

WINSTON-SALEM FORSYTH COUNTY CONTINUUM OF CARE (CoC)

FIRST YEAR ACTION PLAN FOR CoC ASSESSMENT (2022/2023)

Issue #1: CoC Structure

<i>Recommendation</i>	<i>Next Steps</i>	<i>Level of Priority</i>	<i>Responsibility</i>	<i>Key Resources</i>	<i>Timeline goal? Progress?</i>
1.1 Recast the Commission on Ending Homelessness (COEH) in an Advisory Role	<p>a. Create a Restructuring Committee to hold responsibility for developing new goals and mission for the COEH as an advisory body to the Winston-Salem City Council, the CoC, and the Forsyth County Board of Commissioners</p> <p>i. Restructuring Committee should be comprised of 6-8 members from the COEH and Operating Cabinet, representing the City, the County, service providers, and people with lived experience of homelessness.</p>	1	COEH and Operating Cabinet		
	<p>b. Restructuring Committee should:</p> <p>i. Develop a list of recommended seats for the COEH that reflects both the new goals and mission, as well as the diversity of membership in the CoC, including involvement of people with recent lived experience of homelessness</p> <p>ii. Recommend the number of seats on the COEH (no more than 10) and the appointment authority for each of the slots, some from the Winston-Salem City Council, some from the Forsyth County Board of Commissioners, and some from the Forsyth County CoC Operating Cabinet</p> <p>iii. Define the purposes of the COEH, which might include:</p> <p>a. Working in collaboration with County government, City government, philanthropy, business sector, community and faith-based organizations, and other interested stakeholders to focus on collaborative strategies to promote an effective response to homelessness within Forsyth County;</p> <p>b. Acting as an advisory body to the City of Winston-Salem City Council, the Forsyth County Board of Commissioners, and other organizational bodies,</p>	1	Restructuring Committee		

	<p>having no independent authority to make decisions or act on matters such as legislation or lobbying;</p> <p>c. Fostering regional leadership that promotes resource development to address homelessness within Forsyth County;</p> <p>d. Supporting efforts to coordinate responses and martial resources to address pressing regional, intergovernmental and cross-jurisdictional issues such as homeless encampments.</p> <p>iv. Define the functions of the COEH, which might include:</p> <p>a. Provide leadership and influence to ensure the implementation of the goals and strategies of the CoC to prevent and end homelessness throughout Forsyth County;</p> <p>b. Strengthen regional capacity and multi-jurisdictional, multi-sector investments to prevent and end homelessness;</p> <p>c. Promote integration of services throughout the community that promote coordination and integration of resources to improve the countywide response to homelessness;</p> <p>d. Promote and support strategies with each of the collaborative agencies/entities, which facilitate financial and political means for achieving the CoC's goals to prevent and end homelessness in Forsyth County.</p>				
	<p>c. Restructuring Committee to present proposal to key organizations for endorsement:</p> <p>i. Operating Cabinet and/or CoC Council</p> <p>ii. COEH</p> <p>iii. Winston-Salem City Council</p> <p>iv. Forsyth County Board of Commissioners</p>	1	Restructuring Committee		
	<p>d. Restructuring Committee to draft and present an amended Governance Charter reflecting the proposed changes to the Operating Cabinet for approval by two-thirds vote of Cabinet Members present. Notice of any amendment of the Charter must be presented in writing to the Operating Cabinet ten days before the meeting at which the amendment will be voted upon.</p>	1	Restructuring Committee, Winston-Salem City Council, City of Winston-Salem		
	<p>e. Winston-Salem City Council and Forsyth County Board of Commissioners, and CoC Operating Cabinet nominate and approve individuals to sit on the COEH</p>	1	Winston-Salem City Council, Forsyth County Board of Commissioners, Operating Cabinet		

	f. Convene the first reconfigured COEH		New COEH, Executive Committee and Staff		
1.2 Revise the role of the Operating Cabinet to be the primary decision-making body of the CoC	a. Charge the Restructuring Committee to revise the Governance Charter of the CoC to reflect that the Operating Cabinet is the decision-making body of the CoC.	1	Operating Cabinet		
	b. Delegate to the Restructuring Committee the following responsibilities: <ul style="list-style-type: none"> i. Draft new policies and procedures and Governance Charter provisions that reflects the changed responsibilities, including (in addition to current responsibilities) the responsibility to serve as the principal decision-making body of the CoC, to oversee the strategic initiatives and investments of the CoC, to make recommendations to the Collaborative Applicant on the application for and spending of HUD CoC and Emergency Solution Grant Funds, and to evaluate the system-wide response to the needs of residents who experience homelessness at least every five years and develop a plan to address identified needs and gaps. ii. Coordinate to include any revisions to the Governance Charter that will be necessary to reflect changes in the COEH, as well as the new Executive Committee to the Operating Cabinet (1.b.ii below). iii. Present the new policies and procedures and Governance Charter to the Operating Cabinet for approval by two-thirds vote of Cabinet Members present. Notice of any amendment of the Charter must be presented in writing to the Operating Cabinet ten days before the meeting at which the amendment will be voted upon. 	1	Restructuring Committee, Operating Cabinet		
1.3. Create an Executive Committee to the Operating Cabinet	a. Charge the Restructuring Committee with revising the Governance Charter of the CoC to establish an Executive Committee to the Operating Cabinet	1	Restructuring Committee		
	b. Establish the Executive Committee to the Operating Cabinet with no more than eight members. Ensure diverse representation from the breadth of Operating Cabinet members, including people with lived experience, frontline staff, shelter providers, street outreach providers, housing providers, and HMIS experts.	1	Ad Hoc Policy Committee and Operating Cabinet		
	c. Along with changes to the Operating Cabinet and committee structure, present the new policies and procedures and Governance Charter to the Operating Cabinet for approval by two-thirds vote of Cabinet Members present. Notice of any amendment	1	Ad Hoc Policy Committee and Operating Cabinet		

	of the Charter must be presented in writing to the Operating Cabinet ten days before the meeting at which the amendment will be voted upon.				
1.4 Adopt a Formal Committee Structure for the Operating Cabinet	a. Identify a small group of CoC members to develop a proposal for a formal committee structure for the CoC – either as part of the Restructuring Committee or in parallel with its work. Ensure diverse representation from the breadth of Operating Cabinet members, including people with lived experience, frontline staff, shelter providers, street outreach providers, housing providers, and HMIS experts.	2	Operating Cabinet delegated members		
	b. Clarify the role, function and membership of existing committees and workgroups.	2	Operating Cabinet delegated members		
	c. Determine whether new/different committee and workgroups are needed. Determine which committees and/or workgroups should always be a part of the CoC and which can remain ad hoc or as needed	2	Operating Cabinet delegated members		
	d. Annually evaluate the committee structure.	ongoing	Operating Cabinet delegated members		
	e. Ensure committees are empowered and action-oriented to be able to make decisions and act on those decisions on behalf of the CoC.	2	Operating Cabinet delegated members		
1.5 Review the roles and responsibilities of the Homeless Caucus	a. Identify a group of CoC Council members and people with lived experience of homelessness who can work collaboratively with the Homeless Caucus to review the roles and responsibilities of the Homeless Caucus to engage a broad and diverse group of people with lived experience to engage with the CoC and its members.	1	CoC Council delegated members and Homeless Caucus		
	b. Partner with street outreach, City with Dwellings, and Homeless Caucus participants with current or recent experience of homelessness to review past activities and consider new ways to center the voices of people with lived experience.	1	CoC Council delegated members and Homeless Caucus		
	c. Formalize the role of the Homeless Caucus within the CoC through amendments to the Governance Charter, addressing, among other things, staff support for Caucus activities and compensation or other support for participants. Present the amendments to the Operating Cabinet for approval by two-thirds vote of Cabinet Members present. Notice of any amendment of the Charter must be presented in writing to the Operating Cabinet ten days before the meeting at which the amendment will be voted upon.	1	Operating Cabinet		

Issue #2: CoC Leadership

Recommendation	Next Steps	Level of Priority	Responsibility	Key Resources	Timeline goal? Progress?
2.1 Empower the Executive Committee to create agendas for and facilitate meetings of the Operating Cabinet	<ul style="list-style-type: none"> a. Draft new policies and procedures and Governance Charter that reflects the responsibilities of the Executive Committee to create agendas and facilitate Operating Cabinet meetings b. Create a clear process allowing all CoC members to propose agenda items in advance for consideration through Executive Committee members and/or another structured submission process 	1	Restructuring Committee		
2.2 Identify where staff support is needed for CoC activities to ensure the CoC's priorities are moving forward, and members are actively participating	a. Develop clear roles and responsibilities for staff and/or organizations supporting the Operating Cabinet, the Executive Committee, the Community Intake Center (CIC), the Homeless Caucus and the COEH.	1	Executive Committee, Staff of each of the respective structures and committees		
	b. Communicate to the CoC membership the identified roles and responsibilities of the Executive Committee and each supporting staff person/organization for the CoC.	1	Executive Committee, Staff of each of the respective structures and committees		
	c. Ensure all organizations and staff supporting the CoC coordinate and collaborate, including planning before meetings and by putting structures in place that ensure collaboration and coordination.	2	Executive Committee, Staff of each of the respective structures and committees		
2.3. Create new processes for Operating Cabinet meetings	a. Determine best method for facilitation of the Operating Cabinet meetings. Consider rotating facilitation shared by each of the Executive Committee members and/or guest presentations/facilitators from subject matter experts within the CoC.	1	Executive Committee, Operating Cabinet, Staff of Operating Cabinet and		

			Executive Committee,		
	b. Ensure the Executive Committee is regularly soliciting agenda items from the CoC membership and involving a wide variety of CoC members in planning, including new members, various sub-populations, and persons with lived experience of homelessness.	1	Executive Committee, Staff of Executive Committee		
	c. Structure Operating Cabinet meetings to focus on key issues, analyze existing data and needs, review evidence-based practices and research, be action-oriented and solution-focused and engage the CoC membership.	2	Executive Committee, Staff of Operating Cabinet and Executive Committee		

Issue #3: Engagement

Recommendation	Next Steps	Level of Priority	Responsibility	Key Resources	Timeline goal? Progress?
3.1. Develop a robust orientation, education, and training program to support new member organizations and individuals, as well as active members, to participate in the CoC	a. Conduct introductory trainings for the new Executive Committee, all Operating Cabinet members, and all Commission members <ul style="list-style-type: none"> i. Identify staff and delineate their roles and responsibilities for introductory trainings. ii. Trainings for all participants should include, at a minimum, basic information about the new governance structure, the roles of each of the different bodies (COEH, Operating Cabinet, Community Intake Center, etc.), and a CoC 101 training. iii. Conduct ongoing member orientation to new CoC members and new individuals, which should include all the above topics, plus other strategic topics that reflect current activities of the CoC. iv. Consider creating a buddy system for new CoC members or individuals to be matched with already active CoC members who can provide context, history, and any other additional information that would help integrate new members into becoming active participants in the CoC. 	2	Staff, Executive Committee and Operating Cabinet		
	b. Develop a regular and ongoing educational training program that is available to all CoC members <ul style="list-style-type: none"> i. Identify staff and delineate their roles and responsibilities for ongoing trainings. ii. Identify a series of topics that would be most helpful to CoC members, including CoC 101, trauma-informed care, motivational interviewing, Housing First, and other content-rich topics that will be offered regularly to all CoC member organizations and their staff. iii. Create a mechanism that allows CoC members to suggest topics for additional education and/or training. iv. Establish a regular, predictable schedule for educational trainings that CoC organizations and staff can anticipate and prepare to attend. 	2	Staff, Executive Committee, and Operating Cabinet		

	v. Be sure to announce training opportunities a full month in advance to enable front-line staff to build time into their schedules to attend. Consider creating a training calendar, with input from the CoC, that has the regular trainings set well in advance and the ability to update to add special trainings and training for new agencies/staff as needed.				
3.2. Undertake activities to build collaboration and coordination across the CoC.	a. Identify activities that can help CoC members get to know one another, including sharing of best practices, agency-sponsored events, agency/project spotlights at meetings, etc.	2	Staff and Executive Committee		
	b. Create structures that enable feedback loops with committees and with individual members <ul style="list-style-type: none"> i. Learn from organizations that are active members in the CoC how they are sharing information with their teams, especially how they ensure front-line staff are kept informed. ii. Consider adopting standard ways to help CoC members share information about Operating Cabinet meetings and CoC work with all their staff. 	3	Staff and Executive Committee		
	c. Engage more people with lived experience in the activities of the CoC	1	Staff and Executive Committee		
	d. Reach out to new and/or adjacent organizations, such as the Hispanic League and the many service providers in the faith-based community in Forsyth County to introduce them to the CoC and encourage them to join.	1	Staff, Executive Committee and Operating Cabinet		
3.3. Bring more opportunities for engagement to front-line staff	a. Create specific training opportunities targeted to the experience of individuals working as front-line staff	2	Operating Cabinet, Staff from Operating Cabinet		
	b. Create a committee or regular ad hoc meeting for front-line staff to get support from one another, trouble-shoot issues, and communicate across organizations	2	Operating Cabinet, Staff from Operating Cabinet		
	c. Establish a mentor program for new front-line staff to match them with more experienced staff	3	Operating Cabinet, Staff from Operating Cabinet		

Issue #4: Coordinated Entry (Community Intake Center)

Recommendation	Next Steps	Level of Priority	Responsibility	Key Resources	Timeline goal? Progress?
4.1. Contract with a third-party expert to evaluate and improve the effectiveness of the Coordinated Entry System (the Community Intake Center)	a. Identify financial resources available from either the CoC, the City of Winston-Salem, and/or the County that can be used to conduct a deep and thorough evaluation of the Community Intake Center (CIC) processes and policies.	1	Community Intake Center, CoC, Winston-Salem City Council, Forsyth County Board of Commissioners		
	b. The Executive Committee should oversee development of the RFP, evaluate the applications, and advise expert/s once they are engaged, and should be responsible for ensuring that the process includes: <ul style="list-style-type: none"> i. An evaluation of the system’s assessment, prioritization, referral, and placement processes. ii. An evaluation of housing outcomes. iii. An evaluation of the timeliness of referrals and matches, as well as offering of supportive services. iv. Focus on the system itself and its functioning, and how well it has streamlined access, assessment, and referral processes for housing and other services. v. An assessment of the CIC for fidelity to local policies and compliance with HUD requirements. vi. An evaluation of implementation and operation in accordance with locally established policies and procedures. 	1	Executive Committee, City of Winston-Salem staff		
	c. Ensure the completed RFP identifies expectations and best practices for a CES evaluation. The scope of the RFP should address the following: <ul style="list-style-type: none"> i. How can the Community Intake Center (CIC) improve user experience and increase participant movement out of homelessness to housing? ii. Whether the Community Intake Center has protocols for diversion and prevention in place and whether those are implemented and effective? iii. Whether the CIC’s practices are compliant with HUD’s requirements and if not, what changes need to be made? 	1	Executive Committee		

	<ul style="list-style-type: none"> iv. How effective the CIC process is in connecting people experiencing homelessness to appropriate referrals (exploring system need, time to referral, referral appropriateness, and referral outcomes)? v. How effective the CIC is in diverting households from homelessness through referrals to homelessness prevention and community resources? vi. Whether the CIC process has been implemented and is currently operating as intended and in accordance with the CoC's policies and procedures? vii. Do the system entry points adequately cover the full geographic area of the CoC? viii. Are clients readily able to access the CIC, including those with barriers to housing access, such as people with mental health issues or substance use disorders? ix. Are CIC staff able to effectively determine client needs during assessment? x. What is the distribution of assessment scores for each of the assessment types for clients (single adults, families, youth/TAY)? xi. What information is missing from the assessment and/or the centralized waiting list that would help better inform matchers of client needs? xii. Is the process transparent and do those who need access for the system to function have access to the level of information that they need? 				
	<p>d. Implement the recommendations from the Coordinated Entry Evaluation</p>	2	Executive Committee, Operating Cabinet, Community Intake Center, Staff from Executive Committee, Operating Cabinet, and Community Intake Center		

Issue #5: Shelter and Housing

Recommendation	Next Steps	Level of Priority	Responsibility	Key Resources	Timeline goal? Progress?
5.1. Identify either an internal or 3rd party expert on permanent supportive housing (PSH) who can play a leadership role in the CoC and Operating Cabinet and who can be relied upon by other CoC members for information, advice, and support about development and operation of PSH in the community.	a. Assess whether there are permanent supportive housing experts from within the CoC member organizations who can help strengthen membership-wide understanding of PSH rules and criteria to improve referrals and matches. If not, seek outside support on permanent supportive housing.	1	Executive Committee, Coordinated Entry Lead, Collaborative Applicant		
5.2. Review and revise policies and procedures around housing placement to ensure that individuals and households are being appropriately matched and referred to housing that fits their needs	a. Reach out to neighboring CoCs from North Carolina and other nearby states, to learn more about their policies and protocols for assessments and referrals to PSH for clients in need of longer-term supportive services	1	Ad Hoc Policy Committee, Executive Committee, Coordinated Entry Lead, Collaborative Applicant		
	b. Engage experts, either internal to the CoC or from outside the CoC, to review and revise (if necessary) policies and procedures – both in practice and on paper – to ensure that protocols for matching clients with PSH are appropriate, accurate, clear, and transparent to all CoC members and clients.	1	Ad Hoc Policy Committee, Executive Committee, Coordinated Entry Lead, Collaborative Applicant		

5.3. Set CoC-wide goals to reduce the returns to homelessness, to help ensure people are placed in appropriate permanent housing and are receiving the supportive services they need to retain stable housing	a. Develop benchmarks and CoC-wide goals for increasing housing placements to PSH.	1	Executive Committee, Operating Cabinet Staff from Executive Committee and Operating Cabinet		
	b. Propose to COEH and the Winston-Salem City Council leveraging HOME-ARP or other funding to increase PSH in the City of Winston-Salem but ensure there is a plan for adequate services to accompany such a plan, particularly case management.	1	Operating Cabinet, COEH, Executive Committee, City of Winston-Salem		
5.4. Review Housing First policies and protocols in the Winston-Salem/Forsyth County Continuum of Care Written Standards and revise them to expand the supportive services available to people awaiting housing placements beyond document readiness	a. Develop and/or update monitoring protocols that are implemented at least quarterly, to ensure all CoC members are implementing and practicing low-barrier, Housing First policies and procedures	1	Ad Hoc Policy Committee, Executive Committee, Staff from Executive Committee and Ad Hoc Policy Committee		
	b. Conduct a training or series of trainings on Housing First for all Community Intake Center staff, CoC members, shelter staff, front-line staff, and any other individuals and organizations participating in intake, assessment, and service provisions. <ul style="list-style-type: none"> i. Bring in staff from other CoCs (neighboring jurisdictions or communities of a similar size/demographic) who can share how they provide extensive supportive services while people are awaiting housing placements, while still helping people get document ready. ii. Evaluate shelters that already exist to identify the barriers to entry and the rules for participation. Offer to training and technical assistance to those shelters on how to low-barriers and transition to a Housing First model. 	2	Ad Hoc Policy Committee, Executive Committee, Staff from Executive Committee and Ad Hoc Policy Committee		

Issue #6: Services

Recommendation	Next Steps	Level of Priority	Responsibility	Key Resources	Timeline goal? Progress?
6.1. Review and revise case manager requirements	a. Revise formal or informal caseload requirements and caps for case managers to allow for more individuals and households to have case managers and for utilization of additional housing opportunities in the CoC.	1	Executive Committee Operating Cabinet, Ad Hoc Policy Committee, CoC Council		
	b. Review and revise, if necessary, policies and procedures to allow case managers to serve people awaiting placement in both RRH and PSH, even if the funding sources are separate so long as accurate recordkeeping is in place	1	Executive Committee, Operating Cabinet, Ad Hoc Policy Committee, CoC Council		
6.2. Streamline how the CoC helps people become document ready	a. Partner with mainstream benefit program providers to assist with document readiness <ul style="list-style-type: none"> i. Consider bi-monthly fairs that include CoC members, mainstream provider agencies (e.g., Social Security, DMV, Medicaid, SNAP, TANF), where individuals experiencing homelessness can come to a central location to obtain assistance to get documents necessary to obtain permanent housing (i.e., birth certificates, identification, social security cards, proof of disability, certification of homelessness) 	2	Executive Committee, Operating Cabinet, Mainstream partners		
	b. Propose new protocols that streamline how the CoC will work with clients to become document-ready. <ul style="list-style-type: none"> i. Propose new protocols for providing assistance with documentation, clearly identifying roles and responsibilities 	1	Ad Hoc Policy Committee		

	<ul style="list-style-type: none"> ii. Get feedback from CoC membership about draft protocols iii. Revise policies and procedures that reflect new protocols 				
6.3. <i>Create portfolios for the client to help improve access to RRH</i>	<ul style="list-style-type: none"> a. Identify a workgroup or committee to lead efforts to assist with client portfolios: <ul style="list-style-type: none"> i. Ensure people with recent lived experience of homelessness and staff from the Community Intake Center are on the workgroup/committee ii. Develop a template for client portfolios that will strengthen clients' abilities to be eligible for RRH iii. Include letters of support from community members who know the clients or add information about their background and the steps they have taken to improve their housing stability. 	2	Community Intake Center and Client Portfolio workgroup /committee		
	<ul style="list-style-type: none"> b. Help individuals with criminal record expungement, credit repair, and eviction expungement, if needed. 	3	Community Intake Center and Client portfolio workgroup / committee		
6.4. <i>Focus resources on hiring and training staff to better serve special sub-populations whose needs are not currently being met by the CoC, including the Latino community, older adults, youth, and LGBTQ+ individuals</i>	<ul style="list-style-type: none"> a. Build capacity and support to the Latino Community <ul style="list-style-type: none"> i. Work to hire more bi-lingual staff across the CoC member organizations ii. Conduct outreach to organizations primarily serving the Latino community to better understand the needs and ways to provide more support, services, and access to housing for Latinos. 	1	Executive Committee, Operating Cabinet, CoC Council, Community Intake Center, and Homeless Caucus		

Issue #7: Data

Recommendation	Next Steps	Level of Priority	Responsibility	Key Resources	Timeline goal? Progress?
7.1. Develop a data committee who can focus on data for the CoC.	a. Identify 3-5 people to participate in a data committee for the CoC. The committee should include the HMIS lead, staff from the CIC, and staff from a shelter, a street outreach program, and a housing provider	1	Executive Committee, Operating Cabinet, HMIS Lead		
	b. Develop a work plan to evaluate the way the CoC engages with the statewide HMIS vendor, how the structure and functionality of the HMIS works and does not work for the CoC	2	Data Committee, HMIS Lead		
7.2. Delegate responsibility to the data committee to review the current HMIS system to identify where it is working and where it can be improved to better support activities of the CoC.	c. Review how CoC members are entering and/or using data from HMIS	1	Data Committee, HMIS Lead		
	d. Identify data fields that are empty or not useful to the CoC and HUD-required universal data elements that are not being used properly where training may be needed	1	Data Committee, HMIS Lead		
	e. Identify challenges in using the HMIS structure for entering data, pulling data, creating reports, etc. and connect with other CoC-peers about their experiences.	1	Data Committee, HMIS Lead		
	f. Identify from each CoC member organization their designated HMIS staff person to join an HMIS user group that will provide regular feedback about how HMIS works for their organizations, the challenges they face, what they would like to see changed, etc. Provide the user group regular training and task them with maintaining high data quality for their organization/agency.	1	Data Committee, HMIS Lead		
	g. Make recommendations to the HMIS vendor and HMIS Lead about changes needed.	2	Data Committee, Executive Committee, HMIS Lead		

	h. Play role in reviewing draft data reports to ensure at least two separate set of eyes review the data and summaries before making public or submitting to HUD	2	Data Committee		
<i>7.3. Train CoC member organization on the value of data and on HMIS</i>	a. Offer bi-annual trainings for all CoC member organizations on HMIS and HUD data requirements, including how to enter HMIS data, how to pull data, how to customize data, and how to use HMIS to evaluate and improve client outcomes	2	Data Committee		
<i>7.4. Begin to integrate data analysis and evaluation into decision-making and strategic planning of the CoC.</i>	a. Develop a set of key data questions that the CoC would like to use to monitor the performance of the CoC on a regular basis (e.g., System Performance Measures, racial equity facts. Report on key data at regular intervals.	2	Data Committee, Executive Team, Operating Cabinet, CoC members		
	b. Have the HMIS Lead produce the necessary data and reports at regular intervals (e.g., data quality reports reviewed monthly, and System Performance Measures reviewed bi-monthly), and identify staff and/or organizations to review and analyze the information, report to the Executive Team and the Operating Cabinet, and make related recommendations.	2	Data Committee, HMIS Lead		