



**WALLA WALLA COUNTY**  
**5-YEAR HOMELESS HOUSING PLAN**

September 2015

Approved this 21st day of September, 2015.

**WALLA WALLA COUNTY BOARD OF COMMISSIONERS**

  
\_\_\_\_\_  
Perry L. Dozier, Commissioner, District 2, Chairman

  
\_\_\_\_\_  
James K. Johnson, Commissioner, District 1

  
\_\_\_\_\_  
James L. Duncan, Commissioner, District 3

WALLA WALLA COUNTY 5-YEAR HOMELESS HOUSING PLAN – GOALS, OBJECTIVES AND STRATEGY DETAIL

I. Goal: End homelessness in Walla Walla County in 5 years or by December 31, 2020.

**Objective A: Implement diversion assistance to prevent homelessness.**

Strategy 1: Successfully identify and divert all applicable households.

TASKS	RESPONSIBLE PARTY(IES)	START DATE	DATE COMPLETED/VERIFIED
a) Provide training to coordinated entry staff on appropriate diversion interventions and how to administer these supports.	Dept of Community Health	January 2016	
b) At each Pathways Home site, pre-screen all households for diversion assistance and administer any needed supports.	Pathways Home (i.e., coordinated entry)	August 2015	
c) Provide a "warm hand-off" when clients are referred from one entity to another (i.e., the referring agency will call the receiving agency advising of the client referral).	Pathways Home (i.e., coordinated entry), referring agencies	August 2015	

Strategy 2: Assure the efficient and effective operation of coordinated entry.

TASKS	RESPONSIBLE PARTY(IES)	START DATE	DATE COMPLETED/VERIFIED
a) Discuss coordinated entry at monthly Housing Providers/Ending Family Homelessness meetings and implement modifications as needed.	Pathways Home (i.e., coordinated entry), Housing Providers/Ending Family Homelessness Partners, Dept of Community Health	August 2015	
b) Discuss coordinated entry at monthly Coordinated Entry Advisory Committee meetings and implement modifications as needed.	Coordinated Entry Advisory Committee, Dept of Community Health	September 2015	

Strategy 3: Use financial resources currently invested in shelter and transitional housing to create 200 diversion subsidies.

<u>TASKS</u>	<u>RESPONSIBLE PARTY(IES)</u>	<u>START DATE</u>	<u>DATE COMPLETED/VERIFIED</u>
a) Limit or discontinue funding for shelter and transitional housing programs with county and/or state monies.	Dept of Community Health	January 2016	
b) Allocate funding for diversion via Walla Walla County's annual Coordinated Homeless Housing Funding RFP.	Dept of Community Health	September 2015	
c) Award diversion projects via Walla Walla County's annual Coordinated Homeless Housing Funding RFP.	Dept of Community Health	January 2016	

**Objective B: Provide rapid re-housing and accompanying case management services for all non-chronically homeless households.**

Strategy 1: Shift resources from emergency shelter and transitional housing to create 125 new rapid re-housing subsidies.

<u>TASKS</u>	<u>RESPONSIBLE PARTY(IES)</u>	<u>START DATE</u>	<u>DATE COMPLETED/VERIFIED</u>
a) Limit or discontinue funding for shelter and transitional housing programs with county and/or state monies.	Dept of Community Health	January 2016	
b) With "freed up" funds, purchase rapid rehousing subsidies/services via Walla Walla County's annual Coordinated Homeless Housing Funding RFP.	Dept of Community Health	September 2015	
c) Award rapid rehousing projects via Walla Walla County's annual Coordinated Homeless Housing Funding RFP.	Dept of Community Health	January 2016	
d) Convene and engage affordable and market-rate landlords in an effort to make 125 units accessible to households who have screened out of housing and are homeless as a result. Possibly implement a campaign where landlords commit to a specific number of units.	Dept of Community Health, area housing providers, landlord community	April 2016	

Strategy 2: Provide 150 additional new rapid rehousing subsidies for single adults.

<u>TASKS</u>	<u>RESPONSIBLE PARTY(IES)</u>	<u>START DATE</u>	<u>DATE COMPLETED/VERIFIED</u>
a) Fund and award rapid rehousing projects through Walla Walla County's annual Coordinated Homeless Housing Funding RFP.	Dept of Community Health and contracted agency(ies)	January 2016	
b) Expand access to housing for single, difficult to house individuals with felony convictions through foundations, public and private grant funding. Continue to develop partnerships with Department of Corrections to secure support vouchers for those exiting institutions.	STAR Project	Ongoing	

Strategy 3: Maintain existing rapid rehousing subsidies for families with children.

<u>TASKS</u>	<u>RESPONSIBLE PARTY(IES)</u>	<u>START DATE</u>	<u>DATE COMPLETED/VERIFIED</u>
a) Fund and award existing rapid rehousing projects through Walla Walla County's annual Coordinated Homeless Housing Funding RFP.	Dept of Community Health and contracted agency(ies)	January 2016	
b) Allow for program entry leniency when serving intact families and fathers with children for whom emergency shelter does not exist. Serve these populations with 2163 or Homeless Housing funds, which will allow for leniency concerning the definition of homelessness.	Dept of Community Health and contracted agency(ies)	January 2016	
c) Apply for HUD McKinney-Vento funding through Washington State Department of Commerce as a part of the Balance of State.	Blue Mountain Action Council	Fall 2015	
d) Apply for Tenant-Based Rental Assistance (TBRA) program funding from the Washington State Department of Commerce.	Walla Walla Housing Authority	June 2016	
e) Expand access to housing for families (those who have a member with a felony conviction) through foundations, public and private grant funding.	STAR Project	Ongoing	

Strategy 4: Demonstrate to landlords that households will have the supports they need to be successful tenants. If necessary, invest financially in these supports.

<u>TASKS</u>	<u>RESPONSIBLE PARTY(IES)</u>	<u>START DATE</u>	<u>DATE COMPLETED/VERIFIED</u>
a) Convene with local landlords and inquiry about supports needed.	Dept of Community Health, rapid rehousing providers, landlord community	October 2015	
b) Provide any such reasonable supports.	Dept of Community Health, rapid rehousing providers	November 2015	
c) Fund any such reasonable supports.	Dept of Community Health, rapid rehousing providers	January 2016	

Strategy 5: Increase affordable housing for the non-chronically homeless by initiating a vote for a one-tenth of one percent sales tax allowable per ESHB 2263 and as passed by the Washington State Legislature in June of 2015.

<u>TASKS</u>	<u>RESPONSIBLE PARTY(IES)</u>	<u>START DATE</u>	<u>DATE COMPLETED/VERIFIED</u>
a) Coordinate with Walla Walla County Assessor and others (e.g., school districts) to determine the best time to bring this issue before a vote of the people.	Dept of Community Health	September 2015	
b) Convene monthly meetings with Coordinating Committee and develop plans and strategies for use of funds.	Dept of Community Health	September 2015	
c) Convene monthly with Coordinating Committee and develop public education strategy.	Dept of Community Health	November 2015	
d) Brief Walla Walla County Board of Commissioners on concept.	Dept of Community Health	April 2016	
e) Obtain Walla Walla County Board of Commissioners' approval to bring issue to a vote.	Dept of Community Health	June 2016	
f) Start public education.	Dept of Community Health	3 months prior to vote	
g) Vote on 0.1% sales tax.	Dept of Community Health	TBD	

Strategy 6: Assure the efficient and effective operation of coordinated entry.

<u>TASKS</u>	<u>RESPONSIBLE PARTY(IES)</u>	<u>START DATE</u>	<u>DATE COMPLETED/VERIFIED</u>
a) Discuss coordinated entry at monthly Housing Providers/Ending Family Homelessness meetings and implement modifications as needed.	Pathways Home (i.e., coordinated entry), Housing Providers/Ending Family Homelessness Partners, Dept of Community Health	August 2015	
b) Discuss coordinated entry at monthly Coordinated Entry Advisory Committee meetings and implement modifications as needed.	Coordinated Entry Advisory Committee, Dept of Community Health	September 2015	
c) Provide a "warm hand-off" when clients are referred from one entity to another (i.e., the referring agency will call the receiving agency advising of the client referral).	Pathways Home (i.e., coordinated entry providers) and referring agencies	August 2015	

**Objective C: Help at-risk and unaccompanied homeless youth, 13-17 years of age, reach their highest potential through the provision of services and supports including temporary shelter.**

Strategy 1: Provide individualized wrap-around services to at-risk and homeless youth so they can be diverted from homelessness or exit homelessness as quickly as possible.

<u>TASKS</u>	<u>RESPONSIBLE PARTY(IES)</u>	<u>START DATE</u>	<u>DATE COMPLETED/VERIFIED</u>
a) Pre-screen and divert youth from entering the homeless system whenever possible.	Pathways Home (i.e., coordinated entry),	August 2015	
b) Create a 'youth center' whereby youth can access multiple services at one location.	Blue Mountain Action Council	TBD	
c) Provide short-term shelter stays for youth lacking permanent housing options.	Blue Mountain Action Council, Catholic Charities Walla Walla	TBD	
d) Assure youth receive needed services and supports based on their unique circumstances.	Blue Mountain Action Council, Catholic Charities, Children's Home Society, Health Center at Lincoln	TBD	

Strategy 2: Seek appropriate funding for the construction of a youth shelter.

<u>TASKS</u>	<u>RESPONSIBLE PARTY(IES)</u>	<u>START DATE</u>	<u>DATE COMPLETED/VERIFIED</u>
a) Local homeless funds will be utilized to the extent feasible and appropriate.	Youth Alliance Leadership Team	TBD	

Strategy 3: Assure the efficient and effective operation of coordinated entry.

<u>TASKS</u>	<u>RESPONSIBLE PARTY(IES)</u>	<u>START DATE</u>	<u>DATE COMPLETED/VERIFIED</u>
a) Discuss coordinated entry at monthly Housing Providers/Ending Family Homelessness meetings and implement modifications as needed.	Pathways Home (i.e., coordinated entry), Housing Providers/Ending Family Homelessness Partners, Dept of Community Health	August 2015	
b) Discuss coordinated entry at monthly Coordinated Entry Advisory Committee meetings and implement modifications as needed.	Coordinated Entry Advisory Committee, Dept of Community Health	September 2015	
c) Provide a "warm hand-off" when clients are	Pathways Home (i.e.,	August 2015	

referred from one entity to another (i.e., the referring agency will call the receiving agency advising of the client referral).	coordinated entry), referring agencies		
--	--	--	--



**Objective D: Maximize resources in an effort to meet the behavioral and primary healthcare needs of homeless households.**

Strategy 1: Become involved in the Washington Low Income Housing Alliance's (WLIHA) efforts to create a Medicaid benefit to purchase services for residents living in supportive housing.

<u>TASKS</u>	<u>RESPONSIBLE PARTY(IES)</u>	<u>START DATE</u>	<u>DATE COMPLETED/VERIFIED</u>
a) Maintain ongoing contact with the WLIHA for purposes of remaining informed on this issue.	Dept of Community Health	August 2015	
b) Share opportunities for advocacy with Walla Walla Council on Homelessness.	Dept of Community Health	August 2015	
c) Respond promptly when advocacy action is requested by the WLIHA.	Members of the Walla Walla Council on Homelessness	August 2015	

Strategy 2: Create a patient advocacy program that brings together primary and behavioral healthcare providers (who serve people with the greatest needs) and housing providers to establish pathways for "warm hand-offs" when people leave acute medical care. Create release of information systems to allow for providers to deliver team-oriented care.

<u>TASKS</u>	<u>RESPONSIBLE PARTY(IES)</u>	<u>START DATE</u>	<u>DATE COMPLETED/VERIFIED</u>
a) Meet with Central Washington Comprehensive Mental Health on how to successfully implement.	Dept of Community Health	January 2016	
b) Develop plans with Adventist Health Medical Group, Central Washington Comprehensive Mental Health, Family Medical Center, Providence Saint Mary Physician Group, Serenity Point, and Walla Walla Clinic to discuss care coordination.	Dept of Community Health	March 2016	
c) Meet with Blue Mountain Action Council, Central Washington Comprehensive Mental Health, and Walla Walla Housing Authority on issues.	Dept of Community Health	April 2016	
d) Develop plan and process for information transfer.	Dept of Community Health	June 2016	
e) Test process.	Dept of Community Health	September 2016	
f) Revise plan and process.	Dept of Community Health	November 2016	
g) Implement plan.	Dept of Community Health	January 2017	
h) Evaluate results.	Dept of Community Health	July 2017	

**Objective E: Provide opportunities for homeless, formerly homeless and at-risk households to increase their income through employment and/or educational offerings. For those unemployed, help them manage/maintain their income through protective payee services.**

Strategy 1: Create employment programs that help targeted households earn income and gain work experience.

TASKS	RESPONSIBLE PARTY(IES)	START DATE	DATE COMPLETED/VERIFIED
a) Research resources needed to create an employment related social enterprise.	Walla Walla Housing Authority and other parties yet to be identified	January 2016	
b) Provide job training opportunities tied to the employment incentives of the Workforce Innovation Opportunity Act (WIOA).	WorkSource Walla Walla and/or Blue Mountain Action Council WorkSource Affiliate	TBD	
c) Employ recent federal policy changes (WIOA and HEARTH) to engage and partner with effective, specialized employment services to keep households who are in housing programs employed and stably housed.	WorkSource Walla Walla and/or Blue Mountain Action Council WorkSource Affiliate	TBD	
d) Partner with the Department of Labor Workforce Investment Board (WIB) and American Job Center (AJC)/One-Stop to offer multiple employment related services to homeless/formerly homeless/housing subsidized households with a range of employment needs.	WorkSource Walla Walla and/or Blue Mountain Action Council WorkSource Affiliate	TBD	
e) Help targeted population find and apply for jobs, practice for interviews, and ensure they know how to make good impressions.	IMPACT! Life Transitions Program	September 2015	
f) Educate employment and education sectors on homeless resources so they can become navigators and help people access diversion and housing resources.	Pathways Home (i.e., coordinated entry)	November 2015	

Strategy 2: Increase protective payee services available in Walla Walla County.

TASKS	RESPONSIBLE PARTY(IES)	START DATE	DATE COMPLETED/VERIFIED
a) Encourage non-profit or private entities to increase provision for protective payee services.	Walla Walla Council on Homelessness	2016	

**Objective F: Become a national leader by harnessing community energy and interest and directing efforts towards permanent housing solutions.**

Strategy 1: Identify ways that community members and businesses can invest their time, energy, passion, and resources helping people exit homelessness by interviewing providers, people who are homeless, and community members.

<u>TASKS</u>	<u>RESPONSIBLE PARTY(IES)</u>	<u>START DATE</u>	<u>DATE COMPLETED/VERIFIED</u>
a) Convene meeting and establish a plan to conduct survey effort.	Walla Walla Council on Homelessness	2016	
b) Establish and agree upon a survey instrument and a timeline for implementation.	Walla Walla Council on Homelessness		
c) Implement survey.	Walla Walla Council on Homelessness	2016	
d) Compile results of survey.	Dept of Community Health	2016	
e) Based on results, work with United Way of Walla Walla County to generate identified volunteer opportunities.	Walla Walla Council on Homelessness, United Way of Walla Walla County	2016	
f) Encourage interested volunteers to access volunteer opportunities through United Way's Get Connected website.	Walla Walla Council on Homelessness	2016	

Strategy 2: Increase landlords' understanding of the needs of people who are homeless. Ask them what they need from the greater community to "take a chance on someone" and move them out of homelessness.

<u>TASKS</u>	<u>RESPONSIBLE PARTY(IES)</u>	<u>START DATE</u>	<u>DATE COMPLETED/VERIFIED</u>
a) Host landlord forum and provide information on reasonable accommodations and renting to high barrier households.	Walla Walla Housing Authority, Blue Mountain Action Council	October 2015	
b) Collaborate with Walla Walla Police Department's Crime Free Rental Housing in an effort to connect with landlords, obtain information from them and increase landlords on "interested landlord list."	Walla Walla Council on Homelessness	2016	

Strategy 3: Expand Walla Walla's ambassador program to create system navigator roles to support people who are navigating the homeless, healthcare, educational, and/or employment systems. Station these trained volunteer navigators at churches, schools, grocery stores, and libraries.

<u>TASKS</u>	<u>RESPONSIBLE PARTY(IES)</u>	<u>START DATE</u>	<u>DATE COMPLETED/VERIFIED</u>
a) Provide input to Walla Walla Police Department on Ambassador Program's implementation and encourage ongoing efforts and expansion of program.	Walla Walla Council on Homelessness	December 2015	
b) Provide resource training and accompanying materials to local soup kitchens leads so they can act as navigators to those whom they serve.	Dept of Community Health, Pathways Home (i.e., coordinated entry)	2016	

Strategy 4: Establish a single portal of entry for community members who want to volunteer their time to end homelessness.

<u>TASKS</u>	<u>RESPONSIBLE PARTY(IES)</u>	<u>START DATE</u>	<u>DATE COMPLETED/VERIFIED</u>
a) Increase communication efforts regarding volunteer opportunities through United Way's Get Connected website.	United Way of Walla Walla County	September 2015	
b) Generate/provide volunteer opportunities.	United Way of Walla Walla County	September 2015	

Strategy 5: Consolidate all homeless funds, available through local governments, agencies and foundations, and create a single portal of entry by which these funds will be allocated on an annual, coordinated funding cycle.

<u>TASKS</u>	<u>RESPONSIBLE PARTY(IES)</u>	<u>START DATE</u>	<u>DATE COMPLETED/VERIFIED</u>
a) Convene with all local entities that fund homeless programs and share concept.	Dept of Community Health	2016	
b) Establish a plan of action for consolidating homeless funds.	Dept of Community Health, United Way of Walla Walla County, Blue Mountain Community Foundation, Sherwood Trust	2016	
c) Share established plan with any potential grantees and community at large.	Dept of Community Health	2016	

d) Implement plan.	Dept of Community Health, United Way of Walla Walla County, Blue Mountain Community Foundation, Sherwood Trust	January 2017	
--------------------	--	--------------	--

**Objective G: Maximize collaboration and coordination of homeless service provision through data collection.**

Strategy 1: Assure that housing providers are using the Homeless Management Information System (HMIS) consistently, that data is of high quality, that all providers are Walla Walla County Interagency Data Sharing Agreement signatory parties, and data is used for evaluation and planning purposes.

<u>TASKS</u>	<u>RESPONSIBLE PARTY(IES)</u>	<u>START DATE</u>	<u>DATE COMPLETED/VERIFIED</u>
a) Discuss HMIS regularly at Homeless Providers/Ending Family Homelessness meetings and follow-up as needed on issues or concerns.	Dept of Community Health, HMIS program users, Washington State Department of Commerce	Ongoing	
b) Assist new housing providers in establishing themselves as HMIS users and include them in the data sharing agreement.	Department of Community Health, new HMIS program users, Washington State Department of Commerce	Ongoing	
c) On monthly basis, check the Homeless Management Information System for data quality.	Dept of Community Health, HMIS program users	Ongoing	
d) Use data as needed for program evaluation and planning purposes	Dept of Community Health	Ongoing	
e) Assure the goals of the 5-Year Plan are being met by analyzing and reviewing existing HMIS data annually.	Dept of Community Health and Walla Walla Council on Homelessness	November 2016	

**Objective H: Inform the county and community of best practices related to ending homelessness.**

Strategy 1: The Walla Walla Council on Homelessness will be informed on evidence-based practices related to homelessness and will hold "dig deeper" discussions at council meetings on topics such as healthcare and employment opportunities for persons who are homeless.

<u>TASKS</u>	<u>RESPONSIBLE PARTY(IES)</u>	<u>START DATE</u>	<u>DATE COMPLETED/VERIFIED</u>
a) Plan and hold "dig deeper" discussions at quarterly council meetings.	Walla Walla Council on Homelessness, Dept of Community Health	2016	
b) Research and learn about best practices related to homelessness and inform and advise county on potential implementation from learning gleaned.	Walla Walla Council on Homelessness	2016	
c) Make the public aware of best practice models.	Walla Walla Council on Homelessness	January 2017	

**II. Goal: End chronic homelessness in 1 year or by December 31, 2016.**

**Objective A: Engage and provide permanent supportive housing for the chronically homeless population.**

Strategy 1: Maintain existing permanent supportive housing units and increase units by 22 for chronically homeless adults.

<u>TASKS</u>	<u>RESPONSIBLE PARTY(IES)</u>	<u>START DATE</u>	<u>DATE COMPLETED/VERIFIED</u>
a) Maintain current permanent supportive housing units for families with children.	Blue Mountain Action Council	Ongoing	
b) Convert all or a portion of existing transitional housing beds (currently provided by Central Washington Comprehensive Mental Health and the Walla Walla Housing Authority) to quality supportive housing that aligns with evidence based practices.	Dept of Community Health, Central Washington Comprehensive Mental Health, Walla Walla Housing Authority, Valley Residential Services	January 2015	
c) Consider whether a portion of the Housing Authority's subsidies can be project-based to house a percentage of the 35 people who are chronically homeless.	Walla Walla Housing Authority	2015	
d) Advocate for ongoing funding for the Housing And Recovery through Peer Services (HARPS) program currently administered by Central Washington Comprehensive Mental Health (Walla Walla Center).	Walla Walla Council on Homelessness	TBD	
e) Use resources currently invested in shelter and transitional housing to pay for rental subsidies and robust services in supportive housing.	Dept of Community Health	January 2016	



Strategy 2: Require all supportive housing to use housing first and harm reduction models so supportive housing serves the populations that need it most.

<u>TASKS</u>	<u>RESPONSIBLE PARTY(IES)</u>	<u>START DATE</u>	<u>DATE COMPLETED/VERIFIED</u>
a) Examine existing supportive housing programs' screening and tenancy criteria to identify barriers and determine why turnover is high.	Dept of Community Health, Coordinated Entry Advisory Committee	November 2015	

Strategy 3: Dedicate the 2016 allocation of 2060 Affordable Housing funds in the Consolidated Homeless Housing RFP to rental assistance vouchers for the chronically homeless population.

<u>TASKS</u>	<u>RESPONSIBLE PARTY(IES)</u>	<u>START DATE</u>	<u>DATE COMPLETED/VERIFIED</u>
a) Determine funding available and set-aside for this purpose.	Dept of Community Health	September 2015	
b) Document this as a priority in the RFP Narrative for the 2016 Coordinated Homeless Housing Funding Application.	Dept of Community Health	September 2015	

Strategy 4: Engage the chronically homeless through street outreach and provide them with permanent supportive housing.

<u>TASKS</u>	<u>RESPONSIBLE PARTY(IES)</u>	<u>START DATE</u>	<u>DATE COMPLETED/VERIFIED</u>
a) Continue providing existing street outreach including applying for ongoing funding, i.e., Housing And Recovery through Peer Services (HARPS) and Walla Walla County's Behavioral Tenth of 1% funds.	Central Washington Comprehensive Mental Health (Walla Walla Center)	September 2015	
b) Assist and link people who are homeless and congregating in the downtown core areas to services that meet their personal needs including permanent supportive housing.	Walla Walla Police Department, Central Washington Comprehensive Mental Health (Walla Walla Center), Pathways Home (i.e., coordinated entry), area service providers	Ongoing	
c) Expand street outreach by applying for additional,	Central Washington	TBD	

applicable funding.	Comprehensive Mental Health (Walla Walla Center), Walla Walla Police Department Ambassadors Program		
d) Improve interagency coordination amongst street outreach entities and coordinated entry providers in an effort to efficiently and promptly house the chronic homeless population.	Central Washington Comprehensive Mental Health (Walla Walla Center), Walla Walla Police Department, Pathways Home (i.e., coordinated entry)	2016	

Strategy 5: Increase affordable housing for the non-chronically homeless by initiating a vote for a one-tenth of one percent sales tax allowable per ESHB 2263 and as passed by the Washington State Legislature in June of 2015.

<u>TASKS</u>	<u>RESPONSIBLE PARTY(IES)</u>	<u>START DATE</u>	<u>DATE COMPLETED/VERIFIED</u>
a) Coordinate with Walla Walla County Assessor and others (e.g., school districts) to determine the best time to bring this issue before a vote of the people.	Dept of Community Health	September 2015	
b) Convene monthly meetings with Coordinating Committee and develop plans and strategies for use of funds.	Dept of Community Health	September 2015	
c) Convene monthly with Coordinating Committee and develop public education strategy.	Dept of Community Health	November 2015	
d) Brief Walla Walla County Board of Commissioners on concept.	Dept of Community Health	April 2016	
e) Obtain Walla Walla County Board of Commissioners' approval to bring issue to a vote.	Dept of Community Health	June 2016	
f) Start public education.	Dept of Community Health	3 months prior to vote	
g) Vote on 0.1% sales tax.	Dept of Community Health	TBD	

Strategy 6: Assure the efficient and effective operation of coordinated entry.

<u>TASKS</u>	<u>RESPONSIBLE PARTY(IES)</u>	<u>START DATE</u>	<u>DATE COMPLETED/VERIFIED</u>
c) Discuss coordinated entry at monthly Housing Providers/Ending Family Homelessness meetings and implement modifications as needed.	Pathways Home (i.e., coordinated entry), Housing Providers/Ending Family Homelessness Partners, Dept of Community Health	August 2015	
d) Discuss coordinated entry at monthly Coordinated Entry Advisory Committee meetings and implement modifications as needed.	Coordinated Entry Advisory Committee, Dept of Community Health	September 2015	
e) Provide a "warm hand-off" when clients are referred from one entity to another (i.e., the referring agency will call the receiving agency advising of the client referral).	Pathways Home (i.e., coordinated entry), referring agencies	August 2015	

September 21, 2015