Questions for the Record of a Hearing Regarding
S. 1250, S. 1275 and HUD-VASH
Committee on Indian Affairs
United States Senate

June 13, 2017

1. The Blackfeet reservation is approximately 180 miles one way from the nearest VA facility. How is the VA ensuring homeless veterans of the Blackfeet reservation or any extremely rural tribe are receiving the required direct services under the program?

   Response: The Department of Veterans Affairs (VA) is ensuring that Veterans enrolled in the Tribal Department of Housing and Urban Development-VA Supportive Housing (HUD-VASH) program are receiving the required direct services under the program. VA case managers are located in or near communities served by the tribe. Case managers coordinate and provide VA care, including psychosocial services, including mental health and substance use disorder care, and also connect Veterans to needed services that are available locally. VA also has technology capabilities enabling case managers to provide services remotely, augmenting the face-to-face services described above.

   VA case managers are also working collaboratively to ensure that the supportive services and resources are available to Veterans. Most HUD-VASH programs have sought licensed clinical social workers, who provide a wide range of clinical services directly to the Veteran, from skill building to substance use disorder treatment to psychotherapy, if needed and appropriate. On or near many reservations, VA has community-based outpatient clinics (CBOC) that can provide primary care, mental health, and substance use disorder assistance. VA also connects Veterans to local service providers for assistance that VA cannot provide, such as assistance with employment, food or other support. The Indian Health Service (IHS) within the Department of Health and Human Services, or a tribally operated health program, may also offer primary care and specialty services that can be provided locally. In circumstances in which VA medical center specialty care is needed, the VA case manager can assist in securing transportation for associated appointments. VA case managers also have connections with groups such as the Elks Club, Military Outreach USA, or Home Depot, who can provide furniture and other household items.

   Specific to the Blackfeet Nation, VA has a temporary case manager in place until a permanent case manager is hired. The case manager travels to the Blackfeet Nation monthly and is available to travel more frequently as needed. The current case manager ensures that Veterans are connected with the CBOC in Cut Bank, Montana, which provides primary care, mental health, and substance use disorders services. The case manager also ensures the Veterans are connected with the local IHS facility. Additionally, “Manpower,” a local community center, is located nearby and offers a range of co-located social services, including employment services. The Manpower community center also provides an opportunity for the case manager to educate key stakeholders on VA services,
how to coordinate referrals, and promote service utilization between VA and the service providers.

2. How does the VA identify or locate eligible veterans in areas with vast geographical challenges such as the Blackfeet Tribe of Montana, who are one of the 10 largest tribes in the United States, and sit on a reservation of approximately one-and-a-half million acres in the remote northwestern part of Montana?

Response: VA has found success in identifying or locating eligible Veterans by ensuring that the tribal government is part of the solution. The tribal government and the tribal designated housing entity (TDHE), along with the case manager, are collaboratively working on recruitment for eligible Veteran participants. The tribe has a central role in referring Veterans, as they are most familiar with which Veteran members are homeless or at-risk of homelessness. As one example, to enhance the identification of eligible Veterans, the VA Portland Health Care System (HCS) Director and the VA Office of Tribal Government Relations Specialist met with the Warm Springs tribal government, and developed a collaborative approach that has resulted in a significant increase in referrals.

VA case managers are working with the VA Public Relations staff and tribes to engage the tribes and other local media (such as: https://cheyennearapahotribaltribune.wordpress.com/2017/05/11/a-veterans-guide-to-the-hud-vash-tribal-program-oklahoma-city-ok-va-health-care-system/ or http://www.kfyrtv.com/content/news/Iraq-veteran-receives-new-home-thanks-to-HUD-VA-housing-grant-387033601.html) in marketing the program. The tribal government and TDHEs also directly refer Veterans to the VA case manager.

VA case managers participate in various events hosted by the tribe and/or Tribal Veterans Service Officer. VA holds Homeless Veteran Stand Downs in tribal communities to meet and speak with Veterans who are homeless or at risk of homelessness.

The HUD-VASH program office holds calls with the Tribal HUD-VASH case managers twice each month, at which innovative practices and successful engagement strategies are shared. As part of the joint training led by HUD and VA with the tribes and VA case managers, there have been modules focused on marketing and engagement strategies. Tribal entities and case managers worked together in these sessions to develop outreach and marketing strategies.

3. What has VA done to address these specific challenges since you wrote me that response letter?

Response: VA has been working on the noted challenges including:

- recruiting qualified applicants who are able to work independently and have the required clinical skills
- lack of available housing for case managers working on or near the reservations
- lack of available office space for case managers
- safety and work related challenges
- transportation challenges
• locating eligible Veterans

• educating TDHEs on the implementation of the principles of Housing First, the required model of care for Tribal HUD-VASH

• concerns expressed by tribes regarding program longevity

In March, there were seven locations that did not have a VA case manager hired. Today, there are five locations, but of those, two have case managers expected to begin in August, and one is a recent vacancy after the case manager accepted another position. Additionally, the VA Montana Health Care System (HCS) has a temporary case manager assigned until a permanent case manager is hired.

At this time, there are only two positions that remain difficult to fill, Blackfeet Nation in Montana and the Association of Village Council Presidents (AVCP) in Alaska. They both were approved for fiscal incentives, such as retention and relocation expenses. These positions have ongoing open announcements posted on USA Jobs. The case manager position for the Blackfeet Nation had two applicants, who interviewed on July 18, 2017, and a provisional offer was recently made to one of the candidates. While there is no housing available in Browning, case managers may live in Cut Bank or potentially in smaller communities or farmland areas close to the tribe. The AVCP position has several applicants and interviewing will be completed during the week of August 14, 2017. VA medical centers may elect to expand the range of disciplines to include Licensed Marriage and Family Therapists, Licensed Professional Counselors, Registered Nurses, Licensed Mental Health Counselors, and Licensed Master Social Workers in addition to the standard Licensed Clinical Social Workers, particularly in those remote or frontier locations where other services may be more limited.

VA facilities have been working to ensure the implementation of Tribal HUD-VASH. Office space continues to be a challenge, but VA case managers are teleworking as needed. Additionally, they meet with Veterans in community locations and at the TDHE. Some case managers are working in space provided by the tribe. Case managers may travel to VA CBOC locations for meetings, for Veteran assistance, and to ensure Veterans’ documentation is submitted electronically. Black Hills VA HCS purchased cell phone boosters for their staff to ensure cell coverage throughout the reservation, and they also obtained four-wheel drive vehicles to account for terrain and weather. This information has been shared with other sites. VA is actively collaborating with tribes and tribal Veteran Service Organizations on outreach, the referral process, and marketing strategies to ensure that tribal members are aware of and informed about the Tribal HUD-VASH program. Notably, twenty tribes are now housing Veterans and two tribes have Veterans in case management who are actively seeking housing. While the limited stock of viable rental housing continues to be a concern; tribes are demonstrating creativity and flexibility to ensure that housing is available for the program. For example, tribes are housing Veterans in communities within their service area but off of the reservation, are electing to forgo funding for currently unoccupied Formula Current Assisted Stock (FCAS) under the Indian Housing Block Grant (IHBG) program, so that the Tribal HUD-VASH assistance can be used on that housing unit instead, and developing housing with tax credit programs. Tribes have also investigated potentially using Federal Emergency Management Agency trailers. The recent renewal funding provided by Congress in the budget for fiscal year 2017 demonstrates Federal commitment to the program, supporting tribes’ continuing investment in the Tribal HUD-VASH program.
4. Why has it generally been so difficult to hire case managers to provide wrap-around services to homeless Native American veterans that are receiving Tribal HUD-VASH vouchers?

Response: Case manager recruitment has been challenging in some locations, primarily due to the rural/frontier location of the tribe, affordable housing challenges for some staff considering a move to a location (such as in South Dakota with the Bakken oil and gas field), and in a few cases, tribal governance changes such as with Leech Lake, which elected a new tribal government; VA was asked by the tribe’s interim government to stand down hiring until the new government determined their interest in program participation. Delays in the hiring process have also been a contributing factor.

The two positions that have been particularly challenging to fill are with the Alaska VA HCS associated with the AVCP TDHE, and the VA Montana HCS associated with the Blackfeet Nation. VA approved financial incentives to facilitate recruitment and retention, including fiscal relocation support for case managers for AVCP with the Alaska VA HCS and Blackfeet Nation with the VA Montana HCS. The VA medical centers also have options for broadening the pool of potential applicants. The Alaska VA HCS has opened recruitment to Licensed Marriage and Family Therapists and Licensed Master Social Workers, in addition to Licensed Clinical Social Workers. At this time, the Montana VA HCS has tentatively offered a position to a candidate, and the Alaska VA HCS is conducting interviews with applicants.

As indicated earlier, VA has expanded the pool of clinical professions for case manager positions to help recruit qualified candidates. This expansion considers the degree of independent practice expected of the case manager. VA expects the clinical case manager to be able to provide clinically sound mental health and substance use services directly to Veterans, particularly when there are regional challenges to obtaining those services elsewhere. Case managers in this program treat Veterans with high mental health and substance use acuity. VA medical centers are responsible for ensuring that the scope of practice for each employee is appropriate for the population being served, which may require a particular education level, a specific number of years of experience, and/or a clinical license.

5. What are the other challenges that you have seen in implementing the Tribal HUD-VASH program, particularly to the extremely rural tribes such as the Blackfeet Tribe of Montana? What would you do to fix them?

Response: The greatest challenge VA has experienced with implementing the Tribal HUD-VASH program is the limited amount of housing stock. In Montana, more Veterans could be admitted to the Blackfeet Nation’s Tribal HUD-VASH program, but the case manager is waiting for housing to be built and pass the housing quality standards inspections that must be completed before the units can be available. Some tribes are developing or rehabilitating housing, which similarly creates delay in placement.

Zuni, Hopi, Tohono O’odham, Spokane, Osage and others allow Tribal HUD-VASH Veterans to live outside of the reservation due to the shortage of housing stock in their tribal communities. While the Tribal HUD-VASH program was specifically designed to serve American Indian and
Alaska Native Veterans in their tribal communities, those sites that have been able to most expeditiously implement the program are those utilizing housing off of the reservation. The exception is Yakama, which repurposed existing housing units from a different, previously terminated project. Tribes also report that the primary barrier is a lack of appropriately sized, decent, sanitary housing stock.

Some tribes have had difficulty locating Veterans appropriate for the program. In response, a number of tribes have opened their tribal preference to allow any Native American Veteran who is a member of any tribe, living in their tribal area, to utilize the program; which has enhanced utilization of their grant resources.

In areas where the tribe is fully committed to the program and a VA case manager is on staff, referrals have been steady and Veterans are being housed and are receiving services. Extensive marketing activities to recruit additional Veterans are also in place in these areas. There are Tribal HUD-VASH locations that have sufficient Veterans to completely utilize their grant: Oneida of Wisconsin, Cook Inlet, and Tohono O’odham. Additionally, Navajo, Zuni, Osage, Muscogee (Creek), Rosebud Sioux, and Lumbee are more than half-way to filling the units their grants support. Please see Attachment 1 for additional information.

6. How will you ensure that tribes and tribal entities are properly consulted about the implementation of the program? What will that consultation look like?

Response: VA and TDHEs have identified points of contact (POC) that meet and collaboratively discuss the program. VA case managers are encouraged to collaborate extensively with the tribes and TDHEs that they support. In some locations, the tribe has provided space for the case manager to work, which facilitates communication and relationship building, while demonstrating the partnership involved with program implementation.

During initial implementation of the program, VA POCs interacted extensively with the tribe in program execution. There was an initial meeting to discuss implementation and the tribes were engaged in case manager recruitment. Specifically, tribes were consulted about ways to obtain a case manager. VA offered to develop a contract for case management or allow the tribe to request VA obtain a full time VA employee as the case manager. VA contracted with one tribe for case management. Some tribes were actively engaged in the hiring process and participated in the selection of the VA case manager. VA is committed to ensuring eligible tribal members or Native American candidates are selected, where possible, to further support collaboration and consultation. Currently, seven of the twenty case managers VA has hired have Native American ancestry, and of those, four are members of the tribe with whom they collaborate. One of the case managers that we expect to start work in August 2017 is also Native American and, while not a member of that tribe, is a descendant of the tribe.

The earlier question regarding how the case managers are able to recruit eligible Veterans provides an example of consultative conversations with the tribes. VA worked with HUD to provide technical assistance and training for both the case managers and TDHEs, connecting them as a team to work on implementation. VA needs the tribal government and TDHE to not only help the case managers with marketing and referrals, but to also provide their wisdom and experience to help locate and engage Veterans through other local resources. VA continually looks for ways to engage, collaborate and consult with tribes on the program.
7. How does VA currently work with IHS? Can inter-agency collaboration over Tribal HUD-VASH be easily worked into existing agreements?

**Response:** VA currently collaborates with IHS in several regards, one of which is the 2010 Memorandum of Understanding between VA and IHS and pursuant to the VHA-IHS Reimbursement Agreement, under which VHA reimburses IHS for direct care services provided to eligible American Indian/Alaska Native Veterans at IHS facilities. Expanding our relationship with IHS would be beneficial to the Tribal HUD-VASH program and the Veterans and tribes that it serves. VA has an excellent working relationship with HUD and is confident that collaboration involving VA, IHS, and HUD would be beneficial and provide an opportunity for VA and IHS to assess the scope, capacity, and ability to collaborate at the specific Tribal HUD-VASH locations. VA recommends that IHS be consulted to determine the ability to collaborate regarding Tribal HUD-VASH within existing agreements.

8. Once this bill requires them to help support Tribal HUD-VASH, how do you envision VA working with IHS to better provide supportive services to Native American veterans receiving Section 8 vouchers?

**Response:** As IHS has existing relationships with tribes, VA is confident that there is excellent potential for IHS and VA to collaborate. IHS has significant knowledge and experience understanding the cultural differences of each tribe, and would be a meaningful, collaborative partner for this program. VA had discussions with IHS that preceded the administration change that did not yield final conclusions. We believe that new discussions, with current leadership in both agencies, about how VA and IHS can collaborate and identify ways to work together in serving Veterans in Tribal HUD-VASH are needed. As appropriate, HUD should also be a part of these discussions.