DEPARTMENT OF VETERANS AFFAIRS FISHER HOUSES AND OTHER TEMPORARY LODGING

1. REASON FOR ISSUE: This Veterans Health Administration (VHA) directive states policy for the provision of temporary lodging at Department of Veterans Affairs (VA) Fisher Houses and other temporary lodging.

2. SUMMARY OF MAJOR CHANGES: This revised VHA directive:

   a. Provides clarification related to temporary lodging referrals for Veterans and Service members following an outpatient procedure requiring anesthesia as outlined in VHA Directive 1073(1), Moderate Sedation by Non-Anesthesia Providers, dated December 20, 2022. See Appendix A.

   b. Provides clarification on VA Fisher House and other temporary lodging eligibility for Veterans and Service members receiving an episode of care in the community that is funded and coordinated by a VA medical facility. See Appendix A. See the link to the Office of Community Care Field Guidebook at: https://dvagov.sharepoint.com/sites/VHAOCC/CNM/CI/OCCFGB/SitePages/FGB.aspx?OR=Teams-HL&CT=1633456991670. **NOTE:** This is an internal VA website that is not available to the public.

3. RELATED ISSUES: None.

4. RESPONSIBLE OFFICE: The Executive Director, Care Management and Social Work Services (12CMSW), Office of Patient Care Services, is responsible for the content of this directive. Questions may be addressed to the National Social Work program, vha12cmswcaremgmtswsection@va.gov.


6. RECERTIFICATION: This VHA directive is scheduled for recertification on or before the last working day of October 2028. This VHA directive will continue to serve as national VHA policy until it is recertified or rescinded.
BY DIRECTION OF THE OFFICE OF THE
UNDER SECRETARY FOR HEALTH:

/s/ M. Christopher Saslo
DNS, ARNP-BC, FAANP
Assistant Under Secretary for Health
for Patient Care Services/CNO

DISTRIBUTION: Emailed to the VHA Publications Distribution List on October 23, 2023.

NOTE: All references herein to VA and VHA documents incorporate by reference subsequent VA and VHA documents on the same or similar subject matter.
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APPENDIX B
REFERRAL AND CRITERIA FOR VA FISHER HOUSE ACCOMMODATIONS........ B-1
1. PURPOSE

This Veterans Health Administration (VHA) directive states policy for the provision of accommodations at Department of Veterans Affairs (VA) Fisher Houses and other temporary lodging. Temporary lodging may be provided to accompanying individuals of Veterans or as noted below, certain Service members who are undergoing an episode of care. A Veteran or Service member may be accommodated in VA Fisher Houses with their accompanying individuals (e.g., relatives, close friends or caregivers) only in limited circumstances of immediate need when no alternative temporary lodging is available. **AUTHORITY:** 38 U.S.C. § 1708; 38 C.F.R. part 60.

2. BACKGROUND

a. VA is authorized under 38 U.S.C. § 1708 to furnish temporary lodging in a Fisher House or other temporary lodging to eligible individuals in connection with the examination, treatment or care of a Veteran. There are currently active duty Service members who receive care at VA facilities under the authority of 38 U.S.C. § 8111. Under these circumstances we provide lodging in the same manner that lodging is provided for Veterans and their accompanying individuals. Service members would be subject to the same rules as Veterans, and they would be required to meet the same eligibility requirements concerning episodes of care, authorized under 77 Fed. Reg. at 15651. The Fisher House Foundation, a charitable organization under 26 U.S.C. § 501(c)(3), was created in 1990 by Zachary and Elizabeth Fisher. The Fisher House Foundation constructs Fisher Houses and donates them to the Department of Defense (DoD) and VA for use by families of patients hospitalized in military and VA medical facilities. The Fisher House Foundation requires that all Fisher Houses be used to provide temporary accommodations to the accompanying individuals of Veterans and Service members who require accommodations due to Veterans or Service members receiving health care from VA or DoD.

b. The VA Fisher House Program is coordinated by the VA National Fisher House and Family Hospitality Program Manager, in Care Management and Social Work (CMSW). Coordination includes oversight of the selection, construction and operation of all VA Fisher Houses; regular communication with VA medical facility Fisher House Managers; and liaison with the Fisher House Foundation, the DoD Fisher House Program and community stakeholders.

c. Temporary lodging is granted on a space-available basis, with some consideration given to the compatibility of the applicants and the accommodations available. For example, VA may require an applicant to share a room with another Veteran or Service member’s accompanying individual, but only if the persons affected are the same self-identified gender. 38 C.F.R. § 60.15(b)(2). **NOTE:** VA does not impose a general limit on the number of persons who may accompany a Veteran or Service member, but VA
may in specific cases provide lodging to only a specific number of persons due to space or resource limitations.

d. All costs associated with VA-provided temporary lodging of eligible Veterans and accompanying individuals are borne by VA and not the Veteran, Service member or accompanying individual. 38 C.F.R. § 60.15(c).

3. DEFINITIONS

a. **Accompanying Individual.** An accompanying individual of the Veteran or Service member is an individual over the age of 18 seeking Fisher House or other temporary lodging, who provides familial support, or the equivalent of familial support, to a Veteran or Service member while the Veteran or Service member is experiencing an episode of care. An accompanying individual includes relatives, close friends or caregivers.

b. **Compensation and Pension Examination.** A Compensation and Pension (C&P) examination is an examination requested by the Veterans Benefits Administration to be conducted at a VA medical facility for the purpose of evaluating a Veteran’s claims.

c. **Episode of Care.** An episode of care is a course of outpatient treatment or a period of hospitalization during which a Veteran or Service member receives health care under 38 U.S.C. Chapter 17, or 38 U.S.C. §§ 8111 or 8153. Examples of episodes of care include but are not limited to the following:

   (1) An appointment at a VA medical facility to receive health care or a C&P examination.

   (2) Extended outpatient treatment, such as treatment associated with organ transplant, chemotherapy or radiation.

   (3) Hospitalization for injury or illness; where death is imminent; or where a Veteran is unable to make medical decisions for himself/herself and the accompanying individual is authorized to make medical decisions on the Veteran’s behalf.

   (4) Care in the community that is funded and coordinated by a VA medical facility.

   d. **Other Temporary Lodging.** Other temporary lodging includes:

      (1) Lodging at a temporary lodging facility, other than a VA Fisher House, located at a VA medical facility (generally referred to as a “Hoptel”).

      (2) A hotel or motel.

      (3) Non-utilized beds at a VA medical facility designated as lodging beds.

      (4) Other donated lodging to be used on a temporary basis in accordance with 38 U.S.C. § 1708.
e. **VA Fisher House.** VA Fisher House is a temporary lodging facility that is located at or near a VA medical facility and constructed by and donated to VA by the Fisher House Foundation, or a facility that is treated as if it were Fisher House lodging under 38 C.F.R. § 60.3.

4. **POLICY**

It is VHA policy that while a Veteran or Service member is undergoing an episode of care VA may provide the Veteran and their accompanying individual(s), family member or caregiver with temporary lodging at either Fisher House or other temporary lodging in accordance with 38 U.S.C. § 1708, 38 C.F.R. part 60, 77 Fed. Reg. at 15651.

5. **RESPONSIBILITIES**

a. **Under Secretary for Health.** The Under Secretary for Health is responsible for:

   (1) Ensuring overall VHA compliance with this directive.

   (2) Concurring on a list of recommended sites for new Fisher House locations and forwarding to the Secretary of Veterans Affairs for approval.

b. **Assistant Under Secretary for Health for Patient Care Services.** The Assistant Under Secretary for Health for Patient Care Services is responsible for supporting CMSW with implementation and oversight of this directive.

c. **Assistant Under Secretary for Health for Operations.** The Assistant Under Secretary for Health for Operations is responsible for:

   (1) Communicating the contents of this directive to each of the Veterans Integrated Services Networks (VISNs).

   (2) Assisting VISN Directors to resolve implementation and compliance challenges in all VA medical facilities within that VISN.

   (3) Providing oversight of VISNs to ensure compliance with this directive and its effectiveness.

   (4) Conducting a joint review of VA Fisher House applications with the VA National Fisher House and Family Hospitality Program Manager to ensure that the proposed VA medical facility meets criteria for Fisher House construction. **NOTE: See paragraph 8 for additional information.**

   (5) Providing a list of VA-recommended sites to the Fisher House Foundation upon approval from the Secretary of Veterans Affairs and receiving notification of selections from the Fisher House Foundation.
(6) Selecting and coordinating Fisher House dedication ceremony participants in collaboration with the VA National Fisher House and Family Hospitality Program Manager.

d. **Executive Director, Care Management and Social Work.** The Executive Director, CMSW is responsible for:

   (1) Providing oversight of VISN and VA medical facility compliance with this directive and ensuring corrective action is taken when noncompliance is identified. This includes addressing noncompliance issues with VISN Directors and VA medical facility Directors and providing guidance to resolve noncompliance issues.

   (2) Updating this directive and all VHA-wide communication which supports implementation of this directive.

e. **VA National Fisher House and Family Hospitality Program Manager.** The VA National Fisher House and Family Hospitality Program Manager serves as a liaison to the Fisher House Foundation and is responsible for:

   (1) Overseeing the VA Fisher House Program and its compliance with this directive by providing VA medical facility leadership, VISN and Executive Directors and CMSW leadership with direct consultation on directive implementation and on the development of VA medical facility corrective action plans.

   (2) Consolidating monthly Fisher House program metrics (e.g., costs, utilization and operation) and submitting a National Fisher House program monthly report to the Fisher House Foundation.

   (3) Providing guidance to VA medical facility Fisher House Program Managers on Fisher House program eligibility, operational issues and guidelines for community engagement.

   (4) Coordinating with the Fisher House Foundation and VA Office of Construction and Facilities Management to identify new Fisher House sites and facilitate construction planning.

   (5) Notifying the VA medical facility Director of a selection for a Fisher House and requesting identification of a VA medical facility staff member who will serve as the VA medical facility Fisher House construction Point of Contact (POC) for the duration of development of the project when a new Fisher House location has formally been determined.

   (6) Conducting a joint review with the Assistant Under Secretary for Health for Operations of applications from VA medical facility Directors for a VA Fisher House site to ensure the proposed VA medical facility meets criteria for Fisher House construction. **NOTE:** See paragraph 8 for additional information.
(7) Facilitating a call for Fisher House applications, including final review and recommendation of priority sites for future Fisher House construction for consideration by the Secretary of Veterans Affairs.

(8) Selecting and coordinating Fisher House dedication ceremony participants in collaboration with the Assistant Under Secretary for Health for Operations.

f. **Veterans Integrated Services Network Director.** The VISN Director is responsible for:

1. Ensuring all VA medical facilities within the VISN comply with this directive and informing leadership when barriers to compliance are identified.

2. Reviewing and endorsing the VA medical facility Director’s application for a potential VA Fisher House site and submitting the endorsed applications to the National Fisher House Program for consideration.

g. **VA Medical Facility Director.** The VA medical facility Director is responsible for:

1. Ensuring overall VA medical facility compliance with this directive and taking appropriate corrective action if noncompliance is identified.

2. Ensuring that temporary lodging is provided to eligible Veterans and Service members, as well as accompanying individuals, as space and funding allow in accordance with this directive.

3. Establishing processes for provision of emergency medical care for Veterans, Service members and accompanying individuals staying in temporary lodging on VA grounds.

4. Establishing a written local process for the VA medical facility’s temporary lodging programs and ensuring all VA medical facility staff are familiar with the process. **NOTE:** The local process must include eligibility and other criteria specified in Appendices A and B.

5. Determining whether to utilize unused VA medical facility beds or rooms for temporary lodging. **NOTE:** Utilizing unused VA medical facility beds or rooms for temporary lodging must not have a negative impact on the provision of patient care, such as creating a waiting list for inpatient admissions.

6. Ensuring the VA medical facility Temporary Lodging Program Coordinator or VA medical facility Fisher House Manager, when making decisions regarding temporary lodging, is incorporating the VA health care provider’s assessment of the Veteran’s or Service member’s medical stability and ability to provide self-care in an unsupervised lodging setting.

7. Ensuring that domiciliary (Mental Health Residential Rehabilitation Treatment Program (MH RRTP)) beds or other forms of residential treatment or transitional
housing (i.e., community-based homeless programs) are not used for temporary lodging. **NOTE:** MH RRTPs are active treatment programs for admission with 24/7 supervision to support comprehensive bio-psychosocial treatment.

(8) Ensuring that an electronic health record (EHR) consult is entered by a VA medical facility health care provider to request temporary lodging and VA Fisher House accommodations.

(9) Overseeing the operation and maintenance of the VA Fisher House, including reviewing monthly, quarterly and annual reports on costs, utilization and operation submitted by the VA Medical Facility Fisher House Manager.

(10) Securing funding and ensuring completion of site preparation for new Fisher House construction.

(11) Ensuring that the Fisher House program is included in the VA medical facility operations budget.

(12) Funding travel for the VA medical facility Fisher House Manager or local VA Fisher House Staff designee to attend the annual VA-DoD Fisher House Manager’s Training sponsored by the Fisher House Foundation.

(13) Ensuring that funding provided to the VA medical facility for the purpose of VA Fisher House refurbishment is fully utilized within that fiscal year.

(14) Staffing the VA Fisher House with a full-time manager (i.e., VA medical facility Fisher House Manager) and adequate support staff to maximize the availability of the VA Fisher House, including evenings, weekends and holidays. Support staff includes a full-time Assistant Manager(s), full-time Program Support Assistant(s) and full-time dedicated housekeeping staff. **NOTE:** VA Fisher House support staff requirements are contingent upon the size and occupancy rates of the Fisher House. See paragraphs 7.b.(4) and 9.c. for additional information.

(15) Ensuring routine upkeep of the VA Fisher House, including 24/7 VA medical facility staff availability for emergency repairs and housekeeping.

(16) Designating a VA medical facility staff member who will serve as the VA medical facility Fisher House construction POC for the planning, land acquisition (if required), construction and opening phases of the Fisher House project. **NOTE:** See paragraph 5.k. for more responsibilities for the VA medical facility Fisher House construction POC.

(17) Making an exception to eligibility for a temporary lodging applicant (a Veteran, Service member or accompanying individual) which may be granted based on exceptional circumstances, such as condition of the Veteran or Service member, inclement weather, road conditions or the mode of transportation used by the Veteran or Service member. **NOTE:** See Appendix A, paragraph 1(a)(3).
(18) Drafting a statement of commitment to provide operational costs, including all utilities, staffing and maintenance of the structure when applying for a new Fisher House.

(19) Writing a brief description when applying for a Fisher House of the patient treatment programs offered at the VA medical facility that are expected to be the primary programs referring patients to that Fisher House.

h. VA Medical Facility Chief of Center for Development and Civic Engagement. 
NOTE: This responsibility is sometimes designated as the VA medical facility Chief of Voluntary Service. The VA medical facility Chief of Center for Development and Civic Engagement is responsible for providing letters of endorsement for their VA medical facility when the VA medical facility submits an application to build a new Fisher House at their location.

i. VA Medical Facility Temporary Lodging Program Coordinator. The VA medical facility Temporary Lodging Program Coordinator or other staff overseeing temporary lodging programs other than a Fisher House are responsible for:

(1) Ensuring temporary lodging facilities on VA grounds are safe, clean and free from hazards.

(2) Receiving and reviewing temporary lodging consults to determine eligibility.

(3) Orienting guests (all Veterans, Service members and accompanying individuals receiving lodging) to the lodging facility within 24 hours of arrival, including fire and safety information and who to call in an emergency.

(4) Ensuring guest privacy in the temporary lodging facility.

(5) Completing monthly lodging reports and sharing with VA medical facility leadership and the Fisher House and Family Hospitality Program Manager.

(6) Consulting with the local Disruptive Behavior Committee for any Veteran with a Category 1 Patient Record Flag and requesting re-evaluation from the VA health care provider to determine if temporary lodging accommodations are appropriate for the Veteran or Service member. NOTE: See Appendix A. Granting or denying access to a Fisher House is determined by the VA medical facility Temporary Lodging Program Coordinator, not the Disruptive Behavior Committee.

(7) Consulting with the Behavioral Health Team or Suicide Prevention Coordinator and requesting re-evaluation to determine if temporary lodging accommodations are appropriate for any Veteran with a Suicide Risk Flag. See Appendix A.

(8) Incorporating into decisions concerning temporary lodging the VA health care provider’s assessment of the Veteran’s or Service member’s medical stability and ability to provide self-care in an unsupervised setting.
j. **VA Medical Facility Fisher House Manager.** The VA medical facility Fisher House manager is responsible for:

(1) Overseeing daily operations of the VA Fisher House, including accepting and processing applications for accommodations, arranging for lodging stays, orientation of VA Fisher House guests, tracking utilization, budgeting and operating costs, preparing reports for the VA Fisher House Program and for the Fisher House Foundation, and supervising employees, volunteers and students working in the VA Fisher House.

(2) Completing and submitting monthly, quarterly and annual reports on costs, utilization and operation of the VA Fisher House to VA medical facility Director, the Fisher House Foundation and to the VA National Fisher House and Family Hospitality Program Manager.

(3) Ensuring the VA Fisher House is safe, clean and free from hazards, including adequate housekeeping and maintenance of the facility.

(4) Ensuring guests accommodated in VA Fisher Houses within 24 hours of arrival receive orientation to the facility, including fire and safety information and who to call in an emergency.

(5) Reviewing the appropriate Temporary Lodging consult template in the EHR and determining eligibility for applicants. **NOTE:** See Appendix A for additional information.

(6) Reviewing the appropriate Fisher House consult template in the EHR and determining eligibility for applicants. **NOTE:** See Appendix B for additional information.

(7) Incorporating into decisions concerning Fisher House the VA health care provider’s assessment of the Veteran’s or Service member’s medical stability and ability to provide self-care in an unsupervised Fisher House setting.

k. **VA Medical Facility Fisher House Construction Point of Contact.** The VA medical facility Fisher House construction POC is responsible for:

(1) Providing routine updates to the VA National Fisher House and Family Hospitality Program Manager describing progress or issues for the building of a new VA Fisher House.

(2) Notifying the VA National Fisher House and Family Hospitality Program Manager of the projected completion date and of the proposed dedication ceremony plans near the completion of the project.

(3) Coordinating with VA Office of Construction and Facilities Management, who facilitates land acquisition services for off-campus homes, to identify potential sites for Fisher House construction and support new Fisher House development through environment and historic compliance and consultation activities for site development.

l. **VA Health Care Providers.** VA health care providers are responsible for:
(1) Evaluating the Veteran or Service member to determine their current medical stability, and ability to provide self-care at the time of temporary lodging or whether they have an accompanying individual who can assist with providing care.

(2) Documenting in the Veteran’s EHR the evaluation of medical stability and ability to provide self-care in an unsupervised setting. **NOTE:** If the VA health care provider is a supervised health professions trainee, the documentation is subject to the provisions of VHA Directive 1400.01, Supervision of Physician, Dental, Optometry, Chiropractic, and Podiatry residents, dated November 7, 2019, or VHA Handbook 1400.04, Supervision of Associated Health Trainees, dated March 19, 2015.

(3) Performing re-evaluations of Category I Behavioral Patient Record Flag or Suicide Risk Flag Veterans or Service members as requested by the VA medical facility. **NOTE:** For more information, see Appendix A.

6. GUIDELINES FOR VA FISHER HOUSE GUESTS

VA Fisher House guests are expected to abide by the rules of the VA Fisher House and all VA medical facility rules and policies. Failure to abide by the VA medical facility and VA Fisher House rules may result in guests being asked to leave the VA Fisher House. VA medical facility and VA Fisher House rules include the following:

a. Non-emergency medical or nursing services will not be provided in the VA Fisher House.

b. Individuals with a communicable disease (e.g., influenza) which may be transmitted through common contact must not be accommodated in a VA Fisher House.

c. No overnight guests, other than registered VA Fisher House guests, are allowed in VA Fisher Houses unless approved by the VA medical facility Fisher House Manager or staff member.

d. All children under the age of 18 must be supervised by an adult family member at all times.

e. Animals are prohibited in VA Fisher Houses, except service dogs, as defined in 38 C.F.R. § 1.218(a)(11) and VHA Directive 1188(1), Animals on Veterans Health Administration (VHA) Property, dated August 26, 2015. **NOTE:** An animal's provision of emotional support, well-being, comfort, or companionship do not constitute work or tasks for the benefit of the individual with a disability and are not considered service dogs. Service dogs in training are not considered service animals.

f. Alcoholic beverages and illegal drugs are prohibited on VA grounds.

g. Weapons and explosives are prohibited on VA grounds.

h. Gambling is prohibited on VA grounds.
i. Soliciting, vending and selling merchandise are prohibited on VA grounds.

j. Sexual misconduct, destroying property and creating a disturbance are prohibited on VA grounds.

k. Smoking is prohibited in VA Fisher Houses and on all VA grounds in accordance with VHA Directive 1085.01, Smoke-free Policy for Employees at VA Health Care Facilities, dated August 8, 2019.

7. SITE SELECTION FOR A VA FISHER HOUSE

a. Periodically, VHA CMSW requests applications for construction of a new VA Fisher House from VA medical facilities through the VISN Director. VHA CMSW applies the selection criteria to the applications received, prioritizes them for review and concurrence by the Secretary of Veterans Affairs, and provides the Fisher House Foundation with a list of proposed sites for new VA Fisher Houses. The final determination for construction of new Fisher Houses is made by the Fisher House Foundation.

b. Information needed before consideration includes:

(1) The availability of at least 1.2 acres of vacant land on which to build. **NOTE:** All site preparation is the responsibility of the VA medical facility.

(2) A full description of the proposed location, including lot size and location in relation to the VA medical facility and the approximate walking time from the proposed site to patient treatment buildings. **NOTE:** Ideally, the proposed site is easily accessible to patient treatment buildings.

(3) A written statement of commitment to provide for the operational costs, including all utilities, staffing and maintenance of the structure is required from each VA medical facility Director.

(4) A written statement of commitment to provide one full-time equivalent employee (FTE) to operate the Fisher House (the Fisher House Manager), and additional staff to support Fisher House operations (Assistant Manager(s), Program Support Assistant(s) and housekeeping staff) is required from each VA medical facility Director.

(5) A brief statement describing patient treatment programs offered at the VA medical facility that are expected to be the primary sources for patients supported by the Fisher House is required from each VA medical facility Director. This statement is to include workload information (e.g., number of unique Veterans, number of outpatient visits, the number of inpatient admissions).

(6) Any special construction issues or planned construction projects that may impact Fisher House construction or needs for the proposed site need to be identified.
(7) Any other significant information that would assist VA in the site selection process.

(8) Letters of endorsement from Veteran Service Organizations (VSOs) and the VA medical facility Chief of Center for Development and Civic Engagement.

(9) Letters of endorsement from community stakeholders, state and Federal officials.

(10) A description of any state grants or local financial and/or volunteer support for initial funding, as well as for continued operational support.

8. APPLICATION FOR A VA FISHER HOUSE

To apply for a VA Fisher House, the VA medical facility must complete an application (VA Form 10-0408, VHA Fisher House Application) and send it through the respective VISN Director to the Assistant Under Secretary for Health for Operations for review. *NOTE*: VA Form 10-0408 can be found at [https://www.va.gov/vaforms](https://www.va.gov/vaforms).

a. **Elements of the Application.** All applications for VA Fisher Houses must include:

(1) Letters of endorsement from VSOs and the VA medical facility Chief of Center for Development and Civic Engagement.

(2) Letters of endorsement from community leaders and state and Federal officials.

(3) Signature approvals from the VA medical facility and VISN Directors.

(4) Confirmation from the VA medical facility of at least 1.2 acres of land on the VA medical facility campus for VA Fisher House construction; or a detailed plan to acquire land within close proximity of the campus for VA Fisher House construction. The Fisher House Foundation in collaboration with the VA medical facility Director makes the final determination for the location of VA Fisher House construction.

b. **Process.**

(1) The Assistant Under Secretary for Health for Operations and the VA National Fisher House and Family Hospitality Program Manager conduct a joint review of VA Fisher House applications. A list of recommended sites is provided to the Under Secretary for Health for concurrence and forwarded to the Secretary of Veterans Affairs for approval.

(2) Upon approval by the Secretary of Veterans Affairs, the Assistant Under Secretary for Health for Operations provides the list of recommended sites to the Fisher House Foundation. *NOTE*: The final decision on sites for new VA Fisher Houses rests with the Fisher House Foundation.
(3) The Fisher House Foundation confirms its interest in building a VA Fisher House at a particular site to the VA National Fisher House and Family Hospitality Program Manager and the Assistant Under Secretary for Health for Operations.

(4) The Fisher House Foundation provides a proffer with the anticipated time schedule for the construction project.

(5) The VA National Fisher House and Family Hospitality Program Manager notifies the VA medical facility and requests identification of a VA medical facility staff Fisher House construction POC for development of the project.

(6) The VA medical facility staff Fisher House construction POC designated by the VA medical facility Director provides routine updates to the VA National Fisher House and Family Hospitality Program Manager describing progress or issues for the project. Near completion of the project, the VA medical facility staff Fisher House construction POC notifies the VA National Fisher House and Family Hospitality Program Manager of the projected completion date and of the proposed dedication ceremony plans. **NOTE:** The selection and coordination of dedication ceremony participants is determined by the Assistant Under Secretary for Health for Operations, in collaboration with the VA National Fisher House and Family Hospitality Program Manager.

9. OPERATION OF VA FISHER HOUSES

a. Once the Fisher House Foundation donates a Fisher House to VA, the VA medical facility Director is responsible for overseeing the operation and maintenance of the VA Fisher House. It is the expectation of Fisher House Foundation that the VA Fisher House will be maintained in pristine condition. Funding of operation and maintenance is a line item in the VA medical facility budget. Centralized funding is established by VA Central Office for major costs of refurbishing and redecorating VA Fisher Houses and for replacing major appliances. **NOTE:** VA medical facilities with VA Fisher Houses are encouraged to work through the VA medical facility Chief of Center for Development and Civic Engagement in requesting donations from community and Veterans’ groups for such things as comfort items, non-perishable food items, linens and housewares to support the VA Fisher House.

b. No fees may be charged to Veterans, Service members or their accompanying individuals for accommodations in VA Fisher Houses. However, the VA medical facility may accept donations into a General Post Fund established specifically for the purpose of supporting the VA Fisher House. **NOTE:** See VHA Directive 4721, VHA General Post Funds – Gifts and Donations, dated August 13, 2018.

c. **VA Fisher House Staff.** It is the expectation of Fisher House Foundation that the VA Fisher House will be available to serve all eligible individuals in their time of need. Accordingly, Fisher House staffing levels must be sufficient to ensure that the VA Fisher House is always available, including evenings, weekends and holidays to Veterans, Service members and their accompanying individuals when they need accommodations. Exact staffing models for VA Fisher Houses may vary by VA medical
facility; however, staffing decisions must optimize available VA Fisher House resources. Each VA Fisher House is staffed with a full-time VA Fisher House Manager who is a VA employee and has an office located in the VA Fisher House. Additional VA Fisher House staff include Assistant Fisher House Manager(s), housekeeping staff and program support staff. Refer to Diagram 1 below for Fisher House staffing ratios.

d. **Diagram 1: Fisher House Staffing Matrix.** The staffing matrix was developed to identify optimal staffing levels for successful Fisher House operations, and to maximize the availability of the VA Fisher House at all times, including evenings, weekends and holidays. It is the expectation of the National VA Fisher House Program and Fisher House Foundation that the VA Fisher House will be available for Veterans, Service members and their accompanying individuals when they need temporary accommodations. On-site VA Fisher House staff should be established to ensure 24/7 operation. VA Fisher Houses may need to modify housekeeping staffing ratios based upon the volume of VA Fisher House guests and occupancy levels.

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<th>Number of Fisher House Suites</th>
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<th>Fisher House Assistant Manager</th>
<th>Fisher House Program Support Assistant</th>
<th>Fisher House Housekeeping Staff</th>
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</tr>
</tbody>
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10. **TRAINING**

There are no formal training requirements associated with this directive.

11. **RECORDS MANAGEMENT**

All records regardless of format (e.g., paper, electronic, electronic systems) created by this directive must be managed as required by the National Archives and Records Administration (NARA) approved records schedules found in VHA Records Control Schedule 10-1. Questions regarding any aspect of records management should be addressed to the appropriate Records Officer.
12. REFERENCES

a. 28 U.S.C. § 501(c)(3)


c. 38 C.F.R. § 1.218.

d. 38 C.F.R. part 60.

e. 77 Fed. Reg. 15651.


g. VHA Directive 1085.01, Smoke-Free Policy for Employees at the VA Health Care Facilities, dated August 8, 2019.

h. VHA Directive 1188(1), Animals on Veterans Health Administration (VHA) Property, dated August 26, 2015.


j. VHA Directive 1400.01, Supervision of Physician, Dental, Optometry, Chiropractic, and Podiatry residents, dated November 7, 2019.

k. VHA Directive 2012-018(1), Solid Organ and Bone Marrow Transplantation, dated July 9, 2012.


m. VHA Handbook 1400.04, Supervision of Associated Health Trainees, dated March 19, 2015.


 o. Office of Community Care Field Guidebook: https://dvagov.sharepoint.com/sites/VHAOCC/CNM/CI/OCCFGFB/SitePages/FGB.aspx?OR=Teams-HL&CT=1633456991670. **NOTE:** This is an internal VA website that is not available to the public.
TEMPORARY LODGING CRITERIA FOR ELIGIBILITY, DURATION AND THE REFERRAL PROCESS

a. **Eligibility.** The following individuals are eligible to apply to stay in temporary lodging:

(1) A Veteran or Service member experiencing an episode of care, as defined in paragraph 3.c. in the body of this directive.

(a) Veterans or Service members must be determined medically stable, capable of self-care or accompanied by an individual able to provide such care and able to stay in an unsupervised setting. The Department of Veterans Affairs (VA) does not provide nursing or other medical care in temporary lodging facilities, programs or settings.

(b) Veterans or Service members who are receiving post-operative opiate analgesics or have a diagnosis of sleep apnea may not receive overnight accommodations in temporary lodging immediately following a procedure using sedatives and anesthetics. A diagnosis of sleep apnea is not itself a limitation for temporary lodging.

(c) Veterans or Service members may receive overnight accommodations in temporary lodging post-procedure dependent on the sedatives and anesthetics provided as determined by the treating provider in accordance with Veterans Health Administration (VHA) Directive 1073(1), Moderate Sedation by Non-Anesthesia Providers, dated December 20, 2022. The treating provider documents the patient’s current medical stability in the patient’s electronic health record (EHR), including that the patient is capable of self-care in an unsupervised setting.

1. Veterans or Service members with a Category I Behavioral Patient Record Flag in the EHR may be considered for temporary lodging. The Temporary Lodging Program Coordinator must consult with the local Disruptive Behavior Committee who assessed the Veteran or Service member and request their re-evaluation to determine if temporary lodging accommodations are appropriate. **NOTE:** See VHA Directive 2010-053, Patient Record Flags, dated December 3, 2010.

2. Veterans or Service members with a Suicide Risk Flag in the EHR may be considered for temporary lodging accommodations. The Temporary Lodging Program Coordinator must consult with the Behavioral Health Team or Suicide Prevention Coordinator and request re-evaluation to determine if temporary lodging accommodations are appropriate.

(d) A Veteran or Service member cannot stay in the VA Fisher House unless there is an immediate need and there is no alternative temporary lodging and their accompanying individual also stays in the VA Fisher House.

(2) An accompanying individual, as defined in paragraph 3.a. in the body of the directive, of a Veteran or Service member.
(a) An accompanying individual cannot stay in temporary lodging that is not a VA Fisher House, unless the Veteran or Service member is also lodging in the non-VA Fisher House facility.

(b) Minor children may not be accommodated in temporary lodging facilities on VA grounds, except in free standing temporary lodging facilities and VA Fisher Houses. Minor children must be supervised at all times by an adult accompanying individual. VA staff or volunteers are not permitted to provide childcare in VA Fisher Houses or other temporary lodging settings.

(3) An applicant for temporary lodging (a Veteran, Service member or accompanying individual) may not be granted lodging unless they must travel either 50 or more miles or at least 2 hours from their home to the VA medical facility. The VA medical facility Director may make an exception to distance or time provisions based on exceptional circumstances, such as condition of the Veteran or Service member, inclement weather, road conditions or the mode of transportation used by the Veteran or Service member.

(4) Living organ donors participating in the Transplant Program as defined in VHA Directive 2012-018(1), Solid Organ and Bone Marrow Transplantation, dated July 9, 2012, are eligible to stay in Fisher Houses or other temporary lodging subject to the same limitations as a Veteran or Service member. However, all applicable preceding criteria may be waived for individuals who must be present on site for evaluation, donation and care related to their status as an organ donor for a Veteran. Accompanying individuals of these donors may also be provided temporary lodging at all phases of the organ transplant process.

b. **Duration of Temporary Lodging and Other Services.**

(1) Fisher House and other temporary lodging may be provided while the Veteran or Service member is undergoing an episode of care (see paragraph 3.c. in the body of this directive, for example while the Veteran is hospitalized or if the Veteran is admitted to a VA medical facility while undergoing an outpatient episode of care for which temporary lodging was already provided), as extended by the appropriate VA health care provider based on an emergency or unforeseen circumstance, while the Veteran is hospitalized, if the Veteran is admitted to a VA health care facility while undergoing an outpatient episode of care for which temporary lodging was already provided, or for an indefinite period for accompanying individuals who are visiting Veterans hospitalized for an indefinite period, provided that the accompanying individual is not using a VA health care facility bed. Generally:

(a) Temporary lodging may be provided the night before the day of the scheduled care if, the Veteran leaving home after 6:00 a.m. would be unable to arrive at the VA medical facility by the time for the scheduled appointment.

(b) Temporary lodging may be provided the night of the scheduled care, if, after the appointment, the Veteran would be unable to return home before 7:00 p.m.
(2) Temporary lodging may be provided to accompanying individuals for the duration of the episode of care subject to limitations described in this section.

(3) Temporary lodging is not intended to be alternate housing between episodes of care for patients travelling from rural, out-of-state or out-of-country locations.

(4) When non-VA temporary lodging facilities are used, including but not limited to a hotel or motel, VA staff must plan for transportation to and from the VA medical facility for those Veterans or Service members without a means of transportation. Transportation may be made using non-VA resources or VA resources, if the Veteran or Service member is otherwise eligible for such transportation under 38 U.S.C. § 111A. **NOTE:** Making travel arrangements does not involve paying for travel or providing travel, except as authorized by 38 U.S.C. § 111 or 111A.

(5) VA medical facilities may provide meals or vouchers for meals in the Veterans Canteen Service for Veterans staying in temporary lodging. Meals for accompanying individuals staying in temporary lodging are to be at the expense of the family member or caregiver or provided through donated funds in a designated General Post Fund account. **NOTE:** See VHA Directive 4721, VHA General Post Funds – Gifts and Donations, dated August 13, 2018.

c. **Referral Process for Temporary Lodging.**

(1) To receive temporary lodging, a Veteran, Service member or accompanying individual must contact the VA health care provider(s) coordinating the episode of care during which temporary lodging is requested. A VA health care provider managing the episode of care completes the appropriate Temporary Lodging consult template in the EHR. The consult is received and reviewed by the following VA Staff to determine eligibility:

(a) For VA Fisher House lodging, to the VA medical facility Fisher House Manager or staff.

(b) For other temporary lodging, to the VA medical facility Temporary Lodging Program Coordinator or staff.

(2) Requests are generally processed in the order that they are received by VA, and temporary lodging is then granted on a first come, first served basis. However, in extraordinary circumstances, such as imminent death, critical injury or organ donation, applications may be processed out of order. VA will continue to accept VA Form 10-0408A, VHA Fisher House or Other Temporary Lodging Application, dated December 3, 2004, until the updated Federal Regulation is published. **NOTE:** VA Form 10-0408 can be found at [https://www.va.gov/vaforms](https://www.va.gov/vaforms).
REFERRAL AND CRITERIA FOR VA FISHER HOUSE ACCOMMODATIONS

1. REFERRAL FOR VA FISHER HOUSE ACCOMMODATIONS

a. To receive temporary lodging, a Veteran, Service member or accompanying individual must contact a Department of Veterans Affairs (VA) health care provider who is coordinating the related episode of care and request VA Fisher House accommodations. The VA health care provider will complete the electronic consult in the electronic health record (EHR) to request VA Fisher House accommodations for the individual. The VA medical facility Fisher House Manager or staff receives all consults and will review for eligibility.

b. Requests for VA Fisher House accommodations are processed in the order that they are received by VA, and VA Fisher House accommodations are granted on a first-come, first-served basis; however, in extraordinary circumstances, such as imminent death, critical injury or organ donation, request may be processed out of order.

2. CRITERIA FOR ACCOMMODATIONS IN A VA FISHER HOUSE

a. To receive accommodations in a VA Fisher House, the accompanying individual and Service member or Veteran (if also staying at the VA Fisher House) must:

(1) Be medically stable and capable of self-care or be accompanied by a caregiver who is over the age of 18 and is physically and cognitively able to provide necessary care. VA does not provide nursing or other medical care in VA Fisher Houses.

(2) Need to travel 50 or more miles, or at least 2 hours from their home to the VA medical facility. Exceptions to these distance or time provisions may be made based on exceptional circumstances, such as inclement weather, road conditions or the mode of transportation used.

(3) Be able to stay in an unsupervised communal living setting.

(4) Be actively involved in the hospitalized Veteran or Service member’s treatment plan and provide ongoing bedside support or training related to the discharge process during the episode of care.

b. Decisions concerning VA Fisher House accommodations are to be made by the VA medical facility Fisher House Manager. Exceptions to certain eligibility criteria may be made on a case by case basis, if the request aligns with the VA Fisher House program mission. If space is unavailable, referrals for temporary accommodations may be made to the Veteran’s or Service member’s social worker or case manager.

c. VA Fisher Houses are not used to provide temporary or emergency housing to Veterans, Service members or individuals in need of transitional or permanent housing.
d. Veterans or Service members with a Category I Behavioral Patient Record Flag in EHR may be considered for VA Fisher House accommodations. The VA medical facility Fisher House Manager or staff must consult with the local Disruptive Behavior Committee who assessed the Veteran or Service member, and to request their re-evaluation to determine if VA Fisher House accommodations are appropriate. **NOTE:** Granting or denying access to a Fisher House is a VA medical facility Temporary Lodging Program Coordinator determination, not one made by the Disruptive Behavior Committee.

   e. Veterans or Service members with a Suicide Risk Flag may be considered for VA Fisher House accommodations. The VA medical facility Fisher House Manager or staff must consult with the facility Suicide Prevention Coordinator or Behavioral Health Team to determine if there are any current follow-up requirements or a need for continued re-evaluation during the VA Fisher House stay.

   f. VA does not impose a general limit on the number of persons who may accompany a Veteran or Service member, but VA may in specific cases provide accommodations to only a specific number of persons due to space or resource limitations.

   g. VA Fisher House accommodations for accompanying individuals of Veterans in a Polytrauma Transitional Rehabilitation Program (PTRP), Residential Rehabilitation Treatment Program or Domiciliary programs will be based upon the need for continued active participation in the Veteran’s episode of care.

   (1) Once a rehabilitation patient successfully transfers from acute rehabilitation to the PTRP, goals are focused on gaining additional independence and autonomy in functioning. As a result, the need for the accompanying individual’s continuous involvement and presence at the bedside may change, along with their need for continued VA Fisher House accommodations.

   (2) Return visits by accompanying individuals during the Veteran’s PTRP stay may be needed. Accommodation in the VA Fisher House for accompanying individuals must be on a first-come, first-served basis.