



**Department of Veteran Affairs (VA)
Veterans Health Administration Homeless Programs**

**Federal Resources for Rural Veterans
Housing Assistance Council Conference**

May 20, 2015

**Presented by: Anne Dunn, RN
Deputy Director VHA Homeless Programs**

 Defining **EXCELLENCE**
in the 21st Century

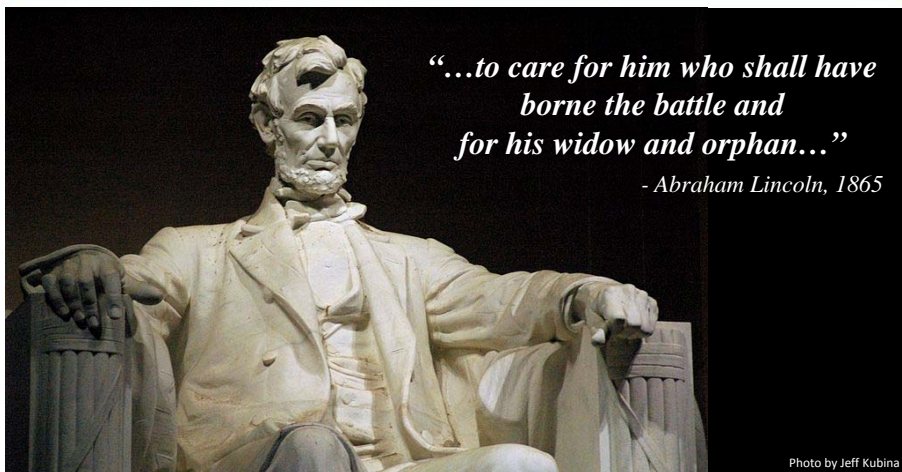
 Veterans Health
Administration

Agenda

- Mission of the Department of Affairs (VA)
- VHA Homeless Program Mission and Strategy
- Veteran Homelessness – Point In Time (PIT) Count
- Homeless Programs and Strategic Pillars
- VHA Homeless Programs
- VHA Homeless Programs – New Models
- Homeless Veterans in Rural Areas
 - Summary and Analysis – National Data
 - Review
- Opportunities for Working with Veterans
 - Leveraging Resources
 - Linking Services
 - New Models
- Question and Answer

VETERANS HEALTH ADMINISTRATION 1

Mission of the Department of Veterans Affairs (VA)



"...to care for him who shall have borne the battle and for his widow and orphan..."

- Abraham Lincoln, 1865

Photo by Jeff Kubina

VETERANS HEALTH ADMINISTRATION

2

VHA Homeless Programs Mission and Strategy

Mission Align programs, guidance and processes to optimize the provision of care and services to Veterans who are homeless across VA to reduce the number of homeless Veterans who experience homelessness.

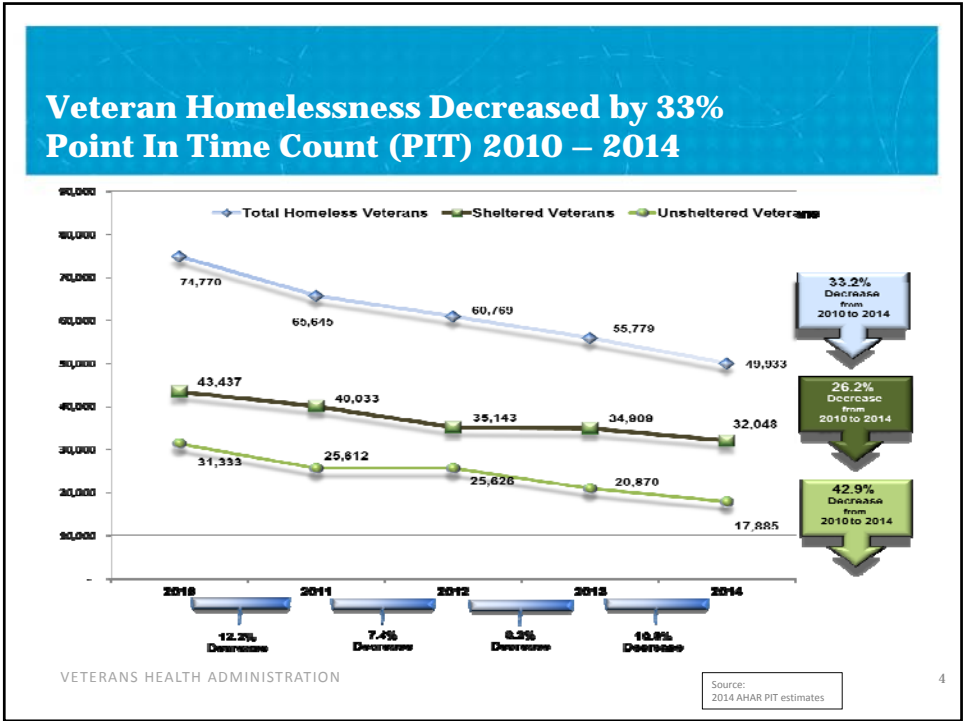
Vision A systematic end to homelessness, which means there are no Veterans sleeping on the streets of our Nation and every Veteran has access to permanent housing. Should Veterans become or be at-risk of becoming homeless, we will have the capacity to quickly connect them to the help they need to achieve housing stability.

Strategy

- Transform from temporary and shelter-based options to prevention, employment, and permanent supportive housing solutions.
- Identify and assist homeless Veterans in obtaining permanent housing with needed treatment and other support services wrapped around the Veteran to promote housing stability and improved quality of life.
- Leverage private sector skills, know-how, and best practices among grass roots organizations, neighborhood groups, and local community agencies to enable partnerships that foster a "no wrong door" philosophy as Veterans access an increasing array of Federal-community programs and services.
- Foster and enable close cooperation between VA Medical Centers and HUD's local Continuum of Care systems.
- Strong interagency collaboration resulting in successful policies and procedures such as Housing First, Rapid Re-Housing, HUD-VA Supportive Housing (HUD-VASH), and Supportive Services for Veteran Families (SSVF)

VETERANS HEALTH ADMINISTRATION

3



VHA Homeless Programs

- **Housing and Urban Development-Veterans Affairs Supportive Housing (HUD-VASH)**
 - HUD-VASH is a collaborative program between HUD and VA.
 - Eligible homeless Veterans receive VA provided case management and supportive services to support stability and recovery from physical and mental health, substance abuse, and functional concerns contributing to or resulting from homelessness.
 - Through the end of **FY 2014**, a total of **58,135 vouchers** had been **allocated** for use in the HUD-VASH program.
 - **51,913 Veterans** were **housed** through HUD-VASH as of **September 30, 2014**.
- **Supportive Services for Veteran Families (SSVF)**
 - SSVF provides supportive services to very low-income Veterans families in or transitioning to permanent housing.
 - Funds are granted to private non-profit organizations and other community partnerships to provide supportive services and to promote housing stability.
 - In **FY 2014**, **SSVF** served **over 125,000 participants**.

VETERANS HEALTH ADMINISTRATION

6

VHA Homeless Programs

- **Health Care for Homeless Veterans (HCHV)**
 - HCHV programs reduce homelessness among Veterans by conducting outreach to those who are the most vulnerable and are not currently receiving services.
 - *The Contract Residential Treatment Program* ensures that Veterans with *serious mental health* diagnosis can be placed in community-based residential treatment programs which provide quality housing and services.
 - In **FY 2014**, the HCHV Contract Residential Treatment Program provided **over 4,061 operational beds** in support of homeless Veterans.
 - **Over 158,000** Veterans were provided services through HCHV Outreach in FY 2014.
- **Stand Downs**
 - Multi partner provider, community-based, 1 to 3 day events.
 - Range of services may include: food, shelter, clothing, health screenings, dental services, legal services, VA and Social Security benefits counseling. Medical, mental health and substance abuse treatment, as well as information on housing and employment resources.
 - **Over 300 events** conducted in **2014**.
 - Estimated that approximately **80,000 Veterans** participated in a Stand Down in **2014**.

VETERANS HEALTH ADMINISTRATION

7

VHA Homeless Programs

- **VA's Homeless Providers Grant and Per Diem (GPD) Program**
 - The GPD program allows VA to award grants to community-based agencies to create transitional housing programs and offer per diem payments.
 - The GPD program offers communities a way to help homeless Veterans with housing and services while assisting VA medical centers by augmenting or supplementing care.
 - At the end of **FY 2014**, **over 15,000 beds** existed in the GPD Program nationally.

- **Domiciliary Care for Homeless Veterans (DCHV)**
 - DCHV programs provide time-limited residential treatment to homeless Veterans with health care and social-vocational deficits.
 - DCHV programs provide homeless Veterans access to medical, psychiatric, and substance use disorder treatment in addition to social and vocational rehabilitation programs.
 - At the end of **FY 2014**, the DCHV program had **provided 2,448 operational beds** in support of homeless Veterans.

VETERANS HEALTH ADMINISTRATION

8

VHA Homeless Programs

- **Health Care for Reentry Veterans Services (HCRV)**
 - HCRV program is designed to address the community reentry needs of incarcerated Veterans.
 - Reentry staff work directly in state and Federal prisons.
 - Goal is to prevent homelessness, reduce impact of medical, psychiatric and substance abuse problems upon community adjustment.
 - In **FY 2014**, HCRV staff provided services to **over 16,000 Veterans**.

- **Veterans Justice Outreach (VJO)**
 - Ensure justice-involved Veterans have timely access to VA mental health, substance abuse, and homeless services, and other VA benefits.
 - Goal to avoid the unnecessary criminalization of mental illness and extended incarceration among Veterans.
 - In **FY 2014**, **VJO** staff provided services to **over 41,000 justice involved Veterans**.

VETERANS HEALTH ADMINISTRATION

9

VHA Homeless Programs – New Models

- **Homeless Patient Aligned Care Team (HPACT)**
 - The H-PACT care teams provide homeless Veterans with medical care, case management, housing, and social services assistance to help them obtain and stay in permanent housing; reducing emergency department use and hospitalizations and improving chronic disease management.
 - Since the project launched in January 2012, through the **end of FY 2014**:
 - H-PACT operating at **over 50 sites**
 - Provided care to **over 14,600 Veterans**
- **Safe Havens**
 - Targets chronically homeless with mental illness and substance use problems.
 - Targets Veterans who have failed in traditional programs.
 - Does not require sobriety or compliance with MH TX as a condition of admission / continued stay. Environment of care is as non-intrusive as possible.
 - In **FY 2014**, the Safe Havens **served 972 Veterans** in 22 programs.

VETERANS HEALTH ADMINISTRATION

10

VA Homeless Programs – New Models

- **Community Resource and Referral Centers (CRRC)**
 - Strategically selected locations to test a “one-stop shopping” model program.
 - Secure store front community accessible space or partner with an existing community partners for space and services.
 - Showers and laundry on site or through referral; access to food and clothing services via non-profit community providers. Rapid referral to housing services (emergency and permanent). Medical and mental health services either on site or by referral.
 - **29 operational programs**; estimated over **20,000 visits** in **FY 2014**.
- **Developing Models**
 - Grant and Per Diem – Low Demand

VETERANS HEALTH ADMINISTRATION

11

Rural Homelessness and Veterans Summary Analysis – National Data

- **Rural homeless persons are often referred to as the “hidden homeless”**
 - Wooded areas, campgrounds, abandoned property, and buildings not intended for human habitation.
 - Substandard housing or in overcrowded temporary housing arrangements.
 - Providers may lack adequate capacity and infrastructure to fully address this issue.
- **The following challenges to access and services for homeless Veterans:**
 - Homeless shelters, limited hours (e.g., timeliness of care);
 - Large geographic areas where services are often stretched over multiple counties;
 - Transportation;
 - Affordable housing;
 - Wrap around services such as child care, credit counseling, family reconciliation;
 - Legal assistance.

VETERANS HEALTH ADMINISTRATION

12

Homeless Veterans in Rural Areas Summary Analysis – National Data*

- **FY 2014, 26,144 homeless Veterans** in the Homeless Operations and Management Evaluation System (HOMES) data set.
 - **2,172 (8.3%)** Veterans had been located in rural zip code areas prior to the evaluation.
- Comparisons of the characteristics of these Veterans with those from urban zip code areas revealed a substantive difference:
 - Less likely to be minority race;
 - More likely to need case management and family counseling;

***Note:** The following data is a summary analysis of three national data sets:

- Veteran evaluations at entry to VHA homeless programs;
- VA Medical Center and Community-Based Outpatient Clinic screening records;
- Funding expenditures – to assume need:
 - community recipients of prevention and re-housing grants, and
 - community-based transitional housing grantee reports.

VETERANS HEALTH ADMINISTRATION

13

Homeless Veterans in Rural Areas Summary Analysis – National Data*

1. Housing intervention programs entrance evaluation

- It should be noted that needs (as determined by VA clinical outreach staff upon initial evaluation of the Veteran) were equally high in both rural and urban locations.
- **Further analysis indicated:**
 - Rural Veterans were identified in slightly higher percentages of need in psychiatric treatment, medical treatment;
 - Rural Veterans reported two or more medical problems more often;
 - Rural Veterans experienced fewer instances of unemployment in previous three years;
 - Rural Veterans were identified as having a history of both psychiatric and substance abuse problems;
 - A slightly higher percentage of Veterans in rural locations were currently or previously married.

Homeless Veterans in Rural Areas Summary Analysis – National Data*

2. Universal homeless screener

- During FY 2014, over **22,000 Veterans** were determined to be homeless and approximately **20,000** were determined at risk for homelessness at VA Medical Centers (VAMC) and Community-Based Outpatient Clinics (CBOC) using the homelessness clinical reminder screener tool.
 - The numbers served at **rural VAMCs** or **CBOCs** were **2,313** or **10.4 percent** homeless and **2,324** or **11.4 percent** at risk for homelessness.
 - Higher percentage of Veterans who were homeless or at risk for homelessness screened in rural locations were over 61 years of age;
 - Rural homeless and at risk Veterans are more likely to be white (71 percent in rural areas versus 56 percent in urban areas).

Homeless Veterans in Rural Areas Summary Analysis – National Data*

Supportive Services for Veteran Families (SSVF)

- Total of 97 SSVF grants were reviewed, 31 (46%) were issued to non-VA organizations that serve Veterans from rural areas, only.
- Primary services:
 - Personal finance planning, income support services, representative payee or legal services, child care assistance, and housing counseling were offered to rural Veterans at equal or at slightly lesser rates compared to those offered Veterans in urban areas.
- Higher percentage of transportation assistance provided to those Veterans who were homeless or at risk for homelessness in rural areas (89%) as opposed to those in urban locations (76%).

Homeless Veterans in Rural Areas Summary Analysis – National Data*

Grant and Per Diem Program

- The GPD data set consisted of records representing **17,932 unique Veterans**.
- The mean age was **48**; **96.6 percent** were **male**; **20.9 percent** were **age 55 or older**;
- **7.3 percent** were in **rural locations**.
- **Homeless Veterans in rural areas were more likely to be:**
 - Caucasian;
 - Homeless for more than 30 days;
 - Employed full-time in the last year;
 - Worked within last 30 days; and
 - Report a serious medical problem.
- **Less likely to have reported:**
 - Combat duty;
 - Receipt of non-VA monetary benefits; and
 - Current or past substance use disorder.

Homeless Veterans in Rural Areas – Review

- **Summary:** Examination of national data sets representing Veterans served in VHA homeless programs; at VAMCs and CBOCs; and while participating in community-based provider programs,
 - The needs of rural Veterans appear similar in many ways to those residing in urban areas.
 - **The most evident and significant need particular to rural-ness:**
 - Transportation services;
 - Needs are slightly higher and specific to rural homeless Veterans in relation to:
 - Psychiatric and medical treatment;
 - Case management, counseling for family problems;
 - VA entitlement benefits; and
 - Services specific for older Veterans.

Opportunities for Working with Veterans – Leveraging Resources

- **Leveraging Resources**
 - **Supportive Services for Veteran Families (SSVF)**
 - Grants for non-profit and community collaboratives for homeless prevention and rapid rehousing.
 - <http://www.va.gov/homeless/ssvf.asp>
 - **Department of Housing and Urban Development – VA Supportive Housing (HUD-VASH)**
 - HUD Housing Choice Vouchers and VA staff - provides permanent housing and case management.
 - Contact local Public Housing Authority and VA Medical Center Homeless Program Coordinator.
 - **Homeless Provider's Grant and Per Diem Program (GPD)**
 - Capital and operational funds for non-profits to provide transitional housing.
 - <http://www.va.gov/homeless/gpd.asp>
 - **Health Care for Homeless Veterans (HCHV)**
 - Outreach, case management, and contracts with community-based organizations to provide residential care.
 - Contact local VA Homeless Program Coordinator
 - **CHALENG**
 - an ongoing assessment process that describes the needs of homeless Veterans and identifies the barriers they face to successful community reentry.
 - <http://www.va.gov/homeless/chaleng.asp>

Opportunities for Working with Veterans – Linking Services

- Linking Services
 - Each VISN or Network - NHC (Network Homeless Coordinator):
 - <http://www.va.gov/homeless/>
 - VA Medical Centers and VA Outpatient Clinics - Homeless Program Coordinators:
 - <http://www.va.gov/directory/guide/division.asp?dnum=1&isFlash=0>
 - Many Vet Centers work closely with Homeless Veteran Programs and the community:
 - <http://www.va.gov/directory/guide/vetcenter.asp?isFlash=0>
 - Assistance and referral available through the National Call Center for Homeless Veterans:
 - 1-877-4AID VET (1-877-424-3838)
 - <http://www.va.gov/homeless/nationalcallcenter.asp>
 - Veterans Service Organizations:
 - <http://www.va.gov/vso/>
 - County or State Veteran Service Officers:
 - Contact local or state government

VETERANS HEALTH ADMINISTRATION

20

Opportunities for Working with Veterans – New Models

- Developing New Models and Partnerships
 - National Center on Homelessness among Veterans
 - Office of Rural Health
 - Network Homeless Coordinators
 - VAMC Homeless Program Coordinators
 - Coalitions for the Homeless

VETERANS HEALTH ADMINISTRATION

21

Question and Answer

"... to care for him who shall have borne the battle and for his widow and orphan..."

- Abraham Lincoln, VA mission



VETERANS HEALTH ADMINISTRATION

Photo credit: Jose Gil

22

Back-up Slides

"... to care for him who shall have borne the battle and for his widow and orphan..."

- Abraham Lincoln, VA mission



VETERANS HEALTH ADMINISTRATION

Photo credit: Jose Gil

23

What is the Department of Veterans Affairs (VA) (VA)?

- Established in 1930
- Elevated to Cabinet level in 1989
- Federal government’s 2nd largest department after the Department of Defense
- Three components:
 - Veterans Health Administration (VHA)
 - Veterans Benefits Administration (VBA)
 - National Cemetery Administration (NCA)
- VA’s five core values underscore the obligations inherent in VA’s mission: Integrity, Commitment, Advocacy, Respect, and Excellence (ICare)

VETERANS HEALTH ADMINISTRATION

24

Veterans Health Administration “Footprint”



144 Hospitals

14 Health Care Centers

754 Community Based
Outpatient Clinics

135 Community Living
Centers

108 Residential Rehabilitation Programs

264 Other Outpatient Service Sites (single service clinics,
dialysis centers, mobile medical units, etc.)



VETERANS HEALTH ADMINISTRATION
VETERANS HEALTH ADMINISTRATION (VHA) OFFICE OF RURAL HEALTH (ORH) - 25



The rural Veteran (FY14)

22M Veterans in the United States and **8.7M (40%)** enrolled in **VA Health Care**

5.3M live in rural areas (24%) and 3.2M (60%) are enrolled in the VA Health Care System (36%)

55% of VA-enrolled rural Veterans are **65+ years old**

6% of enrolled rural Veterans are **Women**

Nearly 13% increase of enrolled rural women Veterans since FY12



12% of enrolled rural Veterans served in **Iraq or Afghanistan** and typically have **multiple medical** and **combat-related issues**

42% of rural Veterans earn an **annual income** of **less than \$26,000**

1.2% of enrolled rural Veterans are **American Indian/Alaska Native**

7% increase in enrolled rural Veterans between **FY06-14**

VA Homeless Programs

Select VA Homeless Program Metrics
Fiscal Year (FY) 2011 through FY 2014

| | FY 2011 | FY 2012 | FY 2013 | FY 2014 |
|--|---------|---------|---------|---------|
| Total number of Veterans served in specialized homeless or at-risk services. | 157,182 | 208,115 | 259,734 | 264,827 |
| Number of Veterans obtaining permanent housing during this fiscal year through VA Homeless Programs. (1) | 18,597 | 34,877 | 42,716 | 53,475 |
| Total number of beds available to homeless Veterans. (2) | 55,885 | 68,738 | 79,800 | 80,178 |
| Number of Veterans contacted through Health Care for Homeless Veterans outreach services. | 98,213 | 119,568 | 146,557 | 158,553 |

1. Includes all exits to permanent housing from Compensated Work Therapy – Transitional Residence (CWT-TR), Domiciliary Care for Homeless Veterans (DCHV), Homeless Providers Grant and Per Diem Program (GPD), Supportive Services for Veteran Families (SSVF), Health Care for Homeless Veterans (HCHV) Contract Residential, and number of move-ins to Housing and Urban Development - Veterans Affairs Supportive Housing (HUD-VASH).
2. Includes number of operational GPD, HCHV Contract beds, DCHV beds and HUD-VASH vouchers allocated at the end of each FY.

Homeless Veterans in Rural Areas Summary Analysis – National Data

| Characteristic | Urban % | Rural % |
|--|---------|---------|
| White | 53.4 | 70.7 |
| Female | 9.5 | 10.3 |
| Never Married | 30.3 | 20.4 |
| Chronic Homeless | 52.2 | 53.0 |
| Need Psychiatric Treatment | 54.5 | 58.7 |
| Need Substance Abuse Treatment | 45.4 | 43.7 |
| Need Medical Treatment | 66.6 | 67.9 |
| Need Case Management | 77.8 | 86.5 |
| Need Counseling for Family Problems | 9.1 | 14.2 |
| Two or More Medical Problems | 40.0 | 41.1 |
| Primarily Unemployed Last Three Years | 27.0 | 25.0 |
| Drinking Just Prior to Evaluation | 17.1 | 17.3 |
| Drug Use Just Prior to Evaluation | 16.6 | 12.6 |
| History of Both Psychiatric and Substance Abuse Problems | 35.7 | 37.4 |

VETERANS HEALTH ADMINISTRATION

28