

North Carolina Balance of State Continuum of Care

bos@ncceh.org

919.755.4393

www.ncceh.org/BoS

NC Balance of State CoC Steering Committee Consent Agenda and Updates

March 2018

Contents

SECTION I. NC BOS COC STEERING COMMITTEE CONSENT AGENDA	2
<i>Approval of February 6, 2018 Meeting Minutes</i>	<i>2</i>
<i>Approval of Region 2's Revised Coordinated Assessment Plan.....</i>	<i>2</i>
SECTION II. UPDATES.....	3
PROPOSED CHANGES TO COORDINATED ASSESSMENT COUNCIL MEMBERSHIP	3
PROPOSED CHANGES TO COORDINATED ASSESSMENT LEAD ELECTIONS.....	4
VETERANS SUBCOMMITTEE GOALS FOR 2018	4
SSO-CE AVAILABLE FUNDING WEBINAR FEBRUARY 27 TH 11:00-12:00	5
NEW COC GRANTEE WEBINAR MARCH 8 TH 11:30-12:30	5
COUNTY OF SERVICE WEBINAR MARCH 29 TH 10:00-11:00	5
HMIS END USERS MEETING	5
POINT-IN-TIME AND HOUSING INVENTORY COUNT FORMS HAVE NEW DEADLINES.....	6
SECTION III. MEETING MINUTES AND SUPPORTING MATERIALS	6
ESG WEBINAR RECORDING	6
VETERANS SUBCOMMITTEE MINUTES	6
<i>February 16, 2018 Minutes</i>	<i>6</i>
FUNDING AND PERFORMANCE SUBCOMMITTEE MINUTES	9
<i>February 20, 2018 Minutes</i>	<i>9</i>
COORDINATED ASSESSMENT COUNCIL MINUTES.....	14
<i>February 19, 2018 Minutes</i>	<i>14</i>
COORDINATED ASSESSMENT EXCHANGE MINUTES.....	16
<i>February 9, 2018 Minutes</i>	<i>16</i>



North Carolina Balance of State Continuum of Care

bos@ncceh.org

919.755.4393

www.ncceh.org/BoS

Section I. NC BoS CoC Steering Committee Consent Agenda

*Any Steering Committee member may request to move an item off the consent agenda to be more thoroughly considered. Any such items will be discussed as a regular agenda item at the next Steering Committee meeting.

The following will be voted on at the February 6, 2018 NC BoS CoC Steering Committee meeting:

Approval of February 6, 2018 Meeting Minutes

Available here: <http://www.ncceh.org/files/8951/>

Approval of Region 2's Revised Coordinated Assessment Plan

Region 2 made some changes to their coordinated assessment plan. They changed some of the agencies involved due to grant transfers, added new partners, edited their permanent housing referral system, added prioritization factors, and amended their plan to follow up with people on the wait list. The Coordinated Assessment Council reviewed the changes and recommends them for approval. The updated plan is available here: <http://www.ncceh.org/files/9032/>

[Back to top](#)





North Carolina Balance of State Continuum of Care

bos@ncceh.org

919.755.4393

www.ncceh.org/BoS

Section II. Updates

Proposed changes to Coordinated Assessment Council membership

The Coordinated Assessment Council's original task, to design the NC BoS CoC's coordinated assessment system and approve regional coordinated assessment plans, has changed. All Regional Committees have a plan in place and the basic structure of the NC BoS CoC's CA system is set. The CAC needs to shift its focus to on-going implementation, oversight, and improvement. After discussion with Coordinated Assessment Leads, CAC members, and other stakeholders, the CAC recommends a proposal to the Steering Committee to change its membership.

The CAC recommends that all Regional Coordinated Assessment Leads join the CAC. This would improve communication channels, increase CA Lead knowledge, and put oversight in the hands of the people implementing the system. The CAC would retain some state-wide experts as members as well.

The governance charter must be amended to implement this change. The CAC proposes the following changes (highlighted in red) to the governance charter:

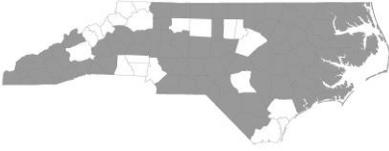
*The Steering Committee appoints a standing Coordinated Assessment Council to **oversee all aspects of the CoC's coordinated assessment system. The CAC sets coordinated assessment policies and procedures to ensure the consistency and effectiveness of the coordinated assessment system across the whole CoC. The CAC regularly evaluates the coordinated assessment system to improve access to housing and services. The Coordinated Assessment Council provides oversight for Regional Committees implementing coordinated assessment by reviewing plan changes and system outcomes, providing support and feedback, and hearing grievances that cannot be resolved at the local level.***

The Coordinated Assessment Council is made up of the Coordinated Assessment Leads from each of the 13 Regional Committees and other state-level experts. Coordinated Assessment Council members are expected to attend 75 percent of the CAC meetings. Regional Committees may elect Co-ordinated Assessment Leads if a single lead cannot carry out the full responsibilities for the Regional Committee. Regions with coordinated assessment co-leads need to only have one lead at each CAC meeting. If a Regional Committee's Coordinated Assessment Lead(s) does not attend 75 percent of CAC meetings, the Steering Committee may remove the lead(s) from the CAC and require the Regional Committee to elect a new Lead(s).

The Steering Committee will consider and vote on these changes at the March 6 Steering Committee meeting.

[Back to top](#)





North Carolina Balance of State Continuum of Care

bos@ncceh.org

919.755.4393

www.ncceh.org/BoS

Proposed changes to Coordinated Assessment Lead elections

NCCEH was awarded a Supportive Services Only-Coordinated Entry grant in the FY2017 CoC Competition. NCCEH will publish a request for proposals and application for this funding in April. These grants will help fund some of the activities of Coordinated Assessment Leads. This means that SSO-CE grantees will need to become the Coordinated Assessment Lead, if they are not already. Since CA Leads are elected by Regional Committees, all SSO-CE applicants will be required to gain a letter of support from their Regional Committee stating that the RC will elect them CA lead if they are awarded the grant.

To reflect this change in how some Coordinated Assessment Leads are elected, NCCEH suggests changing the Governance Charter as follows (changes in red):

Regional Committees are responsible for annually electing the leadership positions listed below. These positions serve one-year terms beginning January 1, and elections should be held in the fourth quarter prior to this start date. Elections must be reflected in Regional Committee meeting minutes.

A Regional Lead to the Steering Committee (more on this above, Section V.(a) NC BoS CoC Steering Committee)

An alternate lead

One representative to the CoC Scorecard Committee

One representative to the CoC Project Review Committee (keeping in mind conflict of interest restrictions, i.e., that a member of this committee cannot also represent an agency applying for funding)

A coordinated assessment lead (Any SSO-CE grantees must be coordinated assessment leads of their Regional Committee. SSO-CE applicants must gain a commitment from their Regional Committee to elect them as coordinated assessment lead if they receive SSO-CE funds).

The Steering Committee will consider and vote on these changes at the March 6 Steering Committee meeting.

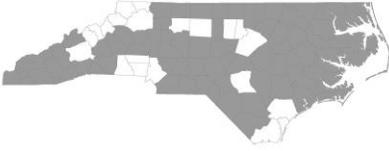
[Back to top](#)

Veterans Subcommittee goals for 2018

The Veterans Subcommittee met in February and set goals for 2018. The Veterans Subcommittee plans to:

1. End chronic Veteran homelessness by the end of 2018





North Carolina Balance of State Continuum of Care

bos@ncceh.org

919.755.4393

www.ncceh.org/BoS

2. Reduce the average length of time homeless to below 90 days by the end of 2018

3. Use by-name lists on a regular basis in every region by April 2018.

The Veterans Subcommittee will meet every other month on the third Friday from 10am to 12pm.
The next meeting is Friday, April 20th.

[Back to top](#)

SSO-CE Available Funding Webinar February 27th 11:00-12:00

This call is to advertise the availability of funding for North Carolina Balance of State CoC agencies from NCCEH's 2018 SSO-CE grant. The call will outline the purpose of the grants, what will be required of grantees, and the timeline for the application. Register [here](#).

[Back to top](#)

New CoC Grantee Webinar March 8th 11:30-12:30

The Continuum of Care (CoC) application is released by HUD annually. The 2018 CoC NOFA is expected to be released by HUD in spring or summer. In preparation for this year's CoC competition, NCCEH staff has created a webinar for agencies that are interested in applying for new projects. This webinar will cover the CoC competition application process and requirements. Register [here](#).

[Back to top](#)

County of Service Webinar March 29th 10:00-11:00

NC County of Service is now required for all HMIS participating agencies and projects, and the NC Balance of State CoC and the NCCEH Data Center are offering a webinar to explain how and why to complete this data entry. All staff who collect or enter HMIS data are encouraged to join us for this one hour webinar to introduce this question! Register [here](#).

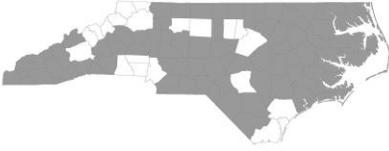
[Back to top](#)

HMIS End Users Webinar March 15th 1:00-2:00

Save the Date! More information and registration link will be released soon.

[Back to top](#)





North Carolina Balance of State Continuum of Care

bos@ncceh.org

919.755.4393

www.ncceh.org/BoS

Point-in-Time and Housing Inventory Count forms have new deadlines

PIT/HIC Deadlines are changing based on project types. Remember, there should be separate submissions through the online form for each HMIS project since each project has a different inventory or capacity.

Regional Committee Unsheltered Count Deadline – February 28th

Regional PIT Leads should submit their Regional Committee's unsheltered count. They should submit a separate unsheltered count form for each county in their region.

Emergency Shelter and Transitional Housing Deadline -- February 28th

The required reports for ES and TH projects are all available and your CoC need your data submitted to deduplicate clients with the unsheltered PIT counts.

Rapid Re-Housing and Permanent Supportive Housing Deadline -- TBA

RRH and PSH projects are waiting on the corrected and updated 0628 report. We will let you know when the report is ready and what the new deadline will be.

[Back to top](#)

Section III. Meeting Minutes and Supporting Materials

ESG webinar recording

NCCEH hosted a webinar for new ESG grantees on January 30, 2018. The webinar provided information on ESG overview, compliance, coordinated assessment, HMIS/comparable database, CAPER, and administration of spending and reimbursements. The recording for the webinar can be found [here](#).

[Back to top](#)

Veterans Subcommittee Minutes

February 16, 2018 Minutes

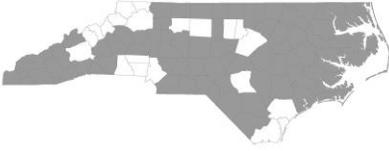
Subcommittee Members attending: Nicole Dewitt, Charlotte Stewart, Jeff Smith, Michelle Blanding, Robin Henry, John Rakes, Jeff Doyle, Reginald Roy, Terry Allebaugh

NCCEH Staff attending: Nicole Purdy, Ehren Dohler

Other interested parties attending: Kiana Kirk, Olga Ortize, Jessica Maples, Teresa Robinson, Kristie Reisig, Ashley Langmeade

1. USICH Criteria and Benchmarks





North Carolina Balance of State Continuum of Care

bos@ncceh.org

919.755.4393

www.ncceh.org/BoS

The Subcommittee reviewed the CoC's progress toward meeting the USCIH Criteria and Benchmarks for Ending Veteran Homelessness:

- **Benchmark A: Ending Chronic Homelessness**
 - We still don't have enough data on chronic homelessness. Filling out the USICH assessments in HMIS will help us start tracking this data point.
- **Benchmark B: Quick Access to Permanent Housing**
 - This benchmark requires CoCs to have an average length of time homeless less than 90 days. Nicole pulled data on Veterans who exited homelessness, and of those who exited to permanent destinations, the average length of time homeless was 111 days.
- **Benchmark C: Sufficient PH capacity**
 - This benchmark requires CoCs to move more Veterans out of homelessness than the number entering homelessness. Nicole pulled data on entries and exits:
 - Between November and February, 104 Veterans became homeless. In the same time period 84 exited to permanent housing.
 - Using the by-name list data: 242 Vets are currently homeless (though a much lower number actually recently entered homelessness). 26 exited homelessness in the last 90 days, but 84 are enrolled in RRH or PSH but have not yet exited homelessness. So that number could go up a lot.
- **Criterion 3: the CoC uses Transitional Housing in limited circumstances.**
 - There are currently about 10 Veterans in TH in the NC BoS CoC.
- **Criterion 1: The CoC has identified all Veterans experiencing homelessness:**
 - **By-name list progress:**
 - Sharing Agreements signed in regions 1, 2, 7, 10, 11, 13
 - Sharing Agreements out for signature in regions 3, 6, 8, 9, 12
 - Regions 4 and 5 delayed due to data issues, almost ready to go

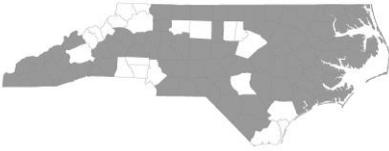
2. By-name lists

The Subcommittee looked at by-name lists:

- There is still a lot of missing data, but all SSVF providers are working on filling in their data. Once all the SSVF data is filled in, it should populate a lot of the people in shelters as well.
- There is an Active BNL tab, a Housing Offers tab, a Housed tab, and a Provider detail tab.
- Summary data from by-name lists:

Veterans on Active BNL	242
Veterans Chronically Homeless (Active)	1
Veterans Long-Term Homeless (Active)	2
Veterans Housed (during reporting period)	26





North Carolina Balance of State Continuum of Care

bos@ncceh.org

919.755.4393

www.ncceh.org/BoS

Vets Housed homeless enrolled in RRH/PSH	84
Vets in TH	10
Region 1	11
Region 2	10
Region 3	28
Region 4	22
Region 5	81
Region 6	11
Region 7	10
Region 8	1
Region 9	16
Region 10	17
Region 11	0
Region 12	10
Region 13	19

3. HUD-VASH connection

The subcommittee discussed how sharing data with VAMCs is going. Family Endeavors is having trouble in the Onslow area, without a point-of-contact. Most other connections are going well.

According to the by-name list report, 12 Veterans have exited to HUD-VASH between November and February.

Ehren will send the outreach forms to SSVF so they can make sure VAMCs are sending them Veterans to get onto the lists. Jeff made sure everyone knows that VAMCs are now required to participate in coordinated entry, so contact Jeff or Ehren if they aren't coming to meetings or aren't sending Veterans for referral.

4. 2018 Goals

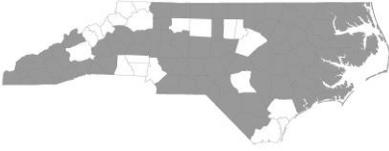
The Subcommittee agreed on the following goals for 2018:

- End Chronic Veteran Homelessness by the end of 2018
- Reduce the average length of time homeless to below 90 days by the end of 2018
- Get by-name lists used in every region on a regular basis in the next two months

Jeff Smith suggested the following as tasks for the Subcommittee for 2018:

- Take advantage of the Governor's Working Group's focus on Veteran homelessness in May, June, and July. Ehren, Terry, and Jeff will keep the rest of the group updated on how to use this opportunity.





North Carolina Balance of State Continuum of Care

bos@ncceh.org

919.755.4393

www.ncceh.org/BoS

- Figure out how to donate frequent flyer miles to non-profits to pay for hotel rooms. The Subcommittee will explore this with SSVF providers in 2018.
- 5. 2018 meeting schedule
 - The Subcommittee agreed to meet every other month. They will meet next from 10am to 12pm on Friday, April 20.

[Back to Top](#)

Funding and Performance Subcommittee Minutes February 20, 2018 Minutes

Subcommittee members attending: Talaika Williams, Tiana Terry, Melissa McKeown, Joel Rice, Destri Leger

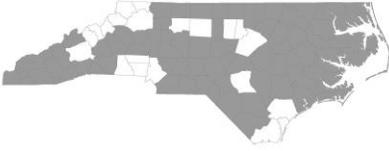
NCCEH staff attending: Ehren Dohler, Brian Alexander, Jenn Von Egidy

Subcommittee members missing: Richard Gary

Minutes:

- The Funding and Performance Subcommittee was formed when the steering Committee approved the Steering Committee restructuring proposal. This proposal added at-large members to the Steering Committee and made other changes to improve the Steering Committee's work. The Funding and Performance Subcommittee was intended to help the Steering Committee better understand the CoC's performance and make recommendations to improve it.
 - The Subcommittee's purpose in the restructuring proposal:
 - "The purpose of this subcommittee is to track the CoC's performance as a whole throughout the year, to recommend funding priorities, and to increase the CoC's competitiveness for funding."
- The Subcommittee discussed upcoming tasks:
 - The Subcommittee will begin with setting CoC and ESG funding priorities. They will then potentially analyze system performance measures, track progress on other goals, and more.
- The Subcommittee set some goals for this year:
 - To set CoC and ESG funding priorities
 - To develop clear guidelines and communication for Regional Committee performance.
 - To Translate CoC goals for Regional Committees
 - To provide guidance for program performance.
 - To Figure out how Regional Committees can use program and regional data.
- The Subcommittee set a team agreement. The subcommittee will:





North Carolina Balance of State Continuum of Care

bos@ncceh.org

919.755.4393

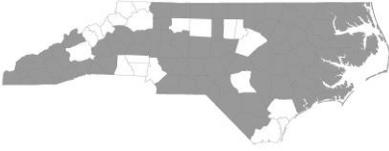
www.ncceh.org/BoS

- Set guidelines that represent needs of all 79 counties.
- Set priorities to assist the Steering Committee, Regional Committees, and other CoC committees/workgroups to think more broadly about and make good decisions for NC BoS CoC.
- Remain openminded to changes needed.
- Gain a better understanding of our needs as a CoC.
- Lay the groundwork to help Regional Committees and grantees better understand what they need to do.
- Always back up decisions and guidelines with data.
- Help other CoC members to understand and translate our data.

CoC Funding Priorities

- CoCs under HEARTH have new responsibilities:
 - HMIS
 - Coordinated assessment/entry
 - Point-in-Time
 - Oversight of grantees
 - Project review/ranking of applications
- One main responsibility of the CoC is to run the CoC competition.
 - The CoC competition begins with registration: happens well before the NOFA is released. CoCs have to register and claim their geography to be eligible for funding.
 - Then the Grant Inventory Worksheet (GIW) is released. That's where the CoC tells HUD about all their programs that need renewing this year.
 - Then the NOFA is released. HUD has indicated they hope to release the NOFA in May, though Registration hasn't opened yet.
 - Then the CoC application and project applications are completed.
 - The CoC reviews project applications and ranks them
 - Then the full application is submitted.
- The CoC application describes how the CoC is working to end homelessness
 - HUD prioritizes using data and strategies
 - PIT Count comparison
 - System Performance Measures (SPMs)
 - Strategies for ending homelessness, especially among subpopulations: Chronic, Vets, Youth, Families
- Project applications are both renewal and new projects
 - Renewals are for a 1-year term
 - New projects can be funded in two ways:





North Carolina Balance of State Continuum of Care

bos@ncceh.org

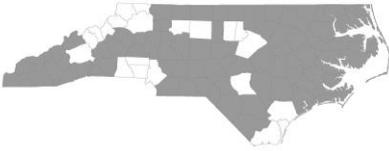
919.755.4393

www.ncceh.org/BoS

- Bonus money
 - Bonus is above and beyond the annual renewal demand of the CoC. In recent years only new RRH and PSH are eligible for bonus funding.
- Reallocation
 - The CoC can take some or all funding from existing programs and use it to fund new programs. This is how the NC BoS CoC funding the SSO-CE grant last year.
- Each project application scored according to CoC-approved scorecard
 - The Scorecard subcommittee designs the scorecard
 - There are two scorecards: one for new projects, one for renewal projects
 - Scorecards reflect CoC goals and priorities:
 - Historically, these have been based more on the NOFA/HUD directives
 - NC BoS CoC set funding priorities for the first time in 2017
- Then the Project Review Subcommittee recommends a project application ranked list
 - HUD uses a tiering system for ranking
 - Tier 1 – tier 1 projects are relatively “safe”, that is, HUD will likely fund them
 - Tier 2 – tier 2 projects are entered into a national competition and may not be funded.
 - Project Review Subcommittee makes ranking recommendations to Steering Committee
 - They design this ranked list based on project’s scorecard score, whether they are a new or renewal project, and the CoC’s funding priorities.
- HUD awards funds to CoCs based on the CoC application’s overall score.
 - HUD awards more projects to CoCs with the highest scores. This is most important to determine how many Tier 2 projects the CoC is awarded.
 - Last year the NC BoS CoC was awarded two projects in Tier 2, just up to its Annual Renewal Demand. No bonus funding was awarded.
- FY2017 Funding Priorities
 - Ensure essential infrastructure elements are in place, including HMIS and coordinated assessment
 - Ensure adequate coverage of permanent supportive housing across the CoC
 - Increase the availability of rapid re-housing
 - Ensure CoC funding is being used well, including potentially re-allocating some funding from projects that have patterns of low spending or poor performance
 - PSH coverage and RRH availability were operationalized into a priority grid for new projects

Region	RRH	PSH
--------	-----	-----





North Carolina Balance of State Continuum of Care

bos@ncceh.org

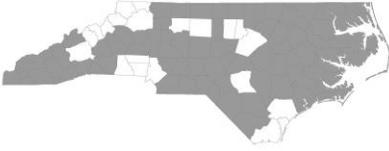
919.755.4393

www.ncceh.org/BoS

1	2	3
2	2	1
3	2	3
4	2	1
5	3	3
6	3	3
7	2	1
8	2	1
9	2	No Priority
10	2	3
11	2	3
12	2	No Priority
13	2	3

- Priority 1 projects were PSH in regions that need a significant increase in PSH units to meet the need.
- Priority 2 projects were RRH in all regions that do not already have CoC-funded RRH. RRH is also Priority 2 in Region 7, even though Region 7 has one CoC-funded RRH project, because Region 7 receives the lowest amount of CoC funding for all project types.
- Priority 3 projects were RRH in regions that already have CoC-funded RRH and PSH in regions that have some unmet need.
- No priority projects were PSH in regions with very low unmet need
- Results of the 2017 CoC funding priorities:
 - No new RRH or PSH were funded in the FY2017 CoC Competition
 - (3) “Priority 2” RRH new project applications were submitted to HUD:





North Carolina Balance of State Continuum of Care

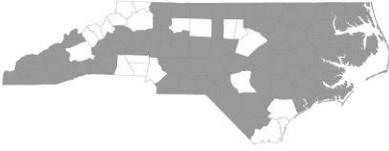
bos@ncceh.org

919.755.4393

www.ncceh.org/BoS

- Volunteers of America, covering Regions 7 and 11
- Pitt County, covering Region 12
- Wilson Housing Authority, covering Region 10
- (1) new “Priority 1” PSH project application was submitted (by Diakonos, Inc.), but it did not meet thresholds and was not included in the ranked list.
 - The Subcommittee discussed how to attract more PSH applicants. They discussed intentionally recruiting strong grantees, like county planning departments, mental health providers, health centers, PHAs, etc. NCCEH staff will discuss this on upcoming Steering Committee calls.
- The CoC was awarded only up to its Annual Renewal Demand. No bonus projects were funded.
- It seems likely that 2018 will not present opportunities to receive significant bonus funding.
- The FY2017 Funding Priorities helped the CoC receive an SSO-CE grant
 - NCCEH applied for a Coordinated Assessment SSO-CE grant, which was ranked in Tier 1, and was awarded.
- The FY2017 Funding Priorities resulted in some reallocation
 - One program, the Residential Treatment Services of Alamance County, was completely reallocated.
 - Two programs, one from Cardinal and one from Eastpointe were partially reallocated due to low spending.
- The Subcommittee discussed whether the 2017 funding priorities largely still apply. They agreed that they do, and they should tweak the current priorities, rather than writing new ones.
- The subcommittee considered each funding priority for potential changes:
 - Priorities for RRH and PSH: The Subcommittee discussed whether more guidance should be provided to the Project Review Committee to help them to potentially rank new projects above renewal projects. The funding priorities did allow the PRC to do this, but they chose not to take that course, except for the SSO-CE project. The Subcommittee suggested adding more guidance to the PRC to help them think about the potentially positive impact new projects would have in regions, balanced by the ability of low ranked programs to prevent current clients from becoming homeless. NCCEH will also update the priorities grid with new data.
 - Reallocation: The Subcommittee discussed whether they should provide more or different guidance to the PRC about when to reallocate. They decided the current priorities provide the right amount of flexibility to help the PRC make good decisions. No changes were suggested.





North Carolina Balance of State Continuum of Care

bos@ncceh.org

919.755.4393

www.ncceh.org/BoS

- Funding HMIS and coordinated assessment. The Subcommittee decided to keep this priority the same: since only some of the SSO-CE project was funded in 2017, they decided to keep trying to find funding for the SSO-CE project in 2018 as well.
- Next Steps:
 - NCCEH staff will edit the funding priorities based on these suggestions and will edit the new projects priority grid based on new data.
- The Subcommittee's next meeting is Tuesday April 17. They will start considering ESG funding priorities at this meeting.

[Back to Top](#)

Coordinated Assessment Council Minutes February 19, 2018 Minutes

CAC members present: Frederika Crooke, Teena Willis

NCCEH staff present: Ehren Dohler and Jenn Von Egidy

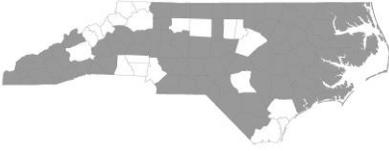
Region 2 CA Plan changes

- Agency changes
 - Homeward Bound previously ran PSH in Henderson County and recently transferred the grant to Thrive. Changes in the CA Plan were made to reflect this.
 - United Way of Buncombe County 211 will be used as an initial access point Prevention and Diversion Screening
 - Safe is a domestic violence agency that refuses to participate in the Coordinate Assessment System. Conversations are still in progress to bring the agency into compliance with regulations.
- Clarification of the role of the CA Subcommittee
- Prioritization process clarification
- Includes a plan to follow up with persons on the waitlist
- A motion was made to approve Region 2's Coordinate Assessment Plan. All in favor, none opposed.

CAC changes

- Current CAC membership has declined for a variety of reasons. This has coincided with the progression of the CAC's role from approving each Region's CA Plan to oversight of the coordinated assessment system. There are also concerns that the current CAC is possibly disconnected from the providers implementing coordinated assessment in the regions.
- The proposed change of the Governance Charter language will reflect the new role of the CAC and to include an expansion of membership.





North Carolina Balance of State Continuum of Care

bos@ncceh.org

919.755.4393

www.ncceh.org/BoS

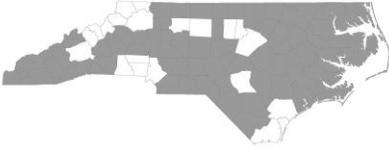
Expanded membership will include CA Leads that will be expected to attend 75% of the CAC meetings

- Coordinated Assessment Leads currently have a frequent turnover. New CA Leads are not always trained by the previous CA Lead. They currently may only get support through the CA Exchange calls. The opportunity to have CA Leads in a more robust role to include voting on new policy may help in providing the region's perspective to the CAC and ensuring the CA Lead has a more thorough understanding of the CA system.
- Staff asked for questions and comments. Teena Willis agreed the changes of membership and the expectations of attendance were necessary to implement Coordinated Assessment. It also connects the CAC to the providers that are doing Coordinated Assessment every day.
- State Level membership was left flexible intentionally. Frederika encouraged representation from the VA and the United Way/211.
- Discussion about CoC members that cover multiple regions being on the CAC. There are concerns that this may result in some regions appearing to get double votes.
- Discussion of including agencies such as the Boys and Girls Club, Salvation Army, YMCA, and YWCA would be beneficial.
- Proposed Timeline
 - March 6th Steering Committee to be approved
 - Staff will work to find new time for the CAC to meet with the intention to hold the first meeting in April.
 - The CAC will decide at the first meeting how often they want to meet and for how long.
- A motion was made to approve CAC change proposal for the Governance Charter. All in favor, none opposed.

SSO-CE

- NCCEH has been approved for a grant for the NC BoS CoC Coordinated Entry. It will fund CA Leads to provide more robust implementation in some regions. The amount does not allow for granted all CA Leads in all 13 regions.
- NCCEH will host a webinar on February 27th at 11:00am to prepare agencies for the Request for Funding Proposals. The RFP will be released in April. Deadline in May. Award announcements will be made in June. Awards will be granted in July.
- Funding could be used for either a full or part-time position. SSO funding cannot be used for planning. A current system needs to already be in place.
- Funding will be capped at \$40,000 per agency. The amounts awarded depends on the strength of the applications received and the needs identified.





North Carolina Balance of State Continuum of Care

bos@ncceh.org

919.755.4393

www.ncceh.org/BoS

- Teena asked if this funding could be used to expand 211 services. Ehren said we did not initially request the budget category that would cover that. There is a possibility we could do a budget amendment to do this. We would want to make sure that the basic coordinated assessment system was built prior to funding 211. It could still be explored.

Outcomes

- Due to the low membership attendance today, we decided to table this discussion until we get a larger membership to review outcomes.

[Back to top](#)

Coordinated Assessment Exchange Minutes

February 9, 2018 Minutes

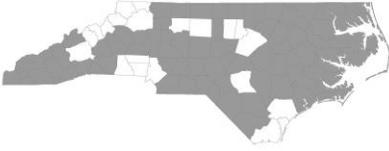
Attendees: Tawanda Bennett, Melissa Eastwood, Brian Fike, Chris Hoover, Lynne James, Kristen Martin, LaTasha McNair, Lenize Patton, Lisa Phillips, Jordyn Roark, Teresa Robinson, Tim Rogers, Susan Pridgen, Michele Knapp, Monica Frizzell, Amy Steel

Staff: Ehren Dohler, Brian Alexander, Jenn Von Egidy

Topics: Planning for how to improve coordinated assessment in 2018; changes to the Coordinated Assessment Council; changes to the Coordinated Assessment Exchange

- Announcements:
 - NCCEH was awarded its SSO-Coordinated Entry grant for 2018. NCCEH will be the grantee and will subgrant to agencies in the Regional Committees. There will be a webinar on Tuesday, February 27th at 11am with more details.
- It is time to make some changes in how we oversee Coordinated Assessment:
 - Every region has a plan in place, now the CoC needs to transition from planning to implementation and improvement.
- What do CA Leads need help with?
 - Lynne James: Some agencies, mostly those that don't receive federal funding, are hard to get involved. They want to come to the table, but they don't usually commit. They don't understand CA very well, and it takes a lot of work to get them up to speed.
 - Monica: We have the same problem. It takes a lot of knowledge and time to train these agencies.
 - Teresa suggested making a standard handbook.
 - Brian Alexander suggested holding a regular CA 101 webinar
 - Another challenge: not all agencies are doing VI-SPDATs. Some agencies say they don't have the staff to do it.





North Carolina Balance of State Continuum of Care

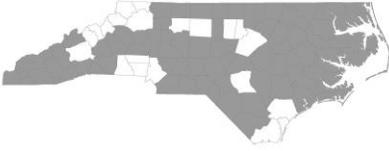
bos@ncceh.org

919.755.4393

www.ncceh.org/BoS

- Teresa: High volume shelters have troubles tracking all their entries and exits accurately.
- Ehren: The NC BoS CoC currently has two bodies to oversee CA: the CA Exchange and the Coordinated Assessment Council (CAC). What is helpful about the CA Exchange? What isn't helpful?
 - Lynne: it's hard for me to come to many of the CA Exchange calls because of when they're held.
 - Monica: I like the CA Exchange, but I still don't feel like I have a good idea of what other regions are doing. It would be good to have a place to really understand what other regions are doing.
 - Teresa: Could we have some sort of message board or email list just for CA leads to share things and ask questions?
- Ehren: Are there topics we haven't covered enough?
 - Lynne: How to achieve 24 hour coverage. It's very difficult.
 - LaTasha: It would be helpful to highlight regions that are doing things particularly well.
- Brian: Would longer in-person meetings be more useful?
 - Teresa: Yes
 - Lynne: It's not either/or. Longer in-person meetings would be useful, but so are the calls.
- Ehren: The CAC reviews Coordinated Assessment Plans, ensures consistency across regions, looks at quarterly reports and sets policy. Is the CAC's feedback useful? Is the policy they set connected to what CA leads are doing?
 - Teresa: A problem is that it's not clear what the outcomes data actually does, on the CoC-level. People on the ground want to know that the data they're submitting has an impact.
 - Monica: What is the CoC doing with the CA outcomes?
 - Ehren: We used outcomes when planning for the SSO grant. Though we aren't using them as much as we could.
 - Brian: We use them to plan what assistance we give to different regions.
 - Lynne: It's not clear what the report ties to in the CoC.
 - Monica: the CAC doesn't necessarily understand the variation between regions, so sometimes their feedback isn't helpful.
 - Lynne: if members had time it would be good if they each took a region and spent more time working with that specific region.
- Ehren: What do you think about having each of the CA leads join the CAC?
 - Teresa: I agree, that would be good.
 - Monica: It would be good, but time is a problem. Could CA leads designate a proxy sometimes?
 - Lynne: what about conflict of interest?
 - Ehren: having CA leads on the CAC would reframe the relationship: rather than being the CAC overseeing CA, the CA leads would be fully responsible for the system. There would be more peer sharing, and CA leads would be responsible for presenting their own data.





North Carolina Balance of State Continuum of Care

bos@ncceh.org

919.755.4393

www.ncceh.org/BoS

- Ehren will bring all this feedback to the CAC, who will come up with a proposal.

[Back to top](#)

