

## CHALENG 2008 Survey Results Summary

### VISN 12

**Site: VAH Hines, IL - 578 and VA Chicago HCS (VAMC Chicago (LS) - 537A4 and VAMC Chicago (WS) - 537)**

**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:** 948
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:** 21

#### 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	0
Transitional Housing Beds	0	114
Permanent Housing Beds	0	325

\*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: 88**

<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	3.69	3.17	3.70
Food	3.77	2.92	3.85
Clothing	3.53	3.42	3.61
Emergency (immediate) shelter	3.47	2.58	3.50
Halfway house or transitional living facility	3.56	2.50	3.35
Long-term, permanent housing	2.85	1.67	2.64
Detoxification from substances	4.03	2.58	3.59
Treatment for substance abuse	4.08	3.08	3.78
Services for emotional or psychiatric problems	3.97	3.25	3.63
Treatment for dual diagnosis	3.96	3.00	3.42
Family counseling	2.86	2.18	2.99
Medical services	3.99	4.08	3.96
Women's health care	2.31	3.42	3.09
Help with medication	3.88	3.58	3.79
Drop-in center or day program	3.05	2.67	3.08
AIDS/HIV testing/counseling	3.70	3.75	3.62
TB testing	4.09	4.00	3.96
TB treatment	3.32	3.92	3.59
Hepatitis C testing	3.52	4.00	3.73
Dental care	3.26	2.75	2.90
Eye care	3.27	3.17	3.25
Glasses	2.93	2.83	3.19
VA disability/pension	2.71	3.83	3.12
Welfare payments	2.36	2.91	2.78
SSI/SSD process	2.73	3.00	2.90
Guardianship (financial)	2.39	3.55	2.75
Help managing money	3.04	2.73	3.00
Job training	2.70	3.00	2.98
Help with finding a job or getting employment	2.88	3.00	3.12
Help getting needed documents or identification	3.53	2.82	3.52
Help with transportation	3.62	3.17	3.28
Education	3.31	3.36	3.13
Child care	2.55	2.45	2.49
Family reconciliation assistance	2.47	2.09	2.63
Discharge upgrade	2.74	2.00	2.91
Spiritual	3.96	3.27	3.51
Re-entry services for incarcerated Veterans	2.58	2.58	2.80
Elder Healthcare	3.08	2.83	3.01
Credit counseling	2.46	2.18	2.77
Legal assistance for child support issues	2.63	2.50	2.60
Legal assistance for outstanding warrants/fines	2.46	2.33	2.69
Help developing social network	3.08	2.75	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	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?	3.67	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.	2.40	2.57
<b>Co-location of Services</b> - Services from the VA and your agency provided in one location.	1.50	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.	2.50	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.	1.70	1.60
<b>Pooled/Joint Funding</b> - Combining or layering funds from the VA and your agency to create new resources or services.	1.50	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.	1.70	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.	2.10	2.19
<b>Consolidation of Programs/ Agencies</b> - Combining programs from the VA and your agency under one administrative structure to integrate service delivery.	1.70	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.	1.40	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.	1.70	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 implementing our new HUD-VA Supported Housing program. We also continue to work with community agencies on developing permanent housing units.
<b>Family counseling</b>	We continue work with local Vet Centers to make family counseling available to homeless Veterans.
<b>Spiritual</b>	We have made little headway in developing our relationship with VA Chaplain Services.

\*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>	Volunteers of America is working on developing a transitional living facility through our VA Grant and Per Diem program.
<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>	We will be implementing the HUD-VASH program at both Jesse Brown VA and Hines VA this year. Through this program eligible Veterans are placed in permanent housing units paid for by HUD.
<b>Transitional living facility or halfway house</b>	We have two agencies in Chicago which have received VA Grant and Per Diem Funding: Volunteers of America and Featherfist. Volunteers of America is working on developing a 50 bed transitional living facility.
<b>Dental care</b>	We need to develop community resources for dental care for homeless Veterans who are eligible through the Homeless Veterans Dental Program.

**\*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 12

#### Site: VAH Madison, WI - 607

**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: 33
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: 7

#### 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	0
Transitional Housing Beds	0	0
Permanent Housing Beds	7	697

\*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: 64**

<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	4.23	3.63	3.70
Food	4.13	3.80	3.85
Clothing	4.10	3.80	3.61
Emergency (immediate) shelter	4.23	3.24	3.50
Halfway house or transitional living facility	3.72	3.56	3.35
Long-term, permanent housing	2.64	2.67	2.64
Detoxification from substances	4.10	2.76	3.59
Treatment for substance abuse	3.89	3.16	3.78
Services for emotional or psychiatric problems	3.87	3.48	3.63
Treatment for dual diagnosis	3.32	3.17	3.42
Family counseling	2.68	3.30	2.99
Medical services	4.34	3.96	3.96
Women's health care	1.75	3.50	3.09
Help with medication	4.38	3.58	3.79
Drop-in center or day program	3.31	3.26	3.08
AIDS/HIV testing/counseling	3.20	3.83	3.62
TB testing	4.20	3.96	3.96
TB treatment	3.27	3.87	3.59
Hepatitis C testing	3.97	4.00	3.73
Dental care	3.33	2.83	2.90
Eye care	3.52	3.08	3.25
Glasses	3.31	3.17	3.19
VA disability/pension	3.21	3.70	3.12
Welfare payments	2.72	3.14	2.78
SSI/SSD process	2.96	3.50	2.90
Guardianship (financial)	3.09	3.23	2.75
Help managing money	3.04	3.29	3.00
Job training	2.78	3.60	2.98
Help with finding a job or getting employment	3.17	3.71	3.12
Help getting needed documents or identification	3.69	3.72	3.52
Help with transportation	4.07	3.29	3.28
Education	3.30	3.58	3.13
Child care	2.67	2.63	2.49
Family reconciliation assistance	2.65	3.20	2.63
Discharge upgrade	2.63	3.67	2.91
Spiritual	3.28	3.70	3.51
Re-entry services for incarcerated Veterans	3.00	3.00	2.80
Elder Healthcare	3.50	3.48	3.01
Credit counseling	2.44	3.30	2.77
Legal assistance for child support issues	2.75	3.25	2.60
Legal assistance for outstanding warrants/fines	2.70	3.25	2.69
Help developing social network	3.48	3.43	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)	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	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?	3.97	3.56
<b>VA Service Coordination:</b> Rate the ability of the VA to coordinate clinical services for homeless Veterans with your agency.	4.06	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.	3.00	2.57
<b>Co-location of Services</b> - Services from the VA and your agency provided in one location.	2.10	1.84
<b>Cross-Training</b> - Staff training about the objectives, procedures and services of the VA and your agency.	2.27	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.	2.38	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.	2.00	1.60
<b>Pooled/Joint Funding</b> - Combining or layering funds from the VA and your agency to create new resources or services.	2.04	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.	1.92	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.	2.57	2.19
<b>Consolidation of Programs/ Agencies</b> - Combining programs from the VA and your agency under one administrative structure to integrate service delivery.	2.21	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.	1.79	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.	1.65	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.	1.67	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 submitted a "Housing First" grant for long-term permanent housing.
<b>Emergency (immediate) shelter</b>	Porchlight, Inc. added twenty additional immediate shelter beds this year.
<b>Treatment for substance abuse</b>	Federally Qualified Health Clinic (FQHC) getting ready to start up in rural Wisconsin. Services will include mental health and substance abuse treatment services for low-income individuals.

**\*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>	Porchlight, Inc. added twenty additional immediate shelter beds this year.
<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>	This need is the highest priority in our homeless consortium. We reviewed many grants addressing permanent housing needs.
<b>Emergency (immediate) shelter</b>	Our men's drop-in shelter recently added 20 year-round overflow beds. Will work with Porchlight, Inc. to address this need.
<b>Treatment for substance abuse</b>	VA mental health and substance abuse staffing have increased in the past few months so the expectation is for more services in this area, especially outpatient. Will work, both within the VA and with our community agencies to support this need.

\*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 12

#### Site: VAMC Iron Mountain, MI - 585

**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: 5
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: 1

#### 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	0
Transitional Housing Beds	59	0
Permanent Housing Beds	0	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: 23**

<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	5.00	3.24	3.70
Food	5.00	3.52	3.85
Clothing	5.00	3.57	3.61
Emergency (immediate) shelter	5.00	3.65	3.50
Halfway house or transitional living facility	5.00	2.71	3.35
Long-term, permanent housing	1.00	2.71	2.64
Detoxification from substances	5.00	3.38	3.59
Treatment for substance abuse	5.00	3.57	3.78
Services for emotional or psychiatric problems	5.00	3.67	3.63
Treatment for dual diagnosis	5.00	3.43	3.42
Family counseling	5.00	3.52	2.99
Medical services	5.00	3.86	3.96
Women's health care	5.00	3.55	3.09
Help with medication	5.00	3.67	3.79
Drop-in center or day program	1.00	2.19	3.08
AIDS/HIV testing/counseling	5.00	3.45	3.62
TB testing	5.00	3.62	3.96
TB treatment	5.00	3.43	3.59
Hepatitis C testing	5.00	3.60	3.73
Dental care	5.00	2.33	2.90
Eye care	5.00	2.48	3.25
Glasses	5.00	2.60	3.19
VA disability/pension	5.00	3.57	3.12
Welfare payments	5.00	3.24	2.78
SSI/SSD process	5.00	3.29	2.90
Guardianship (financial)	5.00	2.95	2.75
Help managing money	5.00	3.10	3.00
Job training	5.00	3.00	2.98
Help with finding a job or getting employment	5.00	2.86	3.12
Help getting needed documents or identification	5.00	3.10	3.52
Help with transportation	5.00	2.29	3.28
Education	5.00	3.10	3.13
Child care	5.00	2.81	2.49
Family reconciliation assistance	3.00	2.89	2.63
Discharge upgrade	5.00	3.16	2.91
Spiritual	5.00	3.63	3.51
Re-entry services for incarcerated Veterans	3.00	2.94	2.80
Elder Healthcare	5.00	3.60	3.01
Credit counseling	5.00	2.90	2.77
Legal assistance for child support issues	1.00	2.55	2.60
Legal assistance for outstanding warrants/fines	5.00	2.55	2.69
Help developing social network	5.00	3.05	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	Yes
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?	3.89	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.	2.54	2.57
<b>Co-location of Services</b> - Services from the VA and your agency provided in one location.	1.46	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.	1.92	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.	1.15	1.60
<b>Pooled/Joint Funding</b> - Combining or layering funds from the VA and your agency to create new resources or services.	1.15	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.	1.38	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.	1.69	2.19
<b>Consolidation of Programs/ Agencies</b> - Combining programs from the VA and your agency under one administrative structure to integrate service delivery.	1.92	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.	1.31	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.	1.46	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.	1.92	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>Job training</b>	Our Iron Mountain VA Compensated Work Therapy program is in its start-up phase.
<b>Halfway house or transitional living facility</b>	We have informal arrangements with the Toma and Milwaukee VA Domiciliaries and will pursue formal agreements in 2009.
<b>Help with transportation</b>	We utilize Disabled American Veterans. A voucher program (from voluntary funds) is being expanded to include bus tickets and cab services. A memorandum of understanding is being explored with a transportation company to get Veterans from a homeless shelter to the closest VA Community Based Outpatient Clinic 60 miles away.

**\*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>Transitional living facility or halfway house</b>	Continue plan of developing formal agreements with VA domiciliaries in Tomah and Milwaukee. as well as D. J. Jacobetti Home for Veterans in Marquette.
<b>Long-term, permanent housing</b>	Develop a formal agreement with Shelter Plus Care program.
<b>Help with transportation</b>	Finalize VA voucher/fund program that can be utilized for bus tickets or transportation service (i.e. cab fare). Continue to pursue MOU with local transportation company for Rhinelander CBOC homeless Veterans who need to get to a shelter which is 60+ miles away.

\*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 12

**Site: VAMC Milwaukee, WI - 695**

**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:** 216
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:** 3

#### 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	25
Transitional Housing Beds	173	40
Permanent Housing Beds	70	140

\*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: 174**

<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	4.05	3.40	3.70
Food	3.87	3.69	3.85
Clothing	3.62	3.62	3.61
Emergency (immediate) shelter	3.67	3.42	3.50
Halfway house or transitional living facility	3.64	2.92	3.35
Long-term, permanent housing	2.42	2.32	2.64
Detoxification from substances	3.88	3.11	3.59
Treatment for substance abuse	4.10	3.24	3.78
Services for emotional or psychiatric problems	3.94	3.04	3.63
Treatment for dual diagnosis	3.56	2.98	3.42
Family counseling	2.74	2.94	2.99
Medical services	4.08	3.70	3.96
Women's health care	2.85	3.19	3.09
Help with medication	4.14	3.15	3.79
Drop-in center or day program	2.97	2.78	3.08
AIDS/HIV testing/counseling	3.38	3.27	3.62
TB testing	4.06	3.72	3.96
TB treatment	3.44	3.64	3.59
Hepatitis C testing	3.70	3.53	3.73
Dental care	3.35	2.84	2.90
Eye care	3.51	2.77	3.25
Glasses	3.25	2.68	3.19
VA disability/pension	2.73	3.14	3.12
Welfare payments	2.45	2.99	2.78
SSI/SSD process	2.39	2.79	2.90
Guardianship (financial)	2.48	2.89	2.75
Help managing money	3.15	2.83	3.00
Job training	2.74	2.96	2.98
Help with finding a job or getting employment	3.00	3.00	3.12
Help getting needed documents or identification	3.54	3.20	3.52
Help with transportation	3.03	2.87	3.28
Education	3.13	3.17	3.13
Child care	2.44	2.30	2.49
Family reconciliation assistance	2.64	2.48	2.63
Discharge upgrade	2.94	2.79	2.91
Spiritual	3.25	3.01	3.51
Re-entry services for incarcerated Veterans	2.73	2.77	2.80
Elder Healthcare	2.96	2.84	3.01
Credit counseling	2.96	2.86	2.77
Legal assistance for child support issues	2.73	2.44	2.60
Legal assistance for outstanding warrants/fines	2.78	2.30	2.69
Help developing social network	3.00	2.78	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**
<b>VA Accessibility:</b> In general, how accessible do you feel VA services are to homeless Veterans in the community?	3.34	3.56
<b>VA Service Coordination:</b> Rate the ability of the VA to coordinate clinical services for homeless Veterans with your agency.	3.41	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.	2.23	2.57
<b>Co-location of Services</b> - Services from the VA and your agency provided in one location.	1.94	1.84
<b>Cross-Training</b> - Staff training about the objectives, procedures and services of the VA and your agency.	1.83	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.	2.14	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.	1.55	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.	1.64	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.	1.91	2.19
<b>Consolidation of Programs/ Agencies</b> - Combining programs from the VA and your agency under one administrative structure to integrate service delivery.	1.74	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.	1.63	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.	1.45	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.	1.61	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>	Milwaukee received 70 HUD-VA Supported Housing vouchers for 2008-2009. Local provider began new construction on 20 units of permanent housing.
<b>Help with finding a job or getting employment</b>	Referral to VA Compensated Work Therapy and Supported Employment Programs increased by 20% from the previous year.
<b>Dental Care</b>	Local non-VA providers served 21 Veterans.

\*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>	Housing Authority of the City of Milwaukee (HACM) is a partner which expedited the Section 8 vouchers for our HUD-VA Supported Housing program.
<b>Agency #2</b>	Wisconsin Veterans Stand Down, Inc. took a lead in providing dental care to 21 Veterans who were not eligible for VA care.
<b>Agency #3</b>	(no agency identified)

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

<b>Long-term, permanent housing</b>	Make use of 70 available HUD-VASH vouchers in Milwaukee and Racine. Collaborate with Guest House of Milwaukee to increase access to permanent, supportive housing beds.
<b>Emergency (immediate) shelter</b>	Develop formal and informal agreements with providers of emergency shelter in Milwaukee, Racine and Brown counties.
<b>Job training</b>	Continue efforts to expand access to VA Compensated Work Therapy/Supported Employment; increase use of Department of Labor Homeless Veteran Reintegration Program.

**\*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 12

#### Site: VAMC North Chicago, IL - 556

**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:** 120
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	65
Transitional Housing Beds	95	0
Permanent Housing Beds	0	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	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: 40**

<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	4.00	3.41	3.70
Food	4.47	3.96	3.85
Clothing	4.35	3.70	3.61
Emergency (immediate) shelter	4.12	3.05	3.50
Halfway house or transitional living facility	4.59	3.22	3.35
Long-term, permanent housing	3.69	2.57	2.64
Detoxification from substances	4.53	3.57	3.59
Treatment for substance abuse	4.41	3.50	3.78
Services for emotional or psychiatric problems	4.12	3.64	3.63
Treatment for dual diagnosis	3.76	3.48	3.42
Family counseling	3.35	3.27	2.99
Medical services	4.29	4.00	3.96
Women's health care	3.50	3.52	3.09
Help with medication	4.24	3.74	3.79
Drop-in center or day program	3.60	3.64	3.08
AIDS/HIV testing/counseling	4.06	3.73	3.62
TB testing	4.29	3.91	3.96
TB treatment	3.88	3.91	3.59
Hepatitis C testing	4.29	4.05	3.73
Dental care	3.29	3.36	2.90
Eye care	3.94	3.09	3.25
Glasses	4.12	3.00	3.19
VA disability/pension	2.60	3.64	3.12
Welfare payments	3.00	3.45	2.78
SSI/SSD process	3.33	3.59	2.90
Guardianship (financial)	3.00	3.32	2.75
Help managing money	3.88	3.35	3.00
Job training	3.33	2.91	2.98
Help with finding a job or getting employment	4.29	3.09	3.12
Help getting needed documents or identification	4.35	3.41	3.52
Help with transportation	4.24	3.00	3.28
Education	3.63	3.13	3.13
Child care	2.86	2.48	2.49
Family reconciliation assistance	2.79	2.64	2.63
Discharge upgrade	3.53	2.95	2.91
Spiritual	4.12	3.57	3.51
Re-entry services for incarcerated Veterans	3.20	2.82	2.80
Elder Healthcare	3.07	3.27	3.01
Credit counseling	3.27	2.74	2.77
Legal assistance for child support issues	3.00	2.77	2.60
Legal assistance for outstanding warrants/fines	2.93	2.86	2.69
Help developing social network	3.94	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:**

<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)	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	No

**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?	3.91	3.56
<b>VA Service Coordination:</b> Rate the ability of the VA to coordinate clinical services for homeless Veterans with your agency.	3.74	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.	2.05	2.57
<b>Co-location of Services</b> - Services from the VA and your agency provided in one location.	1.70	1.84
<b>Cross-Training</b> - Staff training about the objectives, procedures and services of the VA and your agency.	1.65	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.	2.30	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.	1.17	1.60
<b>Pooled/Joint Funding</b> - Combining or layering funds from the VA and your agency to create new resources or services.	1.37	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.	1.24	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.	1.95	2.19
<b>Consolidation of Programs/ Agencies</b> - Combining programs from the VA and your agency under one administrative structure to integrate service delivery.	1.68	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.	1.32	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.	1.39	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.	1.32	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>	About 37 units of permanent housing may come online soon. We are still working with Lake County Coalition for the Homeless and Habitat for Humanity.
<b>Emergency (immediate) shelter</b>	We are negotiation with P.A.D.S. (Public Action to Deliver Shelter) to develop 30 year-round, Veteran-specific emergency beds at our VA Medical Center.
<b>Help managing money</b>	I-Plus provides money management services to homeless Veterans. The agency maintains an office at VA Medical Center North Chicago to work closely with our staff.

**\*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>	P.A.D.S. (Public Action to Deliver Shelter) provides year-round shelter for homeless Veterans.
<b>Agency #2</b>	Habitat for Humanity is developing permanent family housing, possibly at a military base that is closing.
<b>Agency #3</b>	I-Plus provides money management services assistance and protective payee services for chronically homeless, mentally ill and dually-diagnosed Veterans.

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

<b>Long-term, permanent housing</b>	North Chicago VAMC will be receiving 35 HUD-VASH vouchers, and is in the process of hiring a social worker to work in that program. The coalition will continue to support developing more permanent housing, specifically 15 to 27 family units.
<b>Emergency (immediate) shelter</b>	Negotiations are nearing completion for 30 Veteran-specific beds. These would be year-round located on the North Chicago VAMC in a building leased to PADS (Public Action to Deliver Shelter).
<b>Job training</b>	Ensure full utilization of the vocational rehabilitation unit at North Chicago VAMC (including VA Compensated Work Therapy).

\*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 12

#### Site: VAMC Tomah, WI - 676

**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: 575
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	0	10
Transitional Housing Beds	9	0
Permanent Housing Beds	35	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	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: 73**

<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	4.43	3.58	3.70
Food	4.56	3.83	3.85
Clothing	3.79	3.75	3.61
Emergency (immediate) shelter	4.06	3.00	3.50
Halfway house or transitional living facility	3.96	3.25	3.35
Long-term, permanent housing	2.55	2.67	2.64
Detoxification from substances	4.10	3.00	3.59
Treatment for substance abuse	4.27	3.08	3.78
Services for emotional or psychiatric problems	3.98	3.27	3.63
Treatment for dual diagnosis	3.54	3.18	3.42
Family counseling	2.74	2.82	2.99
Medical services	4.05	3.91	3.96
Women's health care	3.50	3.73	3.09
Help with medication	4.16	3.91	3.79
Drop-in center or day program	3.29	2.55	3.08
AIDS/HIV testing/counseling	3.34	3.45	3.62
TB testing	4.37	3.64	3.96
TB treatment	3.84	3.45	3.59
Hepatitis C testing	4.00	3.55	3.73
Dental care	3.25	2.92	2.90
Eye care	3.83	3.33	3.25
Glasses	3.49	3.27	3.19
VA disability/pension	3.28	3.82	3.12
Welfare payments	2.47	3.00	2.78
SSI/SSD process	2.78	2.82	2.90
Guardianship (financial)	3.03	3.00	2.75
Help managing money	3.51	3.00	3.00
Job training	2.70	3.09	2.98
Help with finding a job or getting employment	3.04	3.09	3.12
Help getting needed documents or identification	3.60	3.73	3.52
Help with transportation	2.98	2.55	3.28
Education	2.96	3.45	3.13
Child care	2.46	2.18	2.49
Family reconciliation assistance	2.07	2.45	2.63
Discharge upgrade	2.59	3.09	2.91
Spiritual	3.45	3.27	3.51
Re-entry services for incarcerated Veterans	2.50	2.64	2.80
Elder Healthcare	2.89	3.27	3.01
Credit counseling	3.05	3.45	2.77
Legal assistance for child support issues	2.47	3.18	2.60
Legal assistance for outstanding warrants/fines	2.82	3.00	2.69
Help developing social network	2.66	3.17	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	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?	3.86	3.56
<b>VA Service Coordination:</b> Rate the ability of the VA to coordinate clinical services for homeless Veterans with your agency.	4.15	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.	2.90	2.57
<b>Co-location of Services</b> - Services from the VA and your agency provided in one location.	2.00	1.84
<b>Cross-Training</b> - Staff training about the objectives, procedures and services of the VA and your agency.	2.50	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.	2.40	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.	2.30	1.60
<b>Pooled/Joint Funding</b> - Combining or layering funds from the VA and your agency to create new resources or services.	2.10	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.	2.30	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.	2.50	2.19
<b>Consolidation of Programs/ Agencies</b> - Combining programs from the VA and your agency under one administrative structure to integrate service delivery.	2.33	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.	2.00	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.	2.30	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.	2.20	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>	HUD-VA Supported Housing coordinator hired in August 2008 and is working with local public housing authority. Three vouchers have been issued with referrals increasing.
<b>Dental Care</b>	Eleven Veterans were served under the Homeless Veterans Dental Program (HVDP).
<b>Help with finding a job or getting employment</b>	Our VA Supported Employment program is "up and running" with three new master's level vocational rehabilitation counselors hired. It is working closely with Veterans in VA Grant and Per Diem. Also, Wisconsin Department of Workforce Development staff work on our VA campus to help Veterans.

**\*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 Assistance Center assists with vocational rehabilitation, job searches, and job placement.
<b>Agency #2</b>	Wisconsin Department of Veterans Affairs assists with vocational rehabilitation, including job searches and job placement.
<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 program coordinator hired in August. HUD-VASH which will increase Veteran access to permanent housing. Relationship with local housing authority will also result in increase access to city of Tomah permanent housing programs.
<b>Help with transportation</b>	VA staff are writing letters of support in favor of the local "Supplemental Transportation Rural Assistance Program" (STRAP). This program will increase transit service to rural areas and promote coordination between specialized and public transportation in rural areas.
<b>Dental care</b>	Our expanding homeless program staff will identify eligible Veterans for VA and non-VA dental services. Voluntary Service manages a fund for Veterans not eligible for VA dental care, including the Homeless Veterans Dental Program.

**\*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.**