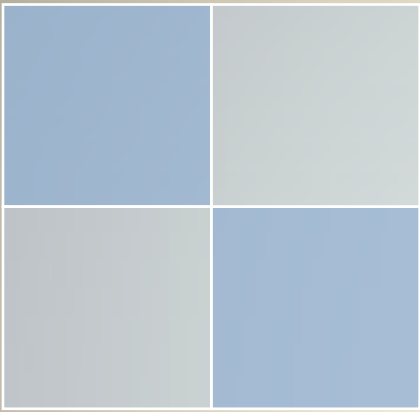


# Effectiveness of Permanent Housing Program FY 2012 Report



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## About this Report

### Brief Overview of the Supportive Services for Veteran Families (SSVF) Program

Section 604 of the Veterans' Mental Health and Other Care Improvements Act of 2008, Public Law (P.L.) 110-387, authorized the Department of Veterans Affairs (VA) to develop the SSVF program. The program is a critical new component within VA's continuum of homeless services. The SSVF program's purpose is to provide grants to private non-profit organizations and consumer cooperatives that will coordinate or provide supportive services to very low-income Veteran families in need of homelessness prevention assistance to avoid literal homelessness or rapid re-housing assistance to end current homelessness. The SSVF program's statutory authority is codified at section 2044 of chapter 20 of title 38, United States Code (U.S.C.), and its regulatory authority is codified at part 62 of chapter I, title 38, Code of Federal Regulations (CFR).

Pursuant to section 604(c) of P.L. 110-387, VA is required to conduct and complete a study addressing the following:

1. The Secretary shall compare the results of the program referred to in that subsection with other programs of the Department of Veterans Affairs dedicated to the delivery of housing and services to Veterans.
2. In making the comparison, the Secretary shall examine the following:
  - (A) The satisfaction of Veterans targeted by the programs.
  - (B) The health status of such Veterans.
  - (C) The housing provided such Veterans under such programs.
  - (D) The degree to which such Veterans are encouraged to productive activity by such programs.

SSVF represents an entirely new and wholly unique model for VA. SSVF is the first and only VA program that provides services to Veterans and their families. It is a community-based, competitive grant program employing the principles of *housing first* to assist Veterans that are at imminent risk for losing their housing to maintain safe permanent housing. It is also designed to meet the need of Veterans that have fallen into homelessness, to rapidly re-engage with permanent housing and other supports to achieve community integration. It differs from VA's Grant and Per Diem program in that it focuses on permanent housing with supportive services being provided to maintain permanent housing in the community. It differs from the Department of Housing and Urban Development (HUD) - VA Supportive Housing (VASH) program in that the SSVF services are more time limited. Its focus is to assist those Veterans, who do not require the long term supports of HUD-VASH case management services, to maintain and sustain permanent housing. SSVF is highly flexible, Veteran-centric and community-based.

Considering the uniqueness of SSVF within VA, comparisons of the program's effectiveness are best found outside of the Department. To better understand the effectiveness of the SSVF program, VA chose to compare SSVF to HUD's now completed Homelessness Prevention and Rapid Re-Housing Program (HPRP). In fact, the SSVF program was informed by the experiences of HPRP with regard to the goals and intent of the SSVF program. Both programs provide short-term assistance to persons experiencing a housing crisis to obtain or retain permanent housing. Both programs rely on a combination of targeted outreach, individualized case management, temporary financial assistance (TFA), and other essential supports to resolve housing crises.

This report covers the first grant period for the SSVF program, which occurred during fiscal year (FY) 2012, for awards made in FY 2011. The information presented in this report summarizes the results from the program's first year of operation to inform Congress and the public about the important work of SSVF grantees in administering, developing and operating SSVF grants in FY 2012. For a full list of SSVF grantees operating in FY 2012, please see Appendix 1 to this report.

The first section provides national trends on homelessness and Veteran homelessness followed by an overview of the authority, funding, and goals of the SSVF program. Section 2 provides an overview of the SSVF program's expenditures and households served in FY 2012, based on aggregated data from all 85 SSVF grantees. Information about who was served in the first year of the program is presented in Section 3, including the housing status and living situation of participants when they entered the program and their demographic characteristics. Section 4 presents the results of the program, including the types of homelessness prevention and rapid re-housing services that grantees delivered, the success rate of participants in retaining or securing permanent housing when they exited the program, as well as participants' gains in income and access to VA and other public benefits for which they were eligible. Section 5 summarizes grantees' progress in implementing new SSVF programs nationwide and how VA responded to early implementation and service delivery issues throughout the grant year. More specifically, throughout the implementation process, SSVF program office staff supported grantees in targeting those Veterans and their families who were the most in need and promoting best practices to increase rapid re-housing assistance for literally homeless (i.e., living on the streets or other places not meant for human habitation, or in an emergency shelter or transitional housing facility) Veterans. Finally, Section 6 summarizes the key findings and highlights the accomplishments of the SSVF grantees in their first year of operation.

Information for this report uses data reported by grantees in HUD's local Homeless Management Information Systems (HMIS) and grantee data submitted in quarterly and monthly "Dashboard" reports, as well as results from SSVF program participant satisfaction surveys. It also includes selected information from the first year of HPRP and HUD's 2010 and 2011 Annual Homeless Assessment Reports (AHAR) to compare, where possible, the SSVF program participants to similar populations served by HUD. VA thoroughly analyzed these data sources, often comparing SSVF with HUD's HPRP

program, many of these analyses are graphically represented exhibits throughout this report. For a full list and description of these exhibits, see Appendix 2. Additionally, in their quarterly program reports, SSVF grantees submitted over 300 unique narratives describing individual clients and their families' situation, needs, and the services they received through the program on their path to achieving housing stability. A sampling of these client experiences – all real cases, each from a different grantee – are included throughout the report to illustrate key concepts and represent the range of homelessness prevention and rapid re-housing assistance provided during the first year of the program. For a full list of the SSVF Client Experiences, please see Appendix 4 of this report.

## **Executive Summary**

Preventing and ending homelessness among Veterans is a national priority. President Obama has noted “that until we reach a day when not a single Veteran sleeps on the streets our business is unfinished.” To achieve this goal, Secretary Shinseki of VA has established a valiant goal to eliminate Veteran homeless by the end of 2015. In June 2010, the U.S. Interagency Council on Homelessness (USICH) released “*Opening Doors: Federal Strategic Plan to Prevent and End Homelessness*,” which is fully aligned with VA’s goal of ending Veteran homelessness by the end of 2015, noting that Veterans have historically been at greater risk of experiencing homelessness than other U.S. adults. The reasons for the increased risk are not all entirely related to military service. A lack of safe, affordable housing, poverty, employment rates, access to affordable health care and other risk factors contribute to homelessness among Veterans. These risk factors can be compounded by combat exposure, wartime trauma, and Post-traumatic Stress Disorder (PTSD) which can lead to further social isolation, and other mental health conditions. These factors can also increase the risk for homelessness and contribute to an over representation of Veterans among the homeless population.

To accomplish the goal of preventing and ending Veteran homelessness, VA has increased resources and transformed its service model to be more focused on homelessness prevention, permanent housing, rapid engagement in health care, and other supportive services. VA has also increased partnerships at both Federal and local levels and implemented data driven, research-informed best practices. VA’s homeless and prevention of homelessness service delivery system has become more accessible, community-based, and Veteran-centric, with a focus on meeting Veterans where they are and helping them move forward to improve their health and housing stability. As a result of these transformational efforts substantial reductions in Veteran homelessness have been made. Data from HUD’s 2012 Point-in-Time (PIT) count, a primary measure for assessing progress in ending Veterans homelessness, reveals a 17.2 percent reduction in Veteran homelessness from 76,329 to 62,619. Veterans as a percentage of the adult homeless population declined from 16 percent in 2009 to 13 percent as of 2012, this despite a challenging economic period.

Despite these gains in reducing Veteran homelessness, more focused and flexible resources are needed to promote greater access and engagement in both VA and community resources to eliminate Veteran homelessness. Toward that goal, Congress enacted legislation authorizing the SSVF program to help prevent and end Veteran homelessness. Section 604 of the Veterans' Mental Health and Other Care Improvements Act of 2008, P.L. 110-387, authorized VA to develop the SSVF program. Pursuant to section 604(c) of P.L. 110-387, VA is required to conduct a study examining the effectiveness of the SSVF program, and this report satisfies the requirements of section 604(c).

VA used the experiences of HUD's HPRP to inform the development of the SSVF program model. As part of the American Recovery and Reinvestment Act, HPRP provided financial assistance and services to prevent individuals and families from becoming homeless and help those who are experiencing homelessness to be quickly re-housed and stabilized. Both SSVF and HPRP had a homeless prevention and rapid re-housing component and both initiatives focused on individuals that were either imminently at-risk for homelessness or were literally homeless. There are several important distinctions between HPRP and SSVF. First, SSVF received much less funding than HPRP, approximately \$60 million dollars in SSVF funding as compared to \$1.5 billion dollars in HPRP funding. Funding for HPRP was for 3 years while funding for SSVF was 1-year funding, with a competitive renewal process. Eligibility requirements for both programs were 50 percent or less of average median income (AMI); however, SSVF gave priority to Veterans at 30 percent or less of AMI. More detailed comparisons are made in the body of this report.

Through the SSVF program, grantees (private non-profit organizations and consumer cooperatives) provide eligible Veteran families with outreach, case management, and assistance in obtaining VA and other benefits, which may include:

Health care services	Fiduciary and payee services
Daily living services	Legal services
Personal financial planning services	Child care services
Transportation services	Housing counseling services

In addition, grantees may also provide time-limited payments to third parties (e.g., landlords, utility companies, moving companies, and licensed child care providers) if these payments help Veteran families stay in or acquire permanent housing on a sustainable basis. Through SSVF, VA has been able to expand its continuum of services by offering homelessness prevention services to Veterans at-risk of homelessness and their family members and offer more low-income time limited and flexible housing stability and case management resources to Veterans and families.

In the first year of the SSVF program, approximately 21,100 Veteran households with over 35,000 adults and children received assistance.<sup>1</sup> There were 8,826 children who received assistance. Sixty-four percent of households served and 55 percent of all persons served were homeless and received rapid re-housing assistance. The balance of households (36 percent) and persons (45 percent) served were imminently at-risk of homelessness. Of those served by SSVF:

- Sixteen percent of Veterans assisted served in Iraq or Afghanistan and almost two-thirds of these were homeless.
- SSVF serves a younger population than is found in the homeless Veteran population as a whole—36 percent of those served by SSVF were age 30 and under and 36 percent were older than 50, compared to 9 percent and 52 percent of all homeless Veterans.<sup>2</sup>
- Fifteen percent of recipients were female Veterans—the highest proportion of women served of any VA homeless initiative.
- Three-fourths of participant households had incomes below 30 percent of the local AMI.
- Forty-six percent of all adult participants had a disabling condition.

Of the 21,393 Veterans served who exited the program in FY 2012, **86 percent had a successful outcome and exited to permanent housing** at an average cost of approximately \$2,800 per household. Success was high for all categories of participants: 90 percent of Veterans with children and 81 percent of individual Veteran exited to permanent housing. Among Veteran households at-risk of homelessness, 90 percent were stabilized in permanent housing, while 83 percent of homeless Veteran households were successfully re-housed in permanent housing. Overall, the median length of service among those who exited during the year was 93 days.

Grantees provided case management and other supportive services to all Veteran households and almost 31 percent of all grant funds were used for temporary financial assistance (TFA). Nearly all grantees provided rental assistance, which constituted 57 percent of all TFA spending. Of equal importance, 98 percent provided housing counseling and search assistance. Other frequent services provided include financial planning assistance and transportation assistance.

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<sup>1</sup> Summary data on the number served cited in the executive summary and conclusion represents totals for FY 2012. For purposes of analysis and comparison, data described in the body of the report is drawn only from HUD's HMIS. A small percentage of households were not included in HMIS data uploads from grantees due to data errors or omissions. As a result, data described in the executive summary includes a complete data set not available for the HMIS-based analysis used in the body of the report.

<sup>2</sup> HUD's 2011 AHAR.



Income support for program participants is critical to placing and sustaining Veteran families in permanent housing. SSVF enabled Veteran families to lift their income. Despite the high number of disabled participants, 39 percent of grantees provided employment assistance and 37 percent referred participants to other providers for employment assistance. Program participants, as intended, were assisted to access both VA and other public benefits for which they were eligible. Among those who exited the program, there was a 245 percent increase in the number of Veterans with VA Disability benefits; a 205 percent increase in those receiving Social Security Disability Insurance (SSDI); and a 256 percent increase in recipients of Supplemental Security Income (SSI). Receipt of non-disability income supports also increased by 358 percent for VA pensions, 184 percent for Social Security retirement, and 262 percent for Temporary Assistance for Needy Families (TANF). Overall, average monthly income increased by 8.3 percent for adult participants who exited during the first grant year.

Over the past 10 years, research focusing on ending homelessness has increasingly emphasized interventions that provide permanent housing for both single adults and homeless families. Of particular note is the robust body of evidence that has established subsidized permanent housing matched with supportive services as both clinical and cost-effective intervention for high-need individuals experiencing homelessness. SSVF was designed based on these findings. Its focus is rapid access and engagement in both permanent housing and services designed to support long term sustainment of housing and recovery in the community. SSVF is designed to be collaborative leveraging community partnerships and expertise to meet the needs of our homeless and at-risk for homeless Veterans. VA plans to expand this highly effective resource over the next 3 years, increasing funding from \$60 million in year 1 to \$300 million in year 3 ensuring that Veterans in all 50 States have access to this important resource.

## **Section 1 Introduction**

### **1.2 National Trends**

President Obama and VA Secretary Shinseki announced the Federal Government's goal to end Veteran homelessness by 2015. This goal was announced as part of the first national plan to prevent and end homelessness published by USICH. Together with its partners, VA is determined to end Veteran homelessness and is beginning to see results.<sup>3</sup>

Veteran homelessness is a problem of national importance. According to the 2012 AHAR published by HUD, on a single night in January 2012, there were 62,619

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<sup>3</sup> U.S. Department of Veterans Affairs. Homeless Veterans Initiative. [http://www.va.gov/HOMELESS/about\\_the\\_initiative.asp](http://www.va.gov/HOMELESS/about_the_initiative.asp).

homeless Veterans in the United States, representing about 13 percent of all homeless adults.<sup>4</sup> The estimated number of Veterans who used an emergency shelter or a transitional housing program at any time from October 1, 2010, through September 30, 2011, was 141,449.

Although SSVF services, having just begun in FY 2012, did not impact upon the January 2012 PIT count, VA expects that where SSVF services were available, reductions in homelessness among Veterans will be evident in the January 2013 PIT count.

### **1.3 SSVF Overview**

#### Authority and Funding

The SSVF program is a new program within VA's continuum of homeless services. In 2010, section 604 of the Veterans' Mental Health and Other Care Improvements Act of 2008, P.L. 110-387, authorized VA to develop the SSVF program.<sup>5</sup> The SSVF program's purpose is to provide grants to private non-profit organizations and consumer cooperatives who will coordinate or provide supportive services to very low-income Veteran families who are occupying permanent housing.

To further clarify the target population for SSVF assistance, the SSVF program's implementing regulations established that a very low-income Veteran family will be considered to be "occupying permanent housing" if the very low-income Veteran family:

1. Is residing in permanent housing;
2. Is homeless and scheduled to become a resident of permanent housing within 90 days pending the location or development of housing suitable for permanent housing; or
3. Has exited permanent housing within the previous 90 days to seek other housing that is responsive to the very low-income Veteran family's needs and preferences.

The first category is considered to be Veteran families in need of *homelessness prevention* assistance, while the second and third categories include Veteran families who are considered homeless and in need of *rapid re-housing* assistance.

For FY 2012 (grants were awarded at the end of FY 2011), VA awarded 1 year grants totaling \$59,490,116.95 to 85 grantees, with an average grant award of \$699,883.73. Grantees were selected through a competitive funding process described in part 62.23 of chapter I, title 38, CFR. The maximum allowable grant size was \$1,000,000. Grantees may apply for renewal grants in subsequent years. VA adheres to the criteria and selection process described in 38 CFR 62.24 and 38 CFR 62.25 to evaluate and

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<sup>4</sup> All data related to homelessness in the United States and cited in this section is from HUD's 2011 and 2012 AHAR.

<sup>5</sup> The statutory authority for the SSVF Program is found at 38 U.S.C. 2044. The implementing regulations are found at 38 CFR Part 62.

award supportive services grant renewals. Funding for the program has been increased as announced in the FY 2012 and FY 2013 Notices of Fund Availability (NOFA). For FY 2013 services (awarded through the FY 2012 NOFA), VA awarded approximately \$100 million to 151 grantees in 49 States, the District of Columbia, and Puerto Rico. All 85 grantees from the FY 2011 grant round were awarded renewal funding.

For FY 2011 awards, VA gave priority to applicants that provide or coordinate the provision of supportive services for very low-income Veteran families transitioning from homelessness to permanent housing. In addition, to the extent practicable, through the selection process VA ensured that supportive services grants were equitably distributed across geographic regions, including rural communities and tribal lands.

The SSVF program regulations, in conjunction with the FY 2011 NOFA, required grantees to use supportive services grant funds in accordance with the following requirements:

1. A maximum of 10 percent of supportive services grant funds can be used for administrative costs identified in 38 CFR 62.70.
2. Between 60 and 75 percent of supportive services grant funds must be used to provide supportive services to very low-income Veteran families who either (i) are homeless and scheduled to become residents of permanent housing within 90 days pending the location or development of housing suitable for permanent housing, as described in 38 CFR 62.11(a)(2), or (ii) have exited permanent housing within the previous 90 days to seek other housing that is responsive to their needs and preferences, as described in 38 CFR 62.11(a)(3). This type of assistance is referred to as rapid re-housing.
3. Between 20 and 35 percent of supportive services grant funds must be used to provide supportive services to very low-income Veteran families who are residing in permanent housing, as described in 38 CFR 62.11(a)(1). This type of assistance is referred to as homelessness prevention.
4. In conjunction with the requirements noted above, grantees may utilize a maximum of 30 percent of supportive services grant funds to provide TFA (subsequently modified to a maximum of 50 percent) paid directly to a third party on behalf of a participant for child care, transportation, rental assistance, utility-fee payment assistance, security deposits, utility deposits, moving costs, and emergency supplies in accordance with 38 CFR 62.33, 62.34 of the SSVF program regulations.

These requirements were established to ensure a majority of SSVF funding was used to assist homeless Veterans regain housing, limit assistance for homelessness prevention, and emphasize less costly interventions such as case management and assistance in obtaining other VA and public benefits.

## Program Goals and Services

SSVF is designed to rapidly re-house homeless Veteran families and prevent homelessness for those at imminent risk due to a housing crisis. Designed to play a critical role in the goal to end homelessness among Veterans, the focus of SSVF is housing stability. The program's objective is to achieve that stability through a short-term, focused

The goal of SSVF is to help Veteran families who are homeless or at-risk of homelessness quickly regain stability in permanent housing after experiencing a housing crisis.

intervention. SSVF employs a Housing First model. Housing First focuses on helping individuals and families access and sustain permanent rental housing as quickly as possible while providing the needed health care and other supports to sustain permanent housing and improve one's quality of life. This approach is most likely to create an environment where these other needs experienced by the Veteran's family are more likely to be addressed successfully (often with plans to be followed after discharge from SSVF). One of the particularly attractive components of SSVF has been that it has provided services to the entire family, not just the Veteran.

Eligible program participants may be a Veteran who is a single person or a family in which the head of household, or the spouse of the head of household, is a Veteran. When serving Veteran families under the first permanent housing category (i.e., those at-risk of homelessness), VA encouraged grantees to target prevention assistance to those families at the *greatest risk* of becoming homeless. The SSVF FY 2011 NOFA included a list of potential "risk factors" for homelessness for consideration by grantees in developing their programs. The FY 2011 NOFA also encouraged grantees to develop a formalized screening tool to assess a very low-income Veteran family's risk of homelessness and to prioritize the provision of supportive services to those very low-income Veteran families most in need. When serving Veteran families who are homeless under the second and third categories (i.e., those currently homeless), VA encouraged grantees to focus on providing assistance to help quickly re-house and stabilize homeless Veteran families.

In addition to the SSVF program's specific focus on assisting very low-income Veteran families, SSVF program goals and objectives include targeting special populations. For grants awarded in FY 2011, these priorities included:

- Veteran families earning less than 30 percent of AMI;
- Veterans with at least one dependent family member;
- Chronically homeless Veteran families; and
- Formerly chronically homeless Veteran families.

In the FY 2012 NOFA, VA modified these priorities to include Veterans returning from Iraq and Afghanistan, as well as Veteran families located in rural areas or on Indian tribal property.

SSVF grantees assist participants by providing a range of supportive services designed to resolve the immediate crisis and promote housing stability. Grantees are required to provide the following supportive services to each Veteran family:

- Outreach services;
- Case management services;
- Assistance in obtaining VA benefits: assistance in obtaining any benefits from the Department which the Veteran may be eligible to receive, including, but not limited to, vocational and rehabilitation counseling, employment and training service, educational assistance, and health care services; and
- Assistance in obtaining and coordinating the provision of other public benefits available in the grantee's area or community, including:
  - Health care services (including obtaining health insurance);
  - Daily living services;
  - Personal financial planning;
  - Transportation services;
  - Income support services;
  - Fiduciary and representative payee services;
  - Legal services to assist the Veteran family with issues that interfere with the family's ability to obtain or retain housing or supportive services;
  - Child care;
  - Housing counseling; and,
  - Other services necessary for maintaining independent living.

In addition to the required supportive services, SSVF emphasizes housing stabilization, linking participants to community resources and mainstream benefits, and helping participants develop a plan for preventing future housing instability.

**SSVF Client Experience A**

We were made aware of a family of seven living in a motel in an outlying rural area. When found by our team, the family had expended all their funds and had no food. Eviction from the motel was imminent due to their inability to pay. One of the five children (who ranged in age from 5 to 15) has a seizure disorder and was in need of medical care. We negotiated with the owners of the motel in order to have time to get the family into a home of their own. SSVF case managers also assisted with housing search, emergency food, and assisted the Veteran to obtain work to help support his family. As a result of our intervention, this family of seven is now safely housed with a better outlook for their future and long-term housing sustainability.

Grantees may also assist participants by providing TFA, including rental assistance, security or utility deposits, moving costs or emergency supplies. Grantees may provide TFA using supportive services grant funds subject to the limitations described in

38 CFR 62.34, or grantees may use TFA from using other Federal, state or local resources.<sup>6</sup> TFA may be paid directly to a third party on behalf of a participant for rental assistance, utility fee payment assistance, security or utility deposits, moving costs, child care, transportation, and emergency supplies as necessary. Although TFA is considered an optional program element, all grantees have incorporated TFA into their available services.

### **HUD Homelessness Prevention and Rapid Re-Housing Program (HPRP)**

Although HUD's experiences with the now completed HPRP informed many of the SSVF program's goals and policies, there are important differences between SSVF and HPRP. HPRP was a one-time, \$1.5 billion formula grant program authorized as part of the American Recovery and Reinvestment Act of 2009 intended to ameliorate the most severe effects of recession experienced by low income families and was allocated to 535 jurisdictions nationwide. HPRP ended nationwide on September 30, 2012. SSVF was launched not long after HPRP and with a similar dual focus on prevention and rapid re-housing as a means to reduce homelessness. Both programs require prevention assistance be limited to individuals and families who would be homeless "but for this assistance" and limit participant eligibility to individuals or families with incomes that do not exceed 50 percent of current local AMI.

The focus of both programs is crisis intervention and resolution and promotion of housing stability. Similar to HPRP, SSVF assistance is time-limited and not intended to provide long-term, ongoing support or to address all of the financial and supportive services needs of participants that affect housing stability. When participants require long term support, grantees are to focus on connecting such participants to mainstream Federal and community resources, such as the HUD-VASH program, HUD Housing Choice Voucher programs, McKinney-Vento funded supportive housing programs, and TANF, that can provide ongoing support as required.

SSVF grantees are able to design their individual programs according to local needs, allowing considerable flexibility in the use of funds to achieve program goals. SSVF differs from HPRP, however, in the types, duration, cost limits and conditions related to providing TFA and other uses. For example, HPRP did not allow financial assistance to be used for emergency supplies, transportation costs or child care expenses, whereas these payments are allowed under SSVF.

In addition to requiring certain assistance be provided to each Veteran family, as summarized above, SSVF has more limitations on the use of funds for program administration, TFA and, significantly, in the proportion of funds grantees may use for providing rapid re-housing and homelessness prevention assistance. SSVF restricts the amount of assistance grantees can use for homelessness prevention, requiring at least 60 percent of funds to be used for rapid re-housing assistance in order to ensure

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<sup>6</sup> Ibid.

the majority of assistance is directed to homeless Veterans and their families. HPRP did not have such restrictions and grantees spent a majority of HPRP assistance on homelessness prevention. Based on lessons from HPRP and the desire to better target HUD assistance, in 2012, HUD Secretary Shaun Donovan issued guidance to HUD grant recipients urging them to invest a significantly larger share of HUD homeless assistance in rapid re-housing and to give rapid re-housing assistance highest priority under the Emergency Solutions Grants Program.

While preventing homelessness is a key Federal goal and the objective of both programs, efficiently identifying and serving persons who are most at-risk of becoming literally homeless without assistance is a major challenge. Research demonstrates that targeting efforts often fail to specifically identify persons who actually do become literally homeless from among the much greater number of households who experience a housing crisis but do not require emergency shelter or become literally homeless.<sup>7</sup> While VA emphasized direct funding to Veterans who were already homeless, VA supported grantees in improving their prevention targeting through training, technical assistance and development of a new prevention screening and targeting tool.

#### **SSVF Client Experience B**

“Jim” was a struggling homeless Veteran who could not find permanent housing due to limited availability in the area, resistant landlords, zero income, unemployment, and a lack of cognitive mental abilities. Our SSVF case manager was able to quickly find permanent housing options, and convinced the landlord to permit Jim to reside there. Our team of case managers was able to successfully collaborate with the landlord and help them see how important housing was for this Veteran. Within 1 month of residence, the case manager was able to secure employment for Jim, thus providing future sustainability. Jim was also referred for continual mental health counseling in order to receive psycho-social education on PTSD, and for counseling on the negative effects of alcohol abuse. The most critical element to Jim’s success was the follow up and support our SSVF program was able to offer, using the Housing First approach.

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<sup>7</sup> Culhane, D. P., Metraux, S., and Byrne, T. (2010). A Prevention Centered Approach to Homelessness Assistance: A Paradigm Shift? Supplemental Document to the Federal Strategic Plan (FSP) to Prevent and End Homelessness: June 2010. United States Interagency Council on Homelessness – FSP Supplemental Document #18; Shinn, M., Baumohl, J., and Hopper, K. (2001). The prevention of homelessness revisited. *Analyses of Social Issues and Public Policy*, 1(1), 95-127; Shinn, M. (2007). “Preventing and Alleviating Homelessness – Prevention Approaches” in *Homelessness Handbook*. Ed. David Levinson and March Ross. Great Barrington, MA: Berkshire Publishing Group, 2007, 291-299. Print.; Shinn, M., Greer, A. L., Bainbridge, J. and Kwon, J. (2012) *A model for targeting prevention services to families at greatest risk of homelessness*. Paper presented at conference of the American Public Health Association, San Francisco, October 30, 2012.

## Section 2 SSVF Program Overview

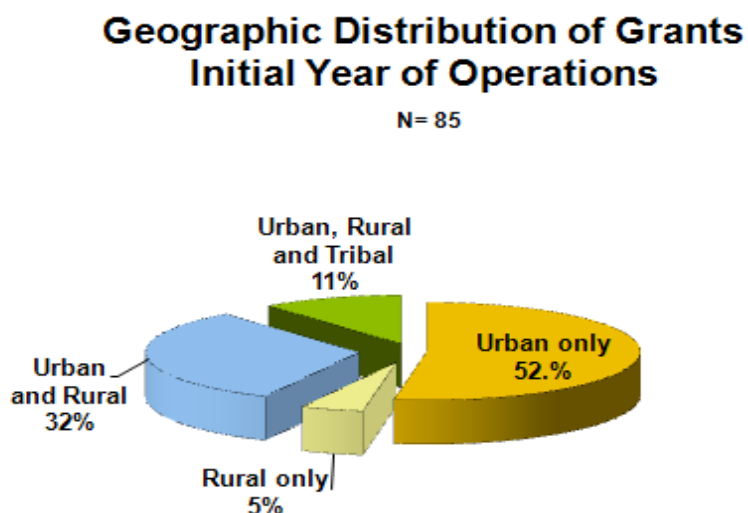
This section provides an overview of the SSVF program, including expenditures and households served, based on aggregated data from all 85 SSVF grantees for FY 2012. SSVF quarterly reporting by grantees includes two components: a financial report and a narrative report. Grantees submit these reports to SSVF Regional Coordinators who in turn, submit them to VA's SSVF Program Office (SSVF Regional Coordinators perform a variety of functions, most importantly monitoring programs, providing technical assistance, and helping to coordinate SSVF with other VA homeless services). Data related to grant amounts, budgets, and grant spending is based solely on data as it was submitted by grantees after the end of the fourth quarter.

### 2.1 SSVF Grant Funding

In FY 2011, VA awarded approximately \$59.5 million in SSVF funding to 85 grantees. Grant award amounts ranged from \$41,000 to \$1,000,000, with an average award size of nearly \$700,000. Grantees expended 99.7 percent of all funds awarded.

Budgeted expenditures compared with actual expenditures changed over the course of FY 2012 as grantees fully implemented their programs. During the first two quarters, grantees expended less than budgeted, but increased spending in the second half of the year reflecting normal program start-up patterns as grantees learned the rules of the program and put systems and staffing in place to implement the program. VA monitored grantee expenditures on a quarterly basis and provided direct technical assistance for grantees still experiencing start-up and expenditure issues in the latter half of the year to ensure full program implementation and utilization.

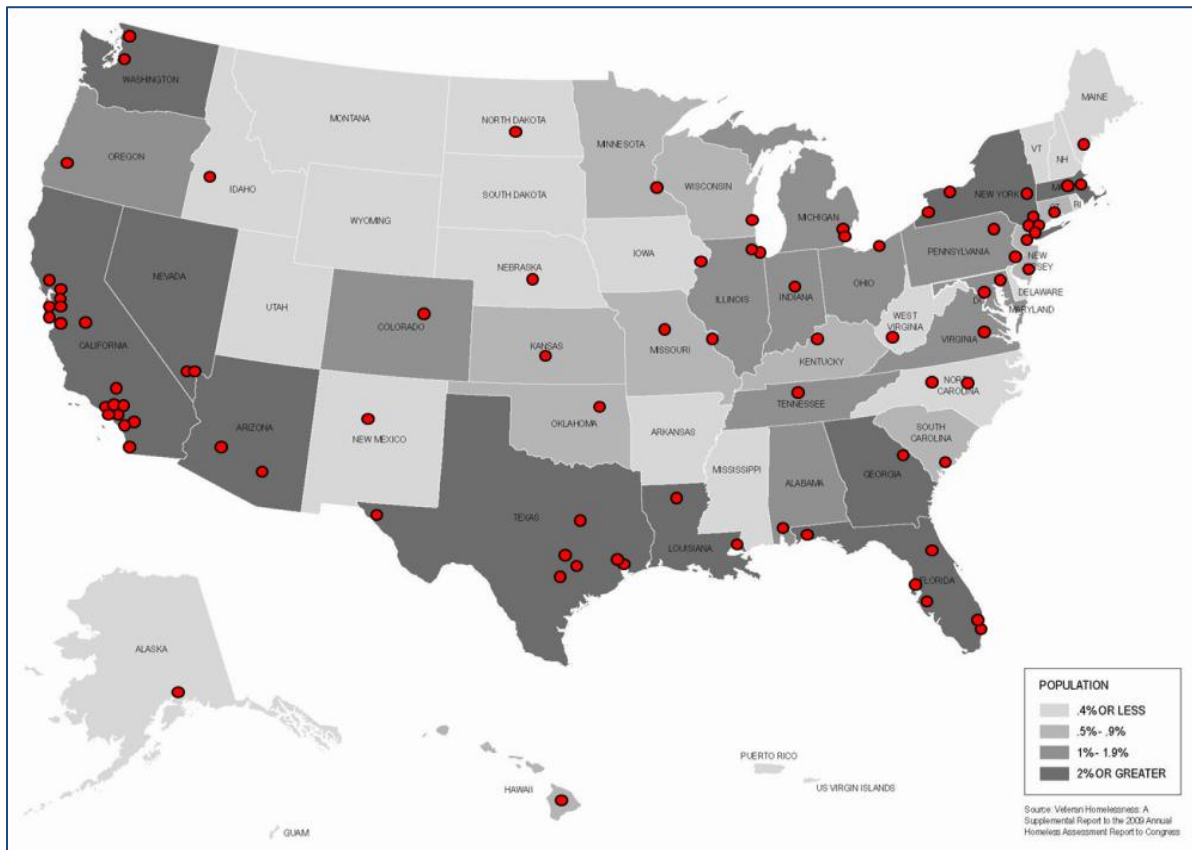
#### Exhibit 1: FY 2011 SSVF Grant Award Distribution





SSVF awards were widely distributed across the country, by region and by community type, with a balance of both urban and rural grantees. Following the FY 2011 awards, in FY 2012, there were operational SSVF programs in 40 states and the District of Columbia. Through the SSVF program regulations, the FY 2011 NOFA and the grant awards, VA made a deliberate effort to respond to the needs of very low-income Veteran families by funding more programs in states with a higher share of homeless Veterans. As shown in Exhibit 1, a majority of Year 1 SSVF programs were in urban-only areas, with the remaining awards in areas that have urban and rural or tribal areas or rural-only areas.

**Exhibit 2: Geographic Distribution of FY 2011 SSVF Grantees**



Source: U.S. Department of Veterans Affairs.

Red dots represent location of SSVF grantees.

**In FY 2012, the SSVF program served 21,111 Veteran households, comprised of 32,676<sup>8</sup> people.** A majority of households served 70.5 percent, were households without dependents; and 29.5 percent were households with dependents. The average number of new households served per grantee and overall increased each quarter as grantees implemented their programs, expanded outreach and increased access to SSVF in partnership with local VA medical centers and programs.

Overall, 64 percent of all households served (55 percent of all persons) were homeless and received rapid re-housing assistance to obtain and maintain housing, while 36 percent of households (45 percent of persons) were at-risk of homelessness and received homelessness prevention assistance.<sup>9</sup> Homeless households included a greater number of single adult or adult only households, while families with dependents were a greater share of persons receiving homelessness prevention assistance, thus increasing the number of participants served through prevention.

In FY 2011, VA awarded \$59.5 million in SSVF program awards to 85 grantees. The program served 21,111 Veteran households, comprised of 32,676 people in FY 2012. Sixty-four percent of assisted households were homeless; 36 percent were imminently at-risk of homelessness.

Over the course of FY 2012, SSVF grantees served an increasingly larger share of Veteran households who were homeless, versus those at-risk of homelessness. VA encouraged this shift and supported grantees through

Webinars, grantee meetings, and individualized technical assistance to understand and implement effective outreach and rapid re-housing assistance for homeless Veterans. By the fourth quarter of FY 2012, nearly 70 percent of new households served were homeless and received rapid re-housing assistance.

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<sup>8</sup> 32,676 is the sum of people who received either prevention or rapid re-housing assistance. This total does not adjust for people who received both prevention and rapid re-housing assistance. Only 231 persons (less than 1 percent) received both types of assistance. This number is used to represent the total of all persons served in Year 1 (i.e., FY 2012) throughout the report. Also, data cited represents totals entered into HUD's HMIS for FY 2012. For purposes of analysis and comparison, data described in the body of the report is drawn only from HMIS. A small percentage of households were not included in HMIS data uploads from grantees due to data errors or omissions and therefore totals are less than described in the executive summary and conclusion. The executive summary and conclusion reference over 35,000 SSVF participants served, this number represents the most complete data available to VA, but for the purposes of providing accurate comparisons and full reporting, this report uses data drawn from HUD's HMIS.

<sup>9</sup> This information is based on grantee reported repository data on housing status at program entry, which is used to designate assistance type (rapid re-housing or prevention). Persons served in Categories 2 and 3 were considered homeless for VA requirements but they also included persons who were not yet literally homeless, i.e. people who were doubled up and staying with family or friends. Thus, data on persons served by assistance type does not always align with repository housing status data that identifies persons as literally homeless. Discrepancies in repository data related to persons served by assistance type may also be due to reporting errors or timing issues. Therefore, for the balance of the report we use repository data on housing status at entry for calculating and presenting the number of persons served by assistance type.

**Exhibit 3: Persons and Households Served by Assistance Type**

<b>Assistance Type (Permanent Housing Category)<sup>10</sup></b>	<b>Clients</b>		<b>Households</b>	
Homelessness Prevention (Category 1 )	14,820	45%	7,663	36%
Rapid Re-housing (Categories 2 and 3)	18,087	55%	13,766	64%
<b>Total Assisted*</b>	<b>32,676</b>	<b>100%</b>	<b>21,111</b>	<b>100%</b>

Sources: SSVF: HMIS Repository and SSVF Grantee Quarterly Self Reports.

\* This total is the sum who received either prevention or rapid re-housing assistance, but not both.

Note: There were minor discrepancies in the reported number of households served. Other counts of households served in this report may vary slightly due to grantee reporting error and/or methodological differences in counting households for specific reporting metrics, such as household type and type of assistance received.

**2.2 Financial Expenditures**

The following summarizes FY 2012 SSVF expenditures by expenditure type. As indicated in Exhibit 4, SSVF grantees spent most award funds (46 percent) on personnel and labor costs, with the second largest share of grant funds spent on TFA. As originally established in the FY 2011 SSVF NOFA, grantees were not allowed to expend more than 30 percent of grant funds on TFA. As noted earlier, VA established this limit to ensure program services consisted of more than emergency financial aid and emphasized non-financial forms of intervention to help Veterans establish housing stability plans and access needed VA and community services to support long-term stability. However, during the course of the year grantees reported that they were turning away eligible Veteran families for services as they were unable to successfully intervene to meet the needs of these families within the program’s limits on financial assistance. Consequently, VA increased the limit on TFA to allow grantees to utilize a maximum of 50 percent of supportive services grant funds for these purposes. This adjustment came late in the program year. Consequently, only slightly more than the original limit of 30 percent was used for financial assistance in SSVF Year 1.

**Exhibit 4: Financial Expenditures by Type, Budgeted vs. Actual**

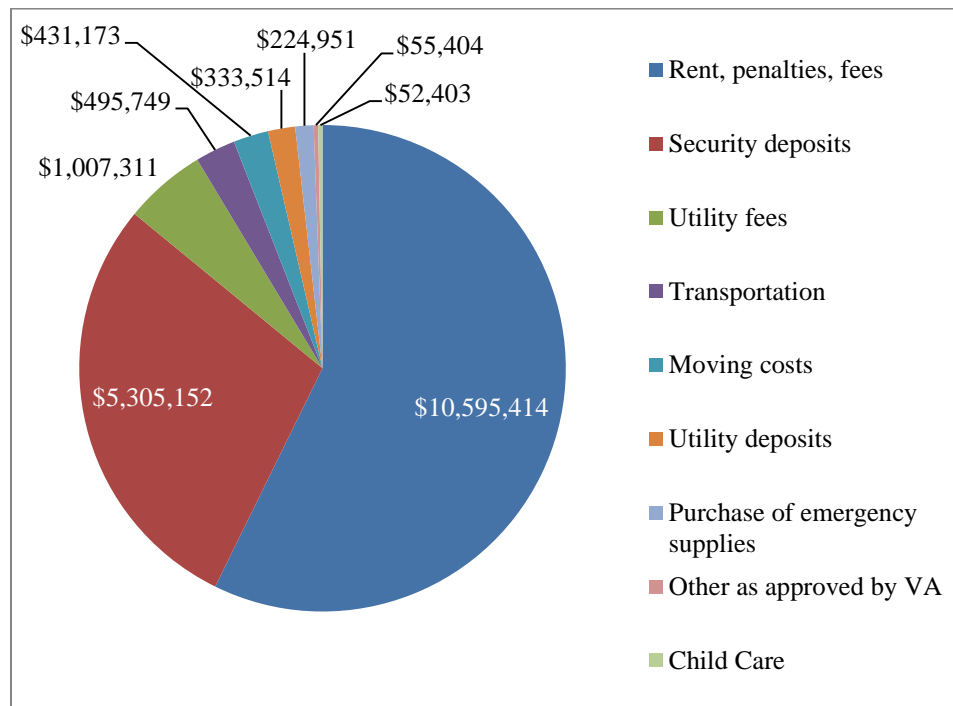
<b>Expenditure Type</b>	<b>Total budgeted</b>		<b>Total expenditures</b>		<b>Variance</b>
□ Personnel / Labor	\$28,395,024.43	47.5%	\$27,468,217.96	46.3%	-3.3%
□ TFA	\$17,999,452.88	30.1%	\$18,324,560.10	30.9%	1.8%
□ Other Provision / Coordination of Supportive Services	\$7,492,103.27	12.5%	\$7,690,296.63	13.0%	2.6%
□ Administrative	\$5,487,816.48	9.2%	\$5,478,686.52	9.2%	-0.2%
□ Lease / Maintenance of Vehicle	\$394,372.00	0.7%	\$351,651.30	0.6%	-10.8%
<b>TOTAL</b>	<b>\$59,768,769.06</b>	<b>100.0%</b>	<b>\$59,313,412.51</b>	<b>100.0%</b>	<b>-0.8%</b>

Source: SSVF Grantee Quarterly Reports

<sup>10</sup> For the remainder of the report, we refer to the three permanent housing categories as “assistance types.”

Rent-related assistance was the largest TFA category, making up 57.3 percent of all TFA expenditures, followed by security deposits at 28.7 percent and utility fees at 5.4 percent. The remaining categories combined made up 8.6 percent of expenditures.

**Exhibit 5: FY 2012 Temporary Financial Assistance (TFA) Expenditures by Type**



Source: SSVF Grantee Quarterly Reports.

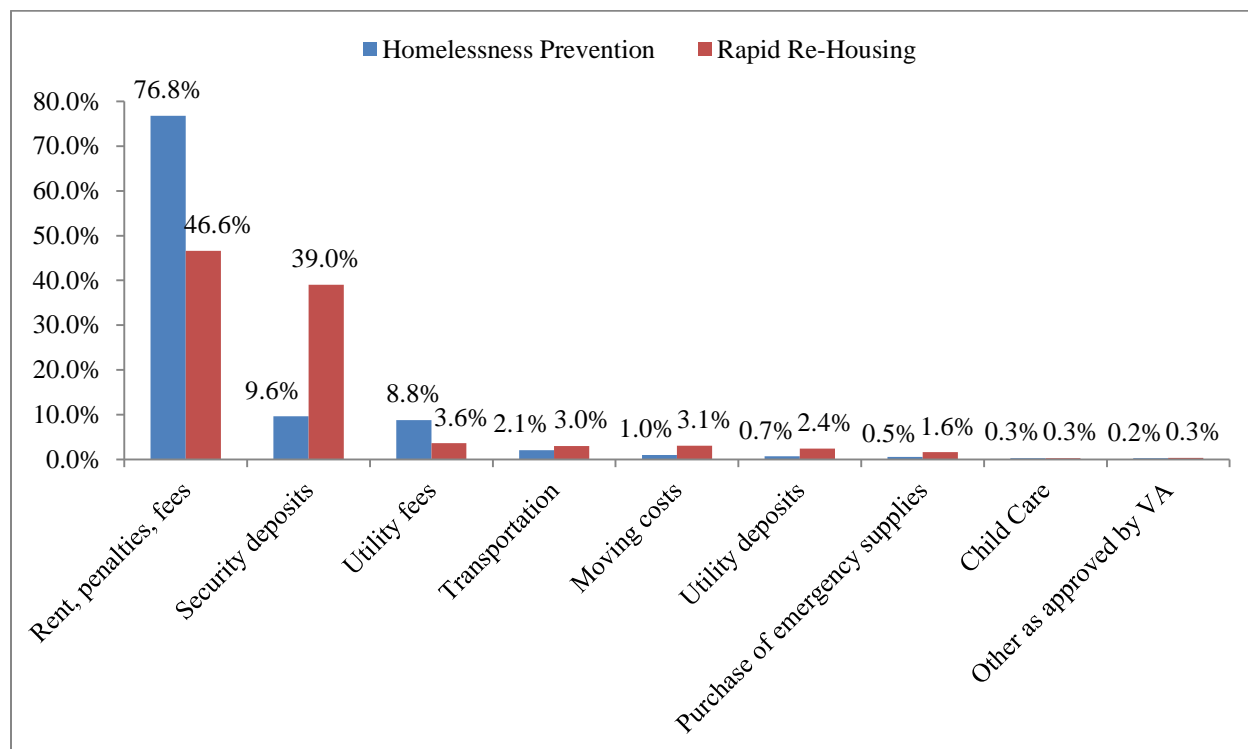
SSVF grantees assisted homeless clients with security deposits over four times more than clients who were at-risk of homelessness. Homeless clients also received a greater proportion of TFA for transportation, moving costs, utility deposits and purchase of emergency supplies. Homelessness prevention clients were more likely to use TFA for rent and related fees, including utility fees.

The numbers of clients and households served in the first year of the program, when compared with data on program expenditures, enable the calculation of the “unit cost” of the program as a measure of program efficiency. Average unit costs for the program are shaded in blue in Exhibit 7. Average costs are presented for clients versus households, and for total program costs (including non-TFA expenditures) versus TFA-only costs, for both homelessness prevention and rapid re-housing clients.

Average total costs per person served in FY 2012 were about \$1,800. This cost is nearly equivalent for prevention and rapid re-housing clients with average total costs of \$2,786, slightly higher per prevention household served than the \$2,758 per homeless household served. This is likely because families with dependents were more represented in prevention households and single individuals were more represented in homeless households. For all clients who exited in FY 2012, the average total cost was \$3,152. For all clients who successfully exited to permanent housing (PH) in FY 2012,

they experienced an 85.1 percent (84 percent for adults) success rate at an average total per unit cost of approximately \$3,700.

**Exhibit 6: FY 2012 TFA Expenditures by Assistance Type**



Source: SSVF Grantee Quarterly Reports.

SSVF grantees tracked TFA expenditures according to assistance type, which enables a closer analysis of the average TFA costs. Prevention clients who exited in FY 2012 received an average of \$715 in TFA assistance compared to \$1,208 for rapid re-housing clients. While prevention clients experienced higher rates of success at a lower average per person cost, the higher TFA cost for rapid re-housing clients is consistent with VA’s intent for SSVF to focus on assisting Veterans and their families who are literally homeless and likely to face significant barriers to housing stability as one of the priority populations.

**SSVF Client Experience C**

An Operation Iraqi Freedom Veteran entered our SSVF program in August 2012. He and his family of six had been living in a three-bedroom apartment and he lost his job. His wife lost hours at her job, which caused them to fall behind on their rent and be at-risk of homelessness. He and his family received 3 months rental assistance. During this time the assistance enabled him to find a full-time job on Fort Hood, and he is waiting to start training in the Fire Fighter’s academy in addition to his full-time job.

**Exhibit 7: Average Total Cost and Average TFA Costs Per Client by Assistance Type in FY 2012**

<i>Assistance Type</i>	<i>Homelessness Prevention</i>	<i>Rapid Re-housing</i>	<i>Total Assisted*</i>
Number of Clients Served	14,820	18,087	32,676
Average Total Cost** Per Client Served	\$1,801	\$1,804	\$1,815
Number of Households Served	7,663	13,766	21,111
Average Total Cost** Per Household Served	\$2,786	\$2,758	\$2,810
Number of Clients who Exited in FY 2012	9,120	9,919	18,819
Average Total Cost** Per Client who Exited	NA	NA	\$3,151.78
Average TFA Cost*** Per Client who Exited	\$715	\$1,208	\$983
Number of Clients who Exited to PH in FY 2012	8,334	7,870	16,024
Average Total Cost** Per Client who Exited to PH	NA	NA	\$3,701.54
Average TFA Cost*** Per Client who Exited to PH	\$782	\$1,522	\$1,155
% Clients who Exited to Permanent Housing	91.4%	79.3%	85.1%

Sources: SSVF: HMIS Repository and SSVF Grantee Quarterly Self Reports.

\* This total is the sum who received either prevention or rapid re-housing assistance, but not both.

\*\* Total cost includes all program expenditure types (Personnel, TFA, Other Provision / Coordination of Supportive Services, Lease/Vehicle Maintenance).

\*\*\* TFA Cost only includes expenditures on TFA.

In terms of length of participation in the program, adults who exited the SSVF program received an average of 90 days of rapid re-housing assistance, as compared to an average of 96 days for adults who received prevention assistance. The median length of participation for rapid re-housing clients was even lower, less than 3 months, supporting SSVF’s housing first approach as an effective way to address Veteran homelessness.

**Exhibit 8: Average and Median Length of Participation in Days for Adult Leavers<sup>11</sup> in FY 2012**

<i>All Adults who Exited in FY 2012</i>	<i>Homelessness Prevention</i>	<i>Rapid Re-Housing</i>	<i>Unduplicated Total</i>
Average length of participation	96	90	93
Median length of participation	91	85	88

Source: SSVF: HMIS Repository.

<sup>11</sup> 81 percent of all adults served in SSVF were Veterans.

## Section 3 SSVF Participants and their Characteristics

This section provides a summary of SSVF participants and their characteristics, including household type, living situation prior to program entry, income and other key demographics.

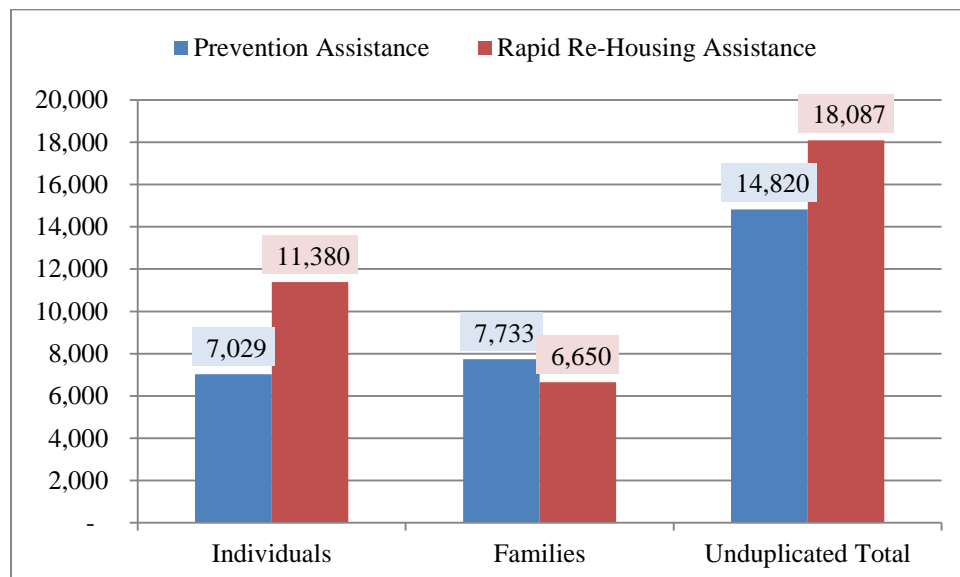
### 3.1 Overview of Persons and Households Served

#### SSVF Persons Served by Household Type

A majority of households served, 70.5 percent, were households without dependents (adult individuals), which include single adults and other adult-only households, such as adult couples without children. The remainder of households served (29.5 percent) were households with dependents (families), consisting primarily of households with at least one adult and at least one minor child.

The number of persons served by different household configurations is shown in Exhibit 9. The majority of rapid re-housing assistance was provided to 11,380 individuals, and among these households, to individual adult male Veterans. Individual adult male Veterans also received the bulk of prevention assistance. However, families and households with multiple adults received higher proportions of prevention assistance than rapid re-housing assistance. Single female Veterans represented 9.6 percent of all persons served. Nearly 28 percent of all persons assisted included families.

**Exhibit 9: Persons Served in SSVF Year 1 (FY 2012) by Household Type and Assistance Type**

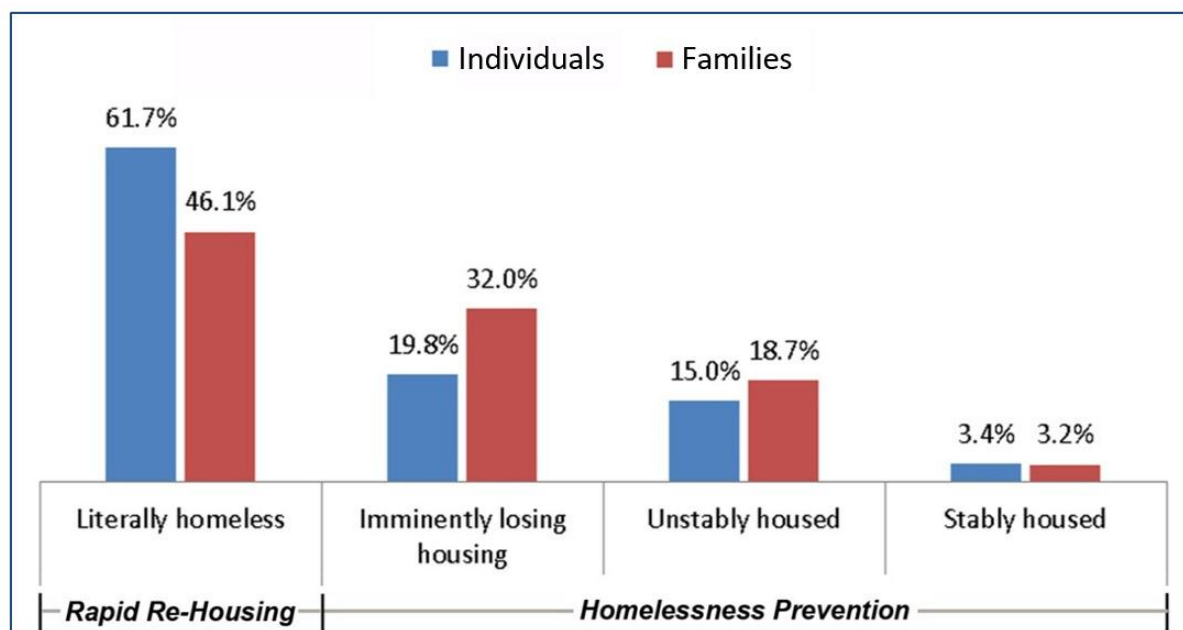


Source: SSVF: HMIS Repository.

### 3.2 Housing Status and Living Situation at Program Entry

As indicated above, 55 percent of the persons assisted by SSVF and 64 percent of all households assisted were literally homeless and received rapid re-housing assistance. Among individuals, the majority (62 percent) were literally homeless at program entry; whereas the majority of persons in families (54 percent) were either reported as imminently losing their housing or unstably housed and at risk of losing their housing at program entry and provided homelessness prevention assistance.

**Exhibit 10: Status at SSVF Program Entry by Household Type in FY 2012**



Source: SSVF: HMIS Repository.

#### Comparison of SSVF and HPRP

Although the SSVF program and HPRP shared a similar target population, very low-income individuals and families who are already homeless or have a high risk of becoming homeless, in practice they placed a very different emphasis on these two populations. While HUD encouraged HPRP grantees to expend a higher proportion of HPRP funding on rapid re-housing, it was not required. HPRP grantees were permitted to determine the proportional allocation of funds between rapid re-housing and homelessness prevention.<sup>12</sup> As a result, the vast majority of HPRP assistance in the first year of the program went toward homelessness prevention (77 percent of persons assisted received prevention assistance) while only 23 percent received rapid re-housing assistance. Given the more direct and measurable impact of rapid re-housing on reducing homelessness, in subsequent program years HUD worked to

<sup>12</sup> 38 CFR 62.33 and 62.34. See also SSVF Program Guide, pages 151-152.



shift this balance and increase HPRP use for rapid re-housing through increased communication of policy priorities and the provision of technical assistance and training.

**Exhibit 11: SSVF and HPRP Persons Assisted with Prevention vs. Rapid Re-Housing in FY 2012**

<b>Assistance Type (Permanent Housing Category)</b>	<b>SSVF Year 1</b>		<b>HPRP Year 1</b>	
	Count	Percentage	Count	Percentage
Prevention (SSVF Category 1 )	14,820	45%	530,183	77%
Rapid Re-housing (SSVF Categories 2 and 3)	18,087	55%	160,081	23%
<b>Total Persons Assisted*</b>	<b>32,676</b>	<b>100%</b>	<b>690,264</b>	<b>100%</b>

Sources: SSVF: HMIS Repository.

HPRP: HUD's 2010 Annual Homeless Assessment Report (AHAR) to Congress, Chapter 6 (HPRP), P. 57.

\* Totals are the sum of people who received either prevention or rapid re-housing assistance, but not both.

Compared to HPRP Year 1, SSVF focused on rapid re-housing and served more than double the proportion (55 percent) of persons whose housing status at program entry was literally homeless.

The stability of prior living arrangements varied by whether a participant was at-risk of homelessness or already homeless and assisted with rapid re-housing. Generally, rapid re-housing participants appeared to have more frequent moves and higher rates of housing instability than prevention clients prior to entering the program. About 72 percent of rapid re-housing clients had stayed in their prior residence for less than a year compared to 44 percent of prevention clients. By contrast, over half of prevention clients had lived in their prior residence for 1 year or longer.

**Income**

Overall, grantees were successful in assisting SSVF participants in raising their current incomes and/or finding new income sources. Increased income and greater financial stability, as with improved access to mainstream public benefits, are critical for helping very low-income Veterans and their families quickly regain stability in permanent housing (these results are discussed in detail in Sections 4.6 and 4.7 of this report).

### SSVF Client Experience D

“Mary” resides in an apartment with her 2-year old son and is a domestic violence survivor. During Mary’s abusive relationship she was not permitted to work. When she came to our agency she was behind on rent and distraught at the thought of becoming homeless. After talking with Mary, it was determined she served 4 years in the U.S. Air Force. Most interestingly, Mary did not recognize she was a Veteran. She had never met with a VA Counselor and was unaware of the benefits to which she and her child are entitled. After engaging Mary in program services, Mary was successful in avoiding eviction and worked with the SSVF Employment Specialist to obtain employment. Child care was also identified and the amount paid assisted Mary while she worked. Mary was also referred to Legal Aid to assist in removing items on her credit report identified as belonging to the husband and referred to our local Vet Center for linkage to VA benefits.

### 3.3 Participant Demographics

In FY 2012, the SSVF program served 19,854 Veterans. Among all Veterans served, approximately 17 percent (3,335 people) served in Iraq or Afghanistan and were Veterans of Operation Enduring Freedom (OEF) or Operation Iraqi Freedom (OIF). A little over one third of OEF/OIF Veterans received homelessness prevention assistance, and almost two thirds of OEF/OIF Veterans were homeless and received rapid re-housing assistance.

#### Exhibit 12: Operation Enduring Freedom (OEF) and Operation Iraqi Freedom (OIF) Veterans Served by Assistance Type

Assistance Type	Afghanistan/Iraq Veterans Served	
	#	%
Homelessness Prevention	1,280	38%
Rapid Re-Housing	2,060	62%
<b>Unduplicated Total</b>	<b>3,335</b>	<b>100%</b>

Source: Roll up of Grantee Dashboard data at the national level.

Notes: These data are for individuals and not households. There may be small discrepancies with data on OEF/OIF Veterans served and data for these populations from roll up of Grantee Quarterly reports at the national level.

Nearly 59 percent of all Veterans served were individual adults between the ages of 45-61. These proportions of Veterans served in SSVF are generally skewed younger than those typically found in the homeless Veteran population. Driving this trend where the larger proportion of Veterans who were between the ages of 18-34 (16 percent) and between 35-54 (48.3 percent). This contrasts with the 9.1 percent aged 18-34 and

the 39.1 percent aged 35-54 of all homeless Veterans.<sup>13</sup> Regardless of the type of assistance received, Veterans in family households tended to be younger than single homeless Veterans.

**Exhibit 13: Veterans Served by Age and Household Type, FY 2012**

<b>Veterans Served by all assistance types</b>	<b>Total</b>		<b>Single Veterans</b>		<b>Veterans in Families</b>	
	<b>#</b>	<b>%</b>	<b>#</b>	<b>%</b>	<b>#</b>	<b>%</b>
18 - 24	479	2.4%	296	1.9%	183	4.6%
25 - 34	2,707	13.6%	1,378	8.7%	1,329	33.4%
35 - 44	2,952	14.9%	1,766	11.1%	1,186	29.8%
45 - 54	6,635	33.4%	5,749	36.2%	886	22.3%
55 - 61	5,023	25.3%	4,730	29.8%	293	7.4%
62+	2,048	10.3%	1,942	12.2%	106	2.7%
Don't know / refused / missing	11	0.1%	11	0.1%	0	0.0%
<b>TOTAL</b>	<b>19,854</b>	<b>100.0%</b>	<b>15,872</b>	<b>100.0%</b>	<b>3,982</b>	<b>100.0%</b>

Source: SSVF: HMIS Repository.

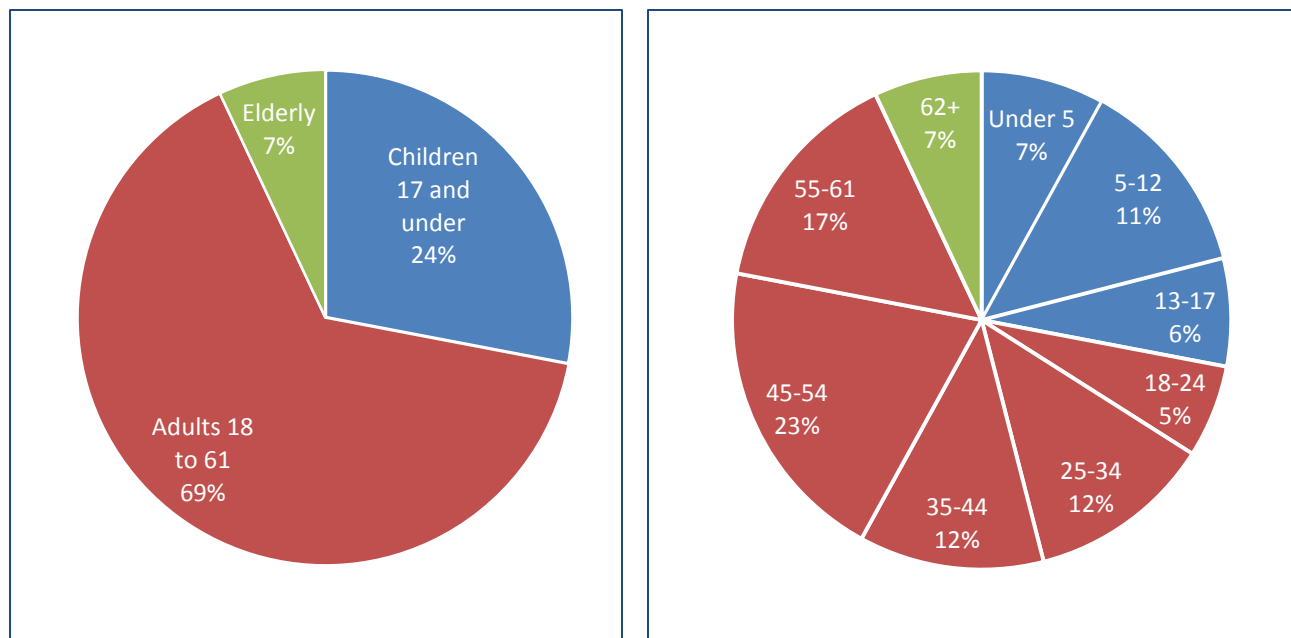
Of all clients served in the first year of SSVF, their ages were distributed broadly across every age group.<sup>14</sup> Adult clients between the ages of 18-61 represented nearly 70 percent of all clients served, while children under the age of 18 represented nearly one quarter, or 24 percent, of persons served. Children under the age of 13 were more common than teens in households with children. Persons between the ages of 18-24 were the least numerous of all SSVF program participants.

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<sup>13</sup> HUD's 2012 AHAR

<sup>14</sup> Data on SSVF participant demographics are from the HMIS Repository, unless noted otherwise.

**Exhibit 14: All Clients Served by Age, FY 2012**



Source: SSVF: HMIS Repository.

Overall, the majority of people provided supportive services in Year 1 were male, but the proportions varied depending on Veteran status, household type, and to a lesser degree, type of service received. Men were more represented among Veterans only, while women and transgendered persons were roughly twice as likely to be represented among all clients served. Women represented 13.1 percent of all Veterans served. In contrast to the 8.6 percent of women served across all VA homeless programs in FY 2012, this is the highest proportion of women served of any VA homeless initiative, demonstrating that SSVF is serving a gap in the growing population of women in military service.

Women represented 13.1 percent of all Veterans served—the highest proportion of women served of any VA homeless initiative.

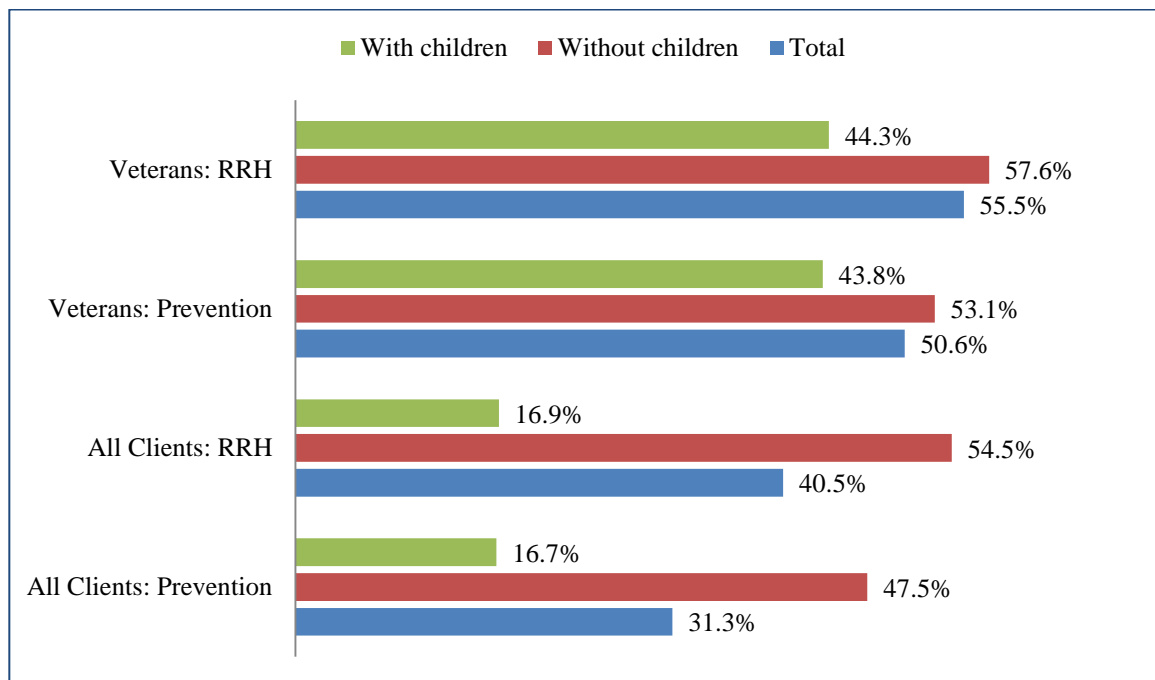
Similar to gender, the ethnicity and racial makeup of program participants varied by household type. Non-Hispanic/Latino clients were more likely to be Veterans, be single, and use rapid re-housing services than their Hispanic/Latino counterparts. In terms of race, the vast majority of all clients served (92 percent) were White (46.6 percent) or Black/African American (45.3 percent), and nearly equal numbers of these two races were served. Among all clients, the remaining eight percent were spread across persons of multiple races (2.7 percent), American Indian or Alaskan Native (2.4 percent), and less than 1 percent each of Asians and Native Hawaiian/Other Pacific Islanders.

With regard to disability, **nearly half of all adults (46.2 percent) served by SSVF in FY 2012 reported having a disabling condition**, including 51.8 percent of single adults and 30.7 percent of adults in families. Among all clients, one-third of all individuals served by SSVF (or 11,880 persons) had a disability, and 54 percent of all Veterans served by SSVF (or 10,633 persons) had a disability.

Regardless of assistance type, rates of disability were higher for single adults and lower among persons in families. Among homeless households, just under 17 percent of all clients in families were disabled compared to 54.5 percent of single individuals. Among Veterans served, the rates of disability remained high regardless of household type or assistance type.

In FY 2012 the SSVF program served 19,854 Veterans. Nearly half of all adults (46.2 percent) served by SSVF reported having a disabling condition.

**Exhibit 15: Disability Status by Population, Household Type and Assistance Type (Prevention or Rapid Re-housing (RRH)) in FY 2012**



Source: SSVF: HMIS Repository.

While direct provision of health care services was a prohibited use of SSVF grant funds, grantees were nevertheless expected to ensure linkage to VA and community-based health care services. Grantees also received training and support from VA to increase awareness of available assistance and effective linkage strategies. During each quarter of FY 2012, an average of 79 out of 85 grantees reported they referred participants to health care services; 45 grantees referred participants to daily living services; and, 34 grantees referred participants to mental/behavioral health or substance abuse services.

### **SSVF Client Experience E**

J.D. is a U.S. Air Force Veteran who lived in his vehicle for several years until it was impounded. He sought services from our agency for the first time in 2011. J.D. had faced many arrests, some of them for violent offenses and others for drug use. Once enrolled in our SSVF program, case management staff developed a housing plan to obtain an apartment subsidized through HUD's Shelter Plus Care program within 2 months. But to do so, he would have to address his special needs. J.D. agreed to psychiatric counseling, anger management and substance abuse recovery services. J.D. periodically meets with our on-site Psychiatrist (who is funded by non-SSVF sources), meets weekly with our Licensed Clinical Social Worker for Anger Management and attends local Narcotics Anonymous meetings. Just a few weeks ago, J.D. signed his first lease in years and is now comfortably and stably housed in his own apartment with ongoing subsidy from the Shelter Plus Care program.

## **Section 4 SSVF Program Results**

### **4.1 Satisfaction of Veterans Targeted by the Program**

SSVF grantees must provide each participant with a VA-designated satisfaction survey within 45 to 60 days of the participant's entry into the grantee's program and again within 30 days of such participant's pending exit from the grantee's program. Grantees were responsible for providing these surveys to participants and explaining that completed surveys should be submitted directly to VA. Surveys given to participants were postage-paid to ensure return directly to the SSVF program office by the participant.<sup>15</sup>

Although completion of participant satisfaction surveys must be encouraged by grantees, actual completion of the surveys by participants is entirely optional. A total of 1,022 surveys were completed and returned, and these surveys were completed by participants from 75 SSVF grantees. Of the 1,022 responses received, 65 percent reported that only one person in the household received SSVF support services and about 31 percent indicated that two or more persons in the household received support services. Survey respondents reported high rates of literal homelessness prior to receiving SSVF services. Of all respondents at some point prior to their program entry, 45 percent indicated they had at some point lived on the street, 44 percent had lived in a car or boat, 43 percent in an emergency shelter, and 36 percent in transitional housing (percentages do not add up to 100 as some participants were homeless in

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<sup>15</sup> In situations where the grantee actively assisted a participant in transitioning to another location or program, grantees were to provide the participant with a satisfaction survey as close to exit as possible. In situations where a participant exited the program unexpectedly, grantees were to attempt to follow up with the participant to provide a survey.

multiple settings). Almost two-thirds (64 percent) reported that they previously lived with family or friends, and 45 percent had lived in a hotel, motel, or single room occupancy (SRO) unit. Fully one-third reported they had slept in one of those locations six or more times.

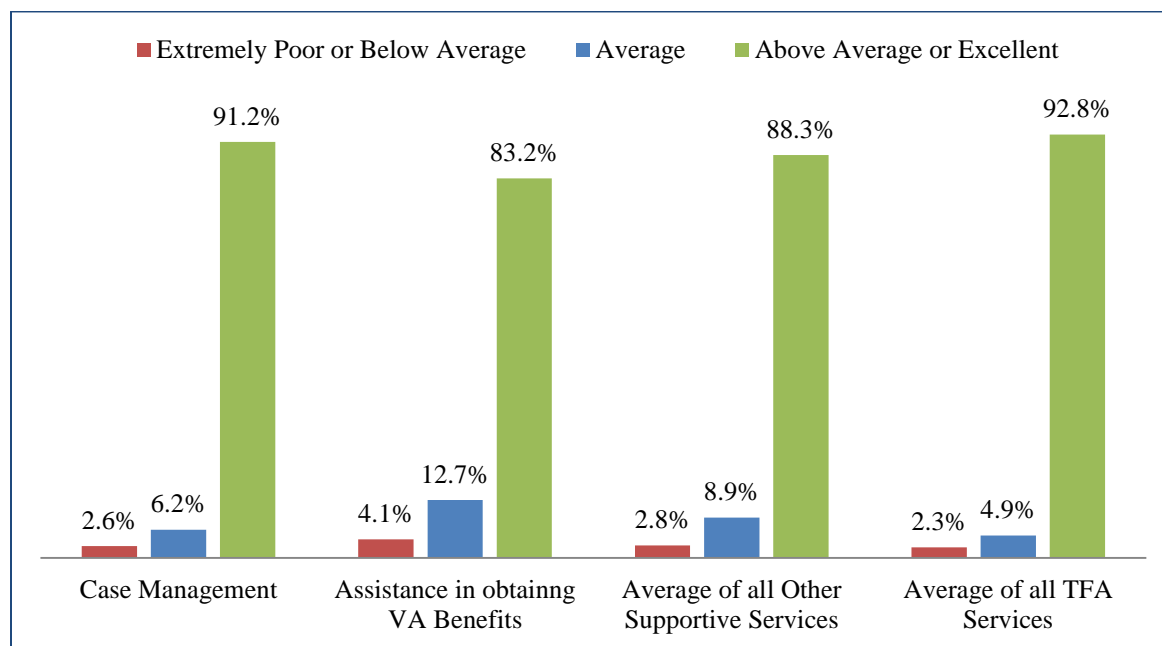
Veterans who had recently begun receiving services reported experiencing higher rates of housing and income instability than Veterans who had exited the program. Seventy-one percent of respondents at entry reported having difficulty in paying housing costs due to decreasing income. This was usually due to a significant change in employment status, such as loss of work, in the year before they requested help from the provider. The corresponding share of persons who exited the program and reported that they struggled to pay housing costs was much lower, at 21 percent.

About 81 percent of respondents indicated needing case management services and nearly 85 percent reported receiving such services. Nearly three quarters of respondents (72.9 percent) reported needing assistance in obtaining VA benefits and rental assistance (71.2 percent), while nearly half reported needing help with housing counseling (51.7 percent), income support (50.8 percent), and security and utility deposits (50.1 percent). Over 50 percent received the first three services, as well as personal financial planning. Fewer than 25 percent of participants reported needing and receiving moving costs, emergency supplies, legal services, and child care services.

A large proportion of participants also indicated satisfaction with the program's ability to meet their housing needs. Of the 80 percent who reported that their SSVF provider involved them in creating an individualized housing stabilization plan, nearly 96 percent felt that the housing plan was a good fit for their needs.

In terms of participant perceptions of the quality of overall services received from their SSVF provider, 87 percent indicated "Above Average" or "Excellent" quality, while only 6 percent reported "Average" and 3 percent reported "Below Average" or "Extremely Poor" quality.

**Exhibit 16: Participant Rating of Service Quality, FY 2012**



Source: SSVF Participant Satisfaction Survey.

Participants similarly indicated very high levels of satisfaction with overall services received from their SSVF provider. Nearly 92 percent indicated they were “Satisfied” or “Very Satisfied” with the services, and 87 percent said they would definitely recommend another Veteran or friend in need to their SSVF provider. Finally, 85 percent of respondents reported they would definitely return to their SSVF provider if in need again, and had a choice of where to go at no cost to them.

Consistent with the overall high levels of satisfaction with the program, participant perceptions of the quality of specific services were very positive across all services. On a five item scale ranging from “Extremely Poor” to “Excellent”, 83 percent or more of respondents rated all services as either “Above Average” or “Excellent” quality.

**4.2 Target Populations**

Grantees reported the number of households served according to VA’s target population priorities for programs funded in FY 2011. These included:

- Veteran families earning less than 30 percent of AMI;
- Veterans with at least one dependent family member;
- Chronically homeless Veteran families; and
- Formerly chronically homeless Veteran families.

Across all grantees, approximately 75 percent of households served were reported to have incomes less than 30 percent of AMI. A similarly high number of participants received VA health care and/or other VA benefits. Additionally, nearly one-third of



Veterans served were reported to have at least one dependent family member. These figures indicate that the program met its goals in primarily serving very low-income Veteran families and connecting those families with supportive services to meet their needs.

**Exhibit 17: New Participant Households Served by Target Population in FY 2012**

<i>Target Population Priorities</i>	<i>Number Served</i>	<i>Percentage Households Served</i>
Veteran families earning less than 30% of area median income	16,628	75.5%
Chronically homeless Veteran families*	5,298	24.1%
Formerly chronically homeless Veteran families	2,968	13.5%
Veterans with at least one dependent family member*	3,077	30.6%
<b>Target population priorities for programs funded in 2012</b>		
Households with one or more female Veterans	3,439	15.6%
Returning Veterans from Afghanistan and/or Iraq**	3,316	
Participants Receiving VA Health Care and/or Other VA Benefits**	15,827	

Source: SSVF: Roll up of Grantee Quarterly Report Data on New Households/Participants Served

\* SSVF defines the term “Veteran family” to include a Veteran who is a single person and a family in which the head of household or the spouse of the head of household is a Veteran. Thus, the number of chronically homeless Veteran families, who included single adults as well as multiple adults in households with or without children, was more numerous than the number of Veteran families in households with children.

\*\* The last two population categories do not have percentages because they are individuals, whereas the other population categories are households. There may be small discrepancies with data on OEF/OIF Veterans served and data for these populations from the roll up of SSVF grantee Dashboard data at the national level.

**SSVF Client Experience F**

This quarter, we successfully ended homelessness for a female OEF Veteran and her family. This Veteran had more than 30 years of service in the U.S. Army, including as a field trainer. But she fell on hard times upon her exit from the military. Soon after, her husband (also a military Veteran) passed away, and she was diagnosed with PTSD. She found herself unemployed, penniless and homeless on the streets. Through the assistance of SSVF program staff, she was able to reunite with her children and stabilize on medication in one of our family shelters. Soon, with the help of SSVF staff and SSVF TFA, she moved into a three-bedroom house that she could afford based on her income. We are honored that our agency was able to help this Veteran transition from homelessness to stability and permanent housing through the SSVF program.

### 4.3 Housing Assistance Provided

#### Types and Frequency of Temporary Financial Assistance (TFA) Provided

Almost all grantees provided rental assistance and security and utility deposits in FY 2012. As summarized previously in Exhibit 5, over half of all TFA expenditures (or \$127,272 on average per grantee) covered participant rent, penalties and fees. Security and utility deposits were the second most frequent type of TFA provided, consisting of about 30 percent of total TFA expenditures at an average of \$68,347 per grantee. Utility fee assistance, provided by 90 percent of grantees, cost \$13,167 on average per grantee and made up 5.4 percent of total TFA expenditures. For every type of TFA, fewer grantees provided the assistance in the first quarter than in subsequent quarters, due to program start-up. However, grantees gradually increased provision of several TFA types, including transportation assistance, moving costs assistance, emergency supplies assistance and child care assistance over the year. This may be due to outreach and referral efforts on the part of grantees and/or Veterans learning “word-of-mouth” about the different types of assistance available from this new program.

**Exhibit 18: Number of Grantees Providing TFA per Quarter by Type in FY 2012**

<i>TFA Provided by Type</i>	<i>Average # of Grantees per Quarter</i>	<i>Average % of Grantees per Quarter</i>	<i>Average Annual Expenditure per Grantee</i>
Rental assistance	83	98%	\$127,272
Security / utility deposits	83	97%	\$68,347
Utility fee assistance	77	90%	\$13,167
Transportation assistance	65	76%	\$7,656
Moving costs assistance	53	62%	\$8,213
Emergency supplies assistance	48	56%	\$4,736
Child care financial assistance	12	14%	\$4,367

Source: SSVF Grantee Quarterly Reports.

#### Types and Frequency of Supportive Services Provided

Overall, housing counseling and search and income support services were the most prevalent services that grantees provided directly or by referral to other providers, as reported quarterly by grantees. In addition, most grantees directly provided financial planning services, transportation services and income support services. Very few grantees directly provided more specialized services, such as fiduciary/payee services, and a very small number of grantees reported providing services that are prohibited by the program.

Most grantees complemented the services provided directly by referring participants to services with other providers in the community. The three most common services

referred to were health care services, income support and legal services. Although child care and fiduciary/payee services were referred on average by less than half of grantees each quarter, the number of grantees referring these services increased significantly during Year 1. The number of grantees referring fiduciary/payee services increased by 77 percent (or from 26 to 46 grantees) and the number referring child care services increased by 69 percent (or from 29 to 49 grantees).

Each quarter grantees also reported the supportive services that were most requested by participants. These included various types of TFA, housing stabilization, case management, and housing search assistance, assistance in accessing VA and public benefits, and employment services. The most requested services generally correspond to the frequency of TFA and supportive services grantees provided (and referred), suggesting that SSVF programs in FY 2012 were responsive to client needs.

**Exhibit 19: Average Number of Grantees Providing Supportive Services per Quarter by Type in FY 2012**

<i>Type of Benefit/Service</i>	<i>Average # of Grantees Providing Service</i>	<i>Average % of Grantees Providing Service</i>	<i>Average # of Grantees Referring Out for Service</i>	<i>Average % of Grantees Referring Out for Service</i>
Housing counseling, housing search	84	98%	63	74%
Personal financial planning services	72	84%	54	64%
Transportation services	67	79%	60	71%
Income support services	57	67%	75	88%
Legal services	15	18%	69	81%
Fiduciary and representative payee services	6	7%	38	44%
Daily living services	5	6%	45	53%
Child care	5	6%	40	47%
Health care services	2	2%	79	93%

Source: SSVF Grantee Quarterly Reports.

**4.4 Services Provided to Encourage Productive Activity**

**Employment and Educational Services**

In addition to the supportive services described above, the primary type of “other” services grantees reported providing were employment related services, such as employment training and job search assistance. On average, 39 percent of grantees reported providing employment services directly to participants during the grant year and 37 percent referred participants to other providers for these needs. Provision or referral of education related services was not very common in FY 2012.

## 4.5 Housing Outcomes

### Housing Destination at Exit

Overall, 14,511 adults had exits from the SSVF program recorded in HMIS during FY 2012. Among these adult “leavers,” 84 percent had a successful housing outcome, as indicated by a permanent housing destination at program exit. The most common permanent housing types were rental by client with no subsidy and rental by client with a HUD-VASH voucher. The former indicates participants’ success in securing permanent housing without a long-term subsidy, while the latter indicates grantees’ success in connecting very low-income, often chronically homeless Veteran families to a HUD-VASH voucher and long-term housing assistance. Less than nine percent of adult leavers exited to temporary destinations (emergency shelter, transitional housing, places not meant for human habitation, and temporary housing with family or friends), and under one percent exited to institutional settings.

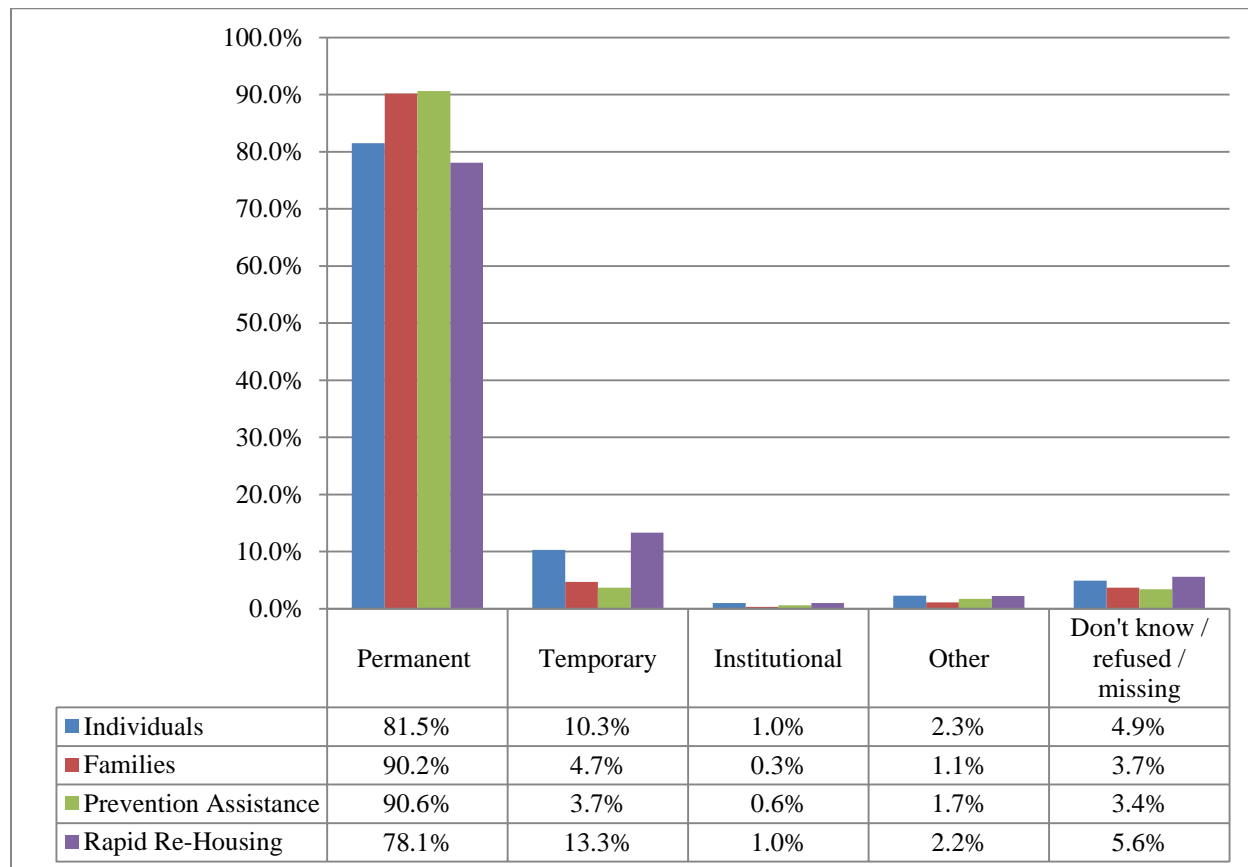
Of the 14,511 adults served who exited the program in FY 2012, 84 percent had a successful outcome and exited to permanent housing.

The next exhibit shows housing exits for all adults by household type (individuals vs. families) and assistance type (prevention vs. rapid re-housing clients). The comparison by subgroups reveals that adults in families experience better housing outcomes overall than single adults and adults who received homelessness prevention assistance experienced higher success rates than those receiving rapid re-housing assistance. Homeless single adults and adults in families who received rapid re-housing assistance nonetheless experienced a high rate of placement in permanent housing (78.1 percent). These outcomes suggest that the supports and services provided through SSVF programs are successful in helping Veteran families find or regain stable housing regardless of household type or assistance type.

#### **SSVF Client Experience G**

“Carlos” is an 81 year-old Veteran who was sleeping on a park bench. He was given a bed at the Salvation Army. Carlos became ill and was in and out of the hospital, which ultimately led to him losing his bed at the Salvation Army and ending up back on a park bench. Carlos worked with our SSVF Resource Specialist to locate an apartment. Carlos lost all of his belongings he had stored at a previous location – everything from military documents, personal documents, photos, clothing, and furniture were gone. Despite this, Carlos did not lose focus on his goal to obtain permanent housing and remained optimistic and hopeful. Carlos was approved for his apartment shortly after applying for our SSVF program. He continued to work with the Resource Specialist to obtain low-income utility assistance and food stamps. The Resource Specialist also connected Carlos with Meals on Wheels, and he now receives deliveries twice a week. Carlos is now stabilized and self-sufficient.

**Exhibit 20: Adult Program Exits by Housing Outcome, Household Type and Assistance Type in FY 2012**



Source: SSVF: HMIS Repository.

**Permanent Housing Success Rate by Assistance Type and Length of Participation in FY 2012**

Permanent housing success rates for all persons who exited the program in FY 2012 (18,819 people) were also examined according to the type of assistance they received and the length of their participation in the SSVF program. Overall, 91.4 percent of persons who received prevention assistance (8,334 people) and 79.3 percent of persons receiving rapid re-housing assistance (7,870 people) exited to a permanent housing destination.

In the SSVF program in FY 2012, 91.4 percent of persons who received prevention assistance (8,334 people) and 79.3 percent of persons receiving rapid re-housing assistance (7,870 people) exited to a permanent housing

Of the 9,120 persons who received SSVF prevention assistance and exited the program in FY 2012, slightly under half were enrolled in the program for 90 days or less, and slightly over half exited after 90 days. Ninety-two percent of prevention clients enrolled for 90 days or less exited to permanent housing and 90.8 percent of those enrolled more than 90 days exited to permanent housing.

A slightly larger proportion of the 9,919 SSVF rapid re-housing clients who exited (53.6 percent) were enrolled in program services for 90 days or less compared to 46.4 percent who exited after participating in the program for more than 90 days. Eighty-one percent of those served 90 days or less were in permanent housing at exit compared with 77.5 percent of those exiting after 90 days.

For both prevention and rapid re-housing clients, participants who exited faster had slightly higher rates of success in exiting to a permanent housing destination. These early findings have promising policy implications, but they should be interpreted with some caveats. Fast exits to permanent housing destinations might, in part, be a result of participants who used SSVF TFA as bridge funding for a HUD-VASH voucher. Anecdotal evidence from grantees suggests that clients needing longer than 90 days to successfully exit the program have more significant barriers or more complex family situations that necessitate a mix of different services and/or longer service durations to stabilize in permanent housing. VA deliberately designed the SSVF program to help very low-income Veteran families who are already homeless or at greatest risk of becoming homeless and who need a range of supports to end their housing crisis. Thus, these preliminary results require further investigation as the program matures to determine which families are in need of briefer interventions and which ones require more and/or longer supports to become stably housed. VA will continue to monitor SSVF grantees' performance in matching supportive services and service durations with the needs of Veterans and their families as the program is further implemented.

**Exhibit 21: Permanent Housing (PH) Success Rate of All Clients who Exited by Assistance Type and Length of Participation in FY 2012**

<i>Assistance Type</i>	<i>Length of Participation</i>	<i>% who received assistance</i>	<i>% with PH Destination</i>
Prevention	<= 90 days	48.8%	92.0%
	> 90 days	51.2%	90.8%
Total		100.0%	91.4%
Rapid Re-Housing	<= 90 days	53.6%	81.0%
	> 90 days	46.4%	77.5%
Total		100.0%	79.3%

Source: SSVF: HMIS Repository.

**Comparison of SSVF Housing Outcomes with HPRP**

Overall, adults who exited HPRP in the first year of the program experienced higher rates of placement in permanent housing (94 percent) as compared with SSVF (84 percent). However, these results are shaped by different program targeting as well as populations differences. HPRP placed a greater focus on preventing homelessness, while SSVF used most of its resources to serve those who were currently homeless. For both programs, HPRP and SSVF, the homeless population experienced somewhat lower rates of placement in permanent housing than at-risk households. Adding to the complexity, the population served by SSVF was older and had higher rates of disability.

Similar to SSVF, HPRP rapid re-housing clients who exited in less than 90 days were slightly more successful in obtaining permanent housing. The converse was true for HPRP prevention clients. For both SSVF and HPRP prevention clients were more likely to exit to permanent housing destinations than persons transitioning from homelessness, regardless of their length of participation in the program.

Additionally, while homeless and at-risk HPRP clients participated in program services for a shorter period of time and achieved higher housing placement rates, there were concerns in year 1 of the program related to targeting households most in need. Such concerns were not surprising given the minimal experience with rapid re-housing and targeting homelessness prevention assistance among HPRP grantees and sub-grantees. SSVF applied lessons from HPRP in both program requirements and grantee training and support to ensure SSVF assistance reached a higher proportion of homeless households and served those with the greatest housing barriers.

**Exhibit 22: HPRP Permanent Housing (PH) Success Rate of All Clients who Exited by Assistance Type and Length of Participation**

<i>Assistance Type</i>	<i>Length of Participation</i>	<i>% who received assistance</i>	<i>% with PH Destination</i>
Prevention	<= 90 days	70.4%	94.7%
	> 90 days	29.6%	95.9%
Total		100.0%	95.0%
Rapid Re-Housing	<= 90 days	77.1%	90.8%
	> 90 days	22.9%	89.4%
Total		100.0%	90.5%

Source: HPRP: HUD’s 2010 AHAR to Congress, HPRP Chapter 6, Exhibit 6-11, page 68.

**4.6 Mainstream Income and Health-Related Benefits**

In serving a population of very low-income Veteran families and individuals with high rates of disability who are struggling to avert or transition out of homelessness, it is critical for short-term prevention and re-housing programs to link participants to income and benefits to promote greater self-sufficiency, well-being, and long-term stability. Adults who exited SSVF in FY 2012 made significant gains in health and income security, which presumably increased their chances of finding and keeping housing.

Exhibit 23 shows number of adult leavers who had each type of cash or non-cash benefit at program entry and exit and the percent change in rate of receipt from entry to exit. While the rate of change does not describe individual outcomes, it does show aggregate change among those who exited and is an indication of increased access to health care among SSVF participants achieved during program enrollment.

As indicated below, a significant number of SSVF participants obtained cash and non-cash benefits while participating in the program. Overall, the largest increases in the number of adult leavers receiving a given cash or non-cash benefit occurred with Supplemental Nutrition Assistance Program (SNAP)/food stamps (3,091 persons), VA

medical services (2,841 persons) and Veteran’s disability payments (1,543 persons). Among those who exited the program, there was a 245 percent increase in the number of Veterans with VA Disability benefits; a 205 percent increase in those receiving SSDI; and, a 256 percent increase in recipients of SSI. Receipt of non-disability income support also increased by 358 percent for VA pensions, 184 percent for Social Security retirement, and, 262 percent for TANF. Additionally, there were large percentage increases but relatively small person-count increases in the receipt of other benefits, suggesting that SSVF programs also helped connect their clients to benefits that they do not typically access but were eligible to receive.

**Exhibit 23: Number of Adults who Received Mainstream Health Benefits at Entry and Exit**

<i>All Adult Leavers by Mainstream Benefit Sources</i>	<i>All household types</i>			
	<i># at Entry</i>	<i># at Exit</i>	<i># Change</i>	<i>% Change</i>
<b><i>Income Sources: Mainstream Health Benefits</i></b>				
Veteran’s disability payment (\$)	631	2,174	1543	244.5%
SSDI (\$)	455	1,388	933	205.1%
Worker’s compensation (\$)	13	33	20	153.8%
<b><i>Income Sources: Other Public Benefits</i></b>				
SSI (\$)	381	1,358	977	256.4%
Veteran’s pension (\$)	229	1,049	820	358.1%
Unemployment insurance (\$)	250	778	528	211.2%
General assistance (\$)	235	400	165	70.2%
Retirement income from Social Security (\$)	122	347	225	184.4%
TANF (\$)	60	217	157	261.7%
<b><i>Non-Cash: Mainstream Health Benefits</i></b>				
VA medical services	1,219	4,060	2841	233.1%
Medicaid	354	870	516	145.8%
Medicare	167	411	244	146.1%
State Children's Health Insurance Program (SCHIP)	5	12	7	140.0%
<b><i>Non-Cash: Other Public Benefits</i></b>				
SNAP / food stamps	1,458	4,549	3091	212.0%
Section 8, public housing, or other ongoing rental assistance	398	1,038	640	160.8%



<i>All Adult Leavers by Mainstream Benefit Sources</i>	<i>All household types</i>	<i>All household types</i>	<i>All household types</i>	<i>All household types</i>
<i>Category</i>	<i># at Entry</i>	<i># at Entry</i>	<i># at Entry</i>	<i># at Entry</i>
WIC	144	224	80	55.6%
Temporary rental assistance	5	39	34	680.0%
Other TANF-funded services	-	24	24	n/a
TANF child care services	6	16	10	166.7%
TANF transportation services	2	10	8	400.0%
<b>Total Number of Exiting Adults</b>	<b>14,511</b>			

Source: SSVF: HMIS Repository.

## 4.7 Other Outcomes

### Greater Income/Financial Stability

Overall, grantees were successful in assisting SSVF participants in raising their current incomes and/or finding new income sources. On average, adults experienced an 8.3 percent increase in income between program entry to exit and a 7.8 percent median change. Increased income and greater financial stability, as with improved access to mainstream public benefits, are critical for helping very low-income Veterans and their families quickly regain stability in permanent housing.

In terms of income sources, where data are available for participants at both program entry and exit, there was a net increase in receipt of income from all sources on which data was gathered. The top three sources having the highest net number of leavers were the same as the top three income sources at entry: earned income, Veteran’s disability payment and SSDI. In terms of percentage increase, program leavers experienced the greatest increases in Veteran’s pension and “Other” sources. Overall, 7,907 more Veterans reported having an income source at exit than they reported at entry, a percentage increase of nearly 250 percent. Among all SSVF adult leavers, 8,652 more persons reported having an income source at exit, a 246 percentage increase.

### Comparison of SSVF Income Changes with HPRP

A total of 12.8 percent of SSVF adults experienced an increase in income when they exited the program, almost double the 6.2 percent of HPRP adult leavers who had an increase in income at exit. However, these comparisons are tentative given that income at exit was unknown for nearly 21 percent of HPRP adult leavers.

#### **SSVF Client Experience H**

“Karen”, a female Veteran, her young daughter and new born grandson were residing in a local shelter. Due to our outreach efforts, she came to our agency for SSVF screening and intake. Her combined disability payments were \$700 a

month. Our case management and advocacy combined with the client's self-determination, led us to find affordable housing. We continued to provide financial classes and budgeting, of which she took the opportunity to better handle her finances. After paying her security deposit and providing utility assistance, she was empowered to move into her apartment. One of her goals was to increase her income, given she was below 30 percent AMI. Her daughter was referred to the women, infants, and children supplemental nutrition program, and Karen was connected to a local employment agency whose specific function was finding employment for individuals with SSI and SSDI payments. She was able to find employment as a low-impact security guard and will receive about \$900 a month, putting her and her family on a path to stability.

## **Section 5 SSVF Program Implementation and Technical Assistance**

### **5.1 Program Implementation**

Implementation for the SSVF program began immediately after passage of legislation authorizing the program, section 604 of P.L. 110-387. VA sought the input of thousands of homeless and formerly homeless Veterans surveyed during the Community Homelessness Assessment, Local Education and Networking Groups process to identify gaps in services. Through the National Center on Homelessness Among Veterans, researchers and leading providers in the field of homeless prevention contributed to SSVF's structure. SSVF program regulations reflect this input. Training, resources, and technical assistance were designed to promote the goal of using a Housing First approach that sought to serve Veterans at the highest risk of homelessness and Veterans with the highest barriers to exiting homelessness.

In particular, VA-sponsored training encouraged grantees to assist Veterans with zero income or income below 30 percent of AMI, Veterans with disabling conditions and other significant barriers to housing stability. VA created and implemented a new SSVF specific screening tool for homelessness prevention, incorporating eligibility criteria and weighted risk factors to ensure grantees served Veterans most at-risk of homelessness. VA also solicited and used grantee experience implementing the program to make key adjustments. For example, grantees reported that the 30 percent limit on TFA spending was causing them to screen out some qualified Veterans who needed more financial help. In response, by the end of FY 2012, VA changed its policy and allowed grantees to increase TFA spending to 50 percent of grant funds.

VA utilized a number of reporting vehicles during the first year to monitor and assess grantee spending and results. Data were regularly reviewed and discussed with grantees and used throughout the year to inform and direct technical assistance. Through this review, SSVF has identified particularly skilled grantees and has enlisted them in orienting new SSVF providers. SSVF has identified these programs as "mentor sites." The goal for these mentor sites is to work with new grantees to accelerate their skill development and knowledge acquisition.

## **Grantee Successes and Challenges**

Analysis of grantee quarterly report narratives and related data yielded themes around grantee successes and challenges in implementing their new SSVF program in the following six areas:

- Managing Staffing Needs;
- Enrollment/Managing Case Load;
- Marketing and Outreach;
- Community Partnerships;
- Collaboration with HUD-VASH; and
- Referral to Additional Services.

In addition, grantees were explicitly asked to report issues related to participant eligibility and participant safety in their quarterly reports.

### *Managing Staffing Needs*

In all quarters of Year 1, SSVF grantees reported issues with high turnover of staff. Many grantees reported hiring outreach specialists to take some of the burden off of their case managers who were working one on one with the Veteran clients. Several grantees hired new program managers throughout the quarters, usually citing positive results from the staffing change.

The first quarter was the hardest in terms of filling staffing needs and getting organized. By the fourth quarter, grantees seemed to really begin thinking about how the structure of their staff affected the efficiency of their program and how they could make changes to improve. They also began to implement higher levels and more ongoing staff training.

### *Enrollment/Managing Case Load*

Although the first quarter noted some slow program start-ups, the following quarters all mentioned managing full caseloads and increasing enrollment. The fourth quarter had several grantees reporting that they had exceeded their goals on the number of Veterans served. Managing a full case load appeared to be easier in the fourth quarter due to the restructuring of staff and the development of new intake/reporting tools that streamlined some program processes.

### *Marketing and Outreach*

The top outreach locations reported by grantees included places where literally homeless persons reside or are likely to contact (shelters, encampments, hotels/motels, outreach programs and housing programs), VA facilities and other Veteran organizations. Stand Down events were a strong recurring theme in the grantee quarterly reports. Grantees found these events to be highly effective in increasing enrollment in and awareness of the SSVF program. Other community events found to be effective included: Project Homeless Connect (community events comparable to Stand Down efforts), job fairs, baseball games, and Veteran's Day events.

Grantees reported being able to see a strong correlation between the increase in outreach and marketing and the number of eligible participants presenting themselves to the program staff. This was especially true in the higher number of literally homeless Veterans served.

### **SSVF Client Experience I**

“Ed”, a chronically homeless Veteran, and his partner were contacted through a note in a homeless encampment. The couple brought the majority of the required documentation with them so that they were enrolled in the SSVF program quickly. Ed and his partner were referred to a brand new senior housing complex. They were accepted within 24 hours and, with a letter of guarantee of deposit payment from our SSVF program, they were housed within an additional 24 hours, resulting in a rapid end to Ed’s long-bout with chronic homelessness.

In the fourth quarter, grantees reported increased visibility in the community due to the use of media (TV, radio, billboards, and newspapers) and taking the time to create presentations that could be shared with different community groups/interested parties. Although “local news/TV/radio” as an outreach location decreased, “advertisements” as a referral source increased.

Overall, the number of outreach locations was higher at the beginning of the program, but remained fairly constant throughout the year. Outreach to non-VA governmental offices, other non-profits, Grant and Per Diem (GPD) sites, local HUD-VASH programs, HPRP, and local news/TV/radio was higher in the first quarter and dropped by the fourth quarter. Conversely, outreach to jails and prisons, housing courts and faith-based organizations/churches started out lower and increased in subsequent quarters.

#### *Community Partnerships*

A focus on strengthening community partnerships became greater each quarter, as grantees better understood the benefits in doing so. Partnerships included those with landlords, media, other social service non-profits, VA, shelters, colleges/schools, and other referral sources. The fourth quarter had a particular emphasis on the positive community partnerships that had been built that allowed greater wrap-around services for the Veteran families.

The top referral sources indicated by grantees were VA facilities, Veteran organizations, GPD sites, HUD-VASH, HPRP, shelters, encampments, outreach programs, and housing programs. Other referral sources included hospitals, word-of-mouth, Veteran to Veteran, other non-profits, HPRP partner meetings and homeless coalition meetings, advertisement and family court, legal clinics, and jails.

#### *HUD-VASH*

Especially in the first quarter, grantees struggled to understand how SSVF and HUD-VASH could and could not be used together. HUD-VASH referrals and the importance of building of relationships with local VA HUD-VASH programs was

mentioned frequently and appeared to be an overall positive aspect of the SSVF program. Some grantees mentioned concerns over no longer having HPRP to cover HUD-VASH security deposits. Others mentioned that the number of referrals to HUD-VASH seemed to hamper enrollment into SSVF.

#### *Additional Services*

Each quarter showed a progressive movement towards wrap-around services for clients with grantees adding new services to their programs (or referring clients out for services). These services included: legal services, dental services, transportation, employment services, and family-centered activities.

#### *Ineligible Individuals*

Most grantees reported individuals were ineligible because they were over the AMI limit. The remaining chief reasons for ineligibility reported by grantees were: individuals did not meet housing status criteria or risk factors; residing outside of service area; ineligible Veteran status; lack of documentation; not expected household could be sustainable post-assistance; and, lack of follow-up for case management appointments.

#### *Participant Safety*

Overall, most grantees reported no issues related to participant safety. Among grantees who reported issues, the most common factors were domestic violence, threats of suicide by clients, and mental health issues. Incident reports were filed with SSVF program office.

## **5.2 Technical Assistance and Support**

### **Overview**

Concurrent with development of the SSVF program regulations and the FY 2011 NOFA, VA initiated planning for a responsive and collaborative approach to providing technical assistance (TA) and training for SSVF grantees. The approach was designed to enable successful implementation of this new VA program, while upholding the intention and vision that the SSVF program meet the housing crisis needs of Veterans who are homeless and most at-risk of becoming homeless. In February 2011, VA issued a request for proposals (VA-244-11-RP-0113) for technical assistance and support to increase grantees' ability to establish and operate successful supportive services programs. The Technical Assistance Collaborative (TAC) and TAC subcontractor Abt Associates, were awarded the contract following a competitive process and with a scope that included curriculum development, in-person and remote training, individual grantee technical assistance, compilation of grantee quarterly report data, and a draft production of this study and report.

VA established a regional structure and hired Regional Coordinators to perform monitoring functions, support grantees, and direct technical assistance. A protocol for accessing one-on-one TA was established and, upon program implementation, TA needs in areas of program design, service delivery, and policy implementation were quickly identified and responded to. For much of the first year of SSVF program

operations, TA efforts and adjustments focused on supporting grantees with their targeting and outreach practices, and designing program and service delivery so they are aligned with a crisis response orientation and Housing First best practices and account for consumer choice. TA delivery methods were readily adapted to meet the emerging needs of the grantees. Tools and products were developed and dispersed to grantees for immediate use.

### **Technical Assistance Provided**

Needs and challenges faced by the grantees were identified as they arose, and immediately shared with VA through an established TA protocol process. Areas identified and addressed included:

- Program start up and staffing;
- Enrollment of the targeted population (Veterans who are literally homeless or imminently at-risk of becoming homeless);
- Coordination with other VA programs, particularly HUD VASH and the GPD program;
- Adherence to a Housing First approach to facilitate rapid re-housing and housing stabilization; and
- Adjustments to the use of TFA services to best meet the needs faced by eligible Veterans and their families.

### *Outreach and Targeting*

SSVF grantees were faced with many more Veteran households in need than resources allowed for. A major challenge faced by the grantees was to enroll those Veterans and their families, who were **the most** in need and, without SSVF assistance, would become homeless or remain homeless. Grantees also struggled with targeting and outreach strategies, in particular with Veteran households who were literally homeless. The TA team responded by providing a series of Webinars and individual calls with grantees providing guidance and education on:

- rapid re-housing outreach and best practices;
- homelessness prevention targeting and outreach best practices; and
- the new HUD definition of homelessness as applied to the SSVF program.

Many grantees are both SSVF and HUD contracted homeless service providers. To promote consistency and ensure those Veterans most in need of SSVF services are targeted, the language in the SSVF Program Guide, proposed rules and other written materials was adapted to mirror HUD's new homeless definition. Additionally, to further assist grantees in targeting their limited homelessness prevention funds and services to those most imminently at-risk, VA developed a SSVF-specific screening tool to identify those most at-risk of homelessness. This screening tool was based on the best available research in homeless prevention targeting, allowing grantees to more accurately identify those Veteran families at imminent risk. The tool was implemented in FY 2012 and will be mandated in FY 2013.

### *Promoting Best Practices*

Grantees were also supported in their efforts to increase rapid re-housing assistance for literally homeless Veterans, consistent with VA priorities. Many grantees had limited to no experience providing rapid re-housing assistance, as rapid re-housing is a relatively new intervention for most homeless service providers. As grantees developed their rapid re-housing assistance for literally homeless Veterans, many struggled to do so in ways consistent with a client-centered Housing First approach that seeks to rapidly place homeless households in permanent housing with limited, transitional supports. To address these challenges, VA provided technical assistance and training through national Webinars and contact with individual grantees. Training topics centered on Housing First practices, including housing placement strategies, landlord recruitment, and housing stability planning. Such topics formed the basis for training for new grantees provided during the 2012 SSVF Post Award Conference. The training for new grantees was conducted virtually via live training Webinars.

SSVF is a central focus of VA's effort to prevent and end homelessness among Veterans. To ensure grantee understanding and the consistent use of Housing First best practices in homelessness prevention and rapid re-housing, VA is developing a Rapid Re-Housing and Homelessness Prevention Resource Guide and related Practice Standards for existing and new grantees. The guide will be a Web-based, interactive training resource that will cover critical facets of the SSVF program model articulated in the standards, including: targeting and outreach, assessment and housing plans, non-financial services, financial services and landlord supports. The guide will include training content, links to relevant research and resources, toolkits, and user guides for key program staff functions (planning, administration, and direct service). Early drafts have already been shared with key stakeholders, including homeless researchers, community providers and advocates for comment.

During FY 2012, TA delivery methods were adapted to better reach the grantee staff providing direct services to Veterans. Smaller, regionally based in-person meetings were designed and convened for program managers and case managers to offer interactive and experiential training on best practices in a manner that augmented monthly Webinars, the virtual FY 2012 Post Award Conference, and individual grantee assistance. Bringing together grantees from smaller regions provided the opportunity to network and build peer-to-peer relationships and information sharing. Monthly regional grantee calls provided an additional means for grantee interaction.

SSVF also developed the SSVF Grantee Mentor program, a method to create peer-to-peer learning and provide additional support to new grantees as they started up new SSVF programs. Select SSVF grantees funded in 2011 and awarded renewal funding in FY 2012 have been invited to serve for 1 year as a mentor site. New grantees have visited these mentor sites to learn from their peers as well as understand and proactively address program start up and implementation issues. To facilitate the mentoring process, SSVF designed a Site Visit Observation Tool to guide new grantees about what to look for, ask and assess as relevant to their program as they visited mentor sites.

Written guidance on coordinating SSVF services with the HUD-VASH and the GPD programs was dispersed to grantees and incorporated into the SSVF Program Guide. These materials facilitated effective and efficient use of SSVF resources and collaboration among the various VA homeless services. As noted earlier, in response to grantee feedback, VA also adjusted the total amount of grant funds that can be spent on TFA. This adjustment enabled more eligible Veteran households to have access to the essential financial services necessary to end or prevent homelessness.

Finally, the new NOFA has encouraged grantees to pursue accreditation. The VA has found that the third party review process helps promote high standards and the adoption of best practices in the delivery of social services.

### *Moving Forward*

VA is considering augmenting and revising SSVF's regulatory authority. Based on input from meetings with stakeholders and data from the first year of operations, VA is exploring regulatory changes to enhance the effectiveness and efficiency of the SSVF program in future years. Potential areas of change include:

- Further targeting of SSVF assistance to Veterans who are literally homeless, consistent with eligibility and targeting applied by HUD in the Emergency Solutions Grants program, assuring consistency across Federal programs and greater focus on Veterans with the most severe housing needs.
- Adjusted timeframes for TFA, allowing for longer periods of assistance for eligible Veteran households faced with extremely low incomes. This change acknowledges a best practice that some households (those with no to extremely low-incomes) can in fact exit homelessness, but may need longer periods of assistance while maintaining fiscal constraint, accountability and assurances that the greatest number of eligible Veterans has access to these needed resources.
- Use of TFA for defined employment training to help Veterans obtain and maintain employment.
- Use of TFA for tightly defined emergency short term hotel/motel stay allowing an eligible Veteran family to get off the street while awaiting housing placement.

VA is encouraged by the success of the SSVF program and plans to continue building SSVF grantee service capacity and sharing best practices throughout the entire SSVF program. To this end, SSVF will convene two regional meetings per region in FY 2013. In addition to these regional meetings, SSVF Regional Coordinators will use monthly meetings for additional small group and peer-to-peer learning and training. Where needed, refinements will be made to the SSVF Grantee Mentor program to facilitate effective grantee capacity building. VA will also continue to refine SSVF program rules to improve the program's effectiveness in preventing and ending homelessness among our Nation's Veterans.



## Section 6 Conclusion

In its first year of operations (FY 2012, funded by FY 2011 grant awards) the SSVF program funded 85 community non-profits in 40 states and the District of Columbia. SSVF has had an immediate and powerful impact on VA's capacity to serve homeless and at-risk Veterans. Through SSVF, VA has creatively expanded capacity to serve vulnerable populations, and has been able to engage significant numbers of impoverished Veterans, families, and OEF/OIF Veterans who were either homeless or at-risk of homelessness. Already the program has achieved high placement rates in permanent housing, increased incomes, and efficiently served large numbers of Veterans. It has become a vital resource for VA and the community to end Veteran homelessness.

SSVF fills an important and previously unmet need in VA's continuum of homeless Veteran services. Premised on an evidence-based Housing First permanent supportive housing model, SSVF offers flexible services that promote community-based rapid access and engagement to quickly resolve a Veteran's housing crisis. This approach allows VA to offer a powerful, yet efficient intervention, with an average cost \$2,800 per household. In the first year of operations, SSVF far exceeded the projected goal of serving 22,000 participants, working with over 35,000 participants during the course of the year. The high number of participants is a surprising result given that this was the first year VA has ever offered such services. It is truly a testament to the dedication and hard work of SSVF grantees and VA staff. Of those served through SSVF, 86 percent maintained or were placed in permanent housing.<sup>16</sup>

By establishing strong relationships with a range of stakeholders, SSVF has shown the ability to adapt program operations using input from a variety of sources. Basing the program's initial structure on input from leading researchers, the experiences of homeless and formerly homeless Veterans, homeless service providers, and advocates has introduced new service elements previously unavailable to Veterans. One of the most significant needs these stakeholders identified was the importance of offering services to the entire family as it allows families to stay together. These family services are often of critical importance to female Veterans, who are most often the caregivers of dependents. Emphasizing the importance of meeting the needs of Veteran families, even non-traditional ones, SSVF offers services to all family members and even has a provision to continue these services when the Veteran is separated from the family. In FY 2012, SSVF served 3,285 women Veterans (15.3 percent of the Veteran total), as well as over 8,880 children.

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<sup>16</sup> The executive summary and conclusion reference over 35,000 SSVF participants served and a permanent housing placement rate of 86 percent, these numbers represent the most complete data available to VA. The body of the report references 32,676 SSVF participants served and a permanent housing rate of 84 percent. For the purposes of providing accurate comparisons and full reporting, the body of this report uses data drawn from HUD's HMIS which is not as complete as VA's data.

Additionally, SSVF's use of HUD's HMIS reporting system has given VA the capability to share critically needed service and performance data with HUD's local homeless service Continuums of Care. In bringing this information into a single data system, VA supports the goals of the USICH which describes the adoption of HMIS as a critical element in the objective to "increase knowledge about collaboration, homelessness, and successful interventions to prevent and end homelessness." In fact, it was the analysis of this data, and the appreciation of SSVF's impact, that led to VA's decision to seek increases in program funding.

In just the first year of operation, SSVF has demonstrated its capacity to rapidly re-house and prevent homelessness among vulnerable Veteran families through a cost-effective, housing focused intervention.

**Appendix 1 SSVF Grantee List**

**Exhibit 24: SSVF FY 2012 Grantees<sup>17</sup>**

<i>Grantee</i>	<i>Number</i>	<i>Grant Amount</i>	<i>Grant Funds Spent</i>	<i>% Funds Spent</i>	<i>FY 2012 Households (HH) Served</i>	<i>Funds Spent per HH</i>
Catholic Social Services	11-AK-53	\$363,571.00	\$363,571.00	100%	175	\$2,077.55
Housing First	11-AL-205	\$600,120.00	\$600,120.00	100%	124	\$4,839.68
The Primavera Foundation, Inc	11-AZ-331	\$877,416.00	\$877,416.00	100%	309	\$2,839.53
UMOM New Day Centers, Inc.	11-AZ-63	\$545,631.87	\$545,631.87	100%	131	\$4,165.13
United States Veterans Initiative	11-CA-132	\$500,000.00	\$499,999.82	100%	138	\$3,623.19
Vietnam Veterans of California	11-CA-136	\$965,999.00	\$965,999.00	100%	393	\$2,458.01
EHC LifeBuilders	11-CA189	\$307,887.00	\$269,582.00	88%	57	\$4,729.51
WestCare California, Inc.	11-CA-209	\$1,000,000.00	\$999,999.00	100%	189	\$5,291.00
Abode Services	11-CA-220	\$1,000,000.00	\$1,000,000.00	100%	199	\$5,025.13
Goodwill Industries of Silicon Valley	11-CA-280	\$400,000.00	\$400,000.00	100%	80	\$5,000.00
PATH (People Assisting The Homeless)	11-CA-326	\$947,000.00	\$947,000.89	100%	338	\$2,801.78
Ascencia (PATH Achieve)	11-CA-327	\$100,000.00	\$100,000.00	100%	38	\$2,631.58
Invision Shelter Network of San Mateo County	11-CA-342	\$753,400.00	\$718,880.14	95%	195	\$3,686.56
SHELTER, Inc. of Contra Costa County	11-CA-343	\$730,155.00	\$609,352.96	83%	177	\$3,442.67
The Catalyst Foundation	11-CA-362	\$918,000.25	\$918,002.39	100%	267	\$3,438.21

<sup>17</sup> SSVF Year 1 grantees operating in FY 2012 were funded in FY 2011.

Effectiveness of Permanent Housing Program – FY 2012 Report

<b>Grantee</b>	<b>Number</b>	<b>Grant Amount</b>	<b>Grant Funds Spent</b>	<b>% Funds Spent</b>	<b>FY 2012 Households (HH) Served</b>	<b>Funds Spent per HH</b>
The Salvation Army, a California corporation	11-CA-367	\$1,000,000.00	\$1,000,000.00	100%	272	\$3,676.47
Volunteers of America, Greater Sacramento and Northern Nevada	11-CA-388	\$591,467.00	\$591,467.00	100%	111	\$5,328.53
Community Catalysts of California	11-CA-406	\$893,925.48	\$893,925.48	100%	273	\$3,274.45
Mental Health America of Los Angeles	11-CA-54	\$554,712.00	\$554,712.07	100%	130	\$4,267.02
Volunteers of America of Los Angeles	11-CA-82	\$1,000,000.00	\$1,000,000.15	100%	272	\$3,676.47
New Directions Inc.	11-CA-95	\$731,806.00	\$731,806.00	100%	157	\$4,661.18
Denver Options, Inc.	11-CO-264	\$933,588.00	\$933,586.98	100%	478	\$1,953.11
Community Renewal Team	11-CT-258	\$349,389.00	\$349,389.00	100%	169	\$2,067.39
Community Partnership	11-DC-130	\$999,999.00	\$999,999.00	100%	360	\$2,777.78
Homeless Services Network of Central Florida	11-FL-133	\$998,999.00	\$998,998.89	100%	759	\$1,316.20
The Advocate Program	11-FL-222	\$986,369.00	\$986,368.68	100%	273	\$3,613.07
Carrfour Supportive Housing (OST)	11-FL-236	\$1,000,000.00	\$1,000,000.00	100%	655	\$1,526.72
NW Florida Comprehensive Services for Children	11-FI-271	\$1,000,000.00	\$1,000,000.00	100%	395	\$2,531.65
Homeless Coalition of Hillsborough County	11-FL-289	\$1,000,000.00	\$999,999.08	100%	214	\$4,672.89
Jewish Family and Children's Services of S-M, Inc.	11-FL-299	\$516,670.00	\$516,670.00	100%	147	\$3,514.76
CSRA Economic Opportunity Authority, Inc.	11-GA-262	\$623,553.00	\$623,553.60	100%	127	\$4,909.87
Catholic Charities Hawaii (Cch)	11-HI-101	\$610,000.00	\$610,000.24	100%	143	\$4,265.74
Humility of Mary Shelter, Inc. (HMSI)	11-IA-29	\$242,655.00	\$242,654.66	100%	212	\$1,144.60
El Ada Community Action Partnership	11-ID-90	\$300,490.00	\$300,490.34	100%	145	\$2,072.35

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<i>Grantee</i>	<i>Number</i>	<i>Grant Amount</i>	<i>Grant Funds Spent</i>	<i>% Funds Spent</i>	<i>FY 2012 Households (HH) Served</i>	<i>Funds Spent per HH</i>
Thresholds Veterans Project	11-IL-124	\$439,722.00	\$439,722.00	100%	143	\$3,074.98
Volunteers of America of Illinois	11-IL-144	\$719,400.00	\$719,400.00	100%	329	\$2,186.63
United Way of Central Indiana	11-IN-377	\$638,513.00	\$638,513.00	100%	224	\$2,850.50
Salvation Army	11-KS-33	\$600,000.44	\$599,999.83	100%	213	\$2,816.90
Volunteers of America of Kentucky, Inc.	11-KY-86	\$784,202.00	\$784,202.48	100%	188	\$4,171.29
The Wellspring Alliance for Families	11-LA-370	\$444,235.50	\$446,131.71	100%	135	\$3,304.68
Volunteers of America of GNO	11-LA-76	\$1,000,000.00	\$1,000,000.00	100%	888	\$1,126.13
Volunteers of America	11-MA-68	\$1,000,000.00	\$1,000,000.00	100%	272	\$3,676.47
Veteran's Inc	11-MA-80	\$1,000,000.00	\$999,999.80	100%	402	\$2,487.56
Alliance Inc	11-MD-158	\$1,000,000.00	\$1,000,000.00	100%	345	\$2,898.55
Preble Street	11-ME-330	\$749,777.00	\$749,777.28	100%	141	\$5,317.57
Wayne Metropolitan Community Action Agency	11-MI-389	\$590,928.30	\$590,928.15	100%	122	\$4,843.67
Southwest Counseling Solutions	11-MI-401	\$999,559.00	\$999,366.78	100%	492	\$2,031.23
Minnesota Assistance Council for Veterans	11-MN-77	\$1,000,000.00	\$1,000,000.00	100%	459	\$2,178.65
Welcome Home, Inc.	11-MO-151	\$41,428.00	\$41,428.00	100%	22	\$1,883.09
St. Patrick Center	11-MO-353	\$956,274.00	\$956,272.65	100%	335	\$2,854.55
Passage Home	11-NC-325	\$144,910.00	\$144,910.00	100%	29	\$4,996.89
United Way of Forsyth County	11-NC-46	\$560,085.00	\$560,085.54	100%	134	\$4,179.74
North Dakota Coalition for Homeless People	11-ND-411	\$600,000.00	\$600,000.00	100%	182	\$3,296.70
Central Nebraska Community Services	11-NE-108	\$137,664.00	\$137,664.17	100%	37	\$3,720.65

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<i>Grantee</i>	<i>Number</i>	<i>Grant Amount</i>	<i>Grant Funds Spent</i>	<i>% Funds Spent</i>	<i>FY 2012 Households (HH) Served</i>	<i>Funds Spent per HH</i>
Catholic Charities	11-NJ-177	\$744,740.00	\$744,740.00	100%	227	\$3,280.79
Community Hope	11-NJ-199	\$991,977.15	\$991,977.36	100%	142	\$6,985.76
Goodwill Industries of new Mexico	11-NM-93	\$574,652.00	\$574,652.00	100%	457	\$1,257.44
United States Veterans Initiative	11-NV-132	\$200,000.00	\$200,000.00	100%	60	\$3,333.33
Las Vegas Clark County Urban League-CAA	11-NV-290	\$999,999.56	\$999,999.56	100%	432	\$2,314.81
United Veterans of America ; Soldier On	11-NY-141	\$976,402.00	\$976,402.00	100%	457	\$2,136.55
Chautauqua Opportunities, Inc. (COI)	11-NY-249	\$306,578.00	\$242,962.35	79%	77	\$3,155.36
Veterans Outreach Center, Inc.	11-NY-28	\$987,500.00	\$987,357.00	100%	502	\$1,966.85
HELP Social Services	11-NY-285	\$1,000,000.00	\$1,000,000.00	100%	350	\$2,857.14
Samaritan Village	11-NY-338	\$920,728.00	\$920,729.59	100%	356	\$2,586.32
Service for the Underserved	11-NY-341	\$503,011.40	\$498,249.05	99%	137	\$3,636.85
Westcop	11-NY-393	\$936,025.00	\$936,024.82	100%	301	\$3,109.72
Mental Health Services for Homeless Persons, Inc. (MHS)	11-OH-137	\$995,709.00	\$995,706.86	100%	357	\$2,789.09
Community Service Council of Greater Tulsa, Inc.	11-OK-259	\$996,045.00	\$996,024.87	100%	337	\$2,955.56
St. Vincent de Paul Society of Lane County, Inc.	11-OR-351	\$125,000.00	\$125,010.11	100%	52	\$2,404.04
Project H.O.M.E	11-PA-175	\$1,000,000.00	\$1,000,064.25	100%	248	\$4,032.52
Commission on Economic Opportunity	11-PA-252	\$360,000.00	\$360,000.21	100%	119	\$3,025.21
Crisis Ministries	11-SC-194	\$1,000,000.00	\$1,000,000.00	100%	242	\$4,132.23
Centerstone of Tennessee, Inc.	11-TN-246	\$1,000,000.00	\$1,000,000.00	100%	302	\$3,311.26
Families In Crisis, Inc.	11-TX-10	\$358,096.00	\$358,096.36	100%	107	\$3,346.69

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<b>Grantee</b>	<b>Number</b>	<b>Grant Amount</b>	<b>Grant Funds Spent</b>	<b>% Funds Spent</b>	<b>FY 2012 Households (HH) Served</b>	<b>Funds Spent per HH</b>
Family Endeavors	11-TX-118	\$998,153.00	\$998,153.98	100%	1095	\$911.56
Catholic Charities, Diocese of Fort Worth, Inc	11-TX-131	\$868,437.00	\$868,437.00	100%	602	\$1442.58
Career and Recovery Resources rev-9/11/12	11-TX-235	\$400,000.00	\$400,000.18	100%	215	\$1,860.47
Caritas of Austin	11-TX-73	\$262,689.00	\$262,689.00	100%	129	\$2,036.35
Aliviane, Inc. - SAVE Program	11-TX-83	\$809,555.00	\$813,100.50	100%	190	\$4,279.48
Virginia Supportive Housing	11-VA-382	\$561,648.00	\$561,627.85	100%	177	\$3,173.04
Community Psychiatric Clinic	11-WA-23	\$507,279.00	\$507,279.00	100%	129	\$3,932.40
Opportunity Council	11-WA-323	\$684,062.00	\$684,062.00	100%	288	\$2,375.22
Center For Veterans Issues, Ltd.	11-WI-143	\$1,000,000.00	\$1,000,000.00	100%	457	\$2,188.18
Roark-Sullivan Lifeway Center	11-WV-337	\$252,330.00	\$252,330.00	100%	131	\$1,926.18

Source: SSVF Grantee Quarterly Reports.

## **Appendix 2      Data Sources**

### **SSVF Program Data Sources**

1. Local HMIS via repository
2. Grantee quarterly self-reports and Dashboard reports
3. Participant satisfaction surveys

Information for this report was obtained through the SSVF data repository hosted by VA. The repository stores data on program participants collected and entered by grantees into local HMIS. Data is then uploaded from local HMIS' to the data repository. This report also includes aggregated data from grantee quarterly reports submitted to VA and aggregated responses to program participant satisfaction surveys completed by SSVF participants nationwide and submitted to VA.

### **Other Data Sources**

1. Department of Housing and Urban Development, Office of Community Planning and Development. The 2010 Annual Homeless Assessment Report to Congress.
2. Department of Housing and Urban Development, Office of Community Planning and Development, Department of Veterans Affairs, National Center on Homelessness Among Veterans. Veteran Homelessness: A Supplemental Report to the 2010 Annual Homeless Assessment Report to Congress.
3. Department of Housing and Urban Development, Office of Community Planning and Development. The 2011 Annual Homeless Assessment Report to Congress. November 2012.

Selected information from the 2010, 2011, and 2012 AHAR is included for context on Veterans' homelessness and for comparison of SSVF program participants to the general homeless population. Data from the first year of HUD's HPRP and Rapid Re-Housing Program is included for comparison purposes, given the similarities in program goals and approach and the analogous experiences of grantees in the start-up year of the HPRP and SSVF program.



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