

## CHALENG 2010 Survey Results Summary

**VISN: 22**

**Site: VA Greater Los Angeles HCS (VAOPC Los Angeles - 691GE, VAMC Sepulveda - 691A4 and VAMC West Los Angeles - 691)**

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: 520
  
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: 72

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

Housing type	# of Veteran-specific Beds in area*
Emergency Beds	55
Transitional Housing Beds	1,576
Permanent Housing Beds	2,279

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

Homeless Veteran Program Beds actually on VA campus?*	
Emergency Beds	Yes
Transitional Housing Beds	Yes
Permanent Housing Beds	Yes

\*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: 308. Number of provider (VA and non-VA) participants: 55.)

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.)	4.12	3.48	3.74
Food	4.22	3.63	3.86
Clothing	3.83	3.48	3.62
Emergency (immediate) shelter	4.23	3.15	3.55
Transitional living facility or halfway house	4.10	3.48	3.45
Long-term, permanent housing	3.21	2.86	2.90
Detoxification from substances	4.03	3.32	3.69
Treatment for substance abuse	4.02	3.67	3.84
Services for emotional or psychiatric problems	3.86	3.23	3.71
Treatment for dual diagnosis	3.61	3.15	3.51
Family counseling	3.09	2.83	3.11
Medical services	4.27	3.93	4.04
Women's health care	2.92	3.50	3.17
Help with medication	4.12	3.57	3.87
Drop-in center or day program	3.28	3.07	3.15
AIDS/HIV testing/counseling	3.67	3.61	3.63
TB testing and Treatment	4.27	4.04	3.90
Legal assistance to help restore a driver's license	3.21	3.11	2.87
Hepatitis C testing	3.77	3.67	3.70
Dental care	3.25	3.13	2.91
Eye care	3.65	3.30	3.38
Glasses	3.53	3.26	3.35
VA disability/pension	3.03	3.35	3.14
Welfare payments	2.79	3.07	2.80
SSI/SSD process	3.15	3.17	2.95
Guardianship (financial)	2.80	2.98	2.84
Help managing money	3.66	3.13	3.13
Job training	2.96	3.35	2.96
Help with finding a job or getting employment	3.11	3.30	3.02
Help getting needed documents or identification	3.80	3.31	3.50
Help with transportation	3.73	3.37	3.31
Education	3.43	3.28	3.19
Child care	2.85	2.53	2.64
Family reconciliation assistance	2.95	2.77	2.73
Discharge upgrade	2.96	2.96	2.96
Spiritual	3.56	3.17	3.55
Re-entry services for incarcerated veterans	3.11	3.33	2.94
Elder health care	3.19	3.26	3.11
Credit counseling	2.78	2.76	2.85
Legal assistance for child support issues	2.77	2.98	2.70
Legal assistance for outstanding warrants/fines	3.08	3.06	2.75
Help developing social network	3.38	3.30	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\*

<b>Integration Scale:</b> 1 (low) to 5 (high)	<b>Site Mean Score</b>	<b>VHA (nationwide) Mean Score**</b>
<b>VA Accessibility:</b> In general, how accessible do you feel VA services are to homeless Veterans in the community?	3.61	3.53
<b>VA Service Coordination:</b> Rate the ability of the VA to coordinate clinical services for homeless Veterans with your agency.	3.71	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

<b>Implementation Scale</b> <b>1 = None</b> , no steps taken to initiate implementation of the strategy. <b>2 = Low</b> , in planning and/or initial minor steps taken. <b>3 = Moderate</b> , significant steps taken but full implementation not achieved. <b>4 = High</b> , strategy fully implemented.	<b>Site Mean Score</b>	<b>VHA (nationwide) Mean Score**</b>
<b>Interagency Coordinating Body</b> - Representatives from the VA and your agency meet formally to exchange information, do needs assessment, plan formal agreements, and promote access to services.	3.05	2.60
<b>Co-location of Services</b> - Services from the VA and your agency provided in one location.	2.00	1.91
<b>Cross-Training</b> - Staff training about the objectives, procedures and services of the VA and your agency.	2.42	2.00
<b>Interagency Agreements/ Memoranda of Understanding</b> - Formal and informal agreements between the VA and your agency covering such areas as collaboration, referrals, sharing client information, or coordinating services.	3.02	2.31
<b>Interagency Client Tracking Systems/ Management Information Systems</b> - Shared computer tracking systems that link the VA and your agency to promote information sharing, referrals, and client access.	1.63	1.68
<b>Pooled/Joint Funding</b> - Combining or layering funds from the VA and your agency to create new resources or services.	2.07	1.73
<b>Uniform Applications, Eligibility Criteria, and Intake Assessments</b> – Standardized form that the client fills out only once to apply for services at the VA and your agency.	2.10	1.84
<b>Interagency Service Delivery Team/ Provider Coalition</b> - Service team comprised of staff from the VA and your agency to assist clients with multiple needs.	2.66	2.22
<b>Consolidation of Programs/ Agencies</b> - Combining programs from the VA and your agency under one administrative structure to integrate service delivery.	2.41	2.02
<b>Flexible Funding</b> – 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
<b>Use of Special Waivers</b> - 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.	1.95	1.74
<b>System Integration Coordinator Position</b> - 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\***

<b>Long-term, permanent housing</b>	The VASH program currently has over 1,000 participants, over 40 staff, and relationships with seven public housing authorities. Contract social workers were converted to VA employees, promoting staff retention. Office space and securing laptops remains an issue.
<b>Transitional living facility or halfway house</b>	Barracks "safe haven" program opened in FY 2010 with 40 beds. New programs targeting OIF/OEF (Operation Iraqi Freedom/Operation Enduring Freedom) Veterans (New Directions Chris' House, Volunteers of America Hollywood) also opened.
<b>Services for emotional or psychiatric problems</b>	Many VA Grant and Per Diem programs have altered their admission criteria to accept Veterans who are dually diagnosed and/or are on restricted medications (e.g., pain killers). This has helped reduce the waiting lists for existing programs serving Veterans with such characteristics.

**\*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**

	Veteran to Home Project 60 (VHP60) is a partnership between VA, the L.A. County Department of Mental Health and private nonprofit agencies. Targeting 60 high-risk, chronically homeless Veterans for collaborative intervention (housing and treatment) VHP60 uses integrated inter-agencies supportive services teams (VA and community staff). These teams identify high-risk homeless Veterans, place these Veterans into safe housing (HUD-VASH) and case manage them. VA and community partners provide: medical, mental health, and substance abuse treatment; vocational rehabilitation and assistance in securing benefits; and other ancillary services.
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### 3. CHALENG Point of Contact Action Plan for FY 2011: Proposed\*

<b>Long-term, permanent housing</b>	Goal is to utilize over 1,800 allocated HUD-VASH vouchers through arrangements with seven different public housing authorities.
<b>Help developing social network</b>	Explore the use of Vet2Vet peer support specialists in working with VASH participants living in their own apartments. Currently piloting a project where Vet2Vet members visit participants in home tele-health program: ensuring equipment works, individual knows how to use it, and offering informal support.
<b>Transitional living facility or halfway house</b>	Develop new transitional housing programs targeting women, families, and/or underserved areas (i.e., northern and eastern parts of catchment area outside of central Los Angeles).

\*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: 22**

**Site: VA Southern Nevada HCS - 593**

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: 60
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)**

<b>Housing type</b>	<b># of Veteran-specific Beds in area*</b>
Emergency Beds	9
Transitional Housing Beds	288
Permanent Housing Beds	430

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

<b>Homeless Veteran Program Beds actually on VA campus?*</b>	
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:  
192. Number of provider (VA and non-VA) participants: 72.)

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.)	4.12	3.48	3.74
Food	4.10	3.52	3.86
Clothing	3.78	3.34	3.62
Emergency (immediate) shelter	3.94	3.05	3.55
Transitional living facility or halfway house	3.71	3.22	3.45
Long-term, permanent housing	3.19	3.09	2.90
Detoxification from substances	3.76	3.24	3.69
Treatment for substance abuse	3.91	3.27	3.84
Services for emotional or psychiatric problems	3.77	3.33	3.71
Treatment for dual diagnosis	3.61	3.09	3.51
Family counseling	3.15	3.16	3.11
Medical services	4.14	3.70	4.04
Women's health care	3.05	3.40	3.17
Help with medication	3.91	3.57	3.87
Drop-in center or day program	3.17	2.65	3.15
AIDS/HIV testing/counseling	3.36	3.41	3.63
TB testing and Treatment	4.19	3.65	3.90
Legal assistance to help restore a driver's license	3.01	2.92	2.87
Hepatitis C testing	3.61	3.59	3.70
Dental care	3.55	3.15	2.91
Eye care	3.74	3.35	3.38
Glasses	3.79	3.35	3.35
VA disability/pension	3.27	3.56	3.14
Welfare payments	2.78	3.24	2.80
SSI/SSD process	2.91	3.37	2.95
Guardianship (financial)	2.94	3.00	2.84
Help managing money	3.32	2.89	3.13
Job training	2.85	3.26	2.96
Help with finding a job or getting employment	3.01	3.15	3.02
Help getting needed documents or identification	3.81	3.20	3.50
Help with transportation	3.84	3.29	3.31
Education	3.17	3.28	3.19
Child care	2.65	2.63	2.64
Family reconciliation assistance	2.73	2.80	2.73
Discharge upgrade	2.90	3.06	2.96
Spiritual	3.26	3.37	3.55
Re-entry services for incarcerated veterans	3.03	3.28	2.94
Elder health care	3.17	3.25	3.11
Credit counseling	3.01	3.02	2.85
Legal assistance for child support issues	2.80	2.88	2.70
Legal assistance for outstanding warrants/fines	2.90	3.20	2.75
Help developing social network	3.11	3.17	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\*

<b>Integration Scale:</b> 1 (low) to 5 (high)	<b>Site Mean Score</b>	<b>VHA (nationwide) Mean Score**</b>
<b>VA Accessibility:</b> In general, how accessible do you feel VA services are to homeless Veterans in the community?	3.74	3.53
<b>VA Service Coordination:</b> Rate the ability of the VA to coordinate clinical services for homeless Veterans with your agency.	3.83	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

<b>Implementation Scale</b> <b>1 = None</b> , no steps taken to initiate implementation of the strategy. <b>2 = Low</b> , in planning and/or initial minor steps taken. <b>3 = Moderate</b> , significant steps taken but full implementation not achieved. <b>4 = High</b> , strategy fully implemented.	<b>Site Mean Score</b>	<b>VHA (nationwide) Mean Score**</b>
<b>Interagency Coordinating Body</b> - Representatives from the VA and your agency meet formally to exchange information, do needs assessment, plan formal agreements, and promote access to services.	3.02	2.60
<b>Co-location of Services</b> - Services from the VA and your agency provided in one location.	1.75	1.91
<b>Cross-Training</b> - Staff training about the objectives, procedures and services of the VA and your agency.	2.06	2.00
<b>Interagency Agreements/ Memoranda of Understanding</b> - 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
<b>Interagency Client Tracking Systems/ Management Information Systems</b> - Shared computer tracking systems that link the VA and your agency to promote information sharing, referrals, and client access.	1.45	1.68
<b>Pooled/Joint Funding</b> - Combining or layering funds from the VA and your agency to create new resources or services.	1.96	1.73
<b>Uniform Applications, Eligibility Criteria, and Intake Assessments</b> – Standardized form that the client fills out only once to apply for services at the VA and your agency.	1.90	1.84
<b>Interagency Service Delivery Team/ Provider Coalition</b> - Service team comprised of staff from the VA and your agency to assist clients with multiple needs.	2.42	2.22
<b>Consolidation of Programs/ Agencies</b> - Combining programs from the VA and your agency under one administrative structure to integrate service delivery.	2.08	2.02
<b>Flexible Funding</b> – 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.	1.81	1.68
<b>Use of Special Waivers</b> - 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.	1.96	1.74
<b>System Integration Coordinator Position</b> - A specific staff position focused on systems integration activities such as identifying agencies, staffing interagency meetings, and assisting with joint proposal development.	1.91	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\***

<b>Emergency (immediate) shelter</b>	Emergency beds have increased from six to nine. Contracts have been submitted to address immediate housing need and the outcome is pending.
<b>Help with transportation</b>	Obtaining funds for bus passes remains problematic. We are very dependent on donations made to Volunteer Service and by community partners. With encouragement from VA liaisons, VA Grant and Per Diem programs have expanded and/or initiated transportation services to assist Veterans getting to appointments.
<b>Help developing social network</b>	During FY 2010, several community organizations assisted with securing furniture and/or funds for Veterans moving into stable housing. HELP of Southern Nevada, Women’s Development Center, Rescue Mission, Hope Link, and North Las Vegas Elks have provide vouchers for furniture, moving expenses and some assistance for overdue utilities. The Southern Nevada Regional Housing Authority has proposed submitting a grant to obtain funds for assistance with rental deposits, moving expenses, furniture and utilities.

**\*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**

<b>Legal assistance for outstanding warrants/fines</b>	We have a working relationship with an attorney (Veteran) who has assisted us in resolving a few "fugitive felon" cases. Also, The Veteran Justice Outreach (VJO) Specialist has continued to work closely with the courts. Through his efforts, the courts are considering developing a Veterans court. This court will be able to address more specific needs of the Veteran and devise a more intensive treatment plan.
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**3. CHALENG Point of Contact Action Plan for FY 2011: Proposed\***

<b>Emergency (immediate) shelter</b>	1) Submit proposal to request additional contract beds and to increase/expand substance abuse contract beds. 2) Develop proposal to address needs for Veterans with children, homeless Veterans that are court mandated for treatment, and re-entry Veterans from jail and prisons.
<b>Transitional living facility or halfway house</b>	1) Educate and collaborate with community partners regarding applying for VA Grant and Per Diem and Health Care for Homeless Veterans contract funding. 2) Schedule technical training for grant writing. 3) Encourage participation in VA Homeless Summit events and other activities addressing VA homeless initiatives.
<b>Drop-in center or day program</b>	A proposal has been submitted to request a community resource center in Las Vegas. The proposed site would be available seven days a week and provide showers, respite, food/clothing and community wrap around services. Target date for implementation of the resource center would be within this fiscal year.

**\*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: 22**

**Site: VAMC Loma Linda, CA - 605**

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)\***

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1. Number of Homeless Veteran Families (Veterans with minor dependents) Served in FY 2010 by Local VA Homeless Program: 60
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)**

<b>Housing type</b>	<b># of Veteran-specific Beds in area*</b>
Emergency Beds	20
Transitional Housing Beds	83
Permanent Housing Beds	140

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

<b>Homeless Veteran Program Beds actually on VA campus?*</b>	
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: 191. Number of provider (VA and non-VA) participants: 80.)

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.)	3.69	2.91	3.74
Food	3.56	3.06	3.86
Clothing	3.44	2.90	3.62
Emergency (immediate) shelter	3.62	2.74	3.55
Transitional living facility or halfway house	3.64	2.92	3.45
Long-term, permanent housing	3.23	2.71	2.90
Detoxification from substances	3.86	3.24	3.69
Treatment for substance abuse	4.01	3.47	3.84
Services for emotional or psychiatric problems	3.94	3.50	3.71
Treatment for dual diagnosis	3.67	3.37	3.51
Family counseling	3.41	2.99	3.11
Medical services	4.26	3.58	4.04
Women's health care	3.16	3.29	3.17
Help with medication	4.11	3.29	3.87
Drop-in center or day program	3.12	2.47	3.15
AIDS/HIV testing/counseling	3.55	3.18	3.63
TB testing and Treatment	4.10	3.24	3.90
Legal assistance to help restore a driver's license	2.94	2.41	2.87
Hepatitis C testing	3.66	3.08	3.70
Dental care	2.52	2.48	2.91
Eye care	2.94	2.83	3.38
Glasses	2.78	2.78	3.35
VA disability/pension	3.01	3.40	3.14
Welfare payments	2.75	2.75	2.80
SSI/SSD process	3.13	2.82	2.95
Guardianship (financial)	2.79	2.67	2.84
Help managing money	3.12	2.52	3.13
Job training	3.02	2.83	2.96
Help with finding a job or getting employment	3.05	2.76	3.02
Help getting needed documents or identification	3.53	2.92	3.50
Help with transportation	3.30	3.16	3.31
Education	3.08	2.97	3.19
Child care	2.61	2.35	2.64
Family reconciliation assistance	2.85	2.52	2.73
Discharge upgrade	3.00	2.87	2.96
Spiritual	3.48	3.17	3.55
Re-entry services for incarcerated veterans	3.17	2.96	2.94
Elder health care	3.23	3.08	3.11
Credit counseling	2.75	2.41	2.85
Legal assistance for child support issues	2.70	2.51	2.70
Legal assistance for outstanding warrants/fines	2.89	2.55	2.75
Help developing social network	3.25	2.67	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\*

<b>Integration Scale:</b> 1 (low) to 5 (high)	<b>Site Mean Score</b>	<b>VHA (nationwide) Mean Score**</b>
<b>VA Accessibility:</b> In general, how accessible do you feel VA services are to homeless Veterans in the community?	3.38	3.53
<b>VA Service Coordination:</b> Rate the ability of the VA to coordinate clinical services for homeless Veterans with your agency.	3.44	3.55

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

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

<b>Implementation Scale</b> <b>1 = None</b> , no steps taken to initiate implementation of the strategy. <b>2 = Low</b> , in planning and/or initial minor steps taken. <b>3 = Moderate</b> , significant steps taken but full implementation not achieved. <b>4 = High</b> , strategy fully implemented.	<b>Site Mean Score</b>	<b>VHA (nationwide) Mean Score**</b>
<b>Interagency Coordinating Body</b> - Representatives from the VA and your agency meet formally to exchange information, do needs assessment, plan formal agreements, and promote access to services.	2.24	2.60
<b>Co-location of Services</b> - Services from the VA and your agency provided in one location.	1.65	1.91
<b>Cross-Training</b> - Staff training about the objectives, procedures and services of the VA and your agency.	2.00	2.00
<b>Interagency Agreements/ Memoranda of Understanding</b> - Formal and informal agreements between the VA and your agency covering such areas as collaboration, referrals, sharing client information, or coordinating services.	2.34	2.31
<b>Interagency Client Tracking Systems/ Management Information Systems</b> - Shared computer tracking systems that link the VA and your agency to promote information sharing, referrals, and client access.	1.65	1.68
<b>Pooled/Joint Funding</b> - Combining or layering funds from the VA and your agency to create new resources or services.	1.60	1.73
<b>Uniform Applications, Eligibility Criteria, and Intake Assessments</b> – Standardized form that the client fills out only once to apply for services at the VA and your agency.	2.09	1.84
<b>Interagency Service Delivery Team/ Provider Coalition</b> - Service team comprised of staff from the VA and your agency to assist clients with multiple needs.	2.06	2.22
<b>Consolidation of Programs/ Agencies</b> - Combining programs from the VA and your agency under one administrative structure to integrate service delivery.	1.82	2.02
<b>Flexible Funding</b> – 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.	1.86	1.68
<b>Use of Special Waivers</b> - 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.	1.68	1.74
<b>System Integration Coordinator Position</b> - A specific staff position focused on systems integration activities such as identifying agencies, staffing interagency meetings, and assisting with joint proposal development.	1.59	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\***

<b>Emergency (immediate) shelter</b>	Emergency shelter is an ongoing problem in San Bernardino County. We have enlisted the help of two U.S. Congressman's offices and other local government entities to work on this critical need for Veterans. Riverside County continues to add shelter beds and there seems to sufficient shelter space there for individuals and families.
<b>Long-term, permanent housing</b>	Permanent housing through HUD-VASH will increase to 215 beds during FY 2011. We have worked hard to encourage both San Bernardino and Riverside Counties to apply for vouchers when the funding is made available. Riverside County also has set-aside Section 8 vouchers for Veterans in addition to the HUD-VASH program.
<b>Dental care</b>	We will continue to promote access to dental services under the Homeless Veterans Dental Program (HVDP). The outreach social workers have identified low cost dental care in the community but will seek out providers for free preventive dental care. They will also work with local universities to seek free and low cost dental care for Veterans.

\*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**

<b>Legal assistance for outstanding warrants/fines</b>	We are working with the local courts and public defender office for addressing outstanding warrants and fines. We have been successful in assisting Veterans in receiving treatment in lieu of incarceration and community service in lieu of fines. Our success has also resulted in more Veterans with legal issues seeking and engaging in VA treatment.
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**3. CHALENG Point of Contact Action Plan for FY 2011: Proposed\***

<p><b>Emergency (immediate) shelter</b></p>	<p>We are working with local and state government entities as well as community partners to secure emergency housing in San Bernardino County where there is very limited bed availability except when cold weather shelters are in operation. Our outreach social workers continue to work with providers in both San Bernardino and Riverside County to identify new resources to provide emergency shelter.</p>
<p><b>Long-term, permanent housing</b></p>	<p>We continue to work with San Bernardino County Public Housing Authority to increase their requests for HUD-VASH vouchers beyond the 25 they are receiving for FY 2010. Riverside County Public Housing Authority has received 50 additional vouchers for FY 2010 and also have opened Section 8 vouchers for Veterans who are not in the HUD-VASH program. Our outreach social workers have identified a number of senior and disabled housing units that also have their own Section 8 housing available for low - income Veterans. They also continue to seek out and identify long-term, permanent housing programs and resources in the community.</p>
<p><b>Dental care</b></p>	<p>We clinicians will continue to promote access to dental services under the Homeless Veterans Dental Program (HVDP). The outreach social workers have identified low- cost dental care in the community but were not as successful seeking out providers for free preventive dental care as this is what is desired. The local university does not have preference for Veterans so there is a long wait list for services. Veterans can receive emergency care at the VA medical center.</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: 22**

**Site: VAMC Long Beach, CA - 600**

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: 20
  
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	10
Transitional Housing Beds	266
Permanent Housing Beds	495

\*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:  
165. Number of provider (VA and non-VA) participants: 41.)

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.)	3.88	3.35	3.74
Food	4.01	3.62	3.86
Clothing	3.70	3.35	3.62
Emergency (immediate) shelter	3.78	2.44	3.55
Transitional living facility or halfway house	4.06	2.71	3.45
Long-term, permanent housing	3.34	2.61	2.90
Detoxification from substances	3.82	2.92	3.69
Treatment for substance abuse	3.82	3.19	3.84
Services for emotional or psychiatric problems	3.79	3.03	3.71
Treatment for dual diagnosis	3.60	2.92	3.51
Family counseling	3.30	2.86	3.11
Medical services	4.30	3.79	4.04
Women's health care	3.18	3.42	3.17
Help with medication	4.06	3.25	3.87
Drop-in center or day program	3.54	2.89	3.15
AIDS/HIV testing/counseling	3.63	3.03	3.63
TB testing and Treatment	4.20	3.36	3.90
Legal assistance to help restore a driver's license	3.13	2.86	2.87
Hepatitis C testing	3.84	3.22	3.70
Dental care	2.86	2.63	2.91
Eye care	3.41	2.78	3.38
Glasses	3.31	2.81	3.35
VA disability/pension	3.08	3.26	3.14
Welfare payments	2.99	3.11	2.80
SSI/SSD process	3.06	2.97	2.95
Guardianship (financial)	2.94	2.83	2.84
Help managing money	3.45	2.74	3.13
Job training	3.24	2.79	2.96
Help with finding a job or getting employment	3.37	2.77	3.02
Help getting needed documents or identification	3.84	3.17	3.50
Help with transportation	3.63	2.87	3.31
Education	3.37	3.08	3.19
Child care	3.01	2.50	2.64
Family reconciliation assistance	3.01	2.54	2.73
Discharge upgrade	2.98	2.83	2.96
Spiritual	3.46	3.00	3.55
Re-entry services for incarcerated veterans	3.18	2.81	2.94
Elder health care	3.22	3.06	3.11
Credit counseling	2.83	2.69	2.85
Legal assistance for child support issues	2.85	2.86	2.70
Legal assistance for outstanding warrants/fines	3.12	2.78	2.75
Help developing social network	3.26	2.97	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\*

<b>Integration Scale:</b> 1 (low) to 5 (high)	<b>Site Mean Score</b>	<b>VHA (nationwide) Mean Score**</b>
<b>VA Accessibility:</b> In general, how accessible do you feel VA services are to homeless Veterans in the community?	3.29	3.53
<b>VA Service Coordination:</b> Rate the ability of the VA to coordinate clinical services for homeless Veterans with your agency.	3.30	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

<b>Implementation Scale</b> <b>1 = None</b> , no steps taken to initiate implementation of the strategy. <b>2 = Low</b> , in planning and/or initial minor steps taken. <b>3 = Moderate</b> , significant steps taken but full implementation not achieved. <b>4 = High</b> , strategy fully implemented.	<b>Site Mean Score</b>	<b>VHA (nationwide) Mean Score**</b>
<b>Interagency Coordinating Body</b> - Representatives from the VA and your agency meet formally to exchange information, do needs assessment, plan formal agreements, and promote access to services.	2.77	2.60
<b>Co-location of Services</b> - Services from the VA and your agency provided in one location.	1.72	1.91
<b>Cross-Training</b> - Staff training about the objectives, procedures and services of the VA and your agency.	2.23	2.00
<b>Interagency Agreements/ Memoranda of Understanding</b> - Formal and informal agreements between the VA and your agency covering such areas as collaboration, referrals, sharing client information, or coordinating services.	2.54	2.31
<b>Interagency Client Tracking Systems/ Management Information Systems</b> - Shared computer tracking systems that link the VA and your agency to promote information sharing, referrals, and client access.	1.85	1.68
<b>Pooled/Joint Funding</b> - Combining or layering funds from the VA and your agency to create new resources or services.	1.85	1.73
<b>Uniform Applications, Eligibility Criteria, and Intake Assessments</b> – Standardized form that the client fills out only once to apply for services at the VA and your agency.	2.00	1.84
<b>Interagency Service Delivery Team/ Provider Coalition</b> - Service team comprised of staff from the VA and your agency to assist clients with multiple needs.	2.58	2.22
<b>Consolidation of Programs/ Agencies</b> - Combining programs from the VA and your agency under one administrative structure to integrate service delivery.	2.31	2.02
<b>Flexible Funding</b> – 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.	1.92	1.68
<b>Use of Special Waivers</b> - 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.	1.73	1.74
<b>System Integration Coordinator Position</b> - 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\***

<b>Long-term, permanent housing</b>	We received additional 250 HUD-VASH vouchers for 2010
<b>Emergency (immediate) shelter</b>	We have received funding for emergency beds. Expected start-up time is January 2011.
<b>Dental care</b>	A new VA Grant and Per Diem program is starting in early FY 2011 which will make participants eligible for care under the Homeless Veteran Dental 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**

<b>Guardianship (financial)</b>	Recent literature supports the need for improved management of financial resources for homeless Veterans. According to the 2009 CHALENG Survey, 10,701 consumers interviewed nationwide ranked financial support number five among the top domains of need. The CHALENG report notes that although Veterans perceptions of unmet needs often varies depending on where they are at within the homeless continuum (literally homeless, residing in transitional housing, currently in permanent housing) credit counseling remained in the top ten domains of unmet need. Providers also ranked credit counseling, as one of the highest areas of need (CHALENG, 2010.) The Long Beach HCHV program was recently awarded a national seed grant for "Wiping the Slate Clean: Debt Repair for Previously Homeless Vets" It is a two-tiered program that will provide basic financial literacy workshops and long-term assistance with credit repair. The program was developed as a collaboration with the Consumer Credit Counseling Service of Orange County (CCCSOC), a HUD-approved credit counseling organization.
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**3. CHALENG Point of Contact Action Plan for FY 2011: Proposed\***

<b>Long-term, permanent housing</b>	a. Increase the number of available HUD-VASH vouchers. b. Providing financial counseling workshops and long term credit repair assistance that will aid Veterans with improving their money management skills, and allow them to pay down debt which will help them to be able to financially afford and manage permanent housing.
<b>Emergency (immediate) shelter</b>	a. Healthcare for Homeless Veteran contract housing for short-term (+60 days) emergency housing and social rehabilitation detox. b. Improve collaboration with community partners to better streamline outreach process for both VA and community partners.
<b>Dental care</b>	a. Expanding VA Grant and Per Diem program, more beds means more Veterans will be eligible for dental care under the Homeless Veteran Dental Program. b. Increase education to Veterans about the dental care benefits.

**\*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: 22**

**Site: VAMC San Diego, CA - 664**

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: 26
  
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: 4

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

Housing type	# of Veteran-specific Beds in area*
Emergency Beds	145
Transitional Housing Beds	456
Permanent Housing Beds	685

\*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:  
339. Number of provider (VA and non-VA) participants: 91.)

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.)	4.01	3.45	3.74
Food	4.12	3.80	3.86
Clothing	3.79	3.62	3.62
Emergency (immediate) shelter	3.86	2.85	3.55
Transitional living facility or halfway house	3.92	3.40	3.45
Long-term, permanent housing	2.97	2.85	2.90
Detoxification from substances	4.10	3.34	3.69
Treatment for substance abuse	4.24	3.77	3.84
Services for emotional or psychiatric problems	3.98	3.32	3.71
Treatment for dual diagnosis	3.77	3.15	3.51
Family counseling	3.42	3.05	3.11
Medical services	4.16	3.76	4.04
Women's health care	3.05	3.48	3.17
Help with medication	4.00	3.38	3.87
Drop-in center or day program	3.41	2.64	3.15
AIDS/HIV testing/counseling	3.89	3.38	3.63
TB testing and Treatment	4.41	3.81	3.90
Legal assistance to help restore a driver's license	3.44	3.06	2.87
Hepatitis C testing	3.87	3.66	3.70
Dental care	3.05	2.92	2.91
Eye care	3.41	2.95	3.38
Glasses	3.35	2.98	3.35
VA disability/pension	2.98	3.53	3.14
Welfare payments	2.69	2.86	2.80
SSI/SSD process	2.81	2.93	2.95
Guardianship (financial)	2.70	2.77	2.84
Help managing money	3.14	2.70	3.13
Job training	3.18	3.35	2.96
Help with finding a job or getting employment	3.16	3.31	3.02
Help getting needed documents or identification	3.97	3.39	3.50
Help with transportation	4.10	3.20	3.31
Education	3.62	3.23	3.19
Child care	2.66	2.34	2.64
Family reconciliation assistance	2.97	2.51	2.73
Discharge upgrade	2.79	2.67	2.96
Spiritual	3.64	3.17	3.55
Re-entry services for incarcerated veterans	3.21	2.88	2.94
Elder health care	3.09	2.88	3.11
Credit counseling	3.04	2.80	2.85
Legal assistance for child support issues	2.85	2.90	2.70
Legal assistance for outstanding warrants/fines	3.25	3.11	2.75
Help developing social network	3.36	3.11	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\*

<b>Integration Scale:</b> 1 (low) to 5 (high)	<b>Site Mean Score</b>	<b>VHA (nationwide) Mean Score**</b>
<b>VA Accessibility:</b> In general, how accessible do you feel VA services are to homeless Veterans in the community?	3.74	3.53
<b>VA Service Coordination:</b> Rate the ability of the VA to coordinate clinical services for homeless Veterans with your agency.	4.01	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

<b>Implementation Scale</b> <b>1 = None</b> , no steps taken to initiate implementation of the strategy. <b>2 = Low</b> , in planning and/or initial minor steps taken. <b>3 = Moderate</b> , significant steps taken but full implementation not achieved. <b>4 = High</b> , strategy fully implemented.	<b>Site Mean Score</b>	<b>VHA (nationwide) Mean Score**</b>
<b>Interagency Coordinating Body</b> - Representatives from the VA and your agency meet formally to exchange information, do needs assessment, plan formal agreements, and promote access to services.	3.19	2.60
<b>Co-location of Services</b> - Services from the VA and your agency provided in one location.	2.37	1.91
<b>Cross-Training</b> - Staff training about the objectives, procedures and services of the VA and your agency.	2.32	2.00
<b>Interagency Agreements/ Memoranda of Understanding</b> - Formal and informal agreements between the VA and your agency covering such areas as collaboration, referrals, sharing client information, or coordinating services.	2.94	2.31
<b>Interagency Client Tracking Systems/ Management Information Systems</b> - Shared computer tracking systems that link the VA and your agency to promote information sharing, referrals, and client access.	2.17	1.68
<b>Pooled/Joint Funding</b> - Combining or layering funds from the VA and your agency to create new resources or services.	2.45	1.73
<b>Uniform Applications, Eligibility Criteria, and Intake Assessments</b> – Standardized form that the client fills out only once to apply for services at the VA and your agency.	2.60	1.84
<b>Interagency Service Delivery Team/ Provider Coalition</b> - Service team comprised of staff from the VA and your agency to assist clients with multiple needs.	2.83	2.22
<b>Consolidation of Programs/ Agencies</b> - Combining programs from the VA and your agency under one administrative structure to integrate service delivery.	2.37	2.02
<b>Flexible Funding</b> – 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.	2.17	1.68
<b>Use of Special Waivers</b> - 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.	2.24	1.74
<b>System Integration Coordinator Position</b> - A specific staff position focused on systems integration activities such as identifying agencies, staffing interagency meetings, and assisting with joint proposal development.	2.27	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\***

<b>Long-term, permanent housing</b>	We are meeting the need through our HUD-VASH program and received an additional 250 vouchers for 2010
<b>Dental care</b>	Dental services will expand upon approval of our VA Grant and Per Diem beds in October 2010 with eligible Veterans receiving care under the Homeless Veteran Dental Program (HVDP).
<b>Emergency (immediate) shelter</b>	We received funding to develop central emergency beds. Expected start time will be in January 2011.

\*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**

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

<b>Long-term, permanent housing</b>	Continue advocating for additional HUD-VASH vouchers. Evaluate and increase involvement in community coalitions to support other community sponsored permanent housing options for general-homeless population for which Veterans will also be eligible.
<b>Emergency (immediate) shelter</b>	Work with community providers to advocate and obtain funding for year-round Veteran shelter. Continue to work with Downtown Partnership regarding conversion of local building to year-round shelter and "one stop" homeless resource center.
<b>Dental care</b>	Continue to work with local VAMC department to identify community dental clinics in North County to be included in Homeless Veteran Dental Program.

\*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.