**Toolkit for SSVF Grantees with Shared Geography**

***Overview***

Coordination is one of the fundamental principles of the Supportive Services for Veteran Families (SSVF) Program. Coordination can be external and internal with individuals and groups. An example of external group coordination would be working with the local Continuum of Care (CoC) or the VA Medical Center (VAMC). External coordination on the individual level could be working with a specific landlord to build a relationship or an employment specialist.

Internal coordination is within the SSVF program. As a current SSVF grantee, you may have other SSVF grantees (new and renewal) that may overlap with your service area, share the same service area, and/or border your service area. Ultimately, all SSVF grantees are working towards the same goal of ending homelessness for Veterans by 2015, and each SSVF grantee is part of the larger system. Therefore, while grantees are responsible for the targets set in the SSVF application, there is also a need to coordinate with other SSVF grantees so that Veterans receive the best service possible. To assist grantees with this coordination, the SSVF Regional Coordinators will provide coordination tools. A report out on grantee progress and efforts will be requested.

***Tools***

1. Questions for Grantees with Shared Geography
2. Sample Agenda for Local Coordination Meeting of SSVF Grantees with Shared Geography
3. Grantee Report Out Template

**TOOL 1. QUESTIONS FOR GRANTEES WITH SHARED GEOGRAPHY**

* **Pre-Planning**
  + Which grantees from the award announcements appear to have exclusively the same service area as your grant?
  + Which grantees from the award announcements overlap in terms of your service area but also have additional service areas that you do not cover?
  + Which grantees from the award announcements border your service area?
  + Tip: Make a map or a visual of your service area and then the other grantees’ service areas that share geography with you.
* **Information for grantees to share with each other**
  + How long have you been doing SSVF? (1st year, 2nd year, or 3rd year)
  + What service areas have you proposed?
  + How many households do you plan to serve?
  + Do you have specific targets for OEF/OIF, female Veterans, households with less than 30% AMI, and households with dependents? If so, what are they?
  + Did you propose to serve any special populations (ex. Veteran households with disabilities only, Veteran household victims of domestic violence, households with children only, etc.)?
  + Are you going to provide any additional services (legal, employment, financial education, rep payee)? If so, what are they?
  + Do you have an area of expertise (ex. Working with households with disabilities, utilities, financial education, etc.)?
  + Do you have any subcontractors? If so, what will they do for your SSVF program?
  + What is your total grant award?
  + How much of your grant award is TFA? (include percentage and dollar amount)
  + What does your program look like in terms of design?
  + Do you have any limitations (financial vs. non-financial)?
  + What does your SSVF Homeless Prevention Screening Tool look like? What is your threshold score?
* **Dialogue**
  + When you look at your services areas together, what does it look like? (refer to the map made during the pre-planning)
  + Based on the number of households you plan to serve, when you look at your total number together, does it make sense?
    - *Seems like the total number of proposed households to be served is larger than what we anticipated as the need in the area*
      * Are there other areas that are not being served that you may want to propose in your service plan as a program change to the geographic area? *(Example: One county has 2 providers, Grantee A and Grantee B. Grantee A will be the dominant/primary provider in the county because it is their only county, and then Grantee B who serves 5 counties will be the secondary in the county but will be the primary in the other 4 counties where they are the only provider.)*
      * Are there specific target populations that each grantee could serve or focus on?
    - *Seems like the total number of proposed households to be served in the area is on target* 
      * Do you have a niche and may want to propose that your agency focuses on a specific target population or expertise?
      * Are there specific geographic areas within the service area that you can serve? *(Example: Grantee C will cover the north part of the city. Grantee D will cover the south part of the city. Grantee E will cover the east part of the city. Grantee F will cover the west part of the city.)*
* Given the respective program designs, are there services that one grantee is better positioned to provide than others in the area? (Example: One agency specializes in legal issue resolution-on top of the required outreach, case management, linking to VA and mainstream benefits)
* How can knowing the subpopulation targets of each grantee help with proper referral?
* For SSVF category 1 (prevention), what does it mean to be “imminently at risk of literal homelessness” in the specific community? (stage 1 eligibility)
* If the thresholds are different, how do you explain to referring agencies why there is a difference among local grantees and any other information they might need to know?
* Do all grantees in the same service area want to review each other’s thresholds for prevention and then agree to do a warm hand off if another grantee is better suited to serve the household? (Example: Grantee A has a threshold of 8 and Grantee B has a threshold of 12. Grantee B has agreed to do warm hand offs to Grantee A for households that score lower on the threshold, and Grantee A has agreed to do warm hand offs, when appropriate for higher scoring households.)
* Based on budgets, has one grantee planned to provide more TFA per household? If so, how can this information be used to coordinate services among grantees?
* How will you make referrals to each other?
* How will you prevent duplication of services?
* To share information together, you would need a shared Release of Information. What would this look like?
* How will you coordinate outreach efforts?
* How will you work with the local VAMC and programs like VASH and GPD?
* How will you work within the VISN?
* How will you work with the CoC?
* How will you work with HMIS? Data entry?
* Are there any opportunities to use HMIS as a tool to coordinate your services together?
* What local resources (ie. Coordinated assessment, 211, etc.) should be part of the discussion to assist with proper referral on the front end?
* What will your next steps be? What action items do you need to accomplish? When will you meet again?
* Who will report back to the SSVF Regional Coordinator on your progress and efforts?

**General Questions**

* From your perspective, what are each grantee’s strengths? *(Example: One grantee is an expert in social services whereas another grantee is an expert in housing and another grantee has a significant amount of experience working with Veteran issues.)*
* How could this collective knowledge be used and shared? What can you learn from each other?
* Are there tools and resources that you can share?
* How can you help each other to meet your goals? What will each grantee’s role be?
* How can you work together to provide effective service? How can you complement each other?
* How do you want to communicate? (how, process, when)
* How do you want to measure successful coordination efforts?

**Ideas from Other Grantees that Have Had Shared Geography**

* In an urban setting, the grantees in the area may select specific sections of the city that they will cover. They may then all create a matrix that says their program criteria, who they serve, and how to access their services.
* Each grantee will focus on a target population.
* If service areas overlap but there is an area that is not being covered, a grantee could submit a significant program change to VA requesting a revision to the geographic area being served.
* Use each other’s expertise. If a grantee is skilled in working with Veterans that have legal issues and has this additional service, Veteran households may be referred to them. If another grantee is skilled at working with utility providers, a Veteran household with utility issues might be referred to them.
* If TFA ran out at the one grantee, another grantee with TFA, might provide the service. Only one grantee would track the household in HMIS.

**TOOL 2. SUGGESTED MEETING AGENDA**

**Local Coordination Meeting of Renewal/New SSVF Grantees with Shared Geography**

Date, Meeting Location, and Address

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| **Suggested Meeting Specifics** | |
| **Meeting Convener** | * Representative from one renewal SSVF grantee |
| **Invitees** | * One representative from each of the local SSVF grantees (including newly funded grantees) with **overlapping geographic regions** in their grant commitments * Local CoC Representative * (Optional) Local HMIS System Administrator |
| **Process Suggestions** | * Convene with one representative from each grantee, who serves as a cross-grantee liaison * Bring detailed map of the common geographic region as a reference * Take notes and circulate Meeting Minutes to the meeting attendees * Plan to meet again – possibly quarterly/ bi-annually for ongoing coordination |
| **Purpose** | * Plan for local coordination of SSVF grants with overlapping geographic regions * Anticipate complications of SSVF participants interfacing with multiple local grantees * Share local resources that can optimize SSVF effectiveness in the local region * Plan for coordinated compliance with SSVF rules regarding limitations of financial assistance |
| **Suggested Meeting Discussions** | |
| **Grantee**  **Introductions** | Overview of each SSVF grant and respective details:   1. Specific geographic region intended to be served? 2. Targeted sub-populations intended to be served? 3. Number to be served in the grant year for each grant? 4. Specifics of program design and service limitations (financial vs. non-financial)? 5. Specifics of tailored SSVF Homeless Prevention Screener and threshold score? |
| **Plan for Geographic Coordination** | Discussion Questions:   1. What are the regions of geographic overlap for SSVF service delivery? 2. What do we know about where target population is concentrated locally? 3. How can we coordinate within our common target regions? 4. Are there logical strategies for organizing ourselves to maximize impact? 5. Can we mutually agree to add all local SSVF programs to Releases of Information? |
| **Plan for Outreach**  **Coordination** | Discussion Questions:   1. Where/how is SSVF outreach currently underway in this region? 2. How can we coordinate/not duplicate SSVF outreach going forward? 3. How can we synchronize our local SSVF branding/messaging particularly to key referral sources in our common region? |
| **Plan for Local Resource Sharing** | Discussion Questions:   1. Are the new grantees connected to HMIS from other CoC grants? 2. What new grantee pre-planning is needed to prepare for HMIS data entry? |
| **Plan for HMIS Needs and CoC Coordination** | Discussion Questions   1. Are the new grantees already participating in HMIS? 2. What grant pre-planning is needed to prepare for HMIS data input? 3. How can all SSVF grantees ensure this region complies w/HMIS standards? 4. How do we ensure integration with the local CoC and Coordinated Assessment? |

**TOOL 3. SSVF GRANTEES WITH SHARED GEOGRAPHY REPORT OUT FORM**

**Date:**

**Person Submitting Report/Grantee Affiliation/Contact Information:**

**Date and Time of Meeting:**

**Attendees and Their Organization:**

**Progress (attach meeting minutes also):**

**Next Steps/Action Items as a Result of the Meeting:**

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| --- | --- | --- |
| **What?** | **Who?** | **By When?** |
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**Do you need any assistance from your Regional Coordinator? If so, what would be helpful?**

**Next Scheduled Meeting:**