

SSVF: Community Plan Summary

Date Completed/Revised: 9/15/2015

Continuum of Care Name:	Detroit CoC	CoC Number:	MI-501
CoC Representative:	Homeless Action Network of Detroit (HAND) Kiana Harrison		
	Title: CoC Representative		
Phone/Email:	(313)964-3666 x 105 email: kiana@handdetroit.org		
Person Completing this Summary:	Robert Nelsen		
	Title: SSVF Program Manager VOAMI		
Phone/Email:	(517) 899-9419 rnelsen@voami.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:	Detroit CoC MI-501 Veterans Group	
Principal Members	Affiliation	
Kenny Shannon	Southwest Counseling Solutions	
Jamie Ebaugh	Southwest Counseling Solutions	
Robert Nelsen	Volunteers of America Michigan (VOAMI)	
Alonzo Morgan	Volunteers of America Michigan (VOAMI)	
Theresa Paruskiewicz	Volunteers of America Michigan (VOAMI)	
Angell Bray-Darden	Volunteers of America Michigan (VOAMI)	
Christine Cook	The Blue Water Center for Independent Living (BWCIL)	
Laura Stele	The Blue Water Center for Independent Living (BWCIL)	
Jean Griggs	Neighborhood Legal Services Michigan (NLSM)	
Gloria White	Neighborhood Legal Services Michigan (NLSM)	
Dana Doole	Neighborhood Legal Services Michigan (NLSM)	
Anne Beatty	Wayne Metro	
Meghan Takashima	City of Detroit	
Sam Olson	CSH	
Patricia Wolschon	Detroit VA	
Kiana Harrison	Homeless Action Network of Detroit (HAND)	
Amelia Allen	Homeless Action Network of Detroit (HAND)	
Selwin O'Neil	Homeless Action Network of Detroit (HAND)	
Aaron Truitt	Detroit Land Bank	
Catherine Distelrith	DHHS	

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.

This group will meet on a monthly basis until we establish a working plan that has the entire CoC input and then we will move to meet on a bi-monthly plan. The group began meeting in November 2014 and have met monthly or more frequent since. Future meetings will be planned in accordance with progress and implementation of this plan. The meetings will include the following elements: report of progress in reaching annual placement target, review of Veterans who are homeless, and track progress toward coordinate efforts.

Special attention has been given to abandoned properties where homeless Veterans may be squatting. As a major barrier to Detroit rehousing every literal homeless Veteran the group has brought in the Detroit Land Bank who owns the vast majority of the abandoned buildings. Additional special attention has been put on "Match" meetings for homeless Veterans. At upcoming Match Meetings, all resources represented above will join with CAM and other community wide housing resource staff to ensure that Veterans are being efficiently matched with the best resources to eliminate the barrier at hand.

Written narrative regarding updates to plan:

A. Has your community identified every Veteran who is homeless right now by name? Moved from Under Development to Yes.

Description: Detroit has successfully generated a single list of homeless veterans in the CoC and representatives from the VA, Transitional Housing, SSVF, and community partners are scrubbing the list to ensure that the names remaining are still homeless. In addition to ensuring the list is accurate, SSVF programs from the region are quickly attacking the list to connect with every individual on the list. To ensure the greatest success for this effort, additional energies have been placed on the Detroit Veteran Match Meeting. Eligibility documents for each homeless veteran are being collected and packaged for application to various voucher programs available in Detroit including HCV, HUD-VASH, CABHI (Cooperative Agreement to Benefit Homeless Individuals), etc. The match meeting includes staff from SSVF, HUD-VASH, PSH, and more. At the Veteran Match Meeting, homeless veterans

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:	1,064
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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):	30	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:	426	0	426
Of number above, how many will also be counted as chronically homeless:	141	0	141

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.

Strengths:

#1 - One strength is our local SSVF providers working with the Department of Labor Homeless Veterans' Reintegration Program (HVRP) to assist homeless Veterans with much needed training and job placement to allow them to be financially stable.

#2 - Strength- Many of our SSVF providing agencies which serve Detroit have years of experience providing Veteran services in accordance with the performance goals/missions and outcomes of the VA, DOL, and other Veteran-centric programs.

#3 - We have an efficient process designated to manage all Veterans in GPD or Contract programs participants to ensure that they are effectively utilizing community resources such as PSH and other vouchers. Collectively the SSVF agencies have been assigned to specific locations (8 locations total) based on enrollment capacity. SSVF staff are responsible to VI-SPDAT residents while ensuring they are being screened for eligibility for housing vouchers or other eligible housing resources.

#4 - Detroit has 426 GPD/Contract beds available to local Veterans. PIT 2015 are projected to have 426 sheltered Veterans with 0 unsheltered Veterans.

Challenges:

#1 - A major challenge identified is the VA homeless data collection system and its limitations which have a drastic effect on housing some of our communities' most vulnerable homeless Veterans. These limitations stem from the inability for VA's HOMES and HMIS to talk to each other and count data in a unified cohesive system. Utilizing two systems creates gaps in our ability to calculate data consistently and limits our ability to know of Veterans who are experiencing homelessness unless we find them or they find us outside the VA. Communication between systems would enable our SSVF providers to pull list of Veterans who are struggling with homelessness and quickly pursue them for appropriate rapid rehousing or other housing services. On April 21, 2015, The VA received clearance via the ROI and sharing agreement to utilize HMIS within Detroit. The enabled sharing enables

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Date Completed/Revised:	8/13/2015
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Continuum of Care Name:	Dearborn/Dearborn Heights/Westland/Wayne County CoC	CoC Number:	MI-502
CoC Representative:	Jane Scarlett	Title:	CoC Facilitator, Director of Housing and Homeless Programs
Phone/Email:			
313-463-5490 / jscarlett@waynmetro.org			
Person Completing this Summary:	Jane Scarlett	Title:	CoC Facilitator, Director of Housing and Homeless Programs
Phone/Email:			
313-463-5490 / jscarlett@waynmetro.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:	Out-Wayne County Homeless Services Coalition/Housing Assistance and Resource Agency		
Principal Members	Affiliation		
Anne Beatty	SSVF Program Manager		
Sheilyn Gipson	SSVF Case Manager		
Doug Courter	SSVF Community Outreach		
Jane Scarlett	Director of Housing and Homeless Programs		
Scott Lorentz	VA Contract Residential Grantee		
Pat Wolschon and staff	Director of Homeless Programming/John Dingell VA		
RPI Management Staff	VASH voucher administrator		
Angela Aaron-Benifield	Manager, Financial Empowerment Center		
Stephanie Marchese	Workforce Development Manager		
Lara Salyers, Molly Bopp, Carmine Bossio	Housing Choice Voucher administrators		
Jamie Ebaugh/Kenny Shannon	Adjacent geo area SSVF grantee		
Allison Green	Social Security Administration Specialist		

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 Out-Wayne CoC meets monthly. Although not all members of the primary group attend each meeting, group members work with each other on an as-needed basis. For example, a vet contacted our SSVF program seeking homeless prevention assistance. While processing his case, his name was pulled from the regular HCV waiting list (not VASH). The SSVF program wanted to determine if the vet's current housing would be eligible for a regular HCV rental subsidy (e.g., would there be too many deficiencies discovered through the housing quality standard process; would the landlord be willing to negotiate rent if necessary to comply with the payment standards of the voucher program). The voucher administrator who pulled the vet's name did a preliminary inspection and determined that indeed there were few deficiencies and the unit would qualify for an HCV subsidy. The SSVF case manager discussed concessions the landlord might need to make related to contract rent. The landlord agreed to make adjustments. The result was that the SSVF program would provide homeless prevention assistance as the vet will have a subsidy in place within 6 weeks which will be long-term affordable sanitary housing.

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:	5	0	5
Of number above, how many will also be counted as chronically homeless:	5	0	5

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.

Our greatest strength is the diversity of represented domains that are working together to address, prevent and quickly respond to homeless vets and their families. Because these diverse domains have historically worked together and work together often, SSVF and other homeless program staff are expert in other systems that vets must engage with to address not only housing-related concerns but issues related to all aspects of health, income supports, benefit application, financial planning, educational-related concerns of children and youth and secure reintegration. Subcontractors in MI 509 and MI 514 have a list (by name) of all homeless vets that is reviewed on a regular basis.

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Date Completed/Revised: 9/14/2015

Continuum of Care Name:	St. Clair Shores/Warren/Macomb County CoC	CoC Number:	MI-503
CoC Representative:	Denise Goshton	Title:	Director, Macomb Homeless Coalition
Phone/Email:	586-285-0402 / denise@macombhomelesscoalition.com		
Person Completing this Summary:	Julie Kavanagh	Title:	Program Manager, Macomb County Community Services Agency
Phone/Email:	586-469-5913 / julie.kavanagh@macombgov.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:	Community Action Partnership (CAP)/Macomb County Community Services Agency (MCCSA)		
Principal Members	Affiliation		
Julie Kavanagh	CAP/MCCSA		
Sama Harp	CAP/MCCSA		
Kathy Koths, Heather Whited, Joann Sterne	CAP/MCCSA Case Managers		
Gary Cutler	CAP/MCCSA		
Denise Goshton	Macomb Homeless Coalition		
Laura Rios	Macomb County Veterans Services		
Alysa Wamsler	Training and Treatment Innovation		
Christine Cook	Blue Water Center for Independent Living		
Sian Washington	Disability Network Oakland & Macomb		
Kenny Shannon	Southwest Solutions		
Sheila Collins/Kari Nicholson	Turning Point (domestic violence shelter)		
Erica Karfonta, Ann Robinson, Ganiah Hinton	OLHSA		
Laura Wesley, Bev Mostowy	OLHSA		
Stephen Boegehold	Michigan Department of Health and Human Services		
Gail Harding	Salvation Army MATTS shelter		
Patricia Wolschon (or designee)	John D. Dingell VA Medical Center		
Gerald Fisher-Curley	John D. Dingell VA Medical Center		

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 Macomb County Community Planning group meets bi-weekly using a combination of conference calls and in-person meetings. Meetings consist of updates to the community planning efforts, review of the veterans on the master list (on a monthly basis), and open dialogue about challenges/shared concerns agencies face while serving veterans. The group's first major action step was to create, use, and maintain a shared master list of homeless veterans. This action step has been completed. The group is still working on addressing standard protocols for users of the list, addressing release of information/privacy concerns, and using the list to track community progress in reaching functional zero.

A next action step is to broaden the membership of the community planning group and engage local shelter operators, Continuum of Care members, and VA representatives to foster greater collaboration between SSVF programs and homeless services providers and increase understanding of the effort to end veterans homelessness. This expanded engagement with local shelters will also help ensure the master list is complete and up-to-date.

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:	141
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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):	30	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:	30	2	32
Of number above, how many will also be counted as chronically homeless:	4	1	5

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?	Under Dev
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.

Strengths for Macomb County:

- The Community Planning group has created stronger partnerships and communication between SSVF agencies serving Macomb County.
- Strong coordination with community partners for temporary housing, employment, and mainstream benefits.
- Affordable housing/rent reasonable housing is available. There has been success in identifying some landlords who will accept veterans with high barriers.
- Shelters and transitional housing are available for male veterans.
- HUD-VASH and Housing Choice vouchers are available for eligible veterans.

Challenges for Macomb County:

- 3.C.A.: The Master List is being reviewed monthly, though bi-weekly reviews are being incorporated into the community planning meetings. Agencies review and update their entries frequently.
- 3.C.B.: Engaging local Continuum of Care members and shelters in the community planning efforts has been challenging. Efforts are on-going to broaden the community planning group. Until better coordination is in place, the Community Planning group cannot state that all homeless veterans have a housing plan and access to shelter/permanent housing.
- Some CoC member organizations/individuals lack buy-in of the "Housing First" model.
- It is difficult to locate available emergency/temporary shelter for women with children and men with children.
- The Continuum of Care coordinated assessment remains under development.
- Lack of permanent supportive housing options remains a challenge.

SSVF: Community Plan Summary

Date Completed/Revised: 9/11/2015

Continuum of Care Name:	Pontiac/Royal Oak/Oakland County CoC	CoC Number:	MI-504
CoC Representative:	Leah McCall	Title:	Executive Director
Phone/Email:	(248) 221-1854/lmccall-alliance@oaklandhomeless.org		
Person Completing this Summary:	Alysa Wamsler	Title:	SSVF Program Coordinator/Training and Treatment Innovations
Phone/Email:	(248) 524-8801 ext. 1237/awamsler@ttiinc.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:	
Principal Members	Affiliation
Alysa Wamsler	Training & Treatment Innovations, Inc.
Katie Morgan	Training & Treatment Innovations, Inc.
Zachary Dieck	Training & Treatment Innovations, Inc.
Garth Wooten	Oakland County Veterans Council
Laura Wesley	OLHSA
Erin Tiano	OLHSA
Beverly Mostowy	OLHSA
Ganiah Hinton	OLHSA
Ann Robinson	OLHSA
Erica Karfonta	OLHSA
Christine Cook	Blue Water Center for Independent Living
Leah McCall	Oakland County Alliance for Housing (CoC)
Kenny Shannon	Southwest Counseling Solutions
Patricia Wolschon	VA

Ongoing Review and Coordination: Briefly describe how often (e.g., monthly) the above group meets to review progress and The Oakland County Alliance for Housing (CoC) meets monthly. A sub-committee dedicated to ending Veteran Homelessness was created and meets monthly prior to the CoC meeting. In November 2014, Oakland County SSVF grantees, CoC, Veterans Services division and other community partners came together to Initiate the 100 Day Challenge to End Veteran Homelessness. The goal

was to house 70 Veterans/Veteran families in 100 days and with all but one agency reporting their numbers, 66 was the total. The Veterans sub-committee was born as a result of the initiative and the desire/need to keep it going. The 100 day Challenge initiative members met monthly to discuss progress towards the goal and barriers to meeting the goal. The group will continue to meet monthly to create and review progress of action steps needed to bring veteran homelessness to functional zero and keeping all collaborative partners informed. The group will establish a master list of veterans by name. The group will use the master list to determine the housing needs, address barriers and establish common goals.

Annual Demand, Goals, and Strategies for Achieving and Sustaining Functional Zero: Identify the estimated number of Veterans

Estimated Annual Number of Homeless Veterans: Identify the total unduplicated number of Veterans expected to be homeless in

3.

Estimated Annual Total:	109
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3A.

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* –

3B.

B. Length of Time Homeless Goal (max or average days):	30	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	10	1	11
Of number above, how many will also be counted as chronically homeless:	3	0	3

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?	Under Dev

3C.	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?	Under Dev
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?	Under Dev
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

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

4.	<p>Strengths of Oakland County:</p> <ul style="list-style-type: none"> -All SSVF grantees enter data into HMIS -Strong collaboration between the SSVF grantees and other community partners in the county. The group easily came together to provide input for the community plan and GAP analysis worksheets. a Veterans Work Group (sub committee of the CoC) collaboration with the County Veterans Council Veterans Treatment Courts Close proximity to VA medical centers, Vet Centers and CBOC <p>Challenges of Oakland County:</p> <ul style="list-style-type: none"> -There are no sharing agreements established for HMIS Better collaboration with HUD VASH is needed, including making HUD VASH staff aware of adequate housing stock in the county. -Lack of public transportation/sufficient funds to utilize public transportation or purchase a vehicle Inadequate amount of homeless shelters for families with dependent children Limited financial resources available for needs not covered by SSVF grant or long-term needs 	<ul style="list-style-type: none"> -The county has -Strong -Active - - - - -
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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 Veteran sub-committee of the CoC meets on a quarterly basis. The main focus of the meetings has been mainstreaming resources for veterans and networking with community agencies to link veterans to the appropriate resource for the specific need. The group also discusses barriers to assisting homeless veterans. The group will work to create a list of homeless veterans by name to maintain and share amongst community partners to bring veteran homelessness to functional zero. The group will set targets and measure progress regularly by identifying gaps and reviewing data.
 -The sub-committee has "merged" somewhat with the VCAT in Genesee county. The VCAT is identifying focus groups to address the needs of veterans.

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:	129
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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):	30	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:	30	2	32
Of number above, how many will also be counted as chronically homeless:	8	1	9

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?	Under Dev
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?	Under Dev
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.

<p>Strengths of Genesee:</p> <ul style="list-style-type: none"> -One Stop service for homeless people/veterans Several soup kitchens -Adequate shelter for single men and women with children (some shelters have veteran specific beds) -Affordable housing stock with less stringent qualification processes DHS (most veterans qualify for food assistance and Medicaid) Good collaboration with HUD VASH and VA Homeless outreach worker <p>Challenges of Genesee:</p> <ul style="list-style-type: none"> -Accessibility to resources (limited call-in times, phone always busy, no walk ins accepted, etc.) coordinated assessment is still in the development stages collaboration amongst community agencies shelters for a family unit (i.e. mother, father, children) funding for services/needs not covered by SSVF 	<p>-</p> <p>-</p> <p>-</p> <p>-</p> <p>-CoC</p> <p>-Lack of</p> <p>-Limited</p> <p>-Limited</p>
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SSVF: Community Plan Summary

Date Completed/Revised: 9/15/2015

Continuum of Care Name:	Grand Rapids/Wyoming/Kent County CoC	CoC Number:	MI-506
CoC Representative:	Jessica Vail	Title:	Program Manager
Phone/Email:	616-459-6281 jvail@hwmuw.org		
Person Completing this Summary:	Vicki Squires	Title:	SSVF Supervisor, Community Rebuilders
Phone/Email:	616-458-5102 vsquires@communityrebuilders.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:		
Principal Members	Affiliation	
Jessica Vail	Grand Rapids Coalition to End Homelessness	
Vera Beech	Community Rebuilders	
Anna Diaz	Community Rebuilders	
Vicki Squires	Community Rebuilders	
Tiyanna Whitt	HCHV	
Katie Paepke	HCHV	
Lauren Baker	Housing Assessment Program Salvation Army Social Services	
Jameela Maun	Housing Assessment Program Salvation Army Social Services	
Robert Nelsen	Volunteers of America Michigan	
David O'Neill	Volunteers of America Michigan	
Carrie Roy	Kent County Department Of Veteran Affairs	
Jim Talen	Grand Rapids Coalition to End Homelessness	
Linda Likely	Kent County Community Development	

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 group has met collectively several times to coordinate efforts and organize data with regards to this Community Plan. Discussion topics include: review of HMIS data , PSH availability, length of time from intake to lease signing, outreach efforts, screening and triage and review of reasons for ineligibility, RRH placements and availability, progress towards functional zero is evaluated. SSVF Grantees maintain frequent contact with Coordinated Entry (The Salvation Army) to ensure that all veterans are receiving access to services and have plans for resolving their housing crisis. In addition, several members attended SSVF Regional meetings where information and overview was shared. Future plans include meeting quarterly to review data and assess progress, share ideas and target resources.

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:	385	This will be established by 10/01/2015
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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):	21	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:			0
Of number above, how many will also be counted as chronically homeless:			0

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?	Under Dev
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?	No
C. Is every Veteran who becomes homeless rapidly engaged and offered shelter and/or housing that meets their needs?	No
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.

Our Strengths based Housing First model ensures that veterans receive a quick resolution to their housing crisis. Veterans are provided housing search assistance and provided information about landlord/tenant relationships. Veterans work with their Housing Resource Specialist to develop their own Housing Stability Plan tailored to each person's needs, strengths, talents, and resources to accomplish the goals they wish to achieve. Low demand and focusing on strengths, enables veterans to obtain housing in less than 21 days from date of intake and to maintain that housing long-term. An additional strength is strong coordination between Veteran service providers. Adequate availability of safe and affordable housing in an area with a low vacancy rate continues to be a challenge along with a lack of "buy in" by other housing providers of Housing First strategies and their effectiveness in ending homelessness. Emergency Shelters in Kent County use HMIS only on a limited basis making it difficult to identify and count sheltered and unsheltered homeless veterans.

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.

Though we have not begun a meeting specifically for strategizing the community plan, SSVF staff will work to use parties listed above as an offshoot of the normal CoC or Housing Resource Committee in Kalamazoo County. In addition to being located in the housing resources building and being one of only two Veteran specific resources (only Veterans housing resource for entire county), our SSVF team is building a committee to promote Veteran awareness in the community. Our staff is making efforts to facilitate regular monthly meeting with above parties to ensure Veteran homelessness is being closely monitored through the end of the year. VOAMI SSVF staff participates in CoC meetings and will add Veteran homelessness as topic to agenda. Community plan will be revisited at the meeting. Meeting will be held either face to face or by conference call.

Kalamazoo County has no contract or GPD units in the county. Zero GPD/Contract VA beds will be used in the sheltered PIT number below for functional zero count.

Written narrative regarding updates to plan:

A. Has your community identified every Veteran who is homeless right now by name? **Moved from no to No.** Description: The HARA maintains a list of every homeless person and is putting forth more effort to separate the list by category including veterans. In addition, the community is working closely with 211 which is now screening for persons identified as veterans. Though this has made a strong impact ensuring all veteran families are being rapidly rehoused, there is still a gap in information being shared with VOAMI (only local veteran service provider in the CoC). VOAMI is working to develop a committee within the CoC to deal directly with housing/homelessness as a committee, where they will review take-down target and current placements.

D. Are sufficient SSVF resources allocated to ensure there are no RRH gaps or turn-aways? **Moved from No to No.** Description: The gap analysis projects 37 homeless Veterans for the year and SSVF projects that as an individual program we do not have the capacity alone to

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:	37
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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):	30	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:	0	0	0
Of number above, how many will also be counted as chronically homeless:	0	0	0

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?	Under Dev
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?	Under Dev
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.

Strengths:

#1 - SSVF programs are providing major outreach efforts which are getting the word out to the community to enhance the message of reaching functional zero homeless by the end of the year. There is no way VA could do this alone without SSVF teams joining forces and leading the outreach efforts.

#2 - Strong participation by community in quarterly CoC meetings. Results have demonstrated rapid response to housing needs of community members including Veterans. CoC utilizes special resource sessions to provide awareness of unique services for homeless.

#3 - VOAMI SSVF staff is housed in the same building as most other major local housing resources. Additionally the facility houses one of the major food pantries for low income individuals in Kalamazoo County. Facility is on bus route with bus stop outside the building. Both major local shelters are within one mile from SSVF office. Other frequently visited agencies and offices such as DHS are just blocks away.

#4 - VA staff is present to host peer support meetings weekly at Ministry With Community Shelter. SSVF staff accompanies VA Peer Support staff to the meetings to provide outreach, education about resources, and Veteran cultural awareness to the community.

#5 - One strength is our local SSVF providers working with the Department of Labor Homeless Veterans' Reintegration Program (HVRP) to assist homeless Veterans with much needed training and job placement to allow them to be financially stable.

#6 - VOAMI has years of experience providing Veteran services in accordance with the performance goals/missions and outcomes of the VA, DOL, and other Veteran-centric programs.

Challenges:

#1 - The VA hasn't made a strong media effort to spread the message of ending literal homelessness among Veterans by the end of 2015. As a result the community doesn't see the need to end literal homelessness by the end of 2015. The VA has not done enough to share this message. The challenge is that Veterans who don't either encounter a SSVF outreach person, a VA staff, or some other Veteran advocate, they will likely be left unaware of the resources/mission available to rehouse homeless Veteran and Veteran families. We are pushing to find every Veteran but without a campaign from the VA there may be Veterans left behind.

SSVF: Community Plan Summary

Date Completed/Revised: 9/15/2015

Continuum of Care Name:	Lansing/East Lansing/Ingham County CoC	CoC Number:	MI-508
CoC Representative:	Title:		
Sharon Dade	CoC Co-Chair		
Phone/Email:			
(517) 202-3504 sharond@voami.org			
Person Completing this Summary:	Title:		
Robert Nelsen	SSVF Program Manager VOAMI		
Phone/Email:			
(517) 899-9419 rnelsen@voami.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:	Lansing/East Lansing/Ingham County CoC MI-508 Veterans Group		
Principal Members	Affiliation		
Robert Nelsen	Volunteers of America Michigan		
Shawn Shaltry	Volunteers of America Michigan		
Ganiah Hinton	Oakland Livingston Human Service Agency		
Laura Wesley	Oakland Livingston Human Service Agency		
Randy A. Marwede	Ingham County Department of Veteran Affairs		
Stephanie Beals	Michigan NG Family Programs		
Sharon Dade	Ingham County CoC		
Tiyanna S. Whitt	HCHV Northern-Tier Supervisor		
Emily MacDonald	HUD-VASH Social Worker/CBOC		
Diane Singleton	HARA Supervisor		
Heather Nystrom	USARMY NG MIARNG		
Chris Taylor	VOAMI HVRP Programs		
July Shaltry	VHP 1 & VHP 2 (GPD)		

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.

Though we have not begun a meeting specifically for strategizing the community plan, it falls under a subcommittee of our Lansing Area Veterans Resource Coalition (LAVRC). During our bi-monthly meeting we focus on four pillars of the coalition. The leading pillar for the LAVRC (under the leadership of Michigan Veterans Community Action Team (MiVCAT)) is housing and homelessness. The group includes 50 different agencies/businesses that complete outreach, provide resource referrals, and educate the public about the need for a concentrated effort to ensure Veterans are connected to housing resources within 48 hours of touching homelessness. The list above includes the managers from each of the leading Veteran groups in the CoC who work directly with homeless Veterans. These individuals meet regularly to provide referrals and complete outreach specifically for homelessness. The Ingham County group will work toward participating in special meeting to address progress toward this plan. Plan will be revisited at the meeting. Meeting will be held either face to face or by conference call.

Written narrative regarding updates to plan:

A. Has your community identified every Veteran who is homeless right now by name? **Moved from No to Under Development.** Moved from No to Under Development. Description: The HARA maintains a list of every homeless person but there is still a gap with that information being shared with the programs that serve Veterans. We are currently developing a committee within our Lansing Area Veterans Resource Coalition (LAVRC) VCAT team to deal directly with housing/homelessness as a committee where we will review take-down target and placement number.

D. Are sufficient SSVF resources allocated to ensure there are no RRH gaps or turn-aways? **Moved from Under Development to No.** Description: The gap analysis projects 199 homeless Veterans for the year, and SSVF projects that, as an individual program, we do not have the capacity alone to serve the demand for the Lansing/East Lansing/Ingham County CoC. SSVF has the capacity to serve 70 individual Veterans in the aforementioned territories. Though we look to have a gap in provision for homeless individuals, this does not take into account the available vouchers shared between HUD-VASH, GPD, ESG, and other PSH voucher programs. Additionally other resources exist, including GPD.

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:	199
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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):	30	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:	35	0	35
Of number above, how many will also be counted as chronically homeless:	12	0	12

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?	Under Dev
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?	Under Dev
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.

Strengths:

#1 - SSVF programs are providing major outreach efforts which are getting the word out to the community to enhance the message of reaching functional zero homeless by the end of the year. There is no way VA could do this alone without SSVF teams joining forces and leading the outreach efforts.

#2 - Ingham County has a strong community wide goal of serving Veterans. The community has long standing agencies that have fought for bringing help to Veterans throughout the last 25 years. Recent developments include MiVCAT adoption of Lansing Area Veterans Resource Coalition (LAVRC). The LAVRC leadership team includes SSVF team members.

#3 - VOAMI operates both SSVF program along with being in charge of the HARA for Ingham County. This ensures that all Veterans screened for homelessness are immediately referred SSVF for screening and referrals to Veteran specific resources.

#4 - Lansing has 30 GPD beds available to local Veterans. PIT 2015 are projected to have 35 sheltered Veterans with 0 unsheltered Veterans.

#5 - One strength is our local SSVF providers working with the Department of Labor Homeless Veterans' Reintegration Program (HVRP) to assist homeless Veterans with much needed training and job placement to allow them to be financially stable.

#6 - VOAMI has years of experience providing Veteran services in accordance with the performance goals/missions and outcomes of the VA, DOL, and other Veteran-centric programs.

Challenges:

#1 - The VA hasn't made a strong media effort to spread the message of ending literal homelessness among Veterans by the end of 2015. As a result the community doesn't see the need to end literal homelessness by the end of 2015. The VA has not done enough to share this message. The challenge is that Veterans who don't either encounter a SSVF outreach person, a VA H-PAC staff, or some other Veteran advocate, they will likely be left unaware of the resources/mission available to rehouse homeless Veteran and Veteran families. We are pushing to find every Veteran but without a campaign from the VA there may be Veterans left behind.

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 Washtenaw Housing Alliance Operations Committee (OC) has over 30 member agencies working on housing and homelessness issues. It meets bi-monthly to share information regarding progress, changes, trends and best practice for our community. The VA has representation at these meetings. This group is also responsible for the PIT count. The Continuum of Care Board, which oversees the community's coordinated entry process known as Housing Access for Washtenaw County (HAWC), also meets bi-monthly to share information regarding progress, changes, trends and best practices. The HAWC CHP committee, which makes housing placements for rapid re-housing and permanent supportive housing openings, meets twice monthly to discuss each homeless veteran by name and match them to appropriate housing intervention based on vulnerability.

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:	141
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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):	30	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:	20	0	20
Of number above, how many will also be counted as chronically homeless:	0	0	0

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.

MAP works very closely with the VA outreach case management team. Together we are able to quickly identify and assess the needs of homeless veterans and get them the services needed. Through the CHP meetings, we are able to collaborate as a community about named veterans and best service interventions for them. Currently, the biggest challenge is contacting veterans that were identified at PIT count, but are not connected to any other services. We also struggle with identifying resources for veterans that are ineligible for VA services and SSVF.

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 executive body of the CoC meets monthly, with the general membership having quarterly meetings. The CoC as a whole is not focused on the discussion of ending veteran homelessness, which is a concern. The members listed above do have a strong collaboration with one another; however, the CoC as a whole is not involved. There is a need to form an official veteran specific focus group in the county to address the needs of homeless veterans in the community.

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:	86
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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):	30	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:	20	2	22
Of number above, how many will also be counted as chronically homeless:	4	2	6

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?	Under Dev
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?	Under Dev
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.

Strengths of Saginaw County:

- Collaboration with Veterans Court and those involved in the justice system as a preventative effort
- Collaboration with the Saginaw County Jail Social Worker to develop a veterans only dorm providing for ease of identifying veterans incarcerated
- SSVF is present at the local shelter(s) weekly. This provides for collaborative outreach with VA shelter case management to ensure that no veteran goes longer than 7 days without contact being made and linked to SSVF
- Veterans not qualified for State Emergency Relief (SER funds) are referred to SSVF by DHS
- Strong collaborative efforts with other SSVF grantees for warm handoff referrals ensuring veterans are not transitioning between counties and are receiving the services they need.

-Challenges of Saginaw County:

- Overcoming employment barriers as a result of veterans inability to work due to substance abuse and mental health concerns
- Criminal history precluding identification of landlords willing to rent when the frequent landlords with established relationships are full
- Overall ability of the veteran to secure work in the competitive market being middle aged with minimal skill set outside of their military experience

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 CoC meets regularly once a month. The CoC back in beginning of last summer began to revise their ten year plan and ending Veteran homelessness is part of that plan. The community including City and County government and Corporate partners have pulled together to support the plan thru increasing Day Services such as drug and alcohol treatment, mental health services, job search and training motivation and high quality and increased case management services to ensure that residents are helped with negotiating complex systems and receive assistance they need to exit homelessness. The CoC has been working with the local hospitals on a discharge plan. With this discharge planning process, it will help those who are being discharged if they are homeless have a place to go and then once at the shelters, they will be referred to the appropriate agency that can help them including SSVF and the VA. Our CoC has been charged with creating a master list of veterans known to be homeless, and will continuously update this list, and we will ensure that all providers and partners are on the same page and have a clear set of people that need housing. Our list has been started by our SSVF Staff. Our community tried to put all their efforts into RR only however, a challenge we faced is Lenawee is primarily a rural community. As a result most Veterans here are found to be prevention cases. Since homelessness in rural areas looks different than homelessness in urban areas, measuring homelessness by counting shelter beds and individuals living on the street likely undercounts the homeless population in rural America. One step our CoC and CAA have done is to join the VCAT in our area. This organization is crucial to help our community end homelessness in 60 days. There VCAT team that has been put in place by our State for each county that we are a part of to help put Veterans in touch with resources they need immediately through this group. No matter who a Veteran calls they are immediately sent out through a list serve of community members that provide a serve and depending on the need of the client, the agency that can help the Veteran is supposed to contact them right away. This will help ensure every agency is involved who can help end Veteran homelessness so no Veteran is left behind. We just watched the Podio webinar this week which is the VCAT web based contact

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:	8
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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):	30	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:	5	0	5
Of number above, how many will also be counted as chronically homeless:	1	1	2

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?	Under Dev
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.

Updates: As we updated our Gap Analysis, it shows that we have exited 7 Veterans and to PH which is over half of our goal for Lenawee County. We are working towards finalizing our list of Veterans. If a Veteran comes into the system though the intake process immediately starts and between CAA and Housing Help of Lenawee, the Veteran is usually housed within 30 days.

Challenges: In many rural communities, the idea of rapid re-housing is a natural fit. People working in human services have the attitude that someone who loses their housing should receive immediate help finding new housing, and they will do whatever is necessary to make that happen. I'm happy to say that everyone in our community is devoted to aggressively tackling these challenges:

A shortage of high quality Affordable Housing
Rural areas can be isolating due to their expansiveness and/or because they can be sparsely populated. This results in - Difficulty including individuals that do not use services - see VCAT section above on progress to address this barrier
Wages and public assistance that haven't kept up with the cost of living - We have been working building relationships with the landlord associations and employers in our areas to bring opportunities to the Veteran families in our community.

Strengths: The community including City and County and Corporate partners have pulled together to support ending Veteran homelessness. Government officials are on board as well. There is a radio drive (fundraiser) once a year to support a non profit in the area and raise unrestricted funds that can help Veterans who don't otherwise qualify for services. This support is crucial to goal of ending homelessness among Veteran families. Again we feel our outreach plan our community has is a strength we have. From Discharge Planning to biking, to campgrounds to fairgrounds to blitzes these are important to ending Veteran Homelessness because alot of effort has to be put in not just by one agency but the community as a whole.

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 Veteran Service Team (VST) will begin on May 1st to collaborate with one another to identify where homeless veterans are located and work together to house and serve those who are most vulnerable. The VST will work in tandem to develop, monitor, and adapt goals to reach functional zero in the five counties it serves. The group will meet at the minimum monthly, but more, if necessary, to insure that we meet our community goals. SSVF will be leading and directing the community plan set by the VST and present progress to CoC meetings, as well all local meetings, to update community partners on its progress. The plan will utilize the Gap Analysis tool and Rapid Rehousing and Homeless Prevention numbers for it's benchmark. We are actively seeking additional partners to participate in the creation and implementation of the plan to make sure it is effective.

Goal 1: Identify all homeless veterans within the five county area and where they are located. **To be completed: 7-31-15**

Goal 2: Collect and maintain a fluid list of homeless veterans that will be utilized by the VST to determine functional zero by December 31, 2015. **To be completed: 6-30-15** Goal

3: VST works together to permanently house the hardest to serve homeless veterans and strategizes on how to engage and link them into services. **Ongoing**

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:	55
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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):	45	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:	44	0	44
Of number above, how many will also be counted as chronically homeless:	19	0	19

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?	Under Dev
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?	Under Dev
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 our greatest strengths is the people we have on the ground working towards ending veteran homelessness who really have a heart for the people we serve. Goodwill Industries of Northern Michigan has street outreach specialists who, along with the Justice Outreach social worker employed by the VA, will be training the SSVF Housing Resource Specialists so that we can optimize our outreach strategies. With this training, we are confident that all veterans who are unsheltered will be located and referred to SSVF for referral to other local agencies, and so that we can link them to VA programs to end their homelessness. Finding veterans in the woods, encampments and areas that are uninhabitable is always an issue in rural areas--our area is no exception. Some of veterans are content to remain in their current living situation and, also, there are a certain number of veterans who are not willing to change their circumstance or comply with program regulations. This is a one of the fundamental reasons for the creation of the Veteran Service Team (VST). Our VST members are part of a very strong Continuum of Care and our community partners are very enthusiastic to assist in our goal of ending veteran homelessness. An identified challenge that is being addressed is a lack of consistent communication with the VA Medical Center in Saginaw. Lines of communication are being established and we hope to increase communication and involvement through future meetings/summits/conferences in the near future. Our overall goal is to coordinate these services throughout northern Michigan to have a Veteran Homeless Response System that will coordinate funding and housing and strengthen the impact on our veteran community. Ideally, as we become increasingly successful in nearing functional zero, our program goals will be altered to reflect the decreasing amount of veterans that the VST will be working with to permanently house. It is our hope that the SSVF program will be in place to address the needs of those who may become imminently at risk of losing their housing and also to assist new veterans who will need assistance.

SSVF: Community Plan Summary

Date Completed/Revised: 4/30/2015

Continuum of Care Name:	Marquette, Alger Counties CoC	CoC Number:	MI-513
CoC Representative:	Rod DesJardins	Title:	AMCAB Housing Services Director,
Phone/Email:	(906) 228-6522 x350 rdesjardins@amcab.org		
Person Completing this Summary:	Rod DesJardins	Title:	Housing Services Director
Phone/Email:	(906) 228-6522 x350 rdesjardins@amcab.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:	U.P. Housing Stabilization Committee	
Principal Members	Affiliation	
Amy Lerlie	Chair- Executive Director, AMCAB	
Nicole Foster-Holdwick	Vice chair - VHAIRO VISN 12 Homeless Prevention Rep	
Bonnie Pelto	Member, Dickinson/Iron Counties	
Pastor Dave Boscarino	Member, Menominee County	
Michelle Lajoie	Member, Chippewa/Luce.Mackinac Counties	
Deb Trombly	Member, Delta County	
John Niemala	Member, Baraga/Houghton/Keweenaw Counties	
Jeff Betlewski	Member, Gogebic/Ontonagon Counties	
Dave Ulrey	VA VISN 12 Compensated Work Therapy Coordinator	
Rod DesJardins	AMCAB Housing Services Director, SSVF Program Manager	
Jordan Fox	AMCAB SSVF Housing Resource Agent	
Lonny Bourque	CLMCAA SSVF Housing Resource Agent	
Michael Bachand	DICSA SSVF Housing Resource Agent	
Jessica Robitaille	MVAA Veteran Service Officer	
All County and Veterans Organization VSOs	Serving the 15 County Service area	

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 15 counties being served by this grant used to be represented by seven separate CoCs. Six of those CoCs were merged into MI-500, Balance of State, and became Local Planning Bodies. They still consider themselves as Continuums of Care for the county(ies) they represent. Only Marquette-Alger Counties (MI-513) is a separate CoC. To overcome barriers created by regional and provincial thinking, AMCAB's Executive Director, Amy Lerlie, has coordinated the establishment of the U.P. Housing Stabilization Committee which includes representatives from all 15 counties and seven Local Planning Bodies. She chairs the committee and the VAMC Homeless Prevention Office social worker, Nicole Foster-Holdwick, co-chairs the group. They meet monthly and are still working on their mission, organizational structure and by-laws. The 15 counties of Michigan's Upper Peninsula, the service area for the SSVF grant, also comprises Region 1 of the Michigan Campaign to End Homelessness. That group drafted a plan to end homelessness for the general population in 2013 but it does not include the SSVF program which did not exist here then. AMCAB is also the HARA for a ten county merged area within the 15 U.P. counties and has administered the Emergency Solutions Grant here since October 2014 when the SSVF grant also began. There is no MI-524 CoC which populated the Grantee Worksheet. Neither the Marquette-Alger CoC nor the U.P. Housing Stabilization Committee have used the Gap Analysis Tool. In preparing that tool, it was also not possible to separate the 13 counties being served by AMCAB's SSVF program from the remaining counties in MI-500 Balance of State. The following numbers are not based on projected numbers for MI-513 or our portion of MI-500 as we can not input those numbers into the GAP Analysis Tool worksheets.

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:	160
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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):	7	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:	16	10	26
Of number above, how many will also be counted as chronically homeless:	10	4	14

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?	No
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?	No
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 total 2014 PIT Count of Homeless veterans for MI-513 (Marquette and Alger Counties) and the remaining 13 U.P. counties being served by the SSVF grant (a portion of MI-500) was only 16. Yet, to date we have served 105 veterans, 49 of whom were Rapid Rehousing. Of those 49 literally homeless veterans, only six were identified and referred by the COCs we serve. The rest were referred by the VAMC, individual VSOs, the Department of Human Services or other community agencies that are not part of the CoC. Many of them found our program through flyers we distributed at veteran's service organizations and in public spaces. Many just walked in off the street to get assistance with housing and identified themselves as veterans in our screening process. For both Rapid Rehousing and Prevention cases, we conduct same day intake and eligibility screening and we can usually start providing services within 2 days. Most of the RRH veterans were housed within one week and the longest a veteran had to wait was 60 days. We anticipate that we will serve the 200 veterans we projected to serve this fiscal year and we anticipate that we will have adequate Temporary Financial Assistance to serve all the Prevention and RRH veterans who seek our assistance. Functional zero in this part of the country means zero because by October 1 no one can survive here unsheltered. The network of veteran service providers in the U.P. is thin and we all know each other. We practice daily the philosophy of "No wrong door" for a veteran. A veteran in need can approach anyone affiliated with the VA, SSVF, any VSO or Trust Fund agent, or any Legion VFW, AMVETS or VVA member, or any charitable or social service organization, and they will be directed to the person who can help them regardless of their need. While referrals to our ESG program taper off in the springtime as need decreases, we are experiencing an increase in the tempo of referrals to the SSVF program as word of the program and its supports spreads into the more rural areas we serve. We will continue that outreach until every veteran in the U.P. knows that help is only one phone call away.

SSVF: Community Plan Summary

Date Completed/Revised: 9/15/2015

Continuum of Care Name:	Battle Creek/Calhoun County CoC	CoC Number:	MI-514
CoC Representative:	Stacey Hawkings	Title:	CoC Chair
Phone/Email:	(269) 441-5904 smh@summitpointe.org		
Person Completing this Summary:	Robert Nelsen	Title:	SSVF Program Manager VOAMI
Phone/Email:	(517) 899-9419 rnelsen@voami.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:	Battle Creek/Calhoun County CoC MI-508 Veterans Group	
Principal Members	Affiliation	
Robert Nelsen	Volunteers of America Michigan	
Ashley McKee-Thompson	s of America Michigan / Cahloun County Veterans Resource Coal	
Sarah Pauley	Vets Helping Vets	
Tiyanna S. Whitt	HCHV Northern-Tier Supervisor	
Lisa Grenon	HUD-VASH Social Worker/VA	
Paul A Lawson	Homeless Cordination Department VA	
Dwayne Kelly	Peer Support VA	
Jerry Schmidt	Disabled American Veterans (DAV)	
John Paternoster	Battle Creek Housing	
Kristina Higgins	Calhoun County VA	
Jim McDonald	Councouhn County Vet Court / Chief Deputy of Sherrif Dep.	
Ann Tosi	VOAMI HVRP Programs	
Fredrick Reynolds	(PRRTP) Psychosocial Residential Rehabilitation Treatment	
Todd Artist	Veterans In Progress	
	Summit Pointe	

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.

Though we have not begun a meeting specifically for strategizing the community plan, it falls under Calhoun County Veterans Resource Coalition (Veterans Resource Team). During the monthly meeting the group focuses on multiple aspects of Veterans needs including housing. The group includes 20 different agencies/businesses that complete outreach, provide resource referrals, and educate the public about the need for a concentrated effort to ensure Veterans are connected to housing resources within 48 hours of touching homelessness. The list above includes the managers from each of the leading Veteran groups in the CoC who work directly with homeless Veterans. These individuals meet regularly to provide referrals and complete outreach specifically for homelessness. The Calhoun County group will work toward participating in special meeting to address progress toward this plan. Plan will be revisited at the meeting. Meeting will be held either face to face or by conference call. Future meetings will include discussions will include DOM and Jesse House to provide more opportunity to transition Veterans into permanent housing. VIP = 13 beds and Jesse House = 13 beds = 26 GPD/Contract VA beds. These GPD/Contract VA beds will be in the sheltered functional homeless numbers.

Written narrative regarding updates to plan:

A. Has your community identified every Veteran who is homeless right now by name? **Moved from No to Under Development.** Description: The HARA maintains a list of every homeless person and is putting forth more effort to separate the list by category including veterans. The CoC is pushing forth sharing agreements to ensure that agency partners are working closely together to rapidly rehouse homeless including veterans. They are putting efforts but there is still a gap with that information being shared with the programs that serve veterans. We are currently developing a committee within our Calhoun County Resource Coalition team to deal directly with housing/homelessness as a committee where we will review take-down target and placement number.

D. Are sufficient SSVF resources allocated to ensure there are no RRH gaps or turn-aways? **Moved from Under Development to No.** Description: The gap analysis projects 215 homeless Veterans for the year and SSVF projects that as an individual program we do not have

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:	215
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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):	30	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:	26	0	26
Of number above, how many will also be counted as chronically homeless:	9	0	9

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?	Under Dev
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?	No
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.

<p>Strengths:</p> <p>#1 - SSVF programs are providing major outreach efforts which are getting the word out to the community to enhance the message of reaching functional zero homeless by the end of the year. There is no way VA could do this alone without SSVF teams joining forces and leading the outreach efforts.</p> <p>#2 - Calhoun County has a strong community wide goal of serving Veterans. Recent developments include Calhoun County Veterans Resource Coalition (Veterans Resource Team). The leadership team includes SSVF team members.</p> <p>#3 - Calhoun County is rich in resources for Veterans including tangible and financial provisions.</p> <p>#4 - The designated VA hospital for Calhoun County is located in Battle Creek. SSVF staff participate in weekly huddles with VA Homeless staff which increases efficiency of referrals to/from SSVF program.</p> <p>#5 - Battle Creek has 26 contract/GPD beds available to local Veterans.</p> <p>#6 - One strength is our local SSVF providers working with the Department of Labor Homeless Veterans' Reintegration Program (HVRP) to assist homeless Veterans with much needed training and job placement to allow them to be financially stable.</p> <p>#7 - VOAMI has years of experience providing Veteran services in accordance with the performance goals/missions and outcomes of the VA, DOL, and other Veteran-centric programs.</p> <p>Challenges:</p> <p>#1 - The VA hasn't made a strong media effort to spread the message of ending literal homelessness among Veterans by the end of 2015. As a result the community doesn't see the need to end literal homelessness by the end of 2015. The VA has not done enough to share this message. The challenge is that Veterans who don't either encounter a SSVF outreach person, a VA H-PAC staff, or some other Veteran advocate, they will likely be left unaware of the resources/mission available to rehouse homeless Veteran and Veteran families. We are pushing to find every Veteran but without a campaign from the VA there may be Veterans left behind.</p> <p>#2 - Through recent media stories played out in the Battle Creek have created lack of faith in County VA office.</p>
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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.

We meet on a monthly basis. However, we meet with the representative from Ann Arbor VA on a bi-weekly basis. We discuss basic community needs, resources for needs and offer referrals.

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:	30	0	30
Of number above, how many will also be counted as chronically homeless:	12	0	12

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?	No
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?	No
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 strengths are offering intensive case management, which leads to veterans remaining self-sufficient once they are housed. Another strength is having sufficient amount of SSVF funds available to support our veterans. We also have a good collaboration among our COC members to ensure veterans have the proper resources. A challenge for SSVF clients is that veterans who are dishonorably discharged do not qualify for the program. Another challenge is the Fair Market Rent in Monroe County, which is considerably high for this county. It makes it difficult for veterans to find housing that is under the FMR.

SSVF: Community Plan Summary

Date Completed/Revised: 9/15/2015

Continuum of Care Name:	Norton Shores/Muskegon City & County CoC	CoC Number:	MI-516
CoC Representative:	Virginia Taylor	Title:	CoC Chair
Phone/Email:	(231) 728-3117 virginia@communityencompass.org		
Person Completing this Summary:	Robert Nelsen	Title:	SSVF Program Manager VOAMI
Phone/Email:	(517) 899-9419 rnelsen@voami.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:	Norton Shores/Muskegon City & County CoC MI-516 Veterans Group	
Principal Members	Affiliation	
Robert Nelsen	Volunteers of America Michigan	
Andrea Thomas	Volunteers of America Michigan	
Amanda Sobel Goodblood	HUD-VSH Social Worker/VA	
Paul A Lawson	Homeless Coordination Department VA	
Reginald Howard	Peer Support Specialist	
David Eling	Muskegon County Department of Veteran Affairs	
Lisa Fluery	VOAMI HVRP Programs	
Danielle McCann	H-PAC VA	
Cozy Thomas	Community EnCompass	
Virginia Taylor	CoC Chair	
Will Wilson	Disability Network	
Pastor Joe Gaily	Rescue Mission (men's division)	
Pastor Pierce Berry	Rescue Mission (men's division)	
Yolanda Hall	Rescue Mission (women's shelter)	
Matthew Kaley	Love In The Name of Christ	
Michael Ramsey	Muskegon Outreach Team	
Bruce Cafabaugh	MSHDA (AmeriCorps)	

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.

Though we have not begun a meeting specifically for strategizing the community plan, the staff work closely at the same facility to immediately serve any Veterans or Veterans families that they contact. In addition to being in the premiere location for encountering Veterans who may be homeless, Muskegon staff additionally participate in regular outreach throughout Muskegon County. They provide resource referrals and educate the public about the need for a concentrated effort to ensure Veterans are connected to housing resources within 48 hours of touching homelessness. Efforts to facilitate regular monthly meeting are being planned. Community plan will be revisited at the meeting. Meeting will be held either face to face or by conference call.

Muskegon County has contract residential units including 4 Veteran family units and 4 units for single Veterans. These VA beds will be used in the sheltered PIT number below for functional zero count.

Written narrative regarding updates to plan:

D. Are sufficient SSVF resources allocated to ensure there are no RRH gaps or turn-aways? **Moved from No to No.** Description: The gap analysis projects 68 homeless Veterans for the year, and SSVF projects that, as an individual program, we do not have the capacity alone to serve the demand for the Norton Shores/Muskegon County territories and CoC's. SSVF has the capacity to serve 26 individual Veterans in the aforementioned territories. Though we look to have a gap in provision for homeless individuals, this does not take into account the available vouchers shared between HUD-VASH, GPD, ESG, and other PSH voucher programs. Additionally, other resources exist, including resources for recently incarcerated Veterans which help to reduce the existing gap.

Subsidized units for those who are not seniors and/or disabled have long wait lists which leads to unavailability of housing stock that will accommodate severe barriers including criminal history, substance abuse, mental illness, and zero income. Lack of these housing resources impacts the gap that SSVF must fill. No available transitional housing for veterans and their families and the only Muskegon family shelter (Family Promise) has a waiting list which doesn't accommodate unless there are vacancies (vacancies are rare). Local shelters for women only

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:	68
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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):	30	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:	8	0	8
Of number above, how many will also be counted as chronically homeless:	3	0	3

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?	No
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.

<p>Strengths:</p> <p>#1 - SSVF programs are providing major outreach efforts which are getting the word out to the community to enhance the message of reaching functional zero homeless by the end of the year. There is no way VA could do this alone without SSVF teams joining forces and leading the outreach efforts.</p> <p>#2 - Muskegon County residents provide tax millage for Veteran services which makes available other resources to Muskegon County outside of typical provisions provided in other CoCs in which we serve.</p> <p>#3 - Strong participation by community in quarterly CoC meetings. Results have demonstrated rapid response to housing needs of community members including Veterans. CoC utilizes Case Coordination for difficult cases which ensures that all needs of the homeless individual are met.</p> <p>#4 - VOAMI SSVF staff is housed Muskegon County Dep. of Vet Affairs office located in downtown Muskegon. Location is easily accessible by car, public transportation, and foot. The location is within walking distance from Muskegon's Rescue Mission.</p> <p>#5 - SSVF staff is involved with Muskegon Outreach team to locate, identify, and respond to the needs of the homeless in Muskegon County. Muskegon Outreach Team leads annual PIT counts. Group will perform additional summer PIT count to have a more accurate PIT count number for 2015.</p> <p>#6 - Muskegon has 4 Veteran family units and 4 units for single Veterans available to local Veterans as contract VA beds. Numbers will be included in functional zero rates for year.</p> <p>#7 - One strength is our local SSVF providers working with the Department of Labor Homeless Veterans' Reintegration Program (HVRP) to assist homeless Veterans with much needed training and job placement to allow them to be financially stable.</p> <p>#8 - VOAMI has years of experience providing Veteran services in accordance with the performance goals/missions and outcomes of the VA, DOL, and other Veteran-centric programs.</p> <p>Challenges:</p> <p>#1 - The VA hasn't made a strong media effort to spread the message of ending literal homelessness among Veterans by the end of 2015. As a result the community doesn't see the need to end literal homelessness by the end of 2015. The VA has not done enough to share this message. The challenge is that Veterans who don't either encounter a SSVF outreach person, a VA staff, or some other Veteran advocate, they will likely be left unaware of the resources/mission available to rehouse homeless Veteran and Veteran families. We are pushing to find every Veteran but without a campaign from the VA there may be Veterans left behind.</p> <p>#2 - Muskegon CBOC is located off of the typical public transportation rout which complicates and increases the transfer time needed to arrive. Additionally, most major medical requires Veterans to travel far out of their community. Long travel negatively impacts the Veteran's connection with the VA.</p>

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.

Our CoC meets on a monthly basis. At our April meeting we created a committee to work on our plan to end Veteran homelessness. Our committee has communicated by email over the last couple Months. Our CoC has been discussing and recruiting members that we feel are missing from the CoC membership that can assist residents of our community. This includes landlords, property managers, our local housing authority and other government agencies and officials. We have invited those potential new members to attend our meeting. We just had our County Treasurer say she would consider joining and we did have two new members at our last meeting. Our CoC has been charged with creating a master list of veterans known to be homeless, and will continuously update this list, and we will ensure that all providers and partners are on the same page and have a clear set of people that need housing. Our list has been started by our SSVF Staff, and two other agencies have given us their names including the VAMC. At our last meeting we discussed how we will work the release so we can finalize our Veteran list in the next 30 days. This last quarter we worked the fairs, did outreach at campgrounds, talked with the hospitals as a start to a more aggressive outreach community plan to find those literally homeless veterans. We have a centralized intake system with skilled intake specialist, who screen callers based on their immediate need to make appropriate referrals. Our CoC recognizes that individuals need access to appropriate shelter facilities and comprehensive services which facilitates their journey from homeless to permanent housing and SSVF and the VA play a key role in this process. In our community we are learning how we can better integrate services that are needed by our clients to help them sustain. We have been discussing if it is possible to do a shared release among agencies which is still in discussion at this point. A goal we have is to improve on how we help connect our clients to networks in the community and community resources, income assistance, employment training, substance abuse and mental health treatment, transportation, etc. A new collaboration called Financial Stability Coalition has been formed and will assist with this task. On September 9, 2015 CAA hosted a forum where agencies who provide services to Veterans were invited to come,

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:	40
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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):	30	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:	2	0	2
Of number above, how many will also be counted as chronically homeless:	2	0	2

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?	Under Dev
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.

Strengths:

#1 - SSVF programs are providing major outreach efforts which is getting the word out to the community to enhance the message of reaching functional zero homeless by the end of the year. There is no way VA could do this alone without SSVF teams joining forces and leading the outreach efforts.

#2 - Jackson County has one of, if not the largest concentrations of correctional facilities or jails within Michigan. According to DOL website, VA disability compensation payments are reduced if a Veteran is convicted of a felony and imprisoned for more than 60 days. Veterans rated 20 percent or more are limited to the 10 percent disability rate. For a Veteran whose disability rating is 10 percent, the payment is reduced by one-half (<http://benefits.va.gov/PERSONA/veteran-incarcerated.asp>). This reduction of income, along with secondary consequences from the offense, will amplify the likelihood of homeless for Veterans upon exit from jail or prison. These Veterans who discharge from jail or prison would lean heavily on SSVF programs for rehousing.

#3 - We have VASH vouchers available according to the VAMC.

Challenges:

#1 - The challenge is that Veterans who don't either encounter a SSVF outreach person, a VA H-PAC staff, VAMC, or some other Veteran advocate, they will likely be left unaware of the resources/mission available to rehouse homeless Veteran and Veteran families. We are pushing to find every Veteran and think a campaign from the VA would be helpful to avoid any Veterans left behind.

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.

Livingston County's CoC meets on a monthly basis and includes non-veteran specific organizations. OLHSA also has continuous, as needed, contact with the Livingston County Veterans Affairs office. Their location is conveniently located within the same building as OLHSA, allowing for continuous contact with the local VA Office. We are currently proposing more structured meetings on a regular basis with those agencies/organizations listed above (those who are invested primarily in ending homelessness among veterans). When we collaborate and meet with those listed above, we discuss the following: any new resources for veterans in the community; referrals; shared clients and the plans and outcomes to best serve the clients; outreach strategies; HUD-VASH procedures and referrals; and ways we can internally collaborate more effectively within both organizations (OLHSA and Livingston County VA). As an example, we exchange screening/referral forms which are readily accessible for clients in both organizations, and we discuss the need for ROI's in order to coordinate the necessary paperwork for veterans who may be eligible for benefits. We also review guidelines of the agencies' existing requirements and note any program changes that were made since the last meeting such as in the program guidelines and available funding.

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:	18
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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):	21	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:	6	2	8
Of number above, how many will also be counted as chronically homeless:	2	1	3

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?	Under Dev
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?	No
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?	No
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.

Strengths: Good coordinated assessments between local human resources and state agencies; fast turnover/shorter wait time for getting veterans rapidly re-housed who are literally homeless or in shelter (usually no longer than 2-3 weeks). Case managers provide guidance and assistance in the following arenas: assessing and following up on other basic human needs of the veterans; entering all homeless and potentially homeless veterans into HMIS; strongly advocating for their clients (for example, explaining the SSVF program to landlords and having landlords waive application fees, late fees, etc.); providing strong coordinated assessment with local VA's. Another strength to HMIS is FacsPro, a database system, used by OLHSA. As a community action agency, we are able to assess the veteran in 12 other domains determined to move individuals towards self-sufficiency.

Challenges: There is a need for better coordinated assessments with other resources for veterans who are facing barriers and have needs other than housing assistance such as substance abuse and emotional/cognitive/mental concerns; there is a need for a more convenient/structured referral process for linking veterans to permanent housing options such as HUD-VASH; and there is a need for a better coordinated assessment/sharing agreement in HMIS between other SSVF grantees to make the referral process between agencies more efficient. Also, we have created a master list of current homeless veterans in Livingston County. Challenges in completing this include: There being no general population shelter in Livingston County, therefore the majority of homeless veterans in this county end up "couch-surfing", which does not allow them to be categorized as literally homeless; Staff not being fully trained to recognize the intensity of some of the disabilities these veterans have, such as TBI or PTSD; The length of time it sometimes takes the veteran and the landlord to completely fill out and return all the necessary paperwork is not timely, which tends to prolong the length of time they are homeless.

SSVF: Community Plan Summary

Date Completed/Revised: 4/25/2015

Continuum of Care Name:	Eaton County CoC	CoC Number:	MI-523
CoC Representative:	Denise M. Dunn	Title:	Vice Chairperson (Chair is out on maternity leave)
Phone/Email:	517-541-1180 ddunn@hs-mm.org		
Person Completing this Summary:	Denise M. Dunn	Title:	Executive Director
Phone/Email:	517-541-1180 ddunn@hs-mm.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: Eaton County Continuum of Care	
Principal Members	Affiliation
Jessica Edel	SIREN/Eaton Shelter
Pam Elise and Misty Fogg	Capital Area Community Services
Claudine Williams	Eaton County Veterans Services
Denise Palmer	McKinney Vento Coordinator
Nicole Shannon	Legal Services of South Central Michigan
Wayne Ridge	Eaton County Commissioner
Don Hooker and Hannah Gottschauk	Salvation Army
Sophia Estrada-Ferreria	Gateway Youth Shelter
Richard Madigan	Michigan Coalition Against Homelessness (HMIS)
Sandy Cook-Lass	Community Mental Health
Kelly Scanlon	Peckham Industries
Nichole Beard	Tri-County Office on Aging
Susan Peters	Barry/Eaton Health Dept
Debbie Martin	Clinton/Eaton Dept of Human Services
Stacy Dent	Eaton RESA
Joni Risner	Eaton United Way
Rev. Tom Jones	faith based community
Marissa Boerman	True North

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.

This group meets monthly on the second Monday. The following items are standing reports, HMIS- data on the homeless including Veterans, housing updates, strategies and grants committee work, and continuous quality improvement (CQI) task group work. Additionally, all grant oversight is reviewed by this group, and all new initiatives get discussed at this meeting. New grant applications are approved, grant funding allocations are decided, gaps analysis are discussed, and recommendations are made.

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:	12
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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):	30	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:	5	2	7
Of number above, how many will also be counted as chronically homeless:	2	1	3

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?	No
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.

This community has been working together for a number of years to end homelessness all together. It wrote a 10 year plan 7 years ago and is in the midst of reviewing it and adding new action steps. Homeless Veterans have always been a part of the overall plan. Strengths: very cooperative, collaborative group; many agencies attending on a regular basis; funding to devote just to the Veteran population; a single point of entry has been running for the past 3 years and has a well-developed referral process to the SSVF program; an MOU was drafted and supported by the CoC to provide additional case management support to the homeless clients, including Veterans, who must leave Eaton County to seek shelter in a large urban area so that these individuals can be case managed and returned to Eaton County when housing is identified; a good working relationship with the local Veterans Affairs office and the County office; a good working relationship with the Battle Creek VA Hospital; a connection to the Michigan State Housing Authority's homeless voucher program which offers rental subsidy beyond the limited HUD-Vash vouchers with a specific protocol to get the homeless Veteran fast tracked to the voucher; a connection to the HUD-Vash case managers in the area; and agreed upon processes that homeless people are to be Rapidly-rehoused.

Challenges: Not enough shelter beds for singles so singles must go into the urban shelter system; transportation-rural transportation is very limited; limited vouchers - both MSHDA- which will be filled soon and HUD-VASH- Eaton County does not have any dedicated HUD-VASH vouchers; the limitation of SSVF- not being able to assist those who are over the 50% AMI, but who are homeless, and the long waiting periods to receive DD-214's; and finally identifying a very proud group of people.