

CHALENG 2008 Survey Results Summary

VISN 15

Site: VA Eastern Kansas HCS (VAMC Leavenworth - 677A4)

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:** 187
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	2
Transitional Housing Beds	60	20
Permanent Housing Beds	132	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: 188

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	4.10	3.81	3.70
Food	4.17	3.86	3.85
Clothing	3.91	3.71	3.61
Emergency (immediate) shelter	3.86	2.25	3.50
Halfway house or transitional living facility	3.35	3.33	3.35
Long-term, permanent housing	2.53	2.55	2.64
Detoxification from substances	4.11	3.14	3.59
Treatment for substance abuse	4.32	4.10	3.78
Services for emotional or psychiatric problems	4.07	4.19	3.63
Treatment for dual diagnosis	3.62	4.05	3.42
Family counseling	2.96	3.24	2.99
Medical services	4.11	3.90	3.96
Women's health care	2.86	3.81	3.09
Help with medication	4.10	3.48	3.79
Drop-in center or day program	3.21	2.71	3.08
AIDS/HIV testing/counseling	3.59	3.76	3.62
TB testing	4.40	4.24	3.96
TB treatment	3.51	4.14	3.59
Hepatitis C testing	3.95	4.14	3.73
Dental care	3.59	2.43	2.90
Eye care	3.26	2.70	3.25
Glasses	2.87	2.68	3.19
VA disability/pension	2.65	3.90	3.12
Welfare payments	2.17	3.76	2.78
SSI/SSD process	2.51	3.52	2.90
Guardianship (financial)	2.58	2.86	2.75
Help managing money	2.99	3.00	3.00
Job training	2.64	3.48	2.98
Help with finding a job or getting employment	2.95	3.95	3.12
Help getting needed documents or identification	3.46	3.48	3.52
Help with transportation	2.83	1.55	3.28
Education	2.89	3.38	3.13
Child care	2.04	2.57	2.49
Family reconciliation assistance	2.42	2.81	2.63
Discharge upgrade	2.96	3.00	2.91
Spiritual	3.91	3.86	3.51
Re-entry services for incarcerated Veterans	2.55	2.90	2.80
Elder Healthcare	2.72	3.52	3.01
Credit counseling	2.37	2.65	2.77
Legal assistance for child support issues	2.16	2.33	2.60
Legal assistance for outstanding warrants/fines	2.46	2.59	2.69
Help developing social network	2.83	3.10	3.10

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

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

1. Existing Agreements with Community Service Types:

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

2. Community Ratings of VA/Community Integration*

Integration Scale: 1 (low) to 5 (high)	Site Mean Score	VHA (nationwide) Mean Score**
VA Accessibility: In general, how accessible do you feel VA services are to homeless Veterans in the community?	3.95	3.56
VA Service Coordination: Rate the ability of the VA to coordinate clinical services for homeless Veterans with your agency.	4.10	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.	3.21	2.57
Co-location of Services - Services from the VA and your agency provided in one location.	2.38	1.84
Cross-Training - Staff training about the objectives, procedures and services of the VA and your agency.	2.31	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.	3.00	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.	1.54	1.60
Pooled/Joint Funding - Combining or layering funds from the VA and your agency to create new resources or services.	2.08	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.	3.09	2.19
Consolidation of Programs/ Agencies - Combining programs from the VA and your agency under one administrative structure to integrate service delivery.	2.55	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.	1.55	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.	1.45	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.	2.18	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 were approved for 105 HUD-VA Supported Housing vouchers. Also a HUD Shelter Plus Care grant was approved for 20 vouchers.
Help with transportation	Social work intern compiled list of available public transportation routes
Emergency (immediate) shelter	Assisted Independence (parent organization of our VA GPD City of Refuge program) is interested in developing a "Safe Haven" immediate shelter.

*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	The City of Leavenworth and its Public Housing Authority initiated a HUD Shelter Plus Care program -- then partnered with us to designate 105 Housing Choice vouchers for the HUD-VA Supported Housing program.
Agency #2	(no agency identified)
Agency #3	(no agency identified)

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

Help with transportation	Add additional lines for the City of Refuge Shuttle. City of Refuge will continue to explore funding options to add additional vehicles and routes to metro area.
Long-term, permanent housing	City of Refuge and Mental Health Assoc. of Heartland will collaborate on development of an apartment complex with on-site supportive services and housing for homeless mentally ill.
Emergency (immediate) shelter	Continue to research "Safe Haven" programs and funding sources. City of Refuge will explore option for contracting "Safe Haven" beds in their current facility.

***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 15

Site: VAH Columbia, MO - 543

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:** 100
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:** 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	20
Transitional Housing Beds	29	40
Permanent Housing Beds	35	35

*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: 127

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	3.62	3.09	3.70
Food	3.59	3.24	3.85
Clothing	3.48	3.30	3.61
Emergency (immediate) shelter	3.62	2.65	3.50
Halfway house or transitional living facility	3.84	2.84	3.35
Long-term, permanent housing	3.10	2.45	2.64
Detoxification from substances	4.00	3.43	3.59
Treatment for substance abuse	4.19	3.61	3.78
Services for emotional or psychiatric problems	3.77	3.49	3.63
Treatment for dual diagnosis	3.55	3.32	3.42
Family counseling	3.32	3.12	2.99
Medical services	4.05	3.64	3.96
Women's health care	2.54	3.32	3.09
Help with medication	3.65	3.34	3.79
Drop-in center or day program	2.88	2.87	3.08
AIDS/HIV testing/counseling	3.33	3.30	3.62
TB testing	3.83	3.49	3.96
TB treatment	3.40	3.31	3.59
Hepatitis C testing	3.78	3.46	3.73
Dental care	2.10	2.37	2.90
Eye care	2.48	2.47	3.25
Glasses	2.10	2.52	3.19
VA disability/pension	2.82	3.35	3.12
Welfare payments	2.29	3.03	2.78
SSI/SSD process	2.69	2.96	2.90
Guardianship (financial)	2.80	2.85	2.75
Help managing money	3.19	2.82	3.00
Job training	3.32	3.15	2.98
Help with finding a job or getting employment	3.53	3.15	3.12
Help getting needed documents or identification	3.63	3.26	3.52
Help with transportation	3.21	2.16	3.28
Education	2.76	2.75	3.13
Child care	2.29	2.30	2.49
Family reconciliation assistance	2.62	2.62	2.63
Discharge upgrade	2.75	2.93	2.91
Spiritual	3.82	3.53	3.51
Re-entry services for incarcerated Veterans	2.94	2.74	2.80
Elder Healthcare	3.14	2.98	3.01
Credit counseling	3.06	2.56	2.77
Legal assistance for child support issues	2.80	2.36	2.60
Legal assistance for outstanding warrants/fines	2.27	2.22	2.69
Help developing social network	3.11	2.67	3.10

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

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

1. Existing Agreements with Community Service Types:

Service Types	Local VA has existing collaborative agreement with this agency type?
Correctional Facilities (Jails, prisons, courts)	Yes
Psychiatric/substance abuse inpatient (hospitals, wards)	Yes
Nursing homes	Yes
Faith-based organizations	Yes
Agencies that provide child care	No
Agencies that provide legal assistance for child support issues	No
Agencies that provide legal assistance for outstanding warrants/fines	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?	3.47	3.56
VA Service Coordination: Rate the ability of the VA to coordinate clinical services for homeless Veterans with your agency.	3.59	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.	2.28	2.57
Co-location of Services - Services from the VA and your agency provided in one location.	1.59	1.84
Cross-Training - Staff training about the objectives, procedures and services of the VA and your agency.	1.68	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.	2.00	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.	1.61	1.60
Pooled/Joint Funding - Combining or layering funds from the VA and your agency to create new resources or services.	1.64	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.	1.58	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.	1.98	2.19
Consolidation of Programs/ Agencies - Combining programs from the VA and your agency under one administrative structure to integrate service delivery.	1.67	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.	1.60	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.	1.63	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.	1.75	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*

Re-entry services for incarcerated veterans	We have a close working relationship with our designated Missouri Veterans Commission whose staff visits prisons. We have a new staff to provide re-entry services to incarcerated Veterans.
Halfway house or transitional living facility	The Phoenix Program VA Grant Per Diem Program is now open and running at full capacity.
Long-term, permanent housing	We received 35 HUD-VA Supported Housing vouchers and are using about 80% of them. We are still screen Veterans for VASH eligibility.

***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	Phoenix Programs was awarded a VA Per Diem Only grant to provide transitional housing and supportive services.
Agency #2	Columbia Housing Authority (CHA) partnered with our VA in allocating HUD-VA Supported Housing vouchers. They have gone to great lengths to meet the unique needs of our Veterans.
Agency #3	Welcome Home contracts with our VA to provide transitional housing for Veterans.

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

Emergency (immediate) shelter	Re-establish working relationship with local Salvation Army. Hold regular meetings/site visits with Salvation Army. Discuss possibility of utilizing Welcome Home as emergency shelter.
Long-term, permanent housing	Use all allocated HUD-VASH vouchers as a means to show need and hopefully receive additional vouchers in FY 2009. Hire two HUD-VASH case managers.
Help with transportation	Research how to obtain donated bikes. Research funding options for additional bus passes. Collaborate with the Mid-Missouri Transportation Alliance on a quarterly basis as a means to stay informed of local transport initiatives.

***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 15

Site: VAM&ROC Wichita, KS - 452

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: 375**
- 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: 9**

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	75
Transitional Housing Beds	0	50
Permanent Housing Beds	35	45

*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: 62

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	4.21	3.07	3.70
Food	3.25	3.69	3.85
Clothing	3.62	3.54	3.61
Emergency (immediate) shelter	3.19	2.69	3.50
Halfway house or transitional living facility	3.07	2.62	3.35
Long-term, permanent housing	2.42	2.10	2.64
Detoxification from substances	3.96	2.79	3.59
Treatment for substance abuse	3.93	2.86	3.78
Services for emotional or psychiatric problems	4.20	3.10	3.63
Treatment for dual diagnosis	3.79	2.97	3.42
Family counseling	3.25	2.66	2.99
Medical services	4.34	3.38	3.96
Women's health care	2.88	2.93	3.09
Help with medication	4.29	3.10	3.79
Drop-in center or day program	3.52	2.79	3.08
AIDS/HIV testing/counseling	3.89	3.07	3.62
TB testing	4.14	3.34	3.96
TB treatment	3.92	3.44	3.59
Hepatitis C testing	4.00	3.37	3.73
Dental care	2.03	2.21	2.90
Eye care	3.48	2.57	3.25
Glasses	3.18	2.56	3.19
VA disability/pension	3.04	3.33	3.12
Welfare payments	2.54	2.71	2.78
SSI/SSD process	2.64	2.57	2.90
Guardianship (financial)	2.56	2.71	2.75
Help managing money	2.60	2.54	3.00
Job training	2.26	2.75	2.98
Help with finding a job or getting employment	2.04	2.76	3.12
Help getting needed documents or identification	3.83	2.76	3.52
Help with transportation	3.35	2.59	3.28
Education	3.04	2.45	3.13
Child care	2.76	2.36	2.49
Family reconciliation assistance	2.75	2.52	2.63
Discharge upgrade	3.48	2.56	2.91
Spiritual	3.35	2.82	3.51
Re-entry services for incarcerated Veterans	2.87	2.43	2.80
Elder Healthcare	3.00	2.82	3.01
Credit counseling	2.74	2.25	2.77
Legal assistance for child support issues	2.58	2.21	2.60
Legal assistance for outstanding warrants/fines	2.26	2.43	2.69
Help developing social network	2.65	2.64	3.10

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

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

1. Existing Agreements with Community Service Types:

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

2. Community Ratings of VA/Community Integration*

Integration Scale: 1 (low) to 5 (high)	Site Mean Score	VHA (nationwide) Mean Score**
VA Accessibility: In general, how accessible do you feel VA services are to homeless Veterans in the community?	3.63	3.56
VA Service Coordination: Rate the ability of the VA to coordinate clinical services for homeless Veterans with your agency.	3.86	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.	1.54	1.84
Cross-Training - Staff training about the objectives, procedures and services of the VA and your agency.	1.77	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.	1.84	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.	1.42	1.60
Pooled/Joint Funding - Combining or layering funds from the VA and your agency to create new resources or services.	1.44	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.	1.56	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.	1.92	2.19
Consolidation of Programs/ Agencies - Combining programs from the VA and your agency under one administrative structure to integrate service delivery.	1.80	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.	1.36	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.	1.56	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.	1.56	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	In January 2009, 64 "Housing First" permanent housing units will open.
Halfway house or transitional living facility	We have a new memorandum of understanding with a local half-way house to serve eight Veterans at a time.
Help with transportation	We worked with our local VA to procure more bus tickets for FY 2008 and received 500 free bus tickets for our Stand Down.

*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	Emmanuel House of Serenity operates a house where Veterans can rent rooms until they are ready for their own apartment or transition into a VA-sponsored program.
Agency #2	City of Wichita Housing Authority partnered with our VA to secure vouchers for our HUD-VA Supported Housing program and instituted a Veteran-preference policy at a new permanent housing development.
Agency #3	Interfaith Ministries worked at making their new apartment project available for Veterans using HUD-VA Supported Housing vouchers. They worked with VA and the apartment management company to allow Veterans with past criminal histories to rent there.

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

<p>Long-term, permanent housing</p>	<p>HUD-VASH still has 17 voucher that are spoken for and not placed. Have requested at least 35 more for FY 2009. Beginning 2009, city and county have approved 64 "housing first" vouchers with Veterans (chronically homeless) having preference. Continue to work with city to place in placing Veterans, both chronic and new.</p>
<p>Emergency (immediate) shelter</p>	<p>Continue to work with, and support faith-based organization in their efforts to provide additional emergency shelter beds in the winter months.</p>
<p>Transitional living facility or halfway house</p>	<p>Continue MOUs with halfway houses and work to establish more. Encourage Veterans coming out of residential care to move into VA Grant Per Diem programs. Encourage agency that turned in GPD application late last year, to apply in 2009.</p>

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

CHALENG 2008 Survey Results Summary

VISN 15

Site: VAMC Kansas City, MO - 589

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:** 1,630
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:** 14

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	5
Transitional Housing Beds	79	10
Permanent Housing Beds	82	20

*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: 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	4.55	3.23	3.70
Food	4.55	3.44	3.85
Clothing	4.22	3.24	3.61
Emergency (immediate) shelter	4.55	2.57	3.50
Halfway house or transitional living facility	4.71	2.62	3.35
Long-term, permanent housing	3.58	2.27	2.64
Detoxification from substances	4.68	2.91	3.59
Treatment for substance abuse	4.67	3.08	3.78
Services for emotional or psychiatric problems	4.68	2.97	3.63
Treatment for dual diagnosis	4.65	2.91	3.42
Family counseling	4.11	2.56	2.99
Medical services	4.61	3.21	3.96
Women's health care	3.18	2.64	3.09
Help with medication	4.84	2.94	3.79
Drop-in center or day program	4.09	2.66	3.08
AIDS/HIV testing/counseling	4.59	3.18	3.62
TB testing	4.60	3.32	3.96
TB treatment	4.55	3.15	3.59
Hepatitis C testing	4.48	3.29	3.73
Dental care	4.35	2.38	2.90
Eye care	3.73	2.74	3.25
Glasses	3.60	2.80	3.19
VA disability/pension	3.85	2.94	3.12
Welfare payments	3.42	2.66	2.78
SSI/SSD process	3.75	2.67	2.90
Guardianship (financial)	3.68	2.66	2.75
Help managing money	4.12	2.78	3.00
Job training	3.95	2.80	2.98
Help with finding a job or getting employment	4.10	2.91	3.12
Help getting needed documents or identification	4.45	3.00	3.52
Help with transportation	4.02	2.64	3.28
Education	4.08	2.77	3.13
Child care	3.53	2.26	2.49
Family reconciliation assistance	3.72	2.36	2.63
Discharge upgrade	3.97	2.62	2.91
Spiritual	4.19	3.09	3.51
Re-entry services for incarcerated Veterans	4.00	2.39	2.80
Elder Healthcare	4.06	2.34	3.01
Credit counseling	3.52	2.50	2.77
Legal assistance for child support issues	3.47	2.36	2.60
Legal assistance for outstanding warrants/fines	3.87	2.35	2.69
Help developing social network	4.31	2.64	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**
VA Accessibility: In general, how accessible do you feel VA services are to homeless Veterans in the community?	3.21	3.56
VA Service Coordination: Rate the ability of the VA to coordinate clinical services for homeless Veterans with your agency.	3.43	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.	2.00	2.57
Co-location of Services - Services from the VA and your agency provided in one location.	1.32	1.84
Cross-Training - Staff training about the objectives, procedures and services of the VA and your agency.	1.92	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.	1.92	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.	1.57	1.60
Pooled/Joint Funding - Combining or layering funds from the VA and your agency to create new resources or services.	1.38	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.	1.58	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.	1.79	2.19
Consolidation of Programs/ Agencies - Combining programs from the VA and your agency under one administrative structure to integrate service delivery.	1.81	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.	1.38	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.	1.28	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.	1.64	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 70 HUD-VA Supported Housing vouchers. We are working with HUD, Housing Authority of Kansas City and local property owners to increase long-term permanent housing.
Emergency (immediate) shelter	We use existing community emergency shelters.
Services for emotional or psychiatric problems	We paid for a local provider to house several mentally ill, homeless 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.

Agency #1	The Salvation Army added 20 additional beds for transitional housing through a VA Grant and Per Diem capital grant.
Agency #2	Benilde Hall agreed to offer ten new beds for seriously ill homeless Veterans.
Agency #3	Homeless Services Coalition of Kansas City supports VA homeless initiatives with education meeting and planning activities.

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

Long-term, permanent housing	Utilize additional staff provided through HUD-VASH program to identify and place money Veterans in need of long term, permanent housing.
Glasses	Identify local, national or VA sources. Once identified, seek to establish relationships which will benefit homeless Veterans needing glasses.
Legal assistance for outstanding warrants/fines	Utilize local bar associations to enhance the services provided to homeless Veterans at the Stand Down with the goal of increasing the numbers of Veterans served.

***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 15

Site: VAMC Marion, IL - 609

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:** 159
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:** 5

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	100
Transitional Housing Beds	0	150
Permanent Housing Beds	0	150

*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: 40

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	3.88	3.10	3.70
Food	3.14	3.43	3.85
Clothing	3.57	3.34	3.61
Emergency (immediate) shelter	3.29	3.16	3.50
Halfway house or transitional living facility	2.57	2.47	3.35
Long-term, permanent housing	2.00	2.43	2.64
Detoxification from substances	3.63	3.20	3.59
Treatment for substance abuse	3.50	3.23	3.78
Services for emotional or psychiatric problems	3.50	3.45	3.63
Treatment for dual diagnosis	3.50	3.21	3.42
Family counseling	3.29	3.28	2.99
Medical services	3.38	3.83	3.96
Women's health care	3.80	3.52	3.09
Help with medication	4.00	3.27	3.79
Drop-in center or day program	2.00	2.36	3.08
AIDS/HIV testing/counseling	4.00	3.42	3.62
TB testing	4.00	3.77	3.96
TB treatment	4.00	3.68	3.59
Hepatitis C testing	4.00	3.80	3.73
Dental care	1.71	2.37	2.90
Eye care	2.71	2.70	3.25
Glasses	2.43	2.70	3.19
VA disability/pension	2.63	3.32	3.12
Welfare payments	3.00	3.03	2.78
SSI/SSD process	2.43	3.11	2.90
Guardianship (financial)	2.71	2.73	2.75
Help managing money	3.00	2.53	3.00
Job training	2.71	2.63	2.98
Help with finding a job or getting employment	2.14	2.83	3.12
Help getting needed documents or identification	3.57	3.23	3.52
Help with transportation	2.29	3.10	3.28
Education	2.67	2.90	3.13
Child care	3.00	2.70	2.49
Family reconciliation assistance	2.71	2.70	2.63
Discharge upgrade	3.67	2.96	2.91
Spiritual	3.86	3.57	3.51
Re-entry services for incarcerated Veterans	3.67	2.21	2.80
Elder Healthcare	3.67	3.30	3.01
Credit counseling	2.71	2.47	2.77
Legal assistance for child support issues	3.00	2.67	2.60
Legal assistance for outstanding warrants/fines	3.00	2.54	2.69
Help developing social network	2.14	3.10	3.10

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

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

1. Existing Agreements with Community Service Types:

Service Types	Local VA has existing collaborative agreement with this agency type?
Correctional Facilities (Jails, prisons, courts)	Yes
Psychiatric/substance abuse inpatient (hospitals, wards)	Yes
Nursing homes	Yes
Faith-based organizations	Yes
Agencies that provide child care	No
Agencies that provide legal assistance for child support issues	No
Agencies that provide legal assistance for outstanding warrants/fines	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?	3.27	3.56
VA Service Coordination: Rate the ability of the VA to coordinate clinical services for homeless Veterans with your agency.	3.30	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.	1.92	2.57
Co-location of Services - Services from the VA and your agency provided in one location.	1.42	1.84
Cross-Training - Staff training about the objectives, procedures and services of the VA and your agency.	1.50	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.	1.65	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.	1.20	1.60
Pooled/Joint Funding - Combining or layering funds from the VA and your agency to create new resources or services.	1.16	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.	1.27	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.	1.68	2.19
Consolidation of Programs/ Agencies - Combining programs from the VA and your agency under one administrative structure to integrate service delivery.	1.48	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.	1.36	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.	1.40	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.	1.72	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*

Emergency (immediate) shelter	Boulware Mission is currently working to open a new homeless shelter next to a VA Community-based Outpatient Clinic. Our outreach team has visited local shelters, improving communication.
Halfway house or transitional living facility	We are continuing to grow and develop relationships with community transitional housing providers.
Long-term, permanent housing	This remains an area of needed development and growth.

*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	Southern Illinois Continuum of Care Network continues to develop and pursue grants to secure new housing opportunities for homeless Veterans.
Agency #2	Boulware Mission is currently working to open a new homeless shelter next to a VA Community-based Outpatient Clinic.
Agency #3	(no agency identified)

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

Emergency (immediate) shelter	Attempt to establish Veteran-specific emergency shelter beds. Identify more lesser-known shelters within our large service area which is expanding this year. Work with new shelter provider who will be opening a brand new facility within our service area.
Transitional living facility or halfway house	Explore community providers interest and willingness to participate in Grant Per Diem program. Provide educational opportunities for providers to learn more information about the VA Grant Per Diem process.
Long-term, permanent housing	Plan to establish networks with area housing authorities and other subsidized housing options to increase potential opportunities 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 15

Site: VAMC Poplar Bluff, MO - 647

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: 12
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	10
Transitional Housing Beds	0	10
Permanent Housing Beds	10	10

*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: 34

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	3.83	2.62	3.70
Food	3.57	3.10	3.85
Clothing	3.71	3.05	3.61
Emergency (immediate) shelter	3.86	2.65	3.50
Halfway house or transitional living facility	3.00	1.76	3.35
Long-term, permanent housing	2.43	1.95	2.64
Detoxification from substances	3.43	3.00	3.59
Treatment for substance abuse	3.71	3.05	3.78
Services for emotional or psychiatric problems	3.71	2.95	3.63
Treatment for dual diagnosis	3.33	2.81	3.42
Family counseling	3.00	3.05	2.99
Medical services	3.14	3.10	3.96
Women's health care	2.25	3.00	3.09
Help with medication	3.71	2.86	3.79
Drop-in center or day program	2.17	2.05	3.08
AIDS/HIV testing/counseling	2.83	3.14	3.62
TB testing	2.83	3.29	3.96
TB treatment	1.60	3.05	3.59
Hepatitis C testing	2.33	3.24	3.73
Dental care	1.43	2.38	2.90
Eye care	2.00	2.29	3.25
Glasses	2.00	2.38	3.19
VA disability/pension	2.29	2.74	3.12
Welfare payments	1.71	2.76	2.78
SSI/SSD process	1.43	2.60	2.90
Guardianship (financial)	2.33	2.62	2.75
Help managing money	2.43	2.48	3.00
Job training	2.43	2.43	2.98
Help with finding a job or getting employment	2.57	2.48	3.12
Help getting needed documents or identification	3.57	2.67	3.52
Help with transportation	2.57	2.29	3.28
Education	2.71	2.48	3.13
Child care	2.17	2.30	2.49
Family reconciliation assistance	1.83	2.47	2.63
Discharge upgrade	1.83	2.56	2.91
Spiritual	3.43	3.10	3.51
Re-entry services for incarcerated Veterans	1.29	2.56	2.80
Elder Healthcare	1.67	2.58	3.01
Credit counseling	1.50	2.35	2.77
Legal assistance for child support issues	1.75	2.40	2.60
Legal assistance for outstanding warrants/fines	1.33	2.20	2.69
Help developing social network	1.86	2.40	3.10

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

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

1. Existing Agreements with Community Service Types:

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

2. Community Ratings of VA/Community Integration*

Integration Scale: 1 (low) to 5 (high)	Site Mean Score	VHA (nationwide) Mean Score**
VA Accessibility: In general, how accessible do you feel VA services are to homeless Veterans in the community?	2.68	3.56
VA Service Coordination: Rate the ability of the VA to coordinate clinical services for homeless Veterans with your agency.	2.90	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.	1.33	2.57
Co-location of Services - Services from the VA and your agency provided in one location.	1.38	1.84
Cross-Training - Staff training about the objectives, procedures and services of the VA and your agency.	1.33	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.	1.50	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.	1.29	1.60
Pooled/Joint Funding - Combining or layering funds from the VA and your agency to create new resources or services.	1.21	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.	1.43	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.	1.42	2.19
Consolidation of Programs/ Agencies - Combining programs from the VA and your agency under one administrative structure to integrate service delivery.	1.38	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.	1.29	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.	1.35	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.	1.42	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*

Emergency (immediate) shelter	There is no progress on this goal.
Halfway house or transitional living facility	We are grateful to the Missouri Department of Mental Health for progress on this goal.
Help with finding a job or getting employment	We are working directly with our Veterans in planning, referral, and support.

*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	The SEMO Christian Restoration Center provides emergency shelter, food, transportation, and spiritual and psycho-social support.
Agency #2	The United Gospel Rescue Mission provides emergency shelter, food, transportation, and spiritual and psycho-social support.
Agency #3	Family Counseling Center, Inc. provides long-term housing and vocational support.

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

Long-term, permanent housing	VISN 15 and our VAMC is collaborating with the Missouri Department of Mental Health and the Family Counseling Center to provide housing and inpatient treatment.
Dental care	Trying to work with our VAMC to provide needed care for Veterans who are not 100% service connected.
SSI/SSD process	Assisting clients with the application process.

*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 15

Site: VAMC St. Louis, MO - 657

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: 158**
- 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: 5**

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	40	10
Transitional Housing Beds	40	0
Permanent Housing Beds	35	35

*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: 44

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	3.18	3.43	3.70
Food	3.20	3.48	3.85
Clothing	2.84	3.22	3.61
Emergency (immediate) shelter	3.11	2.70	3.50
Halfway house or transitional living facility	3.47	2.61	3.35
Long-term, permanent housing	1.50	2.04	2.64
Detoxification from substances	3.82	3.09	3.59
Treatment for substance abuse	3.88	3.50	3.78
Services for emotional or psychiatric problems	3.94	3.36	3.63
Treatment for dual diagnosis	3.94	3.09	3.42
Family counseling	3.68	2.74	2.99
Medical services	3.67	3.83	3.96
Women's health care	3.75	3.52	3.09
Help with medication	3.87	3.48	3.79
Drop-in center or day program	3.93	2.57	3.08
AIDS/HIV testing/counseling	3.75	3.27	3.62
TB testing	4.19	3.61	3.96
TB treatment	4.07	3.32	3.59
Hepatitis C testing	4.19	3.35	3.73
Dental care	2.40	2.59	2.90
Eye care	3.10	3.00	3.25
Glasses	3.30	3.00	3.19
VA disability/pension	2.63	3.17	3.12
Welfare payments	1.87	2.91	2.78
SSI/SSD process	2.40	2.95	2.90
Guardianship (financial)	2.69	2.70	2.75
Help managing money	2.88	2.52	3.00
Job training	2.33	2.87	2.98
Help with finding a job or getting employment	2.00	3.13	3.12
Help getting needed documents or identification	2.90	3.09	3.52
Help with transportation	2.25	2.57	3.28
Education	2.89	2.65	3.13
Child care	2.93	2.30	2.49
Family reconciliation assistance	3.07	2.43	2.63
Discharge upgrade	2.93	2.32	2.91
Spiritual	3.47	2.83	3.51
Re-entry services for incarcerated Veterans	2.76	2.43	2.80
Elder Healthcare	2.62	2.91	3.01
Credit counseling	2.88	2.52	2.77
Legal assistance for child support issues	2.56	2.43	2.60
Legal assistance for outstanding warrants/fines	2.76	2.65	2.69
Help developing social network	3.25	2.83	3.10

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

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

1. Existing Agreements with Community Service Types:

Service Types	Local VA has existing collaborative agreement with this agency type?
Correctional Facilities (Jails, prisons, courts)	No
Psychiatric/substance abuse inpatient (hospitals, wards)	No
Nursing homes	Yes
Faith-based organizations	No
Agencies that provide child care	No
Agencies that provide legal assistance for child support issues	No
Agencies that provide legal assistance for outstanding warrants/fines	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?	3.50	3.56
VA Service Coordination: Rate the ability of the VA to coordinate clinical services for homeless Veterans with your agency.	3.88	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.	3.00	2.57
Co-location of Services - Services from the VA and your agency provided in one location.	2.00	1.84
Cross-Training - Staff training about the objectives, procedures and services of the VA and your agency.	1.94	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.	2.65	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.	1.53	1.60
Pooled/Joint Funding - Combining or layering funds from the VA and your agency to create new resources or services.	2.53	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.	2.00	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.	2.41	2.19
Consolidation of Programs/ Agencies - Combining programs from the VA and your agency under one administrative structure to integrate service delivery.	2.22	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.	2.00	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.	1.94	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.	1.88	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	St. Louis VA received 35 HUD-VA Supported Housing vouchers for long-term, permanent housing.
Food	No new prospects. Only snacks and minimal amounts of food are available at drop-in and other service centers.
Dental Care	Referrals have been made to community programs, but there are no new resources to pick up costs for Veterans who are not eligible for VA care under the Veterans Homeless Dental Program.

*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	St. Louis Housing Authority partnered with VA to provide HUD-VA Supported Housing vouchers for 35 Veterans. This is very necessary in a housing market that is building more lofts for middle- to upper-income individuals.
Agency #2	Missouri Department of Mental Health partnered with local agencies to start a new VA Grant and Per Diem program with 50 beds.
Agency #3	Society of St. Vincent De Paul is a new VA Grant and Per Diem provider that houses 30 Veterans recently released from prison. It provides a housing resource for hard-to-place Veterans.

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

Long-term, permanent housing	Try to increase HUD-VASH vouchers specific to Veterans. Explore identifying/developing senior housing for aging Veteran population and semi-private housing for disabled.
Job training	Unemployment has been at an all time high and Veterans are needing to have more training for the new technology market in the work force. Need optional programs for those less disabled.
Help with finding a job or getting employment	Local Veteran representatives to develop focus group of identified Veteran providers to create a mechanism for sharing job leads and pooling resources to getting Veterans to site. Increase employment leads at all VA Grant and Per Diem programs.

***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 15

Site: VAMC Topeka - 677

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:** 150
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:** 6

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	30	20
Permanent Housing Beds	35	35

*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: 46

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	4.16	3.24	3.70
Food	4.00	3.76	3.85
Clothing	3.72	3.90	3.61
Emergency (immediate) shelter	3.88	3.86	3.50
Halfway house or transitional living facility	4.33	3.10	3.35
Long-term, permanent housing	2.46	3.10	2.64
Detoxification from substances	4.24	3.71	3.59
Treatment for substance abuse	4.24	3.48	3.78
Services for emotional or psychiatric problems	4.16	3.86	3.63
Treatment for dual diagnosis	3.72	3.62	3.42
Family counseling	3.22	3.33	2.99
Medical services	4.33	3.50	3.96
Women's health care	2.89	3.35	3.09
Help with medication	4.36	2.95	3.79
Drop-in center or day program	3.21	3.24	3.08
AIDS/HIV testing/counseling	3.96	3.76	3.62
TB testing	4.42	3.33	3.96
TB treatment	4.04	3.19	3.59
Hepatitis C testing	4.04	3.38	3.73
Dental care	3.68	2.14	2.90
Eye care	3.08	2.62	3.25
Glasses	2.72	2.67	3.19
VA disability/pension	3.04	3.62	3.12
Welfare payments	2.75	3.38	2.78
SSI/SSD process	3.13	2.95	2.90
Guardianship (financial)	2.43	2.86	2.75
Help managing money	3.42	2.86	3.00
Job training	2.88	3.43	2.98
Help with finding a job or getting employment	3.13	3.29	3.12
Help getting needed documents or identification	3.58	3.29	3.52
Help with transportation	3.48	2.52	3.28
Education	2.88	3.10	3.13
Child care	2.52	2.48	2.49
Family reconciliation assistance	3.30	2.90	2.63
Discharge upgrade	2.79	2.83	2.91
Spiritual	3.83	3.67	3.51
Re-entry services for incarcerated Veterans	2.83	2.81	2.80
Elder Healthcare	3.23	3.10	3.01
Credit counseling	2.74	3.62	2.77
Legal assistance for child support issues	2.60	2.90	2.60
Legal assistance for outstanding warrants/fines	3.04	2.67	2.69
Help developing social network	3.96	3.14	3.10

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

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Faith-based organizations	Yes
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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**
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VA Service Coordination: Rate the ability of the VA to coordinate clinical services for homeless Veterans with your agency.	4.26	3.62

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Cross-Training - Staff training about the objectives, procedures and services of the VA and your agency.	2.13	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.	2.31	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.	1.94	1.60
Pooled/Joint Funding - Combining or layering funds from the VA and your agency to create new resources or services.	1.67	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.	1.75	1.80
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E. Action Plans: FY 2008 and FY 2009

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

Long-term, permanent housing	Two community agencies built eight new units of permanent housing utilizing tax credit projects.
Dental Care	We educate all eligible candidates for the Homeless Veterans Dental Program about the benefit. We will continue to lobby both our VISN and VA Central Office to expand the eligibility criteria for HVDP.
Job training	We have worked with the local Veterans' Employment and Training Service program (U.S. Department of Labor) and will continue to do so with the goal of creating Veteran employment and training programs.

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

Agency #1	BreakThrough House, Inc. provides contracted transitional housing. Some Veterans continue to live there on a self-pay basis.
Agency #2	Topeka Rescue Mission has been great in providing emergency and transitional services to our Veterans. The Mission provides a safe, clean environment with recovery and vocational training services.
Agency #3	In the last four years, the Kansas Statewide Homeless Coalition has brought in \$27 million of housing and homeless services targeting 100 rural counties. Thanks to KSHC, there are service and housing options for Veterans in small towns across the state.

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

<p>Long-term, permanent housing</p>	<p>We recently began our VASH program which has increased our housing options for homeless Veterans. We are hopeful that we will receive additional vouchers with FY 2009 funding. We will continue to work with our local and statewide Continuums of Care to educate them about the needs of homeless Veterans and promote access to new resources as they are identified or developed.</p>
<p>Dental care</p>	<p>The addition of dental care for Veterans who are participating in the Health Care for Homeless Veterans and/or CWT/TR programs has been a dramatic improvement over not having any resources in the past. The fact that we serve a number of homeless Veterans who do not meet the current program requirement is a problem. We will continue to work with our community partners to develop local options for our "other" Veterans to obtain dental services. We will continue to ask our national representatives to expand the eligibility criteria for these services.</p>
<p>Job training</p>	<p>Veterans who are not eligible for van Vocational services have difficulty obtaining vocational training because they can not afford the schooling. We have one new Supported Employment staff and have to fill a vocational rehabilitation specialist position that has been vacant for over a year -- so hopefully this will help better serve our Veterans. We have helped to host a large job fair two years ago and a second one this year to give our Veterans seeking employment an opportunity to interview and apply for jobs.</p>

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