

North Carolina Balance of State Continuum of Care

bos@ncceh.org

919.755.4393

www.ncceh.org/BoS

Regional Committee Coordinated Assessment Plan

In June 2016 the BoS CoC Steering Committee adopted a *Regional Committee Restructuring Proposal*, changing the organizational structure of the BoS CoC from 26 Regional Committees to 13 larger Regional Committees.¹ The BoS CoC Steering Committee also adopted written standards for coordinated assessment on September 6, 2016, that outline how coordinated assessment should operate in each region.²

Taking into account both the new Regional Committees and written standards, each Regional Committee will be required to submit a coordinated assessment plan that provides coverage for their entire geographic region by April 1, 2017.

Contact Information

Regional Committee: Neuse Regioanl Committee

Counties Served: Duplin, Greene, Lenoir, Sampon, Wayne, Wilson

For the following please provide name and email address.

Primary Authors of the Plan: Candice Rountree Candice Rountree (carountree@wilson-co.com), LaTasha McNair (Ltmcnair@eastpointe.net)

Regional Lead: LaTasha McNair (Ltmcnair@eastpointe.net)

Elected Coordinated Assessment Lead: Candice Rountree (carountree@wilson-co.com)

Other Coordinated Assessment Contact(s) for the Region: N/A

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. It is recommended that the coordinated assessment system make an initial contact to assess within 2 hours of households presenting for services.

Please use the following chart to list agencies who administer the prevention and diversion screen in your region:

¹ http://www.ncceh.org/bos/restructuring/

² http://www.ncceh.org/files/7522/

Agency	Count(ies) Served	Population Served	Availability to administer screen	Number Staff Trained (recommend more than 1 staff)	Active on HMIS
NC Works	Wayne	☐ Families Only ☐ Single Men ☐ Single Women ☐ All	Days: Monday-Friday Times: 8:30a - 4:30p	2-3	Yes No
Salvation Army	Wayne, Sampson	Families Only Single Men Single Women All	Days: Monday-Friday Times: 8:30a - 4:30p	1	∑ Yes ☐ No
GHA	Wayne	☐ Families Only ☐ Single Men ☐ Single Women ☐ All	Days: Tuesday Times: 7:00a-5:30p	1-2	Yes No
Eastpointe	Duplin, Greene, Lenoir, Sampson, Wayne, Wilson	☐ Families Only ☐ Single Men ☐ Single Women ☐ All	Days: Monday-Friday Times: 8:30a-4:30p	2	∑ Yes ☐ No
U-Care	Sampson	□ Families Only □ Single Men □ Single Women □ All	Days: Monday-Friday Times: 24/7	1	Yes No
Hope Station	Wilson, Greene	☐ Families Only ☐ Single Men ☐ Single Women ☐ All	Days: Monday-Friday Times: 8:00a-1:00pm	2	∑ Yes ☐ No
Wesley Shelter	Wilson, Greene	Families Only Single Men Single Women All	Days: Monday-Friday Times: 8:00a-4:00pm	1	Yes No

If your Regional Committee does not have 24-hour availability for the prevention and diversion screen, please describe what happens if a household needs emergency services and shelter outside of the available hours, including what happens if a household presents overnight, on the weekends, or if trained staff is not present. Be sure to address how the household accesses shelter and when the prevention and diversion screen is administered.

In Wilson and Greene County, we have a local agency, the Wilson Crisis Center that is contacted by local law enforcement when a family or individual presents after-hours with a shelter emergency. The Wilson Crisis Center connects with local shelter resources, provides for a stay in a hotel, or helps advocate with other resources for a temporary plan.

In other counties, when individuals/familes presents as homeless, they would be allowed to enter shelter and then be assessed the next day with the prevention and diversion screening. Our committee plans to continue to work to engage other agencies and identify agencies that will be able to offer 24 hour prevention and division screening.

Domestic Violence Referrals

While answering questions on the prevention and diversion screen, households may be identified as needing domestic violence services.

If a household indicates they need domestic violence services and/or shelter, please list the agencies your region refers to:

Agency	Count(ies) Served	Participate in
		Coordinated
		Assessment
U-Care	Samspon	
		☐ No
Wayne Uplift	Wayne	Yes
		⊠ No
Wesley Shelter	Wilson, Greene	
		☐ No
Safe in Lenoir County	Lenoir, Greene, Duplin	
		☐ No
		Yes
		☐ No

Please describe the process by which agencies making referrals make contact with and transfer forms to the domestic violence agency and how the system tracks if a household was successfully placed in a program. Be sure to include if a phone call is made to the agency to inform them of the referral, and/or if forms are sent with households to the agency.

Individuals make contact with agencies designated as entry points where the initial screening is done. During the screening process it is determined whether individual can be redirected or if they need homeless service. A list of community agencies are kept on hand at the screening agencies to refer individual to the correct service group to address their needs. If a referral to another agency is needed during the screening process, contact will be made by the referring agency to the agency the individual

is being referred to in order to give them some background information and to confirm that the agency that they are being referred to will be able to assist the individual.

If domestic violence agencies are not currently participating in your coordinated assessment process, please describe the engagement plan for these agencies, including goals and timeline. Our regional currently does have DV agencies that are participating in the coordinated assessment process. The region will continue to work to engage non-participaiting DV agencies to participate in coordinated assessment. Our Coordinated Assessment Lead will make monthly contact with those DV agencies that are not participating via e-mail, encouraging them to participate and providing information to aid in the process. Through our Regional meetings, we will encourage participating DV agencies to mentor those who are not participating.

Does your region need assistance in engaging domestic violence agencies? [Yes [\overline{igwed} No
If yes, please provide the name, email and phone number of the person to c	ontact:	N/A

Diversion

While answering questions on the prevention and diversion screen, households may be identified as needing diversion services to access a safe housing option.

Does your coordinated assessment system offer mediation services for diversion? \boxtimes Yes \square No If yes, please describe the mediation services provided: Selected participating agencies may contact an individual's last place of overnight accommodation to mitigate a situation that may result in continue overingnight acommodations.

Are financial assistance resources available for diversion? Yes No
If yes, how much financial assistance and what sources of funding are used for this? Financial assistance is available via a limited amount of ESG funding within the region.

If households are referred to agencies to receive diversion services, please list agencies in your region:

Agency	Count(ies) Served	Participate in	Services Provided
		Coordinated Assessment	
Salvation Army	Wayne		Mediation
		☐ No	
			Assistance
NC Works	Wayne		Mediation
		☐ No	Financial
			Assistance
United Way	Region Wide	Yes	Mediation
		⊠ No	Financial
			Assistance
Wilson County DSS	Wilson		Mediation
Hope Station	Wilson, Greene	│	
			Assistance
UCare	Sampson		Mediation
SAFE	Lenoir, Duplin	☐ No	
			Assistance

Please describe the process by which agencies making referrals make contact with and transfer forms to the diversion agency and how the system tracks if a household was successfully placed in a program. Be sure to include if a phone call is made to the agency to inform them of the referral, if forms are sent with households to the agency, and/or if referrals are sent via HMIS.

Individuals make contact with agencies designated as entry points where the initial screening is done. During the screening process it is determined whether individual can be redirected or if they need homeless service. A list of community agencies are kept on hand at the screening agencies to refer individual to the correct service group to address their needs. If a referral to another agency is needed during the screening process, contact will be made by the referring agency to the agency the individual is being referred to in order to give them some background information and to confirm that the agency that they are being referred to will be able to assist the individual. A copy of the forms will be sent electronically to the agency the individual is being referred to as well as a copy of the forms will be given to the individual if possible to take to the agency.

Referrals to Shelter

While answering questions on the prevention and diversion screen, households may identify a need for an emergency shelter or access to resources for emergency housing, such as motel vouchers.

If households are referred to shelters and emergency services, please list agencies in your region:

Agency	Count(ies) Served	Participate in Coordinated Assessment	Population Served	Admission Requirements and/or Prioritization Policies	Active on HMIS
Salvation Army	Wayne, Sampson	∑ Yes ☐ No	Families Only Single Men Single Women All	Yes; (1). PI.D. and client needs to know social security number (2).18 yrs. and up (3). No sexual offenders or assaults with 7 years. (4). zero tolerance for alcohol and drug usage while staying in the shelter.	Yes No
Hope Station	Wilson, Greene	Yes No	Families Only Single Men Single Women All	Yes; -18 yrs of age or older -Resident of Wilson County, NC -Government- issued photo ID -Social Security card, if available -Warrants check with Wilson Police Dept. to make sure we would not be accepting a fleeing fugitive	Yes No

				-No obvious evidence of drug or alcohol use	
Friends of the Homeless	Lenoir	Yes No	Families Only Single Men Single Women All	Yes; Photo ID (FOH helps individuals get an ID if they do not have one), Maintain sobriety once in shelter	⊠ Yes □ No
Wesley Shelter	Wilson, Greene	∑ Yes ☐ No	Families Only Single Men Single Women All	Yes; Serves DV women and children; homeless women when beds are available	Yes No
		Yes No	Families Only Single Men Single Women All		Yes No
		Yes No	Families Only Single Men Single Women All		Yes No

Please describe the process by which agencies making referrals make contact with and transfer forms to the emergency shelter and how the system tracks if a household was successfully placed in a program. Be sure to include if a phone call is made to the agency to inform them of the referral, if forms are sent with households to the agency, and/or if referrals are sent via HMIS.

Individuals make contact with agencies designated as entry points where the initial screening is done. During the screening process it is determined whether individual can be redirected or if they need homeless service. A list of community agencies are kept on hand at the screening agencies to refer individuals to the correct service group to address their needs. If a referral to another agency is needed during the screening process, contact will be made by the referring agency to the agency the individual is being referred to in order to give them some background information and to confirm that the agency that they are being referred to will be able to assist the individual. On the 14th day of an individual's stay at an emergency shelter, the host program administers the VI-SPDAT screening tool. Based on the VI-SPDAT score, the individual is referred to an appropriate Permanent Supportive Housing Program, Transitional Housing Program, Repaid Rehousing Program, or other appropraite housing option. In areas where there are not shelters and/or a shelter is at capacity, the VI-SPDAT is completed immediately.

All CA processes are available to all eligible persons regardless of race, color, national origin, religion, sex, age, familial status, disability, actual or perceived orientation, gender identify, or marital status.

If there are no shelters in your region or a particular population does not have access to a shelter, how do households access an emergency bed in your Regional Committee?

If there is no shlelter within the region, an intake site will attempts to make make an out of count referal to a sehlter/program that may be available to assit the individual in need. There is a community plan for opening a shelter to serve families with children and single women in Wilson/Greene County in the near future. There are not adequate resources. We will work together as a RC to serve these families, utilizing ESG and CoC funding when we are able to. Additionally, there is a plan to open an shelter for men as well as women with children and single women in Wayne county to better serve the needs of the community. This facility will be open to all persons, not only those within Wayne Co. therefore it will be available to serve the entire region. There an anticipated completion date by the end of 2017.

If a household does not meet the admission requirements of a shelter and/or the shelter is full, please describe how the household accesses an emergency bed.

They would be referred to nearest acomodating emergency shelter. A Memorandum of Agreement will be in place for all participating agencies.

VI-SPDAT

The VI-SPDAT screen identifies housing barriers for households and assists to identify and prioritize households for housing programs. It is recommended that communities administer the VI-SPDAT screen between 12 and 15 days from shelter entry in order to allow households the time to try to find housing without a referral to a housing program.

Please use the following chart to list agencies that are administering the VI-SPDAT in your region:

Agency	Count(ies) Served	Population Served	Availability to Administer the VI-SPDAT	Number Staff Trained (recommend more than 1 staff)	Active on HMIS
Salvation Army	Wayne	☐ Families Only ☐ Single Men ☐ Single Women ☐ All	Days: Monday-Friday Times: 8:30a-4:30p	1	Yes No
Eastpointe	Duplin, Greene, Lenoir, Sampson, Wayne, Wilson	Families Only Single Men Single Women All	Days: Monday-Friday Times: 8:30a-4:30p	1	⊠ Yes □ No
U-Care	Sampson	Families Only Single Men Single Women All	Days: Monday-Friday Times: 24/7	1	Yes No
Hope Station	Wilson, Greene	Families Only Single Men Single Women All	Days: Monday - Friday Times: 8:00 - 5:00	1	∑ Yes ☐ No
Wesley Shelter	Wilson, Greene	□ Families Only □ Single Men □ Single Women □ All	Days: Monday - Friday Times: 8:00 - 5:00	1	Yes No
Friends fo the Homeless	Lenoir	Families Only Single Men Single Women All	Days: Monday-Friday Times: 8am -5pm	1	∑ Yes ☐ No
		Families Only Single Men Single Women All	Days: Times:		Yes No

If shelters do not administer the VI-SPDAT, please describe how the system identifies who in shelter needs the assessment and follows up with these households to complete the VI-SPDAT. The shelters do administer the VI-SPDAT.

How long will your community wait to administer the VI-SPDAT? 14 days for those that are in a shelter. If there are not shelter beds and/or a community does not have a shelter, the VI-SPDAT is completed immediately.

If not between 12 and 15 days from shelter entry, why? N/A

Please describe how your Regional Committee provides outreach to unsheltered households to complete a VI-SPDAT and provide a housing referral.

Unsheltered housholds are encouraged to connect to an Prevention and Diversion intake site to complete an assessement. At that time, if no placement is available, a VI-SPDAt will be completed and the household will be referred for other resources. Additionally, the RC intends to develop a plan to provide additional outreach to unsheltered households. This plan will include a partnership with SSVF agencies to conduct routine, consistent quarterly outreach. We will review our outreach work as a standing agenda item at our Regional Committee meetings.

If your community does not currently provide outreach to unsheltered households, please describe the Regional Committee's plan to develop an outreach effort, including goals and timeline. N/A

Are loca	I domestic violence	agencies participat	ing in administerin	g the VI-SPDAT	and making ho	using
referrals	? 🛛 Yes 🗌 No					

If so, how is the safety and confidentiality of households taken into account? DV victims are identied by a client ID #, not by name. Referrals are made to area resouces in which the DV victims feels safe. If not, please provide your plan to engage local domestic violence agencies, including goals and timeline. N/A

Housing Referral and Waitlist

VI-SPDAT scores provide guidance as to which housing program would be best able to meet the needs of households. The goal of coordinated assessment is to provide a clear and transparent referral process for the people being served and for agencies within the region.

Housing Referral

Orgcode Consulting, Inc., which created the VI-SPDAT assessment tool, recommends the following score ranges for housing referrals:

Individual VI-SPDAT Score		
0-3	No Housing Referral/Basic Information Provided	
4-7	Rapid Rehousing	
8-17	Permanent Supportive Housing	
Family VI-SPDAT Score		
0-3	No Housing Referral/Basic Information Provided	
4-8	Rapid Rehousing	
9-22	Permanent Supportive Housing	

Does your Regional Committee follow these recommendations for scoring? \boxtimes Yes \square No If not, please describe the score ranges the region uses for housing referrals and why. N/A

Please list the housing programs that households are referred to once assessed with the VI-SPDAT:

Agency	Count(ies) Served	Type of Housing Programs	Population Served	Active on HMIS
Eastpointe	Duplin, Greene, Lenoir,		Families Only	
	Sampson, Wayne, Wilson	RRH	Single Men	☐ No
		□TH	Single Women	
		Other:	⊠AII	
UCare	Sampson	PSH	Families Only	Yes
		RRH	Single Men	⊠ No
		□ TH	Single Women	
		Other:	All	
Safe in Lenoir County	Duplin, Lenior	PSH	Families Only	
		⊠ RRH	Single Men	☐ No
		□ TH	Single Women	
		Other:	⊠AII	
Friends of the	Lenoir	PSH	Families Only	
Homless		RRH	Single Men	☐ No
		□ TH	Single Women	
		Other:	⊠AII	
Hope Station	Greene, Wilson	PSH	Families Only	
		RRH	Single Men	☐ No
		<u>□</u> TH	Single Women	
		Other:	⊠AII	
Salvation Army	Wayne	PSH PSH	Families Only	Xes
		RRH	Single Men	☐ No
		∐ TH	Single Women	
		Other:	⊠AII	
Volunteers of America	Duplin, Greene, Lenoir,	PSH	Families Only	Yes
	Sampson, Wayne, Wilson	RRH	Single Men	☐ No
		∐™	Single Women	
		Other: SSVF	All	
Family Endeavors	Duplin, Greene, Lenoir,	PSH	Families Only	Yes
	Sampson, Wayne, Wilson	RRH	Single Men	☐ No
		∐ TH	Single Women	
		Other: SSVF	⊠AII	

Please describe the process by which agencies making referrals make contact with and transfer forms to the housing program and how the system tracks if a household was successfully placed in a program. Be sure to include if a phone call is made to the agency to inform them of the referral, if forms are sent with households to the agency, and/or if referrals are sent via HMIS.

There is a communal waitlist where the VI-SPADTs are kept and services are prioritized based on need. . Housing agencies will be referred the most vulnerable households at Regional case conferencing meetings.

A copy of the forms will be sent electronically to the agency the individual is being referred to as well as a copy of the forms will be given to the individual if possible to take to the agency. The referrals will be tracked on the community waitlist and case conferencing will be used if there are problems.

Waitlist

If more referrals are received than the agencies that provide that service type can serve, community waitlists should be developed. These waitlists should be shared amongst key partners for community accountability and should prioritize households based on need rather than on a first-come-first-served basis. All households who are homeless (both sheltered and unsheltered) and have completed a VI-SPDAT should be on the community waitlist. Households should remain on the waitlist until a housing referral is accepted, the household disappears for a designated period of time, or the household moves to an institutional setting (jail, prison, etc.). Please see the posted example template of a community waitlist here: http://www.ncceh.org/bos/coordinatedassessment/.

Where is your Regional Committee's waitlist stored?GoogleDropbox

Who manages the Regional Committee's waitlist? The case review subcommittee will maintain the waitlist. One point person for each participating agency will enter data and the case review subcommittee, led by the CA Lead, will ensure the waitlist stays up to date and accurate.

Who has access to the Regional Committee's waitlist? One point person for each participating agency.

Please describe how your community will obtain consent from participants to share and store their information for coordinated assessment. Please indicate how participants will be educated about how their information will be used and how a release of information will be obtained and stored. A sample release of information is here http://www.ncceh.org/bos/coordinatedassessment/. Each agency will obtain a signed release of information. The consent will include how information will be used and stored. It will also allow consent to the amount of information that will be shared.

How will the Regional Committee track participants on the waitlist and prioritize them for housing if they refuse to have their personal information shared through the coordinated assessment process? The RC will work to identify and develop a plan to track participants on the waitlist and prioritize them for housing if they refuse to have their personal information shared the CA process. We will encourage participants to complete a standard Release of Information. We will review a ROI as a REgional Committee and vote on what we will include as our standard of practice. When individuals are not comfortable signing an ROI, we will assign them an anonymous identification as a placeholder and reminder with regard to their priority for housing. We will communicate with the referring agency to ensure they are aware of the anonymous identification assigned to their referral.

How will the Regional Committee confidentially and safely track survivors of domestic violence on the waitlist and prioritize them for housing? The confidentiality of survivors of domestic violence is adequate as they will be tracked using a numeric code.

Coordinated assessment written standards require that Regional Committees use a case conferencing committee to review the waitlist and oversee the housing referral process. Please describe how your Regional Committee utilizes a case conferencing committee to aid housing placement. Case conferencing will occur with regularity and we will discuss each household and their strengths and needs in an attempt to share resources. Communication will occur via e-mail, phone calls, and face to face meetings among participating agencies.

How does the Regional Committee ensure that the most vulnerable households get housing resources first? Placement is based on the VI-SPDAT score to determine the most immediate need. We have identified veterans, chronically homeless and domestic violence victims as our priorities. Housing agencies must only take referrals from the top of the waitlist, in order of priority. Regular case conferencing will ensure that these referrals are successful and will trouble shoot if they are not. The wait list is created based on the VI-SPDAT score to determine the most immediate need. If an individual is on the wait list and services have not become available for them within a 2 to 12 week period (depending on each agency's wait time) alternative services will have to be identified for the individual to attempt to get the individual moving toward improving their situation. We intend to complete a holistic assessment and will use the VI-SPDAT score, in conjunction with other elements. We will prioritize those that are chronically homeless, veterans, and DV cases.

Programs should rarely reject referrals. If they do reject a referral, providers are expected to submit a written reason for the denial to the following agency: CA Subcommittee. Please outline the specific criteria under which a program may reject a referral (refer to the <u>CA Written Standards</u> for more information). Referrals may be rejected based on no bed space as well as a rejection based on sex offender status when there are minor children currently in the shelter. .

If a household does not accept a referral, or if a provider declines a referral, the provider and the community should work to refer the client to the next appropriate housing provider and/or emergency shelter to ensure that the household has a safe place to sleep that night. The Regional Committee should also maintain the client's place on the waitlist for housing. How will the Regional Committee work to connect the household with a more suitable program? We will communicate consistently about referrals and waitlists. Referring agencies will contact those in need of housing on a monthly basis to ensure accurate information is being maintained with regard to contact information, current housing status, any additional needs.

For those on the waitlist who remain in a shelter or transitional housing program, how often is follow-up made with the household to ensure that information stays up-to-date? Follow up occurs when placement is available. However, periodic follow up may be completed to address crisis situations and other changes that may change the VI-SPDAT score. A minimum of monthly contact to ensure up-to-date information is recorded will be made. We won't remove from the waiting list until we have made exhaustive attempts to contact the individual. We will utilize case conferencing to ensure that we aren't removing an individual without searching for them beyond just phone calls.

For those on the waitlist who are unsheltered, it is recommended that follow-up happen at least every 30 days. How often is follow-up made with these households in your region to ensure information stays

up-to-date? Follow up will occur at a minimum of 30 days to document their current status and to inform them of their place on the waiting list.

What is your policy for taking a household off of the list? A household is removed from the waitlist when they are successfully placed. We will be contacting all individuals/households on at least a monthly basis to document their current status and inform them of their place on the waiting list. A household is also removed if they are unable to be contacted after the prescribed period.

How many attempts do you make to contact? 3

What are the procedures if a household is unable to be found? Is there are certain amount of time that they must be lost to the system before being taken off the waitlist? 90 days

System Management and Oversight

Transportation

Are people required to travel to different locations to access programs and services in your community? $ extstyle extstyle $
Are transportation funds/resources provided? 🔀 Yes 🗌 No
If yes, please describe resources, to whom they are available, and how and when they are accessed. The Salvation Army has a small amount of Emergency Solutions Grant funds allocated for transportation services to be used in Wayne County. Consider participating agencies to offer phone assessments when needed or meet persons at a central point convenient to client.
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What happens if a household is unable to access transportation resources or any other transportation? If a household is unable to access transportation, organizations which offer transportation services will be contacted or either organizations which offer assistance for payment with transportation will be contacted for the individual. Participating agencies could offer phone assessments when needed or meet persons at a central point convenient to client if applicable.

Advertisement

Please explain the strategies the Regional Committee uses to educate agencies and other community systems about coordinated assessment. (Please attach any materials the Regional Committee uses in these efforts, like flyers, slides, posters, handouts, etc.) The CA is advertised by providing awareness among all agencies that participate in the regional committee via monthly CA updates/report outs. Additionally, the CA can utilize posters, flyers, media stories to advertise. Additionally, the RC will develop a more precise plan to outreach and advertise the CA process to the general public, faith-based community and other community agencies, and programs that are not aware of the system. It is anticipated that the additional advertisement methods will be implemented within the next 3-6 months.

Please explain the strategies the Regional Committee uses to educate households who are risk of homelessness or experiencing homelessness about coordinated assessment. (Please attach any materials the Regional Committee uses in these efforts, like flyers, slides, posters, handouts, etc.) The Regional Committee can use printed material to distribute to agencies and other location where homeless households may frequent.

Accessibility

How will the Regional Committee ensure that the Coordinated Assessment process is accessible to people with disabilities? Please indicate which communication services will be available, such as Braille,

audio, large type, assistive listening devices, and sign language interpreters. Please indicate any other accommodations that will be available to help people with disabilities access the coordinated assessment system. Agencies participating in Coordinated Assessment are interested in serving all individuals and families in need, including those with disabilities. We have utilized assistive listening devices and sign language interpreters. This is handled on an individual basis and we rely on support and assistance from a network of local community partners.

Is there an access point in your community accessible to people who use wheelchairs or have limited mobility? Yes, shelters are wheelchair accessible.

If there is not, or if the access point is difficult to get to, please describe how you will provide outreach that is accessible to people with disabilities.

What steps will the Regional Committee take to help people with Limited English Proficiency or difficulty reading access the coordinated assessment system? We will utilize staff members who are Spanish speakers for our Latino population. DSS is a community resource for translation services.

Local Oversight

Coordinated assessment provides community-wide accountability for housing anyone who is experiencing homelessness as quickly as possible. It is recommended that each Regional Committee have a coordinated assessment subcommittee to oversee the system, report out to the Regional Committee, address system grievances, educate and outreach non-participating agencies, and collect and submit outcomes to the CoC.

What is your plan for providing coordinated assessment across the entire Regional Committee? This could be either by merging systems into one large system or overseeing several smaller, county-based coordinated assessment systems.

The CA plan will cover the entire region. This is plan is one that as combine two plan into one for full region coverage. The CA will implement the resigned plan and will be open to making necessary tweaks and changes as appropriate to ensure an effective and efficient CA process region wide. As we are merging two regions, we will need to discuss Coordinated Assessment on a regular basis. Our plan will be reviewed and will be a standing agenda item at our quarterly Regional meetings.

Why is this the best plan to cover the Regional Committee? We believe merging will serve us better as a region. We are a largely rural area, with limited resources. We intend to work collaboratively to address our Region's housing needs.

If you are maintaining multiple coordinated assessment systems within your Regional Committee, how will these systems interact with each other? Can referrals be made across boundaries? N/A

Please describe how you foresee the Regional Committee's coordinated assessment process changing in the future, including timelines and finding grantees who will cover the entire region. It is anticipated that there will a great deal of issues to work out. One could expect that former committee collaborations will remain stronger than the new, larger committee structure. I anticipate that we will have difficulty finding a grantee with the interest and capactiy to cover the entire region.

If the Regional Committee includes communities that have been inactive with the BoS CoC, please describe the region's plan to engage leaders and agencies in these communities in the coordinated

assessment process.

We will maintain e-mail lists and share information about meetings, including minutes and agendas. Periodically throughout the year, depending on the work demands of those serving in leadership positions, targeted recruitment occurs with key community partners to reintegrate disengaged partners and solicit new partnerships.

Coordinated Assessment Outcomes

How will outcome data be gathered for quarterly reports to the CoC? Each participating agency will gather their quarterly information and forward it to a point person who will then compile all information to complete the quarterly outcome report.

Who will be in charge of submitting, correcting, and reviewing outcomes? There will be a point person for each participating agency and the Coordinated Assessment lead will coordinate the collective data.

How are finalized coordinated assessment outcome reports presented to the community? The Regional Committee will be provided with a copy of the CA Quaterly Outcome report that is provided by the Balance of State office.

Please describe how your Regional Committee will use coordinated assessment outcome data, including identifying gaps, changing processes, setting goals, advocating for resources, funding new ESG and CoC grantees, etc.

We will use this data and information to inform future funding decisions and will do so through group committee discussion.

Grievances

Agency Grievance Policy

Please complete the following policy with details from your Regional Committee:

If a provider declines a client referral, that provider should work with the community to refer the client to the next appropriate housing provider and/or emergency shelter to ensure that the household has a safe place to sleep that night.

Programs should only reject referrals in rare instances. Providers may decline 1 out of 10 referrals in a month without a meeting. However, if a program declines more referrals than this they will need to meet with the CA Sub-Committee to discuss the issue(s) that result in referrals being declined.

Providers are expected to submit a written reason for the denial to the CA Sub-Committee. Providers may decline 1 out of 10 referrals in a month without a meeting. However, if a program declines more referrals than this they will need to meet with CA Sub-Committee to discuss the issue(s) that result in referrals being declined.

For all other grievances, providers must email a detailed grievance to CA Lead within 10 days of the adverse action/decision. The CA Lead will schedule a hearing within 5 days of receiving the grievance and render a decision within 5 days following the hearing. If grievances cannot be resolved at the local level, they may be referred to the CAC for review.

Individual Grievance Policy

Please complete the following policy with details from your Regional Committee:

If a household does not agree with a referral or the assessment process, the coordinated assessment site will attempt to make another appropriate referral based on the household's needs and the housing resources available.

If the household remains unsatisfied, they may file a grievance with the Participating Agency, , or Ca Lead, either verbally or in writing, within 3 days of the attempted referral. CA Lead will respond within 3 days. If the household does not agree with this local decision, an appeal will be submitted to the CAC for review.

Subpopulations

Describe the process by which your Regional Committee addresses the special resources/issues for the following subpopulations.

Chronically Homeless

Chronically homeless are given priority. DSS is able to access emergency assistance funding to help with housing expenses. We also provide job search and employment services.

Unaccompanied Youth (up to age 24)

Our RC has a strong partnership with local county department of social services and we intend to partner with them to address the needs of unaccompanied youth. This partnership could be a placement resource, if the youth needs to be in foster care, it could be searching for potential family members and doing some mediation with regard to future placement and care.

Veterans: Each Regional Committee should also be developing a Regional Veteran Plan to End Homelessness, also due April 1.



