city. They will not be allowed on the Gibson Health Hub property or in the adjacent -- or adjacent to Gibson Health Hub.

The city does have a process and a multi-department team that addresses encampments on public property. We currently have two staff that designated specifically for responding to encampments on public property. And we are actually increasing the number of staff who respond to encampments on public property by five. We're adding five positions, which we are currently in the process of hiring for.

Three of those will be focused on the enforcement side, posting notice, following up, ensuring cleanup happens. And two of the staff will be focused on providing outreach services.

Two of these new staff will have offices -- an office based Gibson Health Hub, which will allow them to monitor the area a quarter-mile radius from the Gibson Health Hub for encampments and address any encampments that do develop quickly.

I want to stress that the Gateway Center at Gibson Health Hub is not a drop-in center and it's not a community meal site. We will be providing meals for the folks that -- the guests who are staying at the Gateway Center, but not for the general community.

Unfortunately, we do see that sometimes service sites that provide meals do attract -- do attract encampment residents. Folks will camp nearby because they can access some basic services there. But we are not doing that at the Gateway Center, and I think that will help mitigate the issue of encampments.

I also want to add that the Gateway Center will be open 24/7. That means that folks will not be discharged to the street each day and then be only be able to return in the evening. People will be able to stay inside the Gateway Center, where they can meet with a case manager or a peer support worker, as well as go out into the community and apply for jobs, look for housing, see

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their doctor, all the things that they need to get into permanent housing.

We believe that will also mitigate the impact of -- or prevent folks from hanging out in the neighborhood.

And thank you for your time.

THE HEARING EXAMINER: Thank you.

Okay. Ms. Fishman, or the applicants, I did have some questions based on the public comment. Thank you for addressing those items that you just did address.

But there were, you know, some arguments both in the testimony as well as some of the written -- written submittals, that the -- you know, having to do with this -- this UNM study. And I wanted to give you the opportunity to respond.

You know, what is -- what is this UNM study that has been apparently commissioned? And sort of what's its role and status?

MS. FISHMAN: Mr. Lucero, this is Jackie Fishman again. I'm going to ask family and community services to answer that question.

MS. HUVAL: Yes, I can speak to that question.

For a little bit of context, the city, the county and UNM have formed a homeless coordinating council. Under the council there are five committees. One of the committees is called the homeless services system committee. The committee was charged with developing a set of high impact strategies to address homelessness in our community, as were the other committees within their focused area.

One of the high impact studies we identified was the need for additional centrally located emergency shelter beds. But as part of that, the committee identified the need to -- for an assessment of the impact of emergency shelter on local neighborhood and communities.

So UNM as a partner in the homeless coordinating council has agreed to do this assessment. It will basically be doing an evaluation or kind of an assessment of both the benefits and potentially adverse impacts of emergency shelter on surrounding neighborhoods and provide recommendations and steps that the city could take to mitigate those impacts.

THE HEARING EXAMINER: Okay. And is that study just generally as to all shelters, or is it specifically as to the subject matter of today's hearing?

MS. HUVAL: The way the question -- or the research (inaudible) is kind of looking generally at emergency shelter, the question of emergency shelter.

THE HEARING EXAMINER: Okay. Thank you. And then a separate question is, you know, there were some arguments that the submission process under the IDO was not complete. And I know that Ms. Fishman addressed the meeting procedure, and that that was followed, as she submitted evidence. But -- but I just wanted to -- to ask if there were any other components that the applicant or agent wanted to address regarding that argument.

MS. FISHMAN: Yes, Mr. Lucero. This is Jackie Fishman again.

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We followed -- again, we followed the IDO process. We had preapplication notification that was sent out not only to the official affected neighborhood associations as determined by the office of neighborhood coordination, but we also sent them to several other neighborhood associations just because they have been involved since the beginning. And so we didn't exclude any of those. We sent out, from my office, the preapplication notice by e-mail. We scheduled a preapplication facilitated meeting, which you have the report in your packet. And we -- we followed that process to the letter.

And then, when we made the application submittal, we renotified all the neighborhood associations. Again, the two that were the official affected associations, as well as three or four other associations, we notified by e-mail per the IDO procedures. And then also, we notified adjacent property owners within 100 feet minus the public rights-of-way. They were all sent a letter through the U.S. Postal Service, as required by the IDO.

We also posted signs per the IDO. I think there are three on the site of the two facing Gibson, one facing the other street, Ridgecrest Drive. So that -- that followed the IDO process. And then our application, itself, went through each of the -- the elements of the criteria for conditional use, and we -- we followed that process to the letter.

So I -- I think that's it. But I'm -- I think we've -- we've completely followed the process, as we always do in my office. Thank you.

THE HEARING EXAMINER: Thank you, Ms. Fishman.

Okay. Now another question was that there was -- you know, there was a lot of discussion about the sort of disproportion share. And I know Ms. Fishman, you raised that downtown has a lot of services, too. But is that germane to the elements of the conditional use, and if so, what's the impact of that argument on the elements required for approval?

MS. FISHMAN: Mr. Lucero, I don't think it is germane to this conversation. When you go through a conditional use process, there's very specific criteria that you have to address. We -- we couldn't get to that point unless we had an appropriately zoned property, MX-H. In this case, it's over a 20-acre property. The criteria doesn't say: Are you equitably distributing this kind of service throughout the city?

It talks about this property, this neighborhood, this area. So I -- I don't think it's germane. However, we did -- because we knew that that issue was going to come up, we did have the city AGIS department create a map. I haven't shown it yet, and I'm happy to share that -- that screen again. I think Myra wanted to talk about it, and if you allow me to share the screen, I -- I will do so.

THE HEARING EXAMINER: Sure. Yes. Let's see. Thank you, Suzie.

MS. FISHMAN: Okay. There we go. Okay. So if you -- I'm assuming you can actually -- let me -- let me trade screens here. I'm sorry about that. Okay. You can see the screen now?

THE HEARING EXAMINER: Yes.

MS. FISHMAN: Okay. So this map, it was just created. It doesn't include halfway houses or -- or community facilities

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of -- of that type. But it does show behavioral health treatment locations, case management and related services, day shelters and meal sites, emergency shelters, health care facilities and social services.

And you can see that we have outlined -- each of the council districts are in the heavy black line. And this area here, if you can see my pointer, this is Council District 6, which does have, you know, a lot of these type of services. But then you also have Council District 2, which if you count these little symbols, there are more in Council District 2 than Council District 6.

I agree it could be better distributed in this, but I think where these places are located are a reflection of where people are congregating and living and -- and receiving, you know, other -- other services. So it sort of naturally -- they -- they come together.

But Myra, you wanted to speak to this, as well, so go ahead.

MS. SEGAL: All right. Thank you, Jackie. And thank you, Mr. Lucero and everybody.

Yeah, I think Jackie you covered it. These are the major services that are part of a continuum of care. You know, there's not one solution to the complex issue of people experiencing homelessness and the issues that they may face. And so there is a need for a continuum of care.

And this map tries to show that it -- there are places that are located throughout the city. But it is pretty natural for a city to have services such as these concentrated in the older sections of town and in central cities. That's just, I think, the nature of how it is. So it's not surprising to see where these services are.

But this map is trying to show that there is -- there are a number of services and that part of what we want to do, is that every person comes with a story and we are also committed to providing additional services at the site and to work the community agencies that are already here on the map.

THE HEARING EXAMINER: Okay. All right. Let's see, I had another question here. Bear with me one second. I'm just going through my notes.

Okay. So there was some discussion of a good -- Good Neighbor Agreement, and I do note that Resolution -- let's see, this looks like R-121-141 talks about, you know, the city will not issue a certificate of occupancy until, you know, these certain items have been completed.

It doesn't specifically say a Good Neighbor Agreement, but it talks about Good Neighbor -- actually, it does -- components of a Good Neighbor Agreement.

What is the status of that, and sort of where do things stand with the Good Neighbor Agreement? What does that entail?

MS. FISHMAN: Mr. Lucero, I'll start and I'll have family and community services jump in.

The resolution, as I understand it, is to make progress towards a Good Neighbor Agreement. It's not to complete it at this time.

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So the department is working on that. There's a number -- a number of components to that that should be part of the Good Neighbor Agreement. And I'm looking through my notes right now and I can pull those up. But if somebody else wants to keep talking about that issue, please do.

MS. HUVAL: Ms. Fishman and Mr. Lucero, I'm happy to speak to that.

Yes, for R-21-141, we believe we have met the requirements of that legislation. We did offer the two community input sessions within 45 days of that. Those were the ones held on June 10th and June 12th. We did that both through Zoom and also in the education building over at Gibson, with 90 people attending on the Zoom meeting and 77 attending in person on a Saturday over at Gibson.

The other component of that legislation is about advancing the discussion toward components of a Good Neighbor Agreement, which, at a minimum, would include overnight capacity, which we have addressed in our draft administrative policies security protocols which have been addressed in our operational plans that have been posted. And then we talk about the land use changes that would be required and that's what we're here today to discuss.

And then there's also that method for dissemination of project and program updates. We've done that through our communication, through our website, primarily, as well as our news letter.

And then a point of contact, and we've primarily done that also through our website and with a dedicated e-mail address.

THE HEARING EXAMINER: Thank you. Okay. And then my last question was that the -- you know, the Parkland Hills Neighborhood Association representative had suggested some conditions of approval. And I wanted to get the applicant's and agents's feedback on any of those, whether they were considered or -- and what the city's position is on any of those.

MS. FISHMAN: Okay. Mr. Lucero, this is Jackie Fishman again. I took some notes, too, and I mean, the one that really stood out at me, which I would vigorously oppose is the limitation in the shelter capacity.

I don't -- I don't think that's an appropriate decision for the ZHE to make. That's not part of the criteria for a conditional use. And I think the suggestion was 15 families and 30 individuals. You know, we would be vigorously opposed to that. We have talked about ramping up to 25 families and 100 individuals. That is -- that is -- we think that's an appropriate amount of people to serve there. This is a very large facility, 572,000 square feet. And the shelter, again, as I said during my early testimony, will be about 10 -- 10 to 15 percent of that. So I would -- I would oppose any kind of limitation in terms of the number of beds.

Was there another aspect of other comments that you would like me to address?

THE HEARING EXAMINER: You know, I think through the discussion, you know, we just talked about the Good Neighbor Agreement, the two others that I noted, one was a public safety district and added resources, but -- and I know that the applicant has already identified some measures that are being taken with regard to public safety.

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MS. FISHMAN: And I think the -- Mr. Lucero, I think the public safety district is -- is part of the intent. But I -- I think that that might be an appropriate thing to include in your decision-making process.

THE HEARING EXAMINER: Okay. And then what about the transportation plan? That was another suggestion. What's -- is there any -- any measures in -- underway regarding a transportation plan. I know you highlighted the existing public transportation services.

MS. FISHMAN: Well, there's -- Mr. Lucero, there's going to be a shuttle service that will bring clients to the site for intake and assessments. The shuttle service will also take people away from the Gateway Center to an exit destination. I think the department has really emphasized they will not just turn people out on the sidewalk, you know, along Gibson. That the shuttle service will be in place.

I think also the department is working with city transit on increasing the frequency of transit in this area. So all those are -- are components of the -- the operations plan, and those are all ongoing efforts that are being made.

THE HEARING EXAMINER: Okay. All right. Well, I'd like to thank everyone for their participation.

Ms. Del Rio I see your hand raised, but unfortunately I know you already had the opportunity to speak, and so -- and we do have a lot of other matters on the agenda today.

But I'd like to thank all of you for your participation. I am -- I hear all of you. I just want you to know that. I hear all of your testimony. I'm reading very carefully all of the written submittals.

Again, anything that was shown on the screen, please do e-mail it so that Suzie Sanchez can include it in the record. And I'm going to do my best to decide this on the merits. There's a lot of considerations to be made. And, again, I'd like to thank you for the civil discourse.

And so I would -- with that, we'll go ahead and close the record on these items. And I will take it all under consideration and issue the written decision in 15 days. Thank you.

MS. FISHMAN: Thank you very much.

(Conclusion of partial transcript
of proceedings.)

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RE: CITY OF ALBUQUERQUE ZHE HEARING MINUTES OF
SEPTEMBER 21, 2021, AGENDA ITEMS 6 & 7

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I HEREBY STATE AND AFFIRM that the foregoing is a correct transcript of an audio recording provided to me and that the transcription contains only the material audible to me from the recording was transcribed by me to the best of my ability.

IT IS ALSO STATED AND AFFIRMED that I am neither employed by nor related to any of the parties involved in this matter other than being compensated to transcribe said recording and that I have no personal interest in the final disposition of this matter.

IT IS ALSO STATED AND AFFIRMED that my electronic signature hereto does not constitute a certification of this transcript but simply an acknowledgement that I am the person who transcribed said recording.

DATED this 10th day of December 2021.

/S/

Kelli A. Gallegos-----

Planning Department
Alan Varela, Interim,, Planning Director
Development Review Division
600 2nd Street NW – 3rd Floor
Albuquerque, NM 87102

NOTICE OF APPEAL

November 22, 2021

TO WHOM IT MAY CONCERN:

The Planning Department received an appeal on November 19, 2021. You will receive a Notice of Hearing as to when the appeal will be heard by the **Land Use Hearing Officer**. If you have any questions regarding the appeal please contact Alfredo Ernesto Salas, Planning Administrative Assistant at (505) 924-3370.

Please refer to the enclosed excerpt from the City Council Rules of Procedure for Land Use Hearing Officer Rules of Procedure and Qualifications for any questions you may have regarding the Land Use Hearing Officer rules of procedure.

Any questions you might have regarding Land Use Hearing Officer policy or procedures that are not answered in the enclosed rules can be answered by Crystal Ortega, Clerk to the Council, (505) 768-3100.

CITY COUNCIL APPEAL NUMBER: AC-21-16
PLANNING DEPARTMENT CASE FILE NUMBER:
PR-2021-005834, VA-2021-00317, VA-2021-00411

**APPLICANT: Peter S. Kalitsis for Parkland Hills, Siesta Hills,
Elder Homestead, Neighborhood Associations
921 Pampas Dr. SE
Albuquerque NM, 87108-4418**

cc: Crystal Ortega, City Council, City county bldg. 9th floor
Kevin Morrow/Legal Department, City Hall, 4th Floor-
Consensus Planning, Jackie Fishman, fishman@consensusplanning.com
Family & Comm Services, Carol Pierce, cpierce@cabq.gov
Rachel Baca, siesta2na.pres@gmail.com
Sara Fitzgerald, sfitzgerald@greaterabq.com
Kate Matthews, kate.sonora@gmail.com
Scott Benavidez, scott@mrbsnm.com
Family & Comm Services, Lisa Huval, lisahuval@cabq.gov
Family & Comm Services, Segal, Myra J., msegal@cabq.gov
Sandra Perea, sp-wonderwoman@comcast.net
Tim & Pricilla Roberts, t-p-w@comcast.net
Melinda Frame, phna.homelessness.solutions@gmail.com
peter kalitsis, peterkalitsis@gmail.com
Vera Watson, vera.e.watson@gmail.com
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Tracy McDaniel, tmcdaniel@swwomenslaw.org
Rob Leming, phnapresident@gmail.com
Khadijah Bottom, khadijahasili@vizionz.org
Regina Mead, mynmbrother@yahoo.com
Venice Ceballos, VCeballos@salud.unm.edu
Raven Del Rio, missraven_1950@msn.com

Ben Fox, 1100 Richmond DR NE, Albuquerque, NM 87106
Jeremy Lihte, 7236 Cascada RD NW, Albuquerque, NM 87114
Jennifer Jones, 528 Torrance ST SE, Albuquerque, NM 87108
Adriann Barboa, 1517 CORNELL DR SE, Albuquerque, NM 87106
Ryan Kiious, 1108 Georgia ST SE, Albuquerque, NM 87108
Dan Mayfield, fozzdog@outlook.com
Kathy Pierson, kp-shna@centurylink.net
Alex Horton, 111 Wyoming BLVD NE, Albuquerque, NM 87108
Leslie Padilla, lesliempadilla@gmail.com



ZONING HEARING EXAMINER'S AGENDA

TUESDAY, October 19, 2021 9:00 A.M.

Join Zoom Meeting

<https://cabq.zoom.us/j/7044490999>

Meeting ID: 704 449 0999

One tap mobile

+1-669-900-6833,,7044490999# US (San Jose)

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+1 669 900 6833 US (San Jose)

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+1 346 248 7799 US (Houston)

+1 646 558 8656 US (New York)

+1 301 715 8592 US (Germantown)

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Meeting ID: 704 449 0999

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Robert Lucero, Esq., Zoning Hearing Examiner

Lorena Patten-Quintana, ZHE Planner

Suzie Sanchez, ZHE Administrative Assistant

For Inquiries Regarding This Agenda, Please Call The Planning Dept. at (505) 924-3894.

PLEASE ADDRESS ALL CORRESPONDENCE TO:

Robert Lucero, Esq., Zoning Hearing Examiner at suzannasanchez@cabq.gov

NOTICE TO PEOPLE WITH DISABILITIES: If you have a disability and you require special assistance to participate in this hearing, please contact Planning Information at (505) 924-3860.

INTERPRETER NEEDED:

- | | | |
|------------------|----------|--|
| 1. VA-2021-00340 | Project# | Bienes & Autos LLC C/O Saenz-Ocon Lucila Etal requests a variance of 6 ft |
| | PR-2021- | to the required 15 ft rear yard setback for Lot D3, T1, Carlos Rey, located at |
| | 005790 | 99999 Delia AVE SW, zoned R-ML [Section 14-16-5-1(C)] |

2. VA-2021-00343 Project#
PR-2021-005973 Antillon Gilberto Armenta & Maria Corona Lujan requests a conditional use to allow a family home daycare for Lot 132A2, Vista Manzano Unit 2, located at 1337 Ojo Feliz St SW, zoned R-1A [Section 14-16-4-2]

OLD BUSINESS:

3. VA-2021-00316 Project#
PR-2021-005834 City of Albuquerque Family and Community Services (Agent, Consensus Planning) requests a conditional use to allow an overnight shelter for Lot A1A1A/Lovelace Hospital, Lovelace Hospital, located at 5400 Gibson BLVD SE, zoned MX-H [Section 14-16-4-2]
4. VA-2021-00317 Project#
PR-2021-005834 City of Albuquerque Family and Community Services (Agent, Consensus Planning) requests a conditional use to allow an overnight shelter for Lot 1, Swift Addn, located at 5006 Gibson BLVD SE, zoned MX-H [Section 14-16-4-2]
5. VA-2021-00054 Project#
PR-2021-005169 Brittany Love (Agent, Teresa King) requests a variance of 5 feet to the required 10 foot front yard setback for Lot 266-A, MRGCD Map 38, located at 2311 Hollywood Ave NW, zoned R-1A [Section 14-16-2-3(B)]

NEW BUSINESS:

6. VA-2021-00267 Project#
PR-2021-005698 Craig B II Meo (Agent, Yolanda Montoya) requests a conditional use to allow an accessory dwelling unit w/out a kitchen for Lot 4, Block 7, Wells Sandia Manor, located at 14200 Arcadia Rd NE, zoned R-1D [Section 14-16-4-2]
7. VA-2021-00329 Project#
PR-2021-005917 Michael Ulibarri (Agent, Gilbert Austin) requests a permit to allow a carport in the front yard setback for Lot 22, Block F, Lavaland Addn, located at 340 58th ST NW, zoned R-1B [Section 14-16-5-5(F)(2)(a)]
8. VA-2021-00334 Project#
PR-2021-005959 Chad Rennaker (Agent, Design Plus, LLC) requests a conditional use to allow a bar for Lot 7-12, Block 44, Huning Highlands Addn, located at 701 Central Ave NE, zoned MX-L [Section 14-16-4-2]

9. VA-2021-00335 Project#
PR-2021-005960 Bo Russom requests a variance to allow an accessory building that is within a setback to exceed the height of the primary building for Lot 17, Block 24, Carlisle Plaza Addn, located at 3615 Alta Monte Ave NE, zoned R-1C [Section 14-16-5-11-C-4(b)]
10. VA-2021-00336 Project#
PR-2021-005961 Kathleen S Azar requests a conditional use to allow an accessory dwelling unit without a kitchen for Lot 7, Block 44, Bel Air, located at 2615 Morningside Dr NE, zoned R-1C [Section 14-16-4-2]
11. VA-2021-00337 Project#
PR-2021-005962 Dorothy Koenig requests a conditional use to allow for outdoor storage and display for Lot 11-13, Block 11, Fairgrounds Addn, located at 6505 Zuni RD SE, zoned NR-C [Section 14-16-4-3(E)(17)]
12. VA-2021-00338 Project#
PR-2021-005963 GCD Oakdale LLC (Agent, Tierra West, LLC) requests a variance of 10 ft to the required 15 ft maximum front yard setback for Lot 22A, Block 22, Chavez--Timoteo Addn, located at 2412 Carlisle BLVD NE, zoned MX-H [Section 14-16-5-1(D)]
13. VA-2021-00339 Project#
PR-2021-005566 Martin Gerald A & Victoria E Co-Trustees Martin RVT (Agent, Consensus Planning) requests a conditional use to allow a high school in the R-ML zone district for Lot A2, Ventana Ranch, located at 99999 Ventana RD NW, zoned R-ML [Section 14-16-4-2]
14. VA-2021-00341 Project#
PR-2021-003911 Jose Alfredo & Ailda Martinez (Agent, Modulus Architects) request a conditional use to allow for a light fueling station adjacent to a residential zone for Lot Commercial Tract, Block 5, Los Altos, located at 99999 Bridge BLVD SW, zoned MX-M [Section 14-16-4-3(D)(18)(g)]
15. VA-2021-00342 Project#
PR-2021-003911 Jose Alfredo & Ailda Martinez (Agent, Modulus Architects) request a conditional use to allow for the retailing of liquor within 500 feet of a residential zone for Lot Commercial Tract, Block 5, Los Altos, located at 99999 Bridge BLVD SW, zoned MX-M [Section 14-16-4-3(D)(39)(c)]
16. VA-2021-00344 Project#
PR-2021-005991 Carolyn Ann Cox (Agent, Gerald and JoAnne Barela) requests a variance of 10 ft to the required 15 ft rear yard setback for Lot 16, Block 51, Princess Jeanne Park Addn, located at 10809 Constitution Ave NE, zoned R-1B [Section 14-16-5-1]

17. VA-2021-00345 Project# Reece M and Noelle M Killebrew requests a permit-wall or fence- major to
PR-2021- allow a courtyard wall 6 ft in height in the front yard greater than 10 ft from
005992 the front lot line for Lot 16, Block 7, Academy Estates Unit 2, located at 8805
Spain Rd NE, zoned R-1D [Section14-16-5-7(D)(g)]
18. VA-2021-00346 Project# Anchondo Beatriz E Gonzalez (Agent, Wendy Gonzales) requests a permit-
PR-2021- wall or fence-major for Lot 42, Block 11, Skyview West Amended Replat,
005995 located at 320 Judith LA SW, zoned R-1B [Section 14-16-5-7(D)(g)]



ZONING HEARING EXAMINER'S ACTION SHEET

TUESDAY, October 19, 2021 9:00 A.M.

Join Zoom Meeting

<https://cabq.zoom.us/j/7044490999>

Meeting ID: 704 449 0999

One tap mobile

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Robert Lucero, Esq., Zoning Hearing Examiner

Lorena Patten-Quintana, ZHE Planner

Suzie Sanchez, ZHE Administrative Assistant

For Inquiries Regarding This Agenda, Please Call The Planning Dept. at (505) 924-3894.

PLEASE ADDRESS ALL CORRESPONDENCE TO:

Robert Lucero, Esq., Zoning Hearing Examiner at suzannasanchez@cabq.gov

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.....

INTERPRETER NEEDED:

- | | | | |
|----|---------------|----------|--|
| 1. | VA-2021-00340 | Project# | Bienes & Autos LLC C/O Saenz-Ocon Lucila Etal requests a variance of 6 ft |
| | | PR-2021- | to the required 15 ft rear yard setback for Lot D3, T1, Carlos Rey, located at |
| | | 005790 | 99999 Delia AVE SW, zoned R-ML [Section 14-16-5-1(C)] DENIED |

2. VA-2021-00343 Project#
PR-2021-005973 Antillon Gilberto Armenta & Maria Corona Lujan requests a conditional use to allow a family home daycare for Lot 132A2, Vista Manzano Unit 2, located at 1337 Ojo Feliz St SW, zoned R-1A [Section 14-16-4-2] **APPROVAL**

OLD BUSINESS:

3. VA-2021-00316 Project#
PR-2021-005834 City of Albuquerque Family and Community Services (Agent, Consensus Planning) requests a conditional use to allow an overnight shelter for Lot A1A1A/Lovelace Hospital, Lovelace Hospital, located at 5400 Gibson BLVD SE, zoned MX-H [Section 14-16-4-2] **APPROVAL**
4. VA-2021-00317 Project#
PR-2021-005834 City of Albuquerque Family and Community Services (Agent, Consensus Planning) requests a conditional use to allow an overnight shelter for Lot 1, Swift Addn, located at 5006 Gibson BLVD SE, zoned MX-H [Section 14-16-4-2] **APPROVAL**
5. VA-2021-00054 Project#
PR-2021-005169 Brittany Love (Agent, Teresa King) requests a variance of 5 feet to the required 10 foot front yard setback for Lot 266-A, MRGCD Map 38, located at 2311 Hollywood Ave NW, zoned R-1A [Section 14-16-2-3(B)] **DEFERRAL**

NEW BUSINESS:

6. VA-2021-00267 Project#
PR-2021-005698 Craig B II Meo (Agent, Yolanda Montoya) requests a conditional use to allow an accessory dwelling unit w/out a kitchen for Lot 4, Block 7, Wells Sandia Manor, located at 14200 Arcadia Rd NE, zoned R-1D [Section 14-16-4-2] **APPROVAL**
7. VA-2021-00329 Project#
PR-2021-005917 Michael Ulibarri (Agent, Gilbert Austin) requests a permit to allow a carport in the front yard setback for Lot 22, Block F, Lavaland Addn, located at 340 58th ST NW, zoned R-1B [Section 14-16-5-5(F)(2)(a)] **APPROVAL**
8. VA-2021-00334 Project#
PR-2021-005959 Chad Rennaker (Agent, Design Plus, LLC) requests a conditional use to allow a bar for Lot 7-12, Block 44, Huning Highlands Addn, located at 701 Central Ave NE, zoned MX-L [Section 14-16-4-2] **APPROVAL**

9. VA-2021-00335 Project#
PR-2021-005960 Bo Russom requests a variance to allow an accessory building that is within a setback to exceed the height of the primary building for Lot 17, Block 24, Carlisle Plaza Addn, located at 3615 Alta Monte Ave NE, zoned R-1C [Section 14-16-5-11-C-4(b)] **APPROVAL**
10. VA-2021-00336 Project#
PR-2021-005961 Kathleen S Azar requests a conditional use to allow an accessory dwelling unit without a kitchen for Lot 7, Block 44, Bel Air, located at 2615 Morningside Dr NE, zoned R-1C [Section 14-16-4-2] **APPROVAL**
11. VA-2021-00337 Project#
PR-2021-005962 Dorothy Koenig requests a conditional use to allow for outdoor storage and display for Lot 11-13, Block 11, Fairgrounds Addn, located at 6505 Zuni RD SE, zoned NR-C [Section 14-16-4-3(E)(17)] **APPROVAL**
12. VA-2021-00338 Project#
PR-2021-005963 GCD Oakdale LLC (Agent, Tierra West, LLC) requests a variance of 10 ft to the required 15 ft maximum front yard setback for Lot 22A, Block 22, Chavez--Timoteo Addn, located at 2412 Carlisle BLVD NE, zoned MX-H [Section 14-16-5-1(D)] **APPROVAL**
13. VA-2021-00339 Project#
PR-2021-005566 Martin Gerald A & Victoria E Co-Trustees Martin RVT (Agent, Consensus Planning) requests a conditional use to allow a high school in the R-ML zone district for Lot A2, Ventana Ranch, located at 99999 Ventana RD NW, zoned R-ML [Section 14-16-4-2] **APPROVAL**
14. VA-2021-00341 Project#
PR-2021-003911 Jose Alfredo & Ailda Martinez (Agent, Modulus Architects) request a conditional use to allow for a light fueling station adjacent to a residential zone for Lot Commercial Tract, Block 5, Los Altos, located at 99999 Bridge BLVD SW, zoned MX-M [Section 14-16-4-3(D)(18)(g)] **DENIAL**
15. VA-2021-00342 Project#
PR-2021-003911 Jose Alfredo & Ailda Martinez (Agent, Modulus Architects) request a conditional use to allow for the retailing of liquor within 500 feet of a residential zone for Lot Commercial Tract, Block 5, Los Altos, located at 99999 Bridge BLVD SW, zoned MX-M [Section 14-16-4-3(D)(39)(c)] **DENIAL**
16. VA-2021-00344 Project#
PR-2021-005991 Carolyn Ann Cox (Agent, Gerald and JoAnne Barela) requests a variance of 10 ft to the required 15 ft rear yard setback for Lot 16, Block 51, Princess Jeanne Park Addn, located at 10809 Constitution Ave NE, zoned R-1B [Section 14-16-5-1] **DENIAL**

17. VA-2021-00345 Project#
PR-2021-005992 Reece M and Noelle M Killebrew requests a permit-wall or fence- major to allow a courtyard wall 6 ft in height in the front yard greater than 10 ft from the front lot line for Lot 16, Block 7, Academy Estates Unit 2, located at 8805 Spain Rd NE, zoned R-1D [Section14-16-5-7(D)(g)] **CONTINUANCE**
18. VA-2021-00346 Project#
PR-2021-005995 Anchondo Beatriz E Gonzalez (Agent, Wendy Gonzales) requests a permit-wall or fence-major for Lot 42, Block 11, Skyview West Amended Replat, located at 320 Judith LA SW, zoned R-1B [Section 14-16-5-7(D)(g)] **APPROVAL**



ZONING HEARING EXAMINER'S AGENDA

TUESDAY, September 21, 2021 9:00 A.M.

Join Zoom Meeting

<https://cabq.zoom.us/j/7044490999>

Meeting ID: 704 449 0999

One tap mobile

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Robert Lucero, Esq., Zoning Hearing Examiner

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Suzie Sanchez, ZHE Administrative Assistant

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Robert Lucero, Esq., Zoning Hearing Examiner at suzannasanchez@cabq.gov

NOTICE TO PEOPLE WITH DISABILITIES: If you have a disability and you require special assistance to participate in this hearing, please contact Planning Information at (505) 924-3860.

INTERPRETER NEEDED:

- | | | |
|------------------|--------------------------------|---|
| 1. VA-2021-00289 | Project#
PR-2021-
005747 | Jose A Rodriguez Nunez requests a permit-wall or fence-major for Lot 7, Block 4, Country Squire, located at 1101 93rd St SW, zoned R-1B [Section 14-16-5-7-D] |
|------------------|--------------------------------|---|

- | | | | |
|----|---------------|----------------------------|---|
| 2. | VA-2021-00290 | Project#
PR-2021-005747 | Jose A Rodriguez Nunez requests a variance of 3 ft to the 3 ft required wall height on a corner/front yard for Lot 7, Block 4, Country Squire, located at 1101 93rd St SW, zoned R-1B [Section 14-16-5-7-D] |
| 3. | VA-2021-00300 | Project#
PR-2021-005794 | Irene Becerra-Lozano requests a permit-wall or fence-major for Lot 7, Block 7, La Mesa, located at 225 Chama St NE, zoned R-T [Section 14-16-5-7-D] |
| 4. | VA-2021-00301 | Project#
PR-2021-005802 | Modesta Esparza requests a permit-wall or fence-major for Lot A, Block 4, Winona Addn, located at 4112 Los Tomases Dr NW, zoned R-1B [Section 14-16-5-7-D] |
| 5. | VA-2021-00303 | Project#
PR-2021-005802 | Modesta Esparza requests a variance of 3 ft to the 3 ft maximum wall height for Lot A, Block 4, Winona Addn, located at 4112 Los Tomases Dr NW, zoned R-1B [Section 14-16-5-7-D] |

NEW BUSINESS:

- | | | | |
|-----|---------------|----------------------------|---|
| 6. | VA-2021-00316 | Project#
PR-2021-005834 | City of Albuquerque Family and Community Services (Agent, Consensus Planning) requests a conditional use to allow an overnight shelter for Lot A1A1A/Lovelace Hospital, Lovelace Hospital, located at 5400 Gibson BLVD SE, zoned MX-H [Section 14-16-4-2] |
| 7. | VA-2021-00317 | Project#
PR-2021-005834 | City of Albuquerque Family and Community Services (Agent, Consensus Planning) requests a conditional use to allow an overnight shelter for Lot 1, Swift Addn, located at 5006 Gibson BLVD SE, zoned MX-H [Section 14-16-4-2] |
| 8. | VA-2021-00054 | Project#
PR-2021-005169 | Brittany Love (Agent, Teresa King) requests a variance of 5 feet to the required 10 foot front yard setback for Lot 266-A, MRGCD Map 38, located at 2311 Hollywood Ave NW, zoned R-1A [Section 14-16-2-3(B)] |
| 9. | VA-2021-00055 | Project#
PR-2021-005169 | Brittany Love (Agent, Teresa King) requests a variance of 5 feet to the required 10 feet rear yard setback for Lot 266-A, MRGCD Map 38, located at 2311 Hollywood Ave NW, zoned R-1A [Section 14-16-2-3(B)] |
| 10. | VA-2021-00285 | Project#
PR-2021-005729 | Magic Kitchen, LLC requests a variance of 3 ft to the required 3 ft wall height in the front yard for Lot 32 SWLY portion of, Block 32, Virginia Place Addn, located at 5701 Gibson Blvd SE, zoned MX-L [Section 14-16-5-7-D] |
| 11. | VA-2021-00286 | Project#
PR-2021-005730 | Dionicio Armijo requests a variance of 3 ft to the 3 ft required wall height for a solid wall on a corner side yard for Lot 1, Block 7, Boyds Addn, located at 6200 Prairie Ave NE, zoned R-1C [Section 14-16-5-7-D] |

12.	VA-2021-00287	Project# PR-2021-005730	Dionicio Armijo requests a permit-wall or fence-major for Lot 1, Block 7, Boyds Addn, located at 6200 Prairie Ave NE, zoned R-1C [Section 14-16-5-7-D]
13.	VA-2021-00293	Project# PR-2021-005767	Array Technologies, Inc. (Agent, Joel Loes) requests a variance for a 6 foot fence for Lot B1B1A1, ABQ Industrial Park Site, located at 3901 Midway PL NE, zoned NR-BP [Section 14-16-5-7-D]
14.	VA-2021-00294	Project# PR-2021-005774	Kenneth Reaves requests a variance of 10 feet to the required 20 feet front yard setback for Lot 11, Block 5, Wells Sandia Manor, located at 307 Camino De La Sierra NE, zoned R-1D [Section 14-16-5-1]
15.	VA-2021-00295	Project# PR-2021-005775	Integrity Investments, LLC (Agent, Jesus Sandoval) requests a permit-wall or fence-major for Lot 21, Block 11, La Mesa Addn 2, located at 322 Alcazar ST SE, zoned MX-M [Section 14-16-5-7-D]
16.	VA-2021-00296	Project# PR-2021-005775	Integrity Investments, LLC (Agent, Jesus Sandoval) requests a variance for a 6 foot wall/fence for Lot 21, Block 11, La Mesa Addn 2, located at 322 Alcazar ST SE, zoned MX-M [Section 14-16-5-7-D]
17.	VA-2021-00297	Project# PR-2021-005775	Integrity Investments, LLC (Agent, Jesus Sandoval) requests a permit-wall or fence-major for Lot 22, Block 11, La Mesa Addn 2, located at 326 Alcazar ST SE, zoned MX-M [Section 14-16-5-7-D]
18.	VA-2021-00298	Project# PR-2021-005775	Integrity Investments, LLC (Agent, Jesus Sandoval) requests a variance for a 6 foot wall/fence for Lot 22, Block 11, La Mesa Addn 2, located at 326 Alcazar ST SE, zoned MX-M [Section 14-16-5-7-D]
19.	VA-2021-00299	Project# PR-2021-005788	Carmella Properties LLC (Agent, Kevin Martinez) requests a conditional use to allow outdoor vehicle storage for Lot 216, Town of Atrisco Grant Airport Unit, located at 901 64 th ST NW, zoned NR-C [Section 14-16-4-2]
20.	VA-2021-00304	Project# PR-2021-005804	Donna and Hugh Kelley request a permit-wall or fence-major for Lot 769, Block 39, Atrisco Village Unit 3A of Hoffman City, located at 10209 De Trevis ST SW, zoned R-1C [Section 14-16-5-7-D]
21.	VA-2021-00305	Project# PR-2021-005805	Dr. Richard and Karen Hammer (Agent, American Legion Post 99, Dean Johnson) requests a conditional use to allow a club in an MX-T zone for Lots 1-9 and 28-36, Block 26, Valley View Addn, located at 4500 Silver Ave SE, zoned MX-T [Section 14-16-4-2]
22.	VA-2021-00307	Project# PR-2021-005808	Alan and Dorothea Spafford (Agent, Tripp Steele) requests a conditional use to allow auto sales for Lot 7A, Block 5, Enchanted Mesa, located at 11715 Menaul Blvd NE, zoned MX-L [Section 14-16-4-2]

23.	VA-2021-00308	Project# PR-2021-005818	Daniel H & Larryssa Monaghan (Agent, Oscar Mendoza) request a variance of 3ft 6in to the 15 feet required rear yard setback for Lot 49, Block 3, Prairie Ridge Unit 6, located at 4337 Rabbit Brush Ave NW, zoned R-1B [Section 14-16-5-1]
24.	VA-2021-00309	Project# PR-2021-005822	Edward Rossol requests a permit to allow a carport for Lot 19, Block 22, Monterey Hills Addn No 2, located at 2925 Santa Cruz Ave SE, zoned R-1B [Section 14-16-5-5(F)(2)(a)]
25.	VA-2021-00311	Project# PR-2021-005827	Eric Stebbens & Maggie Hart (Agent, Michelle Negrette) request a permit-wall or fence-major for Lot 1, Block 12, Loma Vista Addn, located at 1000 Richmond Dr NE, zoned R-1B [Section 14-16-5-7-D]
26.	VA-2021-00312	Project# PR-2021-005827	Eric Stebbens & Maggie Hart (Agent, Michelle Negrette) request a variance to allow a 5ft solid wall for Lot 1, Block 12, Loma Vista Addn, located at 1000 Richmond Dr NE, zoned R-1B [Section 14-16-5-7-D]
27.	VA-2021-00313	Project# PR-2021-005828	Patricia and James Santistevan (Agent, NM Zoning) requests a variance of 3 ft to the 3 ft maximum wall height for Lot 12, Block 12, Bel Air, located at 4907 Menaul Blvd NE, zoned MX-M [Section 14-16-5-7-D]
28.	VA-2021-00320	Project# PR-2021-005828	Patricia and James Santistevan (Agent, NM Zoning) requests a variance of 3ft to the 3ft maximum wall height for Lot 11, Block 12, Bel Air, located at 4907 Menaul BLVD NE, zoned MX-M [Section 14-16-5-7-D]
29.	VA-2021-00321	Project# PR-2021-005828	Patricia and James Santistevan (Agent, NM Zoning) requests a variance of 3ft to the 3ft maximum wall height for Lot 8-10, Block 12, Bel Air, located at 4913 Menaul BLVD NE, zoned MX-M [Section 14-16- 5-7-D]
30.	VA-2021-00314	Project# PR-2021-005829	Vincent Sanchez requests a permit to allow a carport for Lot 7, Block 3, Rackheath Park Addn No 1, located at 9421 Arvilla Ave NE, zoned R-1C [Section 14-16-5-5(F)(2)(a)]
31.	VA-2021-00315	Project# PR-2021-005829	Vincent Sanchez requests a permit to allow a carport for Lot 7, Block 3, Rackheath Park Addn No 1, located at 9421 Arvilla Ave NE, zoned R-1C [Section 14-16-5-5(F)(2)(a)]
32.	VA-2021-00318	Project# PR-2021-005835	Gloria G. Gonzales & Amanda L. Krumbach request a permit for a carport in the front yard setback for Lot 12, Block 7, Swearingen & Marberry, located at 1409 Cagua DR NE, zoned R-1C [Section 14-16-5-5(F)(2)(a)]
33.	VA-2021-00319	Project# PR-2021-005836	India Vigil (Agent, Robert Curtis) requests a permit-wall or fence-major for Lot 9, Block 10, Loma Vista Addn, located at 1017 Lafayette Dr NE, zoned R-1B [Section 14-16-5-7-D]

34.	VA-2021-00322	Project# PR-2021- 005841	Josephine & Evelyn Bustos request a permit-wall or fence-major for Lot 21, Block D, Lavaland Addn, located at 340 57th St NW, zoned R-1B [Section 14-16-5-7-D]
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ZONING HEARING EXAMINER'S AGENDA

TUESDAY, September 21, 2021 9:00 A.M.

Join Zoom Meeting

<https://cabq.zoom.us/j/7044490999>

Meeting ID: 704 449 0999

One tap mobile

+1-669-900-6833,,7044490999# US (San Jose)

+1-253-215-8782,,7044490999# US (Tacoma)

Dial by your location

+1 669 900 6833 US (San Jose)

+1 253 215 8782 US (Tacoma)

+1 346 248 7799 US (Houston)

+1 646 558 8656 US (New York)

+1 301 715 8592 US (Germantown)

+1 312 626 6799 US (Chicago)

Meeting ID: 704 449 0999

Find your local number: <https://cabq.zoom.us/j/7044490999>

Robert Lucero, Esq., Zoning Hearing Examiner

Lorena Patten-Quintana, ZHE Planner

Suzie Sanchez, ZHE Administrative Assistant

For Inquiries Regarding This Agenda, Please Call The Planning Dept. at (505) 924-3894.

PLEASE ADDRESS ALL CORRESPONDENCE TO:

Robert Lucero, Esq., Zoning Hearing Examiner at suzannasanchez@cabq.gov

NOTICE TO PEOPLE WITH DISABILITIES: If you have a disability and you require special assistance to participate in this hearing, please contact Planning Information at (505) 924-3860.

INTERPRETER NEEDED:

- | | | |
|------------------|--------------------------------|---|
| 1. VA-2021-00289 | Project#
PR-2021-
005747 | Jose A Rodriguez Nunez requests a permit-wall or fence-major for Lot 7, Block 4, Country Squire, located at 1101 93rd St SW, zoned R-1B [Section 14-16-5-7-D] APPROVAL |
|------------------|--------------------------------|---|

- | | | | |
|----|---------------|----------------------------|---|
| 2. | VA-2021-00290 | Project#
PR-2021-005747 | Jose A Rodriguez Nunez requests a variance of 3 ft to the 3 ft required wall height on a corner/front yard for Lot 7, Block 4, Country Squire, located at 1101 93rd St SW, zoned R-1B [Section 14-16-5-7-D] APPROVAL |
| 3. | VA-2021-00300 | Project#
PR-2021-005794 | Irene Becerra-Lozano requests a permit-wall or fence-major for Lot 7, Block 7, La Mesa, located at 225 Chama St NE, zoned R-T [Section 14-16-5-7-D] APPROVAL |
| 4. | VA-2021-00301 | Project#
PR-2021-005802 | Modesta Esparza requests a permit-wall or fence-major for Lot A, Block 4, Winona Addn, located at 4112 Los Tomases Dr NW, zoned R-1B [Section 14-16-5-7-D] APPROVAL WITH CONDITIONS |
| 5. | VA-2021-00303 | Project#
PR-2021-005802 | Modesta Esparza requests a variance of 3 ft to the 3 ft maximum wall height for Lot A, Block 4, Winona Addn, located at 4112 Los Tomases Dr NW, zoned R-1B [Section 14-16-5-7-D] DENIED |

NEW BUSINESS:

- | | | | |
|-----|---------------|----------------------------|--|
| 6. | VA-2021-00316 | Project#
PR-2021-005834 | City of Albuquerque Family and Community Services (Agent, Consensus Planning) requests a conditional use to allow an overnight shelter for Lot A1A1A/Lovelace Hospital, Lovelace Hospital, located at 5400 Gibson BLVD SE, zoned MX-H [Section 14-16-4-2] CONTINUED |
| 7. | VA-2021-00317 | Project#
PR-2021-005834 | City of Albuquerque Family and Community Services (Agent, Consensus Planning) requests a conditional use to allow an overnight shelter for Lot 1, Swift Addn, located at 5006 Gibson BLVD SE, zoned MX-H [Section 14-16-4-2] CONTINUED |
| 8. | VA-2021-00054 | Project#
PR-2021-005169 | Brittany Love (Agent, Teresa King) requests a variance of 5 feet to the required 10 foot front yard setback for Lot 266-A, MRGCD Map 38, located at 2311 Hollywood Ave NW, zoned R-1A [Section 14-16-2-3(B)] DEFERRAL |
| 9. | VA-2021-00055 | Project#
PR-2021-005169 | Brittany Love (Agent, Teresa King) requests a variance of 5 feet to the required 10 foot rear yard setback for Lot 266-A, MRGCD Map 38, located at 2311 Hollywood Ave NW, zoned R-1A [Section 14-16-2-3(B)] |
| 10. | VA-2021-00285 | Project#
PR-2021-005729 | Magic Kitchen, LLC requests a variance of 3 ft to the required 3 ft wall height in the front yard for Lot 32 SWLY portion of, Block 32, Virginia Place Addn, located at 5701 Gibson Blvd SE, zoned MX-L [Section 14-16-5-7-D] APPROVAL |
| 11. | VA-2021-00286 | Project#
PR-2021-005730 | Dionicio Armijo requests a variance of 3 ft to the 3 ft required wall height for a solid wall on a corner side yard for Lot 1, Block 7, Boyds Addn, located at 6200 Prairie Ave NE, zoned R-1C [Section 14-16-5-7-D] APPROVAL |

12.	VA-2021-00287	Project# PR-2021-005730	Dionicio Armijo requests a permit-wall or fence-major for Lot 1, Block 7, Boyds Addn, located at 6200 Prairie Ave NE, zoned R-1C [Section 14-16-5-7-D] APPROVAL
13.	VA-2021-00293	Project# PR-2021-005767	Array Technologies, Inc. (Agent, Joel Loes) requests a variance for a 6 foot fence for Lot B1B1A1, ABQ Industrial Park Site, located at 3901 Midway PL NE, zoned NR-BP [Section 14-16-5-7-D] APPROVAL
14.	VA-2021-00294	Project# PR-2021-005774	Kenneth Reaves requests a variance of 10 feet to the required 20 feet front yard setback for Lot 11, Block 5, Wells Sandia Manor, located at 307 Camino De La Sierra NE, zoned R-1D [Section 14-16-5-1] APPROVAL
15.	VA-2021-00295	Project# PR-2021-005775	Integrity Investments, LLC (Agent, Jesus Sandoval) requests a permit-wall or fence-major for Lot 21, Block 11, La Mesa Addn 2, located at 322 Alcazar ST SE, zoned MX-M [Section 14-16-5-7-D]
16.	VA-2021-00296	Project# PR-2021-005775	Integrity Investments, LLC (Agent, Jesus Sandoval) requests a variance for a 6 foot wall/fence for Lot 21, Block 11, La Mesa Addn 2, located at 322 Alcazar ST SE, zoned MX-M [Section 14-16-5-7-D]
17.	VA-2021-00297	Project# PR-2021-005775	Integrity Investments, LLC (Agent, Jesus Sandoval) requests a permit-wall or fence-major for Lot 22, Block 11, La Mesa Addn 2, located at 326 Alcazar ST SE, zoned MX-M [Section 14-16-5-7-D]
18.	VA-2021-00298	Project# PR-2021-005775	Integrity Investments, LLC (Agent, Jesus Sandoval) requests a variance for a 6 foot wall/fence for Lot 22, Block 11, La Mesa Addn 2, located at 326 Alcazar ST SE, zoned MX-M [Section 14-16-5-7-D]
19.	VA-2021-00299	Project# PR-2021-005788	Carmella Properties LLC (Agent, Kevin Martinez) requests a conditional use to allow outdoor vehicle storage for Lot 216, Town of Atrisco Grant Airport Unit, located at 901 64 th ST NW, zoned NR-C [Section 14-16-4-2] APPROVAL
20.	VA-2021-00304	Project# PR-2021-005804	Donna and Hugh Kelley request a permit-wall or fence-major for Lot 769, Block 39, Atrisco Village Unit 3A of Hoffman City, located at 10209 De Trevis ST SW, zoned R-1C [Section 14-16-5-7-D] APPROVAL
21.	VA-2021-00305	Project# PR-2021-005805	Dr. Richard and Karen Hammer (Agent, American Legion Post 99, Dean Johnson) requests a conditional use to allow a club in an MX-T zone for Lots 1-9 and 28-36, Block 26, Valley View Addn, located at 4500 Silver Ave SE, zoned MX-T [Section 14-16-4-2] APPROVAL
22.	VA-2021-00307	Project# PR-2021-005808	Alan and Dorothea Spafford (Agent, Tripp Steele) requests a conditional use to allow auto sales for Lot 7A, Block 5, Enchanted Mesa, located at 11715 Menaul Blvd NE, zoned MX-L [Section 14-16-4-2] APPROVAL

23.	VA-2021-00308	Project# PR-2021-005818	Daniel H & Larryssa Monaghan (Agent, Oscar Mendoza) request a variance of 3ft 6in to the 15 feet required rear yard setback for Lot 49, Block 3, Prairie Ridge Unit 6, located at 4337 Rabbit Brush Ave NW, zoned R-1B [Section 14-16-5-1] APPROVAL
24.	VA-2021-00309	Project# PR-2021-005822	Edward Rossol requests a permit to allow a carport for Lot 19, Block 22, Monterey Hills Addn No 2, located at 2925 Santa Cruz Ave SE, zoned R-1B [Section 14-16-5-5(F)(2)(a)] APPROVAL
25.	VA-2021-00311	Project# PR-2021-005827	Eric Stebbens & Maggie Hart (Agent, Michelle Negrette) request a permit-wall or fence-major for Lot 1, Block 12, Loma Vista Addn, located at 1000 Richmond Dr NE, zoned R-1B [Section 14-16-5-7-D] APPROVAL
26.	VA-2021-00312	Project# PR-2021-005827	Eric Stebbens & Maggie Hart (Agent, Michelle Negrette) request a variance to allow a 5ft solid wall for Lot 1, Block 12, Loma Vista Addn, located at 1000 Richmond Dr NE, zoned R-1B [Section 14-16-5-7-D] APPROVAL
27.	VA-2021-00313	Project# PR-2021-005828	Patricia and James Santistevan (Agent, NM Zoning) requests a variance of 3 ft to the 3 ft maximum wall height for Lot 12, Block 12, Bel Air, located at 4907 Menaul Blvd NE, zoned MX-M [Section 14-16-5-7-D] APPROVAL
28.	VA-2021-00320	Project# PR-2021-005828	Patricia and James Santistevan (Agent, NM Zoning) requests a variance of 3ft to the 3ft maximum wall height for Lot 11, Block 12, Bel Air, located at 4907 Menaul BLVD NE, zoned MX-M [Section 14-16-5-7-D] APPROVAL
29.	VA-2021-00321	Project# PR-2021-005828	Patricia and James Santistevan (Agent, NM Zoning) requests a variance of 3ft to the 3ft maximum wall height for Lot 8-10, Block 12, Bel Air, located at 4913 Menaul BLVD NE, zoned MX-M [Section 14-16-5-7-D] APPROVAL
30.	VA-2021-00314	Project# PR-2021-005829	Vincent Sanchez requests a permit to allow a carport for Lot 7, Block 3, Rackheath Park Addn No 1, located at 9421 Arvilla Ave NE, zoned R-1C [Section 14-16-5-5(F)(2)(a)] APPROVAL
31.	VA-2021-00315	Project# PR-2021-005829	Vincent Sanchez requests a permit to allow a carport for Lot 7, Block 3, Rackheath Park Addn No 1, located at 9421 Arvilla Ave NE, zoned R-1C [Section 14-16-5-5(F)(2)(a)] APPROVAL
32.	VA-2021-00318	Project# PR-2021-005835	Gloria G. Gonzales & Amanda L. Krumbach request a permit for a carport in the front yard setback for Lot 12, Block 7, Swearingen & Marberry, located at 1409 Cagua DR NE, zoned R-1C [Section 14-16-5-5(F)(2)(a)] APPROVAL
33.	VA-2021-00319	Project# PR-2021-005836	India Vigil (Agent, Robert Curtis) requests a permit-wall or fence-major for Lot 9, Block 10, Loma Vista Addn, located at 1017 Lafayette Dr NE, zoned R-1B [Section 14-16-5-7-D] APPROVAL WITH CONDITION

34.	VA-2021-00322	Project# PR-2021- 005841	Josephine & Evelyn Bustos request a permit-wall or fence-major for Lot 21, Block D, Lavaland Addn, located at 340 57th St NW, zoned R-1B [Section 14-16-5-7-D] APPROVAL
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