


# NC BoS Regional Committee Coordinated Assessment Outcome Report


**Regional Committee:** Region 12  
**Report Due:** 10/15/2016  
**Report Submitted:** 7/27/2017  
**Time Period Covered:** April - June  
**Implementation Date:** 4/1/2017


## Prevention and Diversion Screen

The Prevention and Diversion screen is administered when households present in a housing crisis to see if there are any other safe housing options available to them besides a shelter bed. This screen allows communities to prioritize shelter beds for those with no other options.

	
Presenting for shelter:	278
Missing P/D Screen:	158
Prevention/Diversion Screen:	120
Missing P/D Screen results:	49
Went to another destination	7
Where?	Home of friends; unidentified


DV	
Referred to DV services:	35


	
Referred to shelter or emergency services:	21
Total who left shelter before VI-SPDAT:	89

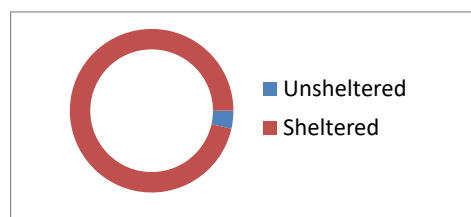
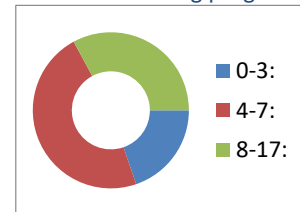
	
Total number of households diverted from homeless system:	15
Needed mediation:	14
Needed financial assistance:	1
Total amount provided for diversion:	Unknown
Total amount requested for diversion:	Unknown
Gap in diversion funding:	#VALUE!


## VI-SPDAT

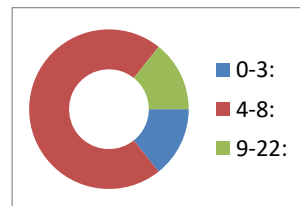
The VI-SPDAT screen identifies housing barriers for households and assists in identifying and prioritizing households for housing programs.

	
Total VI-SPDAT	85
Unsheltered	3
Sheltered	82
Missing VI-SPDAT scores:	2
People in shelter w/o VISPDAT	-115

		
Individual VI-SPDAT Scores		
0-3:	15	20%
4-7:	36	47%
8-17:	25	33%
<b>Total:</b>	<b>76</b>	



		
Family VI-SPDAT Scores		
0-3:	1	14%
4-8:	5	71%
9-22:	1	14%
<b>Total:</b>	<b>7</b>	



Has the community adjusted the standard score ranges?	No
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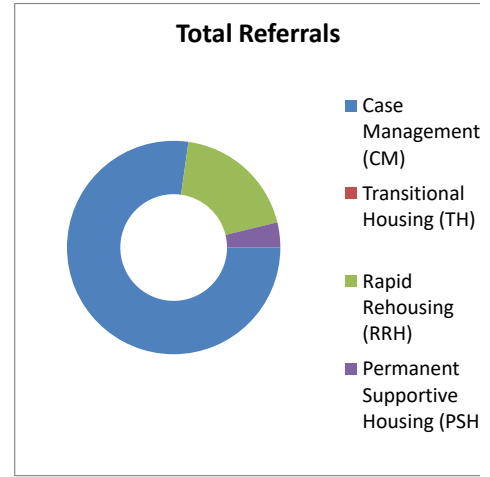
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Explanation of adjusted score ranges	n/a
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## Referrals

As interventions are identified, communities track the referral process for households to see how many were referred, admitted and how this impacts length of time homeless. Communities should look to this data to see if their community has gaps that are impacting the referral process.

Program Type	Total Referrals	Admissions this quarter	Added to wait list this quarter	Missing
Case Management (CM)	61			
Transitional Housing (TH)	0	0	0	0
Rapid Rehousing (RRH)	15	10	5	0
Permanent Supportive Housing (PSH)	3	0	3	0
<b>Total Housing Program Referrals (not including CM):</b>	<b>18</b>	<b>10</b>	<b>8</b>	<b>0</b>



Possible Gaps In System:	
# Scored for RRH but not referred	26
# Scored for PSH but not referred	23

Wait lists	
Total on TH wait list	0
# removed from TH wait list	0
Total on RRH wait list	6
# removed from RRH wait list	0
Total on PSH wait list	4
# removed from PSH wait list	0

Other Destinations	
Health care institution	0
Prison/Jail	2
Other destinations	1
Which other destinations?	Household was able to move into non-subsidized housing without placement assistance.

## System Feedback

Individual Grievances	
# of Grievances:	0
# of Grievances Resolved:	0
Average Days to Respond:	n/a

Agency Grievances	
# of Grievances:	0
# of Grievances Resolved:	0
Average Days to Respond:	n/a

<b>Community Assessment of System</b>
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Gaps identified:	Getting every agency to administer all of the screening tools is still an implementation issue. Some use the P/D screen, but not the VI-SPDAT. Some use the VI-SPDAT, but not the P/D screen. Phasing in new agencies is an ongoing process also. Another gap is follow-up with people who are discharged/terminated from Shelter for compliance issues. Region 12 recognizes that in many of these situations those affected remain homeless, but there is no one to do follow-up/outreach in these situations. Another gap is a lack of shelter for homeless women in Beaufort County.
Addressing gaps:	The Coordinated Assessment Team continues to work with existing and new participants to promote, educate, encourage, and mentor agencies as part of the ongoing implementation of the Coordinated Assessment Plan for Region 12. As the Veteran Plan begins implementation, we hope to partner with them for outreach, which may help to reach some who are discharged from Shelter for compliance issues. Additionally, CoC funding is being pursued with the intent that some of that money is targeted for outreach. There is a coalition in Beaufort County working to access a facility to provide shelter for homeless women and children.
Side doors identified:	Law enforcement is a side door. When law enforcement presents with someone, most of the time no assessment has been done. Hospital discharges also represent a side door.
Addressing sidedoors:	Law enforcement is identified as a partner in the Region 12 Coordinated Assessment Plan. The issue is one of capacity for law enforcement, depending upon when a referral is made. We are not sure at this time whether this issue can be addressed, but will continue to work with law enforcement. The hospital discharge process is so fast-paced that it also presents a challenge with regard to having an assessment done. In both of these cases, shelters do not want to refuse referrals from these sources. We would welcome feedback from other regions if they have been successful in addressing these issues.
What is going well?	More agencies are participating, despite the fact that there is still work to be done to fully implement the plan.
What are challenges?	Hesitancy and reluctance on the part of some to participate is a challenge. Even though agencies have indicated they want to participate, the follow through is not always there. The issues that come up are lack of capacity to do what is required, and not seeing the benefits of participation.

### Plan Changes and CAC Feedback

assessment plan:	Not at this time.					
Feedback for the CAC:						

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There is a discrepancy in the number of VI-SPDAT screens that are completed and the number of referrals made. There are several factors contributing to this discrepancy as follows:

- Lack of interest in housing. Case managers sometimes find that once they have gone through the assessment process, the household is not interested in housing placement. We have suggested that there be a thorough discussion about this with the client before completing the VI-SPDAT. Regardless of whether there is interest, case managers are trying to be sure the screen is done timely so that there are no delays should the household decide to seek housing placement assistance.
- Waiting on information needed to complete the housing referral. An example of this is that if a referral is working, the ESG RRH guidelines require 4 pay stubs to calculate income. Because we are using the Housing First Model, sometimes the referral has just started working and does not have 4 pay stubs in place yet. There also may be health information that has been requested, but not yet received. In these cases, case managers have been holding the referral until everything is in place to do an intake. We are suggesting that case managers not hold up the referrals for these reasons. Let the agency accepting the referral work through those issues with the client.
- Hesitancy to make a referral when the client does not "seem ready". We continue to receive feedback from case managers that a client wants housing placement assistance, but is not yet ready to move out of shelter. Reasons include that they want to save up some money to have a "nest egg" for furniture, etc. when they move....or they want to pay off certain bills before they move...or they can't find the "right" place to move.

With regard to referrals that are made, there continue to be issues with finding a place that will accept some of the referrals. This week there was a discussion during the case conferencing meeting about landlords becoming stricter about credit history and criminal backgrounds. Additionally, one of the rental companies that is more flexible with who they will accept only issues month-to-month leases, which is not allowed under ESG guidelines.

We are going to have an in-service during the weekly meeting over the next couple of weeks to again address these issues. I may contact you if we are stuck on how to resolve anything following these meetings.

### CAC Feedback for the Regional Committee:

Thank you for the explanation around the discrepancies of VISPDATs vs. referrals. The CAC would happy to be helpful however we can to help you resolve some of these issues, but it's great that you've identified them so you can help fix them. It also seems like too many VISPDATs are geing done, or possibly they're being done too early - 85 VISPDATs were completed, but only 56 were in shelters, and only 3 were unsheltered. Where are those extra people coming from? Also the number of missing P&D screens seems high - what's happening with those people? Are they not truly homeless or is there not capacity to screen them?

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