HOMELESS INITIATIVE ADVISORY COMMITTEE (HIAC)

3 year term

- Consists of not more than 16 members representing various focus areas or agencies (consumer, Buncombe County, supportive/permanent housing, mental health/substance abuse, legal, educational/university, etc.)
    - Criminal Justice System
    - Behavioral Health
    - University faculty or staff
    - School District McKinney-Vento liaison
    - State or Local Workforce Development
    - Business Assoc.
    - Foundation/philanthropy
    - Hospital System
- The Asheville-Buncombe Homeless Advisory Committee, a joint committee of Asheville City Council and the Buncombe County Commission, exists to provide oversight for the implementation of the Five Year Plan by sharing, applying, and tracking groundbreaking strategies that make a permanent and measurable difference in homelessness in Asheville and Buncombe County.

Homeless Initiative Advisory Committee - (3 year term)

VACANT
Was Parker Smith
Term to expire 11-01-22

FName	LName	Email	Term Exp	APPOINTED	TERMS	RESIDENT	RACE	HOMEOWNER	SEX	AREA	OCCUPATION
CITY COUNCIL APPTMENTS											
Sara	**Coplai**	scoplai@wncbridge.org	11-01-23	12-08-20	1	City	W	H	F	Central	Program Officer WNC Bridge Foundation
Jason	**Desai**	jason.desai@hcahealthcare.com	11-01-23	12-08-20	1	City	Other	R	M	Central	VP Operations Mission Hospital
David L.	**Nash**	dnash@haca.	11-01-22	11-12-19 01-08-19	1 Unexp.	City	W	H	M	West	CEO Housing Authority
Elvia	**Diaz**	mailvoxx@gmail.com	11-01-23 11-01-20	12-08-20 06-19-18	2 1	City			F	Central	Activist
(Homeless or formerly homeless seat)											
Dale	**Davidson, PhD**	dalerdavidson@gmail.com	11-01-21	11-13-18	1 Unexp.	City	W		M	Central	Retired Homeless Outreach
Parker	**Smith**	parker.smith@pisgahlegal.org	11-01-22	05-14-19	unexp.	City	W	R	F	North	Attorney Pisgah Legal Service:
(resigned 9/2021)											
Randy	**Stoudt**	angelTrinityAvl@gmail.com	11-01-22	11/12-19 3/14/2017	1 Unexp.	City	W	R	M		

City Council Liaison - Brian Haynes

FName	LName	Email	Term Exp	APPOINTED	TERMS	RESIDENT	RACE	HOMEOWNER	SEX	AREA	OCCUPATION
Joell	**Steininger**	joell.steininger@va.gov	11-01-21	07-24-18	Unexp.	City	W	H	F	East	Homeless Prog. Supe VA Med. Center
(VA Admin. rep)											
BUNCOMBE COUNTY APPTS											
Raechael	**Nygaard**	raechael.nygaard@buncombecounty.org	11-20-21	11-20-18	3	County	W		F		Service Foundation Exec. Director
Elizabeth	**Kelly**	elizabeth.kelly@unitedwayabc.org	05-01-22	05-21-19	3	County	W		F		United Way Manager
April	**Burgess-Johnsc**	abjohnson@helpmateonline.org	11-20-21		3	County	W		F		Helpmate Exec. Director
Dan	**Garrett**	dggarrett1@gmail.com	05-21-22	05-21-19	3	County	W		M		Pharmacist
Amy	**Hobson**		05-21-22	05-21-19	1	County					
Meredith	**Switzer**		06-20-22	06-18-19	1	County					
Tim	**McElyea**		05-21-22	05-21-19	1	County					
Eileen	**McMinn**	eileenmcminn568@gmail.com	05-01-22	05-21-19	1	County					

City Council Liaison - Brian Haynes

HOMELESS INITIATIVE ADVISORY COMMITTEE

Name	Male	Female	Black	White	Other	North	East	South	West	Central	City	Homeowner/ Renter
CITY APPOINTMENTS ONLY (8 County appointments)												
Nash	X			X					X		X	H
Davidson	X			X						X	X	?
Stoudt	X			X							X	R
Steininger		X		X			X				X	H
Diaz		X								X	X	N/A
VACANT												
Desai	X				X					X	X	R
Coplai		X		X						X	X	H

RESOURCE LIST

HOMELESS INITIATIVE ADVISORY COMMITTEE

APPLICANT FName	APPLICANT LName	Email Address	DATE SUBMITTED APPLICATION	RESIDENT	RACE	SEX	AREA	HOMEOWNER	OCCUPATION	INTEREST IN OTHER BOARDS
Sarah	Rick	sarahrick08@gmail.cc	11-22-20	City	W	F	Central	N	Mgr Clinical Risk & Accreditation-RN AdventHealth Hendersonville	
David	Bartholomew	david@pisgahlegal.or	08-11-21	City	W	M	Central	N	Co-Director Homelesness Prevention Pisgah Legal Services	
Angelique	Brickner	angeliquebrickner@gmail.com	09-20-21	City	W	F	South	Y	Artist Self	
Emily	Kirchmeyer	kirchmeyers@gmail.c	09-23-21	City	W	F	Central	N	District Manager Pegasus Residential	
Louisa	Shipnuck Jones	Louisajones004@gma	09-28-21	**No/County**	W	F	East	Y	N/R	N/R=no response When advised City residents get preference, Louisa said she would be happy as strategic planning consultant or however appropriate.

City of Asheville

BOARDS & COMMISSIONS

Application Form

Applicants are strongly urged to attend several meetings of a board prior to applying

Name of board or commission: Homeless Initiative Advisory Committee

Your name: Sarah Rick Home Phone #: 828-432-7310

Street address: 128 Florence Street apt. 106 City: Asheville Zip Code: 28801

Mailing address (if different): _____

Employer: AdventHealth Hendersonville

Your position: Manager Clinical Risk and Accreditation- RN Office Phone #: 828-681-2431

Resident of City Asheville County Buncombe Race W * Sex M___F_✔_* Age 34 *

Are you a Homeowner or a Renter? * Renter

Residence location (check one): Central ✔ North _____ South _____ East _____ West _____

Are you aware of any potential conflicts of interest that may arise during your service on this board (i.e., property interest, business interest, etc.)? If so, please explain: NO _____. Potential conflicts of interest do not preclude appointments.

Please indicate the area(s) of expertise that you can bring to the above board(s), and then in detail list education, experience, reasons for your interest, and other factors that support your interest in serving **Applicants are encouraged to provide a cover letter and/or a brief resume. Please use additional sheets if necessary.**

I have worked in healthcare my entire life, as I grew in the nursing profession, I came to understand that healthcare, society in general, could do a better job at caring for our neighbors. Working as a nurse at Mission Hospital, I became acquainted with the homeless population and began to understand the struggles that come from this living situation. I became an advocate for each person I cared for, fighting to ensure that each patient was viewed as a person, not a diagnosis. This passion has brought me into the world of clinical risk management, patient safety and accreditation. I research best practices, laws, regulations and collaborate with leaders in my organization to ensure we are providing the best care possible to each person who walks through our doors. I am skilled in completing proactive risk assessments, analyzing data, conducting root cause analysis and effectively enacting change to ensure optimal patient safety. Please refer to my resume for work/education.

Return to:

Sarah Terwilliger, Deputy City Clerk
Post Office Box 7148
Asheville, N.C. 28802-7148

E-Mail: sterwilliger@ashevillenc.gov
Telephone: 259-5839
Fax #: 259-5499

Signature: Sarah Rick

Date: 11/22/2020

E-Mail: sarahrick08@gmail.com

Fax #: _____

* This information is requested for the sole purpose of assuring that a cross section of the community is appointed.

SARAH RICK
128 Florence Street, apt 106
Asheville, NC 28801
Home: (828) 432-7310 sarahrick08@gmail.com

OBJECTIVE

To obtain a position on the Homeless Initiative Advisory Committee

EDUCATION

2016-2019 **MSN Nursing Administration (completed January 2019)**
Aspen University, Denver, CO

2010-2012 **BS Degree in Nursing (completed May 2012)**
Appalachian State University, Boone, N.C

2006-2008 **BS Degree in Recreational Therapy (completed May 2008)**
Western Carolina University, Cullowhee, N.C

2005-2006 **A.A Degree (completed August 2006)**
Western Piedmont Community College, Morganton, N.C

PROFESSIONAL INVOLVEMENT

2012-present Member of American Nurse Association
2013-present Member of Sigma Theta Tau Honor Society
2020-present Member of The American Society for Health care Risk Management

WORK EXPERIENCE

2019-present **Manager of Clinical Risk/Accreditation**
AdventHealth Hendersonville, NC

- Manage patient safety activities at AdventHealth Hendersonville
- Collaboration for hospital leaders to ensure patient safety
- Collaborating with hospital leadership to ensure compliance in conditions of participation for CMS
- Responsible for proactive risk assessments
- Responsible for analysis of serious safety events
- Responsible for policy management

2018-2019 **Nurse Supervisor**
Mission Hospital, Asheville, NC

- Responsible for supervising nursing activities

2016-2018 **Registered Nurse**
Mission Hospital, Asheville, NC

- Responsible for assessing, planning, implementing, evaluating nursing care
- Delegating and supervising nursing activities

2014-2016 **Clinical Instructor for ASU Nursing Program**
Appalachian State University, Boone, N.C

- Responsible for teaching student nurses how to assess, plan, implement and evaluate nursing care in the clinical setting.

2013-2016 **Registered Nurse – M.S Shook Student Health Services**
Appalachian State University, Boone, N.C

- Responsible for triaging university students

2012-2016 **Registered Nurse**
Watauga Medical Center, Boone, N.C

- Responsible for assessing, planning, implementing, evaluating nursing care
- Delegating and supervising nursing activities
- Team Leader (relief)- responsible for unit bed flow, appropriate staff assignments and assisting staff in providing excellent patient care

City of Asheville

BOARDS & COMMISSIONS

Application Form

Applicants are strongly urged to attend several meetings of a board prior to applying

Name of board or commission: HIAC

Your name: David Bartholomew Home Phone #: 9196075683

Street address: 21 Biltmore ave, Apt 302 City: Asheville Zip Code: 28801

Mailing address (if different): _____

Employer: Pisgah Legal Services

Your position: Co-Director Homelessness Prevention Office Phone #: 8282103421

Resident of City yes County Buncombe Race White * Gender Identity: (non-trans) man *

Are you a Homeowner or a Renter? * Renter Age: 42

Residence location (check one): Central ✔ North _____ South _____ East _____ West _____

Are you aware of any potential conflicts of interest that may arise during your service on this board (i.e., property interest, business interest, etc.)? If so, please explain: _____. Potential conflicts of interest do not preclude appointments.

Please indicate the area(s) of expertise that you can bring to the above board(s), and then in detail list education, experience, reasons for your interest, and other factors that support your interest in serving **Applicants are encouraged to provide a cover letter and/or a brief resume. Please use additional sheets if necessary.**

I am the Co-Director of the Homelessness Prevention Program at Pisgah Legal Services. I was born in WNC and have been working with Community Economic Development and Housing teams at PLS since 2018. I practiced law in Georgia for 4 years before moving back home. I am also on the board of directors for the ABCLT. I can provide my resume if requested.

Return to:

City Clerk's Office
PO Box 7148
Asheville, NC 28802-7148

Email: boards@ashevillenc.gov
Telephone: 259-5839
Fax #: 259-5499

Signature: eSigned via BeamSignDocs.com David Richard Bartholomew Key: df76721a9f69f6f432aa1f3f3f0fc5678

Date: Aug. 11, 2021

E-Mail: david@pisgahlegal.org

Fax #: _____

* This information is requested for the sole purpose of assuring that a cross section of the community is appointed.

City of Asheville

BOARDS & COMMISSIONS

Application Form

Applicants are strongly urged to attend several meetings of a board prior to applying

Name of board or commission: Homeless Initiative Advisory

Your name: Angelique Brickner Home Phone #: 864-283-4334

Street address: 41 Pickwick Road City: Asheville Zip Code: 28803

Mailing address (if different): _____

Employer: Self

Your position: Artist Office Phone #: _____

Resident of City Asheville County Buncombe Race White * Gender Identity: (non-trans) woman *

Are you a Homeowner or a Renter? * Homeowner Age: 56

Residence location (check one): Central _____ North _____ South ✔ East _____ West _____

Are you aware of any potential conflicts of interest that may arise during your service on this board (i.e., property interest, business interest, etc.)? If so, please explain: None. Potential conflicts of interest do not preclude appointments.

Please indicate the area(s) of expertise that you can bring to the above board(s), and then in detail list education, experience, reasons for your interest, and other factors that support your interest in serving **Applicants are encouraged to provide a cover letter and/or a brief resume. Please use additional sheets if necessary.**

I have been deeply concerned over the homeless and housing crisis my entire adult life. As a college student in Colorado, I volunteered at the homeless shelter and did portraits of the people I worked with. As a high school English teacher in Denver, I worked with many of my at risk students that were experiencing homelessness. My husband works with the homeless as a drug treatment provider, and we both share in the desire to mend the holes in our social network that allow people to slip into the addiction and homelessness cycle. My husband, daughter and I hosted homeless families at our synagogue in Greenville, SC monthly for an interfaith shelter for families with children, and now that we have settled in to our lives in Asheville, I am looking for an opportunity to give back and aid in improving the lives of our less fortunate here in our new city.

Return to:

City Clerk's Office
PO Box 7148
Asheville, NC 28802-7148

Email: boards@ashevillenc.gov
Telephone: 259-5839
Fax #: 259-5499

Signature: eSigned via SignNowDocs.com Angelique Brickner Key: d27672a9b9bf447aa1892f0f5978

Date: 09/20/2021

E-Mail: angeliquebrickner@gmail.com

Fax #: _____

* This information is requested for the sole purpose of assuring that a cross section of the community is appointed.

City of Asheville

BOARDS & COMMISSIONS

Application Form

Applicants are strongly urged to attend several meetings of a board prior to applying

Name of board or commission: HOMELESS INITIATIVE ADVISORY COMMITTEE

Your name: Emily Kirchmeyer Home Phone #: 8289899747

Street address: 12 Greenwood Fields Drive City: Asheville Zip Code: 28804

Mailing address (if different): Same

Employer: Pegasus Residential

Your position: District manager Office Phone #: 8289899747

Resident of City Asheville County Buncombe Race White * Gender Identity: (non-trans) woman *

Are you a Homeowner or a Renter? * Renter Age: 37

Residence location (check one): Central ✔ North _____ South _____ East _____ West _____

Are you aware of any potential conflicts of interest that may arise during your service on this board (i.e., property interest, business interest, etc.)? If so, please explain: No. Potential conflicts of interest do not preclude appointments.

Please indicate the area(s) of expertise that you can bring to the above board(s), and then in detail list education, experience, reasons for your interest, and other factors that support your interest in serving **Applicants are encouraged to provide a cover letter and/or a brief resume. Please use additional sheets if necessary.**

I work in an industry that provides housing opportunities for residents of Buncombe County, including affordable housing options. I have seen first hand how difficult it is to rent a home in our area. I have a passion for helping people and helping them find a place to call home. I believe that this passion would serve this committee extremely well as I am sensitive to the homelessness facing our community. I want to serve our community and help find ways to help the homeless population. I have experience with different housing efforts, and have been in the housing industry for over 15 years. I worked in military housing, facilitating homes for service members and their families, and now I work in multi-family providing affordable housing needs in Buncombe County. I have experience in fundraising, marketing, and am a go getter. I would love to serve my community and help end homelessness in Asheville.

Return to:

City Clerk's Office
PO Box 7148
Asheville, NC 28802-7148

Email: boards@ashevillenc.gov
Telephone: 259-5839
Fax #: 259-5499

Signature: eSigned via SignatureDesk.com Emily Kirchmeyer Key: dd7d721a9f6e66f432aa1f0fd0f0c5478

Date: 9/23/2021

E-Mail: kirchmeyers@gmail.com

Fax #: _____

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City of Asheville

BOARDS & COMMISSIONS

Application Form

Applicants are strongly urged to attend several meetings of a board prior to applying

Name of board or commission: Homelessness

Your name: Louisa Shipnuck Jones Home Phone #: 323 839 9088

Street address: 180 Independence Blvd City: Asheville Zip Code: 28805

Mailing address (if different): _____

Employer: _____

Your position: _____ Office Phone #: _____

Resident of City _____ County X _____ Race Caucasian * Gender Identity: (non-trans) woman *

Are you a Homeowner or a Renter? * Homeowner Age:

Residence location (check one): Central _____ North _____ South _____ East ✔ West _____

Are you aware of any potential conflicts of interest that may arise during your service on this board (i.e., property interest, business interest, etc.)? If so, please explain: None. Potential conflicts of interest do not preclude appointments.

Please indicate the area(s) of expertise that you can bring to the above board(s), and then in detail list education, experience, reasons for your interest, and other factors that support your interest in serving **Applicants are encouraged to provide a cover letter and/or a brief resume. Please use additional sheets if necessary.**

To Whom it May Concern:

I've spent 20 years in corporate America doing strategic planning and data-driven program development. I've oversee teams, budgets and long term rollout plans. I've also sat on multiple nonprofit Boards like StepUpWomen'sNetwork, The Library Foundation of LA, and Madre that focus on changing poverty, improving educational access and addressing food insecurity. By applying for this commission, I'm hoping to bring both backgrounds together for today's number one urban dilemma.

I most recently come from LA where the problem of homelessness was overwhelming and the city was spread too thin to impact the problem after it grew exponentially. I would very much like to learn best practices nationally and plan forward so Asheville may forestall this trend. I believe the spirit and investment of those in AVL can make Asheville a beacon of solution-building.

Thank you for considering my application,
Louisa

Louisa Shipnuck Jones
323-839-9088

Return to:

City Clerk's Office
PO Box 7148
Asheville, NC 28802-7148

Email: boards@ashevillenc.gov
Telephone: 259-5839
Fax #: 259-5499

Signature: [signature]

Date: 09/27/21

E-Mail: Louisajones004@gmail.com

Fax #: _____

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THECITYOF ASHEVILLE

Jerri Goldberg <jgoldberg@ashevillenc.gov>

Application to the Homeless Initiative Advisory Committee

Louisa Jones <louisajones004@gmail.com> Tue, Sep 28, 2021 at 10:33 AM
To: Asheville Boards & Commissions <Boards@ashevillenc.gov>

Thanks, Jerri.

I'm happy to act as a strategic planning consultant if there is a role to fill—I can offer skills and time wherever appropriate.

I do have an Asheville address (right past the veterans center) but understand the goals as I do cross a municipal differentiation.

Louisa Shipnuck
SVP, Studio and Franchise Management
FX Networks
louisa.shipnuck@fxnetworks.com
310-369-0965

> On Sep 28, 2021, at 9:33 AM, Asheville Boards & Commissions <Boards@ashevillenc.gov> wrote:
>
> [Quoted text hidden]