

Coordinated Entry System (CES) Committee Meeting

Wednesday, August 27

11am – 12n

Microsoft Teams

AGENDA

- Committee Governance
- CE Matching Update
- Follow Up from CE System Redesign Discussion (July Membership)





Committee Governance

- CES Committee Chair, Rebekah Shamberger has resigned from the CoC Board and CES Committee after taking on her next role with the NC Housing Finance Agency.
- Typically, CoC Chairs have been identified via self-identified interest and capacity in the leadership role.
- With the addition of CoC staff, there are less logistics to manage!
 - We take on calendar appts, member communications and meeting prep!
 - Chair focus on: agenda setting and work plan advancement, facilitating discussion, etc.



CE Matching & Case Conferencing Updates

Review of August Matches:

- RRH Matches-
 - Families Together: 10
- PSH Matches-
 - New Bern Crossing: 16/40
 - Wake CoC: 11
 - Women Center: 2
 - Triangle Family Services: 1

Updates:

New Bern Crossing leasing team to visit Singles Case Conference and answer FAQs about the property and lease up.



Shelter & System Updates

- Drop In Shelter Capacity
 - As of 08/25, incremental reduction in Drop In Shelter beds at Healing Transitions Women's Center from ~73 to 15 by mid-September. CE bed capacity of 25 remains the same.
 - As of 08/13 men's overflow at Healing Transitions suspended.
- Look out for email confirming status of entry and referral process for Emergency and Drop In Shelters.
 - Please share with frontline staff to ensure proper communications!
 - Goal: provide referrals and warm handoff on the spot to improve client experience and reduce unnecessary travel!



Feedback on CE Matching & Case Conf. Updates

N/A



Agency & Partner Updates

Notes & Feedback

- ESG Office Notification of unclaimed RUSH funding, \$450k. Opening to everyone!
 - CoC to send out email communication to share!
 - Creative ways to identify need regionally?
- Highlights/Celebrations
 - Wake County Veteran set aside RAHP are fully matched!
 - Women's Center PSH leasing up 4 people today and 1 person next week!



CE Strategy Session @ July Membership

- Asked for feedback, questions, etc. across three focus areas:
 - Housing Match Prioritization
 - Virtual Access Hub
 - Access Sites
- Reviewed CES CMTE Recommendation:
 - Set target allocations for non-specified resources like Wake PSH, RHA HCVP, TFS RRH, etc.
 - General breakdown →

Housing Match

Prompt:

- Right now, PSH & RRH
 Prioritization is very similar (chronic status).
- Do you think matching prioritization should change?
- What items should <u>definitely</u> be included in our prioritization tool?

Category	Feedback
Population/Status	 Veterans (with children) Disability Status – "confusing" Young adults – "may not have 'years' but also have less support and resources" Single adults – "ensure not overlooked", breakout by 18 – 24, 25+ and 50+ 55+ and 62+ Family with minors
Prioritization Criteria	 Stick to specific "requirements" for each (i.e. PSH = mental/physical disability disability is confusing, may not qualify for PSH with certain disabilities
Assessment & Prioritization Tool	New tool for needs to replace VI-SPDAT
Other	 Remove how someone pays for a hotel as a barrier to funds or rehousing Individuals with varying citizenship and immigration status Accessible housing for disabled community - wheelchair, deaf, blind, etc. Are they receiving M/H services

Housing Match Prioritization



- Rough cut analysis on recent BNL May July 2025.
- Older Adults:
 - 30% of all singles (25+) are 55+
 - 39% of chronic single adults (25+) are 55+
- Chronically Homeless:
 - Average of 22% chronic across subpopulations, but 25% amongst single adult HHs/HHs with no minor children emphasizes need for more
 - Significant data quality impacts active status, chronic status (12% unknown/missing chronic status)

recent 90-day BNL	Chronic	Not Chronic	Unconfirmed	Total
Single Adults (25+)	372 (25%)	950 (64%)	160 (11%)	1482 (72%)
Older Adults (55+) Subset of Total Single Adults above	146 (39% of single adults)	252 (26%)	56 (35%)	454 (30% of single adults)
Young Adults (18-24)	18 (12%)	114 (77%)	17 (11%)	149 (7%)
Families	37 (11%)	249 (76%)	43 (13%)	329 (16%)
Veterans	30 (33%)	44 (48%)	18 (20%)	92 (4%)
Total across pops.	457 (22%)	1,357 (66%)	238 (12%)	2052

Rough cut by Location:

- 401 (18%) engaged by street outreach, assumed unsheltered
- 726 (32%) sheltered
- 487 (21%) day services/shelter
- 622 (28%) SSO, CE, RRH, Safe Haven



Virtual Access Hub

Prompt:

- What roles do you see the Access Hub Solving for?
 - Potential barriers to solve for?
 - What went right with previous call center?
 - What were opportunities to improve previous call center?

Category	Feedback
Barriers	Resource availabilityTimeline/Available hours
Logistics, Recommendations & Opportunities	 Young adult specific access – verification of homelessness Client understanding of process (young/elderly Language access Longer hours can help improve services/request to increase hours Ability to speak with staff Prepared to support people new to system and/or community Specialized in customer services Updates: ensures notes are current from providers
Support for Call Center Model	 Call center produces more access especially for employed Access for people of all levels of education Access for those without transportation Very reliable service in past Great collaboration
Other	• Single men w/ children – has to do with shelter entry?



Prompt:

 What are the minimum requirements you expect from our CE Access Sites?

Category	Feedback
Customer Service & Accessibility	 Treated respectfully and with kindness Language access (x3) Accessible for people w/o transportation Responsive, respectful, resourceful If not in the right place, warm handoff/connect further Basic script to explain process and how to follow-up Extend access/CE hours to include evenings and weekend times Rapid response within 24 hours, Minimum 48 hours for in-person evaluation
Services, Resources, & Partnerships	 Medicaid welcome rooms and use Medicaid Housing Specialists Urgent needs addressed promptly Utilize an access point site that allows service providers to have "pop up" hours without have to be at their permanent site Knowledge of all programs available Understanding process once referral is created Demographics captured, contact #'s email, length of time homeless
Challenges & Recommendations	 Lack of consistency in response time through CE. Need to inform guests why they are denied RRH or eviction prevention funding Create an internal system review of CE process + partner service delivery (survey staff, survey recipients, send anonymous)



CE Committee Discussion Notes

- Need for RRH and other TBRA options, including shallow subsidy
- Recommendation to look at breakdown of ages by location type in BNL – i.e. # of people aged 62+ who are unsheltered
- Flag to engage NC-506 New Hanover/Wilmington on their approach to prioritizing aging population
- Eviction prevention/general rental assistance needs to be redirected from access sites/call line
- How do we envision office hours/pop ups at access sites or day centers? Is that for access hub staff only or other street outreach referrals, etc.?

Adjourn



Next Meeting:

September 24th at 11am via Teams

With new CoC staff on board!!

CoC Coordination or for more info: Info@wakenc507.org