

VA Homeless Programs Pathways to Housing Working Together to End Homelessness Among Veterans June 10, 2022

Link to Audio

Housekeeping



This session will last 90 minutes Slides & handouts will be uploaded into the chat section Recording, Handouts & Slides will be sent via email

Submit questions in the question box or any time at ssvf@va.gov

Learning Objectives



- Participants will learn about the Homeless Programs Office continuum of services, including how programs relate from a systems perspective and are responsive to Veteran choice.
- Participants will understand priorities of the VA Homeless Programs Office, including commitment to equity and inclusiveness and key areas of collaboration between programs, and how to operationalize these priorities in their community.
- Participants will understand how to assess and map their local Veterans homeless response system and the coordinated entry process, including identification of existing gaps/barriers, to enhance high quality service delivery to Veterans and ensure the SSVF commitment to same day access.

ntroductions

Molly Batschelet Senior Associate TAC

Meghan Takashima Senior Associate Abt Associates

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- Welcome/Introduction
- HPO Continuum of Services Overview: SSVF, HCHV, GPD, HUD-VASH
- Best Practices in Program Coordination
- Local Systems Enhancement Examples
- Q&A

Acronym List

- CES- Coordinated Entry System
- CoC- Continuum of Care
- GEC-Office of Geriatrics and Extended Care
- GPD- Grant and Per Diem Program
- HCHV- Health Care for Homeless Veterans Program
- HPO- Homeless Programs Office
- HUD-VASH- HUD-Housing and Urban Development Veterans Affairs Supportive Housing Program
- VAMC- VA Medical Center

Equity Terms & Considerations



To lead with equity and truly center marginalized, oppressed, and diverse populations, please consider the following prior to the use of terms:

Be person centered. Lead with Veterans' first language. **Be aware** of the nuances of a term and reflect upon whether its use is appropriate or accurate. **Respect** how people would like to be identified. Never assume. Always Ask.

Please also consider the following terms for appropriate use of language.

Veteran with Disabling Condition(s): A Veteran who has a physical and/or mental disability.

Gender Identity: is how a Veteran identifies their gender and is based upon their own internal perception and awareness.

BIPOC: An acronym used to encapsulate all Veterans who are Black, Indigenous, Latina/o/x, Native Hawaiian, Pacific Islander and other People of Color.

AAPI: An acronym used to encapsulate Veterans who are Asian, Asian American and/or Pacific Islander.

LGBTQ2S+: An acronym used to encapsulate Veterans who are Lesbian, Gay, Bisexual, Transgender, Queer/Questioning, and/or Two Spirit. The "+" sign captures identities beyond LGBTQ; e.g. pansexual, asexual, and nonbinary identities.



The HPO Continuum of Services

HPO Vision & Mission Statement

• MISSION STATEMENT

To assist Veterans and their families in obtaining permanent and sustainable housing with access to high-quality health care and supportive services, and to ensure that Veteran homelessness is prevented or otherwise rare, brief, and nonrecurring

• VISION STATEMENT

To end homelessness for all Veterans and their families using evidencebased, innovative practices and partnerships to provide access to permanent housing and deliver services that are Veteran centered, equitable, and inclusive, leading to personal empowerment and increased independence.





HPO's ability to achieve targeted outcomes resides on the integration of services and programs and three essential practices:

- Conducting coordinated and preventive outreach by proactively seeking and identifying Veterans in need of assistance.
- Connecting homeless and at-risk Veterans with housing solutions, health care, community employment services, and other supportive services.
- Collaborating with federal, state, and local agencies; employers; housing providers; faith-based and community nonprofits; and others to expand employment and affordable housing options for Veterans exiting homelessness.

Primary Housing Pathways



HCHV

Provides outreach, case management, and HCHV Contract Residential Services (CRS), ensuring that chronically homeless Veterans especially those with serious mental health diagnoses and/or substance use disorders can be placed in VA or community-based programs that provide quality housing and services that meet their specialized needs.

GPD

Allows VA to award grants to community-based agencies to create transitional housing programs and offer per diem payments. The purpose of the program is to promote the development and provision of supportive housing and/or related services — with the goal of helping homeless Veterans achieve residential stability, increase their skill levels and/or income, and obtain greater self-determination.

Primary Housing Pathways

HUD-VASH

Through this collaborative program between the U.S. Department of Housing and Urban Development and VA, HUD provides eligible homeless Veterans with a Housing Choice rental voucher, and VA provides case management and supportive services.

SSVF

Funds are granted to private nonprofit organizations and consumer cooperatives, who rapidly rehouse homeless Veteran families and prevent homelessness for those at imminent risk of becoming homeless due to a housing crisis.

Veteran-Centered Housing Linkages

- Some Veterans may need a combination of VA homeless programs to obtain and retain their permanent housing.
- Communities must use local By Name List processes, case conferencing and coordinated with Veteran households to help navigate the most rapid, appropriate housing placements possible.
- Continue to monitor program guidance related to co-enrollment or where programs can complement each other's services.
- Emphasize a Progressive Assistance approach that quickly links Veterans to permanent housing even if longer term resources are still being considered or coordinated.



VA Housing Pathway Overview



Best Practices in Program Coordination

Centering Equity While Moving with Urgency:

Accelerating placements is critical to ending homelessness among Veterans. However, without careful attention, the acceleration can create or exacerbate disparities among Black, Indigenous, People of Color (BIPOC) and other vulnerable populations (i.e., Veterans with the most significant barriers to housing placement). Communities can prevent or quickly address disparities and proactively incorporate equity in their housing placements strategies by:

- Using VA's racial equity tools, reports, and dashboards, as well as HMIS data, to identify areas for improvement and adjust programs accordingly to address these disparities.
- Seeking feedback and program design support from Veterans including Veterans with lived homeless experience.
- Proactively outreaching and engaging Veterans with higher vulnerabilities, including those with past histories in institutional care or criminal justice involvement, those who are unsheltered and/or those with the longest histories of homelessness.
- Providing training and support to staff in equity practices, implicit and explicit bias, Housing First and Trauma Informed Care.

Coordination is Essential



- The 38,000 goal creates a jumping off point for further defining goals and outcomes across your Veteran system of care.
- While many of the same pathways exist across systems, establishing clear guidelines for collaboration will help to ensure equitable access to services for Veterans, and reduce confusion and duplication.

Planning Considerations for Coordination

- Which program is best equipped to meet the individual Veteran's immediate crisis needs?
- Which program is best equipped to quickly focus on long term housing solutions once the crisis is managed?
- What are the Veteran's preferences?



Benefits of Increased Coordination

- Veterans may be able to avoid entry into shelter or transitional housing or move more quickly to permanent housing.
- Expands options and increases Veteran choice.
- Veterans are much less likely to fall through the cracks on their path to permanent housing.



Use Progressive Assistance to Meet Veterans Needs

Tailored assistance to each Veteran's individual needs and choices.	
Supports start small. Assistance flexes up or down based on needs.	
Ensures intensive support and financial assistance remains available to those with the greatest needs.	

Strategies to Assess and Meet Veterans' Needs

- Coordinate across partners on landlord partnerships and outreach/engagement strategies.
- In some communities, Supportive Services for Veteran Families (SSVF) rapid re-housing may be the most rapid avenue for housing placement.
- Through SSVF services provided and the local case conferencing process, identify Veterans being served in SSVF who may need more intensive services or long-term affordability, including SSVF Shallow Subsidy, HUD-VASH, or other vouchers.

Strategies to Assess and Meet Veterans' Needs

- The GPD Bridge Housing model and HCHV Contracted Residential Services (CRS) and Low Demand Safe Haven (LDSH) program incorporates co-enrollment with SSVF or HUD-VASH to facilitate expedient transitions to permanent housing.
- <u>GPD Referral for SSVF TFA</u> provides assistance for Veterans in transitional housing all but for the need of financial assistance.

Best Practices for Program Partnerships

- Clarifying in writing the roles of case managers/staff when working with Veterans are co-enrolled in programs.
- Case conferencing at enrollment, during housing plans and throughout and duration of service delivery.
- Ensuring seamless communication with the local coordinated entry system to avoid confusion in referrals, enrollments and data management protocol.
- Maintaining regular meetings with an agreed upon frequency to discuss referrals, cases and assess whether any processes need to be adjusted.
- Ensuring clear consistent messaging to Veterans, property owners, CoC/VA partners on the Veteran's housing plan.
- Identifying points of contact for clinical and case management crises.



Program Coordination in Action: Community Examples

Community Example

West Virginia Community Action Partnership and Partners



Presenters

Tracie Hamb Beckley VAMC, Homeless Programs Director

Rachael Coen WVCEH, Chief Program Officer

Anne Vandervort VOA Mid-States, SR Director of Veteran Services

Laura Pauley VOA Mid-States, Associate Director of Veteran Services

Leah Willis

SSVF Program Manager, WV Community Action Partnership

In the Beginning...



- SSVF was designated as a Balance of State (BoS) Access Point in CES
- Needed clear direction for procedures
- Veteran Committee was formed of BoS, VAMC and SSVF providers

Next Steps



• With the Regional Coordinator and TAC assistance, Veteran Committee formed formal roles and responsibilities:

Chair

- Secretary
- Policy creation

Meetings were held monthly

- Fine tuned what data we would track.
- CES data input into HMIS
- Referral processes between BoS and VAMC to SSVF.
- RC and TAC helped identify data and procedural technical items.

Where are we now?



- Meetings are now quarterly.
- RC and TAC are invited if they are available or requested as needed.
- Procedures are clearly defined for each service provider.

Our continuing activity:

- Review data, addressing any discrepancies or issues.
- Provider updates.
- Review procedures and update as needed.
- Open discussion on any issues with CES, updating the procedures as needed.



West Virginia Panel Discussion

Putting it all Together: Enhanced Partnerships to Serve Those who Serve

Community Example

North Florida: Malcom Randall VAMC and Partners



Bobbie Shaw, LCSW

HUD/VASH Social Worker Community Reintegration and Recovery Service Line

North Florida/South Georgia Veterans Health System

Casey K. Boone, BA US Air Force (Ret). N. Florida SSVF Lead Program Supervisor Volunteers of America of Florida

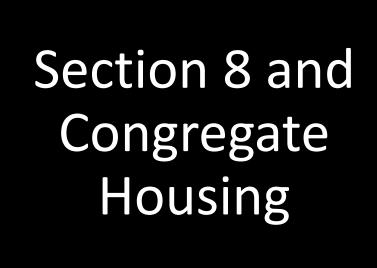
Steve Tillman, LCSW Network Homeless Coordinator VISN 8

Deborah D. Lee, MSW, LCSW, LCAS HUD-VASH Regional Coordinator VISNs 6, 7, 8, 10, 15 16, 17 HUD/VASH and VFW Veterans Village Pilot Program:

VFW, PHA, SSVF and VA Collaboration to provide stable housing to aging Veterans experiencing homelessness

Ft. McCoy, Marion County, Florida North Florida/South Georgia Veterans Health System





- Upward trend of veterans over the age of 60 entering homelessness for 1st time as well as current HUD/VASH Veterans who are aging and need a higher level of care.
- Allowance for utilizing the Section 8 voucher in congregate housing situations allowed by HUD, but local Public Housing Authority has some discretion. 24 CFR 982.606 and 607
- The voucher only applies to the rent and utilities associated with the placement, not the services and amenities provided so this will not work for veterans making less than \$1,000 a month.
- VFW Veterans Village is a unique independent retirement community that provides on site support and services, but no medical staff. Due to this, cost is much lower than an assisted living placement, making it a viable option for a larger pool of veterans.
- Ocala Housing Authority has classified the private living space at VFW Veterans Village as a 0 bedroom voucher with all utilities included. PHA has determined that \$720 is "rent reasonable" for each unit at Veterans Village.



Veterans Village costs \$1490 a month

The HUD/VASH program then provides Social Work, Peer Support, Occupational Therapy and weekly Nursing care as needed.

<u>\$720 rent:</u>

- 300 sf of private living space
- Living/sleeping area
- Walk in closet (or 2)
- Private bathroom with a tub/shower combo or walk in shower
- Heat/air conditioning unit
- Water, sewer, trash, electricity
- Rooms come standard with a bed, nightstand, chair, large closet, linens, pillows, blinds, lamps, television and a small refrigerator.
- Toilet paper is also provided for each private bathroom.
- This rent and utilities is what is subsidized by PHA.
- PHA contributes \$350-\$450 a month depending on veteran's income.

\$770 Amenities:

- All meals and unlimited access to snacks and beverages
- Landline phone in room, cable, Wi-Fi
- Laundry machines, once weekly housekeeping
- Transportation to Ocala CBOC and Gainesville VAMC
- Weekly trip to Walmart
- Large library, fitness room, puzzle room/ multipurpose room for bingo, meetings, etc.
- Large U.S. Mail quality mailroom with a sitting area, pool table, juke box (free), that joins a Florida room and an outdoor courtyard
- Many social events throughout the year
- Veteran must be able to pay this amount on their own
- Many VFW posts, Elks Clubs and other groups sponsor

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SSVF and HUD/VASH Collaboration:

VFW VETERANS

TURN HER

352-236-0823

Rapidly Housing Veterans

- SSVF and HUD/VASH work closely together to ensure Veterans are receiving needed level of care.
- Since COVID pandemic began, SSVF provided flexibility in paying for 1st month's rent in the Rapid Rehousing Packet so that Veterans could be housed ahead of the HUD/VASH voucher and thus exit the street or shelters more quickly.
- VFW Veterans Village presented a problem due to the monthly cost of the program consisting of rent, utilities and services.
- Funding for the services and amenities costs was provided though the General Housing Stability Assistance (GHSA) Expense allowances.
- The HUD/VASH social worker needs to submit two separate agreements....one for the rent and one for the services and accommodations....the PHA is requiring this as well.
- Separate checks are issued for the deposit, rental portion and the services portion.

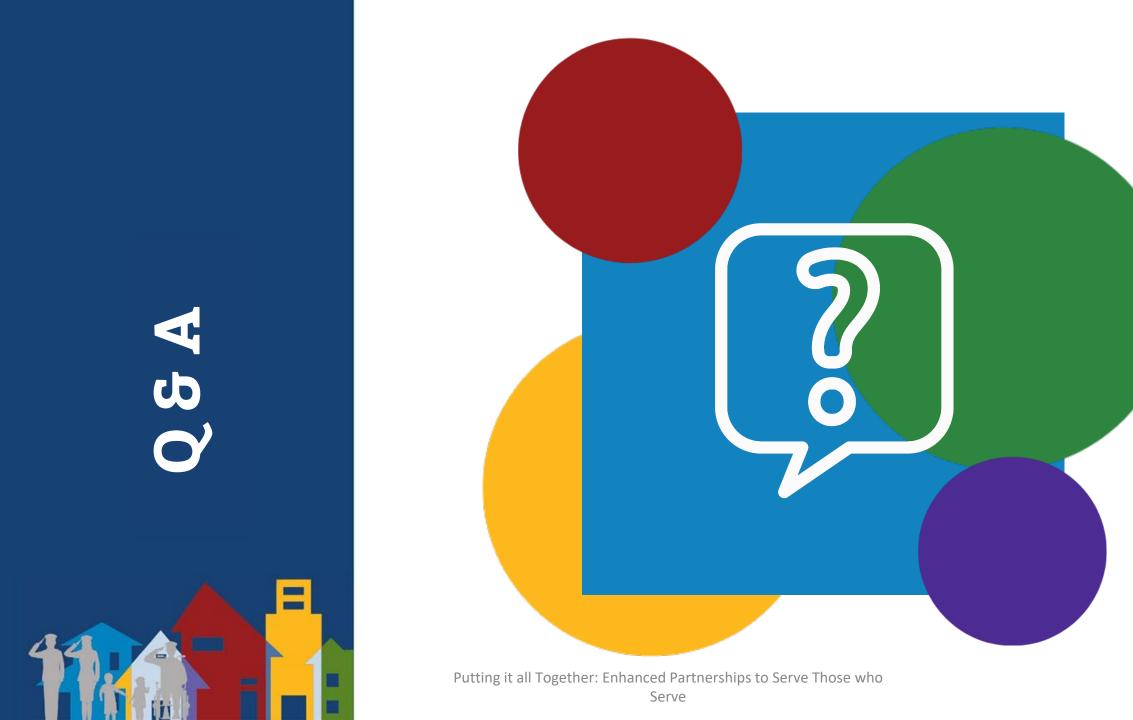
Panel Discussion

Please call or email if you have any additional questions.



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Closing Thoughts



- Coordination is key to successfully responding to Veteran needs, and your local 38,000 goal.
- Strive for progress, not perfection.
- Our communities are constantly changing, make sure your processes reflect the here and now.
- VA HPO staff, such as Regional Coordinators and Network Homeless Coordinators can be extremely helpful is supporting local efforts, don't hesitate to reach out.