

North Carolina Balance of State Continuum of Care

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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: Region 12

Counties Served: Beaufort, Bertie, Martin, Pitt, Washington

For the following please provide name and email address.

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Regional Lead: Jim Cox

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Other Coordinated Assessment Contact(s) for the Region: Sally Love, Beaufort Co. United Way

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.

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

² http://www.ncceh.org/files/7522/

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

Agency	Count(ies) Served	Population Served	Availability to administer screen	Number Staff Trained (recommend more than 1 staff)	Active on HMIS
Real Crisis	Pitt, Beaufort, Washington, Martin	Families Only Single Men Single Women	Days: 7 Times: 24-hr	Multiple	Yes
Center for Family Violence Prevention	Pitt, Washington, Martin	Families Only Single Men Single Women	Days: 7 Times: 24-hr	Multiple	Yes No
County Social Services Depts.	Bertie, Martin, Beaufort, Washington, Pitt	Families Only Single Men Single Women	Days: 7 Times: 24-hour	In process	☐ Yes ⊠ No
County School Systems	Pitt, Bertie,Martin, Washington	Families Only Single Men Single Women	Days: 5 Times: 8 a.m 3 p.m.	In process	☐ Yes ⊠ No
County Public Health Depts.	Bertie, Martin, Pitt , Beaufort, Washington	Families Only Single Men Single Women	Days: 5 Times: 8 a.m 5 p.m.	In process	☐ Yes ⊠ No
Community Crossroads Center	Pitt	Families Only Single Men Single Women	Days: 5 Times: 8 a.m 5 p.m.	Multiple	Yes No
Family Endeavors	Pitt, Beaufort	Families Only Single Men Single Women	Days: 5 Times: 8 a.m 5 p.m.	Multiple	Yes

Ruth's House	Beaufort	Families Only Single Men Single Women	Days: 7 Times: 24 hours	In process	Yes No
Zion Shelter	Beaufort	All Families Only Single Men Single Women All	Days: 7 Times: 9 p.m 7 a.m. Shelter and 10:45 a.m11:30	In process	Yes No
Eagle's Wing Food Pantry	Beaufort	Families Only Single Men Single Women	a.m. Soup Kitchen Days: Tuesday Times: 9 a.m 11:30 a.m. and 2 p.m 5 p.m.	In process	Yes 🔀 No
Salvation Army	Beaufort	Families Only Single Men Single Women	Days: 5 Times: 9 a.m 5 p.m.	In process	☐ Yes ⊠ No
Washington, NC Police Department	Beaufort	Families Only Single Men Single Women	Days: 7 Times: 24-hour	In process	☐ Yes ⊠ No
Greene Lamp	Pitt, Beaufort	Families Only Single Men Single Women	Days: 5 Times: 9 a.m 5 p.m.	In process	☐ Yes ⊠ No
Washington Housing Authority	Beaufort	Families Only Single Men Single Women	Days: 9 a.m. Times: 5 p.m	In process	☐ Yes ⊠ No

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

There is 24-hour availability for the Prevention Diversion screen to be performed for Domestic Violence victims because all of the shelters listed that serve this clientele operate on a 24-hour basis. Ruth's House in Beaufort County accepts referrals through the Washington Police Department, while the Center for Family Violence Prevention (Pitt, Martin, and Washington Counties) operates a 24-hour hotline. In addition, REAL Crisis operates a hotline that interfaces with the domestic violence shelters. If a victim contacts REAL Crisis instead of one of the domestic violence shelters, REAL can transfer the call.

There is no uniform 24-hour availability for non-domestic violence households in a housing crisis who are seeking shelter. Region 12 is exploring the option of working with the Departments of Social Services and local law enforcment in the region since they have workers on-call on a 24-hour basis. It is our hope that there can be a call number assigned to coordinated assessment that the Sheriff's Departments will agree to monitor. Part of the monitoring agreement will be to receive calls, and coordinate with the local DSS on-call workers to perform the Prevention Diversion screen. If shelter is needed overnight, it is our hope that the Departments of Social Services can use emergency funds for overnight placement until a referral can be made to the appropriate shelter on the next business day. It is our hope to have a system in place within the next 6 months.

At this point in time no system has been identified for processing in person requests after close of business. It is anticipated that law enforcement would be most likely to encounter situations that may require emergency placement. Should that be the case, it may be possible to coordinate with the Sheriff's Departments and Departments of Social Services to facilitate those requests as referenced above until a referral can be made to the appropriate shelter on the next business day. If this is possible, it is our hope to have this system in place within the next 6 months.

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
Ruth's House PO Box 2843 Washington, NC 27889 Office: (252)946-0709 Crisis: (252)940-0007 Website: www.ruths-house.org	Beaufort	Yes No

Center for Family Violence Prevention	Martin	🛛 Yes
PO Box 8429		L No
Greenville, NC 27835-8429		
Office: (252)809-4290		
Crisis: (252)752-3811		
Fax: (252)809-4289		
Website: www.c4fvp.org		
Center for Family Violence Prevention	Pitt	🖂 Yes
PO Box 8429		No
Greenville, NC 27835-8429		
Office: (252)758-4400		
Crisis: (252)752-3811		
Fax: (252)752-4197		
Website: www.c4fvp.org		
Center for Family Violence Prevention	Washington	🛛 Yes
PO Box 8429		🗌 No
Greenville, NC 27835-8429		
Office: (252)793-1500		
Crisis: (252)752-3811		
Fax: (252)793-1505		
Website: www.c4fvp.org		
		Yes
		🗌 No

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

The process for making referrals to domestic violence is to make a "warm" referral. When a prevention diversion screen results in a domestic violence referral, a phone call is made to the domestic violence agency alerting them to the referral. All of thelisted domestic violence agencies in Region 12 operate on a 24-hour basis, so they can be reached to make referrals. Once the call is placed, the Prevention Diversion screen is then faxed or emailed to the referral agency. REAL Crisis is able to transfer calls to the Center for Family Violence Prevention that serves 3 counties . Local law enforcement is also able to make contact with the appropriate shelters on a 24-hour basis. Whether in the form of referral calls or in-person referrals through law enforcement, it should be possible to faciliate referrals anytime.

The participating Domestic Violence Shelters track all referrals, noting whether or not program placement takes place. This information is included in quarterly reports for the coordinated assessment system.

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. The shelter in Bertie County, Roanoke Chowan SAFE, is the only shelter currently not participating in the coordinated assessment system. Efforts are underway to incorporate that shelter into the system in a manner that matches the process of the participating domestic violence shelters. The timeline is 90-120 days.

Does your region need assistance in engaging domestic violence agencies? If yes, please provide the name, email and phone number of the person to contact: Not at this time.

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? Xes No If yes, please describe the mediation services provided: Mediation is done on a case by case basis through the agencies listed below. It is the general practice to determine whether a situation can first be resolved without having to provide financial assistance. If the household is willing, the situation will be investigated by the mediation organization to determine the options that are available for resolution. If the situation cannot be resolved without financial assistance, financial assistance will be offered to the extent possible. Community Crossroads Center (CCC) has a more structured mediation process that is limited to clients that would be candidates for the TANF program. TANF referrals are made to CCC by Pitt County Department of Social Services.

Are financial assistance resources available for diversion? 🛛 Yes 🗌 No

If yes, how much financial assistance and what sources of funding are used for this? As stated above, Community Crossroad Center can only provide diversion assistance to those who qualify for TANF. The amount of money is variable, but is for rent and utility arrearages to bring a household current, as well as future payment of rent/utilities on a case-by-case basis. Other agencies listed also evlauate on a caseby-case basis. They can provide rent, utilities, and deposits, with amounts and durations variable. While there is more than one source for diversion financial assistance, funds are not always available, which can cause gaps in assistance.

Agency	Count(ies) Served	Participate in	Services Provided
		Coordinated Assessment	
Departments of	All Region 12 counties	Yes	Mediation
Social Services		🔀 No	🔀 Financial Assistance
Community	Pitt	🔀 Yes	Mediation
Crossroads Center,		🗌 No	🔀 Financial Assistance
TANF contract			
Zion Shelter	Beaufort	🔀 Yes	Mediation
		🗌 No	🔀 Financial Assistance
Salvation Army	Beaufort	🔀 Yes	Mediation
		🗌 No	Financial Assistance
Disability Advocates	Pitt, Beaufort	Yes	Mediation
and Resource Center		🔀 No	Financial Assistance
Ruth's House	Beaufort	🔀 Yes	Mediation
		🗌 No	Financial Assistance
Washington Housing	Beaufort	Yes	Mediation
Authority		No	Financial Assistance

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

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.

The process for making referrals is still being refined because there are a number of agencies still being solicited to participate in this part of the diversion process. For example, each county has agencies that receive FEMA Emergency Food and Shelter funds. We are in the process of identifying the FEMA agencies in each county, with the intention of using them as resources, subject to their agreement to participate. The Salvation Army is one agency that commonly receives these funds. In addition, there are numerous faith-based organizations that have financial resources available for assistance. The challenge is that the availability varies, as does the process for considering referrals, as does the capacity to participate in a system of this nature if required to report activity. However, it is a goal to integrate as many of these agencies as possible into the system over a 1-2 year period.

The preferred process for Region 12 is that the prevention/diversion screening agency contact the diversion assistance agency to initiate the referral, and to make the referral without the household having to visit the diversion assistance agency. This will be done with a referral form emailed or faxed to the diversion assistance agency. The diversion assistance agency will complete their portion of the form after which it will be returned to the prevention/diversion screening agency. The prevention/diversion screening agency will be responsible for documenting the outcome of the diversion so that it can be reported in the quarterly Coordinated Assessment Report for Region 12.

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
Community Crossroads Center	Pitt County primarily; will accept referrals from Region 12 on a space available basis.	Yes No	Families Only Single Men Single Women	Verification of homelessness, ID, birth certificates for minors, no sex offenders due to the presence of minors, no alcohol.	Yes No
Zion Shelter	Beaufort primarily; will accept Region 12 referrals	Yes No	Families Only Single Men Single Women	Verification of homelessness, ID, no families, not openly intoxicated, 18 years or over, no sex offenders.	Yes
		Yes No	Families Only Single Men Single Women		Yes No
		Yes No	Families Only Single Men Single Women		Yes No
		Yes No	Families Only Single Men Single Women		Yes No

Yes No	Families Only Single Men	Yes No
	Single Women	

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 making shelter referrals place a phone call to the referral shelter to determine bed availability. If beds are available, the referral form is emailed/faxed and/or sent with the household being referred. Participating shelters track the number of referrals placed in a program. Those numbers are provided for the quarterly coordinated assessment report. If a shelter bed is not available, the shelter will be asked to keep a record of those referrals they cannot accommodate for coordinated assessment reporting. If the referring agency is able to secure an alternative arrangement, they will be asked to notify the shelter so that there is a record of the outcome that can be reported.

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?

Not every county in Region 12 has a shelter. Shelters within region 12 will accept referrals from any Region 12 county. If shelter space is not available in Region 12 facilities, referrals to shelters outside Region 12 will be made, if the household is agreeable. If the household is not comfortable leaving Region 12, efforts will be made to secure temporary motel/hotel stays by working with those resources that can provide financial assistance, until such time as a shelter bed is available, or another housing option is identified. Financial resources for housing are limited; therefore, it may not always be possible to meet the need for an emergency bed, which is why efforts will be made to look at all potential options for the household.

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.

If it is not possible to place a household in a Region 12 shelter, efforts will be made to find a shelter placement outside of Region 12, if the household is agreeable. If the household is not comfortable leaving Region 12, efforts will be made to access financial assistance through those sources identified in the diversion chart above. Financial resources for housing are limited; therefore, it may not always be possible to meet the need in these types of situations, in which case additional options for the household will be explored, such as places where the household lived previously, family, and/or friends, to see if another alternative can be identified.

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
Community Crossroads Center	Primarily Pitt Co., but will accept Region 12 referrals	Families Only Single Men Single Women	Days: 5 Times: 8 a.m 5 p.m.	Multiple	Yes No
Center for Family Violence Prevention	Pitt, Martin, Washington	Families Only Single Men Single Women	Days: 5 Times: 8 a.m 5 p.m.	1	☐ Yes ⊠ No
Ruth's House	Beaufort	Families Only Single Men Single Women	Days: 5 Times: 8 a.m 5 p.m.	In process	☐ Yes ⊠ No
Zion Shelter	Beaufort	Families Only Single Men Single Women	Days: 7 Times: 7 p.m 9 a.m.	In process	Yes
Pitt County Planning	Pitt	Families Only Single Men Single Women	Days: 5 Times: 8 a.m 5 p.m.	2	Yes No
United Way of Pitt County - Homeless Services Coordinator only	Pitt	Families Only Single Men Single Women	Days: 5 Times: 9 a.m 3 p.m.	1	☐ Yes ⊠ No
Greenville Housing Authority	Pitt	Families Only Single Men Single Women	Days: 5 Times: 8 a.m 5 p.m.	2	Yes

Volunteers of America	Pitt, Martin, Bertie,	Families Only	Days: 5	Multiple	🛛 Yes
	Washington	Single Men	Times: 8 a.m 5 p.m.		🗌 No
		Single Women			
Family Endeavors	Pitt, Beaufort	Families Only	Days: 5	Multiple	🛛 Yes
		Single Men	Times: 8 a.m 5 p.m.		🗌 No
		Single Women			

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? Not less than 14 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.

At present there is no active outreach to unsheltered homeless, except during the Point In Time survey. If households are identified as unsheltered during this survey period, the household is asked whether or not they need housing assistance. If interested in housing assistance, the household is then administered the VI-SPDAT so that a housing referral can be made. Otherwise, unsheltered households are administered the VI-SPDAT only when referred by another agency, or if a direct contact is made by the household to a homeless services provider.

The VI-SPDAT is administered by the agency that is most quickly able to perform the survey. Once completed, the household is presented to the Housing Stabilization Committee, which meets weekly, for assessment to determine the most appropriate housing placement.

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. Within Region 12 there has been a goal to secure additional funding for a position that can support case management and outreach efforts, recognizing that these are gaps in service for the region. The timeline for a new position, was to secure funding during the past 12 months, but those efforts were not successful. It is our intent to secure funding within the next 12 months, exploring ESG as a possibility, as well as non-government funding sources. Once the region is successful in securing funds, the agency will transition to an active outreach program. It is estimated that this transition will happen within 60-90 days from the time funds are received and personnel is hired to engage in these activities. The intent of the position will be to have a list of sites that are regularly visited/contacted because they are known to be frequented by unsheltered homeless. These sites may include soup kitchens, day centers, camp sites, etc. When contact is made with a household interested in housing placement, the outreach worker will either administer the VI-SPDAT, or will coordinate with other personnel in the region who are able to administer the VI-SPDAT.

In the absence of funding for dedicated outreach efforts, Region 12 will coordinate with Veterans organizations doing outreach, to the extent they can assist. Efforts to involve personnel in other settings (e.g. soup kitchens and libraries) have not been successful because of limited staff and/or variable staffing schedules, hence the reason that a hired person with responsibility for outreach is preferred. In the meantime, it will be a goal to speak with staff at these locations to let them know how they can refer clients for housing evaluation. It may also be possible to place posters at these locations with information as well.

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? Households that are referred to housing placement through the VI-SPDAT are presented to a committee all of whom are bound by a confidentiality agreement not to disclose information about those being considered for

housing placement. The domestic violence agency makes the decision about whether to present the household to the committee anonymously. If presented anonymously the domestic violence shelter will provide a tracking number for the household.

If not, please provide your plan to engage local domestic violence agencies, including goals and timeline. As previously state, Roanoke Chowan SAFE is the only domestic violence agency not active in coordinated assessment at this time. Efforts are underway to incorporate that shelter into the system in a manner that matches the process of the participating domestic violence shelters. The timeline is 90-120 days.

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? \square Yes \square No If not, please describe the score ranges the region uses for housing referrals and why.

Agency	Count(ies) Served	Type of Housing Programs	Population Served	Active on HMIS
Pitt County Planning	Pitt	PSH	Families Only	Yes
		🔀 RRH	Single Men	🗌 No
		🗌 ТН	Single Women	
		Other:		
Greenville Housing	Pitt	PSH 🛛	Families Only	Yes
Authority		RRH	Single Men	🗌 No
		П ТН	Single Women	
		Other: HOPWA, Senior		
		Housing, Section 8, Public		
		Housing		
Trillium Health	Bertie, Martin, Pitt,	🛛 PSH	Families Only	🛛 Yes
Resources	Beaufort, Washington	RRH	Single Men	No No
		🗌 ТН	Single Women	
		Other:	All	
Volunteers of America	Bertie, Martin, Pitt,	PSH 🗌 PSH	Families Only	Yes
	Washington	🔀 RRH	Single Men	🔀 No
		🗌 ТН	Single Women	
		Other: SSVF	All	
Family Endeavors	Pitt, Beaufort	PSH 🗌 PSH	Families Only	Yes
		🔀 RRH	Single Men	🔀 No
		🗌 ТН	Single Women	
		Other: SSVF	All	
Washington Housing	Beaufort	PSH 🗌 PSH	Families Only	Yes
Authority		RRH	Single Men	🔀 No
		🗌 ТН	Single Women	
		Other: Public Housing,	All	
		Section 8, 10 emergency units		
Mid-East Housing	Bertie, Martin, Pitt,	PSH 🗌 PSH	Families Only	Yes
Authority	Beaufort, Washington	RRH	Single Men	🖂 No
		П тн	Single Women	
		Other: Public Housing, 10		
		emergency units		

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

Farmville & Ayden	Pitt	PSH	Families Only	Yes
Housing Authorities			Single Men	No
		Птн	Single Women	
		Other: Public Housing		
Beaufort County DSS	Beaufort	PSH	Families Only	Yes
			Single Men	🖂 No
		П ТН	Single Women	
		Other: Motel stays	All	
Local Landlords	Beaufort	PSH	Families Only	Yes
		RRH	Single Men	🖂 No
		П ТН	Single Women	
		Other: Available apts.		
Local Motels -	Beaufort	PSH 🗌 PSH	Families Only	Yes
Magnuson Motel is		RRH	Single Men	🖂 No
confirmed, others in		🗌 тн	Single Women	
process		Other: Motel stays		
Disability Advocates	Pitt, Beaufort	PSH PSH	Families Only	Yes
and Resources Center			Single Men	🖂 No
		П тн	Single Women	
		Other: Housing for disabled		
VA	Pitt, serving all counties in	PSH PSH	Families Only	Yes
	Region 12		Single Men	🖂 No
		П тн	Single Women	
		Other: VASH		
Washington Area	Beaufort	PSH	Families Only	🛛 Yes
Interfaith Shelter			Single Men	🗌 No
(Zion)		🛄 тн	Single Women	
		Other:		

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 Housing Stabilization Committee (HSC) in Pitt County is the only operative system inRegion 12 at this time. The HSC reviews housing referrals that are made to the coordinated assessment system. Once the HSC makes a recommendation, a referral form and assessment are sent to the housing agency. Referrals may be given directly to the housing agency during the committee meeting, by email/fax, or may be sent with the client at the time an intake appointment is scheduled. The housing agency is responsible for reporting the outcome to the referring agency and to the HSC. The HSC is responsible for ensuring that the outcome is recorded by the appropriate agency, so that the data can be captured for coordinated assessment reporting. Pitt County and regional leadership will work with other counties in the region to help establish comparable systems. These will be phased in as each county's system develops. Beaufort County is anticipated to be the next county to put in place a system because they are further along in development of their resources and system design.

The goal is that other counties may be brought along within the next 12 months to 18 months. The reason for variation in the timeline is due to the differences in local coordination of resources and manpower across these counties, as well as in their familiarity with regional, state and federal systems to support efforts to end homelessness. Given the fact that funding resources can be brought into the region, it is our hope that this will be a catalyst to stimulate activity, such that 12 months will prove to be the more accurate timeline.

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?Pitt County is the only county in Region 12 with a Waitlist system in place. The Waitlist is currently stored electronically by the Housing Stabilization Committee (HSC) Lead. Region 12 is currently exploring the possibility of using an electronic system that will allow designated representatives from the committee to access the Waitlist for review. This system ideally will also servce as a site to submit referrals for review. Pitt County would be the host site for the Waitlist if this system is able to be put in place. Pitt County and regional leadership will work with other counties in the region to develop their own Waitlist systems at the appropriate time. In the meantime, the existing Housing Stabilization Committee can maintain a wait list for each county. For inactive counties this may only be a tracking mechanism of people who are homeless, since resources are limited, not a means of actually moving households into housing. It is anticipated that as financial resources and investment in the system become more developed in inactive counties, it will be possible for movement of households off the wait list to happen more effectively.

Who manages the Regional Committee's waitlist? In Pitt County the Regional Lead manages the Waitlist, with input from the Housing Stabilization Committee. Management of the Waitlist may transfer to the Coordinated Assessment Lead during the next year. Other counties do not yet have Waitlists.

Who has access to the Regional Committee's waitlist? In Pitt County the Regional Lead is currently the only individual with access to the electronic Waitlist. As stated above, Pitt County is exploring options for a system that would allow greater access from members of the HSC, with view access. Edit access to the Waitlist will remain limited to one or two people, most likely the Regional Lead and the Coordinated Assessment Lead. Other counties do not yet have Waitlists.

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 <u>http://www.ncceh.org/bos/coordinatedassessment/</u>. Pitt County will use a uniform Release of Information to obtain consent from participants to share and store their information. Other counties will be encouraged to adopt the same ROI.

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? There will be a number tracking system that can be used for anonymous tracking of those who do not want identifying information shared. This is the preferred approach for Region 12.

How will the Regional Committee confidentially and safely track survivors of domestic violence on the waitlist and prioritize them for housing? It is the responsibility of the domestic violence agency to determine whether the household is to be presented anonymously. An anonymous number tracking system will be used for households that are presented anonymously. Prioritization for housing will be the same for all households on the waiting list, considering factors that determine those who are most vulnerable.

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. Pitt County has a Housing Placement Committee that provides case conferencing and oversees the housing referral process. The committee meets weekly to accept and process referrals, review the waitlist, and hear consultations. Consultations offer an option for agencies to explore housing alternatives so that they may better advise clients with whom they are working before a referral is made through coordinated assessment to the Housing Placement Committee. All actions of the committee are confidential. All committee members sign confidentiality agreements. This committee welcomes other counties in Region 12 to attend its meeting, and is open for consultation with other Region 12 counties, as they determine the best case conferencing system for their respective jurisdictions.

How does the Regional Committee ensure that the most vulnerable households get housing resources first? The Housing Placement Committee in Pitt County has a commitment to serving the most vulnerable households that are referred. Since there is not always a wait for housing, the Housing Placement Committee will review the cases presented. Those considered most vulnerable will be scheduled for housing placement first, after which others presented will be considered. To determine those most vulnerable, the committee will consider the VI-SPDAT score; whether the referral is chronically homeless/length of time homeless; whether a Veteran; whether disabled; whether there are children in the household; and whether the household is unsheltered. More "yes" responses to these factors will result in a higher priority for housing placement. The Waitlist will only become effective when there are no units and/or financial resources available to assist referred households. The same criteria will be used for waitlisted referrals. VI-SPDAT score will determine preferred housing type. Since shortening length of time homeless is significant for system effectiveness, that factor and chronic homelessness will be heavily weighted (since chronic homelessness and long periods of homelessness are related), followed by Veteran status, disability status, children in the household, and whether unsheltered. More "yes" responses will yield a higher priority ranking on the waitlist. For example, a larger household that is unsheltered with a head of household this is disabled, will be ranked higher than a household with the same factors that is sheltered. Once a household's referral has been accepted for housing placement by a housing program the household leaves the waitlist. Pitt County, working with regional leadership, will assist other regional counties in developing a

prioritization system as each county's system develops.

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 12 Lead. Please outline the specific criteria under which a program may reject a referral (refer to the <u>CA Written Standards</u> for more information). Programs may only reject a referral if:

1) The referral does not meet program eligibility criteria;

2) All program beds are full; or

3) Registered sex offenders and those convicted of violent crimes may be denied, ONLY If the program has in residence at least one family member with a child under the age of 18 residing in the same facility.

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? In Pitt County if a household's referral is not able to be accommodated, the Housing Stabilization Committee will look at other available housing programs in the Region, if there are others. If there are no other suitable programs within Region 12, efforts will be made to faciliate placement outside the region, if the household is agreeable. If the household is not agreeable, efforts will be made to seek resources outside the coordinated assessment system that may be suitable for the household. The household will remain on the waitlist until an appropriate housing placement is secured. Similar approaches will be encouraged in other Region 12 counties as their systems develop.

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? In Pitt County follow-ups are attempted on at least a bi-weekly basis. If the household does not respond within a 90-day period, the household will be removed from the Waitlist. Additionally, if the household moves out of the shelter facility without the need for housing placement assistance, or if the household asks to be removed from the Waitlist, they will be removed. It is intended that Pitt County will work with regional leadership to establish comparable approaches in other Region 12 counties as their systems develop.

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? Pitt County has not been in a position where it has waitlisted unsheltered households for any significant length of time. However, it is a practice to follow-up with unsheltered households at least every 30 days, with a preference for bi-weekly contact. Similar approaches will be encouraged in other Region 12 counties as their systems develop.

What is your policy for taking a household off of the list? In Pitt County households are removed from the waitlist if they request to be removed, or if they cannot be reached within a 90-day period of time. If a household returns after it has been removed from the waitlist, the process will start again, so that information for the household is current. Similar approaches will be encouraged in other Region 12 counties as their systems develop.

How many attempts do you make to contact? 6-8

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? In Pitt County, if a household is unable to be reached, this information is shared with the Housing Stabilization Committee to ensure that there are no other options for reaching the household. If no other options for contacting the household can be identified, and at least 90 days has elapsed, the household will be removed from the waitlist. Similar approaches will be encouraged in other Region 12 counties as their systems develop.

System Management and Oversight

Transportation

Are people required to travel to different locations to access programs and services in your community? Xes 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. Most of the funds that are available for transportation are part of an agency budget, and are limited to clients of that agency. If program funds are not available for transportation, the case manager assigned to the client will be approached to transport the client, when possible.

What happens if a household is unable to access transportation resources or any other transportation? If neither of the options listed above is available, efforts will be made to have the program(s) from whom the client is seeking assistance meet the client at an accessible location.

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.) Region 12 has not yet developed any materials to promote coordinated assessment. The primary method of communication has been through direct contact with other agencies by telephone, email, or in person. During these encounters reference has been made to materials developed by the Balance of State that explain the coordinated assessment process, including overview documents, and the assessment tools with the demonstration prezis. Links to this information have been provided, as well as copies of the material when appropriate. Additionally, interested parties have been invited to attended the Pitt Regional Committee and Pitt Housing Stabilization Committee meetings to learn more. Efforts are ongoing to identify multi-agency meetings in other regional counties where information can be presented. Trips have been made to established committees of provider organizations who are likely to encounter homeless households in Beaufort, Bertie, and Martin Counties to share information and solicit participation.

The coordinated assessment planning team has discussed making appearances on local shows in the communities of Region 12 that showcase human services programs and resources. There is a program in Pitt County that highlights nonprofits and the work that they do. In addition, flyers that could be posted in regional agencies, along with materials for the agencies to share with their clients, have been discussed.

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.) Region 12 has not developed any materials to educate households. There has been discussion about developing "Street Sheets" a method that is used in Wilmington/New Hanover County. Street Sheets have a list of resources that can be given to unsheltered homeless to help them access services. Since there is not an active outreach program at this time, there has been discussion of developing sheets that can be distributed to regional agencies to share with their clients as needed. As financial resources are accessed to support an outreach program, these resource sheets can be used as "street sheets". For those who are sheltered, the coordinated assessment system is accessed through the case managers in the respective shelters.

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. Services of this nature are not readily available in Region 12, nor has there been a significant need for them, given the small urban and rural nature of the region. When situations arise they are dealt with on an individualized basis by accessing assistance from organizations that have access to the specific services needed for that household's situation. For example, there are sign language interpreters and translators in the area that may be called upon for assistance, but these would have to be scheduled based on the availability of the interpreter since they have regular job assignments that they must work around.

Our experience has been that Departments of Social Services, Health Departments, and hospitals have these resources. Trillimum Health Resources may be able to assist in some cases with interpreting services, when referred clients are eligible for enrollment into their programs. Region 12 has reached out to Trillium for guidance on the services they use in the hope of devleoping a resource list that can be shared with area homeless services providers. Ultimately, it is our desire that the Region will be able to contract the services most needed. If the BoS has any suggestions on how to fund this type of support, those recommendations would be appreciated.

There has been discussion about making publicity materials in large type as they are developed, as well as grievance documents, and other documents that clients may need to read relative to coordinated assessment. There is no access to Braille, audio, or assistive listening devices at this time.

Is there an access point in your community accessible to people who use wheelchairs or have limited mobility? Yes. All of the shelters have accessible facilities, as do the Departments of Social Services and

school systems. This is common practice as the result of ADA requirements, and the fact that the entry points to the system are accustomed to working with disabilities.

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? For those with limited English Proficiency there are interpreters available to assist with explanation of the system. Some agencies have developed written documents in alternative languages (e.g. Spanish). For those who are unable to read, it is customary for documents to be read and explained verbally.

There has been discussion about developing a list of interepreter resources that can be shared throughout the region.

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.

At this time Region 12 plans to oversee smaller systems, based out of each county.

Why is this the best plan to cover the Regional Committee? This decision was made because Pitt County and Beaufort County already have/are developing systems within their respective jurisdictions. After discussion, it was determined that each community knows their available resources and contacts within their respective communities. Furthermore, we believe that the best plan is to have individual systems within each county because the manpower and financial resources are such that it will be difficult to facilitate movement through the larger region. We also believe that it will help each county consciously think about and develop capacity to implement the best course(s) of action for working with homeless households in their communities. Finally, it will allow households to remain in their county of residence unless another option is the best and/or only option.

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? Once there are multiple systems in place, It will be our intention that referrals can be made across county boundaries because there will still be some variance in the resources that are available. For example, if there is no shelter facility, or if a domestic violence situation dictates a move from the county of origination, a referral to another county within Region 12 is appropriate.

Please describe how you foresee the Regional Committee' s coordinated assessment process changing in the future, including timelines and finding grantees who will cover the entire region. It is ancitipated that the coordinated assessment system will develop gradually over a mult-year period of time

because there is wide variation in the knowledge and readiness of each county. Our hope is that each county, working with regional leadership, will develop a system and choose to participate, but that is not guaranteed at this time. In the interim, the Regional Committee, through its Coordinated Assessment and Housing Stabilization committees, will entertain housing requests from inactive counties. One resource that can be offered is a consultation about housing stabilization options that may be available, both inside and outside the coordinated assessment system. Another service that can be offered is to maintain a wait list for each county. With limited resources, this may mean that households go on a wait list for their respective county, with no guarantee of assistance. As more financial resources become available to the region, movement of households from the wait lists of each county is anticipated to improve. This will at least allow coordinated assessment coverage across the entire region.

With regard to funding, our initial approach is to access funds for the inactive counties that have gone unused in the past (e.g. ESG and/or CoC). These funds would be a starting point around which to develop activity in those counties. For example, a SAFE house in one of the counties may not be receiving ESG funds, which could be accessed by Region 12 to assist that agency in reaching more clients, as well as to assist in becoming active in coordinated assessment. There is also a medical foundation that serves more than one county in Region 12. The same approach may be used with the medical foundation to help counties within its jurisdiction develop and coordinate their delivery systems. These efforts can begin during the next 12 months.

In addition, there are some foundations that serve eastern North Carolina that would be possible funding sources for the entire region. Since application processes and timelines vary by funding source, these efforts will be integrated over a multi-year period of time to coincide with regional needs that are identified.

It is our hope that offering financial resources to assist with specific needs will allow each county to see the benefits, as well as the financial feasibility of participating in coordinated assessment, and more importantly in the impact they can have in ending homelessness.

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.

Region 12 has 3 counties that have been largely inactive (Martin, Bertie, and Washington). Through regional outreach efforts, one of those counties (Martin) participated in the Point In Time for the first time in 2017. Initial outreach has been directed to mainstream organizations that exist in each county, such as Departments of Social Services, Health Departments, school systems, and law enforcment. While outreach to DSS directors in each county has not yet generated much activity, identification of multiagency groups that meet regularly has been more successful. Through these groups we hope to gain a forum through which to share coordinated assessment information. Trips to such organizations have taken place in Bertie, Beaufort, and Martin Counties. In June 2017, Regiona 12 is hosting its first Regional Meeting outside of Pitt County, in Martin County. Significant outreach to County Mangers and elected officials from all Region 12 counties is underway in an effort to have representation from each county at that meeting. It is our hope that this will be a catalyst to spur further activity toward engagement of these counties in regional coordinated assessment and other efforts to end homelessness.

Coordinated Assessment Outcomes

How will outcome data be gathered for quarterly reports to the CoC? Each county will tally their

information, which will be submitted to the regional coordinated assessment lead. The regional coordinated assessment lead, working with members of the coordinated assessment committee, will compile and submit a report for Region 12. There will be no data to initially report for those counties that are not active.

Who will be in charge of submitting, correcting, and reviewing outcomes? The coordinated assessment lead, working with members of the coordinated assessment committee, will take on this role. Designated points of contact will be identified in participating counties from which to collect data that is needed for the reporting process.

How are finalized coordinated assessment outcome reports presented to the community? Outcomes will be reported at the Regional Committee. They will also be made available to be reported by the individual counties that are conducting regular 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.

Outocme data will be used to identify the best uses of additional funds for the region. For example, Pitt County has already identified a need for more case management to improve client housing outcomes. They are seeking additional funds to address this need. Data from outcome reports can be used to highlight specific needs in funding applications. It is anticipated that outcome information can also be used to address local units of government to help decision makers understand how systems work and the benefits to be derived from having a coordinated assessment system.

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 2 out of 5 referrals in a 6month period without a meeting. However, if a program declines more referrals than this they will need to meet with the greivance committee to discuss the issue(s) that result in referrals being declined.

Providers are expected to submit a written reason for the denial to the grievance committee. Providers may decline 3 out of 10 referrals in a 1-month period of time without a meeting. However, if a program declines more referrals than this they will need to meet with the grievance committee to discuss the issue(s) that result in referrals being declined.

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

Individual Grievance Policy

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

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

If the household remains unsatisfied, they may file a grievance with the grievance committee, the regional lead, or the coordinated assessment lead, either verbally or in writing, within 5 days of the attempted referral. The grievance committee will respond within 10 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

Region 12 uses the VI-SPDAT and other assessments to identify individuals who are chronically homeless. Based on this finding, seeking appropriate housing based on those needs is the first course of action, followed by securing appropriate supportive services to address those conditions that may be ongoing in nature , as well as cause barriers to success in housing for that individual. Every effort is made, given the resources available in the community, to encourage success in housing and improved long term quality of life on an individualized basis.

Unaccompanied Youth (up to age 24)

Region 12 refers unaccompanied youth under the age of 18 to the Department of Social Services. Unaccompanied youth ages 18-24 are treated as adults, with access to all the services and resources available to adults. At this time, there are no housing programs specifically for this population group. However, the DSS agencies have programs geared toward youth aging out of foster care. These programs will be a referral point for individuals who meet this criteria.

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

