

North Carolina Balance of State Continuum of Care

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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.¹The 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: Tarheel Regional Committee

Counties Served: Franklin, Vance, Warren, Halifax, Granville, Nash, Edgecombe, Northampton

For the following please provide name and email address.

Primary Authors of the Plan: Monica Kearney _mkearney@ncsafespace.org and Linda Brinson lfbrinson.lb@gmail.com

Regional Lead: Roberta Sessoms _rbattlesessoms@gmail.com

Elected Coordinated Assessment Lead: Linda Brinson and Monica Kearney

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
United Community Ministries (Community Shelter)	Nash and Edgecombe	<input type="checkbox"/> Families Only <input checked="" type="checkbox"/> Single Men <input checked="" type="checkbox"/> Single Women <input type="checkbox"/> All	Days: Sat-Sun Times: 8am-9pm	2	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
United Community Ministries (Bassett Center)	Nash and Edgecombe	<input checked="" type="checkbox"/> Families Only <input type="checkbox"/> Single Men <input type="checkbox"/> Single Women <input type="checkbox"/> All	Days: Mon and Weds 1-3pm Tues 8am - 10am Times:	2	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Union Mission	Halifax/Northampton	<input type="checkbox"/> Families Only <input type="checkbox"/> Single Men <input type="checkbox"/> Single Women <input checked="" type="checkbox"/> All	Days: Mon-Fri Times: 8am-5pm	1	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Vance County DSS	Vance	<input type="checkbox"/> Families Only <input type="checkbox"/> Single Men <input type="checkbox"/> Single Women <input checked="" type="checkbox"/> All	Days: Mon - Fri Times: 8am-5pm	1	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Safe Space, Inc	Franklin,Vance, Granville, Warren	<input type="checkbox"/> Families Only <input type="checkbox"/> Single Men <input type="checkbox"/> Single Women <input checked="" type="checkbox"/> All	Days: Sun - Sat Times: 24 hrs.	3	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Cardinal Innovations	Franklin, Vance, Warren, Granville, Halifax	<input type="checkbox"/> Families Only <input type="checkbox"/> Single Men <input type="checkbox"/> Single Women <input checked="" type="checkbox"/> All	Days: Mon - Fri Times: 9am-5pm	1	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Daymark	Franlin, Vance, Warren, Granville, Halifax	<input type="checkbox"/> Families Only <input type="checkbox"/> Single Men <input type="checkbox"/> Single Women <input checked="" type="checkbox"/> All	Days: Mon - Fri Times: 9am-5pm	1	<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.

Two of the participating agencies have 24 hour availability to conduct the prevention and diversion screen which are actual shelters within the region. Households are also able to get information about accessing homeless services through 211 resources.

The 211 hotline or website, is a list of all service providers including shelters within one's county through United Way. The P/D screening depends on the agencies that the client is referred to, which some conduct P/D screening and some don't.

Our plan within the next two months is to have conversation with United Way concerning NC 2-1-1 to participate in coordinate assessment, to allow for 24/7 coverage.

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
My Sister's House	Edgecombe, Nash, Northampton, Franklin, Vance, Granville, Warren, Halifax	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Safe Space, Inc	Edgecombe, Nash, Northampton, Franklin, Vance, Granville, Warren, Halifax	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Hannah's Place	Edgecombe, Nash, Northampton, Franklin, Vance, Granville, Warren, Halifax	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
		<input 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.

Participating agency's can make the initial call to the DV agency in regards to the households need for shelter. DV agency's do request to speak with households that are being referred for shelter.

A referrals with a release of information is signed by the household, as well as a confirmation page is sent with household or fax. The confirmation page is to be fax back to the referring agency or the agency may confirm via phone, stating whether household was accepted or not.

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.

Only one DV shelter agency within the region is not participating in the CA process. We intend to use other participating DV agency's to participate in the CA process and regional meetings. The goal is to have all DV shelter's in the region participate by December 2017.

Northampton's residents will be able to access any of the counties DV shelters. Our DV shelters have actually provided shelter to clientel from other states.

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: My Sister's House
Emily Lenus 252-316-8444

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:

Mediation servics consist of counseling and making the initial phone call to the household to settle any disputies that arise within the household to settle any disputes and aid the families in coming to an agreement toward housing.

Are financial assistance resources available for diversion? Yes No

If yes, how much financial assistance and what sources of funding are used for this?

Churches, county Dept. of Social Services and other community agency provide financial assistance that comes from funding sources include state, local and private faith based.

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
CCAN	Edgecombe and Nash	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Mediation <input checked="" type="checkbox"/> Financial Assistance
Vance County DSS	Vance	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Mediation <input checked="" type="checkbox"/> Financial Assistance
Granville County DSS	Granville	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Mediation <input checked="" type="checkbox"/> Financial Assistance
First Presbyterian	Vance	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Mediation <input checked="" type="checkbox"/> Financial

			Assistance
First Presbyterian	Nash/Edgecombe	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Mediation <input checked="" 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.

Households are required to present to the agency who is providing the financial assistance there is no form that tracks the household and this information is not entered into HMIS.

Participating agencies will call diversion agency in regards to household needing assistance.

A referrals with a release of information is signed by the household, as well as a confirmation page is fax or email to agency. The confirmation page is to be fax or emailed to the referring agency or the agency may confirm via phone, stating if household received assistance.

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
United Community Ministries Community Shelter	Nash and Edgecombe	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Families Only <input checked="" type="checkbox"/> Single Men <input checked="" type="checkbox"/> Single Women <input type="checkbox"/> All	Background Check and ID required	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Tarboro Outreach	Edgecombe	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Families Only <input checked="" type="checkbox"/> Single Men <input type="checkbox"/> Single Women <input type="checkbox"/> All	Unknown	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Harbour House	Granville, Franklin, Vance, Warren, Halifax	<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	ID required and Background Check	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Union Mission/Room at Inn	Northampton, Halifax	<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	ID	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Lifeline	Vance, Granville, Franklin, Warren, Halifax	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Families Only <input type="checkbox"/> Single Men <input checked="" type="checkbox"/> Single Women <input type="checkbox"/> All	Unknown	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Community Partners of Hope (seasonal)	Vance, Granville, Franklin, Warren, Halifax	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Families Only <input checked="" type="checkbox"/> Single Men <input type="checkbox"/> Single Women <input type="checkbox"/> All	Registration 530pm-7pm	<input type="checkbox"/> Yes <input checked="" 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.

Households are required to present to the agency in which they are referred for emergency shelter. Courtesy phone calls are made by the referring agency to the emergency shelter to determine availability.

A referral with a release of information is signed by the household, as well as a confirmation page is fax or email to the agency. The confirmation page is to be fax or email to the referring agency or the agency may confirm via phone, stating if household received assistance. We have two emergency shelters that enter clients in HMIS once they are accepted into the shelter, United Community Ministries and Union Mission/Room at Inn.

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?

N/A

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.

Bed availability within the region determines accessibility to an emergency bed. If the household does not have access to an emergency bed, if a shelter is full, then households are referred to another county agency or resource for emergency shelter.

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
United Community Ministries (Bassett Center)	Nash, Edgecombe	<input checked="" type="checkbox"/> Families Only <input type="checkbox"/> Single Men <input type="checkbox"/> Single Women <input type="checkbox"/> All	Days: Thursday Times: 9-4	1	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
United Community Ministries (Shelter)	Nash, Edgecombe	<input type="checkbox"/> Families Only <input checked="" type="checkbox"/> Single Men <input checked="" type="checkbox"/> Single Women <input type="checkbox"/> All	Days: Mon - Fri Times: 9-5	2	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Infinite Possibilities	Franklin, Vance, Granville, Warren	<input type="checkbox"/> Families Only <input type="checkbox"/> Single Men <input type="checkbox"/> Single Women <input checked="" type="checkbox"/> All	Days: Mon - Fri Times: 830-430	2	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Union Mission	Northampton	<input type="checkbox"/> Families Only <input type="checkbox"/> Single Men <input type="checkbox"/> Single Women <input checked="" type="checkbox"/> All	Days: Mon - Fri Times: 8-5	1	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Safe Space	Franklin, Vance, Granville, Warren	<input type="checkbox"/> Families Only <input type="checkbox"/> Single Men <input type="checkbox"/> Single Women <input checked="" type="checkbox"/> All	Days: Mon - Fri Times: 9-5	3	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Hannah's Place	Halifax	<input checked="" type="checkbox"/> Families Only <input type="checkbox"/> Single Men <input checked="" type="checkbox"/> Single Women <input type="checkbox"/> All	Days: Mon - Fri Times: 9-5	1	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Helping Hand Ministries	Nash Edgecomb	<input type="checkbox"/> Families Only <input checked="" type="checkbox"/> Single Men <input checked="" type="checkbox"/> Single Women <input type="checkbox"/> All	Days: Wed & Thur Times: 2-5	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.

N/A

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

The agency's who are participating in the CA plan will administer the VI-SPDAT within 14 days of entry into shelter

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

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

If a household is identified as homeless and not in shelter by a participating agency a referral is made to agencies within the region who conduct the VI-SPDAT. Personell will meet with the household to administer the VI-SPDAT and then based on the score, referrals are then made to the appropriate community resource for housing.

Our Regional Committee current plan is to pass out "Homeless Assistance" cards during soup kitchen hours at local soups kitchen for individuals to complete. Once card is completed it will be place in a locked drop box and CA agency will contact individual via phone or if individual does not have a phone he/she will be able to talk to someone the next day during soup kitchen hours. An assessor will be on site to complete assessment. We will start this process at the soup kitchen on a trial basis and if productive, we will extend it to other providers who may be in contact with individuals who are homeless or nearly homeless. (A sample card is attached)

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?

Safety and confidentiality of households is taken into consideration when referring clients to RRH/PSH as referrals are not made without consent of the client. Further consideration of dv victims in regards to safety is considered also when determining the location of permanent community living so that victims are not re housed in a location that places them at risk of harm by their perpertrator. Using the referral form that has been developed by the CA committee DV clients will give consent for referral to local programs. Tracking survivors progress in the system will be done by the DV shelter personell. Client information is not put in the HMIS system however DV agency's use comparable information to track client progress, if housing is received or if the client goes to another shelter or moves with family members. All DV agency's cover the 8 county region. DV shelters are unique in that referrals to shelter are not limited to county coverage areas.

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
Cardinal Innovations/Eastpointe beginning July 1 st 2017	Franklin, Vance, Granville, Warren, Halifax	<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
Infinite Possibilities	Franklin, Vance, Granville, Warren, Halifax	<input type="checkbox"/> PSH <input checked="" 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
UCM Permanent Supportive Housing	Nash, Edgecombe	<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
UCM Rapid Rehousing	Nash, Edgecombe	<input type="checkbox"/> PSH <input checked="" 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
Volunteer of America Carolinas	Edgecombe, Franklin, Granville, Halifax, Nash, Northhampton, Vance, Warren	<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
		<input 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 type="checkbox"/> All	<input type="checkbox"/> Yes <input type="checkbox"/> No
		<input 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 type="checkbox"/> All	<input type="checkbox"/> Yes <input type="checkbox"/> No
		<input 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 type="checkbox"/> All	<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 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.

Referring agency's transfer VI-SPADT and P/Diverson forms to the appropriate housing agency including a telephone call. Referral forms are not sent by the household to the agency or by HMIS. Once referred to housing programs collaboration regarding the household, if the household permits, is provided between the referring and housing system. Successful placements are tracked on the community waitlist.

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.nccch.org/bos/coordinatedassessment/>.

Where is your Regional Committee's waitlist stored? The wait list will be processed based on HUD priority populations and severity of need. The waiting list shall be stored online (google doc) in which each participating agency conducting coordinated assessment will have access to via password.

Who manages the Regional Committee's waitlist? United Community Ministries and our key agencies in the community as well as active members of the Regional Committee will oversee the waitlist. Rapid Rehousing, Permanent Supportive Housing, and Transitional Housing Program Managers will manage the wait list and referral process for their specific program.

Who has access to the Regional Committee's waitlist? Regional Committee Leads, program case managers, and CA leads has access to the waitlist.

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.nccch.org/bos/coordinatedassessment/>.

During the process of intake and assessment and upon completion of the VI-SPADAT that is provided by DV and/or emergency shelter programs, a release of information is obtained within the discussion of housing services that the household may qualify for. A sample referral form and release of information that will be used is attached in the document. Client documents will be store on the site or each agency and maintained in accordance to that agency's record retention policy.

The agency that is administering the VISPDAT will provide a detailed explanation of the coordinated assessment process. The agency will provide information regarding how the process works and who the information is shared with. The agency will utilize the committee's approved Release of Information. The release of information will be reviewed with the participant. Signatures will be obtained from the participant confirming that the individual understands the process and is giving consent for his or her

information to be shared with identified agencies. Each referral agency will house the original copy of the release of information forms that they complete. Original releases will be available upon request.

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 committee will utilize unique identifiers to track participants on the waitlist and prioritize them for housing, if they refuse to have personal information shared during the CA process. The referral will be on waitlist via number. If an opportunity arises for the individual/family to access housing, the referring agency will be contacted. The committee will inform the agency that the individual/family has come up on the waitlist, and inquire as to whether the individual still needs housing and to see if said individual/family would like to move forward.

How will the Regional Committee confidentially and safely track survivors of domestic violence on the waitlist and prioritize them for housing?

The region adheres to the HUD definition for those who are chronically homeless and thus will be prioritized based on safety concerns as well as by homeless definitions. Our committee will utilize unique identifiers or identifiers already established by a DV agency. They will be tracked on the waitlist via numbering system- so no personal information will be shared on the waitlist. These groups will be assigned a number on the waitlist, then when they come up for housing it will be up to the agency working with them to get them connected.

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.

The regional committee will use case conference for difficult cases when necessary. The committee will add CA as a standing item at the regional committee meetings to assess system flow. Outcome data reports will be presented to the CAC as requested.

How does the Regional Committee ensure that the most vulnerable households get housing resources first?

Regional Committee will add CA as a standing item to review monthly and/or quarterly. The assessor or verify chronically homeless and assess homeless needs based on the scores of the VI-SPADAT. Third party verifications to advocate on the behalf of the client. There will be one community-wide waitlist, which will be ordered by VI-SPDAT score, as well as length of time homeless and other vulnerability factors. Participating housing agencies will take all referrals from the waitlist, in order. Case conferencing will be used as necessary if a household seems to have high barriers to staying stably housed or an agency needs additional help housing someone.

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: Regional Committee.

. Please outline the specific criteria under which a program may reject a referral (refer to the [CA WrittenStandards](#) for more information).

If a referral is rejected the referral is rejected due to the fact that all the beds are full. The individual is a register sex offender and the housing has in residence at least one family member with a child under the age of 18. Also if there is a child residing in the same housing facility, individuals with a violent criminal record.

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?

The committee will use case conferencing strategies to refer the household to a more suitable program.

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? Monthly

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?

Ask the households to contact the agency to check in on a monthly basis. Also if there is a school age child, participating agency are to make contact with the school social worker to checkup on household. The school social workers and DSS does an excellent job in follow-up and checking on the status of household.

What is your policy for taking a household off of the list?

If there has not been contact with the client due to the transient nature of the population and no contact has been made within a year then the household is taken off of the waiting list.

How many attempts do you make to contact?

Monthly attempts are made to contact the family and also discussed during the CA plan.

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?

If a household is unable to be found then the household is taken off of the waitlist within a 12 month period.

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.

Transportation fund are available for only through school of origin for homeless student through the McKinny Vento Act. The school social worker will provide bus tokens or transport client to appointment for assistance through the homeless funds for homeless families.

Other transportation resources include KARTS, CPTA, C-CAN, Tri-County Industries, Raemac and local churches. If a client is in need of transportation a phone call is made to the agency requesting assistance, as well as a referral with picture ID faxed or sent with client.

What happens if a household is unable to access transportation resources or any other transportation?

For all other households screening will be conducted via telephone.

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 regional committee conducts an biannual coordinated assessment workshop where community stake holders are invited to attend to learn more about the program. Brochure is being developed to include the Tarhell Region in order to further efforts to education partners in the community about the coordinated assessment plan. The Regional Committee will use email, phone contact, word of mouth, and monthly meetings to educate agencies and other community systems about coordinated assessment.

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 is currently providing education services to families who frequent the library, dss and health department about the CA and how to access homeless services. Develop brochure.

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. Language Line, community partners provide interpreter services. We look at enhancing our efforts in this area.

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

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? Community Interpreters and Language Line

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.

We are merging the two coordinated assessment systems and then we will have one monthly conference call to address the waiting list, the CA plan process, grievances and any other issues brought to the committee by participating agencies.

Why is this the best plan to cover the Regional Committee?

This is the best plan because of the limited amount of time and personell involved in the process as well as the distance involved between the merging counties.

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.

The only changes projected at this time is enhanced outreach efforts as the committee engages with community partners and stake holders to address the issue of homelessness. As the region will merge it will be equally important to establish a greater understanding of each agency's program within a 12 month period.

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.

At this time the regional committee is not addressing communities that have been inactive.

Coordinated Assessment Outcomes

How will outcome data be gathered for quarterly reports to the CoC?

Data will be collected from participating providers that are conducting the VI-SPADAT and Prevention and Diverson and those items will be submitted to the CoC as required.

Who will be in charge of submitting, correcting, and reviewing outcomes?

CA Leads for the region Linda Brinson and Monica Kearney

How are finalized coordinated assessment outcome reports presented to the community?

Reports will be made during the regional committe meetings.

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 Regional Committee will use the CA outcome data to identify gaps and change processes during the regional committee meetings and at that time determine the need for changes within the CA process with CA leads.

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 12 referrals in a month without a meeting. However, if a program declines more referrals than this they will need to meet with CA subcommittee to discuss the issue(s) that result in referrals being declined.

Providers are expected to submit a written reason for the denial to CA subcommittee. Providers may decline 1 out of 12 referrals in a month without a meeting. However, if a program declines more referrals than this they will need to meet with CA subcommittee to discuss the issue(s) that result in referrals being declined.

For all other grievances, providers must email a detailed grievance to the CA subcommittee within 5 days of the adverse action/decision. The CA subcommittee 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 CA subcommittee, CA Leads, or Regional Lead, either verbally or in writing, within 14 days of the attempted referral. Personell will respond within 5 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

Those individuals or families who are identified as chronically homeless will enter the homeless system through the CA plan process. Once sheltered the VI-SPADAT will be administered which will serve as a guide to determine the need for RRH or PSH. Through the process of service provision the referring agency's will collaborate with RRH and PSH programs to determine resources that are needed to address specific needs that cause barriers for the chronically homeless population, for example job training, education, financial management, etc. Through the communities collaborative efforts the program will attempt to address the special resources/issues of the population by developing case plans that will help address those needs.

Unaccompanied Youth (up to age 24)

Unaccompanied youth up to age 18 will be referred to Dept. of Social Services for assistance. Those over the age of 18, services will be provided through the same process of the CA Plan. As we build a stronger system of collaboration our plan is to re address this issue and establish protocol that will better aid in determining the need and process for services for this age group.

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

Households Present as Homeless



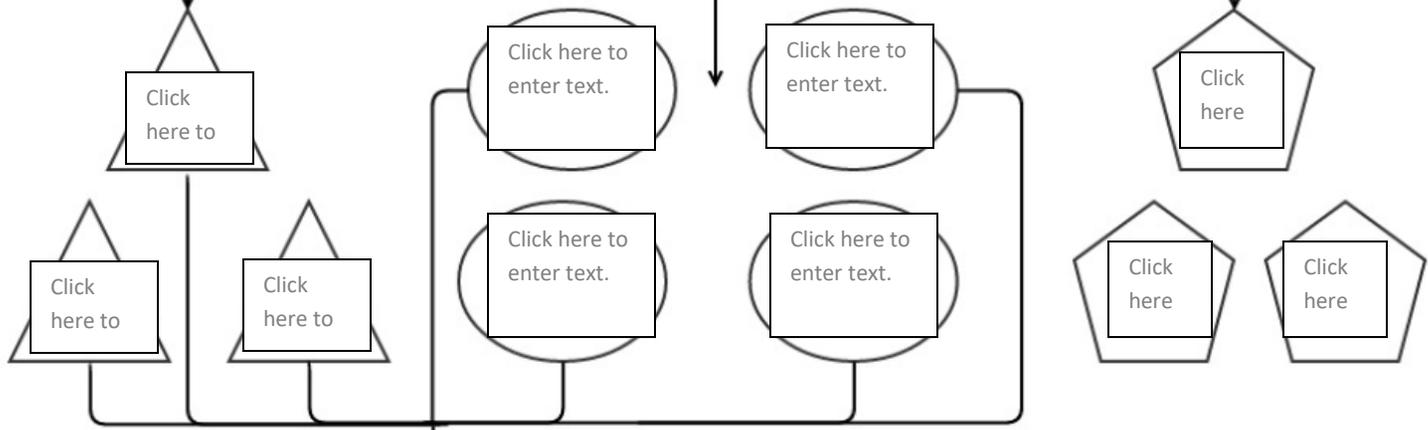
Initial Access Points Complete the Prevention and Diversion Screen

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Referral to DV Shelters

Referral to Shelter and/or Emergency Services Agencies

Referral to Prevention Services



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Agencies that Complete VI-SPDAT

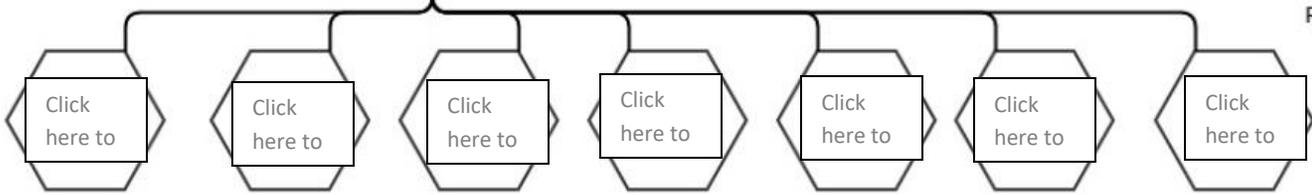


Outreach Programs that Complete VI-SPDAT for Unsheltered

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Describe Process for Community Waitlist and Referral Decisions



Referred to Housing Programs

