

# **VA Secretary's Advisory Committee on Homeless Veterans Virtual Meeting (ACHV)**

**September 15, 2020**

**12:00-4:00 pm (EST)**

**Meeting Minutes**

The Advisory Committee on Homeless Veterans (ACHV) convened a four-hour public meeting, which primarily focused on the response to COVID-19 and other program updates on September 15, 2020.

## **Committee Members Present:**

Jennifer Leimaile Ho, Chair, ACHV; Commissioner, Minnesota Housing

Tammy Bellofatto, Executive Director of Bayaud Enterprises

Brad Bridwell, Director of National Operations for Cloudbreak Communities

Karl Calhoun, Director, Enterprise Development, Veteran and Homeless Services, Volunteers of America

Richard Cho, PhD, Chief Executive Officer, Connecticut Coalition to End Homelessness

Steven E. Como, President, Government Affairs Advisors

Tramecia Garner, LPCC, Chief Operating Officer and Housing Director, Swords to Plowshares

Sharon Green, Founder and Chief Executive Officer, Alethes Consulting Group, LLC

Dottie L. Guy, Program Manager at Dropbox, and Founder and Co-Lead of Vets@

Charlie D. Hall, President, Update Warrior Solution

Susan K. Lee, PhD, MSN, RN, CNE, CPXP, FAAN, Program Director and Assistant Professor, Health Care Disparities, Diversity and Advocacy Program

Kathryn Monet, Chief Executive Officer, National Coalition for Homeless Veterans

Bilal Mustafa, Community Organizer, Swords to Plowshares

Abraham Thompson Jr., DC VAMC Employee and Veteran

Jessica Venegas, Principal for Strategic Partnerships, Community Solutions International

## **Ex Officio Members Present**

Ivan Denton, Director, Office of National Programs, Department of Labor (DOL)

Cheryl Rawls, Assistant Deputy Under Secretary for Field Operations, Outreach and Stakeholder Engagement, Veterans Benefits Administration (VBA)

Emily Rosenoff, Director, Division of Long-Term Care Policy, Department of Health and Human Services (HHS)

Norm Suchar, Director, Office of Special Needs Assistance Programs, Department of Housing and Urban Development (HUD)

John McLaughlin, Department of Education (ED)

## **Ex Officio Member Absent**

Robert Marbut, Executive Director, United States Interagency Council on Homelessness (USICH)

## **Ex Officio Members - Vacant**

Department of Agriculture (USDA), Ex Officio Position Vacant

Department of Defense (DoD), Ex Officio Position Vacant

Department of Justice (DOJ), Ex Officio Position Vacant

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Anthony Love, Senior Advisor and Director Community Engagement, Veterans Health Administration (VHA), Homeless Programs Office (HPO), Designated Federal Officer (DFO)  
Leisa Davis, Program Analyst, VHA HPO, Alternate Designated Federal Officer (ADFO)  
Holly Hirsel, Senior Community Engagement Coordinator, VHA HPO  
Heather Monroe, Community Engagement Detail Representative, VHA HPO  
Daniella Waitschies, Administrative Officer, VHA HPO

**\*Additional attendees may be present for a portion or all of the meeting and/or attend for situational awareness.**

Some, but not all, attendees identified themselves by name. Attendees are not required to identify themselves. The following identified themselves by full or partial name:

Monica Diaz, Executive Director, VHA HPO

Jelessa Burney, Program Specialist, Advisory Committee Management Office, VA

Bev Ebersold, Director of National Initiatives Team, USICH

Nan Roman, President and CEO National Alliance to End Homelessness

Tess Wrzesinski, U.S. Senate Committee on Veterans' Affairs

Dana Sullivan, Director, Benefits Inspection Division, Office of Inspector General, VA

Scott Jenkins, Benefits Inspector, Benefits Inspection Division, Office of Inspector General, VA

Ken Fenner, Department of Labor

Keith Harris, National Director, Clinical Operations, VA

Meghan Deal, Acting National Director, HUD-VASH VA

Eileen Devine, Health Care for Homeless Veterans, National Program Director, VA

Jeff Quarles, National Director, Grant and Per Diem, VA

Dina Hooshyar, MPH Director, National Center on Homelessness among Veterans, VA

Susan Vieira, Director of Operations, National Center on Homelessness among Veterans, VA

John Kuhn, National Director, Supportive Services for Veteran Families, VA

Jill Albanese, Deputy Director, Supportive Services for Veteran Families, VA

Sean Clark, National Director, Veterans Justice Programs, VA

Jessica Blue-Howells, National Coordinator, Health Care for Re-Entry Veterans, VA

Rich DeBlasio, VISN 19, Network Homeless Coordinator, VA

Rene Campos, Deputy Director, Government Relations, VA

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NaShid Dickerson, Veterans Benefits Administration, VA

Katie Herrera, Social Worker, South Texas Health Care System, VA

Joyce Hernandez-Kelley, Social Worker, South Texas, Health Care System, VA

Jenee Garcia, Health Care for Homeless Veterans, Supervisor, South Texas, Health Care System, VA

Dekevias Atkinson, HUD-VASH Case Manager, Durham VA

Deborah Ulloa, Social Worker, Phoenix, Health Care System, VA

Bob Williamson, Health Care for Homeless Veterans, Outreach Coordinator, Durham VA

Amanda Cantrell, GPD Liaison, Durham VA

\*Note: Titles, when known, are listed. Members of the public who attend are not required to provide titles when they sign in.

For the record, it is noted that to avoid a conflict of interest, Committee members are required to excuse themselves from the meeting when the Committee discusses applications from their respective institutions or in which a conflict of interest may occur. Members are asked to sign a statement to this effect. This does not apply to "en bloc" actions. No discussions were held that required committee members to excuse themselves.

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**September 15, 2020 – 12:00-12:05pm – Call to Order, Welcome/Opening Remarks, Introduction of Members, Review of Agenda**

**Presenter: Jennifer Ho, Chair, VA Secretary's Advisory Committee on Homeless Veterans (ACHV)**

- The purpose of this meeting is to focus on the response to COVID-19 and provide other organization and program updates.

**September 15, 2020 – 12:05-12:35pm – Welcome Remarks**

**Presenter: Monica Diaz, Executive Director, Homeless Programs Office (HPO)**

**Department of Veterans Affairs (VA)**

- Updates:
  - Funding is the same at this time. 99% of budget was spent for FY2020 and we will get an update on FY 2021 soon.
    - The following homeless programs have received increases: Housing and Urban Development-Veterans Affairs Supportive Housing (HUD-VASH); Supportive Services for Veterans Families (SSVF), Grant and Per Diem (GPD), and Veteran Justice Program (VJP) for FY 2021.
  - Racial equity is very important, and we are currently working on this. Thus, we created a workgroup to address this subject. The workgroup is in its early stages at this time and will continue in FY 2021 that includes:
    - looking at policies to revisit related racial equity
    - assessing how to provide more Veteran centered services
  - Recent Initiative
    - SSVF and the Office of Mental Health Suicide Prevention have partnered on a new initiative to enhance procedures within SSVF for suicide prevention services.
      - 11 grantees are serving large homeless populations and helping to house them in hotels during the pandemic.
  - Response to COVID-19:
    - Thanks to Anne Dunn and Keith Harris for leading the team.
    - Thanks to Congress and the funding received
    - Time limits on hotel stays, increased emergency housing, over 9,000 beds nationwide, adjusted inspection requirements, and other items to afford more flexibility and remove barriers.
    - Increase of 444 Grants
    - Expanded Technical Assistance
      - 1800 Inquiries
      - Very organized and streamlined process
      - Effective communication
    - COVID-19 Memo was released that provided guidance to support community and grantees for testing, prior to admission.
    - Outreach: The Coronavirus Aid, Relief, and Economic Security (CARES) Act funding was used to for technology
      - CARES funding was used to help with technical support (iPads, iPhones, and other telehealth equipment to help connect Veterans to providers).

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- Will continue to develop out of the box ideas to help enhance the situation and look at interventions to see what is working and what is not in order to move forward.
- Questions/Answers
  - Q: Richard Cho: In regard to testing and helping to ensure that folks are tested prior to admission, balance between testing and requiring a negative result while making sure this does not become an additional barrier for Veterans, how is VA ensuring this balance happens? What happens if there are COVID positives?
    - A: If someone is positive, that they do not say no, but they help to protect them and others. The COVID Memo provides guidance that outlines what happens after a positive situation is identified as well.
  - Q: Jessica Venegas: Please provide racial equity data on disparity of Veterans of color experiencing homelessness.
    - A: Monica Diaz stated she would be happy to share the data with everyone.

#### **September 15, 2020 – 12:35-12:50 pm – United States Interagency Council on Homelessness (USICH)**

##### **Update**

**Presenter: Bev Ebersold, Director of National Initiatives Team**

- Shared the following remarks (in the absence of Robert C. Marbut, Jr., Executive Director, USICH)
  - USICH will continue to:
    - Share resources from other federal agencies
    - Focus on work within communities and those peer to peer relationships
    - Assess for lessons learned and best practices with communities to learn more
    - Project room key - Really trying to stay connected to communities and share resources with them.
    - Started to see communities show additional interest in the benchmark and criteria for ending Veteran homelessness. Thus, communities are still striving for goals and are still ending homelessness in some communities despite pandemic
  - Questions/Answers:
    - Q: Monica Diaz: Do you have an update on the OMB response?
      - A: Bev Ebersold stated she would pass the question along to acquire an answer.

#### **September 15, 2020 – 12:50-1:15 pm – HUD-Veterans Affairs Supportive Housing (VASH) Update**

**Presenters: Dr. Keith Harris, National Director, Clinical Operations, HPO, and Meghan Deal, Acting National Director, HUD-VASH**

- In response to Richard Cho's question related to testing positive and admission into programs, there is definitely a challenge when weighing this issue. Homeless programs have done a nice job of developing isolation and hotel options for those who tested positive. They have been able to provide a safe environment to Veterans and others who are already in a program in order to not create further barriers to emergency/transitional housing.
- HUD-VASH Voucher Utilization – Vouchers not utilized has stayed consistent, which is concerning. Due to low availability of case managers, staffing issues, and other issues. Part of that number is because originally, they took more vouchers than needed at that time in case they ran out. Decrease

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in affordable housing and properties willing to take vouchers as well. Also, reductions in chronically homeless in recent years contributes to this.

- Historical patterns of HUD-VASH – FY 2012 – 2019: issuances, referrals, entries and move-ins. Top down approach.
  - Data for 2019-2020 – huge drop once COVID-19 hit. VAs were open but many Public Housing Authorities (PHAs) did not stay open. Not issuing vouchers or performing inspections at that time. Bounce back starting in May though and quickly going up through June. VA help this bounce back significantly.
  - HUD immediately came out with all the ways they could be flexible to help get folks housed still. But of course, took time to get this information out to every PHA.
- Another key is the VHA partnered with community resources, mostly with SSVF. Creating internal flexibilities. SSVF received additional funds thru the CARES Act, thus additional capacity. Working with Veterans placed in hotels by SSVF & GPD was helpful. SSVF helping to find and secure housing before a voucher is issued helped speed up the process as well. Help led to the increases of voucher utilization.
- Staffing for HUD-VASH – spike in 2014-2015 but has declined each year afterwards. But recently the VA has begun to work on ways to help increase staffing issues again:
  - VHA leadership issued a memo that HUD-VASH staff is required to be at 90% staffed.
  - HUD-VASH Continuum – for Veterans who aren't eligible for HUD-VASH. This gives case management for folks who don't qualify for a voucher and the program, but still need assistance, to have other staff or funding to provide non-VA providers to help them, several pilots under way now.
- Staffing level staying around 84% currently and for this year
- Hiring rates – harder to hire in some areas and in bigger VISN areas
- Request for vouchers is between the VHA and PHA negotiations. Unable to request vouchers in some areas as well. Contracting – pulled in detail staff also to help with piloting.
  - +100,000 voucher utilization - +14,000 unused
- Telehealth be available to Veterans – initial push was on equipment. A lot of staff also didn't have the tech equipment they needed for telehealth. Many different types of equipment offered. First got providers the equipment they needed, then the Veterans. CARES Act expanded availability to purchase equipment for Veterans, 2900 items have been purchased so far. Went from focus on iPad to phones for homeless folks. CARES Act especially worked to get disposable phones to homeless Veterans, only for HUD-VASH Veterans (Digital Divide, new consult system). 9000 phones have already been disseminated to medical centers so they can then be given out to Veterans. Office of Connected Care – has helped get equipment to Veterans. Also, Lifeline to assist folks get phone services and internet connections.
- Encounters – more telehealth than face to face starting in March. Increased outreach at start of pandemic, especially in April to check on Veterans in HUD/VASH and to assess their individual situations.
- Clinical video encounters increased over 6000%.
- VHAs have been very creative with solutions to help with isolation of Veterans during COVID. Dropping off items for Veterans, such as letters, puzzles, games, food etc. to help them know folks care. Nurses that do case management “walks” with Veterans to help get them out.

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- Questions/Answers

- Tramecia Garner: If the 90% VASH staffing is not met does that impact a VISN being able to request more vouchers? Also, how do we get more information on the current pilots around HUD-VASH expanded case management that are taking place now?
  - A: No direct connection between that 90% staffing and vouchers. Something they want to consider though.
- Richard Cho: Do the HUD-VASH utilization rates vary in the same direction as staffing vacancies? Do V20 and V22 have very low utilization rates?
  - A: Generally, there is absolutely is a connection between the two.
- Kathryn Monet: Adding to Tramecia's comments, how heavily is HPO encouraging contracting when staffing gaps are high in certain communities?
  - A: Big proponents of contracting, pulled in details to help with this, but remains to be very laborious for the medical centers because of the process and it's more expensive.
- Richard Cho: What was behind the >90% staffing levels in 2015? Does the memo that has been issued seem at the same level of effort to what that push was in 2015/2016?
  - A: Top level commitment – ending Veteran homelessness, single biggest thing that helped get 90% staffing.
- Tramecia Garner: Is there guidance set nationally or at the VISN level regarding onsite staffing within supportive housing sites where the VA is the primary provider of clinical care? Are VASH staff expected to be onsite daily or at a reduced level to ensure a certain level of onsite presence?
- Kathryn Monet: Veteran isolation issues?
  - A: VHA have been very creative with solutions to help with isolation of Veterans during COVID. Dropping off care packages - items for Veterans, such as letters, puzzles, games, food etc. to help them know folks care. Nurses who do case management “walks” with Veterans to help get them out.
- Jennifer: Have you seen an increase in negative exits since COVID?
  - A: The answer is no, thankfully. Decrease in exits. Increased voucher utilization because rate of move out was lower. Taking steps to prevent it as well just in case.
- Jennifer: Race/Ethnicity Data
  - A: No new data to share that has not already been previously shared. Still see higher rates of people of color entering services and exiting. Really difficult to tell community by community the significant patterns of data. Some communities handled data entry differently and therefore need to assess any issues there.
- Tramecia Garner: Given the increase in homelessness for older adults, are there any updates on utilizing HUD-VASH and Long-Term Care options?

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## **September 15, 2020 – 1:15-1:25 pm – Health Care for Homeless Veterans (HCHV) Update**

**Presenter: Eileen Devine, HCHV National Program Director**

- Funds received by CARES Act, \$10 million for HCHV. For new residential contracts or expansion of current contracts. Funds allocated little of \$6m for those social isolation situations, work with contract providers to help increase space for folks and to expand hotel options and increase per diem rates. Increase the number of beds also.
- Contract process can be very long, so to mitigate that as much as possible, they worked with national contracting office to establish guidelines to help let everyone know what all is required. Putting in isolation options, made sure contractors knew this at national level and what wasn't required to help the process.
- Helpful for Contract Residential Services providers for isolation practices to ensure safety for Veteran residents
- Stand Down Funding – Q about allocating funding, yes did make the stand down funding available, proactive planning before an event due to COVID. Recommended stand downs be postponed – in their traditional sense. Not aware of any push back on this but some communities have come together to do virtual events to still get the items out to Veterans.
- Coordinated Entry – ongoing, national calls each month, very well attended meetings. 90% of the coordinated entry positions filled. None are on hold. 10% vacancy rate is about turnover. Messaging that this is an opportunity to strengthen those relationships they have been building, more outreach and not a time to pull back. Curb side services, finding ways to still assist Veterans despite COVID concerns. Lot of great coordination going on in communities.

## **September 15, 2020 – 1:25-1:50 pm – Grant and Per Diem (GPD) Update**

**Presenter: Jeff Quarles, National Director, GPD**

- Efforts of the GPD Program is part of the overall homeless program office: response to COVID-19:
  - CARES Act provided temporary authority to help with
    - Flexibility in discharge and per diem – allow for adapting to new COVID situation. SECVA waiver of limits on per diem payments. Waiving requirement to discharge after 14 days. Guidance was developed and distributed to GPD grantees, VA GPD liaisons and posted on the GPD provider website.
    - Authority given to Secretary to waive limits of per diem – VA provided GPD with approximately \$88 million in CARES Act funding
    - Providing remote services and food to Veterans
    - \$40 million allocated to the field – to reimburse for beds used
    - Continue working with grantees for them to get reimbursed
  - Guidance -
    - GPD through the Homeless Program Office COVID-19 Response Team has provided written guidance and responses to inquiries.
    - Consultations with each VISN about COVID-19 responses/options to understand what's going on and what their plans are and to review with them what their options are and share information.
    - Isolation option was also created for GPD during COVID-19 to include using hotel options and alternative sites, how to get inspections done quickly. Symptom checks for COVID-19.

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- Have COVID-19 Team take a look at what they're working on.
- Spend time going over CDC recommendations during meetings and how to perform CPR during this pandemic.
- Spent time doing consultations with the VISN, to understand from their perspective of what's going on, their plans, what they're doing and to offer and share best practices.
- Future Plan –
  - Congregate living setting challenges during pandemic
  - VHA Memo Testing and Congregate Living: Recorded a webinar for grantees so they have the information and to be able to come together to make local solutions and plans. Also, include the Veterans who are not eligible for VHA health care to be able to be accounted for and help also during COVID.
  - Looking to redesign facilities
  - Importance of coordination with public health authorities and local VA medical centers
  - Exploring future capital grant to develop individual units in our existing transitional housing
  - Coordination with public health and local VA
  - Future capital grant to redesign facilities to have more individual units to reduce congregate housing
- Questions/Answers
  - Jessica Venegas: Are we seeing reductions in GPD bed use because of COVID?
    - A: Yes
  - Tammy Bellofatto: Waiving 3 GPD in lifetime for COVID?
    - A: No such thing as a 3 stay limit for GPD
  - Richard Cho: Are we also seeing impacts on average lengths of stay in GPD after COVID?
    - A: Varies, some cases they have. Slight increase overall though.
  - Jessica Venegas: Capital grant is exciting. Know you were doing an assessment of GPD buildings and their options for conversion to PSH. Is that complete and able to be shared please?
    - A: Depends on the type of grant someone has. Discussions are needed about this grant to make it more user friendly and long-term solution.
  - Jessica Venegas: Do we have an inventory of the buildings? (What is the potential unit count the capital grant could impact?)
    - A: That has been a bit more challenging due to the age of some of the grants. Some of our files are over 20 years old and all paper files. We would like to seek some broader language in the OMB circulars that would allow for the conversion to an alternate use (permanent housing) with no additional requirements for the grantee.
    - Jessica Venegas: Thanks Jeff. I am curious to know how we might update your files with pictures of the buildings. Might be good to know the conditions Veterans are living in. We could be better advocates for a capital fund if we understand the need.

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**September 15, 2020 – 1:50-2:05 pm – National Center on Homelessness among Veterans (NCHAV)**

**Presenter: Dina Hooshyar, MD, MPH Director, NCHAV**

- Working to be a resource center during COVID on their website to include:
  - VA and HPO's responses
  - Information from other federal agencies
  - Innovative local practices that address providing homeless services and care during the pandemic
  - One-stop venue of up to date information on COVID-19
- Racial Equity and VASH Study – Pending internal HPO discussions on scope and method
- Clinical resource guide for community care centers put together by National Health Care for the Homeless Council and over 80 clinicians contributed to content of the guide
  - Resources and information covering COVID-19 and will be located on website once finished
    - Setting tone of community care centers
    - Basic medical care during COVID-19
    - Behavioral and physical health
    - Additional COVID-19 resources
    - Guide will be posted on HPO COVID-19 website
  - Working closely with other professionals to learn new ways to give guidance to facilities in regard to isolation and distancing of living spaces during the pandemic, with keeping behavioral health issues in mind as well.
- Educational Offerings:
  - Self-care and wellness during COVID-19 located on website
  - Created 7 podcasts as well to offer support to staff during pandemic
- Working on a training for community specialist (online) will be released soon, led by a peer support specialist. How does a peer support specialist take all the information and apply it within the federal restrictions?
- Questions/Answers
  - Karl Calhoun: Keith mentioned that the data analysis of research on Racial Equity and HUD-VASH would be completed by the team at the Center. Do you have any updates on the results of that analysis?
    - A: No request for it at this time, but happy to do that. Discussion with you all to figure out the questions and then what data is available to answer that question.
  - Bilal Mustafa: Is the VA addressing proactive measures or remedies of COVID-19 by way of changing eating habits, strengthening immune systems and cardio workouts & exercising to stay healthy?
    - This is an area that the Center is not directly involved with; however, VA, in general, will be highlighting this within the Whole Health viewpoint and VA is having discussions about this and food insecurities and working with partnerships to help with these food insecurities.
  - Kathryn Monet: Included recommendation about HUD-VASH graduation and what a study might look like. How's this going? Study request, still working on it.
    - A: Yes, still working on it and the best way forward.

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- Karl Calhoun: To follow up on Kathryn's question, What are the graduation rates for VASH?
  - A: Some things they want to do in terms of clinical aspect and scope. Having those discussions now to see how to meet everyone's needs.

### **September 15, 2020 – 2:05-2:20 pm – Supportive Services for Veteran Families (SSVF) Update**

**Presenter: John Kuhn, LCSW, MPH, National Director, SSVF**

- COVID-19 Priorities (\$601.5M with CARES Act funding):
  - Emergency housing priority when pandemic hit – National Memo went out on March 13, 2020
  - Necessity to coordinate better with HPO and HUD-VASH
    - Engage unsheltered Veterans
    - Co-enroll with HUD-VASH
  - Support HUD-VASH placements and coordination
    - Bridge to vouchers – PHA slowdowns and VA staffing shortfalls
    - Offer housing navigation and limited case management
  - Preventions services expanded
  - Gotten rid of screener to help quickly
    - Stage 2 Screener suspended indefinitely
    - 40% Temporary Financial Assistance (TFA) Cap suspended indefinitely
- Have not seen wave of eviction yet, but definitely will remain ready for this possibility. But if it does not happen, SSVF will be able to help in various other ways with the funding that would go toward evictions.
- Hoping the changes for the pandemic will help make needed changes going forward to help even further with the different homeless programs.
- 45-day limit for emergency housing suspended and 72-hour limit for individuals suspended
- No limit on food assistance was a huge new barrier with pandemic. Transportation can now be a big risk health wise. Helped by getting folks into hotels then providing them food.
- Looked at limitations and new barriers created by COVID and how to help
- Huge support from VA with CARES Act funding, huge intent from VA and real understanding of the consequences of this pandemic
- Budget is potentially looking good if a spike in evictions does not happen
- Lessons Learned:
  - Not all Veterans want a program, but need to help them too, so have learned that we need to make these services available to folks who want this type of service after COVID-19.
  - Veterans in hotels often have significant co-morbid health and mental health conditions. Grantees are now required to hire health care navigators.
  - Better tailor services to our Veterans, especially for folks with co-morbid needs
  - Extend to 60 days stay vs 45 days
  - Rent reasonableness
- Going Forward – Expectations:
  - Protect vulnerable Veterans and goal continues to be ending homelessness
  - Hire staff

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- Continuity – Stafford Act flexibility will extend 90 days beyond the end of disaster declarations, to make sure these needs are still being met after the pandemic
- Questions:
  - Brad Bridwell: Can we get HUD-VASH graduation data by race?
  - Jennifer Ho: I think also important to define graduation versus exits generally. What's the definition of success?
  - Richard Cho: How is VA balancing meeting the needs of Veterans who are currently homeless vs. the broader set of "at-risk" Veterans (including rent relief) with SSVF? Is there concern that COVID may throw out the importance of prioritizing those currently homeless by responding too much to those broader housing needs?
    - A: Goal to ensure people do not end up in dangerous environments. Have to keep an eye on eviction concerns (have set aside funds for this just in case). Will dial back on some of prevention needs if we have to and will put money into other areas of need. Main mission to end homelessness but also to save lives during this crisis.
  - Tramecia Garner: To add to the HUD-VASH data request to specify rates in project based vs. tenant choice/scattered site settings. One question that would be interesting to know is whether or not PSH is the best option for those Veterans with complex care needs vs scattered site. If this has already been studied, would be good to see that study/data.
  - A: Bilal Mustafa: Is there a national moratorium on eviction like in California? How does this impact Veterans?
    - A: Telling grantees, you do not need an eviction to provide services. If someone cannot pay rent and it will result in homelessness, SSVF can help then, they do not have to wait. Want to keep folks housed to keep them safe, and we want to end homelessness
  - Tramecia Garner: Is there a date by which CARES funding must be spent or risk being recaptured?
    - A: Have to spend the money by 2021 but have other flexibilities (authority to extend all FY 2021 funds), so can we continue to extend funds, domino effect in order to have funds available as needed. Can build augmented budgets if able to, use funds in a very measured way if possible. Also, work together with other community resources in order to share in resources and make the funds last.
  - Bilal Mustafa: Can Veterans seek assistance to help cover past due rent while there is a moratorium on evictions during COVID-19?

### **September 15, 2020 – 2:20-2:30 pm – Veterans Justice Programs Update**

**Presenter: Sean Clark, JD, National Director, Veterans Justice Programs (VJP)**

- Update: COVID-19:
  - VJP serves Veterans impacted by the criminal justice system, partnering with prisons, jails, and courts to provide onsite outreach to Veterans.
  - Due to COVID-19, all prisons, jails and courts are closed to in person outreach to Veterans in almost all areas of the country.
- VJP has different programs. VJOs (front-end work with Veterans in custody and unable to see them face to face), typically in Veteran treatment court programs. Key barrier for this population: VA's

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inability to treat while Veterans are in custody. Health Care for Re-entry Veterans (HCRV) programs and community treatment outreach are provided.

- Pretrial Detention – no statement issued during COVID-19
- Telephone contacts requested to continue to connect with Veterans
- Telehealth Solutions - telehealth solution to replace many face-to-face visitations
  - Partnership with HPO's Office of Analytics and Operational Intelligence, VJP issued to every VA Medical Center:
    - Building on local experiences in VISNs 7, 10, 20, 23
    - Funded using CARES, but will be an enduring resource
    - Using a Memorandum of Understanding (MOU) to outline responsibility. VA iPads will be provided to prisons/jails/courts for use with multiple Veterans
    - VA staff will use telehealth/VA Video Connect to visit with Veterans
  - Status:
    - 900 iPads issued of the 939 purchased, and will be permanent resources after pandemic
    - VAMC's identifying interested partners and working on MOUs
  - See this reshaping the program going forward, will be a defining feature of the VJP
- Questions/Answers
  - Tramecia Garner: I am not sure if this question can be answered now or not but is there a way to get an update on the VA's work to have Veterans released from jails/prisons where there are high COVID cases? This would be for Veterans that would be eligible for release based upon local jurisdiction requirements.
    - A: iPad initiative is not targeted, anticipate that it will change and move with time. Will this type of outreach to become the standard, and issue more iPads as needed? When the courts know that the Veteran has services waiting for them (when released), this can help their case. It is essential to promote this type of thinking for justice-involved Veterans.
  - Richard Cho: In the first few months of COVID, we saw jail populations drop precipitously in all states/counties, only to start rising again. Did VJO weigh in on the dangers of pretrial detention for exposing Veterans to COVID?
    - A: Did not issue a public statement to this, want to get Veterans connected to VHA care and treatment when possible and as an alternative to incarceration. Adapt to telehealth procedures.
    - Richard Cho: Data on impact of COVID on jail admissions:  
[https://www.prisonpolicy.org/blog/2020/09/10/pandemic\\_population\\_changes/](https://www.prisonpolicy.org/blog/2020/09/10/pandemic_population_changes/)
  - Karl Calhoun: How much CARES funding was allocated to VJP?
    - A: \$969,000 to purchase
  - Richard Cho: Will VA Homeless Programs issue guidance regarding dangers of COVID-19 exposure and push communities to take advantage of VJO to facilitate pretrial release for Veterans?
    - A: Defer response to the question, but of course goal is to get Veterans connected to resources as quickly as possible.

# **VA Secretary's Advisory Committee on Homeless Veterans Virtual Meeting (ACHV)**

**September 15, 2020**

**12:00-4:00 pm (EST)**

## **Meeting Minutes**

- Tramecia Garner: Are Veterans being released "prioritized" for access to SSVF and HUD-VASH to deter a return to homelessness?
  - A: Eligibility depends on the programs, but Veterans involved in justice programs – at intake for folks who are homeless are about 40% of the time but have to defer specifics of those programs.

### **September 15, 2020 – 2:30-2:45 pm – National Alliance to End Homelessness Update**

**Presenter: Nan Roman, President and CEO National Alliance to End Homelessness**

- Focusing on sub-populations
- Trends on homelessness had been declining but have leveled out in last few years
- Increase in unsheltered folks recently unfortunately
- Population is much older now with big implications for COVID
- Racial disparities:
  - Virus (Source: CDC, MMWR June 2019):
    - Cumulative incidence among Latinx 33% (vs 18% of population)
    - 22% Blacks (vs 13% of population)
  - Homelessness: (Source: AHAR Part 1, 2019)
    - 40% Blacks (vs 13% of population)
    - 22% Latinx (vs 18% of population)
    - 3.2% Native Americans (vs 2% of population)
  - Recession – Unemployment (Source: Q2/2020, Bureau of Labor Statistics)
    - 16.1% Blacks
    - 16.7% Latinx
    - 12% Whites
    - 12.9% All
- Important to use new funding strategically
- Surveying CoCs – 80% of them say they screen but do not train staff how to do so. 40% are testing. 85% were putting unsheltered folks into hotels. 25-35% of shelters still lack cleaning supplies.
  - Providing online training for staff for free to help
- Racial equity important to advance. Some communities are currently working on this but several still are not yet.
- Consider resources available. Possibly commercial property available after all this that can be used for housing. Furthering partnerships.
- Use data to see disparities. Build system that helps with housing crisis faster.
- Diversion – prevention and eviction prevention
- Considering of current climate of the Nation
- Building a system that solves housing disparities faster
- Creating more affordable housing
- Questions:
  - Jessica Venegas: Have you been able to weigh in on the USICH Federal Plan? If yes, do you have a sense of any commitment to keeping the push on ending Veteran homelessness?

# **VA Secretary's Advisory Committee on Homeless Veterans Virtual Meeting (ACHV)**

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**12:00-4:00 pm (EST)**

## **Meeting Minutes**

- A: It was mentioned, it could come out mid-October. Suppose to be low barrier programs. Better for Veterans at this point. But unsure if that is in the plan, will have to wait to see it. Unsure if Veteran specific is in the plan.
- Jennifer Ho: No good plan has ever been in place to help folks living unsheltered and COVID shined a light on this. Any information about this...in terms of how communities are dealing with the impact of COVID and with folks living outside?
  - A: Not a lot of data. Some places are doing more for unsheltered people, putting folks in hotels/motels. Unsheltered people are accepting the hotel shelters when they would not accept shelters. They are also seeing that folks don't want to engage in programs. Underwhelmed by what's going on for unsheltered folks. Folks are being put into hotels/ have to do better for them.
- Karl Calhoun: Can you discuss what implementations are proving most effective in addressing racial inequities in homelessness, either anecdotally or based on research?
  - A: Targeting: Involve folks with lived experience. Target higher impacted communities because those communities will typically include more people of color. Using culturally specific strategies. All on a learning curve about this topic. If you are targeting higher impacted communities (because they typically also deal with racial disparities) you will be able to also figure out how to best help other communities.
- Jennifer Ho: Do you have any advice on what/how to prioritize given this is an election year?
  - A: From what I have heard here today sounds like very solid practice. Getting folks into housing and getting them health care is so important, as well as Housing First strategies and person-centered. General message from VHA is solid at this point.

### **September 15, 2020 – 3:00-3:20 pm – National Coalition for Homeless Veterans Update**

**Presenter: Kathryn Monet, Chief Executive Officer, National Coalition for Homeless Veterans (NCHV)**

- Still challenges during COVID-19:
  - PHAs issuing of vouchers for some communities
  - Remoteness of HUD-VASH case management
  - Hearing good things about hotel/motel access – but hearing from some Veterans that they are not making this available to them. Also, there is a mixed bag of what we are hearing
  - Hearing a lot of anxiety from Veterans with housing and income concerns. A lot of Veterans work within many companies who laid off staff. There is a lot of anxiety about this situation especially with looming evictions at some point and still being unemployed.
  - Hearing about access to testing (mixed front as well). Some VAs are testing at shelters and others are not as much. (One area to consider is having a clinical standard to have testing available for Veterans)
  - Long term needs of transitional housing. Hearing satisfaction with GPD and plans they are putting into place for the safety of Veterans and their staff.
  - There is a need for more affordable housing, and we are all dealing with this. There is a need for more ways to help with this immediately. Hotel/motel placements are good but not forever.

# **VA Secretary's Advisory Committee on Homeless Veterans Virtual Meeting (ACHV)**

**September 15, 2020**

**12:00-4:00 pm (EST)**

## **Meeting Minutes**

- Annual conference will be in a two-weeks. Content lined up that focuses on the bridge between hotel stays to permanent housing, and more.
- Launched podcasts focusing on affordable housing.
- Employment and racial disparities. COVID workshops every Friday, such as how to exit Veterans from hotel stays
- Landlord Survey: Impact of COVID on landlords and their perspective of working with HUD-VASH voucher holders. What will make HUD-VASH voucher more enticing for landlords?
- Hotline has picked up. People are suffering and are becoming more depressed. Continue to work with community providers and make sure they have the funds needed.
- Advocacy work related to GPD; thus, looking at what they can do to increase per diem rate. Probably will not be able to go back to per diem rates with all the new changes made during the pandemic.
- Looking into HUD-VASH vacancy issues, number of unused vouchers, working on legislation now to help VA for a stronger push for contract positions to help fast track staffing in order to help house Veterans faster.
- Continue doing trainings around COVID-19 related issues.
- Long-term items include more affordable housing, broader prevention agenda with racial disparity work and how to create equity within their systems, prevention: focus more on issues that lead to becoming homeless that may lead to potential legislation, looking at why Veterans of color become homeless at higher rates in comparison to White Veterans and how to prevent Veterans from becoming homeless at such a high rate.
- Questions:
  - Charlie Hall: Our COC/CES is wading into landlord engagement/incentive and think that emerging CES markets need more tools there. Can you comment on where NCHV may have some resources/tools?
    - A: We will be putting out landlord perceptions soon, what will change the landlords mind to start accepting HUD-VASH vouchers.
  - Jennifer Ho: Will current administration continue to support these efforts for Veterans?
    - A: Limited information has been provided from the federal side. Unclear from my perspective, have not heard anything about it from the administration; however, things are expected to stay the course.
  - Karl Calhoun: Are there any more any details on Congress' interest in HUD-VASH under-utilization? What is the basis for contracting as a possible solution?
    - A: Some communities are not utilizing vouchers, but still asking for more, congressional oversight.

### **September 15, 2020 – 3:20-3:45 pm – Housing and Urban Development (HUD) Update**

**Presenter: Norm Suchar, Director, Office of Special Needs, HUD**

- CARES Act and funding update - \$4 billion to homeless programs. Funds emergency shelters, Rapid-ReHousing, etc. Targeted places with high needs
- Emergency Solutions Grant (ESG) formula & second was more to high need places – to places with really bad housing markets, especially to CA
- Most have used their first round of funding

# **VA Secretary's Advisory Committee on Homeless Veterans Virtual Meeting (ACHV)**

**September 15, 2020**

**12:00-4:00 pm (EST)**

## **Meeting Minutes**

- From Congress – no match requirement – no service participant required. ESG isn't a competitive program.
- Notice on September 1, 2020, provided information on how to use funding, described new kind of emergency shelter (temporary emergency shelter) to meet urgent public health needs that do not have specifications, tradeoff between speed and standard housing.
- A new kind of emergency shelter (temporary emergency shelter) have certain standards but were waived in order to prevent spread of COVID.
- ESG funding is limited to 12 months instead of 24 months. It allows for states to administer funding directly and they have to spend that money within 2 years.
- Folks have to spend this money within the next 2 years.
- States can administer funding directly which is not the way it usually works.
- HUD received \$5 billion for programs to fund Community Development Block Grant program. Short term rental assistance up to 6 months. Focus on rehousing and racial equity.
- There are a lot of resources that focus on affordable housing, racial equity, etc. on the website.
- Technical assistance is provided to help staff and communities as well
- Federal Emergency Management Agency (FEMA) is funding a lot of hotels, but that will end soon. Not sure when it will end because it goes to state and local counties as well.
- We typically do disaster work, helping folks know how to handle disaster work during pandemic.
- Questions/Answers:
  - Tramecia Garner: Any there any updates on the CoC process this year?
    - A: Congress needs to pass a bill for this. If they do not pass it, then a competitive process would have to be run.
  - Tramecia Garner: Has HUD given any thought to allowing communities to use rental assistance dollars for units that have had longer than expected vacancies due to COVID?
    - A: Waivers address this to some degree for the CoC Program. Not much for the ESG program. ESG is mostly tenant-based assistance and there is no way to know who is occupying those units.
  - Jessica Venegas: How often does your team meet with the VHA and Public and Indian Housing (PIH) Teams? Curious about the coordination on both data and targets related to HUD-VASH.
    - A: They have monthly meetings and regular check ins (outside of the meetings). We tracked how things have been going in several areas. HUD and PHA staff have worked hard to get everyone working as quickly as possible.
  - Jennifer Ho: Any information on the revision to the Federal Strategic Plan and where it is going in terms of policy and practice?
    - A: Always a longer process than you would expect them to be, not in the final home stretch yet. Nothing to happen super quick here. Personally, I have not had much interaction with the plan, not much else to offer.

**VA Secretary's Advisory Committee on Homeless Veterans Virtual Meeting (ACHV)**

**September 15, 2020**

**12:00-4:00 pm (EST)**

**Meeting Minutes**

**September 15, 2020 3:45-4:00 pm Closing Remarks**

**Presenter: Jennifer Ho, Chair, ACHV**

- Some thoughts for tomorrow's Admin Meeting:
  1. Does everyone have a copy of last year's letter? What is it that we recommended last year is just as, if not more important now due to where we are with COVID-19?
  2. How can we focus on what's most important?
  3. What are the new things that have emerged because of COVID?
  4. What do we need to highlight now?
  5. How to navigate all the important topics?
  6. How can we be most strategic and get the work done in light of an election year?

**SUMMARY OF COMMITTEE REQUESTS FOR INFORMATION AND RESPONSES:**

The Homeless Program Office will work with the appropriate points of contact to acquire the responses to the follow-up action items and share them with the Committee.

**ADJOURNMENT**

Jennifer Ho, Chair, ACHV adjourned at 4:00pm pm on September 15, 2020

I hereby certify, that to the best of my knowledge, the foregoing minutes are accurate and complete.



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Jennifer Ho, Chair, Advisory Committee on Homeless Veterans

The minutes will be formally considered by the committee at its next meeting, and any corrections or notations will be incorporated in the minutes of that meeting.