

North Carolina Balance of State Continuum of Care

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Regional Committee Veteran Plan

In *Opening Doors: Federal Strategic Plan to Prevent and End Homelessness*, the US Interagency Council on Homelessness (USICH) outlines goals for Continuums of Care that include ending Veteran homelessness by 2015.¹ To assist communities in reaching this objective, the USICH also published *Achieving the Goal of Ending Veteran Homelessness: Criteria and Benchmarks*, which outlines how systems can achieve an effective end to Veteran homelessness. Effectively ending homelessness for Veterans means that communities have designed systems to quickly identify and house homeless Veterans.² The North Carolina Balance of State Continuum of Care (BoS CoC) has set a goal to meet the USICH criteria and benchmarks by December 2017.

Goal

The goal of the regional Veteran system is to meet the federal benchmarks and criteria in each of the 13 Regional Committees by establishing and continuing to maintain an optimized homeless assistance system that effectively and continually prevents and ends Veteran homelessness across the BoS CoC. To accomplish this goal, the BoS CoC and State and VA partners will create a regional Veteran system to quickly identify and house Veterans in all 13 Regional Committees.

Vision

The BoS CoC Plan to End Veteran Homeless identifies a primary SSVF grantee for each of the 13 regions who will provide outreach to homeless Veteran households, assess them for eligibility, and oversee their connection to housing. These SSVF grantees will act as system navigators for each identified Veteran, no matter the Veteran's VA eligibility status, to ensure data collection and connection to permanent housing as quickly as possible. The permanent housing placement may be provided by SSVF, HUD-VASH, CoC or ESG programs, or other community housing programs. If a Veteran is ineligible for SSVF assistance, the SSVF provider, as navigator, will connect the Veteran to the Regional Committee's coordinated assessment system to access community housing programs.

Contact Information

Regional Committee: Housing Alliance of Coastal Carolina (HACC)

Counties Served: Carteret, Craven, Jones, Onslow, Pamlico

For the following questions please provide individual name, agency name and contact information.

Primary SSVF Provider: Ashly Tinkham, Family Endeavors, (910) 459-4320, atinkham@familyendeavors.org

¹ https://www.usich.gov/opening-doors

²https://www.usich.gov/resources/uploads/asset_library/Achieving_the_Goal_Ending_Veteran_Homelessness_v3_10_01_15.pdf

Primary Authors of the Plan: Reeshema Walker, NCWorks Career Center - Craven County, (252) 514-4828, reeshema.walker@nccommerce.com and Ashly Tinkham, Family Endeavors, (910) 459-4320, atinkham@familyendeavors.org

Regional Committee Lead: Susan Pridgen, United Way of Onslow, (910) 347-2646, spridgen@uwonslow.org

Regional Committee Point of Contact for the Veteran System: Ashly Tinkham, Family Endeavors, (910) 459-4320, atinkham@familyendeavors.org

Other Key Partners in Veteran System: Candace Parker, HUD/VASH Social Worker, VA Greenville Health Care Center (HCC), (252) 830-2149, candace.parker@va.gov; Juliet Rogers, Executive Director, Religious Community Services, (252) 633-2767, jrogers@rcsnewbern.com; Rebecca Sotirkys, Disabled Veterans Outreach Specialist, NCWorks Career Center - Carteret, (252) 726-7151, rebecca.sotirkys@nc commerce.com; Reginald Roy, NCWorks Career Center - Onslow, (910) 347-2121, reginald. roy@nccommerce.com; Gene McLendon, Executive Director, Hope Mission Ministries, (252) 240-2359, glenda@hmcm.org; Theo McClammay, Executive Director, Onslow Community Outreach Homeless Shelter, (910) 455-5733, tmcclammy@onslowco.org; Mary Fisher, HUD/VASH Social Worker, VA Jacksonville Community-Based Outpatient Clinic (CBOC), (910) 488-2120, mary.fisher@va.gov; Lt. Linda Godette, New Bern Police Department, (252) 672-4100, godettel@newbernpd.org

Criterion #1: The community has identified all Veterans experiencing homelessness.

Outreach

The goal of outreach is to immediately identify and engage unsheltered homeless Veterans and offer low-barrier shelter and permanent housing assistance to any homeless Veteran within the CoC. Outreach within Regional Committees will take two forms: passive and assertive.

Passive Outreach

With passive outreach, SSVF providers, with the help of regional leadership, will identify key community partners to aid in identifying homeless Veterans. SSVF providers will train these community partners on how to identify Veterans experiencing homelessness and how to make a referral to the primary SSVF agency in the region. Referrals will be made on an ongoing basis. In addition, each region will also be responsible for contacting the identified community partners a minimum of 2 times per month, whether in-person or by phone, to ask for potential referrals. Examples of agencies that should be considered for passive outreach include local service agencies (libraries, clothing closets, feeding programs), Veteran services (National Guards, Veteran Service Officers, VFWs), jails, etc.

Use the Appendix A tab to identify key partners who will be contacted for passive outreach efforts.

Describe how key community partners will be trained to identify Veterans, including who will provide training, how the trainings will be conducted (in-person, community meetings, etc.), the target dates for initial trainings, and the plan for future trainings to refresh current staff and initiate onboarding staff.

The SSVF Provider and the Disabled Veterans Outreach Program (DVOP) Specialists Reginald Roy (Onslow County), Rebecca Sotirkys (Carteret County), and Reeshema Walker (Craven, Jones and Pamlico Counties) will attend monthly community meetings and conduct bi-monthly outreach to community partners concerning potential referrals of Veterans experiencing homelessness. In addition, the SSVF Provider and the DVOPs will work together develop a quarterly training schedule to train and educate community partners as it relates to identifying homeless Veterans and the CoC referral process. The training will be done through monthly and quarterly meetings, teleconferences, webinars and Skype.

Once communities identify Veterans through passive outreach, describe the process for engaging the Veteran, including: who will engage the Veteran, timeframe for first point of contact, how an offer of shelter will be made, housing plan development, and how the Veteran's information will be added to the regional by-name list.

Once a community partner identifies a Veteran through passive outreach, they will contact their local DVOP within 24 to 48 hours. The DVOP will make initial contact with the Veteran to determine which type of housing is needed. If a Veteran needs emergency shelter, the DVOP will contact the local shelter for availability. Within 24 to 48 hours, the DVOP will notify the VA HUD/VASH Social Worker and the SSVF Provider. The respective VA HUD/VASH Social Worker will add the Veteran's name to their VA tracking system for homeless Veterans and assist in identifying any additional resources. The SSVF Provider will add the Veteran's name to the regional by-name list for CoC tracking.

Assertive Outreach

Assertive outreach will be the primary responsibility of the SSVF providers in each Regional Committee. Assertive outreach involves visiting and surveying sites where unsheltered homeless people sleep or frequent to identify homeless Veterans and to offer them shelter and housing. Through this approach, providers can continue to engage known Veterans and identify new Veterans who need assistance. SSVF providers will also work with community partners who already conduct outreach to train them in how to identify and refer Veterans.

Use the following chart to list all agencies (SSVF providers, faith-based organizations, shelters, etc.) completing assertive outreach in the region:

Agency	Counties Served	How Often Outreach is Done Per Month
Family Endeavors	Carteret, Craven, Jones, Pamlico, Onslow	Weekly
NCWorks Career Center- Craven, Carteret, Onslow	Carteret, Craven, Jones, Onslow, Pamlico,	Weekly
Religious Community Services	Carteret, Craven, Jones, Pamlico	Weekly
VA Homeless Coordinator- Greenville	Carteret, Craven, Jones, Pamlico,	Weekly
VA Homeless Coordinator- Jacksonville	Onslow	Weekly

If community agencies are doing assertive outreach, describe how they will be trained to identify Veterans, including who will be providing training, how the trainings will be done (in-person, community meetings, etc.) the target dates for these trainings, and how staff turnover will be taken into account for future training.

The SSVF Provider will work closely with the Regional Lead Committee to schedule training for community partners through monthly and quarterly meetings, teleconferences, webinars and Skype. The SSVF Provider and the Regional Lead Committee will work together to develop a quarterly training schedule. Surveys will be provided after each training sessions to ensure the goals of the training has been met. In addition, informational handouts and newsletters will be sent to the community partners to keep their staff inform of any future training.

How will the region obtain information about potential unsheltered sites (law enforcement, librarians, etc.)?

The region will obtain information about potential unsheltered sites through the local DVOPs and SSFV providers. Currently, DVOPs conduct monthly outreach to the local law enforcement agencies, public libraries, local homeless shelters, VA Homeless Coordinators, local Veteran organizations, soup kitchens, county Veteran service officers, annual point-in-time count, and faith-based organizations. The DVOP will pass any information about unsheltered sites to the SSVF Provider and the Regional Lead Committee during the bi-monthly and quarterly meetings.

Once an unsheltered location is identified, how will the location be tracked by the region and how often will the locations be visited for ongoing engagement?

The Regional Committee Lead will work closely with the SSVF Provider to maintain an accurate Excel database of unsheltered sites within the region. The SSVF Provider will notify the local DVOP of the unsheltered location so it can be added to the DVOPs outreach list. The DVOP will visit the location and provide a status report to the SSVF Provider and Regional Committee Lead. If further contact is needed, the DVOP will maintain an ongoing engagement until there is no need to continue.

Once a Veteran is identified through assertive outreach, describe the process for engaging the Veteran, including: who will engage the Veteran, timeframe for first point of contact, how an offer of shelter will be made, housing plan development, and how the Veteran's information will be added to the regional by-name list.

Once a Veteran has been identified through assertive outreach, the SSVF Provider will conduct an initial assessment to determine if the veteran is eligible for SSVF services. In addition, the SSVF Provider will add the Veteran's name to the regional by-name list. If veteran is eligible, the SSVF Rapid Re-housing program, the SSVF Provider will assign the Veteran a case manager who will work with the Veteran until he/she obtains permanent housing. If the veteran is ineligible for SSVF services, the SSVF Provider will contact the respective DVOP within 24 to 48 hours and add the Veteran's name to the regional by-name list. The local DVOP will conduct an initial assessment to determine the type of housing needs and work with the VA HUD/VASH Social Worker to develop a housing plan. If a Veteran needs emergency shelter, the DVOP will contact the local shelter for availability.

How will transportation be provided for unsheltered Veterans once identified?

Transportation will be provided for unsheltered Veterans located in the Craven, Jones and Pamlico Counties through Craven Area Rural Transit Systems (CARTS). For Onslow County, the unsheltered Veterans will be referred to Onslow United Transit System (OUTS). Lastly, unsheltered Veterans in Carteret County, will be referred to Carteret County Area Transportation System (CCATS).

In-Reach

The primary SSVF provider will coordinate in-reach efforts to identify homeless Veterans in shelter and transitional housing programs that do not participate in coordinated assessment or the HMIS system. SSVF providers will train agency staff at non-participating agencies on how to identify Veterans and how to make a referral to the primary SSVF agency in the region.

Use the Appendix B tab to identify key agencies that provide shelter, transitional housing, or other services that do not currently participate in HMIS or coordinated assessment and will be contacted for in-reach efforts.

Describe how agencies that provide shelter and transitional housing and do not participate in HMIS or coordinated assessment will be engaged in the Veteran system, including: who will engage the agencies and a projected timeline.

For Craven, Jones, Onslow and Pamlico Counties, the agencies that provide shelter participates in HMIS and/or the coordinated assessment. For Carteret, Hope Mission Ministries provides shelter for homeless males but does not participate in HMIS or the coordinated assessment. Once Hope Mission identifies a male Veteran, they referred him to the local DVOP within 24 to 48 hours for initial assessment of the Veteran's housing situation. The DVOP will notify the SSVF Provider and the VA Homeless Coordinator of Veteran's housing status. The SSVF Provider will add the Veteran's name to the regional by-name list.

Describe how engaged community agencies will be trained to identify Veterans, including: who will be providing training, how the trainings will be done (in-person, community meetings, etc.), the target dates for these trainings, and how staff turnover will be taken into account for future training.

The SSVF Provider will work closely with the Regional Lead Committee to develop and implement a quarterly training program for agencies that do not participate in HMIS or coordinated assessment. The training will include educating the agencies on the CoC process for engaging homeless Veterans, identifying Veterans, local shelter information, role of key service providers, and other community resources. The training will be done by SSVFs providers, Regional Committee members, and local DVOPs. The training will be done through monthly and quarterly meetings, teleconferences, webinars and Skype.

Once the community has identified Veterans through in-reach efforts, describe the process for engaging the Veteran, including: who will engage the Veteran, timeframe for first point of contact, how an offer of shelter will be made, housing plan development, and how the Veteran's information will be added to the regional by-name list.

Agencies which have identified homeless Veterans through in-reach efforts will contact their local DVOP for initial contact. The DVOP will engage the Veteran within 24 to 48 hours. The local DVOP will contact the the Veteran within 24 to 48 hours for initial assessment. After the assessment, the DVOP will notify

the VA HUD/VASH Social Worker and the SSVF Provider and provide a status report of the Veteran's housing situation. The respective VA HUD/VASH Social Worker will add the Veteran's name to their VA tracking system for homeless Veterans and assist in identifying any additional resources. The SSVF Provider will add the Veteran's name to the regional by-name list for CoC tracking. Based on the assessment

Criterion #2: The community provides shelter immediately to any Veteran experiencing unsheltered homelessness who wants it.

Offer of Shelter

When an unsheltered Veteran is identified during outreach, SSVF providers will make an immediate referral to the coordinated assessment system. If the region's coordinated assessment system identifies an unknown Veteran, the provider completing the screen will make an offer of shelter and refer the Veteran to the primary SSVF provider in the region. For Veterans ineligible for VA programs, the SSVF provider will work with providers in the region's coordinated assessment system to ensure that shelter placement has been offered and the Veteran's information has been entered into HMIS.

Use Appendix C tab to identify shelter in the region that will be utilized to serve unsheltered Veterans.

For Veterans who decline an offer of shelter, the SSVF provider, acting as navigator, will routinely offer shelter in conjunction with the regional coordinated assessment system while also working to secure a permanent housing placement.

For regions that do not have shelter, an offer of emergency housing in a hotel or motel will be made.

Describe how unsheltered Veterans will be offered and connected to shelter once identified in outreach, including: how shelter bed(s) will be secured, how Veterans will be transported to shelter, etc.

Once an unsheltered Veteran is identified through passive and assertive outreach, the local DVOP will contact the local shelter for availability. For unsheltered Veterans located in the Craven, Jones and Pamlico counties, they will be referred to Craven Area Rural Transit Systems (CARTS) for transportation to the New Bern Police Department for prevention and diversion screening, prior to arriving at Religious Community Services (RCS). RCS guarantees a bed for a unsheltered veteran. Veterans must go through the New Bern Police Department. RCS will not admit Veterans who are intoxicated, sex offenders, or pending outstanding warrants. RCS has a total of 20 beds for homeless individuals. For Onslow County, unsheltered Veterans will be referred to Onslow United Transit Systems (OUTS) for transportation to Onslow Community Outreach Homeless Shelter. Onslow Community Outreach has 50 beds for homeless individuals. Onslow Community Outreach will not admit Veterans who are intoxicated, sex offenders, or pending outstanding warrants. In Carteret County, a homeless male Veteran will be referred to Carteret County Area Transportation System (CCATS) for transportation to Hope Mission Ministries, which has 20 beds for homeless males. They will not admit any Veterans who are intoxicated or sex offenders. For women Veterans located in Carteret County, the DVOP will contact RCS (Craven) and Onslow Community Outreach (Onslow) for availability. The respective DVOP will arrange transportation for the women Veterans to the shelter in Craven or Onslow County through the Veteran organizations Disabled American Veterans and Veterans of Foreign Wars. Veterans who can not be admitted to the local shelter, the DVOP will work with the local community partners to locate emergency shelter.

If an unsheltered Veteran is identified in the region's coordinated assessment process through the Prevention and Diversion screen or the VI-SPDAT, describe how CoC agencies will make an offer of shelter and how Veterans will be connected to the primary SSVF provider to be added to the region's byname list.

If an unsheltered Veteran is identified through the region's coordinated assessment process, the CoC agencies will refer the Veteran to the local DVOP and the SSVF Provider. The local DVOP will contact the the Veteran within 24 to 48 hours for initial assessment. In addition, the DVOP will contact the local homeless shelter for availablity for immediate shelter. After the assessment, the DVOP will notify the VA HUD/VASH Social Worker and the SSVF Provider and provide a status report of the Veteran's housing situation. The respective VA HUD/VASH Social Worker will add the Veteran's name to their VA tracking system for homeless Veterans and assist in identifying any additional resources. The SSVF Provider will add the Veteran's name to the regional by-name list for CoC tracking.

Describe how Veterans who decline an offer of shelter will be routinely offered shelter and how these offers will be tracked for the region.

Upon the initial assessment, Veterans who declines an offer of shelter will be tracked by the local DVOP and the SSVF Provider. The DVOP will maintain a Excel database to track these Veterans. The database will include the following information: date, Veteran's name, last 4 SSN, phone number, reason for decline, follow-up date and housing status. The DVOP will provide the name of the Veteran who decline shelter to the SSVF Provider. The SSVF will track the Veterans through an Excel spreadsheet which includes the following information: Veterans's name, last 4 SSN, county located, DVOP's name and contact information and reason for declination. The DVOP will contact the Veteran quarterly to check if the Veteran's situation changes. If the Veteran changes their mind and accepts housing, the Veteran's name will be removed from the database and be added to the regional's by-name list. In addition, the DVOP will make a case note documenting the veteran's change to accept shelter.

available? Yes No
If so, please describe the process for accessing this emergency housing:
If a Veteran cannot obtain emergency shelter, the DVOP may contact the local Veterans organizations for hotel/motel vouchers. The Foreign Wars and Disabled American Veterans will pay for a hotel/motel for 2 nights.
Please describe any known barriers for accessing emergency housing: The major barriers Veterans experience in accessing emergency housing is being sex offenders and having outstanding warrants.
Does your region need assistance with emergency housing and shelter? \square Yes \boxtimes No If yes, please provide the name, email and phone number of the person to contact:

Criterion #3: The community only provides service-intensive transitional housing in limited instances.

Transitional Housing

Though the BoS CoC does not have Grant Per Diem programs, service-intensive transitional housing programs funded through private sources are available to Veterans. Both the primary SSVF provider and the local agencies that serve as access points for the Regional Committee's coordinated assessment system will ensure Veterans are offered a choice of permanent housing assistance (e.g., SSVF) either prior to entering the transitional housing program or once identified in the transitional housing program.

Literally homeless Veterans referred to Grant Per Diem programs outside of the BoS CoC who originated from the BoS CoC will be welcomed back to their home counties, if they choose to return. SSVF providers are responsible for following up with Veterans while in Grant Per Diem programs and to develop housing plans for their return. For Veterans that entered Grant Per Diem programs without literal homeless status, SSVF providers will not accept referrals from Grant Per Diem programs until the program attempts a discharge into housing using the Veteran's support resources.

For each system, please describe how Veterans will be offered permanent housing and how that offer will be tracked prior to transitional housing referral.

Regional Coordinated Assessment System:

All agencies have a plan in place to offer permanent housing based off the Veteran's need factors. After the Veteran has been assessed, agencies will complete the VI-SPDAT's to ensure that the Veteran is tracked prior to transitional housing referrals. The Coordinated Assessment will identify Veterans through the Prevention and Diversion Screening form and refer them to SSVF if they are eligible for services. SSVF provider's will offer the Veteran permanent housing options first either through SSVF or other housing resources within the region. If the Veteran declines any offer to permanent housing and requests to be placed in transitional housing, then the SSVF provider will document the declination on the Community Referral Form (SSVF form) and will connect them to the right transitional housing program, along with placing the Veteran on the by name list in order to follow up with the Veteran bimonthy in order to offer the Veteran permanent housing options.

If the Veteran is ineligible for SSVF Rapid Re-housing program, the SSVF provider will notify the respective Coordinated Assessment team and provide VI-SPDAT tool. Once assessed Veteran will be placed on the waitlist. Housing resources will be offered if and when available. If no housing is available for the Veteran, transitional housing will be offered as last resort. The SSVF Provider will add the Veteran's name to the regional by-name list for bi-monthly CoC tracking within 24 to 48 hours. The regional by-name list will be priortized by the results of the VI-SPDAT in determination of type of housing assistance the Veteran needs. Also, it will be sorted by score and housing program recommendation. Bi-monthly case management coordinated assessment meetings with community stakeholders will help in offering permanent housing to Veterans with the most severe service needs. In addition, the SSVF Lead will track the Veteran's housing status via Excel spreadsheet the unsheltered Veteran has been identified until Veteran obtains permanent housing.

Veteran Service System (SSVF Providers and VA Medical Centers):

Once the SSVF Providers or the VAMC identifies a homeless Veteran, they will complete the VI-SPDAT's to ensure that the Veteran is tracked prior to transitional housing referrals. Also, the SSVF Provider will

add the Veteran's name to the region's by-name list. SSVF provider's will offer the Veteran permanent housing options first either through SSVF or other housing resources within the region. If the Veteran declines any offer to permanent housing and requests to be placed in transitional housing, then the SSVF provider will document the declination on the Community Referral Form (SSVF form) and will connect them to the right transitional housing program, along with placing the Veteran on the by name list in order to follow up with the Veteran bi-monthy in order to offer the Veteran permanent housing options.

If the Veteran is ineligible for SSVF programs, the Veteran will be offered permanent housing through other housing options within the region. The SSVF Provider will add the Veteran's name to the regional by-name list for bi-monthly CoC tracking. If the Veteran declines any offer to permanent housing and requests to be placed in transitional housing, then the SSVF provider will document the declination on the SSVF form and will connect them to the right transitional housing program, along with placing the Veteran on the by name list in order to follow up with the Veteran bi-monthy in order to offer the Veteran permanent housing options.

If a Veteran is referred to a Grant Per Diem program outside of the BoS CoC and wishes to return to the BoS CoC for housing, please describe how SSVF providers will follow-up with the Veteran to create housing plans for their return to the region.

If a Veteran, in a Grant Per Diem program outside the BoS CoC, intends to return to housing within the region, the present housing Case Manager will make the initial referral to the primary SSVF Provider on the Veteran's behalf, within the new region. The SSVF Provider will conduct an initial assessment to determine if the veteran is eligible for SSVF Rapid Rehousing services and add the Veteran's name to the regional by-name list for CoC tracking. If veteran is eligible for the SSVF Rapid Re-housing program, the SSVF Provider will assign the Veteran a case manager who will work with the Veteran until he/she obtains permanent housing before the Veteran returns to the region. In some cases, the Veteran may have to re-enter the region in order to be eligible for SSVF services. If the Veteran returns to the region before permanent housing is offered, the Veteran may be offered emergency shelter depending on the availablility.

Criterion #4: The community has capacity to assist Veterans to swiftly move into permanent housing.

System Navigation

As communities identify homeless Veterans through outreach or in-reach activities, the primary SSVF provider will be notified. The primary SSVF provider will either meet with the Veteran or identify another SSVF provider who covers the region to contact the Veteran. Upon contact, the assigned SSVF provider will connect the Veteran to the local VAMC to determine Veteran eligibility for SSVF and HUD-VASH and add them to the Regional Committee's by-name list.

If the VAMC identifies the Veteran as eligible for VA-funded services, the primary SSVF provider will ensure a connection to either an SSVF or HUD-VASH program in the region to assist with permanent housing placement. If the Veteran is ineligible for VA benefits or does not want to participate in a VA program, the SSVF provider will connect the Veteran to the Regional Committee's coordinated assessment system for assessment and prioritization for CoC and other community housing programs.

Please use the following chart to list the staff from the VA Medical Centers (VAMC) who serve the region:

VAMC	Counties Served	Contact Name	Contact Information (email and phone)	Primary or Secondary staff
VA Greenville Health Care Center	Carteret, Craven, Jones, Pamlico	Candace Parker	candace.parker@va.gov; (252) 830-2149	⊠Primary □Secondary
Jacksonville Community- Based Outpatient Clinic	Onslow	Jason Klein	jason.klein@va.gov; 910-343-5300 x3579	⊠Primary ☐ Secondary
				Primary Secondary
				Primary Secondary

Please use the following chart to list the SSVF providers in the region:

Agency	Counties Served	Point of Contact	Contact Information (email and phone)	Primary SSVF Provider
Family Endeavors	Carteret, Craven, Jones, Onslow, Pamlico	Ashly Tinkham	atinkham@familyendeavors.org (910) 459-4320	⊠Yes □No
				Yes No Yes
				No Yes No

Describe how the primary SSVF provider will follow up with referrals as Veterans are identified in the region, including: the timeframe for follow-up and how Veterans will be added to the regional by-name list.

SSVF Provider will follow up with a referral within the next 24-48 hours. Once the Veteran has been contacted and is defined as literally homeless, the SSVF Provider will complete a VI-SPDAT; according to the Veteran's housing size. Once VI-SPDAT is completed, it may be added to the regional's by-name list within 24-48 hours.

If other SSVF provider(s) cover the region, describe how the primary SSVF provider will coordinate referrals and ensure that programs contact Veterans.

N/A There are no other SSVF Providers that covers the region.

Describe how SSVF providers will coordinate with VA Medical Centers to assess Veterans for VA eligibility, including: transportation, timeframe, and determination of eligibility.

SSVF Provider will provide the Veteran the point of contact information to the VAMC Homeless Coordinator. Also, the SSVF Provider will contact the VAMC Homeless Coordinator to schedule a timeframe for the Veteran to have an appointment. If the Veteran needs transportation the Disabled American Veterans (DAV) will provide free rides for Veterans to and from their VA appointments.

Describe how SSVF providers will assess eligibility for SSVF services, including: timeframe and how eligibility will be tracked.

Once the referral is provided to the SSVF provider, the Veteran will be contacted within 24-48 hours to conduct an initial eligibility screening. If the Veteran is deemed eligible for the program, based off of eligibility requirements (client is a Veteran, Veteran meets HUD's low-income requirements, Veteran is homeless/at imminent risk of homelessness, and Veteran has all required documentation for screening), the Veteran will go through the intake and case management process within 72 hours. The Veteran's name will be added to the regional by-name list, which will assist in tracking the Veteran's housing status.

If eligible for SSVF and/or other VA housing programs, describe the process that will be used to connect Veterans to permanent housing within 90 days.

If Veteran is eligible for SSVF services, the SSVF Provider will utilize the 90-day Case Management program to focus on housing stability. The SSVF will assist the Veteran in working on action steps that will help them secure/sustain permanent housing, such as employment. SSVF will complete assessments and work with them to help develop a strong housing stability plan, as well as, work as an advocate between them and their current or potential landlord.

If the Veteran is eligible for SSVF services, but eligible for VA housing programs, the SSVF Provider will contact the respective VAMC Homeless Coordinator. The VAMC Homeless Coordinator will utilize the 90-day Case Management program to focus on housing stability. The VAMC Homeless Coordinator will conduct an initial assessment and work with the Veteran until he/she obtains permanent housing. The VAMC Case Manager will work with local landlords to find eligible Veteran affordable permanent housing and veteran organizations to assist with utilizies.

If ineligible for SSVF and/or other VA housing programs or the Veteran refuses VA-funded programs, describe how the SSVF provider will connect Veterans to the region's coordinated assessment process.

Once a homeless Veteran is identified through the region's coordinated assessment process and is ineligible for SSVF and/or other VA housing prorams or refuses VA-funded programs, the SSVF Provider will add the Veteran's name to the regional by-name list for monthly CoC tracking. The regional by-name list will be priortized by the results of the VI-SPDAT in determination of type of housing assistance the Veteran needs which is sorted by score and housing program recommendation. Bi-monthly case management coordinated assessment meetings with community stakeholders will help in offering permanent housing to Veterans with the most severe service needs. In addition, the SSVF Lead will track the Veteran's housing status via Excel spreadsheet the unsheltered Veteran has been identified until Veteran obtains permanent housing.

Once a Veteran enters the region's coordinated assessment system, describe how the Veteran will be tracked by regional leadership and SSVF providers to ensure housing placement.

Once the Veteran enters into the coordinated assessment system, Veteran will be added to the regional's by-name list as well as a housing waitlist. The regional by-name list will be priortized by the results of the VI-SPDAT in determination of type of housing assistance the Veteran needs which is sorted by score and housing program recommendation. Bi-monthly case management coordinated assessment meetings with community stakeholders will help in offering permanent housing to Veterans with the most severe service needs. In addition, the SSVF Lead will track the Veteran's housing status via Excel spreadsheet the unsheltered Veteran has been identified until Veteran obtains permanent housing. At the coordinated assessment bi-monthly and quarterly meetings, community partners will staff the status of veterans, as well as updates as needed if enrolled into SSVF.

Describe the process by which the region will track housing plans on regional by-name lists.

The region will track housing plans on the regional by-name list through regional and monthly meetings. The SSVF Provider will work with the Regional Committee's Coordinated Assessment team to properly tracked the region's by-name list.

Please use the following chart to list the region's coordinated assessment access points:

Agency	Counties Served	Role in the Coordinated Assessment Process
City of New Bern Police Department	Craven	Prevention and Diversion U-SPDAT
NCWorks Career Center: Carteret, Craven, Onslow	Carteret, Craven, Jones, Onslow, Pamlico	Prevention and Diversion VI-SPDAT
Religious Community Services	Carteret, Craven, Jones, Pamlico	Prevention and Diversion VI-SPDAT
Coastal Women's Shelter	Craven, Jones, Pamlico	Prevention and Diversion VI-SPDAT
Carteret County Domestic Violence Program (CCDVP)	Carteret	Prevention and Diversion VI-SPDAT
PORT Human Services	Craven	Prevention and Diversion VI-SPDAT
Family Endeavors	Craven, Carteret, Jones, Pamlico, Onslow	Prevention and Diversion VI-SPDAT
Onslow Community Outreach	Onslow	Prevention and Diversion VI-SPDAT
Onslow Women's Shelter	Onslow	Prevention and Diversion VI-SPDAT

Does the region currently have housing programs,	including public housing authorities,	with preferences
for Veterans? Yes No		

If so, please describe the each program and preferences.

Regional By-Name List

To track the BoS CoC's progress in meeting the goal of ending Veteran homelessness, key data will need to be tracked for each of the 13 regional Veteran systems. Each region should maintain a by-name list. This list will identify all homeless³ Veterans within each region and will be updated at least monthly using the USICH template.

BoS CoC staff and SSVF providers will work jointly to maintain a current by-name list for each region. BoS CoC staff will pull regular reports from agencies that use HMIS to identify Veterans, place them on the list, and ensure that the primary SSVF provider for the region makes contact. SSVF providers will make bi-weekly contact with agencies not currently using HMIS to check if any Veteran currently accesses services in their programs.

Who will oversee the by-name list for the region?
Ashly Tinkham, Family Endeavors, (910) 459-4320, atinkham@familyendeavors.org

What is the process the region will use to get consent from Veterans to be added to the by-name list? All participating agencies will provide a MOU to the Regional Committee and obtain a signed release of information agreement from the Veteran to be added to the region's by-name list.

Please list all agencies that will have access to the list to add Veterans and/or update information and describe how MOUs will be established with these agencies.

Family Endeavors, NCWorks Career Centers, VAMC, Onslow Community Outreach, Religious Community Services, Carteret County Domestic Violence Program, Coastal Women's Shelter and Onslow Women's Center have signed MOUs and is on file with the Regional Committee Lead.

Please describe the process for reviewing the list to ensure information remains current, including: how often, who will review, and in what format (in-person meeting, phone call, etc.)

Family Endeavors will review the list monthly with community parnters, via Skpye for business and/or phone conference. Veterans will be contacted twice a month and offered housing leads, if not enrolled/eligibles for SSVF services.

Describe how the by-name list will be stored for the region, including technology used and how Regional Committees and other partners will be updated.

SSVF Lead will store the regional's by-name list on an Excel spreadsheet. The information on the spreadsheet will only be provided at monthly meetings to partner agencies who have a signed MOU on file with the Regional Committee Lead.

NC Serves sends their SSVF Providers a referral. Once a Veteran has been identified as literally homeless, a VI-SPDAT will be completed, then inputted into the system.

³ https://www.hudexchange.info/resources/documents/HEARTH HomelessDefinition FinalRule.pdf

Criterion #5: The community has resources, plans, and system capacity in place should any Veteran become homeless or be at risk of homelessness in the future.

Advertisement

Please explain the strategies that will be used to educate agencies and other community systems about the regional Veteran process. (Please attach any materials the Regional Committee uses in these efforts, like flyers, slides, posters, handouts, etc.)

The Regional Committee plans to utilized local newspaper, advertising agencies, newsletters and public service announcements to educate partner agencies, Veteran organizations and local community organizations.

Please explain the strategies the Regional Committee uses to educate Veteran households who are risk of homelessness or experiencing homelessness about the regional Veteran process. (Please attach any materials the Regional Committee uses in these efforts, like flyers, slides, posters, handouts, etc.)

Regional Committee plan to utilize Veteran outreach events such as Veterans stand-down, women Veteran outreach events and other community events and workshops to educate Veteran households who are at risk of being homelessness or experiencing homelessness.

Local Oversight

The regional Veteran process provides community-wide accountability for housing Veterans experiencing homelessness as quickly as possible. It is recommended that each Regional Committee have a Veteran subcommittee to oversee the system, report out to the Regional Committee, address system grievances, educate and provide outreach to non-participating agencies, and assist in maintaining the by-name list.

Please describe how the Regional Committee will be updated about progress towards ending Veteran homelessness, including: who will provide the update, how often, and in what venue(s) (Regional Committee meetings, email, etc.).

A communication plan utilizing monthly and quarterly meetings to discuss any areas of the process to ensure continuity and timely reporting. Meetings will be conducted via webinars, telephone conferences and alternating of meeting sites.

Will the Regional Committee have a Veterans subcommittee to oversee the region's plan? ⊠Yes ☐No
How will system gaps be identified and addressed?
The Regional Committee will utilize a solid communication plan through emails, teleconferences, bi-

montly and quarterly meetings to identified systems gaps and addressed them in a timely manner.

How will system issues be identified and addressed?

System issues will be identified and addressed during bi-monthly and quarterly meetings.

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.

Providers are expected to submit a written reason for the denial to Regional Committee's Coordinated Assessment Team. Providers may decline 1 out of 10 referrals in a 2 month periord without a meeting. However, if a program declines more referrals than this, they will need to meet with Regional Committee's Coordinated Assessment Team to discuss the issue(s) that result in referrals being declined.

For all other grievances, providers must email a detailed grievance to Regional Committee's Coordinated Assessment Team within 14 days of the adverse action/decision. The Regional Committee's Coordinated Assessment Team will schedule a hearing within 14 days of receiving the grievance and render a decision within 2 days following the hearing. If grievances cannot be resolved at the local level, an appeal will be submitted to the BoS CoC Veteran Subcommittee.

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 Regional Committee's Coordinated Assessment Team, SSVF Lead, or Balance of State, either verbally or in writing, within 14 days of the attempted referral. The appropriate committee will respond within 14 days. If the household does not agree with this local decision, an appeal will be submitted to the BoS CoC Veteran Subcommittee.