October 25, 2019

Report Date: **Monitoring Date:**

Agency: **Subrecipient (s):**

Levels of Service			
	Contracted Annual # of Participants	Actual # of Participants in the Last Complete Operating Year	Difference
Unduplicated # of participants contacted:			
Unduplicated # of participants enrolled:			

Coverage Area:

Project Staff Participating in Visit:

Housing Innovations Staff Participating in Visit:

Project Outcome Data:
Formulas reference applicable fields from the Outcomes Section of the most recently submitted PATH annual report.
- % of PATH enrolled individuals who had income from any source at project entry (formula: 19a1/(19a1+19b1)
- % of PATH enrolled individuals who had income from any source at project exit or report end (formula: (19a2+19a3/(19a2+19a3+19b2+19b3))
- % of PATH enrolled individuals who had SSI/SSDI income from any source at project entry (formula: 20a1/(20a1+20b1))
- % of PATH enrolled individuals who had SSI/SSDI income from any source at project exit or report end (formula: (20a2+20a3/(20a2+20a3+20b2+20b3))
- % of PATH enrolled individuals who had non-cash benefits from any source at project entry (formula: 21a1/(21a1+21b1))
- % of PATH enrolled individuals who had non-cash benefits from any source at project exit or report end (formula: (21a2+21a3/(21a2+21a3+21b2+21b3))
- % of PATH enrolled individuals who were covered by health insurance at project entry (formula: 23a1/(23a1+23b1))
- % of PATH enrolled individuals who were covered by health insurance at project exit or report end (formula: (23a2+23a3/(23a2+23a3+23b2+23b3))

October 25, 2019

GOAL OF PATH PROJECT MONITORING: To support a coordinated, collaborative, outreach effort in each CAN that:

- quickly connects unsheltered homeless individuals and families to safe available housing, income, health/behavioral healthcare and other supports;
- identifies people living in unsheltered locations and helps them to reduce the associated risks;
- minimizes service duplication; and
- uses available resources strategically to end unsheltered homelessness for as many people as possible prioritizing those who are most vulnerable and/or have been homeless the longest.

Participant Status Definitions	
Outreach Participants	Participants who have not been enrolled either because they have not been determined eligible or are not willing to participate in services.
Enrolled Participants	Participants who have been determined to be eligible for PATH services, have indicated willingness to participate in services, and whom have not been discharged.
Participants receiving Full Case Management Services	The # of direct care staff and # of participants on each staff's caseload should be documented in the IUP. Projects without sufficient staff to provide full case management services (i.e., including needs assessment and service planning) to all enrolled participants may seek approval from DMHAS for limiting the number of participants for whom the project provides these services. That number must be documented on the outreach plan. The outreach plan must be approved by DMHAS.
Discharged Participants	Enrolled participants shall be discharged when they meet the criteria defined in #38 of this Guide. Enrolled participants shall not be discharged for other reasons.

October 25, 2019

Report Key	
FINDINGS HIGHLIGHTED IN PINK:	Signify significant findings. Submission of a corrective action plan is required. DMHAS will send a template and instructions for the corrective action plan with the final report.
FINDINGS HIGHLIGHTED IN YELLOW:	Signify area of non-compliance with PATH requirements. Findings should be corrected. Submission of a corrective action plan is not required.
AREAS HIGHLIGHTED IN GREEN:	Signify best practice recommendations. Action is not required.

Reviewer Impressions:

October 25, 2019

SECTION 1: PARTICIPANT CHARTS SELECTED

Monitoring team will review the spreadsheet or other tracking system used to record engagement attempts, contacts, and referrals for outreach participants. Monitoring team will randomly select a minimum of 5 enrolled and/or discharged participant charts for on-site review. Indicate initials of charts selected and, if applicable, discharge status.				
#1: Discharge	#2: Discharge	#3: Discharge	#4: Discharge	#5: Discharge
#6: Discharge	#7: Discharge	#8: Discharge	#9: Discharge	#10: Discharge
Reviewer Comments:				

SECTION 2: VISUAL OBSERVATION

The monitoring team will briefly tour the project offices where the visit is being held.

1) Are participant files and information handled in a confidential manner?

   ❍　　Yes　　❍　　No

Guidance: Recipients shall adequately safeguard charts and assure they are used solely for authorized purposes. Reviewer will look for evidence of locked charts and for proper safeguarding of participant names and other confidential information.

Reviewer Comments:

2) Are the project offices clean and well maintained and is space available for private discussions?

   ❍　Yes　　❍　　No

Reviewer Comments:

3) Is a summary of the agency grievance policy posted in an area that is readily visible to project participants who are receiving services at the agency offices?
   ❍   Yes   ❍   No

Reviewer Comments:

SECTION 3: WRITTEN POLICIES

4) <u>Nondiscrimination and equal opportunity requirements.</u> Are written policies in place indicating full compliance with all federal and state nondiscrimination laws and with the rules and regulations governing fair housing and equal opportunity in housing and employment, including reasonable accommodation provisions? ❍ Yes   ❍ No
   Guidance: Recipients, subrecipients and partner agencies are subject to federal civil rights laws, including Fair Housing Act, Section 504 of the Rehabilitation Act of 1973, Title VI of the Civil Rights Act of 1964, the Age Discrimination Act of 1975, the Americans with Disabilities Act of 1990 and CT Anti-Discrimination law..

Reviewer Comments:

5) <u>Conflicts of interest</u>.
   A. Are written policies in place requiring staff and Board members to disclose conflicts of interest and prohibiting financial interest or benefit from PATH assisted activity on the part of staff, persons with whom the staff member has immediate family or business ties, and Board members during his/her tenure with the organization and one year following his/her tenure? ❍   Yes   ❍   No
   B. Do staff demonstrate an understanding that they may not use their positions for purposes that are motivated by or give the appearances of being motivated by a desire for private gain for themselves, their family, and/or their business associates? ❍   Yes   ❍   No
   C. To the extent that conflicts of interest are present, did the agency take appropriate action to mitigate? ❍   Yes   ❍   No

Reviewer Comments:

6) <u>Code of conduct.</u> Are written policies in place defining agency expectations around staff conduct, including guidance on professional boundaries? ❍ Yes   ❍   No

Reviewer Comments:

October 25, 2019

7) <u>Confidentiality.</u>
   A. Are written policies in place to ensure that all participant records containing identifying information are kept secure and all information is handled in a manner that protects participant confidentiality?   ❍ Yes   ❍   No
   B. Do observed field interactions between participants and outreach workers and discussions between the monitoring team, participants, and staff indicate that staff is knowledgeable about confidentiality requirements and that discussions with participants, colleagues, and collateral contacts and participant records are handled in a manner that protects participant confidentiality?   ❍ Yes   ❍   No
   C. Are disclosures of confidential information evidenced in charts authorized by a signed release of information?   ❍   Yes   ❍   No

Reviewer Comments:

8) <u>Educational rights & services.</u> Are written policies in place to ensure that participants are helped to understand their educational rights, to ensure that children and youth are immediately enrolled in school, as required by federal and State law, & to ensure that they are connected to educational services to help them succeed in school? *(As established under the Every Student Succeeds Act – ESSA. Sample policy available at www.ctbos.org)*
   ❍   Yes   ❍   No

Reviewer Comments:

9) <u>Grievances and appeals.</u>
   A. Does the agency have a written grievance policy defining a process that is accessible to participants with low literacy levels and other barriers? ❍ Yes   ❍   No
   B. Has the agency designated a Participant Rights Officer to manage the grievance process?
      ❍   Yes   ❍   No
   C. Are outreach participants informed about how they can use that process to grieve eligibility and termination decisions and other issues? ❍   Yes   ❍   No
   D. Are participants informed in a timely manner of the outcomes of any grievance?
      ❍   Yes   ❍   No
   E. Are grievance reviews conducted by a person other than someone who made or approved the decision under review or a subordinate of such a person?
      ❍   Yes   ❍   No

Reviewer Comments:

10) <u>Safety.</u>

A. Does the agency have a comprehensive policy regarding staff safety that covers situations likely to be encountered by outreach workers and includes keeping informed about where each worker will be and when, working in pairs whenever possible and in all situations determined to be high-risk, and guidance on environmental scans and situations workers should avoid? ❍ Yes   ❍   No

B. Have outreach staff received training on personal safety that includes techniques for de-escalating disruptive situations?

❍   Yes   ❍   No

Guidance: Web-based training for outreach workers is available at:
https://www.homelesshub.ca/resource/hrc-webcast-resources-effective-street-outreach-why-its-important-how-you-can-do-it-better

Reviewer Comments:

11) <u>Incident reporting.</u> Does the agency have a comprehensive policy regarding incident reporting and management that defines an incident and outlines procedures for incident reporting, review and follow-up? ❍Yes   ❍   No

Reviewer Comments:

SECTION 4: ADMINISTRATIVE REQUIREMENTS

12) <u>Number of participants.</u> Is the number of unduplicated participants contacted and enrolled during the last complete operating year consistent with the contracted level as indicated in the project's Intended Use Plan (IUP)?

❍   Yes   ❍   No

Guidance: PATH projects must maintain a utilization rate of at least 90% of commitments as defined in the Intended Use Plan.

Reviewer Comments:

13) <u>Scope of services.</u>

A. Is the scope of services actually being provided consistent with the applicable Intended Use Plan? ❍ Yes   ❍   No

B. Do staff allocated to the project spend the designated portion of their time on activities primarily aimed at quickly connecting unsheltered homeless individuals and families to safe available housing, income, health/behavioral healthcare and other supports and/or identifying people living in unsheltered locations and helping them to reduce the associated risks?

❍   Yes   ❍   No

Reviewer Comments:

14) <u>Prioritization of services.</u> If the project is unable to comply with the standards outlined in this guide or adherence to the standards would not be an efficient use of resources given the unique circumstances of the relevant CAN, has the agency documented efforts to negotiate alternative service standards with DMHAS? ❍   Yes ❍   No

Reviewer Comments:

15) <u>Reporting requirements.</u> Were reports submitted on time:
   A. Most recent PATH Annual Data Report?
      ❍ Yes   ❍   No
   B. Most recent SOAR data reported in OAT *(Best Practice Recommendation)?*
      ❍ Yes   ❍   No

Reviewer Comments:

16) <u>Consumer satisfaction.</u>
   A. Does the project survey PATH consumers at least annually?
      ❍   Yes   ❍   No
   B. Does the project review consumer survey results and take action accordingly?
      ❍ Yes   ❍   No

Reviewer Comments:

17) <u>Staff Training.</u> Have outreach workers participated in at least 12 hours of training in the past year on topics relevant to provision of street outreach services (for example: assertive engagement, identifying/responding to signs of mental illness & addiction, identifying/responding to signs of overdose, Housing First, Motivational Interviewing, safety assessments, crisis intervention, trauma-informed care, and/or service planning)?   ❍   Yes ❍ No

Reviewer Comments:

18) <u>Supervision.</u>
   A. Does agency provide outreach staff with at least one hour of individual supervision bi-weekly that helps them to build low barrier, assertive engagement skills, adjust canvassing and eligibility documentation strategies as necessary, build participant motivation, establish meaningful service plans, ensure team safety, support self-care, and develop professionally? ❍   Yes ❍   No

B. Are outreach staff assisted through supervision to strategically plan concrete daily objectives that are focused on helping unsheltered people to secure housing and that are altered only as necessary to address imminent danger to participants or others or to address other emerging and time-sensitive housing-focused case management tasks? ❍   Yes ❍   No

C. Does the agency ensure staff have access to regular clinical consultation and/or clinical supervision to help identify signs of serious health challenges, mental illness, and substance use disorders and adjust interventions accordingly? ❍   Yes ❍   No

Reviewer Comments:

SECTION 5: ELIGIBILITY DETERMINATION REVIEW

19) Engagement. Does the project establish a concrete plan for engagement & determining eligibility as quickly as possible for each participant encountered?
    ❍   Yes   ❍   No

Reviewer Comments:

20) Determining eligibility.
    A. Does the project limit enrollment to those who have been determined or are suspected to be experiencing serious mental illness OR co-occurring serious mental illness and substance use disorders?
        ❍ Yes   ❍   No
    B. Does the project make assertive efforts to obtain documentation of disability for all enrolled participants? ❍   Yes   ❍   No
    C. Project does limit eligibility criteria to those listed above? ❍   Yes   ❍   No
    D. Are a minimum of 90% of the enrolled participants living in unsheltered locations or in emergency shelter? ❍   Yes   ❍   No

Reviewer Comments:

21) Referrals. Does the project document referrals to appropriate services for participants determined to be ineligible for PATH services? ❍   Yes   ❍   No

Reviewer Comments:

SECTION 6: OUTREACH AND ENGAGEMENT SERVICES

22) Knowledge of community. Has the project established a thorough process to identify patterns of unsheltered homelessness across their CAN, including coordinating

October 25, 2019

regularly with other service providers (e.g., shelters, day centers, soup kitchens, health/mental health services, hospitals, corrections facilities, immigration/youth/family/LGBT services, etc.), community resources (e.g., law enforcement, transportation providers, schools, libraries, businesses, faith-based organizations, etc.) and homeless and formerly homeless people to identify homeless people throughout the CAN?

❍　　Yes　　❍　　No

Reviewer Comments:

23) Outreach Plan.

A. Does the project use the information gathered about patterns of unsheltered homeless and coordinate with all subrecipients to develop and document an outreach plan that covers the entire CAN?　　❍　　Yes　　❍　　No

B. Is the plan approved by a supervisor and updated at least monthly?
　　❍　　Yes　　❍　　No

C. Does the plan prioritize engagement of those who have declined services and seem particularly unwell and/or vulnerable?　❍　Yes　　❍　　No

D. Does the plan include street outreach outside of regular business hours at times when participants are most likely to be present at their sleeping locations (e.g., during early morning hours)?　❍　Yes　　❍　　No

E. Does the plan include a year-round street outreach canvassing schedule that specifies times and locations to be canvassed and establishes predictable locations where outreach workers can be found?　❍　Yes　　❍　　No

F. Is the plan designed to engage populations that may be hard to find (e.g., youth, families, and remote populations)?　❍　　Yes　　❍　　No

G. Does the plan include strategies to address urgent physical needs, such as providing meals, blankets, clothes, and/or toiletries?　❍　　Yes　　❍　　No

H. Does the plan include a schedule for in-reach to locations where unsheltered people are likely to be found (e.g., libraries and other locations that offer free access to restrooms and protection from the elements, transportation terminals, day labor sites, and places where people can access food and other necessities)?
　　❍　　Yes　　❍　　No

I. Does the plan include a schedule for outreach to locations in the catchment area where canvassing may not be effective (e.g., making regular contact with public and private agencies that might help identify and refer unsheltered people)?
　　❍　　Yes　　❍　　No

J. Does the plan carve out time to identify, engage, assess, and support the safety of unsheltered people who are not yet prioritized for housing; respond to public concerns regarding unsheltered people; AND provide housing focused case management services to those who have been prioritized for housing?
　　❍　　Yes　　❍　　No

K. Does the plan ensure that regular outreach occurs during planned staff absences and that engagement of those who have declined services and seem particularly unwell and/or vulnerable occurs during unplanned staff absences? ❍   Yes   ❍   No

L. Is the plan adjusted in response to cold weather, heat advisories and other emergency conditions to promote participant safety?
❍   Yes   ❍   No

M. Does the plan include a strategy to determine if anyone particularly vulnerable was found during the annual PIT count and to ensure follow up (e.g., unsheltered families with children, youth, elderly and medically fragile)? ❍   Yes   ❍   No

N. Is the plan reviewed and approved by DMHAS and the CAN or another community-wide planning body at least semi-annually to ensure coordination with partners who may also be conducting outreach and to minimize duplication of services? ❍   Yes   ❍No

O. Does the project use the outreach plan template provided by DMHAS? ❍ Yes   ❍No

Reviewer Comments:

24) <u>Public concern.</u>
A. Has the project worked with the relevant CAN and/or 211 to ensure that the general public is informed about how to report concerns regarding an unsheltered person? *(Best Practice Recommendation)*
❍   Yes   ❍   No

B. Has the project developed a system for prioritizing and efficiently and promptly responding to public reports as resources allow and circumstances warrant?
❍   Yes   ❍   No

Reviewer Comments:

25) <u>Locating participants.</u>
A. Does the project use an effective system to record participant locations, consult with community partners when there is difficulty locating a participant, adjust the outreach plan to locate participants promptly as needed, and ensure that participants can be located when the primary worker is unavailable? ❍ Yes   ❍   No

B. Has the project implemented a system that uses geocoding, mapping, or other technology to facilitate tracking and sharing participant location patterns? *(Best Practice Recommendation)* ❍   Yes   ❍   No

Reviewer Comments:

26) <u>Engagement.</u>

October 25, 2019

A. Is there documentation of consistent attempts to locate and engage all participants, including those who are eligible and those for whom eligibility determinations have not yet been made? ❍ Yes ❍ No

B. Does the project track (may be outside of HMIS) all contacts with participants who are not enrolled?

❍ Yes ❍ No

C. Do staff seek to understand participants' perspectives, including any reasons why they are not using shelter and/or other services, and to help participants identify reasons to engage in services that are personally meaningful? ❍ Yes ❍ No

D. Do staff help participants to solve the problems that are most important to them?

❍ Yes ❍ No

E. Do staff recognize signs and symptoms of trauma? ❍ Yes ❍ No

F. Do staff use approaches that promote participant safety & communicate staff trustworthiness & service transparency? ❍ Yes ❍ No

G. Is staff persistent despite any participant reluctance to engage? ❍ Yes ❍ No

Reviewer Comments:

27) Participant choice.

A. Is staff flexible in how, where, and when services are provided, and do they maximize opportunities for participant choice and autonomy? ❍ Yes ❍ No

B. Do staff accept participant choices as a matter of fact without judgment?

❍ Yes ❍ No

C. Do staff work persistently to assist participants in locating safe temporary accommodations and permanent housing that can accommodate their entire family, including any pets?

❍ Yes ❍ No

D. Do staff understand the clinical and legal limits to choice, and do they intervene as necessary when someone presents an imminent risk of danger to self or others?

❍ Yes ❍ No

Reviewer Comments:

SECTION 7: HOUSING FOCUSED CASE MANAGEMENT SERVICES (applicable only to enrolled participants; applicable to all enrolled participants unless otherwise noted)

28) Housing Navigation. Is every enrolled participant who has been prioritized for housing assigned to a single primary PATH or other worker within the CAN who is responsible for helping the participant to establish eligibility for and secure housing? ❍ Yes ❍ No

Reviewer Comments:

29) <u>Building motivation.</u> Are services are designed to help participants build motivation for change, for example:
   A. Staff helps participants gain control of their own lives, define their personal values, preferences, and visions for the future, and establish meaningful individual short and long-term goals?
   ❍ Yes   ❍   No
   B. Staff helps participants to develop discrepancy between their personal goals or values and their current behavior?
   ❍ Yes   ❍   No
   C. Staff adjusts to participant resistance rather than opposing it directly?
   ❍ Yes   ❍   No
   D. Staff helps participants to build confidence, self-efficacy and hope that the things they want out of life are attainable?
   ❍ Yes   ❍   No

Reviewer Comments:

30) <u>Housing First.</u> Does project consistently use a Housing First approach, for example:
   A. Staff assists participants to immediately access permanent housing without unnecessary prerequisites such as abstinence, treatment, or service participation requirements or other determinants of "housing readiness?"
   ❍ Yes   ❍   No
   B. Services prioritize resolving the issues that are most likely to prevent participants from quickly obtaining permanent housing?   ❍   Yes   ❍   No
   C. Staff helps tenants to understand risks and reduce harm caused to themselves and others by risky behavior?   ❍   Yes   ❍   No

Reviewer Comments

31) <u>Housing placement tracking.</u> Does project track and aggregate housing placements at least annually and uses those data to inform continuous quality improvement efforts?
   ❍   Yes   ❍   No

Reviewer Comments

32) <u>Assessment</u>: For all enrolled participants[1], does the project complete an assessment of participant service needs that meets these criteria[2]:
   A. Is an initial assessment completed within 30 days of eligibility determination?
      ❍   Yes   ❍   No

   B. Are assessments updated at least every 6 months?
      ❍   Yes   ❍   No
   C. Are assessments signed by the participant, outreach worker, and supervisor?
      ❍   Yes   ❍   No

Reviewer Comments:

33) <u>Service Planning</u>: For all enrolled participants[3], does the project complete a service plan that meets these criteria[4]:
   A. Is an initial service plan completed within 30 days of eligibility determination?
      ❍   Yes   ❍   No

   B. Are service plans updated at least every 6 months?
      ❍   Yes   ❍   No

   C. Are service plans signed by the participant, outreach worker, and supervisor?
      ❍   Yes   ❍   No

   D. Are goals specific and measurable, and do plans indicate who is responsible for indicated action steps and when those action steps will occur?
      ❍ Yes   ❍   No
   E. Does the project use the Assessment & Service Plan template provided by DMHAS for all enrolled participants receiving full case management services.? ❍   Yes
      ❍ No

Reviewer Comments:

---

[1] If a project has insufficient case management resources to enable assessment & service planning with all enrolled participants, the project may propose an alternative case management plan to DMHAS (e.g., conduct service planning with the 20 participants determined to be most vulnerable and/or homeless the longest). That alternative plan must be documented on the project's outreach plan, which must be approved by DMHAS & the CAN.
[2] PATH projects are required to make assertive attempts to engage enrolled participants in the assessment and service planning process. Participants may opt not to participate. In such circumstances, projects should document engagement attempts.
[3] See footnote #1.
[4] See footnote #2.

34) <u>Mainstream benefits.</u> Are enrolled participants screened for public benefits eligibility and assisted in applying for benefits?   ◯Yes   ◯   No

Reviewer Comments:

35) <u>SOAR.</u> Are enrolled participants assisted, as appropriate, to connect to a SOAR trained case manager?   ◯   Yes   ◯   No

Reviewer Comments:

36) <u>Community-based services.</u>
A. Do enrolled participant files include evidence that all participants are connected to services to address health, mental health, addiction, educational, and vocational needs and assisted to use community resources (e.g., schools, libraries, houses of worship, grocery stores, laundromats, parks, etc.)*?*   ◯   Yes   ◯   No
B. To improve access to services, whenever possible, do outreach staff accompany enrolled participants to their initial appointment? *(Best Practice Recommendation)* ◯   Yes   ◯   No

Reviewer Comments:

37) <u>Discharge planning.</u>
A. Do participant files include evidence that participants are connected to appropriate on-going services in advance of planned discharges?   ◯   Yes   ◯   No
B. Do outreach staff use "warm hand-offs" to help participants establish a relationship with the providers from whom they will receive on-going services? (*Best Practice Recommendation)*   ◯   Yes   ◯   No

Reviewer Comments:

38) <u>Discharge criteria.</u> Does the project consistently discharge participants in the following and only the following circumstances[5]:
   i.   Outreach workers from the PATH or another project have been unable to make contact with the participant in the past 90 days[6].
   ii. The participant was placed in permanent or transitional housing more than 90 days ago[7].

---

[5] When extenuating circumstances warrant variance from these discharge criteria, projects must seek approval from DMHAS.

[6] All contact attempts must be documented.

[7] Projects may not retain enrolled participants for more than 90 days post placement without DMHAS approval. They may, however, discharge a placed participant before the 90 days has elapsed.

    iii.   The participant has been institutionalized for a period anticipated to be longer than 90 days (includes hospitalization, jail/prison, and residential treatment).

    iv.   The participant is deceased.

    v.   The participant has been transferred to a different project to receive case management and housing placement services.

    vi.   The participant has requested to be discharged.

❍   Yes   ❍   No

Reviewer Comments:

39) <u>Aftercare.</u> Does the project make at least monthly attempts to contact discharged participants to assess on-going service needs and connect participants to appropriate services as necessary for at least three months post discharge?
❍ Yes ❍   No

Reviewer Comments:

SECTION 8: COORDINATION WITH COMMUNITY PARTNERS

40) <u>Encampments.</u>

A. Does the project use a coordinated approach to assist people living in encampments that draws upon the resources of multiple homeless service organizations and mainstream partners (e.g. law enforcement, fire department, buildings department, sanitation department, other legal authorities, elected officials, LMHA, libraries, etc.), and is that approach evidenced by planning meetings and/or written agreements? *(Best Practice Recommendation)*
❍   Yes   ❍   No

B. Does the approach coordinate at least three of the following activities:
    i.   assessment of encampment safety (e.g., presence of weapons, fire hazards, improperly disposed of sharps, dangerous animals, violence, stolen property and/or exploitive sex work) and access to basic necessities (e.g., potable water, toilet and bathing facilities, safe food, and shelter sufficient for the current/approaching weather conditions)
    ii.   coordination to ensure outreach worker safety, including ensuring outreach is always conducted by groups of at least two
    iii.   plan to engage encampment residents and assess their service needs
    iv.   plan to provide indicated services & facilitate access to alternative accommodations
    v.   timeline for encampment removal
    vi.   plan to notify encampment residents of removal timeline

October 25, 2019

 vii. plan to limit the destruction of valued personal property
 viii. plan to respond to neighbors' concerns and keep neighbors informed
   ❍ Yes ❍ No
(All of the above are Best Practice Recommendations)

> *Reviewer Comments:*

41) <u>Outreach Provider Coordination.</u> Where there are multiple agencies providing homeless outreach services within a geographic area is the approach coordinated to ensure that:

A. All high priority areas are canvassed regularly and there is no duplication of effort?
 ❍ Yes ❍ No

B. Participants are assigned to a primary worker in a manner that leverages individual agency strengths and resources (e.g., those with SMI get case management from an agency with clinical services)? ❍ Yes ❍ No

C. All outreach provider agencies convene for case conferencing at least monthly to strengthen coordination, minimize duplication and problem solve?
 ❍ Yes ❍ No

D. When a particular agency has been unable to make progress with a participant, assignment to a different agency is considered? ❍ Yes ❍ No

(All of the above are Best Practice Recommendations)

> *Reviewer Comments:*

42) <u>CAN & CoC – Participation.</u> Does the project actively participate in their local Coordinated Access Network (CAN), including outreach staff participating in Case Conferencing and Housing Matching meetings as necessary to ensure all unsheltered persons eligible have an opportunity for referral to housing resources? Does the project actively participate in the Continuum of Care (e.g., attend meetings, participate in annual PIT counts, and participate in committees/work groups)?
 ❍ Yes ❍ No

> *Reviewer Comments:*

43) <u>CAN – Registry.</u> In coordination with the local CAN, does the project maintain a current registry list that includes all unsheltered homeless people?
 ❍ Yes ❍ No

> *Reviewer Comments:*

44) <u>CAN – VISPDAT.</u> Does the outreach project conduct the Vulnerability Index & Service Prioritization Decision Assistance Tool (VI-SPDAT) assessment using the mobile application or on paper and enter data into HMIS on the same day?
  ❍   Yes   ❍   No

Reviewer Comments:

45) <u>CAN– Placement options.</u> Does the outreach project coordinate effectively with their local Coordinated Access Network (CAN) to ensure unsheltered participants are prioritized based on length of homelessness and intensity of service needs and to secure housing placements for participants accordingly?   ❍   Yes   ❍   No

Reviewer Comments:

46) <u>Partner agreement.</u> If the project is a collaboration between two or more agencies that are receiving PATH funding as either a recipient or subrecipient, is there a Memorandum of Agreement or similar document that clearly outlines the roles and responsibilities of each partner? ❍ Yes   ❍   No

Reviewer Comments:

47) <u>HMIS participation.</u>
A. Does the project enter participant level data for all enrolled participants in the Homeless Management Information System (HMIS) or a comparable data system if the agency is prohibited from using HMIS?
  ❍   Yes   ❍   No
B. Does the project record all contacts with enrolled participants in HMIS?Does the project employ a system for periodically reviewing and ensuring HMIS data accuracy?
  ❍   Yes   ❍   No
C. Does the project refer to the HMIS Steering Committee suggestions for ensuring that HMIS data collection & entry is efficient and/or that data collected are available and useful to inform service delivery? *(Best Practice Recommendation)*
  ❍   Yes   ❍   No

Reviewer Comments: