#1

COMPLETE

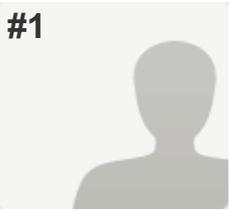**Collector:** Web Link 1 (Web Link)
Started: Thursday, May 26, 2016 2:28:44 PM
Last Modified: Thursday, May 26, 2016 2:46:45 PM
Time Spent: 00:18:00

PAGE 2: Part 1: Demographics

Q1: Choose your Continuum of Care Code:	(OH-504) Youngstown/Mahoning County CoC
Q2: If you serve a Balance of State CoC, which counties is this update for?	*Respondent skipped this question*
Q3: If you are submitting a plan for CA-600, what is the SPA number associated with your update?	*Respondent skipped this question*

Q4: Contact Information

Name	Jenn Matlack
Organization	Family and Community Services, Inc
Email Address	jmatlack@fcsohio.org

PAGE 3: Part 2: Coordination

Q5: Does your community have a written plan to end Veteran homelessness?	Yes
Q6: If you answered "Yes" to the previous question, have community stakeholders (e.g. local VA Medical Center, VA, SSVF grantees, etc.) provided input into the plan development and implementation?	Yes

Q7: Who is the CoC point of contact?

Name:	Angie Paramore
Email:	mahoningcocdirector@gmail.com
Organization:	Mahoning County Homeless Continuum of Care
Phone #:	330.951.7275

Q8: Are representatives from the following VA funded programs present at community planning meetings/events?

	Strategic Meetings	Case Conferencing/Master List
HUD and Veterans Affairs Supportive Housing (HUD-VASH)	Yes	Yes
Healthcare for Homeless Veterans (HCHV)	Not Applicable	Not Applicable
Grant and Per Diem (GPD) VAMC Liaison	No	No
Grant and Per Diem (GPD) Providers	Yes	Yes
Community Resource and Referral Center (CRRC)	Yes	Yes
Domiciliary Care for Veterans (VA-Dom)	Not Applicable	Not Applicable
Veterans Justice Outreach (VJO)	No	No
Safe Haven	Not Applicable	Not Applicable

Q9: What types of data are community providers able to share with their local VA Medical Center(s)? (Select all that apply)	Client-level information (e.g. data from the HMIS system; includes identifying information such as the key elements for the by name/master list) , Aggregate performance information (e.g. housing placement numbers; length of time homeless, does not include identifying information)
Q10: What types of data can local VA Medical Center staff share with community providers? (Select all that apply)	Client-level information (e.g. data from the HOMES system such as key elements for the by name/master list) , Aggregate performance information (e.g. HUD-VASH placement numbers; length of time homeless, GPD information, does not include identifying information
Q11: Does your community have a standardized Release of Information (ROI) form for data sharing between the local VA Medical Center(s) and other relevant stakeholders?	No
Q12: If VA and non-VA homeless assistance providers are not able to share/receive data, which of the following would be helpful? (Select all that apply)	Sample ROIs and MOUs that other communities have used.
Q13: Is there a community-wide coordinated entry/assessment process for Veterans? Note: Participation in coordinated entry is a requirement of the SSVF program.	Yes

Q14: Who is lead point of contact for coordinated entry?

Name:	Angie Paramore
Organization:	Mahoning County Homeless COC
Organization Type (VAMC, CoC, SSVF Grantee, etc.)	COC
Phone #:	330.951.7275
Email:	mahoningcocdirector@gmail.com

Q15: Is the HUD-VASH program integrated into coordinated entry?

Yes

Q16: If the answer was "Yes" to the previous question, please select the response that best describes this integration:

The community's assessment is used for all Veterans, regardless of point of entry to determine need

Q17: Is the GPD program integrated into coordinated entry?

Yes

Q18: If the answer to the previous question was "Yes", please select the response that best describes this integration:

The community's assessment is used for all Veterans, regardless of point of entry to determine need

Q19: Is GPD providing bridge housing in the community? (Please note that they must have submitted a change of scope to the GPD Program Office or are currently in the process to select "Yes".)

No

Q20: Please list the GPD providers currently serving your community.

List of Agency Names	Meridian Healthcare
Total Number of Beds	8

Q21: Have any GPD providers in your community submitted a change of scope to the GPD Program Office?

No

Q22: If "No" to question 21, are any GPD providers planning to submit a change of scope?

No

PAGE 4: Part 3: Master List

Q23: Does the community have a master list?

Yes

Q24: If "Yes" to the previous question, is the list one complete document (not multiple parts)?

Yes

Q25: Who manages the master list?

Name:	Jose Nogales
Role:	SSVF Veteran's Advocate
Organization:	Family and Community Services, Inc
Organization Type (VAMC, CoC, SSVF Grantee, etc.):	SSVF

Q26: Does your list have the following elements? (Select all that apply.)

Includes all unsheltered Veterans

Q27: **How often do you meet to review and update the master list?**	Monthly
Q28: **Currently what are your community's top 3 priorities for ending Veteran homelessness?**	Sustainability: Developing written policies and procedures to maintain the master list and case conference processes , Sustainability: Evaluating data on a regular basis to track any new trends, make modifications, and assess sustainability , Designing the system to meet federal benchmark criteria.

PAGE 5: Part 4: Meetings and Strategy

Q29: **What types of meetings does your community have?**

	(no label)
Case Conferences	Weekly
Strategic Planning/CoordinationMeetings (Bigger Picture)	Monthly

Q30: **When are your next three strategic planning/coordination meetings? (Include date, time)**

Meeting 1	06/23/2016 10:00 AM,
Meeting 2	07/28/2016 10:00 AM,
Meeting 3	08/25/2016 10:00 AM

Q31: **Would you like your Regional Coordinator and/or TA representative to participate in one of these meetings?**	No

PAGE 6: Part 5: Federal Criteria/Benchmarks and Support

Q32: **Has your community decided to pursue the federal partners' process?**	Yes
Q33: If the answer to the previous question was "No", why have you decided not to pursue the process?	*Respondent skipped this question*
Q34: **Has your community submitted a claim to the federal partners (USICH, VA, HUD)?**	No
Q35: If the answer to Question 34 was "Yes", please provide the date the claim was submitted and its current status (pending, approved, denied).	*Respondent skipped this question*
Q36: List any technical assistance needs. (Select all that apply.)	*Respondent skipped this question*

PAGE 7: Part 6: Sustainability

Q37: Has your community begun sustainability planning efforts?	No
Q38: What resource gaps (if any) have you identified that may hinder sustainability? Select all that apply	Need for RRH Waiver to serve higher proportion of prevention clients in SSVF , Need for additional HUD-VASH vouchers , Need for additional permanent supportive housing resources (VA and/or non-VA)
Q39: Does your community currently have Priority 1 (aka "Surge") SSVF funding?	No
Q40: If the answer to the previous question is "yes", does your community have adequate funding resources in place to sustain your system when "surge" funding ends?	*Respondent skipped this question*
Q41: Does your community regularly follow-up with rapid re-housing clients to ensure housing stabilization?	Yes
Q42: Do you have a system in place to ensure rapid re-housing clients experiencing new housing crises are routed to prevention/other stabilization services?	Yes, If yes, please describe this process. SSVF participants are not exited from the program until housing stability is achieved or they have chosen to do so. Once exited, the participants are told to contact their advocate if any housing stability issues arise. If the participant contacts the SSVF program in the future, they will be re-screened for eligibility and if ineligible, directed to appropriate services to assist.

#2

COMPLETE

Collector: Web Link 1 (Web Link)
Started: Friday, May 27, 2016 1:06:31 PM
Last Modified: Friday, May 27, 2016 1:18:51 PM
Time Spent: 00:12:20

PAGE 2: Part 1: Demographics

Q1: Choose your Continuum of Care Code:	(OH-502) Cleveland/Cuyahoga County CoC
Q2: If you serve a Balance of State CoC, which counties is this update for?	*Respondent skipped this question*
Q3: If you are submitting a plan for CA-600, what is the SPA number associated with your update?	*Respondent skipped this question*

Q4: Contact Information

Name	Brad Hutchison
Organization	Volunteers of America Greater Ohio
Email Address	bradley.hutchison@voago.org

PAGE 3: Part 2: Coordination

Q5: Does your community have a written plan to end Veteran homelessness?	Yes
Q6: If you answered "Yes" to the previous question, have community stakeholders (e.g. local VA Medical Center, VA, SSVF grantees, etc.) provided input into the plan development and implementation?	Yes

Q7: Who is the CoC point of contact?

Name:	Ruth Gillett
Email:	rgillett@cuyahogacounty.us
Organization:	Cuyahoga County Office of Homeless Services
Phone #:	216-420-6844

Q8: **Are representatives from the following VA funded programs present at community planning meetings/events?**

	Strategic Meetings	Case Conferencing/Master List
HUD and Veterans Affairs Supportive Housing (HUD-VASH)	Yes	Yes
Healthcare for Homeless Veterans (HCHV)	Yes	Yes
Grant and Per Diem (GPD) VAMC Liaison	Yes	Yes
Grant and Per Diem (GPD) Providers	Yes	Yes
Community Resource and Referral Center (CRRC)	Yes	Yes
Domiciliary Care for Veterans (VA-Dom)	Yes	Yes
Veterans Justice Outreach (VJO)	No	No
Safe Haven	Not Applicable	Not Applicable

Q9: **What types of data are community providers able to share with their local VA Medical Center(s)? (Select all that apply)**	Client-level information (e.g. data from the HMIS system; includes identifying information such as the key elements for the by name/master list) , Aggregate performance information (e.g. housing placement numbers; length of time homeless, does not include identifying information)
Q10: **What types of data can local VA Medical Center staff share with community providers? (Select all that apply)**	Client-level information (e.g. data from the HOMES system such as key elements for the by name/master list) , Aggregate performance information (e.g. HUD-VASH placement numbers; length of time homeless, GPD information, does not include identifying information
Q11: **Does your community have a standardized Release of Information (ROI) form for data sharing between the local VA Medical Center(s) and other relevant stakeholders?**	No
Q12: If VA and non-VA homeless assistance providers are not able to share/receive data, which of the following would be helpful? (Select all that apply)	*Respondent skipped this question*
Q13: **Is there a community-wide coordinated entry/assessment process for Veterans? Note: Participation in coordinated entry is a requirement of the SSVF program.**	Yes

Q14: Who is lead point of contact for coordinated entry?

Name:	LaTonya Murray
Organization:	FrontLine Service
Organization Type (VAMC, CoC, SSVF Grantee, etc.)	SSVF
Phone #:	216-308-4416
Email:	LaTonya.Murray@frontlineservice.org

Q15: Is the HUD-VASH program integrated into coordinated entry?

Yes

Q16: If the answer was "Yes" to the previous question, please select the response that best describes this integration:

HUD-VASH receives referrals from coordinated entry but also allows for direct entry into their program through other means

Q17: Is the GPD program integrated into coordinated entry?

Yes

Q18: If the answer to the previous question was "Yes", please select the response that best describes this integration:

GPD receives all referrals from coordinated entry

Q19: Is GPD providing bridge housing in the community? (Please note that they must have submitted a change of scope to the GPD Program Office or are currently in the process to select "Yes".)

Yes

Q20: Please list the GPD providers currently serving your community.

List of Agency Names	VOA Greater Ohio, Stella Maris, Y Haven, Joseph's Home, Lutheran Metropolitan Ministries, West Side Catholic Center
Total Number of Beds	109

Q21: Have any GPD providers in your community submitted a change of scope to the GPD Program Office?

Yes,

If "Yes", please list the agency names.
VOA Greater Ohio, Lutheran Metropolitan Ministries, West Side Catholic Center

Q22: If "No" to question 21, are any GPD providers planning to submit a change of scope?

Respondent skipped this question

PAGE 4: Part 3: Master List

Q23: Does the community have a master list?

Yes

Q24: If "Yes" to the previous question, is the list one complete document (not multiple parts)?

Yes

Q25: Who manages the master list?

Name:	Amber Tripphahn
Role:	SSVF Program Coordinator
Organization:	FrontLine Service
Organization Type (VAMC, CoC, SSVF Grantee, etc.):	SSVF

Q26: Does your list have the following elements? (Select all that apply.)

Includes all unsheltered Veterans,

Includes all Veterans in emergency shelter (regardless of shelter funding source)
,

Includes all Veterans in transitional housing (GPD, community TH, regardless of funding source)

Q27: How often do you meet to review and update the master list?

Bi-weekly

Q28: Currently what are your community's top 3 priorities for ending Veteran homelessness?

Master List development.,

Sustainability: Evaluating data on a regular basis to track any new trends, make modifications, and assess sustainability
,

Data sharing

PAGE 5: Part 4: Meetings and Strategy

Q29: What types of meetings does your community have?

	(no label)
Case Conferences	Bi-Weekly
Strategic Planning/CoordinationMeetings (Bigger Picture)	Monthly

Q30: When are your next three strategic planning/coordination meetings? (Include date, time)

Meeting 1   06/06/2016 01:00 PM

Q31: Would you like your Regional Coordinator and/or TA representative to participate in one of these meetings?

Yes,

If you selected "Yes" please provide the call In information
TBD

PAGE 6: Part 5: Federal Criteria/Benchmarks and Support

Q32: Has your community decided to pursue the federal partners' process?

Yes

Q33: If the answer to the previous question was "No", why have you decided not to pursue the process?	*Respondent skipped this question*
Q34: Has your community submitted a claim to the federal partners (USICH, VA, HUD)?	No
Q35: If the answer to Question 34 was "Yes", please provide the date the claim was submitted and its current status (pending, approved, denied).	*Respondent skipped this question*
Q36: List any technical assistance needs. (Select all that apply.)	Assistance with sustainability planning

PAGE 7: Part 6: Sustainability

Q37: Has your community begun sustainability planning efforts?	No
Q38: What resource gaps (if any) have you identified that may hinder sustainability? Select all that apply	Need for additional VA funded prevention/rapid re-housing (SSVF) , Need for affordable, permanent housing options, Funding for other intensive case management services for RRH Veterans currently housed but at-risk of returning to homelessness. , Unknown - sustainability planning has not yet begun for this community. , Other (please specify) There may be other unforeseen needs a year from now.
Q39: Does your community currently have Priority 1 (aka "Surge") SSVF funding?	Yes
Q40: If the answer to the previous question is "yes", does your community have adequate funding resources in place to sustain your system when "surge" funding ends?	No, If the answer is "no", please explain. We would anticipate a need for increased prevention funding while maintaining enough RRH funding to meet ongoing need.
Q41: Does your community regularly follow-up with rapid re-housing clients to ensure housing stabilization?	No

Q42: Do you have a system in place to ensure rapid re-housing clients experiencing new housing crises are routed to prevention/other stabilization services?

Yes,

If yes, please describe this process.
Our current system is adequate for capturing veterans identifying themselves as needing prevention assistance, with coordinated entry and the CRRC as the main access points. However, acquiring resources to allow our community to provide more ongoing aftercare case management to follow-up with housed RRH clients would enable our system to operate more effectively and efficiently.

#3

COMPLETE

Collector: Web Link 1 (Web Link)
Started: Monday, May 30, 2016 8:46:28 PM
Last Modified: Monday, May 30, 2016 8:59:35 PM
Time Spent: 00:13:07

PAGE 2: Part 1: Demographics

Q1: Choose your Continuum of Care Code:	(OH-505) Dayton/Kettering/Montgomery County CoC
Q2: If you serve a Balance of State CoC, which counties is this update for?	*Respondent skipped this question*
Q3: If you are submitting a plan for CA-600, what is the SPA number associated with your update?	*Respondent skipped this question*

Q4: Contact Information

Name	Gentry Darby
Organization	Volunteers of America Greater Ohio
Email Address	Gentry.darby@voago.org

PAGE 3: Part 2: Coordination

Q5: Does your community have a written plan to end Veteran homelessness?	Yes
Q6: If you answered "Yes" to the previous question, have community stakeholders (e.g. local VA Medical Center, VA, SSVF grantees, etc.) provided input into the plan development and implementation?	Yes

Q7: Who is the CoC point of contact?

Name:	Jessica Jenkins
Email:	jenkinsJ@mcohio.org
Organization:	Human Services Planning and Development, Montgomery County
Phone #:	937-225-4218

Q8: Are representatives from the following VA funded programs present at community planning meetings/events?

	Strategic Meetings	Case Conferencing/Master List
HUD and Veterans Affairs Supportive Housing (HUD-VASH)	Yes	Yes
Healthcare for Homeless Veterans (HCHV)	Yes	Yes
Grant and Per Diem (GPD) VAMC Liaison	Yes	Yes
Grant and Per Diem (GPD) Providers	Yes	Yes
Community Resource and Referral Center (CRRC)	Not Applicable	Not Applicable
Domiciliary Care for Veterans (VA-Dom)	Yes	Yes
Veterans Justice Outreach (VJO)	Yes	Yes
Safe Haven	Not Applicable	Not Applicable

Q9: What types of data are community providers able to share with their local VA Medical Center(s)? (Select all that apply)	Client-level information (e.g. data from the HMIS system; includes identifying information such as the key elements for the by name/master list)
Q10: What types of data can local VA Medical Center staff share with community providers? (Select all that apply)	Client-level information (e.g. data from the HOMES system such as key elements for the by name/master list)
Q11: Does your community have a standardized Release of Information (ROI) form for data sharing between the local VA Medical Center(s) and other relevant stakeholders?	Yes
Q12: If VA and non-VA homeless assistance providers are not able to share/receive data, which of the following would be helpful? (Select all that apply)	*Respondent skipped this question*
Q13: Is there a community-wide coordinated entry/assessment process for Veterans? Note: Participation in coordinated entry is a requirement of the SSVF program.	No

Q14: Who is lead point of contact for coordinated entry?

Name:	Jenny Lesniak
Organization:	Human Services Planning and Development, Montgomery County
Organization Type (VAMC, CoC, SSVF Grantee, etc.)	CoC
Phone #:	937-225-5631
Email:	LesniakJ@mcohio.org

Q15: Is the HUD-VASH program integrated into coordinated entry?	No
Q16: If the answer was "Yes" to the previous question, please select the response that best describes this integration:	*Respondent skipped this question*

Q17: Is the GPD program integrated into coordinated entry?	No
Q18: If the answer to the previous question was "Yes", please select the response that best describes this integration:	*Respondent skipped this question*
Q19: Is GPD providing bridge housing in the community? (Please note that they must have submitted a change of scope to the GPD Program Office or are currently in the process to select "Yes".)	Yes

Q20: Please list the GPD providers currently serving your community.

List of Agency Names	Volunteers of America Greater Ohio
Total Number of Beds	50

Q21: Have any GPD providers in your community submitted a change of scope to the GPD Program Office?	Yes
Q22: If "No" to question 21, are any GPD providers planning to submit a change of scope?	*Respondent skipped this question*

PAGE 4: Part 3: Master List

Q23: Does the community have a master list?	Yes
Q24: If "Yes" to the previous question, is the list one complete document (not multiple parts)?	Yes

Q25: Who manages the master list?

Name:	Jenny Lesniak
Role:	Program Coordinator Housing and Homeless Solutions
Organization:	Human Services Planning and Development, Montgomery County
Organization Type (VAMC, CoC, SSVF Grantee, etc.):	CoC

Q26: Does your list have the following elements? (Select all that apply.)	Includes all unsheltered Veterans, Includes all Veterans in emergency shelter (regardless of shelter funding source) , Includes all Veterans in transitional housing (GPD, community TH, regardless of funding source)
Q27: How often do you meet to review and update the master list?	Bi-weekly

Q28: **Currently what are your community's top 3 priorities for ending Veteran homelessness?**

Increase use of SSVF rapid re-housing to close gaps.
,

Submitting a claim to the federal partners (USICH/HUD/VA)
,

Increasing permanent housing options (e.g. landlord engagement, etc.)

PAGE 5: Part 4: Meetings and Strategy

Q29: **What types of meetings does your community have?**

	(no label)
Case Conferences	Bi-Weekly
Strategic Planning/CoordinationMeetings (Bigger Picture)	Bi-Weekly

Q30: **When are your next three strategic planning/coordination meetings? (Include date, time)**

Meeting 1   06/06/2016 10:00 AM,

Meeting 2   06/14/2016 10:30 AM,

Meeting 3   06/20/2016 10:00 AM

Q31: **Would you like your Regional Coordinator and/or TA representative to participate in one of these meetings?**

No

PAGE 6: Part 5: Federal Criteria/Benchmarks and Support

Q32: **Has your community decided to pursue the federal partners' process?**

Yes

Q33: If the answer to the previous question was "No", why have you decided not to pursue the process?

Respondent skipped this question

Q34: **Has your community submitted a claim to the federal partners (USICH, VA, HUD)?**

No

Q35: If the answer to Question 34 was "Yes", please provide the date the claim was submitted and its current status (pending, approved, denied).

Respondent skipped this question

Q36: List any technical assistance needs. (Select all that apply.)

Respondent skipped this question

PAGE 7: Part 6: Sustainability

Q37: **Has your community begun sustainability planning efforts?**	No
Q38: **What resource gaps (if any) have you identified that may hinder sustainability? Select all that apply**	Need for additional prevention/rapid re-housing funds (non-SSVF) , Need for RRH Waiver to serve higher proportion of prevention clients in SSVF , Need for additional HUD-VASH vouchers , Need for additional Section 8 (non-VA) housing vouchers , Need for additional VA funded prevention/rapid re-housing (SSVF) , Need for income support / financial management services (e.g. Rep Payee) , Need for additional permanent supportive housing resources (VA and/or non-VA) , Need for affordable, permanent housing options , Funding for other intensive case management services for RRH Veterans currently housed but at-risk of returning to homelessness.
Q39: **Does your community currently have Priority 1 (aka "Surge") SSVF funding?**	Yes
Q40: **If the answer to the previous question is "yes", does your community have adequate funding resources in place to sustain your system when "surge" funding ends?**	No, If the answer is "no", please explain. Even though we are answering NO. We are unsure of how to answer this question at this time. We will need to look at the data from the Priority 1 and 2 programs more in depth to determine an answer.
Q41: **Does your community regularly follow-up with rapid re-housing clients to ensure housing stabilization?**	No

Q42: Do you have a system in place to ensure rapid re-housing clients experiencing new housing crises are routed to prevention/other stabilization services?

Yes,

If yes, please describe this process.
Clients that are placed into housing through SSVF continue to receive case management follow up until the need has been met. This follow up includes following a veteran driven plan to help the veteran be stable in the community. The release of information to the landlords also gives the case manager an opportunity for communication with educating the landlords of services. Veterans placed into RRH with HUD/VASH are assigned a case worker for follow up. Dayton VAMC is proposing that a case worker be assigned to each client opened with SSVF Prevention services to assist with intensive aftercare case management.

#4

COMPLETE

Collector: Web Link 1 (Web Link)
Started: Tuesday, May 31, 2016 10:49:20 AM
Last Modified: Tuesday, May 31, 2016 11:05:29 AM
Time Spent: 00:16:09

PAGE 2: Part 1: Demographics

Q1: Choose your Continuum of Care Code:

(OH-507) Ohio Balance of State CoC

Q2: If you serve a Balance of State CoC, which counties is this update for?

Adams, Allen, Ashland, Ashtabula, Athens, Auglaize, Belmont, Brown, Butler, Carroll, Champaign, Clark, Clermont, Clinton, Columbiana, Coshocton, Crawford, Darke, Defiance, Delaware, Erie, Fairfield, Fayette, Fulton, Gallia, Geauga, Greene, Guernsey, Hancock, Hardin, Harrison, Henry, Highland, Hocking, Holmes, Huron, Jackson, Jefferson, Knox, Lake, Lawrence, Licking, Logan, Lorain, Madison, Marion, Medina, Meigs, Mercer, Miami, Monroe, Morgan, Morrow, Muskingum, Noble, Ottawa, Paulding, Perry, Pickaway, Pike, Portage, Preble, Putnam, Richland, Ross, Sandusky, Scioto, Seneca, Shelby, Trumbull, Tuscarawas, Union, VanWert, Vinton, Warren, Washington, Wyandot, Wayne, Williams, Wood

Q3: If you are submitting a plan for CA-600, what is the SPA number associated with your update?

Respondent skipped this question

Q4: Contact Information

Name	Katrina Woods
Organization	Licking County Coalition for Housing
Email Address	twoods@lcchousing.org

PAGE 3: Part 2: Coordination

Q5: Does your community have a written plan to end Veteran homelessness?

Yes

Q6: If you answered "Yes" to the previous question, have community stakeholders (e.g. local VA Medical Center, VA, SSVF grantees, etc.) provided input into the plan development and implementation?

Yes

Q7: Who is the CoC point of contact?

Name:	Erica Mulryan
Email:	ericamulryan@cohhio.org
Organization:	Coalition on Homelessness and Housing in Ohio (COHHIO)
Phone #:	614-280-1984 Ext. 118

Q8: Are representatives from the following VA funded programs present at community planning meetings/events?

	Strategic Meetings	Case Conferencing/Master List
HUD and Veterans Affairs Supportive Housing (HUD-VASH)	Yes	Yes
Healthcare for Homeless Veterans (HCHV)	Yes	Yes
Grant and Per Diem (GPD) VAMC Liaison	Yes	Yes
Grant and Per Diem (GPD) Providers	Yes	Yes
Community Resource and Referral Center (CRRC)	Yes	Yes
Domiciliary Care for Veterans (VA-Dom)	Not Applicable	Not Applicable
Veterans Justice Outreach (VJO)	No	Yes
Safe Haven	Not Applicable	Not Applicable

Q9: What types of data are community providers able to share with their local VA Medical Center(s)? (Select all that apply)	Client-level information (e.g. data from the HMIS system; includes identifying information such as the key elements for the by name/master list) , Aggregate performance information (e.g. housing placement numbers; length of time homeless, does not include identifying information)
Q10: What types of data can local VA Medical Center staff share with community providers? (Select all that apply)	Client-level information (e.g. data from the HOMES system such as key elements for the by name/master list) , Aggregate performance information (e.g. HUD-VASH placement numbers; length of time homeless, GPD information, does not include identifying information
Q11: Does your community have a standardized Release of Information (ROI) form for data sharing between the local VA Medical Center(s) and other relevant stakeholders?	No
Q12: If VA and non-VA homeless assistance providers are not able to share/receive data, which of the following would be helpful? (Select all that apply)	*Respondent skipped this question*

Q13: Is there a community-wide coordinated entry/assessment process for Veterans? Note: Participation in coordinated entry is a requirement of the SSVF program.	Yes

Q14: Who is lead point of contact for coordinated entry?

Name:	Erica Mulryan
Organization:	COHHIO
Organization Type (VAMC, CoC, SSVF Grantee, etc.)	COC
Phone #:	614-280-1984 Ext. 118
Email:	ericamulryan@cohhio.org

Q15: Is the HUD-VASH program integrated into coordinated entry?	Yes
Q16: If the answer was "Yes" to the previous question, please select the response that best describes this integration:	HUD-VASH receives referrals from coordinated entry but also allows for direct entry into their program through other means
Q17: Is the GPD program integrated into coordinated entry?	Yes
Q18: If the answer to the previous question was "Yes", please select the response that best describes this integration:	GPD receives referrals from coordinated entry but also allows for direct entry into their program through other means
Q19: Is GPD providing bridge housing in the community? (Please note that they must have submitted a change of scope to the GPD Program Office or are currently in the process to select "Yes".)	No

Q20: Please list the GPD providers currently serving your community.

List of Agency Names	Volunteers of America - Erie, Lutheran Social Services - Fairfield, Licking-Knox Goodwill - Licking, Family and Community Services - Lorain, Pickaway CAA - Pickaway, Family and Community Services - Portage, Family and Community Services - Trumbull
Total Number of Beds	92

Q21: Have any GPD providers in your community submitted a change of scope to the GPD Program Office?	No
Q22: If "No" to question 21, are any GPD providers planning to submit a change of scope?	No

PAGE 4: Part 3: Master List

Q23: Does the community have a master list?	Yes
Q24: If "Yes" to the previous question, is the list one complete document (not multiple parts)?	Yes

Q25: Who manages the master list?

Name:	Erica Mulryan
Role:	COC Director
Organization:	COHHIO
Organization Type (VAMC, CoC, SSVF Grantee, etc.):	COC

Q26: Does your list have the following elements? (Select all that apply.)

Includes all unsheltered Veterans,

Includes all Veterans in emergency shelter (regardless of shelter funding source)
,

Includes all Veterans in transitional housing (GPD, community TH, regardless of funding source)

Q27: How often do you meet to review and update the master list?

Monthly

Q28: Currently what are your community's top 3 priorities for ending Veteran homelessness?

Sustainability: Ensuring that at least 1 party (most likely the CoC) is responsible for maintaining the goal of ending Veteran homelessness and codifying this into CoC governance structure
,

Sustainability: Evaluating data on a regular basis to track any new trends, make modifications, and assess sustainability
,

Establishing a coordinated intake/entry system.

PAGE 5: Part 4: Meetings and Strategy

Q29: What types of meetings does your community have?

	(no label)
Case Conferences	Bi-Weekly
Strategic Planning/CoordinationMeetings (Bigger Picture)	Monthly

Q30: When are your next three strategic planning/coordination meetings? (Include date, time)

Meeting 1	06/10/2016 10:00 AM,
Meeting 2	07/08/2016 10:00 AM,
Meeting 3	08/12/2016 10:00 AM

Q31: Would you like your Regional Coordinator and/or TA representative to participate in one of these meetings?

No

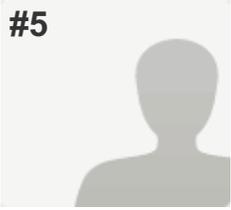**PAGE 6: Part 5: Federal Criteria/Benchmarks and Support**

Q32: Has your community decided to pursue the federal partners' process?	Yes
Q33: If the answer to the previous question was "No", why have you decided not to pursue the process?	*Respondent skipped this question*
Q34: Has your community submitted a claim to the federal partners (USICH, VA, HUD)?	No
Q35: If the answer to Question 34 was "Yes", please provide the date the claim was submitted and its current status (pending, approved, denied).	*Respondent skipped this question*
Q36: List any technical assistance needs. (Select all that apply.)	Assistance with sustainability planning

PAGE 7: Part 6: Sustainability

Q37: Has your community begun sustainability planning efforts?	No
Q38: What resource gaps (if any) have you identified that may hinder sustainability? Select all that apply	Unknown - sustainability planning has not yet begun for this community.
Q39: Does your community currently have Priority 1 (aka "Surge") SSVF funding?	No
Q40: If the answer to the previous question is "yes", does your community have adequate funding resources in place to sustain your system when "surge" funding ends?	*Respondent skipped this question*
Q41: Does your community regularly follow-up with rapid re-housing clients to ensure housing stabilization?	Yes
Q42: Do you have a system in place to ensure rapid re-housing clients experiencing new housing crises are routed to prevention/other stabilization services?	No

#5

COMPLETE

Collector: Web Link 1 (Web Link)
Started: Wednesday, June 01, 2016 10:30:27 AM
Last Modified: Wednesday, June 01, 2016 10:48:45 AM
Time Spent: 00:18:18

PAGE 2: Part 1: Demographics

Q1: Choose your Continuum of Care Code:	(OH-500) Cincinnati/Hamilton County CoC
Q2: If you serve a Balance of State CoC, which counties is this update for?	*Respondent skipped this question*
Q3: If you are submitting a plan for CA-600, what is the SPA number associated with your update?	*Respondent skipped this question*

Q4: Contact Information

Name	Lora Ellis
Organization	Talbert House
Email Address	lora.ellis@talberthouse.org

PAGE 3: Part 2: Coordination

Q5: Does your community have a written plan to end Veteran homelessness?	Yes
Q6: If you answered "Yes" to the previous question, have community stakeholders (e.g. local VA Medical Center, VA, SSVF grantees, etc.) provided input into the plan development and implementation?	Yes

Q7: Who is the CoC point of contact?

Name:	Kevin Finn
Email:	kfinn@end-homelessness.org
Organization:	Strategies to End Homelessness
Phone #:	513-263-2788

Q8: **Are representatives from the following VA funded programs present at community planning meetings/events?**

	Strategic Meetings	Case Conferencing/Master List
HUD and Veterans Affairs Supportive Housing (HUD-VASH)	Yes	Yes
Healthcare for Homeless Veterans (HCHV)	Yes	Yes
Grant and Per Diem (GPD) VAMC Liaison	Yes	Yes
Grant and Per Diem (GPD) Providers	Yes	Yes
Community Resource and Referral Center (CRRC)	Not Applicable	Not Applicable
Domiciliary Care for Veterans (VA-Dom)	Not Applicable	Not Applicable
Veterans Justice Outreach (VJO)	Yes	Yes
Safe Haven	Not Applicable	Not Applicable

Q9: What types of data are community providers able to share with their local VA Medical Center(s)? (Select all that apply)	Client-level information (e.g. data from the HMIS system; includes identifying information such as the key elements for the by name/master list) , Aggregate performance information (e.g. housing placement numbers; length of time homeless, does not include identifying information)
Q10: What types of data can local VA Medical Center staff share with community providers? (Select all that apply)	Client-level information (e.g. data from the HOMES system such as key elements for the by name/master list) , Aggregate performance information (e.g. HUD-VASH placement numbers; length of time homeless, GPD information, does not include identifying information
Q11: Does your community have a standardized Release of Information (ROI) form for data sharing between the local VA Medical Center(s) and other relevant stakeholders?	No
Q12: If VA and non-VA homeless assistance providers are not able to share/receive data, which of the following would be helpful? (Select all that apply)	Sample ROIs and MOUs that other communities have used.
Q13: Is there a community-wide coordinated entry/assessment process for Veterans? Note: Participation in coordinated entry is a requirement of the SSVF program.	Yes

Q14: Who is lead point of contact for coordinated entry?

Name:	Jamie Hummer
Organization:	Strategies to End Homelessness
Organization Type (VAMC, CoC, SSVF Grantee, etc.)	CoC
Phone #:	513-354-6682
Email:	jhummer@end-homelessness.org

Q15: Is the HUD-VASH program integrated into coordinated entry?

Yes

Q16: If the answer was "Yes" to the previous question, please select the response that best describes this integration:

HUD-VASH receives referrals from coordinated entry but also allows for direct entry into their program through other means

Q17: Is the GPD program integrated into coordinated entry?

No

Q18: If the answer to the previous question was "Yes", please select the response that best describes this integration:

Respondent skipped this question

Q19: Is GPD providing bridge housing in the community? (Please note that they must have submitted a change of scope to the GPD Program Office or are currently in the process to select "Yes".)

Yes

Q20: Please list the GPD providers currently serving your community.

List of Agency Names	Joseph House, Ohio Valley Goodwill, Shelter House, Talbert House, Volunteers of America
Total Number of Beds	161

Q21: Have any GPD providers in your community submitted a change of scope to the GPD Program Office?

Yes,

If "Yes", please list the agency names.
Volunteers of America and Talbert House

Q22: If "No" to question 21, are any GPD providers planning to submit a change of scope?

Yes

PAGE 4: Part 3: Master List

Q23: Does the community have a master list?

Yes

Q24: If "Yes" to the previous question, is the list one complete document (not multiple parts)?

Yes

Q25: Who manages the master list?

Name:	Lora Ellis
Role:	CoC Homeless Veteran Work Group Chair
Organization:	Talbert House
Organization Type (VAMC, CoC, SSVF Grantee, etc.):	SSVF Grantee

Q26: Does your list have the following elements? (Select all that apply.)	Includes all unsheltered Veterans,
	Includes all Veterans in emergency shelter (regardless of shelter funding source) ,
	Includes all Veterans in transitional housing (GPD, community TH, regardless of funding source)
Q27: How often do you meet to review and update the master list?	Weekly
Q28: Currently what are your community's top 3 priorities for ending Veteran homelessness?	Submitting a claim to the federal partners (USICH/HUD/VA) ,
	Designing the system to meet federal benchmark criteria. ,
	GPD change of scope.

PAGE 5: Part 4: Meetings and Strategy

Q29: What types of meetings does your community have?

	(no label)
Case Conferences	Bi-Weekly
Strategic Planning/CoordinationMeetings (Bigger Picture)	Bi-Weekly

Q30: When are your next three strategic planning/coordination meetings? (Include date, time)

Meeting 1   06/09/2016 2:00 PM,

Meeting 2   06/17/2016 9:00 AM,

Meeting 3   06/23/2016 2:00 PM

Q31: Would you like your Regional Coordinator and/or TA representative to participate in one of these meetings?	No

PAGE 6: Part 5: Federal Criteria/Benchmarks and Support

Q32: Has your community decided to pursue the federal partners' process?	Yes
Q33: If the answer to the previous question was "No", why have you decided not to pursue the process?	*Respondent skipped this question*
Q34: Has your community submitted a claim to the federal partners (USICH, VA, HUD)?	No

Q35: If the answer to Question 34 was "Yes", please provide the date the claim was submitted and its current status (pending, approved, denied).	*Respondent skipped this question*
Q36: List any technical assistance needs. (Select all that apply.)	Assistance with integration and coordination of HUD-VASH, GPD, and/or other transitional housing

| Q37: Has your community begun sustainability planning efforts?	No
Q38: What resource gaps (if any) have you identified that may hinder sustainability? Select all that apply	Need for additional prevention/rapid re-housing funds (non-SSVF) , Need for additional Section 8 (non-VA) housing vouchers , Funding for other intensive case management services for RRH Veterans currently housed but at-risk of returning to homelessness. , Other (please specify) Funding for other intensive case management services for PSH veterans currently housed but no longer in program (incomed out).
Q39: Does your community currently have Priority 1 (aka "Surge") SSVF funding?	Yes
Q40: If the answer to the previous question is "yes", does your community have adequate funding resources in place to sustain your system when "surge" funding ends?	Yes
Q41: Does your community regularly follow-up with rapid re-housing clients to ensure housing stabilization?	No
Q42: Do you have a system in place to ensure rapid re-housing clients experiencing new housing crises are routed to prevention/other stabilization services?	Yes, If yes, please describe this process. We utilize Central Access Point, and they are prioritized in SSVF prevention.

#6
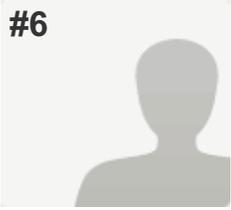
COMPLETE

Collector: Web Link 1 (Web Link)
Started: Wednesday, June 01, 2016 11:49:38 AM
Last Modified: Wednesday, June 01, 2016 12:02:17 PM
Time Spent: 00:12:39

PAGE 2: Part 1: Demographics

Q1: Choose your Continuum of Care Code:	(OH-501) Toledo/Lucas County CoC
Q2: If you serve a Balance of State CoC, which counties is this update for?	*Respondent skipped this question*
Q3: If you are submitting a plan for CA-600, what is the SPA number associated with your update?	*Respondent skipped this question*

Q4: Contact Information

Name	Susan Wren
Organization	WSOS Community Action
Email Address	snwren@wsos.org

PAGE 3: Part 2: Coordination

Q5: Does your community have a written plan to end Veteran homelessness?	Yes
Q6: If you answered "Yes" to the previous question, have community stakeholders (e.g. local VA Medical Center, VA, SSVF grantees, etc.) provided input into the plan development and implementation?	Yes

Q7: Who is the CoC point of contact?

Name:	Mike Badik
Email:	mbadik@tlchb.org
Organization:	Toledo-Lucas County Homelessness Board
Phone #:	419-244-9440 Ext. 16

Q8: **Are representatives from the following VA funded programs present at community planning meetings/events?**

	Strategic Meetings	Case Conferencing/Master List
HUD and Veterans Affairs Supportive Housing (HUD-VASH)	Yes	Yes
Healthcare for Homeless Veterans (HCHV)	Yes	Yes
Grant and Per Diem (GPD) VAMC Liaison	Yes	Yes
Grant and Per Diem (GPD) Providers	Yes	Yes
Community Resource and Referral Center (CRRC)	No	No
Domiciliary Care for Veterans (VA-Dom)	Not Applicable	Not Applicable
Veterans Justice Outreach (VJO)	No	No
Safe Haven	No	No

Q9: **What types of data are community providers able to share with their local VA Medical Center(s)? (Select all that apply)**	Client-level information (e.g. data from the HMIS system; includes identifying information such as the key elements for the by name/master list) , Aggregate performance information (e.g. housing placement numbers; length of time homeless, does not include identifying information)
Q10: **What types of data can local VA Medical Center staff share with community providers? (Select all that apply)**	Client-level information (e.g. data from the HOMES system such as key elements for the by name/master list) , Aggregate performance information (e.g. HUD-VASH placement numbers; length of time homeless, GPD information, does not include identifying information
Q11: **Does your community have a standardized Release of Information (ROI) form for data sharing between the local VA Medical Center(s) and other relevant stakeholders?**	No
Q12: **If VA and non-VA homeless assistance providers are not able to share/receive data, which of the following would be helpful? (Select all that apply)**	Sample ROIs and MOUs that other communities have used.
Q13: **Is there a community-wide coordinated entry/assessment process for Veterans? Note: Participation in coordinated entry is a requirement of the SSVF program.**	Yes

Q14: Who is lead point of contact for coordinated entry?

Name:	Bianca Guerra
Organization:	United Way of Greater Toledo
Organization Type (VAMC, CoC, SSVF Grantee, etc.)	COC
Phone #:	419-254-4680
Email:	bianca.guerra@unitedwaytoledo.org

Q15: Is the HUD-VASH program integrated into coordinated entry?

No

Q16: If the answer was "Yes" to the previous question, please select the response that best describes this integration:

Respondent skipped this question

Q17: Is the GPD program integrated into coordinated entry?

No

Q18: If the answer to the previous question was "Yes", please select the response that best describes this integration:

Respondent skipped this question

Q19: Is GPD providing bridge housing in the community? (Please note that they must have submitted a change of scope to the GPD Program Office or are currently in the process to select "Yes".)

No

Q20: Please list the GPD providers currently serving your community.

List of Agency Names	Neighborhood Properties Inc.
Total Number of Beds	17

Q21: Have any GPD providers in your community submitted a change of scope to the GPD Program Office?

No

Q22: If "No" to question 21, are any GPD providers planning to submit a change of scope?

No

PAGE 4: Part 3: Master List

Q23: Does the community have a master list?

Yes

Q24: If "Yes" to the previous question, is the list one complete document (not multiple parts)?

Yes

Q25: Who manages the master list?

Name:	Carl Sutherland II
Role:	HMIS Admin
Organization:	Toledo Lucas County Homelessness Board
Organization Type (VAMC, CoC, SSVF Grantee, etc.):	CoC

Q26: Does your list have the following elements? (Select all that apply.)	Includes all unsheltered Veterans,
	Includes all Veterans in emergency shelter (regardless of shelter funding source)
	,
	Includes all Veterans in transitional housing (GPD, community TH, regardless of funding source)
Q27: How often do you meet to review and update the master list?	Bi-weekly
Q28: Currently what are your community's top 3 priorities for ending Veteran homelessness?	Sustainability: Evaluating data on a regular basis to track any new trends, make modifications, and assess sustainability
	,
	Submitting a claim to the federal partners (USICH/HUD/VA)
	,
	Increasing permanent housing options (e.g. landlord engagement, etc.)

PAGE 5: Part 4: Meetings and Strategy

Q29: What types of meetings does your community have?

	(no label)
Case Conferences	Bi-Weekly
Strategic Planning/CoordinationMeetings (Bigger Picture)	Bi-Weekly

Q30: When are your next three strategic planning/coordination meetings? (Include date, time)

Meeting 1   06/08/2016 10:30 AM,

Meeting 2   06/22/2016 10:30 AM,

Meeting 3   07/06/2016 10:30 AM

Q31: Would you like your Regional Coordinator and/or TA representative to participate in one of these meetings?	No

PAGE 6: Part 5: Federal Criteria/Benchmarks and Support

Q32: Has your community decided to pursue the federal partners' process?	Yes
Q33: If the answer to the previous question was "No", why have you decided not to pursue the process?	*Respondent skipped this question*

Q34: Has your community submitted a claim to the federal partners (USICH, VA, HUD)?

Yes

Q35: If the answer to Question 34 was "Yes", please provide the date the claim was submitted and its current status (pending, approved, denied).

Date: April 27th, 2016

Status: pending

Q36: List any technical assistance needs. (Select all that apply.)

Respondent skipped this question

PAGE 7: Part 6: Sustainability

Q37: Has your community begun sustainability planning efforts?

Yes

Q38: What resource gaps (if any) have you identified that may hinder sustainability? Select all that apply

Need for additional prevention/rapid re-housing funds (non-SSVF)

,

Need for additional VA funded prevention/rapid re-housing (SSVF)

,

Need for additional permanent supportive housing resources (VA and/or non-VA)

,

Need for affordable, permanent housing options,

Funding for other intensive case management services for RRH Veterans currently housed but at-risk of returning to homelessness.

Q39: Does your community currently have Priority 1 (aka "Surge") SSVF funding?

No

Q40: If the answer to the previous question is "yes", does your community have adequate funding resources in place to sustain your system when "surge" funding ends?

Respondent skipped this question

Q41: Does your community regularly follow-up with rapid re-housing clients to ensure housing stabilization?

Yes

Q42: Do you have a system in place to ensure rapid re-housing clients experiencing new housing crises are routed to prevention/other stabilization services?

Yes,

If yes, please describe this process.
SSVF participants are directed to call the family advocate if further needs need to be addressed. Veterans can also call into the 2-1-1 network in Lucas County to be screened and diverted, then given resources in the community to help resolve the housing crisis.

#7
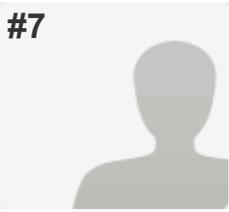
COMPLETE

Collector: Web Link 1 (Web Link)
Started: Thursday, June 02, 2016 4:49:54 PM
Last Modified: Thursday, June 02, 2016 4:59:46 PM
Time Spent: 00:09:52

PAGE 2: Part 1: Demographics

Q1: Choose your Continuum of Care Code: (OH-506) Akron/Baberton/Summit County CoC

Q2: If you serve a Balance of State CoC, which counties is this update for? *Respondent skipped this question*

Q3: If you are submitting a plan for CA-600, what is the SPA number associated with your update? *Respondent skipped this question*

Q4: Contact Information

Name	Trish Symons
Organization	Community Support Services, Inc.
Email Address	patricia.symons@cssbh.org

PAGE 3: Part 2: Coordination

Q5: Does your community have a written plan to end Veteran homelessness? Yes

Q6: If you answered "Yes" to the previous question, have community stakeholders (e.g. local VA Medical Center, VA, SSVF grantees, etc.) provided input into the plan development and implementation? Yes

Q7: Who is the CoC point of contact?

Name:	Helen Tomic
Email:	htomic@akronohio.gov
Organization:	City of Akron
Phone #:	330-375-2090

Q8: **Are representatives from the following VA funded programs present at community planning meetings/events?**

	Strategic Meetings	Case Conferencing/Master List
HUD and Veterans Affairs Supportive Housing (HUD-VASH)	Yes	Yes
Healthcare for Homeless Veterans (HCHV)	No	No
Grant and Per Diem (GPD) VAMC Liaison	No	No
Grant and Per Diem (GPD) Providers	Yes	Yes
Community Resource and Referral Center (CRRC)	Yes	Yes
Domiciliary Care for Veterans (VA-Dom)	No	No
Veterans Justice Outreach (VJO)	No	No
Safe Haven	Yes	Yes

Q9: **What types of data are community providers able to share with their local VA Medical Center(s)? (Select all that apply)**	Client-level information (e.g. data from the HMIS system; includes identifying information such as the key elements for the by name/master list) , Aggregate performance information (e.g. housing placement numbers; length of time homeless, does not include identifying information)
Q10: **What types of data can local VA Medical Center staff share with community providers? (Select all that apply)**	Client-level information (e.g. data from the HOMES system such as key elements for the by name/master list) , Aggregate performance information (e.g. HUD-VASH placement numbers; length of time homeless, GPD information, does not include identifying information
Q11: **Does your community have a standardized Release of Information (ROI) form for data sharing between the local VA Medical Center(s) and other relevant stakeholders?**	No
Q12: **If VA and non-VA homeless assistance providers are not able to share/receive data, which of the following would be helpful? (Select all that apply)**	Sample ROIs and MOUs that other communities have used.
Q13: **Is there a community-wide coordinated entry/assessment process for Veterans? Note: Participation in coordinated entry is a requirement of the SSVF program.**	Yes

Q14: Who is lead point of contact for coordinated entry?

Name:	Joe Scalise
Organization:	InfoLine, Inc
Organization Type (VAMC, CoC, SSVF Grantee, etc.)	CoC/SSVF
Phone #:	330-315-0415
Email:	jscalise@infolineinc.org

Q15: Is the HUD-VASH program integrated into coordinated entry?	Yes
Q16: If the answer was "Yes" to the previous question, please select the response that best describes this integration:	HUD-VASH receives referrals from coordinated entry but also allows for direct entry into their program through other means
Q17: Is the GPD program integrated into coordinated entry?	No
Q18: If the answer to the previous question was "Yes", please select the response that best describes this integration:	*Respondent skipped this question*
Q19: Is GPD providing bridge housing in the community? (Please note that they must have submitted a change of scope to the GPD Program Office or are currently in the process to select "Yes".)	No

Q20: Please list the GPD providers currently serving your community.

List of Agency Names	Valor Home - Family and Community Services, Inc.
Total Number of Beds	30

Q21: Have any GPD providers in your community submitted a change of scope to the GPD Program Office?	No
Q22: If "No" to question 21, are any GPD providers planning to submit a change of scope?	No

PAGE 4: Part 3: Master List

Q23: Does the community have a master list?	Yes
Q24: If "Yes" to the previous question, is the list one complete document (not multiple parts)?	Yes

Q25: Who manages the master list?

Name:	Nate Chambers
Role:	SSVF Senior Advocate
Organization:	Family and Community Services, Inc.
Organization Type (VAMC, CoC, SSVF Grantee, etc.):	SSVF

Q26: Does your list have the following elements? (Select all that apply.)	Includes all unsheltered Veterans,
	Includes all Veterans in emergency shelter (regardless of shelter funding source) ,
	Includes all Veterans in transitional housing (GPD, community TH, regardless of funding source)

Q27: How often do you meet to review and update the master list?	Monthly

Q28: Currently what are your community's top 3 priorities for ending Veteran homelessness?	Sustainability: Developing written policies and procedures to maintain the master list and case conference processes ,
	Designing the system to meet federal benchmark criteria. ,
	Establishing regular meetings to strategize system improvements/enhancements.

PAGE 5: Part 4: Meetings and Strategy

Q29: What types of meetings does your community have?

	(no label)
Case Conferences	Bi-Weekly
Strategic Planning/CoordinationMeetings (Bigger Picture)	Monthly

Q30: When are your next three strategic planning/coordination meetings? (Include date, time)

Meeting 1   06/15/2016 10:00 AM

Q31: Would you like your Regional Coordinator and/or TA representative to participate in one of these meetings?	Yes,
	If you selected "Yes" please provide the call In information 330-315-1381

PAGE 6: Part 5: Federal Criteria/Benchmarks and Support

Q32: Has your community decided to pursue the federal partners' process?	Yes

Q33: If the answer to the previous question was "No", why have you decided not to pursue the process?	*Respondent skipped this question*

Q34: Has your community submitted a claim to the federal partners (USICH, VA, HUD)?	No

Q35: If the answer to Question 34 was "Yes", please provide the date the claim was submitted and its current status (pending, approved, denied).

Respondent skipped this question

Q36: List any technical assistance needs. (Select all that apply.)

Assistance with sustainability planning

PAGE 7: Part 6: Sustainability

Q37: Has your community begun sustainability planning efforts?

No

Q38: What resource gaps (if any) have you identified that may hinder sustainability? Select all that apply

Unknown - sustainability planning has not yet begun for this community.

Q39: Does your community currently have Priority 1 (aka "Surge") SSVF funding?

No

Q40: If the answer to the previous question is "yes", does your community have adequate funding resources in place to sustain your system when "surge" funding ends?

Respondent skipped this question

Q41: Does your community regularly follow-up with rapid re-housing clients to ensure housing stabilization?
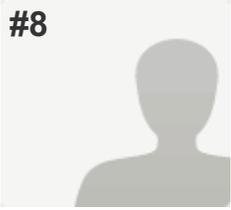
Yes

Q42: Do you have a system in place to ensure rapid re-housing clients experiencing new housing crises are routed to prevention/other stabilization services?

Yes,

If yes, please describe this process.
Veterans are to call Central Intake to be screened for SSVF and other prevention services within the county.

#8

COMPLETE

Collector: Web Link 1 (Web Link)
Started: Friday, June 03, 2016 3:15:29 PM
Last Modified: Friday, June 03, 2016 3:43:29 PM
Time Spent: 00:28:00

PAGE 2: Part 1: Demographics

Q1: Choose your Continuum of Care Code:	(OH-503) Columbus/Franklin County CoC
Q2: If you serve a Balance of State CoC, which counties is this update for?	*Respondent skipped this question*
Q3: If you are submitting a plan for CA-600, what is the SPA number associated with your update?	*Respondent skipped this question*

Q4: Contact Information

Name	Arica Morgan
Organization	Volunteers Of America of Greater Ohio
Email Address	arica.morgan@voago.org

PAGE 3: Part 2: Coordination

Q5: Does your community have a written plan to end Veteran homelessness?	No
Q6: If you answered "Yes" to the previous question, have community stakeholders (e.g. local VA Medical Center, VA, SSVF grantees, etc.) provided input into the plan development and implementation?	Yes

Q7: Who is the CoC point of contact?

Name:	Amy Price
Email:	aprice@csb.org
Organization:	Community Shelter Board
Phone #:	614-221-9195

Q8: **Are representatives from the following VA funded programs present at community planning meetings/events?**

	Strategic Meetings	Case Conferencing/Master List
HUD and Veterans Affairs Supportive Housing (HUD-VASH)	Yes	Yes
Healthcare for Homeless Veterans (HCHV)	Yes	Yes
Grant and Per Diem (GPD) VAMC Liaison	Yes	Yes
Grant and Per Diem (GPD) Providers	Yes	Yes
Community Resource and Referral Center (CRRC)	Not Applicable	Not Applicable
Domiciliary Care for Veterans (VA-Dom)	Not Applicable	Not Applicable
Veterans Justice Outreach (VJO)	No	Yes
Safe Haven	Not Applicable	Not Applicable

Q9: **What types of data are community providers able to share with their local VA Medical Center(s)? (Select all that apply)**	Client-level information (e.g. data from the HMIS system; includes identifying information such as the key elements for the by name/master list) , Aggregate performance information (e.g. housing placement numbers; length of time homeless, does not include identifying information)
Q10: **What types of data can local VA Medical Center staff share with community providers? (Select all that apply)**	Client-level information (e.g. data from the HOMES system such as key elements for the by name/master list) , Aggregate performance information (e.g. HUD-VASH placement numbers; length of time homeless, GPD information, does not include identifying information
Q11: **Does your community have a standardized Release of Information (ROI) form for data sharing between the local VA Medical Center(s) and other relevant stakeholders?**	Yes
Q12: If VA and non-VA homeless assistance providers are not able to share/receive data, which of the following would be helpful? (Select all that apply)	*Respondent skipped this question*
Q13: **Is there a community-wide coordinated entry/assessment process for Veterans? Note: Participation in coordinated entry is a requirement of the SSVF program.**	No

Q14: Who is lead point of contact for coordinated entry?

Name:	Carl Landry
Organization:	Columbus VA
Organization Type (VAMC, CoC, SSVF Grantee, etc.)	VAMC
Phone #:	614-257-5855
Email:	carl.landry@va.gov

Q15: Is the HUD-VASH program integrated into coordinated entry?

Yes

Q16: If the answer was "Yes" to the previous question, please select the response that best describes this integration:

The community's assessment is used for all Veterans, regardless of point of entry to determine need

Q17: Is the GPD program integrated into coordinated entry?

Yes

Q18: If the answer to the previous question was "Yes", please select the response that best describes this integration:

The community's assessment is used for all Veterans, regardless of point of entry to determine need

Q19: Is GPD providing bridge housing in the community? (Please note that they must have submitted a change of scope to the GPD Program Office or are currently in the process to select "Yes".)

Yes

Q20: Please list the GPD providers currently serving your community.

List of Agency Names	Volunteers Of America
Total Number of Beds	40

Q21: Have any GPD providers in your community submitted a change of scope to the GPD Program Office?

Yes,

If "Yes", please list the agency names.
Volunteers Of America

Q22: If "No" to question 21, are any GPD providers planning to submit a change of scope?

Respondent skipped this question

PAGE 4: Part 3: Master List

Q23: Does the community have a master list?

Yes

Q24: If "Yes" to the previous question, is the list one complete document (not multiple parts)?

Yes

Q25: Who manages the master list?

Name:	Carl Landry
Role:	Community Outreach Division Coordinator
Organization:	Columbus VA
Organization Type (VAMC, CoC, SSVF Grantee, etc.):	VAMC

Q26: Does your list have the following elements? (Select all that apply.)

Includes all unsheltered Veterans,

Includes all Veterans in emergency shelter (regardless of shelter funding source)
,

Includes all Veterans in transitional housing (GPD, community TH, regardless of funding source)

Q27: How often do you meet to review and update the master list?

Weekly

Q28: Currently what are your community's top 3 priorities for ending Veteran homelessness?

Increase use of SSVF rapid re-housing to close gaps.
,

Establishing a coordinated intake/entry system. ,

Increasing permanent housing options (e.g. landlord engagement, etc.)

PAGE 5: Part 4: Meetings and Strategy

Q29: What types of meetings does your community have?

	(no label)
Case Conferences	Weekly
Strategic Planning/CoordinationMeetings (Bigger Picture)	Monthly

Q30: When are your next three strategic planning/coordination meetings? (Include date, time)

Meeting 1   06/29/2016 02:00 PM,

Meeting 2   06/30/2016 02:00 PM,

Meeting 3   07/01/2016 01:00 PM

Q31: Would you like your Regional Coordinator and/or TA representative to participate in one of these meetings?

No

PAGE 6: Part 5: Federal Criteria/Benchmarks and Support

Q32: Has your community decided to pursue the federal partners' process?

Yes

Q33: If the answer to the previous question was "No", why have you decided not to pursue the process?

Respondent skipped this question

Q34: Has your community submitted a claim to the federal partners (USICH, VA, HUD)?

No

Q35: If the answer to Question 34 was "Yes", please provide the date the claim was submitted and its current status (pending, approved, denied).	*Respondent skipped this question*
Q36: **List any technical assistance needs. (Select all that apply.)**	Assistance with CoC/stakeholder engagement

Q37: **Has your community begun sustainability planning efforts?**	Yes
Q38: **What resource gaps (if any) have you identified that may hinder sustainability? Select all that apply**	Need for additional HUD-VASH vouchers, Need for additional Section 8 (non-VA) housing vouchers , Other (please specify) Additional 50+ Senior housing options
Q39: **Does your community currently have Priority 1 (aka "Surge") SSVF funding?**	No
Q40: If the answer to the previous question is "yes", does your community have adequate funding resources in place to sustain your system when "surge" funding ends?	*Respondent skipped this question*
Q41: **Does your community regularly follow-up with rapid re-housing clients to ensure housing stabilization?**	Yes
Q42: **Do you have a system in place to ensure rapid re-housing clients experiencing new housing crises are routed to prevention/other stabilization services?**	Yes, If yes, please describe this process. In addition to ensuring that each Veteran is provided with resources of community partners that are available for assistance, Veterans know that they are welcome to contact their SSVF provider for prevention screening. With the GPD change of scope, there is a 90 day, 6 month and 1 year follow up with each Veteran that is discharged. There is ongoing case management with HUDVASH. SSVF providers have built relationships with community partners to stay up to date on available area services for eligible and ineligible Veterans.