

# Grant and Per Diem Operational Webinar

Jeff Quarles, MRC, LICDC  
National Director, GPD

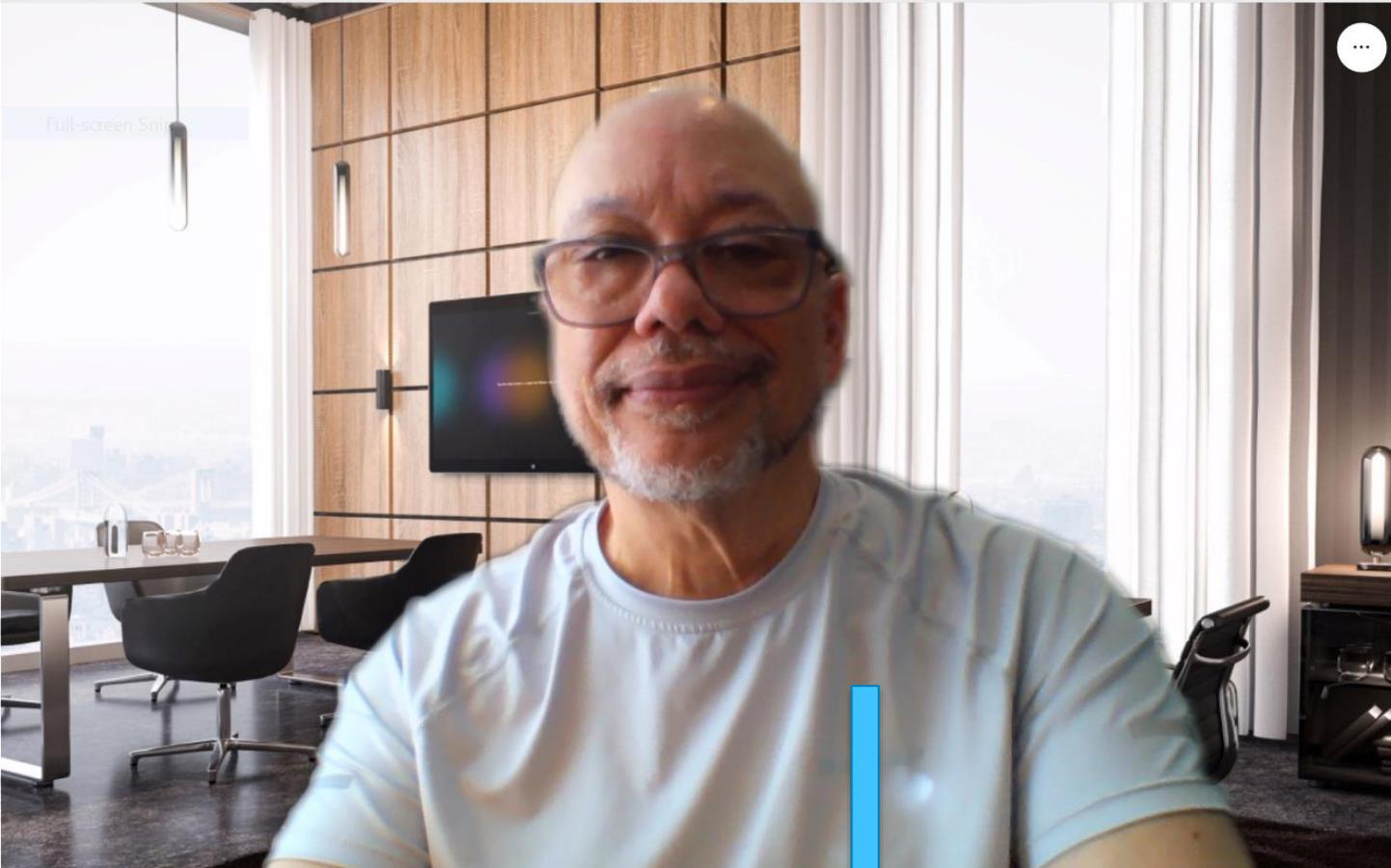
Chelsea Watson, MSPH  
Deputy Director, GPD

Tuesday, December 8, 2020 at 2pm Eastern/11am Pacific

## Recording:

<https://veteransaffairs.webex.com/veteransaffairs/ldr.php?RCID=88e5d2ead6c408c069ecf4e2311f966b>

**Password:** Homelessprogram1!



Chat

To: Everyone

Enter chat message here

Mute Stop video Share Record

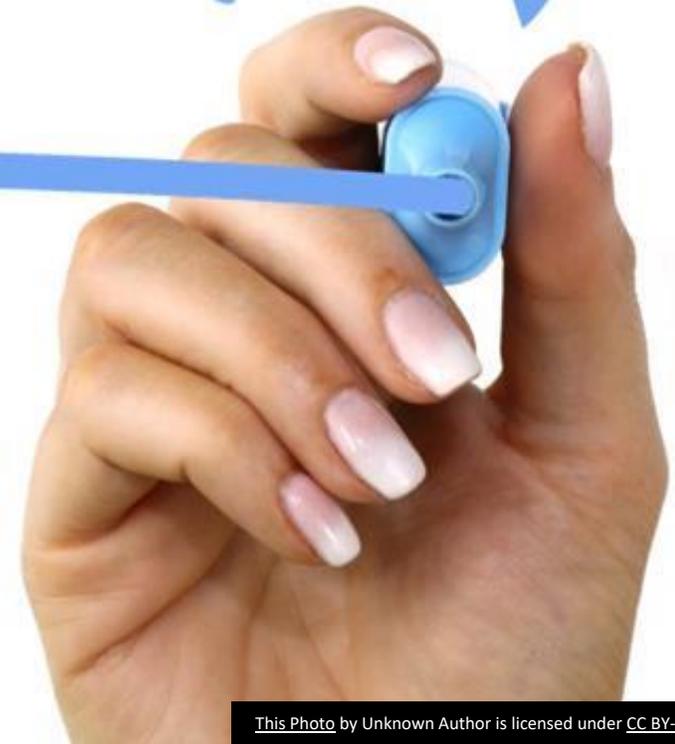
Participants Chat

# AGENDA

## GPD Operational Call Agenda

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- Announcements
- Office of Business Oversight (OBO)
- Guest Presentations
  - HUD VASH
    - Q & A
  - COVID-19 Testing Protocols for GPD and HCHV CRS
    - Q & A





# BREAKING NEWS

## GPD Announcements

- Blackbaud Grantmaking (GIFTS) system that your agency used to submit requirements and apply for your current award *is no longer be accessible*
- New grants management system, Smartsimple that will be installed over the next month



...Announcement

## Announcements – Per Diem Rate Requests

- During the transition period from GIFTS to SmartSimple, grantees should email Per Diem Rate Request worksheets to [GPDFiscal@va.gov](mailto:GPDFiscal@va.gov)
- Grantees can disregard the “Transmit Worksheet” instructions regarding completing a requirement. You will only need to email the per diem worksheet and IDCR if applicable
- Please include in the Subject line of the email “Per Diem Rate Request”
- Once SmartSimple is up and running, our office will provide further guidance on how to submit rate requests.
- The Per Diem Worksheet can be found at: [https://www.va.gov/HOMELESS/GPD\\_ProviderRate.asp](https://www.va.gov/HOMELESS/GPD_ProviderRate.asp)



## GPD Announcements

- Case Management Renewal NOFA – Anticipate announcement this month
  - Only open to existing grantees
  - Simple renewal application process planned
- Special Need and possible Capital grant NOFA planning

# Office of Business Oversight

- **Upcoming Fiscal Reviews:**
  - **Barron Heights Community Development Corp.** - 1385 Lamar Ave Memphis, TN 38104-4841  
December 15-17, 2020
  - **St. Annes Retirement** - 1142 S Diamond Bar Blvd, Diamond Bar, CA 91765 December 15-17, 2020
  - **Washington State Department of Veteran Affairs** - 1102 Qunice ST SE Olympia, WA 98504-11550  
January 5-7, 2021
  - **Vietnam and All Veterans of Brevard, Inc.** - 700 E. Fee Avenue Melbourne, FL 32901 January 19-21, 2021
  - **LA Family Housing** - 7843 Lankershim Blvd, North Hollywood, CA 91605 January 19-21
  - **The Poverello Center, Inc.** - 1110 W. Broadway Street Missoula, MT 59802-3918 February 2-4, 2021
- **CAARES ACT Oversight**
- **SF-425's**
- **Training Item of the Month:**
  - **Office of Management and Budget (OMB) SF-425 Federal Financial Report Instructions, Page 3, states, "Annual reports shall be submitted no later than 90 days after the end of each reporting period."**

# HUD-VASH COVID-19 PANDEMIC RESPONSE AND PROGRAM COLLABORATION

MEGHAN C. DEAL, LICSW, ACTING NATIONAL DIRECTOR, HUD-VASH PROGRAM OFFICE

TRACY EMMANUEL, ACTING HUD-VASH REGIONAL COORDINATOR, HUD-VASH PROGRAM OFFICE

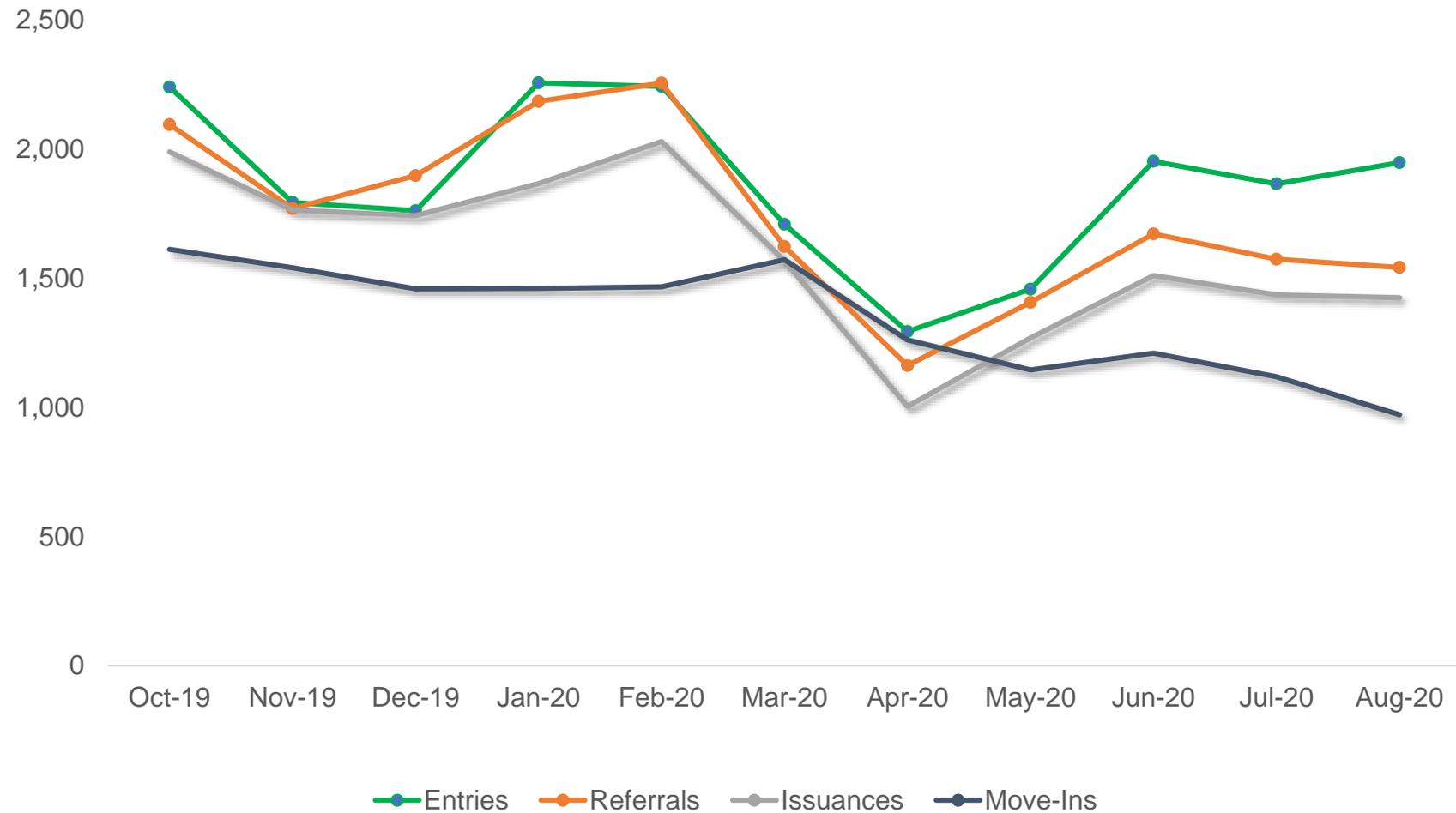


# COVID-19 Impacts

- Decreased capacity for face-to-face contact
- Partner agency closures
- Public Housing Authority (PHA) closures and delays



# HUD-VASH ENTRIES, REFERRALS, ISSUANCES, AND MOVE-INS FY 2020



# COVID-19 Mitigation Strategies: PHA Flexibilities and Waivers

- The CARES Act provided new flexibilities and waiver authorities to PHAs in response to COVID-19, which were initially released on 4/10/2020 in [Notice PIH 2020-05](#) and were subsequently updated in [Notice PIH 2020-13 \(HA\), REV-1](#).
- The HUD-VASH Program Office has strongly encouraged facilities to partner with local PHAs to implement these waiver authorities when helpful in serving HUD-VASH Veterans.



# COVID-19 Mitigation Strategies: Telehealth Expansion

- The COVID-19 Aid, Relief, and Economic Security (CARES) Act requires VA to ensure that telehealth capabilities are available during a public health emergency for case managers of, and homeless Veterans participating in, HUD-VASH.
- Initial implementation efforts focused on collaborative work with VA's Office of Connected Care (OCC) and other partners to ensure HUD-VASH case managers and Veterans have the equipment necessary to participate in telehealth.



# COVID-19 Mitigation Strategies: Leverage Available Resources

- [SSVF Assistance for Veterans Participating in HUD-VASH 10N Memo](#) dated May 19, 2020 allows SSVF grantees to provide housing search assistance, housing placements, security deposits, and rental assistance for Veterans in HUD-VASH.
- [HUD-VASH Admissions During COVID-19 Response 10N Memo](#) states that every Veteran in temporary accommodations due to COVID should be considered for HUD-VASH.



# COVID-19 Mitigation Strategies: Leverage Available Resources

- **Voucher Utilization Expansion Efforts:**
  - Focused on serving Veterans who are eligible for, and would benefit from, HUD-VASH but have lower case management needs than those traditionally served by the program.
  - Case management services are provided by HUD-VASH partners and may include assessment, referral, and ongoing case management services.
  - Pilots established to date partner with:
    - SSVF grantees
    - GPD case management grantees
    - HCHV/CRRC



# Collaboration Opportunities: HUD-VASH & GPD Pilots

- Pilot participation requires strong collaboration and coordination between the partners:
  - MOU/MOA or Service Coordination Agreement
  - Plan for transitioning case management between programs when needed
  - Homeless Program Office Review, Concurrence, and Support
- Pilots with GPD case management grantees
  - HUD-VASH and GPD are working with local sites who have identified both a need and ability to engage in creative thinking around serving Veterans with HUD-VASH vouchers.



# Collaboration Opportunities: Quarantine Facilities

- GPD Veterans placed in hotels/motels or other quarantine facilities in response to COVID-19, *but without a current permanent housing plan*, may be appropriate for HUD-VASH
- Dependent on local resource availability and prioritization processes



# Collaboration Opportunities: Bridge Housing

- Veterans who have been accepted to HUD-VASH
- Community engagement to understand how to assess and direct Veterans toward bridge beds while assessing for HUD-VASH



# Communication is Key!

- Every community is different
- Clear communication is required with internal and external stakeholders:
  - What GPD beds and models are available?
  - What is the local availability of HUD-VASH vouchers?
  - Other relevant community factors?





## Question and Answer Period

- Questions should be submitted through the chat box
- Please do not unmute yourself
- Keep questions focused items that may interest other participants

# Trends in Number of COVID-19 Cases and Deaths in the US Reported to CDC, by State/Territory

Reported to the CDC by State or Territory

Select a state or territory:

United States

View:

Cases

Deaths

Metric:

Daily trends

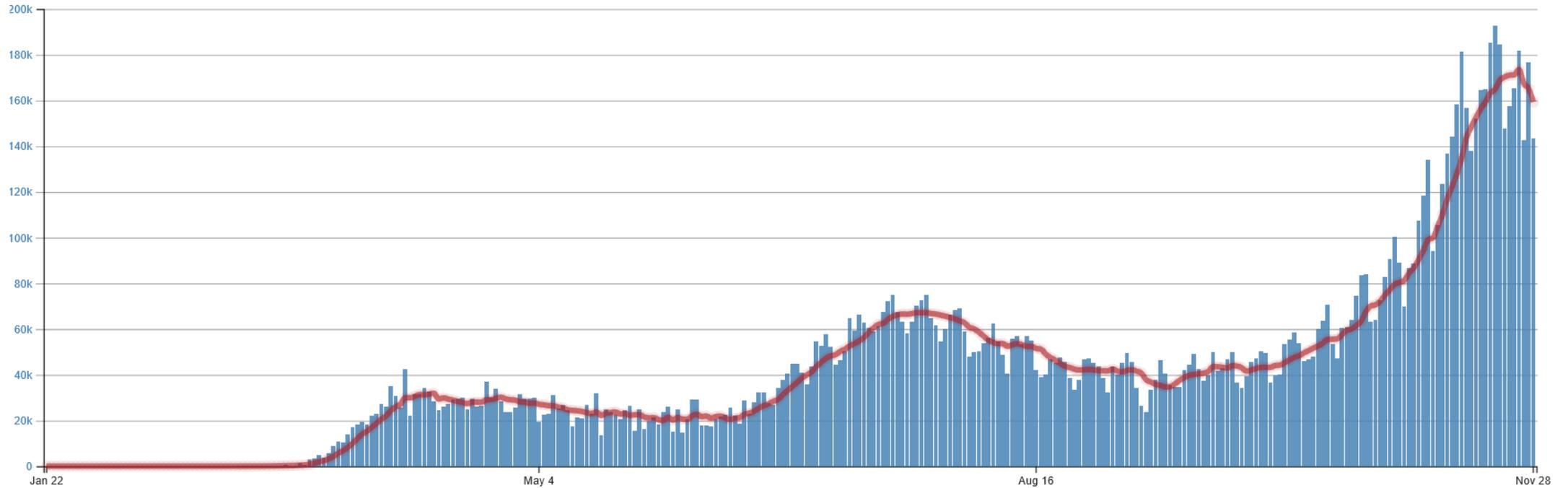
Total and rate

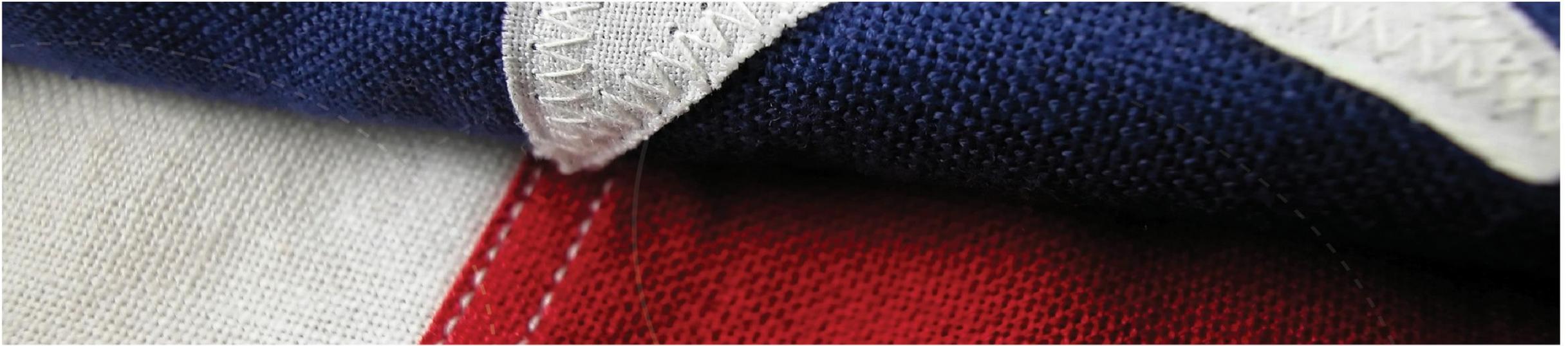
Show:

7-Day moving average



## Daily Trends in Number of COVID-19 Cases in the United States Reported to CDC





# SARS-CoV-2 Testing Protocol for Veterans in VHA Homeless Program: Grant and Per Diem (GPD)

## *Memo Review and Expectations*

Jillian Weber PhD, RN, CNL  
HPACT National Program Manager

# Purpose of the Memo

- Homeless and formerly homeless Veterans are uniquely vulnerable to COVID-19
  - Living conditions, advanced average age, and high rate of chronic health problems
- [CDC research](#) indicates there can be high rates of asymptomatic carriers in congregate settings and once an individual tests positive the rate of actual infection among residents is much higher

## Purpose of the Memo

- The VA supports expansion of testing to Veterans who are asymptomatic and request testing per the VHA memo *COVID-19 Updated Guidance on Testing for Veterans and Employees* released May 14, 2020
- Therefore, this memo was developed to ensure that eligible Veterans in GPD and HCHV CRS programs receive viral testing to allow for early identification of COVID-19 cases and mitigate disease outbreaks in these congregate settings

# Planning Prior to Testing

- GPD sites are required to plan prior to any testing to ensure housing options have been identified to mitigate any gaps in housing and resources
  - Utilize *Options for Social Isolation Under the COVID-19 National Emergency: Guidance for GPD, HCHV CRS, and SSVF*
- Work closely with local and state health departments to ensure all non-eligible Veterans and frontline staff are also tested
  - GPD: Grantees are permitted to include in their per diem budget costs associated fees with acquiring COVID-19 testing for Veterans in the program

# Planning Prior to Testing

- Processes should be in place at GPD sites for screening all persons entering the building including Veterans and frontline homeless program staff for fever and other [COVID-19 symptoms](#) according to facility screening protocols.
  - Remain diligent with screening protocols to mitigate risk

# Viral Testing at Admission

- Eligible Veterans newly admitted to GPD should be tested for SARS-CoV-2 by VHA unless other processes are in place (e.g. local health department testing)
- Conduct testing no more than 48 hours prior to admission unless Veteran has recovered from known SARS-CoV-2 infection and met CDC criteria for [\*Discontinuation of Isolation for Persons with COVID-19 Not in a Healthcare Setting\*](#)
  - Primarily follows [CDC symptom-based criteria](#)
    - At least 10 days have passed since symptom onset **and** at least 24 hours have passed since resolution of fever without the use of fever-reduction medications **and** other symptoms have improved.
    - Persons infected with SARS-CoV-2 who never develop symptoms may discontinue isolation and other precautions 10 days after the date of their first positive test.

# Initial Viral Testing

- Initial viral testing (i.e. baseline/universal testing) should be conducted on Veterans already enrolled in GPD when there is substantial community transmission based on CDC criteria
  - Initial viral testing to avoid rapid spread of infection that could result in adverse effects for Veterans residing in congregate settings in communities with substantial transmission

# CDC: Community Transmission Levels

<b>Level of Community Transmission</b>	<b>Community characteristics and description</b>	<b>Level of mitigation</b>
<b>Substantial, uncontrolled transmission</b>	Large scale, uncontrolled community transmission, including communal settings (e.g., schools, workplaces)	Shelter in place
<b>Substantial, controlled transmission</b>	Large scale, controlled community transmission, including communal settings (e.g., schools, workplaces)	Significant mitigation
<b>Minimal to moderate community transmission</b>	Sustained transmission with high likelihood or confirmed exposure within communal settings and potential for rapid increase in cases	Moderate mitigation
<b>No to minimal community transmission</b>	Evidence of isolated cases or limited community transmission, case investigations underway; no evidence of exposure in large communal setting	Low mitigation

# Positive Test Results

- At admission
  - Do not limit entry into GPD programs based on positive or pending test results
  - Utilize *Options for Social Isolation Under the COVID-19 National Emergency: Guidance for GPD, HCHV CRS, and SSVF* and the [Discontinuation of Isolation for Persons with COVID-19 Not in a Healthcare Setting](#)
- Initial testing or new confirmed case at site
  - Testing all previously negative or untested Veterans should be repeated every week and continue weekly until no new cases are identified and **at least** 14 days have passed since most recent positive test at the site

# Veteran Declines Testing

- Veteran declines testing without symptoms
  - Should not be placed in congregate setting
  - Quarantined for 14 days using the *Options for Social Isolation Under the COVID-19 National Emergency: Guidance for GPD, HCHV CRS, and SSVF*
- Veteran declines testing with symptoms
  - Should not be placed in congregate setting
  - Isolated until able to meet the CDC [symptom-based criteria](#) for discontinuation of isolation
    - At least 10 days have passed since symptom onset **and** at least 24 hours have passed since resolution of fever without the use of fever-reduction medications **and** other symptoms have improved

# Testing Strategy

- Every VAMC should develop a testing strategy to meet all testing needs described
- VAMC homeless program staff are responsible for documenting testing information in HOMES in addition to documenting in the electronic health record per VHA memo *COVID-19 Documentation in HOMES*, released May 13, 2020
  - Test results
  - Who administered the test
  - If Veteran placed in hotel/motel

# Additional Testing Recommendations

- Utilizing homeless program staff in coordination with VA clinical staff (e.g. HPACT) to assist with notifying site staff, Veterans, and facilities of any positive test results/potential exposures
- Coordinate initial testing at GPD sites when possible where VAMC staff come to facilities to perform SARS-CoV-2 testing rather than transporting Veterans to the local VAMC to reduce the chance of disease transmission and increase access
- Consider initial testing events on weekends to enhance access to testing
- Consider repeat testing of all Veterans enrolled in GPD if resources and staffing capacity allow

# Expectations of VA

- Testing eligible Veterans at admission
- Initial testing of Veterans already enrolled in programs in communities with substantial community transmission
- Follow-up testing when positive cases identified at sites through initial testing and new cases identified
- Provide the testing supplies and testing staff
- Documenting testing in electronic health record and HOMES

# Expectations of GPD Sites

- Proactive planning prior to testing
  - Ensure housing options for isolation and quarantine have been identified to mitigate any gaps in housing and related resources
  - Strongly encouraged to coordinate with local/state health departments or other health initiatives to ensure all non-eligible Veterans, non-Veteran residents, and frontline staff are also tested
  - Have processes in place for screening all persons entering the building
    - Infection control procedures: [CDC guidance on cleaning and disinfecting](#)
- Communicate with VA on testing needs and identification of positive cases



## Question and Answer Period

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# COVID-19 Resource Information

- Reminder of various resource documents available on GPD provider website
  - [Wellness & Symptom Checks for COVID-19 Positive & Presumptive Positive Veterans In Hotels and Motels](#)
  - [GPD Isolation Options](#)
  - [GPD CARES Act Implementation Guidance](#)
  - Links to Centers for Disease Control (CDC) guidance
- Be sure to coordinate with local health departments, VA Medical centers regarding testing
- Grantees expected to follow CDC guidance and comply with local public health guidelines regarding quarantine and safety protocols associated with COVID-19
- Grantees may include the cost of testing asymptomatic staff who have direct contact with GPD Veterans as part of their allowable program costs

# News You Can Use

Helpful Info

Great Advice

Need to Know

## Reminders

- Next webinar January 12, 2021 @ 2pm eastern
- GPD Provider website  
[https://www.va.gov/HOMELESS/GPD\\_ProviderWebsite.asp](https://www.va.gov/HOMELESS/GPD_ProviderWebsite.asp)
  - COVID 19 resource info
    - CDC Guidance links