

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: Uni5

Counties Served: Alexander, Burke, Caldwell, Catwaba, McDowell

For the following please provide name and email address.

Primary Authors of the Plan: Christopher Hoover (chris@meetingplacemission.org)

Regional Lead: Teena Willis (twillis@partnersbhm.org)

Elected Coordinated Assessment Lead: Christopher Hoover (chris@meetingplacemission.org)

Other Coordinated Assessment Contact(s) for the Region: Casey McCall (casey.mccall@uss.salvationarmy.org), Crystal Sweatt (crystal@mcdowellmission.com)

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
Burke United Christian Ministries	Burke	<input type="checkbox"/> Families Only <input type="checkbox"/> Single Men <input type="checkbox"/> Single Women <input checked="" type="checkbox"/> All	Days: Mondays - Fridays Times: 9:00 a.m. - 4:00 p.m.	2	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
House of Refuge Ministries	Burke	<input type="checkbox"/> Families Only <input checked="" type="checkbox"/> Single Men <input type="checkbox"/> Single Women <input type="checkbox"/> All	Days: Mondays - Fridays Times: 4:30 a.m. - 7:30 p.m.	2	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
The Meeting Place Mission	Burke	<input type="checkbox"/> Families Only <input type="checkbox"/> Single Men <input type="checkbox"/> Single Women <input checked="" type="checkbox"/> All	Days: Mondays - Fridays Times: 9:00 a.m. - 4:00 p.m.	5	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
McDowell Mission Ministries	McDowell	<input type="checkbox"/> Families Only <input type="checkbox"/> Single Men <input type="checkbox"/> Single Women <input checked="" type="checkbox"/> All	Days: Mondays - Fridays Times: 8:00 a.m. - 5:00 p.m.	2	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Dulatown Outreach Center	Caldwell	<input checked="" type="checkbox"/> Families Only <input type="checkbox"/> Single Men <input checked="" type="checkbox"/> Single Women <input type="checkbox"/> All	Days: Mondays - Fridays Times: 9:00 a.m - 6:00 p.m.	3	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Yokefellow Ministries	Caldwell	<input type="checkbox"/> Families Only <input type="checkbox"/> Single Men <input type="checkbox"/> Single Women <input checked="" type="checkbox"/> All	Days: Mondays - Fridays Times: 8:00 a.m. - 5:00 p.m.	2	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Family Care Center	Catawba	<input checked="" type="checkbox"/> Families Only <input type="checkbox"/> Single Men <input type="checkbox"/> Single Women <input type="checkbox"/> All	Days: Tuesdays - Saturdays Times: 10:30 a.m. - 6:00 p.m.	2	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

The Salvation Army	Catawba	<input type="checkbox"/> Families Only <input type="checkbox"/> Single Men <input type="checkbox"/> Single Women <input checked="" type="checkbox"/> All	Days: Mondays - Saturdays Times: 9:00 a.m. - 6:00 p.m.	2	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Greater Hickory Cooperative Christian Ministry	Catawba	<input type="checkbox"/> Families Only <input type="checkbox"/> Single Men <input type="checkbox"/> Single Women <input checked="" type="checkbox"/> All	Days: Mondays - Thursdays Times: 8:30 a.m. - 4:00 p.m.	2	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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.

Households presenting homeless overnight or on weekends to listed agencies will receive shelter services regardless of administering the Prevention and Diversion Screen (PDS), but shelter services will be dependent on shelter entry requirements; however, the PDS will not be administered until available days/times listed for agencies to administer the PDS with the household occur. Households in need of emergency services may also utilize 24-hour crisis telephone services via United Way for referrals to emergency shelters. Invitation to United Way for involvement in Coordinated Assessment will occur in attempt to provide 24-hour administering of PDS.

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
Options	Burke	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
New HOPE of McDowell	McDowell	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Shelter Home of Caldwell County	Caldwell	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Family Guidance Center	Catawba	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
		<input type="checkbox"/> Yes <input type="checkbox"/> 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.

If persons present to the referring agency and do not advise of the need for domestic violence (DV) resources initially, if in agreement with Coordinated Assessment, the administering agency will complete the Release of Information (ROI) for the Uni5 and the PDS up to question number # two (2) regarding DV. Upon identifying the need for DV resources, the agency administering the PDS will assist households in contacting DV resources by telephone to provide referral. The agency administering the PDS will preferably provide the ROI and the PDS, by e-mail or fax, to the referred-to DV resource. If provision of the ROI and the PDS to the referred-to DV resource is not available by e-mail or fax due to technology or

location limitations, the referring agency will provide households a duplicate copy of the ROI and the PDS for the household to present to referred-to DV resource.

If participant(s) advise of the need for DV resources initially, the Coordinated Assessment process will not proceed and the referring agency will assist households in contacting DV resources by telephone to provide the referral, again, using the preferred method of providing the ROI and the PDS by e-mail or fax to the referred-to DV resource. If the referring agency is unable to provide the ROI and the PDS to the referred-to DV resource by e-mail or fax, the referring agency will provide participant(s) a duplicate copy of the ROI and the PDS for the participant(s) to present to the referred-to DV resource. Tracking of program placement for referred participant(s) will occur with contact by either the referring and/or referred-to agency via e-mail, telephone, and/or interpersonal methods for verification while recording successful/unsuccessful placements on the completed PDS documenting ONLY the first two (2) letters of the first and last name of participant(s) as well as an identifying number associated with the participant(s).

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.
N/A

Does your region need assistance in engaging domestic violence agencies? Yes No
If yes, please provide the name, email and phone number of the person to contact: 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? Yes No
If yes, please describe the mediation services provided: Basic mediation services are offered and provided by agencies administering the PDS as needed and possibly on a limited basis due to time constraints of agency staff. Mediation training for agencies administering the PDS will be discussed during the upcoming Coordinated Assessment Subcommittee in August of 2017.

Are financial assistance resources available for diversion? Yes No
If yes, how much financial assistance and what sources of funding are used for this? Burke United Christian Ministries provides an estimated \$150 monthly for rental assistance and utility assistance. The Department of Social Services provides rental assistance and utility assistance with amounts and types depending on the county. Greater Hickory Cooperative Christian Ministry provides an estimated \$150 monthly for rental assistance and utility assistance as well. The Salvation Army and Eastern Cooperative Christian Ministry provide rental and utility assistance with unknown amounts and types.

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

Agency	Count(ies) Served	Participate in Coordinated Assessment	Services Provided
Burke United Christian Ministries	Burke	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Mediation <input checked="" type="checkbox"/> Financial Assistance
Department of Social Services	Alexadnder, Burke, Caldwell, Catawba,	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Mediation <input checked="" type="checkbox"/> Financial

	McDowell		Assistance
House of Refuge Ministries	Burke	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Mediation <input type="checkbox"/> Financial Assistance
The Meeting Place Mission	Burke	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Mediation <input type="checkbox"/> Financial Assistance
McDowell Mission Ministries	McDowell	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Mediation <input type="checkbox"/> Financial Assistance
Greater Hickory Cooperative Christian Ministry	Catawba	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Mediation <input checked="" type="checkbox"/> Financial Assistance
The Salvation Army	Catawba	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Mediation <input checked="" type="checkbox"/> Financial Assistance
Eastern Catawba Cooperative Christian Ministry	Catawba	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Mediation <input checked="" type="checkbox"/> Financial Assistance
Dulatown Outreach Center	Caldwell	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Mediation <input type="checkbox"/> Financial Assistance
Yokefellow Ministries	Caldwell	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Mediation <input type="checkbox"/> Financial Assistance
Partners Behavioral Health Management	Burke, Catawba	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Mediation <input type="checkbox"/> Financial Assistance
The Family Care Center	Catawba	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Mediation <input type="checkbox"/> Financial 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.

Agencies not administering the PDS will contact agencies administering the PDS by telephone and/or e-mail to advise of the PDS referral. Agencies administering the PDS will administer the PDS with the participant(s) by telephone if possible and if transportation is limited for the participant(s). If telephone access is not available for the participant(s) nor the agency administering the PDS, referring agencies will provide contact information for the referred-to agencies with days and hours of referred-to agency availability. The agency administering the PDS will preferably provide the ROI and the PDS, by e-mail or fax, to the referred-to agency. If provision of the ROI and the PDS to the referred-to agency is not available by e-mail or fax due to technology or location limitations, the referring agency will provide participant(s) a duplicate copy of the ROI and the PDS for the participant(s) to present to referred-to agency. Tracking of program placement for referred participant(s) will occur with contact by either the

referring and/or referred-to agency via e-mail, telephone, and/or interpersonal methods for verification while recording successful/unsuccessful placements on the completed PDS.

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
House of Refuge Ministries	Burke	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Families Only <input checked="" type="checkbox"/> Single Men <input type="checkbox"/> Single Women <input type="checkbox"/> All	Identification required. Must not be intoxicated. No registered sex offenders.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
The Meeting Place Mission	Burke	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Families Only <input type="checkbox"/> Single Men <input type="checkbox"/> Single Women <input checked="" type="checkbox"/> All	Identification required. Must not be intoxicated. No registered sex offenders.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
McDowell Mission Ministries	McDowell	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Families Only <input type="checkbox"/> Single Men <input type="checkbox"/> Single Women <input checked="" type="checkbox"/> All	Identification required. Must not be intoxicated. No registered sex offenders.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Dulatown Outreach Center	Caldwell	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Families Only <input type="checkbox"/> Single Men <input checked="" type="checkbox"/> Single Women <input type="checkbox"/> All	Identification required. Must not be intoxicated. No registered sex offenders.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Yokefellow Ministries	Caldwell	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Families Only <input type="checkbox"/> Single Men <input type="checkbox"/> Single Women <input checked="" type="checkbox"/> All	Identification required. Must not be intoxicated. No registered sex offenders.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

Family Care Center	Catawba	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Families Only <input type="checkbox"/> Single Men <input type="checkbox"/> Single Women <input type="checkbox"/> All	Identification required. Must not be intoxicated. No registered sex offenders.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
The Salvation Army	Catawba	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Families Only <input type="checkbox"/> Single Men <input type="checkbox"/> Single Women <input checked="" type="checkbox"/> All	Identification required. Must not be intoxicated. No registered sex offenders.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> 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.

Agencies administering the PDS will contact the referred-to agency by telephone and/or e-mail to advise of the shelter referral if diversion for participant(s) is not possible. If referring agencies are not able to contact the referred-to agency instantly, referring agencies will provide contact information for the referred-to agencies with days and hours of referred-to agency availability. The agency administering the PDS will preferably provide the ROI and the PDS, by e-mail or fax, to the referred-to agency. If provision of the ROI and the PDS to the referred-to agency is not available by e-mail or fax due to technology or location limitations, the referring agency will provide participant(s) a duplicate copy of the ROI and the PDS for the participant(s) to present to referred-to agency. Tracking of program placement for referred participant(s) will occur with contact by either the referring and/or referred-to agency via e-mail, telephone, and/or interpersonal methods for verification while recording successful/unsuccessful placements on the completed PDS.

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?

Shelters are present within every county within the Uni5 with the exception of Alexander County. As Alexander County utilizes Catawba County shelters, verification will be made to assure Alexander County is aware and has access to shelter services by accessing referral services such as United Way. If particular populations; e.g. sex offenders, do not have access to shelters within the Uni5, agencies administering the PDS will attempt to locate shelter services for the participant(s) within or external to the Uni5. Recordkeeping of particular populations encountered who do not have access to shelters within the Uni5 will be documented and submitted to Coordinated Assessment Leads as these instances occur.

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.

Shelters within the Uni5 will provide admission requirements to Regional Coordinated Assessment Lead to be documented on Google Docs as the document will be accessible by shelters in the Uni5 for informative purposes regarding shelter admission requirements. As agencies administering the PDS contact local shelters, if the local shelters are full the agency administering the PDS will attempt to contact other shelters within the Uni5 for program placement. Agencies administering the PDS will further provide supplementary information regarding shelters within the Uni5 to the household. Hotel/motel vouchers are very limited within the Uni5 and are only provided on a limited basis by local ministries. Uni5 will discuss how to expand availability of hotel/motel vouchers during the Coordinated Assessment Subcommittee in August of 2017.

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
Asheville Buncombe Community Christian Ministry (Veterans)	Burke, Caldwell, Catawba, McDowell	<input type="checkbox"/> Families Only <input type="checkbox"/> Single Men <input type="checkbox"/> Single Women <input checked="" type="checkbox"/> All	Days: Mondays - Fridays Times: 8:00 a.m. - 5:00 p.m.	3	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Options	Burke	<input type="checkbox"/> Families Only <input type="checkbox"/> Single Men <input type="checkbox"/> Single Women <input checked="" type="checkbox"/> All	Days: Mondays - Sundays Times: 8:00 a.m. - 11:00 p.m.	3	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
House of Refuge Ministries	Burke	<input type="checkbox"/> Families Only <input checked="" type="checkbox"/> Single Men <input type="checkbox"/> Single Women <input type="checkbox"/> All	Days: Mondays - Sundays Times: 4:30 p.m. - 7:30 p.m.	2	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Partners Behavioral Health Management	Burke, Catawba	<input type="checkbox"/> Families Only <input type="checkbox"/> Single Men <input type="checkbox"/> Single Women <input checked="" type="checkbox"/> All	Days: Mondays - Fridays Times: 8:00 a.m. - 5:00 p.m.	2	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
The Meeting Place Mission	Burke	<input type="checkbox"/> Families Only <input type="checkbox"/> Single Men <input type="checkbox"/> Single Women <input checked="" type="checkbox"/> All	Days: Mondays - Fridays Times: 9:00 a.m. - 4:00 p.m.	2	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
RHA Behavioral Health	McDowell	<input type="checkbox"/> Families Only <input type="checkbox"/> Single Men <input type="checkbox"/> Single Women <input checked="" type="checkbox"/> All	Days: Mondays - Fridays Times: 9:00 a.m. - 5:00 p.m.	2	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
McDowell Mission Ministries	McDowell	<input type="checkbox"/> Families Only <input type="checkbox"/> Single Men <input type="checkbox"/> Single Women <input checked="" type="checkbox"/> All	Days: Mondays - Fridays Times: 8:00 a.m. - 5:00 p.m.	2	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

Dulawtown Outreach Center	Caldwell	<input checked="" type="checkbox"/> Families Only <input type="checkbox"/> Single Men <input checked="" type="checkbox"/> Single Women <input type="checkbox"/> All	Days: Mondays - Fridays Times: 9:00 a.m. - 6:00 p.m.	2	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Yokefellow Ministries	Caldwell	<input type="checkbox"/> Families Only <input type="checkbox"/> Single Men <input type="checkbox"/> Single Women <input checked="" type="checkbox"/> All	Days: Mondays - Fridays Times: 8:00 a.m. - 5:00 p.m.	2	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Vaya Health	Alexander, Caldwell, McDowell	<input type="checkbox"/> Families Only <input type="checkbox"/> Single Men <input type="checkbox"/> Single Women <input checked="" type="checkbox"/> All	Days: Mondays - Fridays Times: 8:00 a.m. - 5:00 p.m.	2	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Family Care Center	Catawba	<input checked="" type="checkbox"/> Families Only <input type="checkbox"/> Single Men <input type="checkbox"/> Single Women <input type="checkbox"/> All	Days: Tuesdays - Saturdays Times: 10:30 a.m. - 6:00 p.m.	2	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
The Salvation Army	Catawba	<input type="checkbox"/> Families Only <input type="checkbox"/> Single Men <input type="checkbox"/> Single Women <input checked="" type="checkbox"/> All	Days: Mondays - Saturdays Times: 9:00 a.m. - 6:00 p.m.	2	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Community Link (Veterans)	Catawba	<input type="checkbox"/> Families Only <input type="checkbox"/> Single Men <input type="checkbox"/> Single Women <input checked="" type="checkbox"/> All	Days: Mondays - Fridays Times: 8:00 a.m. - 5:00 p.m.	2	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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.

Shelters within the Uni5 are involved in Coordinated Assessment and do administer the VI-SPDAT and as any shelter not involved in Coordinated Assessment is identified, inquiries will be made by Coordinated Assessment Leads for involvement.

How long will your community wait to administer the VI-SPDAT? 15 days

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.

The Coordinated Assessment Subcommittee will provide information to local ministries, the Department of Public Safety, the Department of Social Services, etc. for these entities to advise unsheltered households of Coordinated Assessment and involved agencies. Flyers will also be developed and placed in locations frequented by unsheltered households raising awareness to Coordinated Assessment and involved agencies. The Point-in-Time Count also provides outreach to unsheltered households and will further provide an opportunity to advise unsheltered households of Coordinated Assessment.

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 local domestic violence agencies participating in administering the VI-SPDAT and making housing referrals? Yes No

If so, how is the safety and confidentiality of households taken into account? DV agencies will provide the first two (2) letters of the first and last name of participant(s) as well as an identifying number associated with the participant(s) which is recorded on the VI-SPDAT as well as the corresponding waiting lists. The identifying number allows the participant(s) to be contacted by the DV agencies if housing programs are available by providing agencies. If participant(s) receive services from housing programs not providing DV services, the agency providing the housing program will advise the participant(s) of privacy preferences within NC HMIS.

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? Yes 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
Asheville Buncombe Community Christian Ministry (Veterans)	Burke, Caldwell, Catawba, McDowell	<input type="checkbox"/> PSH <input checked="" type="checkbox"/> RRH <input type="checkbox"/> TH <input checked="" type="checkbox"/> Other: SSVF	<input type="checkbox"/> Families Only <input type="checkbox"/> Single Men <input type="checkbox"/> Single Women <input checked="" type="checkbox"/> All	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Partners Behavioral Health Management	Catawba, Burke	<input checked="" type="checkbox"/> PSH <input type="checkbox"/> RRH <input type="checkbox"/> TH <input type="checkbox"/> Other:	<input type="checkbox"/> Families Only <input type="checkbox"/> Single Men <input type="checkbox"/> Single Women <input checked="" type="checkbox"/> All	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
The Meeting Place Mission	Burke	<input type="checkbox"/> PSH <input checked="" type="checkbox"/> RRH <input checked="" type="checkbox"/> TH <input type="checkbox"/> Other:	<input type="checkbox"/> Families Only <input type="checkbox"/> Single Men <input type="checkbox"/> Single Women <input checked="" type="checkbox"/> All	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
McDowell Mission Ministries	McDowell	<input type="checkbox"/> PSH <input checked="" type="checkbox"/> RRH <input checked="" type="checkbox"/> TH <input checked="" type="checkbox"/> Other: Targeting Key	<input type="checkbox"/> Families Only <input type="checkbox"/> Single Men <input type="checkbox"/> Single Women <input checked="" type="checkbox"/> All	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
RHA Behavioral Health	McDowell	<input checked="" type="checkbox"/> PSH <input type="checkbox"/> RRH <input type="checkbox"/> TH <input type="checkbox"/> Other:	<input type="checkbox"/> Families Only <input type="checkbox"/> Single Men <input type="checkbox"/> Single Women <input checked="" type="checkbox"/> All	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Shelter Home of Caldwell County	Caldwell	<input type="checkbox"/> PSH <input checked="" type="checkbox"/> RRH <input checked="" type="checkbox"/> TH <input type="checkbox"/> Other:	<input checked="" type="checkbox"/> Families Only <input type="checkbox"/> Single Men <input checked="" type="checkbox"/> Single Women <input type="checkbox"/> All	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Vaya Health	Alexander, Caldwell, McDowell	<input checked="" type="checkbox"/> PSH <input type="checkbox"/> RRH <input type="checkbox"/> TH <input type="checkbox"/> Other:	<input type="checkbox"/> Families Only <input type="checkbox"/> Single Men <input type="checkbox"/> Single Women <input checked="" type="checkbox"/> All	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Dulatown Outreach Center	Caldwell	<input type="checkbox"/> PSH <input type="checkbox"/> RRH <input checked="" type="checkbox"/> TH <input type="checkbox"/> Other:	<input checked="" type="checkbox"/> Families Only <input type="checkbox"/> Single Men <input checked="" type="checkbox"/> Single Women <input type="checkbox"/> All	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

Community Link (Veterans)	Catawba	<input type="checkbox"/> PSH <input type="checkbox"/> RRH <input type="checkbox"/> TH <input checked="" type="checkbox"/> Other: SSVF	<input type="checkbox"/> Families Only <input type="checkbox"/> Single Men <input type="checkbox"/> Single Women <input checked="" type="checkbox"/> All	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
The Salvation Army	Catawba	<input type="checkbox"/> PSH <input type="checkbox"/> RRH <input checked="" type="checkbox"/> TH <input type="checkbox"/> Other:	<input type="checkbox"/> Families Only <input checked="" type="checkbox"/> Single Men <input type="checkbox"/> Single Women <input type="checkbox"/> All	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Safe Harbor Rescue Mission	Caldwell	<input type="checkbox"/> PSH <input type="checkbox"/> RRH <input checked="" type="checkbox"/> TH <input type="checkbox"/> Other:	<input checked="" type="checkbox"/> Families Only <input type="checkbox"/> Single Men <input checked="" type="checkbox"/> Single Women <input type="checkbox"/> All	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Sipe's Orchard Home (Youth)	Catawba	<input type="checkbox"/> PSH <input type="checkbox"/> RRH <input checked="" type="checkbox"/> TH <input type="checkbox"/> Other:	<input type="checkbox"/> Families Only <input checked="" type="checkbox"/> Single Men <input checked="" type="checkbox"/> Single Women <input type="checkbox"/> All	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Family Care Center	Catawba	<input type="checkbox"/> PSH <input checked="" type="checkbox"/> RRH <input type="checkbox"/> TH <input type="checkbox"/> Other:	<input checked="" type="checkbox"/> Families Only <input type="checkbox"/> Single Men <input type="checkbox"/> Single Women <input type="checkbox"/> All	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

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.

The agency administering the VI-SPDAT will provide the ROI and the VI-SPDAT, by e-mail or fax ONLY, or interpersonal, to the referred-to housing program in which the referred-to program will place the participant(s) on the appropriate housing program waiting list. Tracking of program placement for referred participant(s) will occur with contact by either the referring and/or referred-to agency via e-mail, telephone, and/or interpersonal methods for verification while recording successful/unsuccessful placements on the completed VI-SPDAT for the referring agency and on the appropriate housing waiting list for the referred-to agency.

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? The Regional Committee's waiting lists are stored securely on Google Drive.

Who manages the Regional Committee's waitlist? The Regional Committee's waiting lists, separated by county, are managed by the agencies providing housing programs, i.e. Rapid Re-housing, Transitional Housing, Permanent Supportive Housing, and the Coordinated Assessment Subcommittee.

Who has access to the Regional Committee's waitlist? The Coordinated Assessment Subcommittee and the agencies providing housing programs, i.e. Transitional Housing, Rapid Re-housing, Permanent Supportive Housing, will have access to the Regional Committee's waiting lists which will be separated by county.

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/>. An ROI developed for the Uni5 will be provided to participant(s) involved in Coordinated Assessment requesting consent for agency collaboration and informing participant(s) the purpose of Coordinated Assessment, the counties and agencies involved, how their information will be used and stored, and the rights of the participant(s).

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? If participant(s) refuse to be involved in Coordinated Assessment, agencies will document ONLY the first

two (2) letters of the first and last name of participant(s) as well as an identifying number associated with the participant(s) which is recorded on the VI-SPDAT and used on the corresponding waiting lists.

How will the Regional Committee confidentially and safely track survivors of domestic violence on the waitlist and prioritize them for housing? DV agencies will provide the first two (2) letters of the first and last name of participant(s) as well as an identifying number associated with the participant(s) which is recorded on the VI-SPDAT as well as used on the corresponding waiting lists. The identifying number allows the participant(s) to be contacted by the DV agencies if housing programs are available by providing agencies. If participant(s) receive services from housing programs not providing DV services, the agency providing the housing program will advise the participant(s) of privacy preferences within NC HMIS. Prioritization will be discussed by the Coordinated Assessment Subcommittee in August of 2017 to incorporate prioritization of domestic violence into housing program waiting lists.

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 be held bi-monthly (every other month) by the Coordinated Assessment Subcommittee. Invitations to the Coordinated Assessment Subcommittee will be made to referring agencies and referred-to housing programs. Case conferencing will consist of reviewing waiting lists for available housing programs, i.e. Transitional Housing, Rapid Re-housing, and Permanent Supportive Housing to assess the availability of housing programs and the prioritization of participant(s) on the waiting lists.

How does the Regional Committee ensure that the most vulnerable households get housing resources first? Waiting lists will include categories of prioritization including VI-SPDAT score, length of time homeless, unaccompanied youth, domestic violence, and unsheltered primarily. Additional prioritization will involve those who are families, disabled, and seniors.

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: Providers rejecting any referral will submit a reason for denial via e-mail to the referring agency as well as to the Regional Coordinated Assessment Lead and Coordinated Assessment Leads . Please outline the specific criteria under which a program may reject a referral (refer to the [CA Written Standards](#) for more information). Providers rejecting a referral shall only do so due to limited availability in regards to capacity and/or funding for program, established program entry requirements, i.e. denial of registered sex offenders due to child residency, program-specific target populations such as Permanent Supportive Housing only accepting chronically homeless, etc., and/or prior agency services provided to household which resulted in program suspension.

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? If the household does not accept a referral or if a provider declines a referral, following discussion with household and/or provider to attempt resolve, the referring agency will attempt to locate emergency shelter services for the household as needed reviewing admission requirements for emergency shelters within the Uni5 on Google Docs attempting to contact appropriate emergency shelters to inquire of availability. The

referring agency will document the declination in the corresponding column on the appropriate waiting list and secure the household remains, in same order, on the appropriate waiting lists until satisfactory housing program services are available and provided.

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? Case conferencing will be held bi-monthly (every other month) by the Coordinated Assessment Subcommittee for the purpose of reviewing waiting lists and will include housing programs present providing household information or requests for contact by housing programs not present in regards to household information. Attempts for follow-up with the household on waiting lists will be documented in designated columns on appropriate waiting lists.

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 with unsheltered households on waiting lists will occur initially at case conferencing which will be held bi-monthly (every other month) by the Coordinated Assessment Subcommittee. Efforts to provide follow-up at least every thirty (30) days will be discussed at the Coordinated Assessment Subcommittee in August of 2017. Attempts for follow-up with the unsheltered household on waiting lists will be documented in designated columns on appropriate waiting lists.

What is your policy for taking a household off of the list? Households will only be removed with approval by the Coordinated Assessment Subcommittee during case conferencing and following the minimum follow-up attempts by housing programs occurring without contact, households stating no longer needing services, or as households receive services from housing programs associated with waiting lists. How many attempts do you make to contact? Housing programs will attempt contact to households on waiting lists for housing programs at minimum, for six (6) months, during case conferencing including assertive approaches, i.e. households providing information directly, i.e. telephone, e-mail, etc., attempts to contact any emergency contact(s) listed for households, NC HMIS ClientPoint review to inquire of services provided by another agency, external agency collaboration, street outreach, etc., for the purpose of ensuring household information is current and/or is in continued need of services. 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? The Coordinated Assessment Subcommittee will review and approve removal of households from waiting lists during case conferencing to be held bi-monthly (every other month).

System Management and Oversight

Transportation

Are people required to travel to different locations to access programs and services in your community?
 Yes No

Are transportation funds/resources provided? Yes No

If yes, please describe resources, to whom they are available, and how and when they are accessed. Greenway Public Transportation is available publicly within the Uni5; however, "Dial-a-Ride" van services as well as fixed bus routes vary by county in regards to the availability of services provided. "Dial-a-Ride" is available in Burke County with fixed bus routes present in Alexander and Catawba. Greater Hickory Cooperative Christian Ministry provides vouchers for Greenway Public transportation services in Catawba

County. McDowell Transit via the Department of Social Services offers transportation assistance based on availability and requires completing application for services and providing appropriate notice for transportation services. Fare vouchers for public transportation for households will be discussed by Continuum of Care (CoC) as funds may be available for provision of transportation assistance. Agencies involved in Coordinated Assessment further offer limited transportation services for households in programs as needed and as available. Supplementary transportation options may include taxi/cab services and/or family/friend support.

What happens if a household is unable to access transportation resources or any other transportation? Transportation requests may occur by the referring agency or the agency referred to, to assist and/or to provide transportation for households unable to access transportation. Transportation requests may also occur to emergency services depending on circumstance severity. Agencies administering the PDS will administer the PDS with the household by telephone if possible and if transportation is limited for the household. If telephone access is not available for the household nor the agency administering the PDS, referring agencies will provide contact information for the referred-to agencies with days and hours of referred-to agency availability. Further efforts will be discussed by the Coordinated Assessment Subcommittee in August of 2017 to address the "gap" of transportation.

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.) Coordinated Assessment is of focus during local and regional committees and subcommittees. Agencies in attendance are provided Coordinated Assessment updates as well as being informed of opportunities with the Coordinated Assessment Exchange as well as the Coordinated Assessment Subcommittee. Coordinated Assessment will further be of focus during public presentations by agencies while discussing the services the agencies provide. As Coordinated Assessment progresses, communication by means of presentation and materials to identified agencies and the community will be performed to provide understanding of Coordinated Assessment and request of involvement.

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 Coordinated Assessment Subcommittee will provide information to local ministries, the Department of Public Safety, the Department of Social Services, etc. for these entities to advise households who are homeless or at-risk of homelessness about Coordinated Assessment. Flyers will also be developed and placed in locations frequented by households who are homeless or at-risk of homelessness raising awareness to Coordinated Assessment. The Point-in-Time Count also provides outreach to households who are homeless or at-risk of being homeless and will further provide an opportunity to advise of Coordinated Assessment.

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. Coordinated Assessment documentation will be provided in large print as needed as well as by speech in-person or via telephone. Discussion will occur by the Coordinated Assessment

Subcommittee in August of 2017 to further identify and resolve barriers for accessibility to Coordinated Assessment for persons with disabilities.

Is there an access point in your community accessible to people who use wheelchairs or have limited mobility? Agencies within the Uni5 are accessible to persons using wheelchairs either by available ramps, elevators, or the locations of agencies being on ground-level. If persons with disabilities are limited to Coordinated Assessment accessibility, administering agencies may be requested to accommodate households by an on-site visit or via telephone.

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. N/A

What steps will the Regional Committee take to help people with Limited English Proficiency or difficulty reading access the coordinated assessment system? Coordinated Assessment documentation will be provided in English as well as languages common to the Uni5 including Spanish and Hmong. Discussion will occur by the Coordinated Assessment Subcommittee in August of 2017 to further identify and resolve language or literacy barriers for accessibility to Coordinated Assessment.

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.

Coordinated Assessment will be overseen by the Regional Coordinated Assessment Lead and implemented and managed by designated Coordinated Assessment Leads within responsible count(ies) however; the Coordinated Assessment Subcommittee will allow collaboration as an entire region, referred to as the Uni5.

Why is this the best plan to cover the Regional Committee? This approach to Coordinated Assessment allows individualized focus within count(ies) and avoids any oversight by the Regional Coordinated Assessment Lead due to limitations of locations and/or availability. This approach also promotes collaboration between Coordinated Assessment Leads and the Coordinated Assessment Subcommittee to share strengths and challenges of current Coordinated Assessment practices.

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? Coordinated Assessment Leads will be designated by county to provide specific focus to the responsible counties; however, regional collaboration will still occur including referrals, waiting lists, and grievances by the Coordinated Assessment Subcommittee.

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. As Coordinated

Assessment progresses, awareness of and collaboration with, involved and uninvolved agencies across the region will provide an opportunity to better understand local resources and also to utilize regional resources. Coordinated Assessment will further identify and address "gaps" previously unaware or ignored for households accessing services. Coordinated Assessment will assure households are not neglected and will provide much needed accountability to referring and referred-to agencies. As alliances increase and strengthen across the Uni5, a collaborative approach will be noticed and funding may be available in counties not previously available in by grantees.

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.

The Uni5 and Coordinated Assessment Subcommittee will attempt to identify communities that have been inactive within the BoS CoC and attempt to provide explanation of Coordinated Assessment and request involvement to not only the Coordinated Assessment Subcommittee, but also to Uni5 and BoS CoC. Alexander County, for example, is limited in services provision with only Vaya Health; however, efforts in establishing a Coordinated Assessment Lead for Alexander County via Vaya Health will be attempted and designated by the Coordinated Assessment Subcommittee in August of 2017. Presently, Catawba County is accepting Coordinated Assessment referrals from Alexander County.

Coordinated Assessment Outcomes

How will outcome data be gathered for quarterly reports to the CoC? Coordinated Assessment Leads will report Outcome Reports for designated count(ies) to the Regional Coordinated Assessment Lead utilizing tally sheets provided by agencies administering the PDS and/or VI-SPDAT. The Regional Coordinated Assessment Lead will provide submission for the Uni5 as the information is obtained by the Coordinated Assessment Leads.

Who will be in charge of submitting, correcting, and reviewing outcomes? The Regional Coordinated Assessment Lead and Coordinated Assessment Leads will be responsible for submitting, correcting, and reviewing outcomes.

How are finalized coordinated assessment outcome reports presented to the community? Coordinated Assessment Outcome Reports are presented both to local and regional committees and subcommittees, including Continuum(s) of Care, the Coordinated Assessment and Veterans Subcommittee, and the Uni5 Regional Committee. Coordinated Assessment Outcome Reports are also distributed via e-mail to agencies involved in and not involved in Coordinated Assessment. As Outcome Reports improve in accuracy, discussion by the Coordinated Assessment Subcommittee will occur further reviewing opportunities to present Outcome Reports to the community.

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.

The Uni5 will use Coordinated Assessment Outcome Reports to reflect successes as well as identify needs in the provision of services. Regional and local "gaps" as well as present agency practices will also be more apparent with statistics and require accountability to resolve. Advocacy regarding funding needed for improved diversion efforts will also prove beneficial with recorded statistics. Successful utilization of referrals and waiting lists as well as program placement will be of focus when requesting funding in areas of need, i.e. Rapid Re-housing, Permanent Supportive Housing, etc. The Uni5 will also use Coordinated Assessment Outcome Reports for presentations to motivate agencies not involved in

Coordinated Assessment as well as the community, to be involved.

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 Regional Coordinated Assessment Lead and Coordinated Assessment Leads to discuss the issue(s) that result in referrals being declined.

Providers are expected to submit a written reason for the denial to the referring agency as well as the Regional Coordinated Assessment Lead and Coordinated Assessment Leads. 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 Regional Coordinated Assessment Lead and Coordinated Assessment Leads to discuss the issue(s) that result in referrals being declined.

For all other grievances, providers must email a detailed grievance to the Regional Coordinated Assessment Lead and Coordinated Assessment Leads within 10 days of the adverse action/decision. The Regional Coordinated Assessment Lead and Coordinated Assessment Leads will schedule a hearing within 3 to 5 business days of receiving the grievance and render a decision within 7 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 Regional Coordinated Assessment Lead, the Coordinated Assessment Leads, or the Coordinated Assessment Subcommittee, either verbally or in writing, within 10 days of the attempted referral. The Regional Coordinated Assessment Lead, Coordinated Assessment Leads, or the Coordinated Assessment Subcommittee will respond within 3 to 5 business 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 will be presented as of the utmost priority for referred-to services, i.e. Emergency Shelter, Transitional Housing, Rapid Re-housing, and Permanent Supportive Housing, to the Coordinated

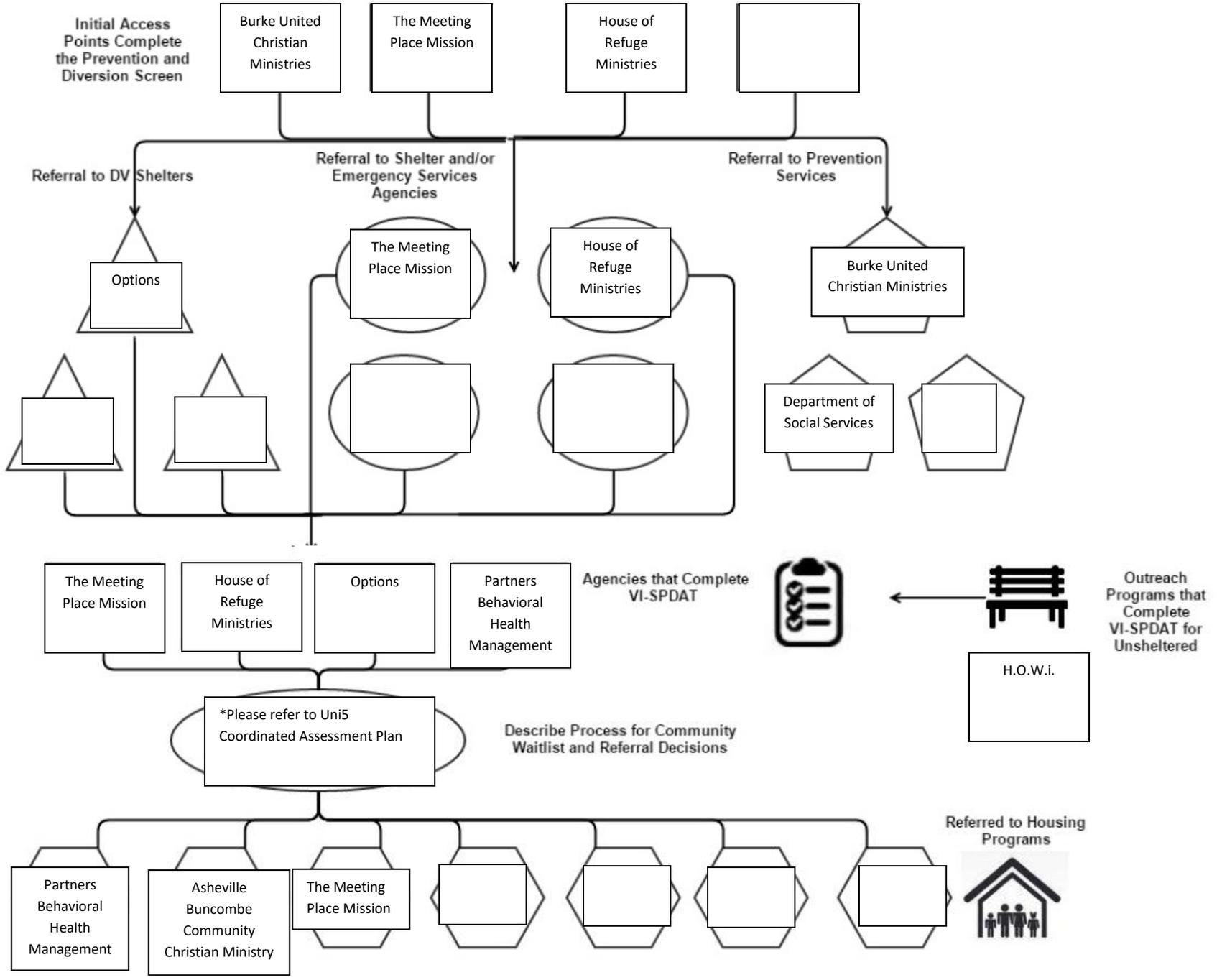
Assessment Subcommittee for VI-SPDAT referrals to provide a "housing first" approach to address the subpopulation of chronically homeless.

Unaccompanied Youth (up to age 24)

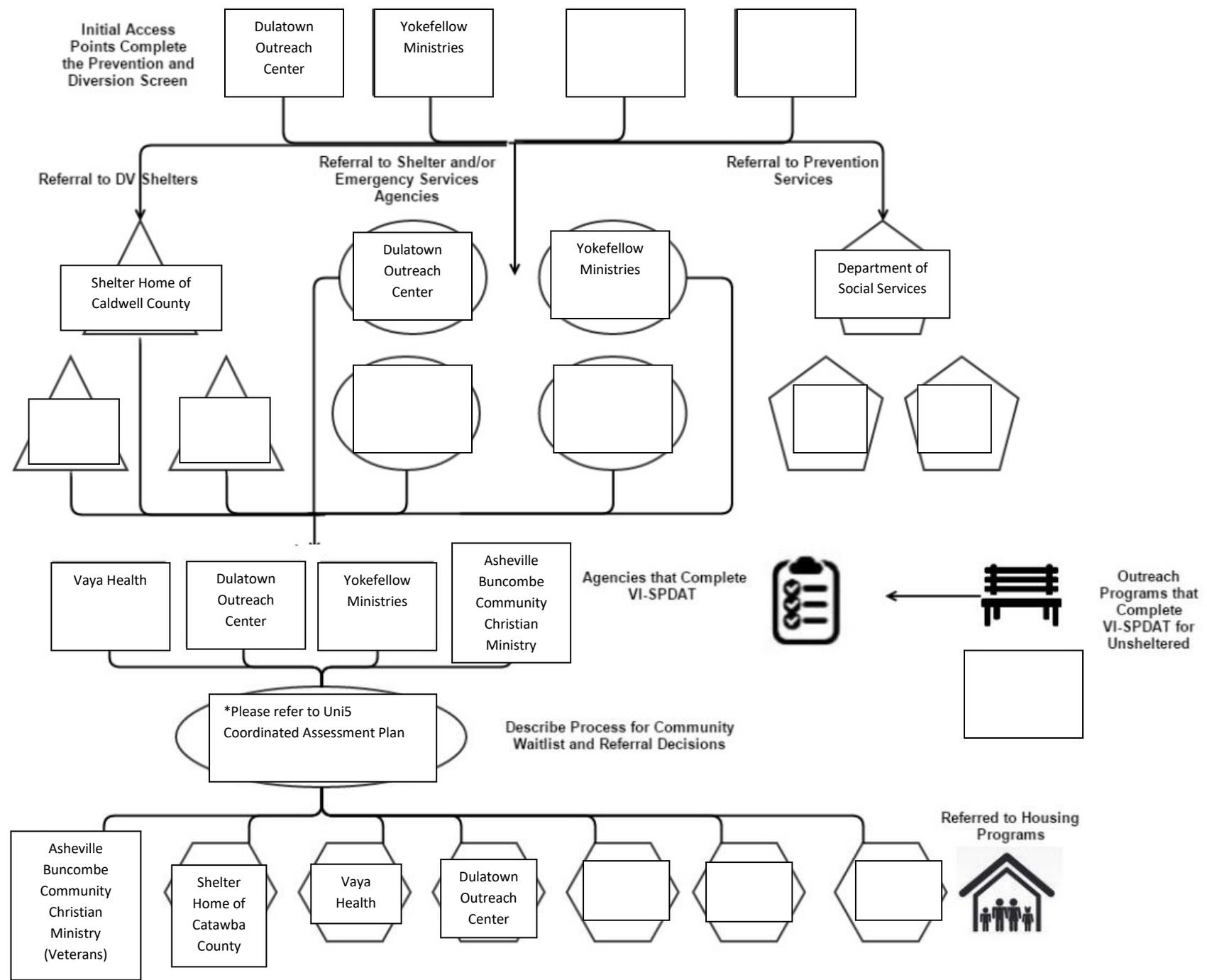
Unaccompanied youth will be presented as of the utmost priority for referred-to services, i.e. Transitional Housing, Rapid Re-housing, and Permanent Supportive Housing, to the Coordinated Assessment Subcommittee for VI-SPDAT referrals to provide a "housing first" approach to address the subpopulation of unaccompanied youth. Supplementary, agencies such as Sipe's Orchard Home and additional agencies with youth as the target population will be invited to participate in Coordinated Assessment. Unaccompanied youth presenting to agencies administering the Prevention and Diversion Screen (PDS) will provide the referral to services by introducing the unaccompanied youth directly (warm hand-off) to the referred-to agency ONLY.

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

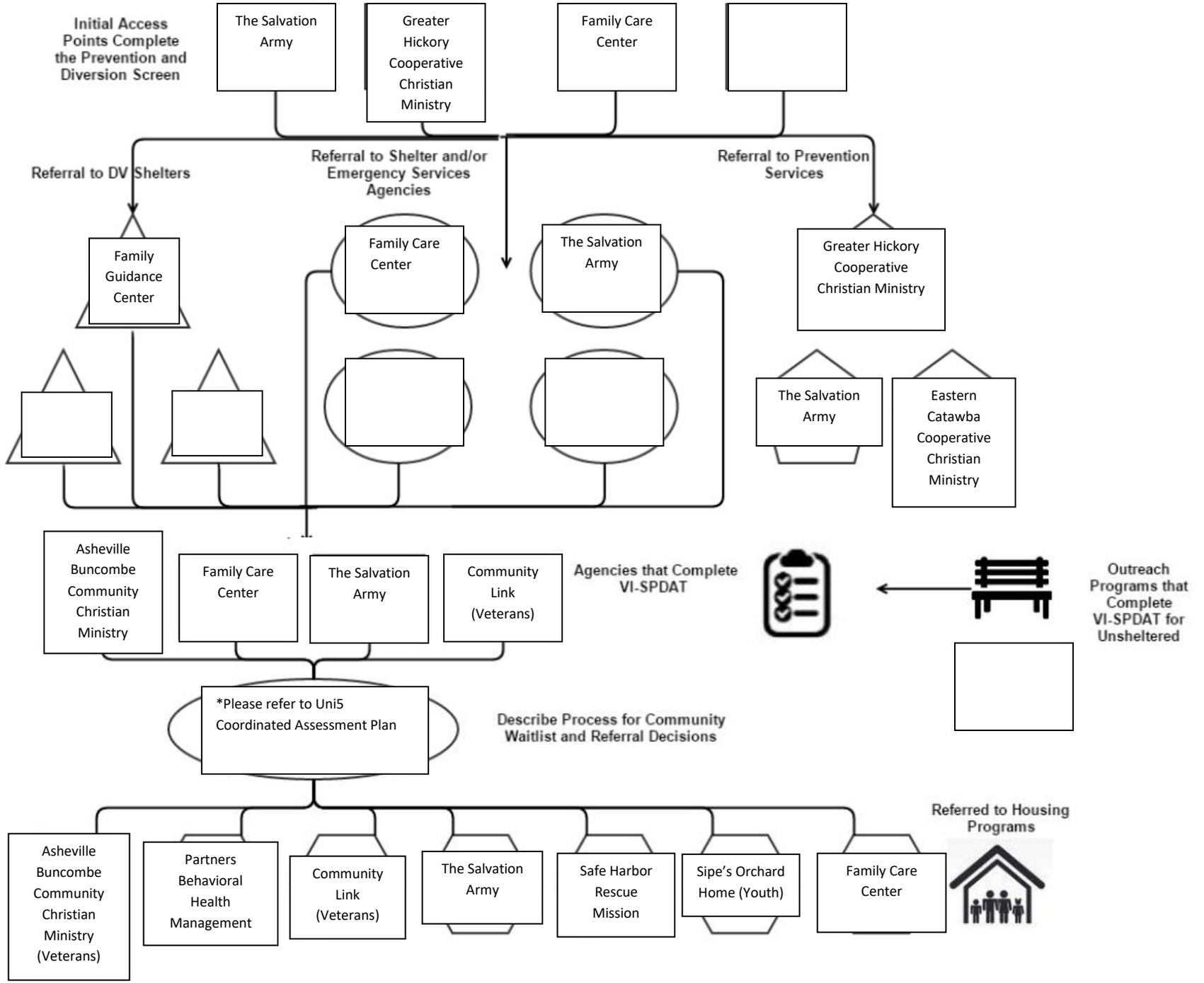
Households Present as Homeless 



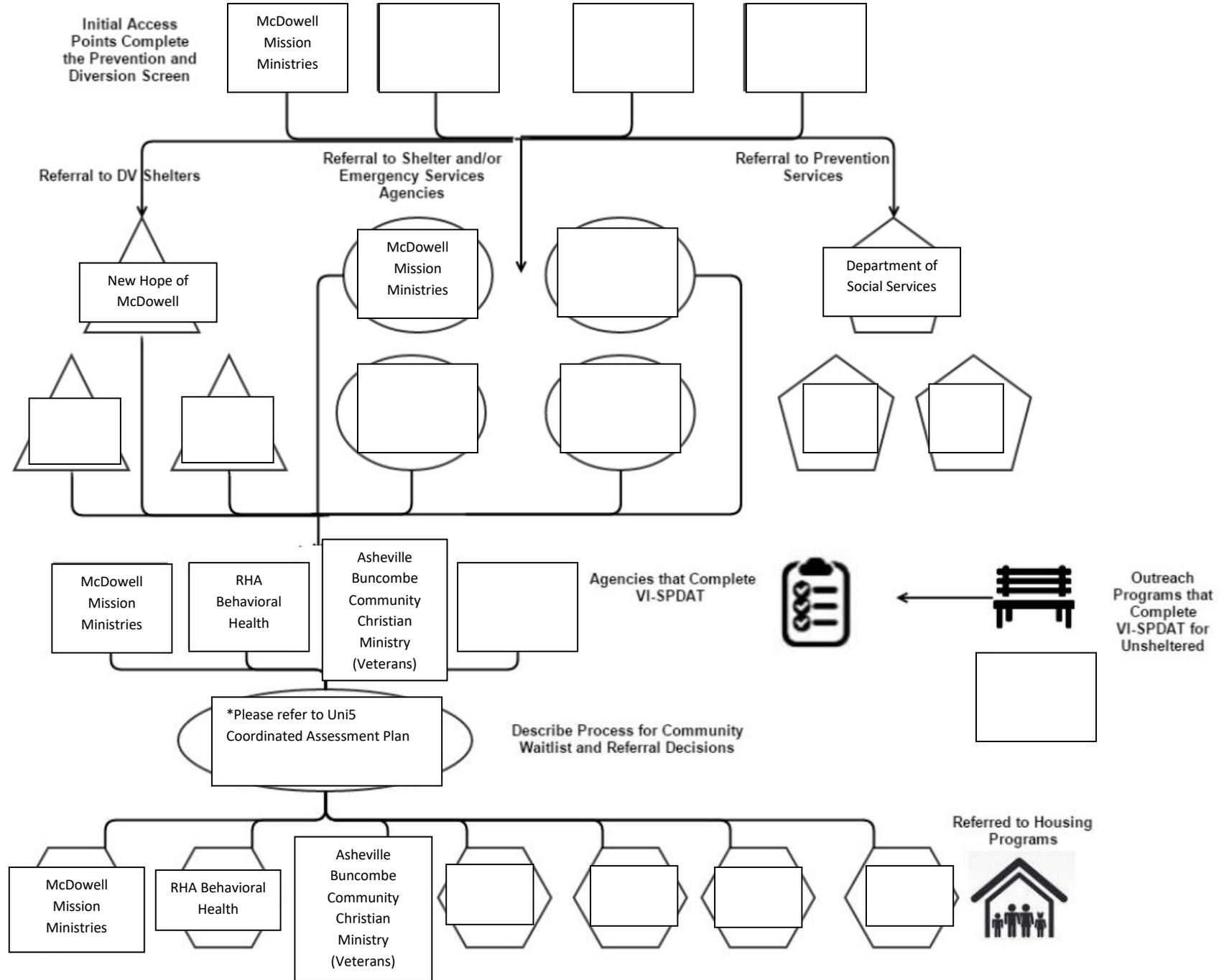
Households Present as Homeless

Households Present as Homeless 



Households Present as Homeless 



Households Present as Homeless 

