

## CHALENG 2008 Survey Results Summary

### VISN 1

**Site: VA Boston HCS (VAMC Boston - 523 and VAMC W. Roxbury - 523A4),  
 VAMC Brockton, MA - 523A5 and VAH Bedford, MA**

**Note:** CHALENG data is collected from two surveys. The CHALENG Point of Contact (POC) Survey is a self-administered questionnaire completed by the local VA homeless Veteran coordinator. The CHALENG Participant Survey is completed by federal, state, county, city, non-profit and for-profit agency representatives, as well as local VA staff and homeless Veterans themselves. Data was collected in the summer/fall of 2008.

#### **A. Homeless Veteran Estimates (CHALENG Point of Contact Survey):**

- 1. Estimated Number of Homeless Veterans:** 1,500
- 2. Service Area type:** Predominantly urban
- 3. Number of Homeless Veteran Families (Veterans with minor dependents) Served in FY 2008 by local VA homeless program:** 35

#### **B. Housing Availability and Need (CHALENG Point of Contact Survey)**

<b>Housing type</b>	<b># of Veteran-specific Beds in area*</b>	<b># of additional beds site could use</b>
Emergency Beds	52	25
Transitional Housing Beds	375	50
Permanent Housing Beds	205	240

\*These are the number of beds that Veterans can access that are Veteran-specific.

<b>Homeless Veteran Program Beds actually on VA campus?*</b>	
Emergency Beds	No
Transitional Housing Beds	No
Permanent Housing Beds	No

\*Beds in programs operated by private, community partners through VA Grant and Per Diem, VA Healthcare for Homeless Veterans, and other funding sources.

**C. Rating of Need by CHALENG participants (homeless Veterans and VA/ community providers). Number of total participants: 78**

<b>Need Ranking (1=Need Unmet .... 5= Need Met)</b>	<b>Site homeless Veteran mean score</b>	<b>Site provider mean score</b>	<b>VHA Mean Score (nationwide)*(all participants)</b>
Personal hygiene	3.79	3.28	3.70
Food	3.66	3.38	3.85
Clothing	3.74	3.24	3.61
Emergency (immediate) shelter	3.88	3.13	3.50
Halfway house or transitional living facility	3.38	3.13	3.35
Long-term, permanent housing	3.02	2.55	2.64
Detoxification from substances	3.86	3.41	3.59
Treatment for substance abuse	3.93	3.45	3.78
Services for emotional or psychiatric problems	4.34	3.31	3.63
Treatment for dual diagnosis	4.05	3.27	3.42
Family counseling	3.37	3.04	2.99
Medical services	4.00	3.67	3.96
Women's health care	3.22	3.35	3.09
Help with medication	4.00	3.32	3.79
Drop-in center or day program	3.39	3.15	3.08
AIDS/HIV testing/counseling	3.92	3.44	3.62
TB testing	4.03	3.54	3.96
TB treatment	3.18	3.62	3.59
Hepatitis C testing	3.95	3.58	3.73
Dental care	3.12	2.72	2.90
Eye care	3.84	3.11	3.25
Glasses	3.69	3.11	3.19
VA disability/pension	3.14	2.93	3.12
Welfare payments	2.71	3.18	2.78
SSI/SSD process	3.46	3.32	2.90
Guardianship (financial)	3.00	2.93	2.75
Help managing money	3.47	3.18	3.00
Job training	3.00	3.17	2.98
Help with finding a job or getting employment	2.88	3.04	3.12
Help getting needed documents or identification	3.83	3.43	3.52
Help with transportation	3.41	2.78	3.28
Education	3.21	3.21	3.13
Child care	2.91	2.92	2.49
Family reconciliation assistance	2.77	2.72	2.63
Discharge upgrade	2.94	2.88	2.91
Spiritual	3.50	3.17	3.51
Re-entry services for incarcerated Veterans	3.22	2.96	2.80
Elder Healthcare	2.94	3.36	3.01
Credit counseling	2.83	2.96	2.77
Legal assistance for child support issues	2.61	2.84	2.60
Legal assistance for outstanding warrants/fines	2.91	3.04	2.69
Help developing social network	3.23	3.07	3.10

**\*\*VHA: Veterans Healthcare Administration (139 reporting POC sites, n=11,711, mean score of individuals).**

## D. Nature of Collaborative Activities Between VA and Community in Serving Homeless Veterans\*

### 1. Existing Agreements with Community Service Types:

Service Types	Local VA has existing collaborative agreement with this agency type?
Correctional Facilities (Jails, prisons, courts)	Yes
Psychiatric/substance abuse inpatient (hospitals, wards)	Yes
Nursing homes	Yes
Faith-based organizations	Yes
Agencies that provide child care	No
Agencies that provide legal assistance for child support issues	No
Agencies that provide legal assistance for outstanding warrants/fines	Yes

### 2. Community Ratings of VA/Community Integration\*

Integration Scale: 1 (low) to 5 (high)	Site Mean Score	VHA (nationwide) Mean Score**
<b>VA Accessibility:</b> In general, how accessible do you feel VA services are to homeless Veterans in the community?	3.80	3.56
<b>VA Service Coordination:</b> Rate the ability of the VA to coordinate clinical services for homeless Veterans with your agency.	3.77	3.62

\*Scores of non-VA community agency representatives who completed Participant Survey.

\*\*VHA: Veterans Healthcare Administration (139 reporting POC sites, n=3,615).

### 3. Community Rating of Level of Collaborative Activity between VA and Community Agencies

<b>Implementation Scale</b> <b>1 = None</b> , no steps taken to initiate implementation of the strategy. <b>2 = Low</b> , in planning and/or initial minor steps taken. <b>3 = Moderate</b> , significant steps taken but full implementation not achieved. <b>4 = High</b> , strategy fully implemented.	<b>Site Mean Score</b>	<b>VHA (nationwide) Mean Score**</b>
<b>Interagency Coordinating Body</b> - Representatives from the VA and your agency meet formally to exchange information, do needs assessment, plan formal agreements, and promote access to services.	2.64	2.57
<b>Co-location of Services</b> - Services from the VA and your agency provided in one location.	2.40	1.84
<b>Cross-Training</b> - Staff training about the objectives, procedures and services of the VA and your agency.	2.31	1.93
<b>Interagency Agreements/ Memoranda of Understanding</b> - Formal and informal agreements between the VA and your agency covering such areas as collaboration, referrals, sharing client information, or coordinating services.	2.50	2.28
<b>Interagency Client Tracking Systems/ Management Information Systems</b> - Shared computer tracking systems that link the VA and your agency to promote information sharing, referrals, and client access.	1.52	1.60
<b>Pooled/Joint Funding</b> - Combining or layering funds from the VA and your agency to create new resources or services.	2.05	1.67
<b>Uniform Applications, Eligibility Criteria, and Intake Assessments</b> – Standardized form that the client fills out only once to apply for services at the VA and your agency.	2.20	1.80
<b>Interagency Service Delivery Team/ Provider Coalition</b> - Service team comprised of staff from the VA and your agency to assist clients with multiple needs.	2.35	2.19
<b>Consolidation of Programs/ Agencies</b> - Combining programs from the VA and your agency under one administrative structure to integrate service delivery.	2.39	1.99
<b>Flexible Funding</b> – Flexible funding used to fill gaps or acquire additional resources to further systems integration; e.g. existence of a VA and/or community agency fund used for contingencies, emergencies, or to purchase services not usually available for clients.	1.92	1.63
<b>Use of Special Waivers</b> - Waiving requirements for funding, eligibility or service delivery to reduce barriers to service, eliminate duplication of services, or promote access to comprehensive services; e.g. VA providing services to clients typically ineligible for certain services (e.g. dental) or community agencies waiving entry requirements to allow clients access to services.	2.08	1.68
<b>System Integration Coordinator Position</b> - A specific staff position focused on systems integration activities such as identifying agencies, staffing interagency meetings, and assisting with joint proposal development.	2.29	1.86

\*Scored of non-VA community agency representatives who completed Participant Survey.

\*\*VHA: Veterans Healthcare Administration (138 reporting POC sites, n=3,055. Mean score of sites).

**E. Action Plans: FY 2008 and FY 2009**

**1. CHALENG Point of Contact Action Plan for FY 2008: Results\***

<b>Long-term, permanent housing</b>	New SRO (single room occupancy) opened on VA Bedford grounds. Ten new HUD Housing Choice vouchers added. We are partnering with agencies to access "Housing First" model programs for Veterans and their families.
<b>Help with finding a job or getting employment</b>	We have increased collaboration with VA employment programs and increased resources through two grants to help chronically mentally ill Veterans find jobs. Referrals have also been made to agencies in Lowell and Worcester.
<b>Child care</b>	New VA Grant and Per Diem program for female Veterans with their children will open up on the Brockton VA campus in FY 2009 and will provide child care.

**\*The Action Plan consisted of proposed strategies the local VA program and its community partners *would use* to address priority needs in FY 2008. This is the final report about progress towards achieving FY 2008 goals.**

**2. Community Agencies Acknowledged for Their Assistance in Addressing FY 2008 Action Plan.**

<b>Agency #1</b>	Veterans Northeast Outreach Center partnered with Caritas Communities in providing case management services for Veterans in single room occupancy units.
<b>Agency #2</b>	New England Shelter for Homeless Veterans provides education and training, increasing employment options for homeless Veterans.
<b>Agency #3</b>	Boston Housing Authority partnered with us to increase the number of permanent housing options for homeless Veterans and their families.

**3. CHALENG Point of Contact Action Plan for FY 2009: Proposed\***

<p><b>Long-term, permanent housing</b></p>	<p>Boston: In FY 2008. Our VA, in partnership with Boston Housing Authority were awarded 105 HUD Housing Choice vouchers. We will continue to distribute these vouchers throughout FY 2009. We will also continue to build our partnerships with other Housing First programs in our service area. Bedford: VASH program has received 35 vouchers for permanent housing.</p>
<p><b>Treatment for substance abuse</b></p>	<p>In FY 2009, one outreach social worker will increase collaboration between our homeless program and VA Boston's substance treatment programs. Also, two new transitional housing programs will offer treatment in FY 2009.</p>
<p><b>Drop-in center or day program</b></p>	<p>In FY 2009 we plan to develop a family/support/resource center for homeless Veterans at our Brockton campus. Also recent peer support services (including a form of drop-in center) at One Causeway St. clinic will be available for homeless Veterans in the downtown area.</p>

**\*The Action Plan outlines proposed strategies the local VA program and its community partners will use to address its priority needs in FY 2009. Results of these 2009 targets will be reported in next year's CHALENG report.**

## CHALENG 2008 Survey Results Summary

### VISN 1

#### Site: VA Connecticut HCS (VAMC Newington and VAMC West Haven)

**Note:** CHALENG data is collected from two surveys. The CHALENG Point of Contact (POC) Survey is a self-administered questionnaire completed by the local VA homeless Veteran coordinator. The CHALENG Participant Survey is completed by federal, state, county, city, non-profit and for-profit agency representatives, as well as local VA staff and homeless Veterans themselves. Data was collected in the summer/fall of 2008.

#### A. Homeless Veteran Estimates (CHALENG Point of Contact Survey):

1. Estimated Number of Homeless Veterans: 800
2. Service Area type: Predominantly urban
3. Number of Homeless Veteran Families (Veterans with minor dependents) Served in FY 2008 by local VA homeless program: 10

#### B. Housing Availability and Need (CHALENG Point of Contact Survey)

Housing type	# of Veteran-specific Beds in area*	# of additional beds site could use
Emergency Beds	6	250
Transitional Housing Beds	153	300
Permanent Housing Beds	162	680

\*These are the number of beds that Veterans can access that are Veteran-specific.

Homeless Veteran Program Beds actually on VA campus?*	
Emergency Beds	No
Transitional Housing Beds	No
Permanent Housing Beds	No

\*Beds in programs operated by private, community partners through VA Grant and Per Diem, VA Healthcare for Homeless Veterans, and other funding sources.

**C. Rating of Need by CHALENG participants (homeless Veterans and VA/ community providers). Number of total participants: 210**

<b>Need Ranking (1=Need Unmet .... 5= Need Met)</b>	<b>Site homeless Veteran mean score</b>	<b>Site provider mean score</b>	<b>VHA Mean Score (nationwide)*(all participants)</b>
Personal hygiene	3.96	3.05	3.70
Food	3.90	3.37	3.85
Clothing	3.47	3.25	3.61
Emergency (immediate) shelter	3.84	2.94	3.50
Halfway house or transitional living facility	3.28	2.68	3.35
Long-term, permanent housing	2.59	2.41	2.64
Detoxification from substances	3.97	3.10	3.59
Treatment for substance abuse	3.96	3.30	3.78
Services for emotional or psychiatric problems	3.78	3.26	3.63
Treatment for dual diagnosis	3.51	3.19	3.42
Family counseling	2.51	2.96	2.99
Medical services	3.99	3.47	3.96
Women's health care	3.13	3.07	3.09
Help with medication	3.86	3.25	3.79
Drop-in center or day program	3.55	2.93	3.08
AIDS/HIV testing/counseling	3.40	3.43	3.62
TB testing	4.11	3.51	3.96
TB treatment	3.57	3.49	3.59
Hepatitis C testing	3.49	3.51	3.73
Dental care	2.12	2.55	2.90
Eye care	3.19	2.91	3.25
Glasses	3.25	2.85	3.19
VA disability/pension	2.62	3.28	3.12
Welfare payments	2.28	3.01	2.78
SSI/SSD process	2.65	2.89	2.90
Guardianship (financial)	2.48	2.77	2.75
Help managing money	2.87	2.73	3.00
Job training	2.61	3.03	2.98
Help with finding a job or getting employment	2.81	3.11	3.12
Help getting needed documents or identification	3.51	3.04	3.52
Help with transportation	3.48	2.70	3.28
Education	2.97	3.06	3.13
Child care	2.43	2.45	2.49
Family reconciliation assistance	2.55	2.57	2.63
Discharge upgrade	2.85	2.85	2.91
Spiritual	3.54	3.21	3.51
Re-entry services for incarcerated Veterans	2.56	2.54	2.80
Elder Healthcare	2.86	3.10	3.01
Credit counseling	2.65	2.64	2.77
Legal assistance for child support issues	2.61	2.56	2.60
Legal assistance for outstanding warrants/fines	3.02	2.58	2.69
Help developing social network	3.09	2.84	3.10

**\*\*VHA: Veterans Healthcare Administration (139 reporting POC sites, n=11,711, mean score of individuals).**

## D. Nature of Collaborative Activities Between VA and Community in Serving Homeless Veterans\*

### 1. Existing Agreements with Community Service Types:

Service Types	Local VA has existing collaborative agreement with this agency type?
Correctional Facilities (Jails, prisons, courts)	Yes
Psychiatric/substance abuse inpatient (hospitals, wards)	No
Nursing homes	Yes
Faith-based organizations	Yes
Agencies that provide child care	No
Agencies that provide legal assistance for child support issues	No
Agencies that provide legal assistance for outstanding warrants/fines	Yes

### 2. Community Ratings of VA/Community Integration\*

Integration Scale: 1 (low) to 5 (high)	Site Mean Score	VHA (nationwide) Mean Score**
<b>VA Accessibility:</b> In general, how accessible do you feel VA services are to homeless Veterans in the community?	3.31	3.56
<b>VA Service Coordination:</b> Rate the ability of the VA to coordinate clinical services for homeless Veterans with your agency.	3.38	3.62

\*Scores of non-VA community agency representatives who completed Participant Survey.

\*\*VHA: Veterans Healthcare Administration (139 reporting POC sites, n=3,615).

### 3. Community Rating of Level of Collaborative Activity between VA and Community Agencies

<b>Implementation Scale</b> <b>1 = None</b> , no steps taken to initiate implementation of the strategy. <b>2 = Low</b> , in planning and/or initial minor steps taken. <b>3 = Moderate</b> , significant steps taken but full implementation not achieved. <b>4 = High</b> , strategy fully implemented.	<b>Site Mean Score</b>	<b>VHA (nationwide) Mean Score**</b>
<b>Interagency Coordinating Body</b> - Representatives from the VA and your agency meet formally to exchange information, do needs assessment, plan formal agreements, and promote access to services.	2.33	2.57
<b>Co-location of Services</b> - Services from the VA and your agency provided in one location.	1.69	1.84
<b>Cross-Training</b> - Staff training about the objectives, procedures and services of the VA and your agency.	1.78	1.93
<b>Interagency Agreements/ Memoranda of Understanding</b> - Formal and informal agreements between the VA and your agency covering such areas as collaboration, referrals, sharing client information, or coordinating services.	1.90	2.28
<b>Interagency Client Tracking Systems/ Management Information Systems</b> - Shared computer tracking systems that link the VA and your agency to promote information sharing, referrals, and client access.	1.54	1.60
<b>Pooled/Joint Funding</b> - Combining or layering funds from the VA and your agency to create new resources or services.	1.55	1.67
<b>Uniform Applications, Eligibility Criteria, and Intake Assessments</b> – Standardized form that the client fills out only once to apply for services at the VA and your agency.	1.56	1.80
<b>Interagency Service Delivery Team/ Provider Coalition</b> - Service team comprised of staff from the VA and your agency to assist clients with multiple needs.	2.04	2.19
<b>Consolidation of Programs/ Agencies</b> - Combining programs from the VA and your agency under one administrative structure to integrate service delivery.	1.86	1.99
<b>Flexible Funding</b> – Flexible funding used to fill gaps or acquire additional resources to further systems integration; e.g. existence of a VA and/or community agency fund used for contingencies, emergencies, or to purchase services not usually available for clients.	1.51	1.63
<b>Use of Special Waivers</b> - Waiving requirements for funding, eligibility or service delivery to reduce barriers to service, eliminate duplication of services, or promote access to comprehensive services; e.g. VA providing services to clients typically ineligible for certain services (e.g. dental) or community agencies waiving entry requirements to allow clients access to services.	1.58	1.68
<b>System Integration Coordinator Position</b> - A specific staff position focused on systems integration activities such as identifying agencies, staffing interagency meetings, and assisting with joint proposal development.	1.80	1.86

\*Scored of non-VA community agency representatives who completed Participant Survey.  
 \*\*VHA: Veterans Healthcare Administration (138 reporting POC sites, n=3,055. Mean score of sites).

**E. Action Plans: FY 2008 and FY 2009**

**1. CHALENG Point of Contact Action Plan for FY 2008: Results\***

<b>Long-term, permanent housing</b>	We secured ten Section 8 vouchers in Danbury. Eventually, Bridgeport and Danbury are planning to provide 17 vouchers each; Jewett City is planning 18.
<b>Emergency (immediate) shelter</b>	Six emergency beds secured at Columbus House, Inc. Our new psychosocial residential rehabilitation treatment program collaborates with the shelter.
<b>Halfway house or transitional living facility</b>	One VA Capital and two Per Diem awards secured in the last round of funding.

**\*The Action Plan consisted of proposed strategies the local VA program and its community partners *would use* to address priority needs in FY 2008. This is the final report about progress towards achieving FY 2008 goals.**

**2. Community Agencies Acknowledged for Their Assistance in Addressing FY 2008 Action Plan.**

<b>Agency #1</b>	Connecticut Coalition to End Homelessness (CCEH) helps us coordinate efforts with the 14 HUD Continuums of Care and local Ten-Year Plan to End Homelessness groups throughout the state.
<b>Agency #2</b>	City of Danbury is promoting "Housing for Heroes," a comprehensive plan to address housing needs of homeless Veterans. Through the city's efforts (mobilized municipal, private, state and federal resources), we have secured five emergency housing beds, six long-term transitional housing beds (Vet House) and 10 set-aside Section 8 vouchers.
<b>Agency #3</b>	(no agency identified)

### 3. CHALENG Point of Contact Action Plan for FY 2009: Proposed\*

<p><b>Long-term, permanent housing</b></p>	<p>Plan is to lease up 70 new HUD-VA Supported Housing vouchers. Continue collaboration with HUD Continuums of Care, Ten-Year Plan to End Homelessness Committees, and local housing authority to improve access to HUD Shelter Plus Care beds; and better serve elderly, female Veterans, and Veterans with families.</p>
<p><b>Transitional living facility or halfway house</b></p>	<p>Plan is to develop a system that improves client flow from a shelter stay through VA Grant and Per Diem transitional housing, and into VA Supported Housing (from shelter through transitional housing and into permanent community housing). Continue to encourage new GPD startups in underserved areas.</p>
<p><b>VA disability/pension</b></p>	<p>Collaborate with Veterans Benefits Administration officer to promote timely processing of VA Compensation and Pension claims. Participate in SOAP (Social Security Outreach and Access to Recovery) trainings on strategies to submit successful claims.</p>

**\*The Action Plan outlines proposed strategies the local VA program and its community partners *will use* to address its priority needs in FY 2009. Results of these 2009 targets will be reported in next year's CHALENG report.**

## CHALENG 2008 Survey Results Summary

### VISN 1

**Site: VAM&ROC Togus, ME - 402**

**Note:** CHALENG data is collected from two surveys. The CHALENG Point of Contact (POC) Survey is a self-administered questionnaire completed by the local VA homeless Veteran coordinator. The CHALENG Participant Survey is completed by federal, state, county, city, non-profit and for-profit agency representatives, as well as local VA staff and homeless Veterans themselves. Data was collected in the summer/fall of 2008.

#### **A. Homeless Veteran Estimates (CHALENG Point of Contact Survey):**

1. **Estimated Number of Homeless Veterans:** 140
2. **Service Area type:** Predominantly rural
3. **Number of Homeless Veteran Families (Veterans with minor dependents) Served in FY 2008 by local VA homeless program:** 4

#### **B. Housing Availability and Need (CHALENG Point of Contact Survey)**

Housing type	# of Veteran-specific Beds in area*	# of additional beds site could use
Emergency Beds	5	40
Transitional Housing Beds	8	40
Permanent Housing Beds	5	50

\*These are the number of beds that Veterans can access that are Veteran-specific.

Homeless Veteran Program Beds actually on VA campus?*	
Emergency Beds	No
Transitional Housing Beds	No
Permanent Housing Beds	No

\*Beds in programs operated by private, community partners through VA Grant and Per Diem, VA Healthcare for Homeless Veterans, and other funding sources.

**C. Rating of Need by CHALENG participants (homeless Veterans and VA/ community providers). Number of total participants: 181**

<b>Need Ranking (1=Need Unmet .... 5= Need Met)</b>	<b>Site homeless Veteran mean score</b>	<b>Site provider mean score</b>	<b>VHA Mean Score (nationwide)*(all participants)</b>
Personal hygiene	3.86	2.93	3.70
Food	3.86	3.43	3.85
Clothing	3.55	3.20	3.61
Emergency (immediate) shelter	3.72	2.83	3.50
Halfway house or transitional living facility	3.09	2.26	3.35
Long-term, permanent housing	2.63	2.29	2.64
Detoxification from substances	3.78	2.74	3.59
Treatment for substance abuse	3.84	3.00	3.78
Services for emotional or psychiatric problems	3.68	3.06	3.63
Treatment for dual diagnosis	3.52	2.87	3.42
Family counseling	2.64	2.47	2.99
Medical services	3.94	3.68	3.96
Women's health care	3.10	3.37	3.09
Help with medication	3.74	2.90	3.79
Drop-in center or day program	3.22	2.20	3.08
AIDS/HIV testing/counseling	3.45	3.24	3.62
TB testing	3.96	3.28	3.96
TB treatment	3.46	2.96	3.59
Hepatitis C testing	3.52	3.31	3.73
Dental care	2.49	1.97	2.90
Eye care	3.17	2.47	3.25
Glasses	3.13	2.43	3.19
VA disability/pension	2.76	3.10	3.12
Welfare payments	2.60	2.93	2.78
SSI/SSD process	2.90	2.93	2.90
Guardianship (financial)	2.73	2.53	2.75
Help managing money	3.04	2.53	3.00
Job training	2.71	2.60	2.98
Help with finding a job or getting employment	2.88	2.63	3.12
Help getting needed documents or identification	3.57	2.63	3.52
Help with transportation	3.50	2.20	3.28
Education	3.25	2.70	3.13
Child care	2.63	2.10	2.49
Family reconciliation assistance	2.62	2.36	2.63
Discharge upgrade	2.99	2.78	2.91
Spiritual	3.48	3.30	3.51
Re-entry services for incarcerated Veterans	2.78	2.27	2.80
Elder Healthcare	3.06	2.86	3.01
Credit counseling	2.68	2.31	2.77
Legal assistance for child support issues	2.76	2.34	2.60
Legal assistance for outstanding warrants/fines	3.07	2.23	2.69
Help developing social network	3.11	2.43	3.10

**\*\*VHA: Veterans Healthcare Administration (139 reporting POC sites, n=11,711, mean score of individuals).**

## D. Nature of Collaborative Activities Between VA and Community in Serving Homeless Veterans\*

### 1. Existing Agreements with Community Service Types:

Service Types	Local VA has existing collaborative agreement with this agency type?
Correctional Facilities (Jails, prisons, courts)	Yes
Psychiatric/substance abuse inpatient (hospitals, wards)	Yes
Nursing homes	No
Faith-based organizations	Yes
Agencies that provide child care	No
Agencies that provide legal assistance for child support issues	No
Agencies that provide legal assistance for outstanding warrants/fines	No

### 2. Community Ratings of VA/Community Integration\*

Integration Scale: 1 (low) to 5 (high)	Site Mean Score	VHA (nationwide) Mean Score**
<b>VA Accessibility:</b> In general, how accessible do you feel VA services are to homeless Veterans in the community?	3.00	3.56
<b>VA Service Coordination:</b> Rate the ability of the VA to coordinate clinical services for homeless Veterans with your agency.	3.13	3.62

\*Scores of non-VA community agency representatives who completed Participant Survey.

\*\*VHA: Veterans Healthcare Administration (139 reporting POC sites, n=3,615).

### 3. Community Rating of Level of Collaborative Activity between VA and Community Agencies

<b>Implementation Scale</b> <b>1 = None</b> , no steps taken to initiate implementation of the strategy. <b>2 = Low</b> , in planning and/or initial minor steps taken. <b>3 = Moderate</b> , significant steps taken but full implementation not achieved. <b>4 = High</b> , strategy fully implemented.	<b>Site Mean Score</b>	<b>VHA (nationwide) Mean Score**</b>
<b>Interagency Coordinating Body</b> - Representatives from the VA and your agency meet formally to exchange information, do needs assessment, plan formal agreements, and promote access to services.	2.42	2.57
<b>Co-location of Services</b> - Services from the VA and your agency provided in one location.	1.96	1.84
<b>Cross-Training</b> - Staff training about the objectives, procedures and services of the VA and your agency.	1.77	1.93
<b>Interagency Agreements/ Memoranda of Understanding</b> - Formal and informal agreements between the VA and your agency covering such areas as collaboration, referrals, sharing client information, or coordinating services.	2.26	2.28
<b>Interagency Client Tracking Systems/ Management Information Systems</b> - Shared computer tracking systems that link the VA and your agency to promote information sharing, referrals, and client access.	1.52	1.60
<b>Pooled/Joint Funding</b> - Combining or layering funds from the VA and your agency to create new resources or services.	1.77	1.67
<b>Uniform Applications, Eligibility Criteria, and Intake Assessments</b> – Standardized form that the client fills out only once to apply for services at the VA and your agency.	1.64	1.80
<b>Interagency Service Delivery Team/ Provider Coalition</b> - Service team comprised of staff from the VA and your agency to assist clients with multiple needs.	2.09	2.19
<b>Consolidation of Programs/ Agencies</b> - Combining programs from the VA and your agency under one administrative structure to integrate service delivery.	1.55	1.99
<b>Flexible Funding</b> – Flexible funding used to fill gaps or acquire additional resources to further systems integration; e.g. existence of a VA and/or community agency fund used for contingencies, emergencies, or to purchase services not usually available for clients.	1.50	1.63
<b>Use of Special Waivers</b> - Waiving requirements for funding, eligibility or service delivery to reduce barriers to service, eliminate duplication of services, or promote access to comprehensive services; e.g. VA providing services to clients typically ineligible for certain services (e.g. dental) or community agencies waiving entry requirements to allow clients access to services.	1.41	1.68
<b>System Integration Coordinator Position</b> - A specific staff position focused on systems integration activities such as identifying agencies, staffing interagency meetings, and assisting with joint proposal development.	1.82	1.86

\*Scored of non-VA community agency representatives who completed Participant Survey.

\*\*VHA: Veterans Healthcare Administration (138 reporting POC sites, n=3,055. Mean score of sites).

**E. Action Plans: FY 2008 and FY 2009**

**1. CHALENG Point of Contact Action Plan for FY 2008: Results\***

<b>Emergency (immediate) shelter</b>	We will continue to advocate for emergency housing with stakeholder groups and regional homeless councils.
<b>Halfway house or transitional living facility</b>	One VA Grant and Per Diem program is in development. Three agencies submitted for VA GPD funding but were turned down.
<b>Long-term, permanent housing</b>	Togus VA is in an extended-use lease process to utilize 3-4 quarters on grounds.

\*The Action Plan consisted of proposed strategies the local VA program and its community partners *would use* to address priority needs in FY 2008. This is the final report about progress towards achieving FY 2008 goals.

**2. Community Agencies Acknowledged for Their Assistance in Addressing FY 2008 Action Plan.**

<b>Agency #1</b>	Community Housing of Maine runs the only VA Grant and Per Diem program in the state. They have also developed units of permanent housing for Veterans.
<b>Agency #2</b>	Mid-Maine Homeless Shelter provides immediate housing to homeless Veterans. If full, the shelter will transport Veterans to other shelters or even pay for an overnight stay at a hotel.
<b>Agency #3</b>	Oxford Street Shelter provides immediate shelter to homeless Veterans and is developing Veteran-specific beds. It also helps our VA track homeless Veteran use of the shelter.

### 3. CHALENG Point of Contact Action Plan for FY 2009: Proposed\*

<b>Long-term, permanent housing</b>	1. Implement HUD-VA Supported Housing program. 2. Collaborate with local providers on securing permanent housing for Veterans through new memorandums of understanding and funding development.
<b>Transitional living facility or halfway house</b>	Support VA Grant and Per Diem program about to open. Consider developing housing on VA grounds. Encourage local providers to apply for VA Grant and Per Diem funding.
<b>Emergency (immediate) shelter</b>	Educate providers on capacity issues of local shelters. Attend statewide homeless committee meetings to address this issue through the local Ten-Year Plan to End Homelessness.

\*The Action Plan outlines proposed strategies the local VA program and its community partners *will use* to address its priority needs in FY 2009. Results of these 2009 targets will be reported in next year's CHALENG report.

## CHALENG 2008 Survey Results Summary

### VISN 1

#### Site: VAM&ROC White River Junction, VT - 405

**Note:** CHALENG data is collected from two surveys. The CHALENG Point of Contact (POC) Survey is a self-administered questionnaire completed by the local VA homeless Veteran coordinator. The CHALENG Participant Survey is completed by federal, state, county, city, non-profit and for-profit agency representatives, as well as local VA staff and homeless Veterans themselves. Data was collected in the summer/fall of 2008.

#### A. Homeless Veteran Estimates (CHALENG Point of Contact Survey):

1. **Estimated Number of Homeless Veterans:** 125
2. **Service Area type:** Predominantly rural
3. **Number of Homeless Veteran Families (Veterans with minor dependents) Served in FY 2008 by local VA homeless program:** 4

#### B. Housing Availability and Need (CHALENG Point of Contact Survey)

Housing type	# of Veteran-specific Beds in area*	# of additional beds site could use
Emergency Beds	0	12
Transitional Housing Beds	27	0
Permanent Housing Beds	20	0

\*These are the number of beds that Veterans can access that are Veteran-specific.

Homeless Veteran Program Beds actually on VA campus?*	
Emergency Beds	No
Transitional Housing Beds	No
Permanent Housing Beds	No

\*Beds in programs operated by private, community partners through VA Grant and Per Diem, VA Healthcare for Homeless Veterans, and other funding sources.

**C. Rating of Need by CHALENG participants (homeless Veterans and VA/ community providers). Number of total participants: 67**

<b>Need Ranking (1=Need Unmet .... 5= Need Met)</b>	<b>Site homeless Veteran mean score</b>	<b>Site provider mean score</b>	<b>VHA Mean Score (nationwide)*(all participants)</b>
Personal hygiene	3.56	3.03	3.70
Food	3.67	3.47	3.85
Clothing	3.80	3.45	3.61
Emergency (immediate) shelter	3.44	2.62	3.50
Halfway house or transitional living facility	3.09	2.06	3.35
Long-term, permanent housing	2.74	1.76	2.64
Detoxification from substances	3.84	2.79	3.59
Treatment for substance abuse	3.60	3.03	3.78
Services for emotional or psychiatric problems	3.67	3.12	3.63
Treatment for dual diagnosis	3.63	2.97	3.42
Family counseling	2.76	2.84	2.99
Medical services	3.93	3.53	3.96
Women's health care	2.38	3.28	3.09
Help with medication	3.79	3.31	3.79
Drop-in center or day program	3.53	3.34	3.08
AIDS/HIV testing/counseling	3.53	3.45	3.62
TB testing	4.17	3.53	3.96
TB treatment	3.47	3.38	3.59
Hepatitis C testing	4.05	3.44	3.73
Dental care	2.71	2.35	2.90
Eye care	3.05	2.55	3.25
Glasses	3.05	2.48	3.19
VA disability/pension	2.68	3.10	3.12
Welfare payments	2.28	2.94	2.78
SSI/SSD process	2.32	2.87	2.90
Guardianship (financial)	2.81	2.77	2.75
Help managing money	2.72	2.53	3.00
Job training	3.06	3.03	2.98
Help with finding a job or getting employment	2.94	3.20	3.12
Help getting needed documents or identification	3.52	3.38	3.52
Help with transportation	3.52	2.90	3.28
Education	3.06	3.14	3.13
Child care	2.75	2.16	2.49
Family reconciliation assistance	2.54	2.54	2.63
Discharge upgrade	2.81	2.72	2.91
Spiritual	3.67	3.13	3.51
Re-entry services for incarcerated Veterans	2.20	2.50	2.80
Elder Healthcare	2.79	2.68	3.01
Credit counseling	2.27	2.61	2.77
Legal assistance for child support issues	2.54	2.38	2.60
Legal assistance for outstanding warrants/fines	2.94	2.28	2.69
Help developing social network	3.14	2.70	3.10

**\*\*VHA: Veterans Healthcare Administration (139 reporting POC sites, n=11,711, mean score of individuals).**

**D. Nature of Collaborative Activities Between VA and Community in Serving Homeless Veterans\***

**1. Existing Agreements with Community Service Types:**

<b>Service Types</b>	<b>Local VA has existing collaborative agreement with this agency type?</b>
Correctional Facilities (Jails, prisons, courts)	No
Psychiatric/substance abuse inpatient (hospitals, wards)	No
Nursing homes	No
Faith-based organizations	No
Agencies that provide child care	No
Agencies that provide legal assistance for child support issues	Yes
Agencies that provide legal assistance for outstanding warrants/fines	Yes

**2. Community Ratings of VA/Community Integration\***

<b>Integration Scale:</b> 1 (low) to 5 (high)	<b>Site Mean Score</b>	<b>VHA (nationwide) Mean Score**</b>
<b>VA Accessibility:</b> In general, how accessible do you feel VA services are to homeless Veterans in the community?	3.11	3.56
<b>VA Service Coordination:</b> Rate the ability of the VA to coordinate clinical services for homeless Veterans with your agency.	3.27	3.62

\*Scores of non-VA community agency representatives who completed Participant Survey.

\*\*VHA: Veterans Healthcare Administration (139 reporting POC sites, n=3,615).

### 3. Community Rating of Level of Collaborative Activity between VA and Community Agencies

<b>Implementation Scale</b> <b>1 = None</b> , no steps taken to initiate implementation of the strategy. <b>2 = Low</b> , in planning and/or initial minor steps taken. <b>3 = Moderate</b> , significant steps taken but full implementation not achieved. <b>4 = High</b> , strategy fully implemented.	<b>Site Mean Score</b>	<b>VHA (nationwide) Mean Score**</b>
<b>Interagency Coordinating Body</b> - Representatives from the VA and your agency meet formally to exchange information, do needs assessment, plan formal agreements, and promote access to services.	2.40	2.57
<b>Co-location of Services</b> - Services from the VA and your agency provided in one location.	1.52	1.84
<b>Cross-Training</b> - Staff training about the objectives, procedures and services of the VA and your agency.	1.63	1.93
<b>Interagency Agreements/ Memoranda of Understanding</b> - Formal and informal agreements between the VA and your agency covering such areas as collaboration, referrals, sharing client information, or coordinating services.	2.29	2.28
<b>Interagency Client Tracking Systems/ Management Information Systems</b> - Shared computer tracking systems that link the VA and your agency to promote information sharing, referrals, and client access.	1.21	1.60
<b>Pooled/Joint Funding</b> - Combining or layering funds from the VA and your agency to create new resources or services.	1.71	1.67
<b>Uniform Applications, Eligibility Criteria, and Intake Assessments</b> – Standardized form that the client fills out only once to apply for services at the VA and your agency.	1.75	1.80
<b>Interagency Service Delivery Team/ Provider Coalition</b> - Service team comprised of staff from the VA and your agency to assist clients with multiple needs.	1.88	2.19
<b>Consolidation of Programs/ Agencies</b> - Combining programs from the VA and your agency under one administrative structure to integrate service delivery.	1.88	1.99
<b>Flexible Funding</b> – Flexible funding used to fill gaps or acquire additional resources to further systems integration; e.g. existence of a VA and/or community agency fund used for contingencies, emergencies, or to purchase services not usually available for clients.	1.75	1.63
<b>Use of Special Waivers</b> - Waiving requirements for funding, eligibility or service delivery to reduce barriers to service, eliminate duplication of services, or promote access to comprehensive services; e.g. VA providing services to clients typically ineligible for certain services (e.g. dental) or community agencies waiving entry requirements to allow clients access to services.	1.64	1.68
<b>System Integration Coordinator Position</b> - A specific staff position focused on systems integration activities such as identifying agencies, staffing interagency meetings, and assisting with joint proposal development.	1.74	1.86

\*Scored of non-VA community agency representatives who completed Participant Survey.  
 \*\*VHA: Veterans Healthcare Administration (138 reporting POC sites, n=3,055. Mean score of sites).

**E. Action Plans: FY 2008 and FY 2009**

**1. CHALENG Point of Contact Action Plan for FY 2008: Results\***

<b>Halfway house or transitional living facility</b>	One VA Per Diem Only project was funded for six beds -- three other VA Grant and Per Diem applications are pending.
<b>Long-term, permanent housing</b>	We have developed a formal Memorandum of Agreement with Burlington Housing Authority to access HUD Housing Choice vouchers for homeless Veterans -- VA will provide case management and other supportive services. VA will also be a provider for a HUD Shelter Plus Care program.
<b>Job training</b>	VA Compensated Work Therapy program is helping us develop work therapy opportunities for Veterans by contracting with agencies near local shelters. We have also increased communication with local Department of Labor Local Veteran Employment Representatives (LVERs) and Disabled Veterans Outreach Program Specialists (DVOPS).

**\*The Action Plan consisted of proposed strategies the local VA program and its community partners *would* use to address priority needs in FY 2008. This is the final report about progress towards achieving FY 2008 goals.**

**2. Community Agencies Acknowledged for Their Assistance in Addressing FY 2008 Action Plan.**

<b>Agency #1</b>	Burlington Housing Authority worked with VA to develop a Memorandum of Agreement for HUD Housing Choice vouchers, allowing for the development of supportive housing and Shelter Plus Care housing for Veterans. The Authority has helped develop a lot of permanent housing in the area.
<b>Agency #2</b>	Massachusetts Veterans, Inc. is an experienced VA Grant and Per Diem provider which recently proposed developing a GPD program in the White River Junction area. If funded, this program will improve housing access in Vermont.
<b>Agency #3</b>	(no agency identified)

### 3. CHALENG Point of Contact Action Plan for FY 2009: Proposed\*

<p><b>Long-term, permanent housing</b></p>	<p>Fully implement the HUD-VASH program and utilize all 20 vouchers that we received. Continue to work with the Burlington Housing Authority to utilize HUD Housing Choice Vouchers for homeless Veterans and their families. Continue to work on becoming a HUD Shelter Plus Care (S+C) provider for the Burlington Housing Authority that will include supportive services from the White River Junction VAMC. Work with local Continuums of Care to develop affordable single room occupancies.</p>
<p><b>Eye care</b></p>	<p>Develop a relationship with the VA eye clinic and also community providers, including the Lions Club, to promote better access to eye care and eye glasses. Ideally, there would be a dedicated open access clinic to homeless Veterans once a month. This would include exams and free glasses.</p>
<p><b>Help with transportation</b></p>	<p>As rural states, Vermont and New Hampshire, struggle with making transportation easily accessible. We continue to build our relationship with Disabled American Veterans . In the next year, as more services for homeless Veterans open in our catchment area, there needs to be discussion with providers about pooling resources. We will also need to look at whether it will be easier to move services to the Veterans.</p>

**\*The Action Plan outlines proposed strategies the local VA program and its community partners will use to address its priority needs in FY 2009. Results of these 2009 targets will be reported in next year's CHALENG report.**

## CHALENG 2008 Survey Results Summary

### VISN 1

#### Site: VAMC Manchester, NH - 608

**Note:** CHALENG data is collected from two surveys. The CHALENG Point of Contact (POC) Survey is a self-administered questionnaire completed by the local VA homeless Veteran coordinator. The CHALENG Participant Survey is completed by federal, state, county, city, non-profit and for-profit agency representatives, as well as local VA staff and homeless Veterans themselves. Data was collected in the summer/fall of 2008.

#### A. Homeless Veteran Estimates (CHALENG Point of Contact Survey):

1. **Estimated Number of Homeless Veterans:** 256
2. **Service Area type:** Predominantly urban
3. **Number of Homeless Veteran Families (Veterans with minor dependents) Served in FY 2008 by local VA homeless program:** 4

#### B. Housing Availability and Need (CHALENG Point of Contact Survey)

Housing type	# of Veteran-specific Beds in area*	# of additional beds site could use
Emergency Beds	10	0
Transitional Housing Beds	55	0
Permanent Housing Beds	40	200

\*These are the number of beds that Veterans can access that are Veteran-specific.

Homeless Veteran Program Beds actually on VA campus?*	
Emergency Beds	No
Transitional Housing Beds	No
Permanent Housing Beds	No

\*Beds in programs operated by private, community partners through VA Grant and Per Diem, VA Healthcare for Homeless Veterans, and other funding sources.

**C. Rating of Need by CHALENG participants (homeless Veterans and VA/ community providers). Number of total participants: 28**

<b>Need Ranking (1=Need Unmet .... 5= Need Met)</b>	<b>Site homeless Veteran mean score</b>	<b>Site provider mean score</b>	<b>VHA Mean Score (nationwide)*(all participants)</b>
Personal hygiene		3.19	3.70
Food		3.89	3.85
Clothing		3.52	3.61
Emergency (immediate) shelter		3.26	3.50
Halfway house or transitional living facility		3.15	3.35
Long-term, permanent housing		2.30	2.64
Detoxification from substances		2.78	3.59
Treatment for substance abuse		3.15	3.78
Services for emotional or psychiatric problems		3.78	3.63
Treatment for dual diagnosis		3.63	3.42
Family counseling		3.00	2.99
Medical services		4.19	3.96
Women's health care		3.74	3.09
Help with medication		4.15	3.79
Drop-in center or day program		2.11	3.08
AIDS/HIV testing/counseling		3.85	3.62
TB testing		4.08	3.96
TB treatment		3.96	3.59
Hepatitis C testing		4.08	3.73
Dental care		2.22	2.90
Eye care		3.00	3.25
Glasses		2.96	3.19
VA disability/pension		3.52	3.12
Welfare payments		2.71	2.78
SSI/SSD process		3.07	2.90
Guardianship (financial)		2.96	2.75
Help managing money		2.54	3.00
Job training		3.22	2.98
Help with finding a job or getting employment		3.59	3.12
Help getting needed documents or identification		3.32	3.52
Help with transportation		2.48	3.28
Education		3.22	3.13
Child care		2.28	2.49
Family reconciliation assistance		2.52	2.63
Discharge upgrade		3.00	2.91
Spiritual		3.59	3.51
Re-entry services for incarcerated Veterans		2.41	2.80
Elder Healthcare		3.44	3.01
Credit counseling		2.52	2.77
Legal assistance for child support issues		2.44	2.60
Legal assistance for outstanding warrants/fines		2.48	2.69
Help developing social network		3.12	3.10

**\*\*VHA: Veterans Healthcare Administration (139 reporting POC sites, n=11,711, mean score of individuals).**

**D. Nature of Collaborative Activities Between VA and Community in Serving Homeless Veterans\***

**1. Existing Agreements with Community Service Types:**

<b>Service Types</b>	<b>Local VA has existing collaborative agreement with this agency type?</b>
Correctional Facilities (Jails, prisons, courts)	Yes
Psychiatric/substance abuse inpatient (hospitals, wards)	Yes
Nursing homes	Yes
Faith-based organizations	Yes
Agencies that provide child care	No
Agencies that provide legal assistance for child support issues	No
Agencies that provide legal assistance for outstanding warrants/fines	Yes

**2. Community Ratings of VA/Community Integration\***

<b>Integration Scale:</b> 1 (low) to 5 (high)	<b>Site Mean Score</b>	<b>VHA (nationwide) Mean Score**</b>
<b>VA Accessibility:</b> In general, how accessible do you feel VA services are to homeless Veterans in the community?	3.89	3.56
<b>VA Service Coordination:</b> Rate the ability of the VA to coordinate clinical services for homeless Veterans with your agency.	4.00	3.62

\*Scores of non-VA community agency representatives who completed Participant Survey.

\*\*VHA: Veterans Healthcare Administration (139 reporting POC sites, n=3,615).

### 3. Community Rating of Level of Collaborative Activity between VA and Community Agencies

<b>Implementation Scale</b> <b>1 = None</b> , no steps taken to initiate implementation of the strategy. <b>2 = Low</b> , in planning and/or initial minor steps taken. <b>3 = Moderate</b> , significant steps taken but full implementation not achieved. <b>4 = High</b> , strategy fully implemented.	<b>Site Mean Score</b>	<b>VHA (nationwide) Mean Score**</b>
<b>Interagency Coordinating Body</b> - Representatives from the VA and your agency meet formally to exchange information, do needs assessment, plan formal agreements, and promote access to services.	2.45	2.57
<b>Co-location of Services</b> - Services from the VA and your agency provided in one location.	1.36	1.84
<b>Cross-Training</b> - Staff training about the objectives, procedures and services of the VA and your agency.	1.82	1.93
<b>Interagency Agreements/ Memoranda of Understanding</b> - Formal and informal agreements between the VA and your agency covering such areas as collaboration, referrals, sharing client information, or coordinating services.	2.18	2.28
<b>Interagency Client Tracking Systems/ Management Information Systems</b> - Shared computer tracking systems that link the VA and your agency to promote information sharing, referrals, and client access.	1.18	1.60
<b>Pooled/Joint Funding</b> - Combining or layering funds from the VA and your agency to create new resources or services.	1.36	1.67
<b>Uniform Applications, Eligibility Criteria, and Intake Assessments</b> – Standardized form that the client fills out only once to apply for services at the VA and your agency.	1.36	1.80
<b>Interagency Service Delivery Team/ Provider Coalition</b> - Service team comprised of staff from the VA and your agency to assist clients with multiple needs.	2.27	2.19
<b>Consolidation of Programs/ Agencies</b> - Combining programs from the VA and your agency under one administrative structure to integrate service delivery.	1.45	1.99
<b>Flexible Funding</b> – Flexible funding used to fill gaps or acquire additional resources to further systems integration; e.g. existence of a VA and/or community agency fund used for contingencies, emergencies, or to purchase services not usually available for clients.	1.27	1.63
<b>Use of Special Waivers</b> - Waiving requirements for funding, eligibility or service delivery to reduce barriers to service, eliminate duplication of services, or promote access to comprehensive services; e.g. VA providing services to clients typically ineligible for certain services (e.g. dental) or community agencies waiving entry requirements to allow clients access to services.	1.27	1.68
<b>System Integration Coordinator Position</b> - A specific staff position focused on systems integration activities such as identifying agencies, staffing interagency meetings, and assisting with joint proposal development.	1.09	1.86

\*Scored of non-VA community agency representatives who completed Participant Survey.  
 \*\*VHA: Veterans Healthcare Administration (138 reporting POC sites, n=3,055. Mean score of sites).

**E. Action Plans: FY 2008 and FY 2009**

**1. CHALENG Point of Contact Action Plan for FY 2008: Results\***

<b>Long-term, permanent housing</b>	Harbor Homes, Inc. secured six Section 8 vouchers for Veterans. Our VA was awarded 35 HUD-VA Supported Housing vouchers. Helping Hands created 15 single room occupancy units; two Veterans admitted.
<b>Detoxification from substances</b>	We have improved process to refer Veterans to local VA's and hospitals.
<b>Help with finding a job or getting employment</b>	VA Compensated Work Therapy staff worked with 186 Veterans in FY 2008 -- 97 have obtained employment.

\*The Action Plan consisted of proposed strategies the local VA program and its community partners *would use* to address priority needs in FY 2008. This is the final report about progress towards achieving FY 2008 goals.

**2. Community Agencies Acknowledged for Their Assistance in Addressing FY 2008 Action Plan.**

<b>Agency #1</b>	Harbor Homes, Inc. received Department of Labor funding to hire two employment specialists/case managers for homeless Veterans. Their goal is to employ 40 homeless Veterans in six months. Harbor Homes also received funding for 20 more VA Grant and Per Diem beds for severely mentally ill Veterans.
<b>Agency #2</b>	(no agency identified)
<b>Agency #3</b>	(no agency identified)

### 3. CHALENG Point of Contact Action Plan for FY 2009: Proposed\*

<p><b>Long-term, permanent housing</b></p>	<p>New Hampshire Continuums of Care continue to advocate for additional Section 8 vouchers and increased funding. Will continue to lobby for additional HUD-VASH vouchers in NH through congressional representatives. Helping Hands (contract facility) has obtained HUD, federal and state funding for permanent housing units: plan is to build 20 units/apartments with Veteran preference.</p>
<p><b>Detoxification from substances</b></p>	<p>We will continue to refer many New Hampshire Veterans to VAs in Massachusetts and Vermont. Continue to work with local service organizations, who continue to work with our congressional delegation for more inpatient and hospital resources. Expand and streamline referral system with "sister" VAMC's in Massachusetts.</p>
<p><b>Help with transportation</b></p>	<p>Continue to work with local service organizations as well as local public transportation companies to seek discounts and/or funds for transportation. Continue coordination with Grant Per Diem program van. Seek volunteer drivers through Disabled American Veterans for continued assistance.</p>

**\*The Action Plan outlines proposed strategies the local VA program and its community partners *will use* to address its priority needs in FY 2009. Results of these 2009 targets will be reported in next year's CHALENG report.**

## CHALENG 2008 Survey Results Summary

### VISN 1

#### Site: VAMC Northampton, MA - 631 (Leeds)

**Note:** CHALENG data is collected from two surveys. The CHALENG Point of Contact (POC) Survey is a self-administered questionnaire completed by the local VA homeless Veteran coordinator. The CHALENG Participant Survey is completed by federal, state, county, city, non-profit and for-profit agency representatives, as well as local VA staff and homeless Veterans themselves. Data was collected in the summer/fall of 2008.

#### A. Homeless Veteran Estimates (CHALENG Point of Contact Survey):

1. **Estimated Number of Homeless Veterans:** 250
2. **Service Area type:** Even mix of urban and rural
3. **Number of Homeless Veteran Families (Veterans with minor dependents) Served in FY 2008 by local VA homeless program:** 4

#### B. Housing Availability and Need (CHALENG Point of Contact Survey)

Housing type	# of Veteran-specific Beds in area*	# of additional beds site could use
Emergency Beds	180	60
Transitional Housing Beds	180	60
Permanent Housing Beds	70	90

\*These are the number of beds that Veterans can access that are Veteran-specific.

Homeless Veteran Program Beds actually on VA campus?*	
Emergency Beds	Yes
Transitional Housing Beds	Yes
Permanent Housing Beds	No

\*Beds in programs operated by private, community partners through VA Grant and Per Diem, VA Healthcare for Homeless Veterans, and other funding sources.

**C. Rating of Need by CHALENG participants (homeless Veterans and VA/ community providers). Number of total participants: 34**

<b>Need Ranking (1=Need Unmet .... 5= Need Met)</b>	<b>Site homeless Veteran mean score</b>	<b>Site provider mean score</b>	<b>VHA Mean Score (nationwide)*(all participants)</b>
Personal hygiene		3.28	3.70
Food		3.55	3.85
Clothing		3.56	3.61
Emergency (immediate) shelter		3.81	3.50
Halfway house or transitional living facility		3.88	3.35
Long-term, permanent housing		2.97	2.64
Detoxification from substances		3.48	3.59
Treatment for substance abuse		3.88	3.78
Services for emotional or psychiatric problems		3.69	3.63
Treatment for dual diagnosis		3.56	3.42
Family counseling		2.77	2.99
Medical services		4.00	3.96
Women's health care		3.35	3.09
Help with medication		3.56	3.79
Drop-in center or day program		2.87	3.08
AIDS/HIV testing/counseling		3.27	3.62
TB testing		3.57	3.96
TB treatment		3.35	3.59
Hepatitis C testing		3.53	3.73
Dental care		3.09	2.90
Eye care		3.09	3.25
Glasses		3.16	3.19
VA disability/pension		3.41	3.12
Welfare payments		3.16	2.78
SSI/SSD process		3.19	2.90
Guardianship (financial)		2.71	2.75
Help managing money		2.77	3.00
Job training		3.13	2.98
Help with finding a job or getting employment		3.31	3.12
Help getting needed documents or identification		3.55	3.52
Help with transportation		3.34	3.28
Education		3.06	3.13
Child care		2.47	2.49
Family reconciliation assistance		2.43	2.63
Discharge upgrade		2.97	2.91
Spiritual		3.26	3.51
Re-entry services for incarcerated Veterans		3.13	2.80
Elder Healthcare		2.93	3.01
Credit counseling		2.45	2.77
Legal assistance for child support issues		2.48	2.60
Legal assistance for outstanding warrants/fines		2.66	2.69
Help developing social network		3.13	3.10

**\*\*VHA: Veterans Healthcare Administration (139 reporting POC sites, n=11,711, mean score of individuals).**

## D. Nature of Collaborative Activities Between VA and Community in Serving Homeless Veterans\*

### 1. Existing Agreements with Community Service Types:

Service Types	Local VA has existing collaborative agreement with this agency type?
Correctional Facilities (Jails, prisons, courts)	No
Psychiatric/substance abuse inpatient (hospitals, wards)	No
Nursing homes	Yes
Faith-based organizations	No
Agencies that provide child care	No
Agencies that provide legal assistance for child support issues	No
Agencies that provide legal assistance for outstanding warrants/fines	No

### 2. Community Ratings of VA/Community Integration\*

Integration Scale: 1 (low) to 5 (high)	Site Mean Score	VHA (nationwide) Mean Score**
<b>VA Accessibility:</b> In general, how accessible do you feel VA services are to homeless Veterans in the community?	3.80	3.56
<b>VA Service Coordination:</b> Rate the ability of the VA to coordinate clinical services for homeless Veterans with your agency.	3.80	3.62

\*Scores of non-VA community agency representatives who completed Participant Survey.

\*\*VHA: Veterans Healthcare Administration (139 reporting POC sites, n=3,615).

### 3. Community Rating of Level of Collaborative Activity between VA and Community Agencies

<b>Implementation Scale</b> <b>1 = None</b> , no steps taken to initiate implementation of the strategy. <b>2 = Low</b> , in planning and/or initial minor steps taken. <b>3 = Moderate</b> , significant steps taken but full implementation not achieved. <b>4 = High</b> , strategy fully implemented.	<b>Site Mean Score</b>	<b>VHA (nationwide) Mean Score**</b>
<b>Interagency Coordinating Body</b> - Representatives from the VA and your agency meet formally to exchange information, do needs assessment, plan formal agreements, and promote access to services.	2.97	2.57
<b>Co-location of Services</b> - Services from the VA and your agency provided in one location.	2.59	1.84
<b>Cross-Training</b> - Staff training about the objectives, procedures and services of the VA and your agency.	2.10	1.93
<b>Interagency Agreements/ Memoranda of Understanding</b> - Formal and informal agreements between the VA and your agency covering such areas as collaboration, referrals, sharing client information, or coordinating services.	2.48	2.28
<b>Interagency Client Tracking Systems/ Management Information Systems</b> - Shared computer tracking systems that link the VA and your agency to promote information sharing, referrals, and client access.	1.62	1.60
<b>Pooled/Joint Funding</b> - Combining or layering funds from the VA and your agency to create new resources or services.	1.90	1.67
<b>Uniform Applications, Eligibility Criteria, and Intake Assessments</b> – Standardized form that the client fills out only once to apply for services at the VA and your agency.	2.03	1.80
<b>Interagency Service Delivery Team/ Provider Coalition</b> - Service team comprised of staff from the VA and your agency to assist clients with multiple needs.	2.45	2.19
<b>Consolidation of Programs/ Agencies</b> - Combining programs from the VA and your agency under one administrative structure to integrate service delivery.	2.28	1.99
<b>Flexible Funding</b> – Flexible funding used to fill gaps or acquire additional resources to further systems integration; e.g. existence of a VA and/or community agency fund used for contingencies, emergencies, or to purchase services not usually available for clients.	1.72	1.63
<b>Use of Special Waivers</b> - Waiving requirements for funding, eligibility or service delivery to reduce barriers to service, eliminate duplication of services, or promote access to comprehensive services; e.g. VA providing services to clients typically ineligible for certain services (e.g. dental) or community agencies waiving entry requirements to allow clients access to services.	1.66	1.68
<b>System Integration Coordinator Position</b> - A specific staff position focused on systems integration activities such as identifying agencies, staffing interagency meetings, and assisting with joint proposal development.	2.03	1.86

\*Scored of non-VA community agency representatives who completed Participant Survey.

\*\*VHA: Veterans Healthcare Administration (138 reporting POC sites, n=3,055. Mean score of sites).

**E. Action Plans: FY 2008 and FY 2009**

**1. CHALENG Point of Contact Action Plan for FY 2008: Results\***

<b>Long-term, permanent housing</b>	We are starting to place Veterans into our expanded HUD-VA Supported Housing program. Continue to network with Massachusetts Department of Veterans Services, Interagency Council on Homelessness, and Next Step.
<b>Dental Care</b>	This year, 102 Veterans were treated through the Homeless Veterans Dental Program.
<b>Job training</b>	We worked with local community groups to improve job training.

\*The Action Plan consisted of proposed strategies the local VA program and its community partners *would use* to address priority needs in FY 2008. This is the final report about progress towards achieving FY 2008 goals.

**2. Community Agencies Acknowledged for Their Assistance in Addressing FY 2008 Action Plan.**

<b>Agency #1</b>	(no agency identified)
<b>Agency #2</b>	(no agency identified)
<b>Agency #3</b>	(no agency identified)

### 3. CHALENG Point of Contact Action Plan for FY 2009: Proposed\*

<b>Long-term, permanent housing</b>	HUD-VASH case managers will place 70 Veterans into long term permanent housing. Health Care for Homeless Veterans (HCHV) coordinator will work with community HUD committees to work on developing permanent housing.
<b>Detoxification from substances</b>	Work with providers to identify detoxification facilities that homeless Veterans can access.
<b>Job training</b>	Participate in Project Homeless Connect.

\*The Action Plan outlines proposed strategies the local VA program and its community partners *will use* to address its priority needs in FY 2009. Results of these 2009 targets will be reported in next year's CHALENG report.

## CHALENG 2008 Survey Results Summary

### VISN 1

#### Site: VAMC Providence, RI - 650, Bristol, CT

**Note:** CHALENG data is collected from two surveys. The CHALENG Point of Contact (POC) Survey is a self-administered questionnaire completed by the local VA homeless Veteran coordinator. The CHALENG Participant Survey is completed by federal, state, county, city, non-profit and for-profit agency representatives, as well as local VA staff and homeless Veterans themselves. Data was collected in the summer/fall of 2008.

#### A. Homeless Veteran Estimates (CHALENG Point of Contact Survey):

1. **Estimated Number of Homeless Veterans:** 195
2. **Service Area type:** Predominantly urban
3. **Number of Homeless Veteran Families (Veterans with minor dependents) Served in FY 2008 by local VA homeless program:** 2

#### B. Housing Availability and Need (CHALENG Point of Contact Survey)

Housing type	# of Veteran-specific Beds in area*	# of additional beds site could use
Emergency Beds	2	10
Transitional Housing Beds	97	15
Permanent Housing Beds	0	50

\*These are the number of beds that Veterans can access that are Veteran-specific.

Homeless Veteran Program Beds actually on VA campus?*	
Emergency Beds	No
Transitional Housing Beds	No
Permanent Housing Beds	No

\*Beds in programs operated by private, community partners through VA Grant and Per Diem, VA Healthcare for Homeless Veterans, and other funding sources.

**C. Rating of Need by CHALENG participants (homeless Veterans and VA/ community providers). Number of total participants: 38**

<b>Need Ranking (1=Need Unmet .... 5= Need Met)</b>	<b>Site homeless Veteran mean score</b>	<b>Site provider mean score</b>	<b>VHA Mean Score (nationwide)*(all participants)</b>
Personal hygiene	4.33	3.00	3.70
Food	4.62	2.90	3.85
Clothing	4.04	2.90	3.61
Emergency (immediate) shelter	3.73	3.00	3.50
Halfway house or transitional living facility	4.19	3.40	3.35
Long-term, permanent housing	2.78	2.50	2.64
Detoxification from substances	4.24	3.50	3.59
Treatment for substance abuse	4.08	3.50	3.78
Services for emotional or psychiatric problems	4.04	3.50	3.63
Treatment for dual diagnosis	3.83	3.20	3.42
Family counseling	3.38	2.50	2.99
Medical services	4.37	4.00	3.96
Women's health care	2.83	3.50	3.09
Help with medication	4.21	3.70	3.79
Drop-in center or day program	3.92	3.10	3.08
AIDS/HIV testing/counseling	4.12	3.20	3.62
TB testing	4.56	3.20	3.96
TB treatment	4.08	3.10	3.59
Hepatitis C testing	4.35	3.20	3.73
Dental care	3.32	2.70	2.90
Eye care	3.93	3.00	3.25
Glasses	3.93	3.10	3.19
VA disability/pension	3.35	3.60	3.12
Welfare payments	3.23	2.60	2.78
SSI/SSD process	3.42	2.70	2.90
Guardianship (financial)	3.33	2.40	2.75
Help managing money	3.64	2.40	3.00
Job training	3.70	2.90	2.98
Help with finding a job or getting employment	3.69	3.00	3.12
Help getting needed documents or identification	4.00	3.10	3.52
Help with transportation	4.07	2.50	3.28
Education	3.50	2.80	3.13
Child care	2.96	2.20	2.49
Family reconciliation assistance	3.16	2.10	2.63
Discharge upgrade	3.58	2.20	2.91
Spiritual	3.92	3.20	3.51
Re-entry services for incarcerated Veterans	3.22	2.30	2.80
Elder Healthcare	3.80	3.30	3.01
Credit counseling	2.83	3.00	2.77
Legal assistance for child support issues	3.04	2.20	2.60
Legal assistance for outstanding warrants/fines	3.04	2.50	2.69
Help developing social network	4.04	3.00	3.10

**\*\*VHA: Veterans Healthcare Administration (139 reporting POC sites, n=11,711, mean score of individuals).**

## D. Nature of Collaborative Activities Between VA and Community in Serving Homeless Veterans\*

### 1. Existing Agreements with Community Service Types:

Service Types	Local VA has existing collaborative agreement with this agency type?
Correctional Facilities (Jails, prisons, courts)	Yes
Psychiatric/substance abuse inpatient (hospitals, wards)	Yes
Nursing homes	Yes
Faith-based organizations	No
Agencies that provide child care	No
Agencies that provide legal assistance for child support issues	No
Agencies that provide legal assistance for outstanding warrants/fines	Yes

### 2. Community Ratings of VA/Community Integration\*

Integration Scale: 1 (low) to 5 (high)	Site Mean Score	VHA (nationwide) Mean Score**
<b>VA Accessibility:</b> In general, how accessible do you feel VA services are to homeless Veterans in the community?	3.40	3.56
<b>VA Service Coordination:</b> Rate the ability of the VA to coordinate clinical services for homeless Veterans with your agency.	3.50	3.62

\*Scores of non-VA community agency representatives who completed Participant Survey.

\*\*VHA: Veterans Healthcare Administration (139 reporting POC sites, n=3,615).

### 3. Community Rating of Level of Collaborative Activity between VA and Community Agencies

<b>Implementation Scale</b> <b>1 = None</b> , no steps taken to initiate implementation of the strategy. <b>2 = Low</b> , in planning and/or initial minor steps taken. <b>3 = Moderate</b> , significant steps taken but full implementation not achieved. <b>4 = High</b> , strategy fully implemented.	<b>Site Mean Score</b>	<b>VHA (nationwide) Mean Score**</b>
<b>Interagency Coordinating Body</b> - Representatives from the VA and your agency meet formally to exchange information, do needs assessment, plan formal agreements, and promote access to services.	1.71	2.57
<b>Co-location of Services</b> - Services from the VA and your agency provided in one location.	2.43	1.84
<b>Cross-Training</b> - Staff training about the objectives, procedures and services of the VA and your agency.	1.71	1.93
<b>Interagency Agreements/ Memoranda of Understanding</b> - Formal and informal agreements between the VA and your agency covering such areas as collaboration, referrals, sharing client information, or coordinating services.	1.29	2.28
<b>Interagency Client Tracking Systems/ Management Information Systems</b> - Shared computer tracking systems that link the VA and your agency to promote information sharing, referrals, and client access.	1.29	1.60
<b>Pooled/Joint Funding</b> - Combining or layering funds from the VA and your agency to create new resources or services.	1.43	1.67
<b>Uniform Applications, Eligibility Criteria, and Intake Assessments</b> – Standardized form that the client fills out only once to apply for services at the VA and your agency.	1.43	1.80
<b>Interagency Service Delivery Team/ Provider Coalition</b> - Service team comprised of staff from the VA and your agency to assist clients with multiple needs.	1.86	2.19
<b>Consolidation of Programs/ Agencies</b> - Combining programs from the VA and your agency under one administrative structure to integrate service delivery.	1.71	1.99
<b>Flexible Funding</b> – Flexible funding used to fill gaps or acquire additional resources to further systems integration; e.g. existence of a VA and/or community agency fund used for contingencies, emergencies, or to purchase services not usually available for clients.	1.29	1.63
<b>Use of Special Waivers</b> - Waiving requirements for funding, eligibility or service delivery to reduce barriers to service, eliminate duplication of services, or promote access to comprehensive services; e.g. VA providing services to clients typically ineligible for certain services (e.g. dental) or community agencies waiving entry requirements to allow clients access to services.	1.43	1.68
<b>System Integration Coordinator Position</b> - A specific staff position focused on systems integration activities such as identifying agencies, staffing interagency meetings, and assisting with joint proposal development.	1.57	1.86

\*Scored of non-VA community agency representatives who completed Participant Survey.

\*\*VHA: Veterans Healthcare Administration (138 reporting POC sites, n=3,055. Mean score of sites).

**E. Action Plans: FY 2008 and FY 2009**

**1. CHALENG Point of Contact Action Plan for FY 2008: Results\***

<b>Long-term, permanent housing</b>	We were awarded 35 HUD-VA Supported Housing vouchers. Our new program will be fully implemented in FY 2009 after staff are hired.
<b>Halfway house or transitional living facility</b>	Nickerson Community Center opened a 32-bed VA Grant and Per Diem program in May 2008. Operation Stand Down received a VA Capital grant.
<b>Dental Care</b>	More dental slots were added through the use of the dental residency program. We will also begin offering dental services on evenings and weekends.

**\*The Action Plan consisted of proposed strategies the local VA program and its community partners *would use* to address priority needs in FY 2008. This is the final report about progress towards achieving FY 2008 goals.**

**2. Community Agencies Acknowledged for Their Assistance in Addressing FY 2008 Action Plan.**

<b>Agency #1</b>	Nickerson Community Center continues to expand their programs. They opened a second VA Grant and Per Diem project, Gateway II, with 32 beds. They also offer post-program rooming house and apartment housing for their clients.
<b>Agency #2</b>	(no agency identified)
<b>Agency #3</b>	(no agency identified)

### 3. CHALENG Point of Contact Action Plan for FY 2009: Proposed\*

<b>Emergency (immediate) shelter</b>	Network with local providers and advocate for development of emergency shelter for Veterans in Rhode Island. Provide letters of support , statistical data, etc. to any local agency/organization willing to pursue funding.
<b>Long-term, permanent housing</b>	Hire a HUD-VASH case manager and place 35 Veterans (and their families if needed) in subsidized apartments in the community. Support local initiatives of non-profits and other organizations to develop low income housing.
<b>Treatment for substance abuse</b>	Establish strong collaborative relationship with our VA's substance abuse treatment program in order to provide optimal coordinated treatment for homeless Veterans. Outreach to community halfway house programs to strengthen referral linkages.

**\*The Action Plan outlines proposed strategies the local VA program and its community partners *will use* to address its priority needs in FY 2009. Results of these 2009 targets will be reported in next year's CHALENG report.**