

CHALENG 2008 Survey Results Summary

VISN 3

Site: VA Hudson Valley HCS (VAMC Castle Point - 620A4 and VAH Montrose - 620)

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:** 1,000
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:** 0

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	30
Transitional Housing Beds	60	140
Permanent Housing Beds	33	500

*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	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: 60

Need Ranking (1=Need Unmet 5= Need Met)	Site homeless Veteran mean score	Site provider mean score	VHA Mean Score (nationwide)*(all participants)
Personal hygiene	3.79	3.34	3.70
Food	3.96	3.73	3.85
Clothing	3.83	3.38	3.61
Emergency (immediate) shelter	3.52	3.37	3.50
Halfway house or transitional living facility	3.23	2.79	3.35
Long-term, permanent housing	2.13	2.29	2.64
Detoxification from substances	3.70	3.38	3.59
Treatment for substance abuse	4.04	3.88	3.78
Services for emotional or psychiatric problems	3.79	3.71	3.63
Treatment for dual diagnosis	3.41	3.56	3.42
Family counseling	3.00	2.87	2.99
Medical services	4.17	3.62	3.96
Women's health care	2.53	3.09	3.09
Help with medication	4.09	3.26	3.79
Drop-in center or day program	3.11	3.03	3.08
AIDS/HIV testing/counseling	3.95	3.67	3.62
TB testing	4.13	3.76	3.96
TB treatment	3.33	3.64	3.59
Hepatitis C testing	3.83	3.70	3.73
Dental care	3.63	2.94	2.90
Eye care	4.20	3.41	3.25
Glasses	4.20	3.45	3.19
VA disability/pension	2.09	3.42	3.12
Welfare payments	2.05	2.88	2.78
SSI/SSD process	2.05	3.22	2.90
Guardianship (financial)	1.95	2.74	2.75
Help managing money	2.78	2.73	3.00
Job training	2.76	2.88	2.98
Help with finding a job or getting employment	2.88	2.88	3.12
Help getting needed documents or identification	3.50	3.06	3.52
Help with transportation	3.13	2.68	3.28
Education	2.70	2.68	3.13
Child care	2.06	2.40	2.49
Family reconciliation assistance	2.18	2.59	2.63
Discharge upgrade	2.38	2.69	2.91
Spiritual	3.38	3.16	3.51
Re-entry services for incarcerated Veterans	2.90	2.82	2.80
Elder Healthcare	2.50	3.00	3.01
Credit counseling	2.19	2.58	2.77
Legal assistance for child support issues	2.05	2.42	2.60
Legal assistance for outstanding warrants/fines	2.26	2.65	2.69
Help developing social network	2.43	3.06	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	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**
VA Accessibility: In general, how accessible do you feel VA services are to homeless Veterans in the community?	3.88	3.56
VA Service Coordination: Rate the ability of the VA to coordinate clinical services for homeless Veterans with your agency.	3.91	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

Implementation Scale 1 = None , no steps taken to initiate implementation of the strategy. 2 = Low , in planning and/or initial minor steps taken. 3 = Moderate , significant steps taken but full implementation not achieved. 4 = High , strategy fully implemented.	Site Mean Score	VHA (nationwide) Mean Score**
Interagency Coordinating Body - Representatives from the VA and your agency meet formally to exchange information, do needs assessment, plan formal agreements, and promote access to services.	2.63	2.57
Co-location of Services - Services from the VA and your agency provided in one location.	1.93	1.84
Cross-Training - Staff training about the objectives, procedures and services of the VA and your agency.	2.11	1.93
Interagency Agreements/ Memoranda of Understanding - Formal and informal agreements between the VA and your agency covering such areas as collaboration, referrals, sharing client information, or coordinating services.	2.46	2.28
Interagency Client Tracking Systems/ Management Information Systems - Shared computer tracking systems that link the VA and your agency to promote information sharing, referrals, and client access.	1.78	1.60
Pooled/Joint Funding - Combining or layering funds from the VA and your agency to create new resources or services.	1.73	1.67
Uniform Applications, Eligibility Criteria, and Intake Assessments – Standardized form that the client fills out only once to apply for services at the VA and your agency.	1.81	1.80
Interagency Service Delivery Team/ Provider Coalition - Service team comprised of staff from the VA and your agency to assist clients with multiple needs.	2.28	2.19
Consolidation of Programs/ Agencies - Combining programs from the VA and your agency under one administrative structure to integrate service delivery.	1.96	1.99
Flexible Funding – 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.	1.62	1.63
Use of Special Waivers - 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.	1.69	1.68
System Integration Coordinator Position - A specific staff position focused on systems integration activities such as identifying agencies, staffing interagency meetings, and assisting with joint proposal development.	1.62	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*

Long-term, permanent housing	Fourteen permanent housing beds have been approved and an additional 61 beds will be opened in FY 2009. Peer Housing Location Assistance Group (PHLAG) project is up and going.
Halfway house or transitional living facility	Two new VA Grant and Per Diem programs (total of 60 beds) in Westchester County have been approved.
Help with finding a job or getting employment	Some Veterans did participate in Carpenters Union apprenticeship, but project has stopped.

*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.

Agency #1	Common Ground opened a 96-bed transitional residence on VA grounds. They have greatly increased our transitional housing capacity.
Agency #2	Westhab opened a 12-bed residence on Pier Street in Yonkers. They will open another 13-bed residence on Bruce Avenue in Yonkers in FY 2009.
Agency #3	(no agency identified)

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

Transitional living facility or halfway house	Open up 61 more Grant Per Diem beds in FY09. Will continue working with Dutchess County consortium to develop Grant Per Diem housing for Veterans. Will work with Caring for Homeless in Peekskill in getting Grant Per Diem application approved.
Long-term, permanent housing	Award 105 HUD-VASH vouchers to Veterans. Work with local continuum of care programs on identifying and assessing strategies to increase housing strategies.
Help with finding a job or getting employment	Forming a partnership with yet unnamed local contractor to construct a Compensated Work Therapy/Transitional residence in FY09.

*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 3

Site: VA New Jersey HCS (VAMC East Orange - 561 and VAMC Lyons - 561A4)

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:** 2,500
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:** 0

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	40
Transitional Housing Beds	115	50
Permanent Housing Beds	70	350

*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	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: 85

Need Ranking (1=Need Unmet 5= Need Met)	Site homeless Veteran mean score	Site provider mean score	VHA Mean Score (nationwide)*(all participants)
Personal hygiene	4.13	4.11	3.70
Food	4.39	4.56	3.85
Clothing	3.81	4.44	3.61
Emergency (immediate) shelter	4.05	4.67	3.50
Halfway house or transitional living facility	3.62	4.56	3.35
Long-term, permanent housing	2.81	4.11	2.64
Detoxification from substances	3.99	4.11	3.59
Treatment for substance abuse	4.32	4.56	3.78
Services for emotional or psychiatric problems	3.86	4.67	3.63
Treatment for dual diagnosis	3.72	4.44	3.42
Family counseling	3.27	4.11	2.99
Medical services	4.30	4.67	3.96
Women's health care	2.80	4.44	3.09
Help with medication	4.07	4.56	3.79
Drop-in center or day program	3.46	3.67	3.08
AIDS/HIV testing/counseling	4.17	4.44	3.62
TB testing	4.14	4.56	3.96
TB treatment	3.24	4.56	3.59
Hepatitis C testing	3.73	4.67	3.73
Dental care	4.09	4.00	2.90
Eye care	4.35	4.22	3.25
Glasses	4.25	4.33	3.19
VA disability/pension	2.78	4.22	3.12
Welfare payments	3.31	4.11	2.78
SSI/SSD process	2.49	4.22	2.90
Guardianship (financial)	2.80	3.67	2.75
Help managing money	3.51	4.00	3.00
Job training	2.88	4.00	2.98
Help with finding a job or getting employment	3.38	4.00	3.12
Help getting needed documents or identification	3.74	4.11	3.52
Help with transportation	3.53	4.22	3.28
Education	3.07	4.00	3.13
Child care	2.39	2.56	2.49
Family reconciliation assistance	2.83	3.38	2.63
Discharge upgrade	2.82	3.63	2.91
Spiritual	4.13	4.13	3.51
Re-entry services for incarcerated Veterans	2.83	4.33	2.80
Elder Healthcare	2.65	3.22	3.01
Credit counseling	3.34	3.75	2.77
Legal assistance for child support issues	3.24	4.00	2.60
Legal assistance for outstanding warrants/fines	3.62	3.88	2.69
Help developing social network	3.56	4.00	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	Yes
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*

Integration Scale: 1 (low) to 5 (high)	Site Mean Score	VHA (nationwide) Mean Score**
VA Accessibility: In general, how accessible do you feel VA services are to homeless Veterans in the community?	4.44	3.56
VA Service Coordination: Rate the ability of the VA to coordinate clinical services for homeless Veterans with your agency.	4.44	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

Implementation Scale 1 = None , no steps taken to initiate implementation of the strategy. 2 = Low , in planning and/or initial minor steps taken. 3 = Moderate , significant steps taken but full implementation not achieved. 4 = High , strategy fully implemented.	Site Mean Score	VHA (nationwide) Mean Score**
Interagency Coordinating Body - Representatives from the VA and your agency meet formally to exchange information, do needs assessment, plan formal agreements, and promote access to services.	3.50	2.57
Co-location of Services - Services from the VA and your agency provided in one location.	3.75	1.84
Cross-Training - Staff training about the objectives, procedures and services of the VA and your agency.	3.25	1.93
Interagency Agreements/ Memoranda of Understanding - Formal and informal agreements between the VA and your agency covering such areas as collaboration, referrals, sharing client information, or coordinating services.	3.67	2.28
Interagency Client Tracking Systems/ Management Information Systems - Shared computer tracking systems that link the VA and your agency to promote information sharing, referrals, and client access.	3.33	1.60
Pooled/Joint Funding - Combining or layering funds from the VA and your agency to create new resources or services.	3.00	1.67
Uniform Applications, Eligibility Criteria, and Intake Assessments – Standardized form that the client fills out only once to apply for services at the VA and your agency.	3.33	1.80
Interagency Service Delivery Team/ Provider Coalition - Service team comprised of staff from the VA and your agency to assist clients with multiple needs.	3.67	2.19
Consolidation of Programs/ Agencies - Combining programs from the VA and your agency under one administrative structure to integrate service delivery.	4.00	1.99
Flexible Funding – 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.	3.33	1.63
Use of Special Waivers - 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.	3.33	1.68
System Integration Coordinator Position - A specific staff position focused on systems integration activities such as identifying agencies, staffing interagency meetings, and assisting with joint proposal development.	3.33	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*

Help with transportation	VA hired two van drivers.
Help with finding a job or getting employment	We are now using a comprehensive testing system to identify individual barriers to employment with subsequent action to address them.
Long-term, permanent housing	We received 70 HUD-VA Supported Housing vouchers as part of our new program. We continue to explore permanent housing options offered by state resources, community agencies and independent providers.

***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.

Agency #1	Community Hope provides transitional housing through its VA Grant and Per Diem Program.
Agency #2	New Jersey Housing and Mortgage Finance Agency assisted in identifying and supporting permanent housing projects.
Agency #3	Reformed Church of Highland Park developed permanent housing for female Veterans.

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

Long-term, permanent housing	We are starting a HUD-VASH new program of 70 vouchers for Veterans this year. We anticipate more vouchers next year.
Legal assistance for outstanding warrants/fines	We have requested and recently received funding for an additional federal employee to assist with legal issues.
Child care	We plan to re-allocate one of our staff members to assist female and male Veterans in accessing child care resources.

*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 3

Site: VAMC Bronx, NY - 526, VA New York Harbor HCS (VAMC Brooklyn - 630A4 and VAMC New York - 630) and VA Hudson Valley HCS (VAMC Castle Point - 620A4 and VAH Montrose - 620)

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:** 6,300
- 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:** 15

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	247	0
Transitional Housing Beds	120	100
Permanent Housing Beds	990	1000

*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: 227

Need Ranking (1=Need Unmet 5= Need Met)	Site homeless Veteran mean score	Site provider mean score	VHA Mean Score (nationwide)*(all participants)
Personal hygiene	3.58	3.16	3.70
Food	3.45	3.30	3.85
Clothing	3.13	3.18	3.61
Emergency (immediate) shelter	3.20	3.23	3.50
Halfway house or transitional living facility	3.02	3.06	3.35
Long-term, permanent housing	2.50	2.85	2.64
Detoxification from substances	3.40	3.44	3.59
Treatment for substance abuse	3.47	3.63	3.78
Services for emotional or psychiatric problems	3.51	3.68	3.63
Treatment for dual diagnosis	3.10	3.67	3.42
Family counseling	2.90	3.21	2.99
Medical services	3.72	3.81	3.96
Women's health care	2.93	3.35	3.09
Help with medication	3.64	3.59	3.79
Drop-in center or day program	3.28	3.18	3.08
AIDS/HIV testing/counseling	3.45	3.57	3.62
TB testing	3.84	3.74	3.96
TB treatment	3.35	3.66	3.59
Hepatitis C testing	3.66	3.70	3.73
Dental care	3.01	3.03	2.90
Eye care	3.68	3.35	3.25
Glasses	3.67	3.44	3.19
VA disability/pension	2.74	3.36	3.12
Welfare payments	2.78	3.14	2.78
SSI/SSD process	2.84	3.31	2.90
Guardianship (financial)	2.73	3.04	2.75
Help managing money	2.97	2.87	3.00
Job training	2.85	3.10	2.98
Help with finding a job or getting employment	2.83	3.21	3.12
Help getting needed documents or identification	3.49	3.29	3.52
Help with transportation	3.36	3.19	3.28
Education	3.14	3.21	3.13
Child care	2.56	2.61	2.49
Family reconciliation assistance	2.77	2.91	2.63
Discharge upgrade	2.83	3.04	2.91
Spiritual	3.26	3.15	3.51
Re-entry services for incarcerated Veterans	2.69	3.11	2.80
Elder Healthcare	2.91	3.19	3.01
Credit counseling	2.62	2.69	2.77
Legal assistance for child support issues	2.60	2.75	2.60
Legal assistance for outstanding warrants/fines	2.67	2.75	2.69
Help developing social network	3.10	3.03	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	No
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**
VA Accessibility: In general, how accessible do you feel VA services are to homeless Veterans in the community?	3.42	3.56
VA Service Coordination: Rate the ability of the VA to coordinate clinical services for homeless Veterans with your agency.	3.51	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

Implementation Scale 1 = None , no steps taken to initiate implementation of the strategy. 2 = Low , in planning and/or initial minor steps taken. 3 = Moderate , significant steps taken but full implementation not achieved. 4 = High , strategy fully implemented.	Site Mean Score	VHA (nationwide) Mean Score**
Interagency Coordinating Body - Representatives from the VA and your agency meet formally to exchange information, do needs assessment, plan formal agreements, and promote access to services.	2.72	2.57
Co-location of Services - Services from the VA and your agency provided in one location.	2.52	1.84
Cross-Training - Staff training about the objectives, procedures and services of the VA and your agency.	2.53	1.93
Interagency Agreements/ Memoranda of Understanding - Formal and informal agreements between the VA and your agency covering such areas as collaboration, referrals, sharing client information, or coordinating services.	2.63	2.28
Interagency Client Tracking Systems/ Management Information Systems - Shared computer tracking systems that link the VA and your agency to promote information sharing, referrals, and client access.	2.44	1.60
Pooled/Joint Funding - Combining or layering funds from the VA and your agency to create new resources or services.	2.26	1.67
Uniform Applications, Eligibility Criteria, and Intake Assessments – Standardized form that the client fills out only once to apply for services at the VA and your agency.	2.50	1.80
Interagency Service Delivery Team/ Provider Coalition - Service team comprised of staff from the VA and your agency to assist clients with multiple needs.	2.64	2.19
Consolidation of Programs/ Agencies - Combining programs from the VA and your agency under one administrative structure to integrate service delivery.	2.43	1.99
Flexible Funding – 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.	2.28	1.63
Use of Special Waivers - 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.	2.36	1.68
System Integration Coordinator Position - A specific staff position focused on systems integration activities such as identifying agencies, staffing interagency meetings, and assisting with joint proposal development.	2.42	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*

Long-term, permanent housing	We received 1,000 Section 8 vouchers with nine HUD-VA Supported Housing case manager positions hired. We are continuing our Peer Housing Location Assistance Group (PHLAG) where peer workers help Veterans find community housing.
Dental Care	VA funded dental care for 45 Veterans in our VA Grant and Per Diem program and 23 Veterans in the Domiciliary.
Re-entry services for incarcerated veterans	Still pursuing VISN contacts to develop resources to serve Veterans recently released from prison.

*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.

Agency #1	New York City Department of Homeless Services assisted in the development of a multi-service center for Veterans. The agency is very responsive to Veteran needs.
Agency #2	(no agency identified)
Agency #3	(no agency identified)

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

Long-term, permanent housing	Implement newly re-instated HUD-VASH Program to help Veterans and their families successfully move out of homelessness in permanent housing..
Help with finding a job or getting employment	Compensated Work Therapy will continue to guide Veterans back to work through counseling and work experience. Plan to purchase computer software for job searches and resume building for on-site computer lab.
Legal assistance for outstanding warrants/fines	We will do a needs assessment to determine resources and services needed for legal services for Veterans.

***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 3

Site: VAMC Northport, NY - 632

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:** 538
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:** 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	51	0
Transitional Housing Beds	82	20
Permanent Housing Beds	70	100

*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	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: 66

Need Ranking (1=Need Unmet 5= Need Met)	Site homeless Veteran mean score	Site provider mean score	VHA Mean Score (nationwide)*(all participants)
Personal hygiene	4.19	3.45	3.70
Food	4.27	3.70	3.85
Clothing	3.84	3.61	3.61
Emergency (immediate) shelter	4.08	3.65	3.50
Halfway house or transitional living facility	3.92	3.34	3.35
Long-term, permanent housing	2.38	2.88	2.64
Detoxification from substances	4.20	3.18	3.59
Treatment for substance abuse	4.50	3.65	3.78
Services for emotional or psychiatric problems	4.04	3.70	3.63
Treatment for dual diagnosis	3.59	3.48	3.42
Family counseling	2.55	3.03	2.99
Medical services	4.56	4.03	3.96
Women's health care	2.53	3.42	3.09
Help with medication	4.08	3.41	3.79
Drop-in center or day program	3.14	3.00	3.08
AIDS/HIV testing/counseling	3.67	3.38	3.62
TB testing	4.08	3.67	3.96
TB treatment	3.38	3.47	3.59
Hepatitis C testing	4.08	3.58	3.73
Dental care	3.00	3.22	2.90
Eye care	4.04	3.41	3.25
Glasses	3.96	3.33	3.19
VA disability/pension	2.92	3.22	3.12
Welfare payments	2.77	3.15	2.78
SSI/SSD process	2.77	3.28	2.90
Guardianship (financial)	2.50	2.81	2.75
Help managing money	2.79	2.81	3.00
Job training	2.42	3.15	2.98
Help with finding a job or getting employment	2.78	3.30	3.12
Help getting needed documents or identification	3.59	3.09	3.52
Help with transportation	2.88	3.00	3.28
Education	2.58	3.03	3.13
Child care	2.41	2.21	2.49
Family reconciliation assistance	2.30	2.62	2.63
Discharge upgrade	3.04	2.90	2.91
Spiritual	3.42	3.50	3.51
Re-entry services for incarcerated Veterans	3.00	2.87	2.80
Elder Healthcare	3.22	3.45	3.01
Credit counseling	2.38	2.35	2.77
Legal assistance for child support issues	2.62	2.84	2.60
Legal assistance for outstanding warrants/fines	2.33	2.74	2.69
Help developing social network	2.73	3.21	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	Yes
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**
VA Accessibility: In general, how accessible do you feel VA services are to homeless Veterans in the community?	4.09	3.56
VA Service Coordination: 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

Implementation Scale 1 = None , no steps taken to initiate implementation of the strategy. 2 = Low , in planning and/or initial minor steps taken. 3 = Moderate , significant steps taken but full implementation not achieved. 4 = High , strategy fully implemented.	Site Mean Score	VHA (nationwide) Mean Score**
Interagency Coordinating Body - Representatives from the VA and your agency meet formally to exchange information, do needs assessment, plan formal agreements, and promote access to services.	3.04	2.57
Co-location of Services - Services from the VA and your agency provided in one location.	2.16	1.84
Cross-Training - Staff training about the objectives, procedures and services of the VA and your agency.	2.48	1.93
Interagency Agreements/ Memoranda of Understanding - Formal and informal agreements between the VA and your agency covering such areas as collaboration, referrals, sharing client information, or coordinating services.	2.72	2.28
Interagency Client Tracking Systems/ Management Information Systems - Shared computer tracking systems that link the VA and your agency to promote information sharing, referrals, and client access.	2.08	1.60
Pooled/Joint Funding - Combining or layering funds from the VA and your agency to create new resources or services.	2.00	1.67
Uniform Applications, Eligibility Criteria, and Intake Assessments – Standardized form that the client fills out only once to apply for services at the VA and your agency.	2.52	1.80
Interagency Service Delivery Team/ Provider Coalition - Service team comprised of staff from the VA and your agency to assist clients with multiple needs.	2.68	2.19
Consolidation of Programs/ Agencies - Combining programs from the VA and your agency under one administrative structure to integrate service delivery.	2.60	1.99
Flexible Funding – 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.	2.08	1.63
Use of Special Waivers - 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.	2.32	1.68
System Integration Coordinator Position - A specific staff position focused on systems integration activities such as identifying agencies, staffing interagency meetings, and assisting with joint proposal development.	2.48	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*

Long-term, permanent housing	Two former transitional residences converted to permanent housing. Also, 35 Veterans (and families) will obtain permanent housing through our new HUD-VA Supported Housing program.
Help with finding a job or getting employment	All homeless Veterans are assessed for vocational/employment needs and referred to an appropriate program. Participation in a vocational/job program is a requisite for all non-disabled residents in our VA Grant and Per Diem programs.
Services for emotional or psychiatric problems	All homeless Veterans are assessed upon admission and on an on-going basis. Participation in mental health treatment is a requirement for residents in our VA Grant and Per Diem program. All Veterans at our on-site Salvation Army Northport Veterans Residence (SANVR) are clinically assessed and referred to VA programs like the Mental Health Clinic, Post-Traumatic Stress Disorder, Psychosocial Rehabilitation and Recovery Center.

*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.

Agency #1	United Veterans Beacon House (UVBH) staff from the Department of Labor Homeless Veterans Reintegration Program have helped our Veterans obtain vocational training and employment. In 2008, 103 Veterans were assessed, enrolled, and found employment. UVBH also provides support services to help Veterans stay in their jobs
Agency #2	(no agency identified)
Agency #3	(no agency identified)

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

Child care	Develop a child care needs assessment, to be integrated with initial intake information. Identify specific issues/needs of our homeless Veteran population. Identify resources that can address child care needs. Provide Veterans with resource list; assist Veterans in linkage with child care providers.
Credit counseling	Develop credit counseling needs assessment to be integrated with initial intake information. Identify specific issues/needs of our homeless Veteran population. Identify resources that can address credit counseling needs. Providing comprehensive presentation on addressing this issue. Provide Veterans with resource list, and referrals to credit counseling providers.
Legal assistance for outstanding warrants/fines	Develop legal assistance needs assessment, to be integrated with initial intake information. Identify specific issues/needs of our homeless population. Utilize existing legal assistance workshop, by providing comprehensive presentation on addressing this issue. Provide Veterans with resource list; assist Veterans in linkage with attorneys working on a pro bono basis.

***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.**