



# Blue Ridge Continuum of Care Strategic Plan 2019 Business Plan



Blue Ridge  
Continuum of Care  
*A Place to Call Home*

# Introduction

The Blue Ridge Continuum of Care is the region's local planning group working to end homelessness. The Blue Ridge Interagency Council on Homelessness (BRICH) is the HUD designated decision-making group and oversight board of the Blue Ridge Continuum of Care. This leadership group includes twenty-one members drawn from the general public, local governments, mental health agencies, state and federal programs, nonprofit organizations, businesses, and colleges/universities throughout the Roanoke Region, including a formerly homeless representative. The BRICH serves as the facilitator and coordinator of our community's efforts to prevent, treat, and end homelessness.

As the designated board for the CoC geographic area – the counties of Alleghany, Botetourt, Craig, Roanoke and the cities of Covington, Roanoke and Salem – the BRICH ensures that the CoC develops a three-year strategic plan and an annual business plan that provides a road map for improving our service system's performance. The Plan helps ensure that homelessness in our communities is rare, brief and one-time.

This document was developed through multiple planning sessions by the BRICH and members of the CoC in consultation with the City of Roanoke, the designated CoC collaborative applicant for HUD funding. The Plan sets the overarching goal of becoming a HUD-designated High Performing Community by December 31, 2021. Annual performance targets, with high impact strategies and action items to focus our efforts in fulfilling this goal have been developed. High impact strategies (referred to in this document as System Goals) that have been identified include:

- Enhancing Coordinated Entry
- Improving Our Response to Domestic Violence Victims
- Strengthening Housing-Focused Practices
- Scaling Permanent Housing Interventions
- Evaluating System Performance
- Improving Our Response to Youth Homelessness

## OUR VISION

A community where homelessness is rare, brief and a one-time occurrence.

## OUR MISSION

Work to end the cycle of homelessness in the Blue Ridge CoC through interagency collaboration, effective allocation of resources, increased access to immediate services, and development of new strategies. Using the community's Coordinated Entry System (CES) as a point of contact, we will identify the service and housing needs of people who experience a housing crisis and create solutions needed to ensure that homelessness is rare, brief and a one-time occurrence.

To meet the performance standards associated with the High Performing Community designation by December 31, 2021, our community must:

1) Decrease the mean length of homelessness to fewer than 20 days; or reduce the mean length of episodes of homelessness by at least 10 percent from the preceding federal fiscal year.

*and*

2) Reduce the percentage of individuals and families returning to homelessness within 2 years to less than 5 percent; or decrease the number of individuals and families returning to homelessness within 2 years by at least 20 percent from the preceding federal fiscal year.

Our community is one of 70 US communities working with the technical assistance provider Community Solutions through the Built for Zero initiative to improve our service system by adopting proven best practices, deploying existing resources more efficiently, and using real-time data to improve performance. The action planning and project execution work being done through the Built for Zero initiative aligns with and builds on the goals and support strategies outlined in this Strategic Plan.

We are one of five communities nationally who are working with the Center for Social Innovation through its Supporting Partnerships for Anti-Racism Communities (SPARC) project to analyze Homeless Management Information System (HMIS) and Coordinated Entry data for potential racial disparities in assessments and housing placements. This data analysis will allow us to identify potential racial biases inherent in our assessment and housing placement process and to make adjustments to our system if disparities are identified.



# Our High Performing Community Benchmarks

To reach our three year goal of becoming a HUD designated High Performing Community, members of the Blue Ridge Interagency Council on Homelessness and the Blue Ridge Continuum of Care analyzed data from our homeless management information system during strategic planning sessions to determine where we are currently and set benchmarks for each of the next three years as follows:

## Benchmarks by Year to Become a High Performing Community

	2019	2020	2021
Length of time persons remain homeless	29 days	25 days	20 days
Extent persons who exit homelessness return to homelessness	11%	8%	5%
Number of homeless persons	301	286	272
Employment and income growth for homeless persons in CoC projects	70%	75%	80%
Number of persons who become homeless for the first time	1,505	1,430	1,359
Placement from street outreach and retention of permanent housing	20%	23%	21%



# The Crisis Response System

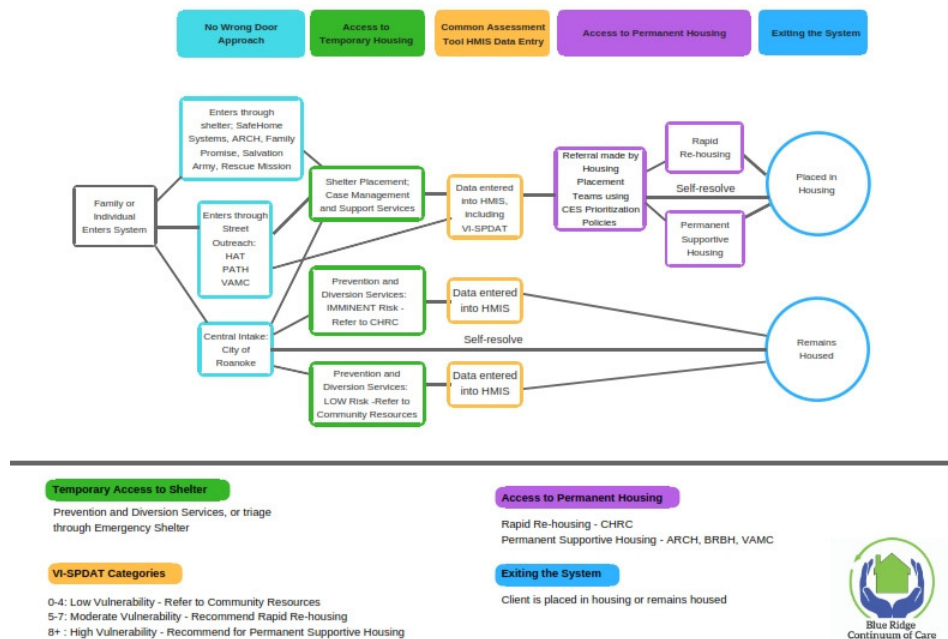
The Blue Ridge Continuum of Care and its governance body, the Blue Ridge Interagency Council on Homelessness, in alignment with the U.S. Department of Housing and Urban Development, Virginia Department of Housing and Community Development and local priorities, planned and in 2017 implemented a community wide **Crisis Response System** to make homelessness in our region rare, brief and a one-time occurrence.

Our homeless crisis response system responds to the immediacy and urgency of homelessness and is intended to ensure everyone has a safe and appropriate place to live. Our system facilitates access to all resources designated for homeless individuals and families. It identifies and assesses needs in a transparent and consistent way, and refers clients to the most appropriate service strategy or housing intervention. Our crisis response system is designed to ensure that our limited resources are allocated to achieve the most effective results. It combines centralized intake with multiple community based access points.

All access points utilize a common assessment tool and methodology thus creating a No Wrong Door approach that functions as a community-wide coordinated entry system for everyone who is experiencing or at risk of becoming homeless. The system ensures that people experiencing homelessness have equitable, coordinated and timely access to housing resources in a person-centered approach that preserves choice and dignity.

Our homeless crisis response system prioritizes providing people with housing first and then offers additional supports and voluntary services as needed. This evidence based, national best practice approach yields higher housing retention rates, lower returns to homelessness, and significant reductions in the use of crisis service and institutions.

Blue Ridge Continuum of Care Homeless Services Flow Chart



## Guiding Principles

The Crisis Response System throughout our geographic area is governed by the following guiding principles:

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- **Prioritization of the Most Vulnerable People.** Our limited resources are directed first to individuals and families who are the most vulnerable and in need of assistance.
- **Low-barrier.** The CES process does not screen out people for assistance because of perceived barriers to housing or services. Barriers could include, but are not limited to, conditions such as income or drug addiction set as eligibility requirements.
- **Housing First Orientation.** The process is Housing First oriented, such that people are housed quickly without preconditions or service participation requirements.
- **Person-Centered.** Every person experiencing homelessness is treated with dignity, offered at least minimal assistance, and participate in their own housing plan. Participants should be made aware of their options and offered choice whenever possible.
- **Standardized Access and Assessment.** All people in the Blue Ridge can easily access the system and are assessed using a universal assessment tool, either the Vulnerability Index Service Prioritization Decision Assistance Tool for individuals (VI-SPDAT) or the family version of the assessment, the F-VI-SPDAT.
- **Inclusive.** Through its No Wrong Door Approach, the coordinated entry process for the Blue Ridge CoC includes all subpopulations, including people experiencing chronic homelessness, Veterans, families, youth, survivors of domestic violence, persons with mental illness, LGBTQ persons, and disabled persons.
- **Informed by Local Planning.** The Blue Ridge Continuum of Care and its governing body, the Blue Ridge Interagency Advisory Council on Homelessness, engage in ongoing planning with all stakeholders participating in the coordinated entry process. This planning includes evaluating and updating the coordinated entry process at least annually.



# System Goals for the Next Three Years

There are six primary goals in our work supporting our community Crisis Response System. Each goal contains strategies, actions, timelines and accountability links to parts of the system.



## Goal 1

**Enhanced Coordinated Entry** that prioritizes vulnerable households; right sizes assistance with need; incorporates diversion practices and has links to effective outreach.

## Goal 2

**Improved Response to Domestic Violence** through effective partnerships with domestic violence shelters and providers.

## Goal 3

**Strengthened Housing –Focused Practices** through housing focused case management; policies and procedures to promote housing stability and housing navigation

## Goal 4

**Scale Permanent Housing Interventions** through recruitment of private landlords, leveraging mainstream housing and services; reallocating resources to effective practices and building rapid re-housing capacity

## Goal 5

**Performance Evaluation** that uses Homeless Management Information System data analysis to reallocate resources based on performance of component parts of the system

## Goal 6

**Improve Response to Youth Homelessness** through coordination of youth serving organizations and development of tools targeted to youth

# Our Year One Business Plan for 2019

With three year goals and yearly performance benchmarks in place, members of the Blue Ridge Interagency Council on Homelessness and Blue Ridge Continuum of Care developed the following strategies and actions to achieve each of the above stated goals.

## Goal One: ENHANCED COORDINATED ENTRY

### Strategies to Fulfill Goal:

#### 1.1 Prioritize Vulnerable Households

#### 1.2 Right-size Assistance

#### 1.3 Incorporate Diversion Practices

#### 1.4 Link to Effective Outreach and In-reach

Actions in Support of Strategies	Timeline	Accountable Committee/Individual
Invite additional community partners to increase SOAR/SSI applications	Bi-Monthly On-going	Tracy Kochel/Carol Tuning
Create an interactive website or mobile application for Coordinated Entry	June 2019	City of Roanoke Central Intake and Roanoke City Police Department
Implement new By-Name-List (BNL) HMIS report to better capture all individuals entering our system based on HMIS enrollments	March 2019	Central Intake and HMIS Lead
Implement diversion strategies through frontline staff and all shelters (strategy ex: flexible dollars for motels, family pay, etc.)	March 2019	CES Committee/Shelter Staff
Expand shelter bed placements through Central Intake to better centralize diversion practices	July 2019	Family Promise and BRICH
Enhance existing outreach strategy by making services more accessible to clients by conducting field intakes (e.g. streets, Day Centers, etc.)	March 2019	BRBH, HAT, VAMC, Salvation Army New Day Center
Engage employment services to participate in community partnerships (strengthen current partnerships with employment services)	January 2019	CoC and BRICH Chair
Develop partnerships with BRBH, Carilion, Bradley Free Clinic, and Mental Health America to link mental health services (incorporate staff at BNL meetings)	February 2019	CoC and BRICH Chair
Invite additional community partners to increase SOAR/SSI applications	Bi-Monthly On-going	Tracy Kochel/Carol Tuning



## Goal Two: IMPROVE RESPONSE TO DOMESTIC VIOLENCE

### Strategies to Fulfill Goal:

#### 2.1 Partner with Domestic Violence Shelters and Providers

Actions in Support of Strategies	Timeline	Accountable Committee/Individual
HMIS work with domestic violence service providers and the FVCC to capture accurate data	Annually	HMIS Lead and DV providers
Re-define domestic violence to include intimate partner and family violence (community-wide) to increase identification	March 2019	Family Violence Coordinating Council (FVCC) and CoC DV Housing Placement Team
Connect domestic violence victims with wraparound services	June 2019	Family Violence Coordinating Council and CoC
Improve first responder and law enforcement response to domestic violence	Weekly On-going	TAP and Local Police Departments
Community-wide definition of "imminent danger" for DV placement (TP)	July 2019	FVCC and CoC DV Housing Placement Team
Individuals/families who become homeless due to DV receive housing and ongoing funds to assist in maintaining housing, 6-24 months	On-going	TAP and CoC

## Goal Three: STRENGTHEN HOUSING-FOCUSED PRACTICES

### Strategies to Fulfill Goal:

#### 3.1 Housing Focused Case Management

#### 3.2 Policies and Procedures to Promote Housing Stability

#### 3.3 Housing Navigation

Actions in Support of Strategies	Timeline	Accountable Committee/Individual
Create and implement a continuous community wide Person-centered treatment plan for housing that identifies risk, needs, and barriers	October 2019	ARCH, Salem VAMC, CoC
Increase communication with landlords about the benefits and barriers for housing the most vulnerable	July 2019	ARCH, Salem VAMC, CoC
Educate community about the housing first model through a series of quarterly presentations and neighborhood meetings	Quarterly	BRICH, CoC
Expand marketing of homeless services and annual homelessness conference	On-going	BRICH, CoC Planning Agency
Work with City officials to present the annual point in time report and most recent business plan	As Requested	BRICH, CoC Planning Agency
Provide a series of workshops for case managers to increase utilization of best practices	Quarterly	HELPS
CoC leadership attend two best practice trainings to ensure local system aligns with nationally recognized best practices	Bi-Annual	CoC Leadership

## Goal Four: SCALE PERMANENT HOUSING INTERVENTIONS

### Strategies to Fulfill Goal:

#### 4.1 Recruit Private Landlords

#### 4.2 Leverage Mainstream Housing and Services

#### 4.3 Reallocate Resources

#### 4.4 Build Rapid Re-Housing Capacity

Actions in Support of Strategies	Timeline	Accountable Committee/Individual
A bi-annual update of shared database of landlords	Bi-Annual	CoC Lead
Onboard additional organizations to increase CoC participation to strengthen CoC partnerships and leveraging of resources	On-going	CoC Lead, BRICH
Partner with the Drop-In Center to determine ways to utilize harm reduction funding for homeless clients	Annually	Community Housing Resource Center
Apply for additional Rapid Rehousing funding through the State Housing Trust Fund	On-going	CoC, Drop-In Center
Work with Roanoke Redevelopment and Housing Authority to institute homeless preference for individuals "moving on" from PSH projects	March 2019	CoC Lead and Planning Agency
Develop community-wide policy for PSH graduation criteria	March 2019	ARCH, Salem VAMC, CoC, BRICH
Pursue additional donated shared housing opportunities for Veterans and chronic homeless	September 2019	ARCH, Salem VAMC

## Goal Five: PERFORMANCE EVALUATION

### Strategies to Fulfill Goal:

**5.1 Utilize HMIS data to develop system performance policies and procedures**

**5.2 Increase organization participating in HMIS**

**5.3 Use HMIS data analysis to reallocate resources based on performance**

Actions in Support of Strategies	Timeline	Accountable Committee/Individual
Collect data to report return on investment on prevention/housing to monthly BRICH meetings.	Monthly	CHRC and Performance Evaluation Committee
Redefine "other" destination reporting choice for better predictive power.	April 2019	HMIS Lead
Plan and conduct the 2019 Point-in-Time Count (PIT) and collection of Housing Inventory Count (HIC) data. Review publications and guidance prior to completion of the counts, update forms, and collect data from service providers. Include improved categorization of reasons for homelessness	January 2019	CoC Planning Agency
Conduct annual focus group meeting to assess the performance of the crisis response system and to identify needed enhancements	December 2019	CoC Planning Agency
Conduct an annual monitoring review for CoC and ESG-funded projects to include agency site visits, random case file review and analysis of overall project performance	Annually	CoC Planning Agency
Collect monthly information from HUD and ESG-funded agencies to include data quality, timely HUD APR submissions, and timely spending of project funds	Monthly	CoC Planning Agency
Work with CoC Lead to incorporate outcome data into the project ranking process.	March 2019	City of Roanoke HUD Community Resources Division and CoC Planning Agency
Implement HUD-VASH data entry in HMIS	January 2019	HMIS Lead and Salem VAMC
Implement RAM House data entry in HMIS	January 2019	HMIS Lead and RAM
Participate in SPARC (Supporting Partnership and Anti-Racism Committee) Initiative with the Center for Social Innovation to identify potential racial disparities in our local CES	April 2019	HMIS and CoC Lead
Report monthly progress on achieving performance benchmarks to BRICH and CoC	Monthly On-going	HMIS Lead

## Goal Six: IMPROVE RESPONSE TO YOUTH HOMELESSNESS

### Strategies to Fulfill Goal:

#### 6.1 Facilitate coordination of youth serving organizations

#### 6.2 Develop tools and materials targeted to youth

Actions in Support of Strategies	Timeline	Accountable Committee/Individual
Define youth in its varying subsets; unaccompanied; 18-24 year old; in school under age 18; youth head of household	October 2019	Roanoke City Public Schools (RCPS) Homeless Student Coordinator and New Day Center
Explore implementation of youth-specific VI-SPDAT (or lower threshold of VI-SPDAT score for youth to receive services) and develop youth-specific guidelines for services	March 2019	CoC Committee and Youth Community Housing Placement Team
Youth-specific Specialists and Community-based Outreach Workers hired at New Day Center	April 2019	Salvation Army and CoC Planning Agency
Identify youth services providers and create a youth focused task force to include youth input	April 2019	CoC and Planning Agency
Streamlined access to community-based job placement and educational resources through collaborative partnerships and mentors	On-going	TAP and Goodwill
Conduct initial analysis of HMIS youth data	January 2019	HMIS Lead
Conduct youth-specific needs assessment to determine service needs local homeless youth	April 2019	Youth Taskforce
Pursue funding for new youth-specific housing resources	On-going	CoC and Planning Agency
Integrate Youth Action Board into CoC structure for feedback and service design in all CoC activities addressing youth homelessness	February 2019	CoC, Planning Agency, Salvation Army

# How This Plan Was Developed

Over a two month period, the Council of Community Services facilitated a series of strategic planning sessions for the Blue Ridge Continuum of Care (BRCoC), the region's local planning group working to end homelessness and the Blue Ridge Interagency Council on Homelessness (BRICH), the HUD designated decision-making group and oversight board of the Blue Ridge Continuum of Care. The BRICH consists of twenty-one members drawn from the general public, local governments, mental health agencies, state and federal programs, nonprofit organizations, businesses, and colleges/universities throughout the Roanoke Region, including a formerly homeless representative. The BRCoC is composed of agencies and organizations that provide services to the homeless population in the region.

This document was developed as a result of the multiple planning sessions by the BRICH and members of the BRCoC in consultation with the City of Roanoke, the designated CoC collaborative applicant for HUD funding. The plan was refined and written by a designated committee of the BRCoC. Layout and design of the plan was completed by the Council of Community Services, the lead planning agency for the Continuum of Care.

## Additional Local Resources

[Blue Ridge Interagency Council on Homelessness web page](#)

[Blue Ridge Continuum of Care website](#)

[Blue Ridge Continuum of Care Facebook page](#)



# **Blue Ridge Continuum of Care Strategic Plan 2019 Business Plan**

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[www.endhomelessnessblueridge.org](http://www.endhomelessnessblueridge.org)

**Carol Tuning**  
**Human Services Administrator**  
**Chair, Blue Ridge Continuum of Care**  
**(540) 312-8301**  
[carol.tuning@roanokeva.gov](mailto:carol.tuning@roanokeva.gov)

