

CHALENG 2010 Survey Results Summary

VISN: 10

Site: VAMC Chillicothe, OH - 538

CHALENG data is collected from two surveys. The CHALENG Point of Contact (POC) Survey is a self-administered questionnaire completed by the local VA homeless Veteran coordinator. The CHALENG Participant Survey is completed by federal, state, county, city, non-profit and for-profit agency representatives, as well as local VA staff and homeless Veterans themselves. Data was collected in the summer/fall of 2010.

A. Homeless Veteran Sub-populations (CHALENG Point of Contact Survey)*

[Note: Beginning in FY 2010, CHALENG no longer collects estimate of the local homeless Veterans population. HUD's *The Veteran Homelessness: A Supplemental Report to the Annual Homeless Assessment Report (AHAR) to Congress* will now be issued annually and report the single federal estimate on homelessness among Veterans.]

1. Number of Homeless Veteran Families (Veterans with minor dependents) Served in FY 2010 by Local VA Homeless Program: 36

2. Number of Homeless Veterans served in FY 2010 who needed treatment in an extended care facility (e.g., VA or community nursing home, state soldier's home) for conditions due to aging: 0

B. Housing Availability and Need (CHALENG Point of Contact Survey)

Housing type	# of Veteran-specific Beds in area*
Emergency Beds	9
Transitional Housing Beds	15
Permanent Housing Beds	95

*These are the number of beds that Veterans can access that are Veteran-specific.

Homeless Veteran Program Beds actually on VA campus?*	
Emergency Beds	No
Transitional Housing Beds	No
Permanent Housing Beds	No

*Beds in programs operated by private, community partners through VA Grant and Per Diem, VA Healthcare for Homeless Veterans, and other funding sources.

C. Rating of Need by CHALENG Participants (Number of Veteran Participants:
135. Number of provider (VA and non-VA) participants: 43.)

Need Ranking (1=Need Unmet 5= Need Met)	Site homeless Veteran mean score	Site provider mean score	VHA Mean Score (nationwide)*(all participants)
Personal hygiene (shower, haircut, etc.)	4.10	3.49	3.74
Food	4.13	3.69	3.86
Clothing	3.82	3.42	3.62
Emergency (immediate) shelter	3.76	3.16	3.55
Transitional living facility or halfway house	3.88	3.00	3.45
Long-term, permanent housing	3.36	2.76	2.90
Detoxification from substances	4.30	3.14	3.69
Treatment for substance abuse	4.44	3.32	3.84
Services for emotional or psychiatric problems	4.34	3.37	3.71
Treatment for dual diagnosis	3.98	3.11	3.51
Family counseling	3.30	2.89	3.11
Medical services	4.31	3.77	4.04
Women's health care	3.35	3.26	3.17
Help with medication	4.34	3.45	3.87
Drop-in center or day program	3.87	3.18	3.15
AIDS/HIV testing/counseling	3.89	3.28	3.63
TB testing and Treatment	4.00	3.41	3.90
Legal assistance to help restore a driver's license	3.26	2.68	2.87
Hepatitis C testing	4.10	3.42	3.70
Dental care	3.28	2.69	2.91
Eye care	4.08	2.95	3.38
Glasses	3.94	3.06	3.35
VA disability/pension	3.37	3.67	3.14
Welfare payments	2.92	3.24	2.80
SSI/SSD process	2.96	3.24	2.95
Guardianship (financial)	3.17	3.03	2.84
Help managing money	3.50	2.95	3.13
Job training	3.42	3.36	2.96
Help with finding a job or getting employment	3.45	3.29	3.02
Help getting needed documents or identification	4.17	3.34	3.50
Help with transportation	4.08	3.11	3.31
Education	3.65	3.18	3.19
Child care	3.26	2.50	2.64
Family reconciliation assistance	3.27	2.65	2.73
Discharge upgrade	3.47	2.81	2.96
Spiritual	4.17	3.51	3.55
Re-entry services for incarcerated veterans	3.18	3.05	2.94
Elder health care	3.31	3.37	3.11
Credit counseling	3.42	2.71	2.85
Legal assistance for child support issues	2.99	2.53	2.70
Legal assistance for outstanding warrants/fines	3.05	2.58	2.75
Help developing social network	3.61	3.13	3.14

****VHA: Veterans Healthcare Administration (139 reporting POC sites, n= 19,847, mean score of individuals).**

D. Nature of Collaborative Activities Between VA and Community in Serving Homeless Veterans*

1. Community Ratings of VA/Community Integration*

Integration Scale: 1 (low) to 5 (high)	Site Mean Score	VHA (nationwide) Mean Score**
VA Accessibility: In general, how accessible do you feel VA services are to homeless Veterans in the community?	3.61	3.53
VA Service Coordination: Rate the ability of the VA to coordinate clinical services for homeless Veterans with your agency.	3.70	3.55

*Scores of non-VA community agency representatives who completed Participant Survey.

**VHA: Veterans Healthcare Administration (139 reporting POC sites, n=4,270).

2. Community Rating of Level of Collaborative Activity between VA and Community Agencies

Implementation Scale 1 = None , no steps taken to initiate implementation of the strategy. 2 = Low , in planning and/or initial minor steps taken. 3 = Moderate , significant steps taken but full implementation not achieved. 4 = High , strategy fully implemented.	Site Mean Score	VHA (nationwide) Mean Score**
Interagency Coordinating Body - Representatives from the VA and your agency meet formally to exchange information, do needs assessment, plan formal agreements, and promote access to services.	2.48	2.60
Co-location of Services - Services from the VA and your agency provided in one location.	1.90	1.91
Cross-Training - Staff training about the objectives, procedures and services of the VA and your agency.	2.00	2.00
Interagency Agreements/ Memoranda of Understanding - Formal and informal agreements between the VA and your agency covering such areas as collaboration, referrals, sharing client information, or coordinating services.	2.48	2.31
Interagency Client Tracking Systems/ Management Information Systems - Shared computer tracking systems that link the VA and your agency to promote information sharing, referrals, and client access.	1.90	1.68
Pooled/Joint Funding - Combining or layering funds from the VA and your agency to create new resources or services.	1.86	1.73
Uniform Applications, Eligibility Criteria, and Intake Assessments – Standardized form that the client fills out only once to apply for services at the VA and your agency.	1.85	1.84
Interagency Service Delivery Team/ Provider Coalition - Service team comprised of staff from the VA and your agency to assist clients with multiple needs.	2.38	2.22
Consolidation of Programs/ Agencies - Combining programs from the VA and your agency under one administrative structure to integrate service delivery.	2.05	2.02
Flexible Funding – Flexible funding used to fill gaps or acquire additional resources to further systems integration; e.g. existence of a VA and/or community agency fund used for contingencies, emergencies, or to purchase services not usually available for clients.	1.85	1.68
Use of Special Waivers - Waiving requirements for funding, eligibility or service delivery to reduce barriers to service, eliminate duplication of services, or promote access to comprehensive services; e.g. VA providing services to clients typically ineligible for certain services (e.g. dental) or community agencies waiving entry requirements to allow clients access to services.	1.70	1.74
System Integration Coordinator Position - A specific staff position focused on systems integration activities such as identifying agencies, staffing interagency meetings, and assisting with joint proposal development.	1.85	1.89

*Scored of non-VA community agency representatives who completed Participant Survey.

**VHA: Veterans Healthcare Administration (139 reporting POC sites, n=4,270. Mean score of sites).

E. Action Plans: FY 2010 and FY 2011

1. CHALENG Point of Contact Action Plan for FY 2010: Results*

Long-term, permanent housing	In 2009, we utilized the 35 HUD VASH vouchers in the Athens County area. We requested and received an additional 25 vouchers for the Ross County area.
Emergency (immediate) shelter	We developed a contract with Lutheran Social Services of Lancaster to provide nine emergency shelter beds in Lancaster, Ohio.
Transitional living facility or halfway house	We developed two new contracts for transitional housing and continue to work to develop new contracts.

*The Action Plan consisted of proposed strategies the local VA program and its community partners *would use* to address priority needs in FY 2010. This is the final report about progress towards achieving FY 2010 priority needs.

2. FY 2010 Best Practice Example

None	None
------	------

3. CHALENG Point of Contact Action Plan for FY 2011: Proposed*

Long-term, permanent housing	Continue to encourage public housing authorities within our catchment area to participate in the HUD-VASH program to increase options for permanent housing.
Food	Develop and implement an education plan for Veterans regarding the utilization of area food banks and soup kitchens. Ensure that Veterans who qualify for assistance through Jobs and Family Services apply for food cards.
Transitional living facility or halfway house	Continue to play an active role in area HUD Continuum of Care to foster relationships with community partners to develop contracts for transitional housing, increasing the number of transitional beds and locations of transitional program locations.

***The Action Plan outlines proposed strategies the local VA program and its community partners *will use* to address its priority needs in FY 2011. Updates on these 2011 strategies to address priority needs will be reported in next year's CHALENG report.**

CHALENG 2010 Survey Results Summary

VISN: 10

Site: VAMC Cincinnati, OH - 539 (Ft. Thomas, KY)

CHALENG data is collected from two surveys. The CHALENG Point of Contact (POC) Survey is a self-administered questionnaire completed by the local VA homeless Veteran coordinator. The CHALENG Participant Survey is completed by federal, state, county, city, non-profit and for-profit agency representatives, as well as local VA staff and homeless Veterans themselves. Data was collected in the summer/fall of 2010.

A. Homeless Veteran Sub-populations (CHALENG Point of Contact Survey)*

[Note: Beginning in FY 2010, CHALENG no longer collects estimate of the local homeless Veterans population. HUD's *The Veteran Homelessness: A Supplemental Report to the Annual Homeless Assessment Report (AHAR) to Congress* will now be issued annually and report the single federal estimate on homelessness among Veterans.]

1. Number of Homeless Veteran Families (Veterans with minor dependents) Served in FY 2010 by Local VA Homeless Program: 30

2. Number of Homeless Veterans served in FY 2010 who needed treatment in an extended care facility (e.g., VA or community nursing home, state soldier's home) for conditions due to aging: 2

B. Housing Availability and Need (CHALENG Point of Contact Survey)

Housing type	# of Veteran-specific Beds in area*
Emergency Beds	0
Transitional Housing Beds	150
Permanent Housing Beds	258

*These are the number of beds that Veterans can access that are Veteran-specific.

Homeless Veteran Program Beds actually on VA campus?*	
Emergency Beds	No
Transitional Housing Beds	No
Permanent Housing Beds	No

*Beds in programs operated by private, community partners through VA Grant and Per Diem, VA Healthcare for Homeless Veterans, and other funding sources.

C. Rating of Need by CHALENG Participants (Number of Veteran Participants:
224. Number of provider (VA and non-VA) participants: 33.)

Need Ranking (1=Need Unmet 5= Need Met)	Site homeless Veteran mean score	Site provider mean score	VHA Mean Score (nationwide)*(all participants)
Personal hygiene (shower, haircut, etc.)	4.22	3.35	3.74
Food	4.22	3.58	3.86
Clothing	3.89	3.32	3.62
Emergency (immediate) shelter	3.97	3.29	3.55
Transitional living facility or halfway house	3.93	3.30	3.45
Long-term, permanent housing	3.08	2.71	2.90
Detoxification from substances	4.09	3.03	3.69
Treatment for substance abuse	4.37	3.40	3.84
Services for emotional or psychiatric problems	3.99	3.23	3.71
Treatment for dual diagnosis	3.72	3.30	3.51
Family counseling	3.01	2.58	3.11
Medical services	4.21	3.83	4.04
Women's health care	2.73	3.14	3.17
Help with medication	4.01	3.25	3.87
Drop-in center or day program	3.05	2.83	3.15
AIDS/HIV testing/counseling	4.10	3.38	3.63
TB testing and Treatment	4.25	3.55	3.90
Legal assistance to help restore a driver's license	2.65	2.43	2.87
Hepatitis C testing	4.03	3.43	3.70
Dental care	3.40	2.83	2.91
Eye care	3.98	2.87	3.38
Glasses	3.84	2.90	3.35
VA disability/pension	2.85	3.14	3.14
Welfare payments	2.51	2.93	2.80
SSI/SSD process	2.58	2.70	2.95
Guardianship (financial)	2.53	2.66	2.84
Help managing money	2.92	2.67	3.13
Job training	2.45	2.59	2.96
Help with finding a job or getting employment	2.80	2.83	3.02
Help getting needed documents or identification	3.69	2.93	3.50
Help with transportation	3.61	2.53	3.31
Education	3.02	2.66	3.19
Child care	2.40	2.23	2.64
Family reconciliation assistance	2.70	2.10	2.73
Discharge upgrade	2.60	2.57	2.96
Spiritual	3.78	2.69	3.55
Re-entry services for incarcerated veterans	2.74	2.61	2.94
Elder health care	2.76	3.00	3.11
Credit counseling	2.45	2.54	2.85
Legal assistance for child support issues	2.44	2.32	2.70
Legal assistance for outstanding warrants/fines	2.68	2.28	2.75
Help developing social network	3.44	2.89	3.14

****VHA: Veterans Healthcare Administration (139 reporting POC sites, n= 19,847, mean score of individuals).**

D. Nature of Collaborative Activities Between VA and Community in Serving Homeless Veterans*

1. Community Ratings of VA/Community Integration*

Integration Scale: 1 (low) to 5 (high)	Site Mean Score	VHA (nationwide) Mean Score**
VA Accessibility: In general, how accessible do you feel VA services are to homeless Veterans in the community?	3.85	3.53
VA Service Coordination: Rate the ability of the VA to coordinate clinical services for homeless Veterans with your agency.	3.78	3.55

*Scores of non-VA community agency representatives who completed Participant Survey.

**VHA: Veterans Healthcare Administration (139 reporting POC sites, n=4,270).

2. Community Rating of Level of Collaborative Activity between VA and Community Agencies

Implementation Scale 1 = None , no steps taken to initiate implementation of the strategy. 2 = Low , in planning and/or initial minor steps taken. 3 = Moderate , significant steps taken but full implementation not achieved. 4 = High , strategy fully implemented.	Site Mean Score	VHA (nationwide) Mean Score**
Interagency Coordinating Body - Representatives from the VA and your agency meet formally to exchange information, do needs assessment, plan formal agreements, and promote access to services.	3.16	2.60
Co-location of Services - Services from the VA and your agency provided in one location.	2.42	1.91
Cross-Training - Staff training about the objectives, procedures and services of the VA and your agency.	2.04	2.00
Interagency Agreements/ Memoranda of Understanding - Formal and informal agreements between the VA and your agency covering such areas as collaboration, referrals, sharing client information, or coordinating services.	2.68	2.31
Interagency Client Tracking Systems/ Management Information Systems - Shared computer tracking systems that link the VA and your agency to promote information sharing, referrals, and client access.	2.04	1.68
Pooled/Joint Funding - Combining or layering funds from the VA and your agency to create new resources or services.	2.20	1.73
Uniform Applications, Eligibility Criteria, and Intake Assessments – Standardized form that the client fills out only once to apply for services at the VA and your agency.	2.00	1.84
Interagency Service Delivery Team/ Provider Coalition - Service team comprised of staff from the VA and your agency to assist clients with multiple needs.	2.64	2.22
Consolidation of Programs/ Agencies - Combining programs from the VA and your agency under one administrative structure to integrate service delivery.	2.36	2.02
Flexible Funding – Flexible funding used to fill gaps or acquire additional resources to further systems integration; e.g. existence of a VA and/or community agency fund used for contingencies, emergencies, or to purchase services not usually available for clients.	1.96	1.68
Use of Special Waivers - Waiving requirements for funding, eligibility or service delivery to reduce barriers to service, eliminate duplication of services, or promote access to comprehensive services; e.g. VA providing services to clients typically ineligible for certain services (e.g. dental) or community agencies waiving entry requirements to allow clients access to services.	2.20	1.74
System Integration Coordinator Position - A specific staff position focused on systems integration activities such as identifying agencies, staffing interagency meetings, and assisting with joint proposal development.	2.08	1.89

*Scored of non-VA community agency representatives who completed Participant Survey.

**VHA: Veterans Healthcare Administration (139 reporting POC sites, n=4,270. Mean score of sites).

E. Action Plans: FY 2010 and FY 2011

1. CHALENG Point of Contact Action Plan for FY 2010: Results*

Long-term, permanent housing	We were awarded an additional 50 HUD-VASH vouchers in 2010, bringing us to a total of 258 vouchers. We are using 25 of these vouchers for a Housing First project. Demand remains very high for these vouchers and we hope to be awarded more. Fifty more Veterans were permanently housed this year. One of our VA Grant and Per Diem providers, Joseph House, expanded their facility from 76 to 105 beds, offering long-term housing to graduates of their substance abuse treatment program.
Job training	The VA Compensated Work Therapy program now has a case manager dedicated to working with homeless Veterans. Ohio Valley Goodwill Industries continues to offer job training at their VA Grant and Per Diem program. We are working with the agency to move Veterans successfully out of transitional housing so more Veterans can participate each year.
Help with finding a job or getting employment	The VA Compensated Work Therapy program now has a case manager assigned to working with homeless Veterans. Ohio Valley Goodwill Industries continues to offer job training in their GPD program.

*The Action Plan consisted of proposed strategies the local VA program and its community partners *would* use to address priority needs in FY 2010. This is the final report about progress towards achieving FY 2010 priority needs.

2. FY 2010 Best Practice Example

None	None
------	------

3. CHALENG Point of Contact Action Plan for FY 2011: Proposed*

Emergency (immediate) shelter	Health Care for Homeless Veterans (HCHV) Residential Contract facility to serve four Veterans at a time. We have not used this model in Cincinnati since the late 90's, and these new beds will be utilized to prevent entry into shelter, or for Veterans post-discharge from a VA program who are on the waiting list for HUD-VASH.
Long-term, permanent housing	We will request additional HUD-VASH vouchers, as there is great demand for these. We hope to also serve our rural outliers through HUD-VASH. The city of Cincinnati has developed (with VA input) a "homeless to homes" 5-year plan that calls for more permanent supportive housing and the city is seeking funding for more vouchers.
Help with finding a job or getting employment	We are being awarded three (3) VA Compensated Work Therapy peer mentors who will work with homeless persons to help them gain permanent employment. We also have strong connections with the local Veteran Service Commission and the local Department of Labor Homeless Veterans Reintegration Program which can help Veterans get supplies (boots, etc.) needed for employment. While this year's economy has not been conducive to those seeking employment, we will continue to seek growth in this area..

***The Action Plan outlines proposed strategies the local VA program and its community partners will use to address its priority needs in FY 2011. Updates on these 2011 strategies to address priority needs will be reported in next year's CHALENG report.**

CHALENG 2010 Survey Results Summary

VISN: 10

Site: VAMC Cleveland, OH - 541 (Brecksville, OH)

CHALENG data is collected from two surveys. The CHALENG Point of Contact (POC) Survey is a self-administered questionnaire completed by the local VA homeless Veteran coordinator. The CHALENG Participant Survey is completed by federal, state, county, city, non-profit and for-profit agency representatives, as well as local VA staff and homeless Veterans themselves. Data was collected in the summer/fall of 2010.

A. Homeless Veteran Sub-populations (CHALENG Point of Contact Survey)*

[Note: Beginning in FY 2010, CHALENG no longer collects estimate of the local homeless Veterans population. HUD's *The Veteran Homelessness: A Supplemental Report to the Annual Homeless Assessment Report (AHAR) to Congress* will now be issued annually and report the single federal estimate on homelessness among Veterans.]

1. Number of Homeless Veteran Families (Veterans with minor dependents) Served in FY 2010 by Local VA Homeless Program: 40
2. Number of Homeless Veterans served in FY 2010 who needed treatment in an extended care facility (e.g., VA or community nursing home, state soldier's home) for conditions due to aging: 10

B. Housing Availability and Need (CHALENG Point of Contact Survey)

Housing type	# of Veteran-specific Beds in area*
Emergency Beds	15
Transitional Housing Beds	141
Permanent Housing Beds	350

*These are the number of beds that Veterans can access that are Veteran-specific.

Homeless Veteran Program Beds actually on VA campus?*	
Emergency Beds	No
Transitional Housing Beds	No
Permanent Housing Beds	No

*Beds in programs operated by private, community partners through VA Grant and Per Diem, VA Healthcare for Homeless Veterans, and other funding sources.

C. Rating of Need by CHALENG Participants (Number of Veteran Participants:
199. Number of provider (VA and non-VA) participants: 32.)

Need Ranking (1=Need Unmet 5= Need Met)	Site homeless Veteran mean score	Site provider mean score	VHA Mean Score (nationwide)*(all participants)
Personal hygiene (shower, haircut, etc.)	4.05	3.52	3.74
Food	4.42	4.00	3.86
Clothing	3.43	3.84	3.62
Emergency (immediate) shelter	4.27	3.81	3.55
Transitional living facility or halfway house	3.66	3.45	3.45
Long-term, permanent housing	2.59	3.10	2.90
Detoxification from substances	4.28	3.34	3.69
Treatment for substance abuse	4.47	3.45	3.84
Services for emotional or psychiatric problems	4.04	3.47	3.71
Treatment for dual diagnosis	3.70	3.31	3.51
Family counseling	3.12	2.58	3.11
Medical services	4.24	4.03	4.04
Women's health care	2.42	3.27	3.17
Help with medication	4.44	3.55	3.87
Drop-in center or day program	3.25	3.23	3.15
AIDS/HIV testing/counseling	4.18	3.71	3.63
TB testing and Treatment	4.41	3.64	3.90
Legal assistance to help restore a driver's license	3.06	2.44	2.87
Hepatitis C testing	4.08	3.44	3.70
Dental care	3.22	2.97	2.91
Eye care	3.79	3.39	3.38
Glasses	3.74	3.32	3.35
VA disability/pension	2.60	3.21	3.14
Welfare payments	2.17	3.14	2.80
SSI/SSD process	2.41	3.14	2.95
Guardianship (financial)	2.40	3.07	2.84
Help managing money	2.92	2.79	3.13
Job training	2.62	3.00	2.96
Help with finding a job or getting employment	3.05	2.82	3.02
Help getting needed documents or identification	3.69	3.46	3.50
Help with transportation	3.43	2.89	3.31
Education	2.89	2.96	3.19
Child care	2.22	2.46	2.64
Family reconciliation assistance	2.65	2.26	2.73
Discharge upgrade	2.65	2.59	2.96
Spiritual	3.91	2.70	3.55
Re-entry services for incarcerated veterans	2.69	3.00	2.94
Elder health care	2.66	3.23	3.11
Credit counseling	2.26	2.26	2.85
Legal assistance for child support issues	2.39	2.59	2.70
Legal assistance for outstanding warrants/fines	2.50	2.46	2.75
Help developing social network	3.08	2.75	3.14

****VHA: Veterans Healthcare Administration (139 reporting POC sites, n= 19,847, mean score of individuals).**

D. Nature of Collaborative Activities Between VA and Community in Serving Homeless Veterans*

1. Community Ratings of VA/Community Integration*

Integration Scale: 1 (low) to 5 (high)	Site Mean Score	VHA (nationwide) Mean Score**
VA Accessibility: In general, how accessible do you feel VA services are to homeless Veterans in the community?	3.70	3.53
VA Service Coordination: Rate the ability of the VA to coordinate clinical services for homeless Veterans with your agency.	4.00	3.55

*Scores of non-VA community agency representatives who completed Participant Survey.

**VHA: Veterans Healthcare Administration (139 reporting POC sites, n=4,270).

2. Community Rating of Level of Collaborative Activity between VA and Community Agencies

Implementation Scale 1 = None , no steps taken to initiate implementation of the strategy. 2 = Low , in planning and/or initial minor steps taken. 3 = Moderate , significant steps taken but full implementation not achieved. 4 = High , strategy fully implemented.	Site Mean Score	VHA (nationwide) Mean Score**
Interagency Coordinating Body - Representatives from the VA and your agency meet formally to exchange information, do needs assessment, plan formal agreements, and promote access to services.	3.00	2.60
Co-location of Services - Services from the VA and your agency provided in one location.	2.15	1.91
Cross-Training - Staff training about the objectives, procedures and services of the VA and your agency.	2.32	2.00
Interagency Agreements/ Memoranda of Understanding - Formal and informal agreements between the VA and your agency covering such areas as collaboration, referrals, sharing client information, or coordinating services.	2.63	2.31
Interagency Client Tracking Systems/ Management Information Systems - Shared computer tracking systems that link the VA and your agency to promote information sharing, referrals, and client access.	1.32	1.68
Pooled/Joint Funding - Combining or layering funds from the VA and your agency to create new resources or services.	1.89	1.73
Uniform Applications, Eligibility Criteria, and Intake Assessments – Standardized form that the client fills out only once to apply for services at the VA and your agency.	1.71	1.84
Interagency Service Delivery Team/ Provider Coalition - Service team comprised of staff from the VA and your agency to assist clients with multiple needs.	2.86	2.22
Consolidation of Programs/ Agencies - Combining programs from the VA and your agency under one administrative structure to integrate service delivery.	2.05	2.02
Flexible Funding – Flexible funding used to fill gaps or acquire additional resources to further systems integration; e.g. existence of a VA and/or community agency fund used for contingencies, emergencies, or to purchase services not usually available for clients.	1.79	1.68
Use of Special Waivers - Waiving requirements for funding, eligibility or service delivery to reduce barriers to service, eliminate duplication of services, or promote access to comprehensive services; e.g. VA providing services to clients typically ineligible for certain services (e.g. dental) or community agencies waiving entry requirements to allow clients access to services.	1.79	1.74
System Integration Coordinator Position - A specific staff position focused on systems integration activities such as identifying agencies, staffing interagency meetings, and assisting with joint proposal development.	1.85	1.89

*Scored of non-VA community agency representatives who completed Participant Survey.

**VHA: Veterans Healthcare Administration (139 reporting POC sites, n=4,270. Mean score of sites).

E. Action Plans: FY 2010 and FY 2011

1. CHALENG Point of Contact Action Plan for FY 2010: Results*

Long-term, permanent housing	Ongoing Opportunities Housing has expanded into Akron, with possibly 50 apartments to be utilized by HUD-VASH participants.. Cleveland Housing First Project is expanding (new site opened 2010) with another site scheduled to open in spring 2011.
Treatment for substance abuse	We have made progress, the need for substance abuse treatment no longer in the top three identified needs by local Veteran participants in CHALENG. VA Grant and Per Diem treatment beds are still available in this community.
Transitional living facility or halfway house	Our VA Grant and Per Diem program is in the process of expanding by 72 beds. Sites have received grants in Summit County and in Lorain County -- including one site specific for women in Akron. Additional beds for women and children were obtained by a current GPD provider.

***The Action Plan consisted of proposed strategies the local VA program and its community partners *would use* to address priority needs in FY 2010. This is the final report about progress towards achieving FY 2010 priority needs.**

2. FY 2010 Best Practice Example

None	None
------	------

3. CHALENG Point of Contact Action Plan for FY 2011: Proposed*

<p>Long-term, permanent housing</p>	<p>1. Continued collaboration with the Housing First Project of Cleveland to expand supportive housing opportunities to 1,000. Currently there are almost 500 beds and new sites scheduled to open every two years. Next site scheduled to open Spring 2011, and each site has an agreement for a 10% set-aside for Veterans. 2. Continued utilization of the HUD-VASH vouchers with expansion to additional counties (currently in two major counties, requesting continued expansion in additional counties). 3. Continued collaboration with mental health agencies that have plans to expand to surrounding counties with either VA Grant and Per Diem or Housing First in two additional counties. (Lorain and Akron)</p>
<p>Help with finding a job or getting employment</p>	<p>1. Utilize the services of Veterans that are scheduled to be hired in 2011 to facilitate connecting Veterans to jobs in the community. 2. Continue to utilize students in assignments to identify job opportunities in this area and to transmit this information to Veterans in the community who are job hunting. 3. Continue to interface and referral with community agencies for employment and the VA Compensated Work Therapy - Supported Employment programs. 4. Continue to advocate for expansion of work therapy programs in the VA. Cleveland has a high unemployment rate of 10.8%.</p>
<p>Dental care</p>	<p>1. Increase outreach efforts to schedule or assist in scheduling homeless Veterans for dental care. 2. Increase education to staff and Veterans regarding criteria and accessibility of dental care for this population.</p>

***The Action Plan outlines proposed strategies the local VA program and its community partners will use to address its priority needs in FY 2011. Updates on these 2011 strategies to address priority needs will be reported in next year's CHALENG report.**

CHALENG 2010 Survey Results Summary

VISN: 10

Site: VAMC Dayton, OH - 552

CHALENG data is collected from two surveys. The CHALENG Point of Contact (POC) Survey is a self-administered questionnaire completed by the local VA homeless Veteran coordinator. The CHALENG Participant Survey is completed by federal, state, county, city, non-profit and for-profit agency representatives, as well as local VA staff and homeless Veterans themselves. Data was collected in the summer/fall of 2010.

A. Homeless Veteran Sub-populations (CHALENG Point of Contact Survey)*

[Note: Beginning in FY 2010, CHALENG no longer collects estimate of the local homeless Veterans population. HUD's *The Veteran Homelessness: A Supplemental Report to the Annual Homeless Assessment Report (AHAR) to Congress* will now be issued annually and report the single federal estimate on homelessness among Veterans.]

1. Number of Homeless Veteran Families (Veterans with minor dependents) Served in FY 2010 by Local VA Homeless Program: 11

2. Number of Homeless Veterans served in FY 2010 who needed treatment in an extended care facility (e.g., VA or community nursing home, state soldier's home) for conditions due to aging: 1

B. Housing Availability and Need (CHALENG Point of Contact Survey)

Housing type	# of Veteran-specific Beds in area*
Emergency Beds	15
Transitional Housing Beds	85
Permanent Housing Beds	60

*These are the number of beds that Veterans can access that are Veteran-specific.

Homeless Veteran Program Beds actually on VA campus?*	
Emergency Beds	No
Transitional Housing Beds	Yes
Permanent Housing Beds	No

*Beds in programs operated by private, community partners through VA Grant and Per Diem, VA Healthcare for Homeless Veterans, and other funding sources.

C. Rating of Need by CHALENG Participants (Number of Veteran Participants: 20.
Number of provider (VA and non-VA) participants: 23.)

Need Ranking (1=Need Unmet 5= Need Met)	Site homeless Veteran mean score	Site provider mean score	VHA Mean Score (nationwide)*(all participants)
Personal hygiene (shower, haircut, etc.)	3.78	3.33	3.74
Food	4.26	3.82	3.86
Clothing	3.74	3.64	3.62
Emergency (immediate) shelter	4.21	3.73	3.55
Transitional living facility or halfway house	3.11	3.64	3.45
Long-term, permanent housing	2.42	3.35	2.90
Detoxification from substances	4.33	3.78	3.69
Treatment for substance abuse	4.32	3.96	3.84
Services for emotional or psychiatric problems	3.94	3.70	3.71
Treatment for dual diagnosis	3.41	3.78	3.51
Family counseling	3.21	3.10	3.11
Medical services	3.84	4.04	4.04
Women's health care	2.56	3.60	3.17
Help with medication	3.61	3.70	3.87
Drop-in center or day program	3.87	3.19	3.15
AIDS/HIV testing/counseling	4.06	3.71	3.63
TB testing and Treatment	4.25	3.90	3.90
Legal assistance to help restore a driver's license	2.88	2.55	2.87
Hepatitis C testing	3.56	3.67	3.70
Dental care	2.79	3.13	2.91
Eye care	3.33	3.43	3.38
Glasses	3.61	3.36	3.35
VA disability/pension	2.72	3.83	3.14
Welfare payments	2.75	3.14	2.80
SSI/SSD process	2.69	2.91	2.95
Guardianship (financial)	3.39	3.15	2.84
Help managing money	3.59	2.95	3.13
Job training	3.29	3.26	2.96
Help with finding a job or getting employment	3.53	3.30	3.02
Help getting needed documents or identification	4.06	3.48	3.50
Help with transportation	3.84	2.82	3.31
Education	3.28	3.27	3.19
Child care	3.00	2.95	2.64
Family reconciliation assistance	2.78	2.71	2.73
Discharge upgrade	2.88	3.10	2.96
Spiritual	4.17	3.13	3.55
Re-entry services for incarcerated veterans	2.88	2.57	2.94
Elder health care	3.25	3.32	3.11
Credit counseling	2.82	2.76	2.85
Legal assistance for child support issues	2.88	2.23	2.70
Legal assistance for outstanding warrants/fines	3.00	2.32	2.75
Help developing social network	3.33	3.04	3.14

****VHA: Veterans Healthcare Administration (139 reporting POC sites, n= 19,847, mean score of individuals).**

D. Nature of Collaborative Activities Between VA and Community in Serving Homeless Veterans*

1. Community Ratings of VA/Community Integration*

Integration Scale: 1 (low) to 5 (high)	Site Mean Score	VHA (nationwide) Mean Score**
VA Accessibility: In general, how accessible do you feel VA services are to homeless Veterans in the community?	4.11	3.53
VA Service Coordination: Rate the ability of the VA to coordinate clinical services for homeless Veterans with your agency.	4.00	3.55

*Scores of non-VA community agency representatives who completed Participant Survey.

**VHA: Veterans Healthcare Administration (139 reporting POC sites, n=4,270).

2. Community Rating of Level of Collaborative Activity between VA and Community Agencies

Implementation Scale 1 = None , no steps taken to initiate implementation of the strategy. 2 = Low , in planning and/or initial minor steps taken. 3 = Moderate , significant steps taken but full implementation not achieved. 4 = High , strategy fully implemented.	Site Mean Score	VHA (nationwide) Mean Score**
Interagency Coordinating Body - Representatives from the VA and your agency meet formally to exchange information, do needs assessment, plan formal agreements, and promote access to services.	3.18	2.60
Co-location of Services - Services from the VA and your agency provided in one location.	2.33	1.91
Cross-Training - Staff training about the objectives, procedures and services of the VA and your agency.	1.94	2.00
Interagency Agreements/ Memoranda of Understanding - Formal and informal agreements between the VA and your agency covering such areas as collaboration, referrals, sharing client information, or coordinating services.	2.56	2.31
Interagency Client Tracking Systems/ Management Information Systems - Shared computer tracking systems that link the VA and your agency to promote information sharing, referrals, and client access.	1.61	1.68
Pooled/Joint Funding - Combining or layering funds from the VA and your agency to create new resources or services.	2.00	1.73
Uniform Applications, Eligibility Criteria, and Intake Assessments – Standardized form that the client fills out only once to apply for services at the VA and your agency.	2.11	1.84
Interagency Service Delivery Team/ Provider Coalition - Service team comprised of staff from the VA and your agency to assist clients with multiple needs.	2.89	2.22
Consolidation of Programs/ Agencies - Combining programs from the VA and your agency under one administrative structure to integrate service delivery.	2.39	2.02
Flexible Funding – Flexible funding used to fill gaps or acquire additional resources to further systems integration; e.g. existence of a VA and/or community agency fund used for contingencies, emergencies, or to purchase services not usually available for clients.	1.59	1.68
Use of Special Waivers - Waiving requirements for funding, eligibility or service delivery to reduce barriers to service, eliminate duplication of services, or promote access to comprehensive services; e.g. VA providing services to clients typically ineligible for certain services (e.g. dental) or community agencies waiving entry requirements to allow clients access to services.	1.89	1.74
System Integration Coordinator Position - A specific staff position focused on systems integration activities such as identifying agencies, staffing interagency meetings, and assisting with joint proposal development.	2.00	1.89

*Scored of non-VA community agency representatives who completed Participant Survey.

**VHA: Veterans Healthcare Administration (139 reporting POC sites, n=4,270. Mean score of sites).

E. Action Plans: FY 2010 and FY 2011

1. CHALENG Point of Contact Action Plan for FY 2010: Results*

Long-term, permanent housing	We received 25 additional HUD/VASH vouchers to increase permanent housing.
Dental care	Dental needs remain a difficult area to address, due to high demand in the community. Talks are underway to re-institute the Homeless Veteran Dental Program (HVDP) at the Dayton VA to help address this challenge.
Help with finding a job or getting employment	We refer Veterans to the Job Center (community employment service) and to our own Veterans Industries staff to assist with resumes, job readiness and referrals.

***The Action Plan consisted of proposed strategies the local VA program and its community partners *would use* to address priority needs in FY 2010. This is the final report about progress towards achieving FY 2010 priority needs.**

2. FY 2010 Best Practice Example

None	None
-------------	------

3. CHALENG Point of Contact Action Plan for FY 2011: Proposed*

Long-term, permanent housing	Requests are planned for additional HUD-VASH vouchers for FY 2011
Dental care	Homeless Veteran Dental Program will be re-instated in FY 2011.
Help with finding a job or getting employment	Vocational rehabilitation specialist will be added in FY 2011 to work specifically with homeless Veterans.

*The Action Plan outlines proposed strategies the local VA program and its community partners *will use* to address its priority needs in FY 2011. Updates on these 2011 strategies to address priority needs will be reported in next year's CHALENG report.

CHALENG 2010 Survey Results Summary

VISN: 10

Site: VAOPC Columbus, OH - 757 (Grove City, OH)

CHALENG data is collected from two surveys. The CHALENG Point of Contact (POC) Survey is a self-administered questionnaire completed by the local VA homeless Veteran coordinator. The CHALENG Participant Survey is completed by federal, state, county, city, non-profit and for-profit agency representatives, as well as local VA staff and homeless Veterans themselves. Data was collected in the summer/fall of 2010.

A. Homeless Veteran Sub-populations (CHALENG Point of Contact Survey)*

[Note: Beginning in FY 2010, CHALENG no longer collects estimate of the local homeless Veterans population. HUD's *The Veteran Homelessness: A Supplemental Report to the Annual Homeless Assessment Report (AHAR) to Congress* will now be issued annually and report the single federal estimate on homelessness among Veterans.]

1. Number of Homeless Veteran Families (Veterans with minor dependents) Served in FY 2010 by Local VA Homeless Program: 24

2. Number of Homeless Veterans served in FY 2010 who needed treatment in an extended care facility (e.g., VA or community nursing home, state soldier's home) for conditions due to aging: 1

B. Housing Availability and Need (CHALENG Point of Contact Survey)

Housing type	# of Veteran-specific Beds in area*
Emergency Beds	15
Transitional Housing Beds	44
Permanent Housing Beds	122

*These are the number of beds that Veterans can access that are Veteran-specific.

Homeless Veteran Program Beds actually on VA campus?*	
Emergency Beds	No
Transitional Housing Beds	No
Permanent Housing Beds	No

*Beds in programs operated by private, community partners through VA Grant and Per Diem, VA Healthcare for Homeless Veterans, and other funding sources.

C. Rating of Need by CHALENG Participants (Number of Veteran Participants: 42.
Number of provider (VA and non-VA) participants: 28.)

Need Ranking (1=Need Unmet 5= Need Met)	Site homeless Veteran mean score	Site provider mean score	VHA Mean Score (nationwide)*(all participants)
Personal hygiene (shower, haircut, etc.)	4.03	3.36	3.74
Food	4.12	3.86	3.86
Clothing	3.80	3.61	3.62
Emergency (immediate) shelter	3.95	3.64	3.55
Transitional living facility or halfway house	3.71	3.68	3.45
Long-term, permanent housing	3.55	3.43	2.90
Detoxification from substances	3.78	3.69	3.69
Treatment for substance abuse	3.95	4.08	3.84
Services for emotional or psychiatric problems	3.77	3.92	3.71
Treatment for dual diagnosis	3.56	3.81	3.51
Family counseling	3.26	3.14	3.11
Medical services	4.20	4.18	4.04
Women's health care	2.76	3.93	3.17
Help with medication	4.10	3.93	3.87
Drop-in center or day program	2.75	2.96	3.15
AIDS/HIV testing/counseling	3.48	3.81	3.63
TB testing and Treatment	4.17	4.07	3.90
Legal assistance to help restore a driver's license	2.62	2.71	2.87
Hepatitis C testing	3.92	3.82	3.70
Dental care	3.05	2.89	2.91
Eye care	3.71	3.50	3.38
Glasses	3.56	3.57	3.35
VA disability/pension	3.14	3.93	3.14
Welfare payments	2.73	3.52	2.80
SSI/SSD process	2.53	3.30	2.95
Guardianship (financial)	2.90	3.26	2.84
Help managing money	3.59	3.64	3.13
Job training	3.00	3.37	2.96
Help with finding a job or getting employment	3.11	3.70	3.02
Help getting needed documents or identification	3.84	3.41	3.50
Help with transportation	3.39	3.39	3.31
Education	3.14	3.14	3.19
Child care	2.61	2.42	2.64
Family reconciliation assistance	2.94	2.80	2.73
Discharge upgrade	2.94	3.00	2.96
Spiritual	3.56	2.89	3.55
Re-entry services for incarcerated veterans	2.83	3.46	2.94
Elder health care	3.03	3.37	3.11
Credit counseling	3.60	2.74	2.85
Legal assistance for child support issues	2.60	2.46	2.70
Legal assistance for outstanding warrants/fines	2.72	2.74	2.75
Help developing social network	3.15	3.04	3.14

****VHA: Veterans Healthcare Administration (139 reporting POC sites, n= 19,847, mean score of individuals).**

D. Nature of Collaborative Activities Between VA and Community in Serving Homeless Veterans*

1. Community Ratings of VA/Community Integration*

Integration Scale: 1 (low) to 5 (high)	Site Mean Score	VHA (nationwide) Mean Score**
VA Accessibility: In general, how accessible do you feel VA services are to homeless Veterans in the community?	4.50	3.53
VA Service Coordination: Rate the ability of the VA to coordinate clinical services for homeless Veterans with your agency.	4.83	3.55

*Scores of non-VA community agency representatives who completed Participant Survey.

**VHA: Veterans Healthcare Administration (139 reporting POC sites, n=4,270).

2. Community Rating of Level of Collaborative Activity between VA and Community Agencies

Implementation Scale 1 = None , no steps taken to initiate implementation of the strategy. 2 = Low , in planning and/or initial minor steps taken. 3 = Moderate , significant steps taken but full implementation not achieved. 4 = High , strategy fully implemented.	Site Mean Score	VHA (nationwide) Mean Score**
Interagency Coordinating Body - Representatives from the VA and your agency meet formally to exchange information, do needs assessment, plan formal agreements, and promote access to services.	3.67	2.60
Co-location of Services - Services from the VA and your agency provided in one location.	3.00	1.91
Cross-Training - Staff training about the objectives, procedures and services of the VA and your agency.	3.00	2.00
Interagency Agreements/ Memoranda of Understanding - Formal and informal agreements between the VA and your agency covering such areas as collaboration, referrals, sharing client information, or coordinating services.	3.20	2.31
Interagency Client Tracking Systems/ Management Information Systems - Shared computer tracking systems that link the VA and your agency to promote information sharing, referrals, and client access.	1.80	1.68
Pooled/Joint Funding - Combining or layering funds from the VA and your agency to create new resources or services.	2.80	1.73
Uniform Applications, Eligibility Criteria, and Intake Assessments – Standardized form that the client fills out only once to apply for services at the VA and your agency.	3.00	1.84
Interagency Service Delivery Team/ Provider Coalition - Service team comprised of staff from the VA and your agency to assist clients with multiple needs.	3.60	2.22
Consolidation of Programs/ Agencies - Combining programs from the VA and your agency under one administrative structure to integrate service delivery.	3.20	2.02
Flexible Funding – Flexible funding used to fill gaps or acquire additional resources to further systems integration; e.g. existence of a VA and/or community agency fund used for contingencies, emergencies, or to purchase services not usually available for clients.	1.80	1.68
Use of Special Waivers - Waiving requirements for funding, eligibility or service delivery to reduce barriers to service, eliminate duplication of services, or promote access to comprehensive services; e.g. VA providing services to clients typically ineligible for certain services (e.g. dental) or community agencies waiving entry requirements to allow clients access to services.	1.60	1.74
System Integration Coordinator Position - A specific staff position focused on systems integration activities such as identifying agencies, staffing interagency meetings, and assisting with joint proposal development.	3.00	1.89

*Scored of non-VA community agency representatives who completed Participant Survey.

**VHA: Veterans Healthcare Administration (139 reporting POC sites, n=4,270. Mean score of sites).

E. Action Plans: FY 2010 and FY 2011

1. CHALENG Point of Contact Action Plan for FY 2010: Results*

Emergency (immediate) shelter	Fifteen additional emergency contract beds have been awarded utilizing HCHV (Healthcare for Homeless Veterans) residential contract funds.
Long-term, permanent housing	Twenty-five additional HUD-VASH vouchers have been allocated to our site, with an additional 50 permanent supportive housing units to come online during FY 2011 through the Commons at Livingston program.
Help with finding a job or getting employment	Nine additional Transitional Work Experience (TWE) positions have been created within the VA. Our Compensated Work Therapy program continues to provide homeless Veterans linkages to competitive employers in the community.

***The Action Plan consisted of proposed strategies the local VA program and its community partners would use to address priority needs in FY 2010. This is the final report about progress towards achieving FY 2010 priority needs.**

2. FY 2010 Best Practice Example

Long-term, permanent housing	During FY 2009, a partnership was established with a project-based permanent supportive housing program, National Church Residences. This has increased our capacity for supportive housing placement outside of HUD-VASH. Our collaboration with National Church Residences has provided safe, secure and affordable housing to chronically homeless Veterans who have had difficulty with placement into housing provided by private landlords through the HUD-VASH program.
-------------------------------------	--

3. CHALENG Point of Contact Action Plan for FY 2011: Proposed*

<p>Long-term, permanent housing</p>	<p>Commons at Livingston is a collaborative project between the Chalmers P. Wylie VA Ambulatory Care Center and National Church Residences, a local non-profit provider of permanent supportive housing. The Commons will provide 50 units of permanent supportive housing to formerly homeless Veterans. Construction of this facility is expected to be completed by Summer 2011. Formal and information partnerships will continue to be developed with community housing providers to increase capacity for permanent supportive housing in Columbus VA Ambulatory Care Center's catchment area. We will especially be focusing on rural areas to establish both formal and informal relationships with housing providers in those rural areas.</p>
<p>Emergency (immediate) shelter</p>	<p>Assuming our facility receives additional contract funding during FY 2011, we will continue to pursue the establishment of contracts for special populations, including female Veterans, Veterans with dependents and Veterans living in rural areas. Our programs will continue to work on establishing both formal and informal relationships with emergency housing providers within our catchment area.</p>
<p>Help with finding a job or getting employment</p>	<p>The VA Compensated Work Therapy (CWT) program has established 9 internal Transitional Work Experience (TWE) positions for currently or formerly homeless Veterans. This program intends to establish additional TWE positions in the community to further expand work opportunities for Veterans. CWT staff will continue to work with community employers to provide competitive employment opportunities for currently and formerly homeless Veterans.</p>

***The Action Plan outlines proposed strategies the local VA program and its community partners will use to address its priority needs in FY 2011. Updates on these 2011 strategies to address priority needs will be reported in next year's CHALENG report.**