

Part 1: Demographics

* 1. Contact Information

Name of person completing the survey:

Title of person completing the survey:

Email Address of person completing the survey:

* 2. Primary Organization Person Completing Represents:

Preble Street Veteran
Housing Services

* 3. Continuum of Care Number:

Maine COC- ME-500

Part 2: Survey Completion

* 4. Does the community have a Veteran leadership team/committee or other group charged with community planning and implementation efforts related to ending homelessness among Veterans?

- Yes
- No
- N/A

* 5. Is the Veteran leadership team/committee an official group under the Continuum of Care?

- Yes
- No
- N/A

* 6. Was this survey completed with support from the CoC Governing body or Collaborative Applicant?

- Yes
- No

7. If you answered "Yes" to the previous question, who is the CoC point of contact?

Name	<input type="text"/>
Organization	<input type="text"/>
Email Address	<input type="text"/>
Phone Number	<input type="text"/>

8. If you answered "No" to the previous question, please explain.

- No response
- Experiencing capacity challenges
- Significant leadership transition
- Other

* 9. Was this survey completed with support from all of the VA Medical Center(s) (VAMC) who cover this CoC?

Yes

No

10. If the answer to the previous questions was "Yes", who is/are the point of contact? (Please provide the Name, Organization, Email Address, and Phone Number for each)

11. If the answer to the previous question was "No" please explain.

No response

Multiple VAMCs cover area but not all participated

VAMC capacity challenges

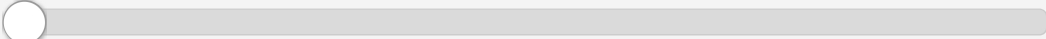
Staff transition

Other

Part 3: Mayor or Public Official Involvement and Milestones

* 12. Does your community have a commitment from the Mayor’s Office or other local Public Officials in support of your efforts to end homelessness among Veterans? Please rate from 0 to 4 with 0 being no involvement and 4 being actively engaged, possibly co-chairing a committee and barrier busting from a system level. Additional detail on levels will be provided in Companion Guide.

0 - No Involvement 4 - Actively Engaged



13. How would you describe the Mayor’s Office or other local Public Official’s role in ending Veteran homelessness?

- Actively participates in leadership meetings
- Serves as chair or co-chair
- Assists with system barrier busting and/or leveraging of resources
- Awareness of efforts but not an active participant

* 14. Is your community participating in the Mayors Challenge, Built for Zero (Community Solutions), and/or pursuing the Federal Criteria and Benchmarks? Please select all that apply.

- Mayors Challenge
- Built for Zero (Community Solutions)
- Federal Criteria and Benchmarks
- None related to Veterans
- Other (please specify)

* 15. If applicable, when would you anticipate that your community could submit a Claim to the Federal Partners based on the Federal Criteria and Benchmarks in hopes of Federal Confirmation?

- Submitted – approved
- Submitted - pending
- Next Month
- Next 3 Months
- Next Six Months
- Next Year
- Longer than a year
- Never - pursuing but will not submit
- Never – pursuing but not attainable
- N/A – not pursuing

Part 4: Planning and Implementation Efforts

General Coordinated Entry Questions

* 16. What type of Coordinated Entry access model or models is your community using? Please select all that apply.

- Single Point of Access
- Multi-Site Centralized Access
- No Wrong Door
- Assessment Hotline
- N/A

* 17. What coordinated entry common assessment tool has the CoC chosen or developed?

For the COC at Large: VI-SPDAT, Length of Time Homeless and others as applicable. Within the Veteran sub-committee of the COC the committee utilizes the VI-SPDAT, VA Homeless Assessment and prior history of homelessness in the community to determine appropriate housing intervention based on presenting need and client choice.

* 18. Are you experiencing challenges with Coordinated Entry? Please check all that apply.

- Lack of buy-in from providers
- Speed of system
- Lack of resources to meet need
- Challenges with assessment tool
- Challenges with master list/by-name list/active list
- Challenges with case conferencing
- Challenges with integrating VA resources
- Challenges coordinating across large geography (like Balance of State)
- Challenges with HMIS
- No challenges
- Other (please specify)

Buy-in ex: Shelter providers indicating unwillingness to participate and limited providers on committee
Assessment Tool ex: Not consistent use of one tool for the system.
By Name List Ex: Does not exist for COC coordinated Entry at Large, only for specific populations: veterans and LTS/Long Term Homeless
Case Conferencing: Like BNL's only exists for certain populations including veterans and LTS/Long Term Homeless

Recent implementation of COC wide coordinated entry means that there is not enough historical data/experience to truly identify challenges.

* 19. Does your community have Homeless Prevention resources available to Veterans through Coordinated Entry?

- Yes
- No
- In Progress

If yes, please explain and include information on how those resources are targeted and prioritized.

* 20. Does your community have any formalized, consistent Shelter Diversion activities?

- Yes
- No
- In Progress

If yes, please explain.

Part 4: Planning and Implementation Efforts

VA Integration into Coordinated Entry Systems

* 21. Does the Continuum of Care have written policies and procedures for Coordinated Entry that includes Veteran resources? (Responses should reflect the full Continuum of Care geography)

- Yes
- No
- In Progress

22. If you answered "Yes" to the last question, is/are the VA Medical Centers covering this CoC included in the Policies and Procedures?

- Yes
- No
- In Progress

23. If you answered "No" to the last question, what is your timeline for formalizing the Policies and Procedures to include VA Medical Centers?

- 2 weeks
- 1 month N/A
- 2 months
- 3 months+

* 24. Do your Coordinated Entry Policies and Procedures include clear protocol for identifying and connecting Veterans to permanent housing?

- Yes
- No
- In Progress

* 25. Does the community have a process for connecting Veterans with employment services while obtaining housing? Please note that employment is never a prerequisite in order to obtain permanent housing.

- Yes
- No
- In Progress

* 26. Does the community have a process for connecting Veterans to benefits while obtaining housing?

- Yes
- No
- In Progress

* 27. Does the Continuum of Care use the SSI/SSDI Outreach, Access, and Recovery (SOAR) model to help Veterans with disabling conditions access SSI/SSDI?

- Yes
- No
- In Progress

28. If you answered "Yes" to the previous question, who is the SOAR Point of Contact in the CoC?

Name

Organization

Email

29. If you answered "No" to the previous question, would SOAR technical assistance be beneficial for your CoC?

- Yes
- No

* 30. Does the Continuum of Care have a process for connecting Veterans with legal services to address issues that interfere with housing placement, such as unresolved civil matters, fines, child support, and misdemeanor offenses?

- Yes
- No
- In Progress

Part 5: Partnerships

* 31. Is there a designated individual from the VAMC or VAMCs assigned to the CoC Board or Veteran Work Group/Committee Policy or Leadership Team to provide strategic leadership?

- Yes
- No

If no, please explain.

32. If "Yes" was the answer to the previous question, who is/are the points of contact?

VAMC Name	<input type="text"/>
VAMC Code	<input type="text"/>
Name	<input type="text"/>
Email	<input type="text"/>

33. Does community case conferencing currently take place?

- Yes
- No

If yes, how frequently do meetings occur? (weekly, bi-weekly, monthly, bi-monthly, quarterly)

* 34. Is there a designated individual from the VAMC or VAMCs assigned to Case Conferencing and the Master List/By-Name List/Active List?

- Yes
- No

If no, please explain.

35. If "Yes" was the answer to the previous question, who is/are the points of contact?

VAMC Name

VAMC Code

Name

Email

VAMC Name

VAMC Code

Name

Email

VAMC Name

VAMC Code

Name

Email

For the following questions please use the most common number. For example, if you have one GPD provider where your coordination level is a 4 but 6 others at a 2, please use 2 for your response.

* 36. What is your level of coordination with VA Health Care for Homeless Veterans (HCHV) outreach and contract residential services?

0 - Partnership or
Resource Does not Exist
in Community

1 - Awareness

2 - Basic Communication

3 - Coordination

4 - Enhanced
Coordination/Collaboration

* 37. What is your level of coordination with HUD and VA Supportive Housing (HUD-VASH)?

0 - Partnership or
Resource Does not Exist
in Community

1 - Awareness

2 - Basic Communication

3 - Coordination

4 - Enhanced
Coordination/Collaboration

* 38. What is your level of coordination with the Grant and Per Diem Providers (GPD) that serve your community?

0 - Partnership or
Resource Does not Exist
in Community

1 - Awareness

2 - Basic Communication

3 - Coordination

4 - Enhanced
Coordination/Collaboration

* 39. What is your level of coordination with the Supportive Services for Veteran Families (SSVF) grantees that serve your community?

0 - Partnership or Resource Does not Exist in Community	1 - Awareness	2 - Basic Communication	3 - Coordination	4 - Enhanced Coordination/Collaboration
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

* 40. What is your level of coordination with other VA programs like Safe Haven, Veterans Justice Outreach(VJO), and Community Resource and Referral Center (CRRC)

0 - Partnership or Resource Does not Exist in Community	1 - Awareness	2 - Basic Communication	3 - Coordination	4 - Enhanced Coordination/Collaboration
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

* 41. What is your level of coordination VA Homeless Veterans Community Employment Services (HVCES)?

0 - Partnership or Resource Does not Exist in Community	1 - Awareness	2 - Basic Communication	3 - Coordination	4 - Enhanced Coordination/Collaboration
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

* 42. What is your level of coordination with the Continuum of Care (CoC) Governing Board as a Veteran Work Group/Committee?

0 - Partnership or Resource Does not Exist in Community	1 - Awareness	2 - Basic Communication	3 - Coordination	4 - Enhanced Coordination/Collaboration
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Part 6: Data and Data Sharing

* 43. Does your community have an active or "by-name" list of Veterans experiencing homelessness?

- Yes
- No
- In Progress

44. If you answered "Yes" to the previous question, how often the list is updated?

- Daily
- Weekly
- Bi-weekly
- Monthly
- Quarterly

45. If you answered "Yes" to the previous question, what is the number of days the community waits to change a Veteran's status to missing when he/she can no longer be located or contacted?

- 0-10 days
- 1-30 days
- 31-60 days
- 61-90 days
- 91+days

46. If you answered "No" to the previous question, please describe how you keep track of Veterans experiencing homelessness.

* 47. Are you using a standard Release of Information (ROI) to share information where everyone is using the same one?

- Yes
- No
- In Progress

* 48. Does this release include all Veterans?

- Yes
- No
- In Progress
- N/A

* 49. Does your community have data sharing policies that include your local VA Medical Center and other VA programs that allow you to share data for the purposes of the By-Name/Master List/Active List?

- Yes
- No
- In Progress
- Other (please specify)

* 50. Is your master list/by-name list/active list held in HMIS?

- Yes
- No
- Partial (Combination of HMIS and Manual Compilation)

51. If you answered "No" to the previous question, do you plan to maintain it in HMIS?

- Yes
- No

* 52. Is the coordinated entry assessment tool in HMIS?

- Yes
- No

53. If you answered "No" to the previous question, do you intend to include it in HMIS?

Yes

No

* 54. Is the VA Medical Center able to access HMIS for read-only information?

Yes

No

* 55. Is the VAMC able to enter data into HMIS (not required)?

Yes

No

* 56. Does your data include all Veterans who are unsheltered and experiencing homelessness?

Yes

No

* 57. Does your data include all Veterans who are sheltered and are experiencing homelessness?

Yes

No

* 58. Are there any programs in your community that are not accounted for in your data? Select all that apply:

SSVF

GPD

HCHV

Faith-Based organizations serving persons experiencing homelessness

Domestic Violence

Non-CoC funded organizations

Other

N/A

* 59. How many Veterans are currently on the by-name list/master list/active list at the moment? Please make sure that the values for the category breakdowns of Veterans that are Sheltered/Unsheltered match the total number of Sheltered/Unsheltered Veterans.

Number of Veterans Total

Number of Veterans who are Unsheltered

Unsheltered - On Street

Unsheltered - In Camp/Tent City

Unsheltered - In Car

Unsheltered - Other Place not meant for human habitation
(abandoned building, subway station, sewer, etc.)

Number of Veterans who are Sheltered

Sheltered - Emergency Shelter

Sheltered - Non-VA Transitional Housing

Sheltered - VA Grant and Per Diem

Sheltered - Safe Haven

* 60. Of all of the Veterans who are sheltered and unsheltered, how many are chronically homeless?
(number)

* 61. What percentage of all Veterans who are sheltered and unsheltered are chronically homeless?
(percentage)

* 62. What percentage of all Veterans who are sheltered and unsheltered are Veterans Healthcare Administration (VHA) eligible?

* 63. What is the average monthly inflow of Veterans experiencing homelessness into your homeless system? To calculate the monthly average, please use the time period of the last 90 days.

* 64. Approximately what percentage of Veterans self-resolve?

- 0-5%
- 6-10%
- 11%-15%
- 16-20%
- 21-25%
- 26%-30%
- 31%+

* 65. What is the average length of time in days from identification of a Veteran experiencing homelessness to housing placement? To calculate the monthly average, please use the time period of the last 90 days.

* 66. What is the average number of placements to permanent housing per month?

Part 7: Permanent Housing

* 67. Do you have enough permanent housing available to place every Veteran experiencing homelessness in 90 days or less after being identified?

- Yes
- No

68. If you answered "Yes" to the previous question, is the existing permanent housing currently available to Veterans experiencing homelessness affordable (ex. available to Veterans if they only spend ~40% of their income on rent and utilities.) It is understood that many households may be spending more than 40% of their income on housing. This question is focused on understanding resources/needs.

- Yes
- No

* 69. Do you have challenges with a tight rental market (ex. Vacancy rate of 5% or less)?

- Yes
- No

* 70. Are you working with your local apartment association?

- Yes
- No
- In Progress
- N/A

* 71. Do you need political support to assist you with landlord engagement?

- Yes
- No

* 72. Do you have a community landlord incentive fund/contingency/risk mitigation fund?

- Yes
- No
- In Progress
- N/A

73. If you answered "Yes" to the previous question, does the fund cover the following? Check all that apply.

- Damages
- Utility arrears
- Vacancy Payments
- Support for Landlords to Meet Code Requirements
- Application Fees
- Other

74. If you answered "Yes" to the previous question, Is the landlord incentive fund for Veterans only?

- Yes
- No

75. If you answered "Yes" to the previous question, how is the landlord incentive fund funded? Check all that apply.

- Municipal General Revenue
- Dedicated Funding Source
- Philanthropic Resources
- Corporate Funded
- Faith Community Funded

76. If you answered "Yes" to the previous question, who administers the landlord incentive fund?

- CoC
- SSVF
- City
- County
- Other

Part 8: Adoption of Best Practices

* 77. Has the Continuum of Care implemented a CoC-wide prioritization strategy for ensuring the most intensive resources (HUD-VASH, PSH) are targeted to the Veterans that need it most?

- Yes
- No
- In Progress

* 78. Has the Continuum of Care embraced a CoC-wide Housing First approach?

- Yes – fully embrace Housing First
- Yes – somewhat embrace Housing First
- No
- I don't know

* 79. Does the Continuum of Care use frequent Case Conferencing or another process to match Veterans to available housing resources and also identify system barriers?

- Yes – at least monthly
- Yes - less than monthly
- No
- Not Sure

* 80. Has the Continuum of Care worked to integrate GPD programs and the new models into coordinated entry system with the support of the VA Medical Center?

- Yes
- No
- In Progress

* 81. Does your community have GPD bridge housing?

- Yes
- No

82. If you answered "Yes" to the previous question, please provide values for the following.

How many beds?

What is the occupancy rate?

83. If your community has GPD bridge housing and the occupancy is low, why?

- Difficulty accessing beds
- Need additional support with how to fully integrate
- Other

* 84. Do your meetings have formalized agendas, action items, and notes?

- Yes
- No
- In Progress

* 85. Does everyone in your leadership team understand your goals and your data?

- Yes
- No
- In Progress

Part 9: Federal Criteria and Benchmarks

Please indicate to what extent the Continuum of Care or the community for which you are responding has reached the following federal criteria.

* 86. Criteria 1: Has your community identified all Veterans experiencing homelessness?

- Yes
- No
- In Progress

* 87. Criteria 2: Does your community provide shelter immediately to any Veteran experiencing unsheltered homelessness who wants it?

- Yes
- No
- In Progress
- Not pursuing

* 88. Criteria 3: Does your community only provide service-intensive transitional housing in limited instances?

- Yes
- No
- In Progress
- Not pursuing

* 89. Criteria 4: Does your community have the capacity to assist Veterans to swiftly move into permanent housing?

- Yes
- No
- In Progress
- Not pursuing

* 90. Criteria 5: Does your community have the resources, plans, and system capacity in place should any Veteran become homeless or be at risk of homelessness in the future?

- Yes
- No
- In Progress
- Not pursuing

Part 10: Technical Assistance

* 91. Would your community be interested in receiving Technical Assistance related to ending homelessness among Veterans?

- Yes
- No

Please note that this is an exploratory list. It may not be all-inclusive. Additionally, technical assistance is meant in the broadest sense which could include connection to existing tools or hands-on support based on availability.

92. If yes, what areas of technical assistance would be the most helpful to your community? Check all that apply:

- By Name/Master List
- Coordinated Entry
- Case Conferencing Strategies
- Prioritization Strategies
- System Wide Progressive Engagement & Assistance Strategies
- Housing First and Trauma-Informed Care
- Rapid Re-housing
- Engaging Leadership/Convening Partners
- Developing Emerging Leaders
- System Mapping
- Grant and Per Diem Models and Coordination
- Quality Improvement/Sustainability
- Shelter Diversion Practices
- Targeting RRH to High-Need Veteran Households
- Rural/BOS Challenges
- Data sharing and/or data best practices
- Data analysis/analytics
- Other (please specify)

93. If your community is currently receiving technical assistance, which organization/group has been primarily responsible for providing it (check all that apply)?

SSVF Technical Assistance

HUD Vets@Home Technical Assistance (Current or Former)

Built for Zero (Community Solutions)

ERPI (through VAMC)

HUD Priority Community TA

Don't know

None

Other (please specify)

* 94. What are some areas or issues that are proving most difficult for your community in your efforts to end homelessness among Veterans?

* 95. Please further describe the levels of coordination indicated in Part 5: Partnerships. For example, if relationship was rated a 0 or 1 under Part 5, please tell us why and what might help with improving the relationship. If a relationship was rated as a 3 or 4, please tell us what is working well.

* 96. What successes have you had with your VA partners? And/Or How have VA resources and staff added value to your efforts as a community?

* 97. If your community has GPD, please tell us about the overall integration into Coordinated Entry. Please also include any questions you may have.

* 98. Tell us about how you are creating sustainability within your system?

99. Any additional comments and/or feedback: