

SSVF: Community Plan Summary

Date Completed/Revised: 7/1/2015

Continuum of Care Name:	Hartford CoC	CoC Number:	CT-502
CoC Representative:	Crane Cesario	Title:	Director of Housing and Homeless Resources
Phone/Email: Crane.Cesario@ct.gov			
Person Completing this Summary:	Stephen Bigler	Title:	Assistant Director of Veteran and Shelter Services
Phone/Email: 860-951-8770 biglers@crtct.org			

- 1. Primary Planning and Coordination Group:** Identify the primary group responsible for planning and coordinating efforts to prevent and end homelessness among Veterans in the CoC. List the principal members of this group and their affiliation.

Primary Group Name:	Greater Hartford Coordinated Access Network (CAN)		
Principal Members	Affiliation		
Crane Cesario	DMHAS		
Amy Robinson	CRT-SSVF		
Matt Morgan	Journey Home Shelter		
Brian Baker	South Park Inn		
Fred Falkner	Open Hearth Shelter		
Jose Vega	CRT - McKinney Shelter		
Beth Staffod	MACC Shelter		
Tenesha Grant	Mercy Housing Shelter		
Sandy Barry	Salvation Army Marshall House (shelter)		
Roger Clark	ImmaCare (shelter)		
Rebecca Copeland	CHR		
Ruby Givins-Hewitt	My Sisters Place (shelter)		
Steve Bigler	CRT		
Chris Robinson	Chrysalis Center		
Dalila May	Interval House		

2. Ongoing Review and Coordination: Briefly describe how often (e.g., monthly) the above group meets to review progress and coordinate efforts. Include a summary of what information is reviewed during these meetings.

The Greater Hartford CAN meets on a weekly basis and is made up of Shelter, Transitional Housing, RRH, and other service providers. The group discusses the flow of Homeless through the Coordinated Access Network covering outreach, entry and assessment, and exits. The group is responsible for assisting all homeless gain access and entry into the CAN system and to make sure all homeless have been screened for vulnerability using the VI-Spdat. The group will also discuss special populations such as Veterans, the chronically homeless, and those difficult to serve both within their programs and out in the community. The group has insured that Veteran status is screened at the first point of contact and that those homeless Veterans are immediately referred to the VA and SSVF. The group works on finding answers to housing barriers such as the lack of documentation (IDs, Birth Certificates, SS Cards, etc) for rapid rehousing programs and has put together a Document Fair with State and Federal agencies and housing providers to expedite the document process and to get these homeless into and through the system faster. The GH CAN also promotes and participates in housing initiatives such as the 100 Day Campaign which is currently 50 days in. The CAN is extremely valuable to the Veterans as it allow them to be rapidly identified within the homeless system and connected with SSVF services but also identifies other programs and services that the Veteran will qualify for before, during, and after being housed.

3. Annual Demand, Goals, and Strategies for Achieving and Sustaining Functional Zero: Identify the estimated number of Veterans who are homeless annually and the community/CoC goals and strategies for achieving a functional end to Veteran homelessness by the end of 2015 (overall community/CoC goals, not just SSVF grantees). If one or more of the goals and strategies below have not yet been established for the community, leave blank and identify the date by which they will be established. See the **Ending Homelessness Among Veterans Overview** for additional guidance.

3A. Estimated Annual Number of Homeless Veterans: Identify the total unduplicated number of Veterans expected to be homeless in 2015 using data from the SSVF Edition of the Veteran Homelessness Gaps Analysis Tool FY15Q3 or data assumptions that have already been adopted by the community, such as the *VA CoC Gaps Analysis Tool (GAT)*.

Estimated Annual Total:	30
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3B. Community/CoC Goals: Identify your community's/CoC's key goals and targets.

A. Permanent Housing Placement Target & SSVF Rapid Re-Housing Placement Target:
Complete and attach *SSVF Edition of Veteran Homelessness Gaps Analysis Tool FY15Q3 OR an CoC Gaps Analysis Tool – Strategy 4 (SSVF) Worksheet*

B. Length of Time Homeless Goal (max or average days):	60	days
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C. January 2016 Point-in-Time (PIT) Count Goal	Sheltered	Unsheltered	Total
Number of Veterans expected to be counted as homeless during the CoC's January 2016 PIT count:	18	6	24
Of number above, how many will also be counted as chronically homeless:	14	4	18

3C. Implementation Strategies: What strategies are being used to achieve and sustain functional zero?

	Yes/No/Under Dev
A. Has your community identified every Veteran who is homeless right now by name?	Yes
Is this list updated regularly?	Yes
Is this list reviewed at least bi-weekly by key community partners to ensure Veterans have a permanent housing plan and those plans are achieved?	Yes
B. Does every Veteran who is homeless now have a Housing Plan and access to safe (and low barrier as needed) shelter and/or permanent housing?	Yes
C. Is every Veteran who becomes homeless rapidly engaged and offered shelter and/or housing that meets their needs?	Yes
If so, is this true no matter where they are initially engaged in your community or what shelter or unsheltered location they may be in?	Yes
D. Are sufficient SSVF resources allocated to ensure there are no RRH gaps or turn-aways?	Yes
E. Are you using SSVF to rapidly re-house Veterans who are waiting on VASH or other PSH assistance if VASH/PSH is not available immediately or in near future?	Yes

4. Other Strengths and Challenges: Briefly describe any additional strengths and/or challenges relevant to your achieving VA and local goals.

One of the biggest strengths is the availability of data that is being drawn from the HMIS system and distributed to the SSVF providers. SSVF providers are receiving a list bi-weekly of all all veterans who have been entering into the State HMIS system. The list also identifies the program that entered the Veteran into the system. With this list, Outreach Workers and Case Managers, can target specific Veterans who may have slipped through the cracks in the system or who disappeared in the middle of receiving services and also providers who see a large number of Veterans come through their doors and who may need a refresher of the services available for Veterans. This list is also a valuable tool for when the VA and SSVF providers meet for their monthly case management meetings as it give them a target list of Veterans that they need to focus their attention on as we strive to eliminate Veteran Homelessness.

UPDATE: One of the strengths of achieving our goal is and has been the coordination of services within the CoC and the full buy in to the goal of eliminating Veteran homelessness. We are participating in the Mayor's Challenge as well as just completing a successful 100 Day Campaign. Veteran entry into the Greater Hartford CAN is in the process of being updated and improved to make sure that any and all barriers are being removed. Finally, a new "Hard to Engage" protocol has been developed to make sure that even the most difficult Veterans are given every opportunity to get into housing and that even if they refuse services that we are keeping tabs on them and periodically checking in with them to see if their situations have changed.

SSVF: Community Plan Summary

Date Completed/Revised: 7/1/2015

Continuum of Care Name:	Bridgeport/Stratford/Fairfield CoC	CoC Number:	CT-503
CoC Representative:	Joyce Barclay	Title:	Assistant VP, Special Projects
Phone/Email: 203-610-8520 / jbarclay@workplace.org			
Person Completing this Summary:	Joyce Barclay	Title:	Assistant VP, Special Projects
Phone/Email: 203-610-8520 / jbarclay@workplace.org			

- 1. Primary Planning and Coordination Group:** Identify the primary group responsible for planning and coordinating efforts to prevent and end homelessness among Veterans in the CoC. List the principal members of this group and their affiliation.

Primary Group Name:	Fairfield County Planning		
Principal Members	Affiliation		
Barclay, Joyce	The WorkPlace		
Bigler, Steve	Community Renewal Team		
Black, Andrew	Columbus House		
Carr, Anne	Career Resources (operates AJC)		
Colon, Carmen	Alpha Community Services/YMCA		
Harkness, Laurie Ph.D.	VA Connecticut Healthcare		
Hunter, Kathy	Career Resources (operates AJC)		
Miklos, Carla	Operation Hope		
Pasko, Maureen	VA Connecticut Healthcare		
Ralston, Pamela	CT Coalition to End Homelessness		
Roccapriore, Brian	CT Coalition to End Homelessness		
Wright, Doran	Bridgeport City Church		
Zimmerman, Lauren	Supportive Housing Works (CAN coordinator)		
Zucker, Gabriel	CT Heroes Project		

2. Ongoing Review and Coordination: Briefly describe how often (e.g., monthly) the above group meets to review progress and coordinate efforts. Include a summary of what information is reviewed during these meetings.

In late 2014 three COCs merged to become Opening Doors Fairfield County (ODFC). Consequently, there is now one COC when there were previously three (Stamford/Greenwich, Norwalk/Fairfield County, Bridgeport/Fairfield/Startford). Consequently, all PIT and other data for the area is under the umbrella of only one COC, not three as associated with The WorkPlace's SSVF grant. The Steering Committee of the COC, which meets monthly, has been intimately involved in Zero 2015 and is currently half-way through a regional 100 Day Campaign where veteran housing has been a priority. The Steering Committee reviews HMIS statistics, informs the region's Coordinate Access Process, establishes plans to end homelessness and reviews progress. I conducts semi-annual Project Homeless Connect resource events at the University of Bridgeport campus. In addition to ODFC, the CT Heroes Project convenes quarterly (and more frequent when needed) workgroup meetings that establishes and reviews plans for Veteran Zero 2015. It, along with the CT Coalition to End Homelessness (the umbrella COC for the State), uses state-wide HMIS data for identified lists of unengaged veterans. These lists are provided the SSVF grantees for veteran outreach - many on the list are transient and difficult to locate. This outreach process, however, provided the catalyst for shelters, food banks, soup kitchens, etc. to quickly notify SSVF when a veteran is on site utilizing their services.

3. Annual Demand, Goals, and Strategies for Achieving and Sustaining Functional Zero: Identify the estimated number of Veterans who are homeless annually and the community/CoC goals and strategies for achieving a functional end to Veteran homelessness by the end of 2015 (overall community/CoC goals, not just SSVF grantees). If one or more of the goals and strategies below have not yet been established for the community, leave blank and identify the date by which they will be established. See the **Ending Homelessness Among Veterans Overview** for additional guidance.

3A. Estimated Annual Number of Homeless Veterans: Identify the total unduplicated number of Veterans expected to be homeless in 2015 using data from the SSVF Edition of the Veteran Homelessness Gaps Analysis Tool FY15Q3 or data assumptions that have already been adopted by the community, such as the *VA CoC Gaps Analysis Tool (GAT)*.

Estimated Annual Total:	205
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3B. Community/CoC Goals: Identify your community's/CoC's key goals and targets.

A. Permanent Housing Placement Target & SSVF Rapid Re-Housing Placement Target:
Complete and attach *SSVF Edition of Veteran Homelessness Gaps Analysis Tool FY15Q3 OR an CoC Gaps Analysis Tool – Strategy 4 (SSVF) Worksheet*

B. Length of Time Homeless Goal (max or average days):	60	days
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C. January 2016 Point-in-Time (PIT) Count Goal	Sheltered	Unsheltered	Total
Number of Veterans expected to be counted as homeless during the CoC's January 2016 PIT count:	34	8	42
Of number above, how many will also be counted as chronically homeless:	8	2	10

3C. Implementation Strategies: What strategies are being used to achieve and sustain functional zero?

	Yes/No/Under Dev
A. Has your community identified every Veteran who is homeless right now by name?	Yes
Is this list updated regularly?	Yes
Is this list reviewed at least bi-weekly by key community partners to ensure Veterans have a permanent housing plan and those plans are achieved?	Yes
B. Does every Veteran who is homeless now have a Housing Plan and access to safe (and low barrier as needed) shelter and/or permanent housing?	Under Dev
C. Is every Veteran who becomes homeless rapidly engaged and offered shelter and/or housing that meets their needs?	Yes
If so, is this true no matter where they are initially engaged in your community or what shelter or unsheltered location they may be in?	Yes
D. Are sufficient SSVF resources allocated to ensure there are no RRH gaps or turn-aways?	Yes
E. Are you using SSVF to rapidly re-house Veterans who are waiting on VASH or other PSH assistance if VASH/PSH is not available immediately or in near future?	Yes

4. Other Strengths and Challenges: Briefly describe any additional strengths and/or challenges relevant to your achieving VA and local goals.

Statewide collaboration of the SSVF grantees has allowed up to share information, resources and exchange ideas for improved veteran engagement. Having one HMIS used by all homeless service providers across the state has provided the opportunity to track veterans across grantee regions and jointly develop strategies to engage those veterans flagged as hard to locate and/or engage. The CT Heroes Project has been reviewing HMIS data for more than one year and has been able to identify trends in service use, identify and categorize homeless veterans helping the outreach efforts. 6/26/15 Update:
 SSVF grantees and the VA jointly developed a definition of functional zero that incorporates a new shelter plan using GPD beds for RRH through SSVF. The draft plan will be reviewed in early July by the CT Heroes Project workgroup, and if approved, discussions will be held with GPD providers to implement this new plan. By controlling the veteran flow through veteran shelter beds, we can realistically ensure simultaneous enrollment/engagement in shelter and RRH services to meet the goal of <60 days for a homeless episode.

SSVF: Community Plan Summary

Date Completed/Revised: 7/1/2015

Continuum of Care Name:	Connecticut Balance of State CoC	CoC Number:	CT-505
CoC Representative:	Alice Minervino	Title:	Voting Steering Committee Member
Phone/Email:			
Person Completing this Summary:	Andrew Black	Title:	Program Manager
Phone/Email:	860 308.1390		

1. Primary Planning and Coordination Group: Identify the primary group responsible for planning and coordinating efforts to prevent and end homelessness among Veterans in the CoC. List the principal members of this group and their affiliation.

Primary Group Name:	Veterans Workgroup and Veteran Affairs, New Haven, Conn.		
Principal Members	Affiliation		
Greg Berman	CT Heros Project		
Gabriel Zucker	CT Heros Project		
Andrew Black	Columbus House Inc.		
Joyce Barclay	The Workplace		
Steve Bigler	CRT		
Dan Walsh	Veterans Inc.		
VA Homeless Team	West Haven, CT		
VA HUD/VASH	West Haven, CT		
VA Homeless Team	Newington, CT		
VA HUD/VASH	Newington, CT		
Maureen Pesko	VA, West Haven CT		
Matt Abbott	VA, West Haven CT		

2. Ongoing Review and Coordination: Briefly describe how often (e.g., monthly) the above group meets to review progress and coordinate efforts. Include a summary of what information is reviewed during these meetings.

The Connecticut Veterans Workgroup was created to bring all stakeholder together to develop a set of concrete actionable steps to achieve the goal of ending veteran homelessness in Connecticut by December 31, 2015. The workgroup meets monthly at various locations to brainstorm, coordinate and allocate resources in the community and at the Federal level. The Supportive Services for Veteran Families Grantees in Conn. will meet quarterly to discuss outreach efforts and planning which includes: GPD and shelter assignments, outreach nights, the referral process and the Homeless Management System database. VA and SSVF Conn. Grantees utilizes monthly case conferences (with signed releases) to meet with the principal service providers engaging homeless veterans in Conn., to determine outreach and housing plans for the hardest-to-serve veterans. The VA and SSVF Grantee case conferences take place on the 2nd Tuesday of each month at the VA Errera Community Care Center (ECCC) in New Haven, Conn. Also, Columbus House Inc. SSVF Case Managers attend the Homeless Clinic Monday through Friday at the VA ECCC in New Haven to answer questions and conduct intakes with at-risk and homeless veterans referred by the VA's HUD/VASH and Homeless Outreach Teams. Q4 Veteran Workgroup meeting will take place on Wednesday July 8, 2015.

3. Annual Demand, Goals, and Strategies for Achieving and Sustaining Functional Zero: Identify the estimated number of Veterans who are homeless annually and the community/CoC goals and strategies for achieving a functional end to Veteran homelessness by the end of 2015 (overall community/CoC goals, not just SSVF grantees). If one or more of the goals and strategies below have not yet been established for the community, leave blank and identify the date by which they will be established. See the **Ending Homelessness Among Veterans Overview** for additional guidance.

3A. Estimated Annual Number of Homeless Veterans: Identify the total unduplicated number of Veterans expected to be homeless in 2015 using data from the SSVF Edition of the Veteran Homelessness Gaps Analysis Tool FY15Q3 or data assumptions that have already been adopted by the community, such as the *VA CoC Gaps Analysis Tool (GAT)*.

Estimated Annual Total:	254
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3B. Community/CoC Goals: Identify your community's/CoC's key goals and targets.

A. Permanent Housing Placement Target & SSVF Rapid Re-Housing Placement Target:
Complete and attach *SSVF Edition of Veteran Homelessness Gaps Analysis Tool FY15Q3 OR an CoC Gaps Analysis Tool – Strategy 4 (SSVF) Worksheet*

B. Length of Time Homeless Goal (max or average days):	60	days
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C. January 2016 Point-in-Time (PIT) Count Goal	Sheltered	Unsheltered	Total
Number of Veterans expected to be counted as homeless during the CoC's January 2016 PIT count:	241	13	254
Of number above, how many will also be counted as chronically homeless:	10	5	15

3C. Implementation Strategies: What strategies are being used to achieve and sustain functional zero?

	Yes/No/Under Dev
A. Has your community identified every Veteran who is homeless right now by name?	Yes
Is this list updated regularly?	Yes
Is this list reviewed at least bi-weekly by key community partners to ensure Veterans have a permanent housing plan and those plans are achieved?	Yes
B. Does every Veteran who is homeless now have a Housing Plan and access to safe (and low barrier as needed) shelter and/or permanent housing?	Yes
C. Is every Veteran who becomes homeless rapidly engaged and offered shelter and/or housing that meets their needs?	Yes
If so, is this true no matter where they are initially engaged in your community or what shelter or unsheltered location they may be in?	Yes
D. Are sufficient SSVF resources allocated to ensure there are no RRH gaps or turn-aways?	Yes
E. Are you using SSVF to rapidly re-house Veterans who are waiting on VASH or other PSH assistance if VASH/PSH is not available immediately or in near future?	Yes

4. Other Strengths and Challenges: Briefly describe any additional strengths and/or challenges relevant to your achieving VA and local goals.

The State of Connecticut has joined the fight to end veteran homelessness and has allocated 50 vouchers to serve veterans who are homeless but are not eligible for HUD/VASH Program. One of the challenges we are face is convincing veterans who are hard to engage because they do not want to utilize services offered by the VA because of bad experience(s). SSVF Grantees and the VA will continue to reach out to these veterans to build a better relationship. (Update as of 7/01/2015) As we enter Q4, Connecticut's CoC Balance of State has seen a decrease in veterans entering shelters based on our b-biweekly Homeless Management Information System reports. Columbus House's SSVF Program continues to conduct outreach on a weekly basis to local shelters, food pantries, VA facilities and social services organizations that may have information on veterans who are homeless or at risk of becoming homeless. With the help of the State of Connecticut, SSVF Grantees in the state are utilizing WRAP Vouchers (housing subsidies) for veterans who do not qualify for HUD/VASH. To date we have submitted 2 applications and both applicants have been approved. On the program side, intakes for veterans who are classified as 'Literally Homeless' in Q3 FY 2015 were down by 45% or 47 veterans who are/were homeless compared to 104 veteran intakes that were conducted in Q3 2014. Unfortunately we have seen an increase in veteran households who are at risk of homelessness (Prevention). SSVF Grantees along with CT Heroes Project has created two key reporting tools and a protocol for hard to engage veterans. Both tools should help Columbus House's and other SSVF Programs with engagement strategies. The two reporting tools are the SSVF Performance Report and the Functional Zero Report. Each SSVF Grantee has their own performance report and it provides as snap of how quickly we engage veterans at the point entry in the shelter or Speed of Service, Outreach and the # of exits into permanent housing. The Functional Zero Report provides us with an overview of how all Connecticut's SSVF Grantees are doing serving veterans who are homeless. The protocol for hard to engage veterans list action steps that the SSVF staff can take to reach veterans who refuses services and veterans who are hard to engage. I am confident by utilizing these tools Connecticut will reach functional zero by December 31,