## CHALENG 2008 Survey Results Summary

#### VISN 7

# Site: VA Central Alabama HCS (VAMC Montgomery - 619 and VAMC Tuskegee - 619A4)

**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, nonprofit 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: 466

2. Service Area type: Predominantly rural

## 3. Number of Homeless Veteran Families (Veterans with minor dependents) Served in FY 2008 by local VA homeless program: 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	12
Transitional Housing Beds	0	20
Permanent Housing Beds	0	61

\*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: 95

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	4.14	3.78	3.70
Food	4.14	3.82	
			3.85
Clothing	4.08	3.69	3.61
Emergency (immediate) shelter	4.06	3.18	3.50
Halfway house or transitional living	3.66	3.27	0.05
facility	0.04	0.74	3.35
Long-term, permanent housing	2.94	2.74	2.64
Detoxification from substances	3.85	3.63	3.59
Treatment for substance abuse	4.27	3.84	3.78
Services for emotional or psychiatric	3.97	3.84	
problems			3.63
Treatment for dual diagnosis	3.75	3.57	3.42
Family counseling	2.84	3.44	2.99
Medical services	3.95	4.08	3.96
Women's health care	2.53	3.21	3.09
Help with medication	4.24	4.18	3.79
Drop-in center or day program	3.00	3.02	3.08
AIDS/HIV testing/counseling	3.81	3.55	3.62
TB testing	4.33	4.08	3.96
TB treatment	3.88	3.98	3.59
Hepatitis C testing	4.03	3.93	3.73
Dental care	3.23	3.44	2.90
Eye care	3.66	4.14	3.25
Glasses	3.62	4.06	3.19
VA disability/pension	3.25	3.27	3.12
Welfare payments	2.36	2.32	2.78
SSI/SSD process	2.38	2.98	2.90
Guardianship (financial)	2.68	3.13	2.75
Help managing money	3.00	3.21	3.00
Job training	3.38	3.15	2.98
Help with finding a job or getting	3.57	3.00	2.00
employment	5.51	5.00	3.12
Help getting needed documents or	3.94	3.51	0.12
identification	5.94	0.01	3.52
Help with transportation	4.00	3.18	3.28
Education	3.45	3.19	3.13
Child care	2.25		
Family reconciliation assistance		2.17	2.49
, ,	2.73	2.70	2.63
Discharge upgrade	2.96	3.18	2.91
Spiritual	4.19	3.79	3.51
Re-entry services for incarcerated	3.29	2.83	2.90
Veterans	0.00	0.50	2.80
Elder Healthcare	2.86	3.53	3.01
Credit counseling	2.59	2.88	2.77
Legal assistance for child support issues	2.81	2.38	2.60
Legal assistance for outstanding warrants/fines	2.48	2.48	2.69
Help developing social network	3.39	3.04	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 Ty	pes:
--	------

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

## 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.	3.67	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

Community Agencies	<b>a</b> k ==	
Implementation Scale	Site Mean	VHA
<b>1 = None</b> , no steps taken to initiate implementation of the strategy.	Score	(nationwide)
2 = Low, in planning and/or initial minor steps taken.		Mean Score**
3 = Moderate, significant steps taken but full implementation not		
achieved.		
4 = High, strategy fully implemented.		
Interagency Coordinating Body - Representatives from the VA and	2.26	2.57
your agency meet formally to exchange information, do needs		
assessment, plan formal agreements, and promote access to		
services.		
Co-location of Services - Services from the VA and your agency	2.05	1.84
provided in one location.		
Cross-Training - Staff training about the objectives, procedures and	2.00	1.93
services of the VA and your agency.		
Interagency Agreements/ Memoranda of Understanding - Formal	2.16	2.28
and informal agreements between the VA and your agency covering		
such areas as collaboration, referrals, sharing client information, or		
coordinating services.		
Interagency Client Tracking Systems/ Management Information	1.89	1.60
Systems - Shared computer tracking systems that link the VA and		
your agency to promote information sharing, referrals, and client		
access.		
Pooled/Joint Funding - Combining or layering funds from the VA	1.76	1.67
and your agency to create new resources or services.		
Uniform Applications, Eligibility Criteria, and Intake	1.97	1.80
Assessments – Standardized form that the client fills out only once		
to apply for services at the VA and your agency.		
Interagency Service Delivery Team/ Provider Coalition - Service	2.05	2.19
team comprised of staff from the VA and your agency to assist clients		
with multiple needs.		
Consolidation of Programs/ Agencies - Combining programs from	2.14	1.99
the VA and your agency under one administrative structure to		
integrate service delivery.		
Flexible Funding – Flexible funding used to fill gaps or acquire	1.75	1.63
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.		
Use of Special Waivers - Waiving requirements for funding, eligibility	1.89	1.68
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.		
System Integration Coordinator Position - A specific staff position	2.22	1.86
focused on systems integration activities such as identifying		
agencies, staffing interagency meetings, and assisting with joint		
proposal development.	1	1

\*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\*

Halfway house or transitional living facility	We added 18 transitional housing beds in FY 2008.
Long-term, permanent housing	In collaboration with Macon County Public Housing Authority, we have a HUD-VA Supported Housing program with 35 Section 8 vouchers.
VA disability/pension	VA Regional Office homeless outreach coordinator (benefits officer) will now accept walk-in clients at our medical center and homeless program office.

\*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	In collaboration with Macon County Public Housing Authority we have a HUD-VA Supported Housing program with 35 Section 8 vouchers.
Agency #2	VA Regional Office (Montgomery) homeless Veterans outreach coordinator has increased the number of approved applications for VA benefits, and shortened the length of time to process the application.
Agency #3	Southside Personal Care Facility provides supportive housing to homeless Veterans with 18 new beds.

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

Welfare payments	Improve communication and collaboration between VA Health Care for Homeless Veterans staff and Macon County Department of Human Resources agency.
Education	Seek residential programs with linkage to vocational training and employment options. Utilize VA Regional office Homeless Veterans Outreach Coordinator to inform Veterans of eligibility for educational benefits.
Child care	Advocate for funding to pay local approved day care facilities to provide child care on an as-needed basis. Establish an agreement with at least one state approved childcare 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 7

#### Site: VAMC - Augusta, GA - 509

**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, nonprofit 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: 108

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	38
Transitional Housing Beds	0	175
Permanent Housing Beds	35	50

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

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

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

## C. Rating of Need by CHALENG participants (homeless Veterans and VA/ community providers). Number of total participants: 45

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	4.69	3.28	3.70
Food	4.71	3.55	3.85
Clothing	2.92	3.38	3.61
Emergency (immediate) shelter	3.43	2.83	3.50
Halfway house or transitional living	2.14	2.53	3.50
facility	2.14	2.55	3.35
Long-term, permanent housing	1.50	2.16	2.64
Detoxification from substances	5.00	3.24	3.59
Treatment for substance abuse	4.91	3.45	3.78
Services for emotional or psychiatric problems	4.50	3.41	3.63
	3.80	3.45	3.42
Treatment for dual diagnosis			
Family counseling	3.70	2.97	2.99
Medical services	5.00	3.79	3.96
Women's health care	3.00	3.45	3.09
Help with medication	4.43	3.59	3.79
Drop-in center or day program	2.64	2.79	3.08
AIDS/HIV testing/counseling	4.00	3.83	3.62
TB testing	5.00	3.87	3.96
TB treatment	4.56	3.80	3.59
Hepatitis C testing	4.64	3.80	3.73
Dental care	1.92	3.00	2.90
Eye care	2.64	3.14	3.25
Glasses	2.86	3.17	3.19
VA disability/pension	1.73	3.36	3.12
Welfare payments	2.20	2.96	2.78
SSI/SSD process	2.00	2.72	2.90
Guardianship (financial)	2.80	2.75	2.75
Help managing money	2.64	2.59	3.00
Job training	3.38	3.11	2.98
Help with finding a job or getting	3.79	3.17	
employment			3.12
Help getting needed documents or	3.58	3.10	
identification			3.52
Help with transportation	3.10	2.62	3.28
Education	3.20	3.07	3.13
Child care	2.56	2.52	2.49
Family reconciliation assistance	3.00	2.19	2.63
Discharge upgrade	3.00	2.93	2.91
Spiritual	3.77	3.38	3.51
Re-entry services for incarcerated	2.40	2.50	
Veterans			2.80
Elder Healthcare	3.22	3.10	3.01
Credit counseling	2.55	2.71	2.77
Legal assistance for child support issues	3.00	2.52	2.60
Legal assistance for outstanding warrants/fines	3.22	2.20	2.69
Help developing social network	3.67	2.97	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	No
(hospitals, wards	
Nursing homes	Yes
Faith-based organizations	No
Agencies that provide child care	No
Agencies that provide legal assistance for	No
child support issues	
Agencies that provide legal assistance for	No
outstanding warrants/fines	

## 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?	3.64	3.56
VA Service Coordination: Rate the ability of the VA to coordinate clinical services for homeless Veterans with your agency.	3.67	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

Community Agencies	1	
Implementation Scale	Site Mean	VHA
1 = None, no steps taken to initiate implementation of the strategy.	Score	(nationwide)
2 = Low, in planning and/or initial minor steps taken.		Mean Score**
3 = Moderate, significant steps taken but full implementation not		
achieved.		
4 = High, strategy fully implemented.		
Interagency Coordinating Body - Representatives from the VA and	2.24	2.57
your agency meet formally to exchange information, do needs		-
assessment, plan formal agreements, and promote access to		
services.		
Co-location of Services - Services from the VA and your agency	1.40	1.84
provided in one location.		
<b>Cross-Training</b> - Staff training about the objectives, procedures and	1.96	1.93
services of the VA and your agency.		1100
Interagency Agreements/ Memoranda of Understanding - Formal	1.76	2.28
and informal agreements between the VA and your agency covering		
such areas as collaboration, referrals, sharing client information, or		
coordinating services.		
Interagency Client Tracking Systems/ Management Information	1.32	1.60
<b>Systems</b> - Shared computer tracking systems that link the VA and	1.02	1.00
your agency to promote information sharing, referrals, and client		
access.		
<b>Pooled/Joint Funding</b> - Combining or layering funds from the VA	1.20	1.67
and your agency to create new resources or services.	1.20	1.07
Uniform Applications, Eligibility Criteria, and Intake	1.32	1.80
Assessments – Standardized form that the client fills out only once	1.52	1.00
to apply for services at the VA and your agency.		
Interagency Service Delivery Team/ Provider Coalition - Service	1.88	2.19
team comprised of staff from the VA and your agency to assist clients	1.00	2.13
with multiple needs.		
Consolidation of Programs/ Agencies - Combining programs from	1.67	1.99
	1.07	1.99
the VA and your agency under one administrative structure to integrate service delivery.		
	1.20	4.00
Flexible Funding – Flexible funding used to fill gaps or acquire	1.39	1.63
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.	4 74	4.00
Use of Special Waivers - Waiving requirements for funding, eligibility	1.74	1.68
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.	4.07	4.00
System Integration Coordinator Position - A specific staff position	1.67	1.86
focused on systems integration activities such as identifying		
agencies, staffing interagency meetings, and assisting with joint		
proposal development. *Scored of non-VA community agency representatives who compl		

\*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\*

Halfway house or transitional living facility	VA Compensated Work Therapy Transitional Residence proposal was delayed due to administrative/legal review. We are collaborating with VA Columbia on a VA Grant and Per Diem program in Greenwood, South Carolina.
Long-term, permanent housing	HUD and Central Savannah River Area Economic Opportunity Authority are still working to increase HUD Shelter Plus Care housing.
Dental Care	We continue to collaborate with St. Vincent De Paul and Salvation Army to refer patients to Medical College of Georgia.

\*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	Central Savannah River Area Economic Opportunity Authority continues to support all our housing efforts. The agency recently conducted a point-in-time homeless survey, and is pursuing VA Grant and Per Diem funding.
Agency #2	Salvation Army provides emergency shelter and transitional programming, and is applying for VA Grant and Per Diem funding. It has extended its hours to take after-hour referrals from VA.
Agency #3	(no agency identified)

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

Long-term, permanent housing	Develop HUD-VASH program at the Charlie Norwood VAMC in collaboration with the local Housing Authority. Outreach to community agencies to explore collaborative partnerships for permanent housing through grants and endorsements.
Transitional living facility or halfway house	Increase community support and collaborative services by providing transportation and VA Vocational Rehabilitation services.
Emergency (immediate) shelter	Continue supportive assistance to community partners and attend agency meetings to explore increase of emergency housing. Request participation in Pathways/HMIS (Homeless Management Information System).

\*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 7

#### Site: VAMC Atlanta, GA - 508 (Decatur, GA)

**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, nonprofit and for-profit agency representatives, as well as local VA staff and homeless Veterans themselves. Data was collected in the summer/fall of 2008.

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

#### 1. Estimated Number of Homeless Veterans: 2,049

#### 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: 13

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

Housing type	# of Veteran- specific Beds in area*	# of additional beds site could use
Emergency Beds	0	0
Transitional Housing Beds	146	36
Permanent Housing Beds	350	0

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

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

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

## C. Rating of Need by CHALENG participants (homeless Veterans and VA/ community providers). Number of total participants: 144

	Site homeless	Site provider	VHA Mean Score
Need Ranking (1=Need Unmet	Veteran mean score	mean score	(nationwide)*(all
5= Need Met)			participants)
Personal hygiene	3.93	3.29	3.70
Food	3.97	3.53	3.85
Clothing	3.49	3.56	3.61
Emergency (immediate) shelter	3.97	3.24	3.50
Halfway house or transitional living	3.66	3.00	
facility			3.35
Long-term, permanent housing	2.63	2.94	2.64
Detoxification from substances	3.90	3.06	3.59
Treatment for substance abuse	4.13	3.35	3.78
Services for emotional or psychiatric	3.65	3.06	
problems			3.63
Treatment for dual diagnosis	3.65	3.33	3.42
Family counseling	3.05	2.82	2.99
Medical services	4.18	2.69	3.96
Women's health care	3.25	3.13	3.09
Help with medication	4.11	3.29	3.79
Drop-in center or day program	3.03	2.94	3.08
AIDS/HIV testing/counseling	4.14	2.76	3.62
TB testing	4.38	3.00	3.96
TB treatment	3.80	2.82	3.59
Hepatitis C testing	4.10	3.00	3.73
Dental care	2.91	2.56	2.90
Eye care	3.66	2.76	3.25
Glasses	3.77	2.75	3.19
VA disability/pension	2.63	2.76	3.12
Welfare payments	2.34	2.88	2.78
SSI/SSD process	2.51	2.65	2.90
Guardianship (financial)	2.45	2.59	2.75
Help managing money	3.15	2.82	3.00
Job training	2.68	2.59	2.98
Help with finding a job or getting	2.70	2.76	2.00
employment	2.70	2.70	3.12
Help getting needed documents or	3.79	3.06	0.12
identification	0.75	0.00	3.52
Help with transportation	3.61	3.12	3.28
Education	3.10	2.59	3.13
Child care	2.77	2.53	2.49
Family reconciliation assistance	2.63	2.29	2.63
Discharge upgrade	2.69	2.25	2.03
Spiritual	4.01	3.06	3.51
Re-entry services for incarcerated	3.02	2.71	0.01
Veterans	0.02	<u> </u>	2.80
Elder Healthcare	2.87	2.93	3.01
Credit counseling	2.99	2.93	2.77
Legal assistance for child support issues	2.99	2.25	2.60
			2.00
Legal assistance for outstanding warrants/fines	2.88	2.18	2.60
	2.29	0.76	2.69
Help developing social network	3.38	2.76	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 <i>I</i>	Agreements	with Con	nmunity	Service <sup>-</sup>	Types:
----	-------------------	------------	----------	---------	----------------------	--------

Service Types	Local VA has existing collaborative agreement with this agency type?
Correctional Facilities (Jails, prisons, courts)	Yes
Psychiatric/substance abuse inpatient	Yes
(hospitals, wards	
Nursing homes	Yes
Faith-based organizations	No
Agencies that provide child care	No
Agencies that provide legal assistance for	Yes
child support issues	
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?	3.19	3.56
VA Service Coordination: Rate the ability of the VA to coordinate clinical services for homeless Veterans with your agency.	3.45	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

Community Agencies Implementation Scale	Site Mean	VHA
<b>1 = None</b> , no steps taken to initiate implementation of the strategy.	Score	(nationwide)
2 = Low, in planning and/or initial minor steps taken.		
<b>3 = Moderate</b> , significant steps taken but full implementation not		Mean Score**
achieved.		
<b>4 = High</b> , strategy fully implemented.		
<b>Interagency Coordinating Body</b> - Representatives from the VA and	2.50	2.57
your agency meet formally to exchange information, do needs	2.50	2.57
assessment, plan formal agreements, and promote access to		
services.		
<b>Co-location of Services</b> - Services from the VA and your agency	2.00	1.84
provided in one location.	2.00	1.04
<b>Cross-Training</b> - Staff training about the objectives, procedures and	1.88	1.93
services of the VA and your agency.	1.00	1.00
Interagency Agreements/ Memoranda of Understanding - Formal	2.38	2.28
and informal agreements between the VA and your agency covering	2.00	
such areas as collaboration, referrals, sharing client information, or		
coordinating services.		
Interagency Client Tracking Systems/ Management Information	1.81	1.60
<b>Systems</b> - Shared computer tracking systems that link the VA and		
your agency to promote information sharing, referrals, and client		
access.		
<b>Pooled/Joint Funding</b> - Combining or layering funds from the VA	2.13	1.67
and your agency to create new resources or services.	_	-
Uniform Applications, Eligibility Criteria, and Intake	2.19	1.80
Assessments – Standardized form that the client fills out only once		
to apply for services at the VA and your agency.		
Interagency Service Delivery Team/ Provider Coalition - Service	2.00	2.19
team comprised of staff from the VA and your agency to assist clients		
with multiple needs.		
Consolidation of Programs/ Agencies - Combining programs from	2.06	1.99
the VA and your agency under one administrative structure to		
integrate service delivery.		
Flexible Funding – Flexible funding used to fill gaps or acquire	1.69	1.63
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.		
Use of Special Waivers - Waiving requirements for funding, eligibility	2.00	1.68
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.		
System Integration Coordinator Position - A specific staff position	2.06	1.86
focused on systems integration activities such as identifying		
agencies, staffing interagency meetings, and assisting with joint		
proposal development.		

\*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\*

Halfway house or transitional living facility	One of our agencies received funding for 36 additional VA Grant and Per Diem beds.
Long-term, permanent housing	DeKalb County Housing Authority allotted 350 Section 8 housing vouchers to our HUD-VA Supported Housing program. We now have more resources to provide permanent housing to Veterans in the Atlanta metro area.
Re-entry services for incarcerated veterans	The VISN incarcerated Veteran re-entry specialist works closely with prisons in Georgia and Alabama to identify Veterans. This past year, the specialist conducted pre-release planning with 190 incarcerated Veterans (goal is to link Veterans with VA and community resources upon release).

\*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	Transition House, Inc. added 36 VA Grant and Per Diem beds.
Agency #2	DeKalb County Housing Authority allotted 350 Section 8 housing vouchers to our HUD-VA Supported Housing program. We now have more resources to provide permanent housing to Veterans in the Atlanta metro area.
Agency #3	A VISN 7 incarcerated Veterans re-entry specialist was hired. Over 190 incarcerated Veterans were interviewed and resources provided over the past year.

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

Emergency (immediate) shelter	A grant was awarded to Transition House Inc. to provide 36 additional transitional beds. Will implement 72-hour shelter beds through United Way.
Long-term, permanent housing	Atlanta VAMC received 350 Section 8 HUD-VASH vouchers in FY 2008. Ten additional HUD-VASH social work case managers will be hired.
Job training	Work closely with VA Compensated Work Therapy program to increase community contracts and more job opportunities. Work with the Georgia Department of Labor to assist Veterans with job training and employment.

\*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 7

#### Site: VAMC Birmingham, AL - 521

**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, nonprofit 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: 450

#### 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	25	25
Transitional Housing Beds	97	50
Permanent Housing Beds	80	50

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

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

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

## C. Rating of Need by CHALENG participants (homeless Veterans and VA/ community providers). Number of total participants: 51

Veteran mean score	Site provider mean score	VHA Mean Score (nationwide)*(all participants)
4.00	3 20	3.70
		3.85
		3.61
		3.50
		3.50
4.30	3.10	3.35
2.72	2.56	2.64
		3.59
		3.78
4.00	3.25	0.00
4.00	0.40	3.63
		3.42
		2.99
		3.96
		3.09
		3.79
		3.08
		3.62
		3.96
4.33	3.73	3.59
3.95	3.79	3.73
2.52	3.43	2.90
3.76	3.57	3.25
3.96	3.50	3.19
2.88	3.53	3.12
2.75	3.29	2.78
2.69	3.27	2.90
		2.75
		3.00
		2.98
0.20	0.21	3.12
3 43	3.21	0
0.10	0.21	3.52
3.75	3 20	3.28
		3.13
		2.49
		2.63
		2.03
		3.51
		0.01
5.25	2.32	2.80
4.00	2.20	
		3.01
		2.77
		2.60
2.78	2.57	2.60
3.45	3.29	2.69 3.10
	4.00         4.24         3.16         4.33         4.36         2.72         4.44         4.40         4.44         4.00         3.81         4.16         3.94         4.37         4.58         4.33         3.95         2.52         3.76         3.96         2.88	4.00 $3.20$ $4.24$ $3.53$ $3.16$ $3.40$ $4.33$ $3.00$ $4.36$ $3.18$ $2.72$ $2.56$ $4.44$ $3.19$ $4.44$ $3.31$ $4.00$ $3.25$ $4.00$ $3.13$ $3.81$ $3.50$ $4.16$ $3.93$ $3.88$ $3.40$ $4.50$ $3.40$ $3.94$ $3.07$ $4.37$ $3.36$ $4.58$ $3.73$ $4.33$ $3.73$ $3.95$ $3.79$ $2.52$ $3.43$ $3.76$ $3.57$ $3.96$ $3.50$ $2.88$ $3.53$ $2.75$ $3.29$ $2.69$ $3.27$ $3.06$ $3.07$ $2.95$ $3.53$ $3.23$ $3.21$ $3.43$ $3.21$ $3.75$ $3.20$ $3.05$ $3.29$ $3.05$ $3.29$ $3.05$ $3.67$ $3.23$ $2.92$ $2.92$ $2.79$

\*\*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 Type
--

Service Types	Local VA has existing collaborative agreement with this agency type?
Correctional Facilities (Jails, prisons, courts)	No
Psychiatric/substance abuse inpatient	Yes
(hospitals, wards	
Nursing homes	Yes
Faith-based organizations	No
Agencies that provide child care	Yes
Agencies that provide legal assistance for	Yes
child support issues	
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?	3.43	3.56
VA Service Coordination: Rate the ability of the VA to coordinate clinical services for homeless Veterans with your agency.	3.50	3.62

\*Scores of non-VA community agency representatives who completed Participant Survey. \*\*VHA: Veterans Healthcare Administration (139 reporting POC sites, n=3,615).

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

Community Agencies	1	1
Implementation Scale	Site Mean	VHA
<b>1 = None</b> , no steps taken to initiate implementation of the strategy.	Score	(nationwide)
2 = Low, in planning and/or initial minor steps taken.		Mean Score**
3 = Moderate, significant steps taken but full implementation not		
achieved.		
<b>4 = High</b> , strategy fully implemented.		
Interagency Coordinating Body - Representatives from the VA and	2.35	2.57
your agency meet formally to exchange information, do needs		
assessment, plan formal agreements, and promote access to		
services.		
Co-location of Services - Services from the VA and your agency	1.50	1.84
provided in one location.		
Cross-Training - Staff training about the objectives, procedures and	1.69	1.93
services of the VA and your agency.		
Interagency Agreements/ Memoranda of Understanding - Formal	2.13	2.28
and informal agreements between the VA and your agency covering		
such areas as collaboration, referrals, sharing client information, or		
coordinating services.		
Interagency Client Tracking Systems/ Management Information	1.63	1.60
<b>Systems</b> - Shared computer tracking systems that link the VA and		
your agency to promote information sharing, referrals, and client		
access.		
<b>Pooled/Joint Funding</b> - Combining or layering funds from the VA	1.50	1.67
and your agency to create new resources or services.	1.00	1.07
Uniform Applications, Eligibility Criteria, and Intake	1.88	1.80
Assessments – Standardized form that the client fills out only once		1100
to apply for services at the VA and your agency.		
Interagency Service Delivery Team/ Provider Coalition - Service	2.00	2.19
team comprised of staff from the VA and your agency to assist clients	2.00	2.1.0
with multiple needs.		
Consolidation of Programs/ Agencies - Combining programs from	1.88	1.99
the VA and your agency under one administrative structure to	1.00	1.00
integrate service delivery.		
Flexible Funding – Flexible funding used to fill gaps or acquire	1.44	1.63
additional resources to further systems integration; e.g. existence of a	1.77	1.00
VA and/or community agency fund used for contingencies,		
emergencies, or to purchase services not usually available for clients.		
Use of Special Waivers - Waiving requirements for funding, eligibility	1.44	1.68
	1.44	1.00
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 50	1 96
System Integration Coordinator Position - A specific staff position	1.50	1.86
focused on systems integration activities such as identifying		
agencies, staffing interagency meetings, and assisting with joint		
proposal development. *Scored of non-VA community agency representatives who compl		

\*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\*

Halfway house or transitional living facility	We have been funded by the VISN to open up a 9-bed facility.
Long-term, permanent housing	We are working with HUD and other community vendors to secure permanent housing for our homeless Veterans.
Help with finding a job or getting employment	We have secured one additional VA Compensated Work Therapy contract. We have established a working relationship with the Alabama State Vocational Rehabilitation Department. This agency provides training and employment.

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

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

Agency #1	Steps and Traditions provides 50 contract beds. The agency offers transportation, meals, and a 24/7 alcohol- and drug-free environment. They assist with problems during weekend and evening hours.
Agency #2	The Salvation Army provides 25 transitional housing beds at no cost to the VA. The patients can stay at this facility indefinitely provided they remain clean and sober.
Agency #3	Alabama State Vocational Rehabilitation Department provides both job training and employment placement for our homeless Veterans. They are very helpful.

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

Long-term, permanent housing	We have been awarded 105 HUD-VASH vouchers. We will help Veterans obtain permanent long-term housing in the community.
Dental care	We have established a working relationship with the VA dental clinic. We will refer homeless patients to the dental clinic for services.
VA disability/pension	We make referrals to the Veterans Benefits Officer (VBO) when patients request assistance with VA disability/pension.

\*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 7

#### Site: VAMC Charleston, SC - 534

**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, nonprofit 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: 1,541

2. Service Area type: Even mix of urban and rural

## 3. Number of Homeless Veteran Families (Veterans with minor dependents) Served in FY 2008 by local VA homeless program: 4

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

Housing type	# of Veteran- specific Beds in area*	# of additional beds site could use
Emergency Beds	0	100
Transitional Housing Beds	100	100
Permanent Housing Beds	35	55

\*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: 89

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	4.44	3.77	3.70
Food	4.31	4.00	3.85
Clothing	4.35	3.94	3.61
Emergency (immediate) shelter	4.28	3.45	3.50
Halfway house or transitional living	4.59	3.39	0.00
facility		0.00	3.35
Long-term, permanent housing	3.27	2.66	2.64
Detoxification from substances	4.44	3.65	3.59
Treatment for substance abuse	4.64	3.81	3.78
Services for emotional or psychiatric problems	4.31	3.84	3.63
Treatment for dual diagnosis	4.00	3.74	3.42
Family counseling	3.37	3.13	2.99
Medical services	4.69	4.19	3.96
Women's health care	3.30	3.66	3.09
Help with medication	4.74	3.90	3.79
Drop-in center or day program	4.16	3.03	3.08
AIDS/HIV testing/counseling	4.41	3.84	3.62
TB testing	4.76	4.09	3.96
TB treatment	4.16	4.09	3.59
Hepatitis C testing	4.60	4.06	3.73
Dental care	3.41	3.28	2.90
Eye care	4.27	3.53	3.25
Glasses	4.20	3.56	3.19
VA disability/pension	3.15	3.81	3.12
Welfare payments	2.24	3.31	2.78
SSI/SSD process	3.31	3.25	2.90
Guardianship (financial)	2.95	3.57	2.75
Help managing money	3.76	3.25	3.00
Job training	3.39	3.26	2.98
Help with finding a job or getting	3.63	3.47	
employment			3.12
Help getting needed documents or identification	3.90	3.28	3.52
Help with transportation	4.28	3.06	3.28
Education	4.02	3.45	3.13
Child care	3.08	2.71	2.49
Family reconciliation assistance	3.31	2.90	2.63
Discharge upgrade	3.18	3.03	2.91
Spiritual	3.74	3.63	3.51
Re-entry services for incarcerated Veterans	3.31	3.10	2.80
Elder Healthcare	3.46	3.03	3.01
Credit counseling	3.03	2.87	2.77
Legal assistance for child support issues	2.64	2.84	2.60
Legal assistance for outstanding warrants/fines	3.10	2.88	2.69
Help developing social network	3.67	3.31	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 <i>I</i>	Agreements	with Con	nmunity	Service <sup>-</sup>	Types:
----	-------------------	------------	----------	---------	----------------------	--------

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

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

Integration Scale: 1 (low) to 5 (high)	Site Mean Score	VHA (nationwide) Mean Score**
VA Accessibility: In general, how accessible do you feel VA services are to homeless Veterans in the community?	4.10	3.56
VA Service Coordination: Rate the ability of the VA to coordinate clinical services for homeless Veterans with your agency.	4.28	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

Community Agencies	r	1
Implementation Scale	Site Mean	VHA
<b>1 = None</b> , no steps taken to initiate implementation of the strategy.	Score	(nationwide)
2 = Low, in planning and/or initial minor steps taken.		Mean Score**
3 = Moderate, significant steps taken but full implementation not		
achieved.		
4 = High, strategy fully implemented.		
Interagency Coordinating Body - Representatives from the VA and	2.76	2.57
your agency meet formally to exchange information, do needs		
assessment, plan formal agreements, and promote access to		
services.		
Co-location of Services - Services from the VA and your agency	2.20	1.84
provided in one location.		
Cross-Training - Staff training about the objectives, procedures and	2.31	1.93
services of the VA and your agency.		
Interagency Agreements/ Memoranda of Understanding - Formal	2.93	2.28
and informal agreements between the VA and your agency covering		
such areas as collaboration, referrals, sharing client information, or		
coordinating services.		
Interagency Client Tracking Systems/ Management Information	1.73	1.60
Systems - Shared computer tracking systems that link the VA and		
your agency to promote information sharing, referrals, and client		
access.		
Pooled/Joint Funding - Combining or layering funds from the VA	2.00	1.67
and your agency to create new resources or services.		
Uniform Applications, Eligibility Criteria, and Intake	2.20	1.80
Assessments – Standardized form that the client fills out only once		
to apply for services at the VA and your agency.		
Interagency Service Delivery Team/ Provider Coalition - Service	2.53	2.19
team comprised of staff from the VA and your agency to assist clients		
with multiple needs.		
Consolidation of Programs/ Agencies - Combining programs from	2.00	1.99
the VA and your agency under one administrative structure to		
integrate service delivery.		
Flexible Funding – Flexible funding used to fill gaps or acquire	2.07	1.63
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.		
Use of Special Waivers - Waiving requirements for funding, eligibility	2.07	1.68
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.		
System Integration Coordinator Position - A specific staff position	2.13	1.86
focused on systems integration activities such as identifying		
agencies, staffing interagency meetings, and assisting with joint		
proposal development.		
*Scored of non-VA community agency representatives who compl	atad Dartiain	ant Cumuna

\*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	During FY 2008, Humanities Foundation provide permanent, affordable housing to 17 Veterans.
Help with transportation	We will continue to work with and support Humanities Foundation, the local HUD Continuum of Care, and local, city, and county officials to address ongoing transportation issues.
Education	Trident Technical College has served 81 Veterans since January 2008. Twelve have completed Upward Bound programs and seven have enrolled in local colleges.

\*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	Trident Technical College has served 81 Veterans since January 2008. Twelve have completed Upward Bound programs and seven have enrolled in local colleges. Partnership remains strong and program was funded for another year.
Agency #2	Good Neighbors Center is a VA Grant and Per Diem program that has placed 32 Veterans into permanent, affordable housing. We applaud the efforts of its staff.
Agency #3	Goodwill Industries provides job training and educational assistance through its Department of Labor Homeless Veterans Reintegration Program (HVRP). Goodwill co-sponsors our Stand Down and is an important outreach partner.

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

Long-term, permanent housing	Partner with HUD for HUD-VASH program. Continue partnership with Humanities Foundation to provide affordable permanent housing. Continue to work with local HUD Continuum of Care and Coalition on Housing and Homelessness to fund affordable housing.
Legal assistance for outstanding warrants/fines	Continue partnership with S.C. Legal Services to provide legal assistance to homeless Veterans. Expand partnership with Crisis Ministries Homeless Justice Project to provide legal services for homeless Veterans and develop a homeless court.
Re-entry services for incarcerated veterans	Support efforts of VA Re-entry Specialist for VISN 7 to identify and address barriers to provide efficient access to services to Veterans who are homeless upon discharge from prison or jail. Foster positive working relationship with Social Security Administration to facilitate reinstatement of SSI/SSD benefits.

\*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 7

#### Site: VAMC Columbia, SC - 544

**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, nonprofit 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: 1,063

#### 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	0
Transitional Housing Beds	56	0
Permanent Housing Beds	94	0

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

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

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

## C. Rating of Need by CHALENG participants (homeless Veterans and VA/ community providers). Number of total participants: 58

Need Ranking (1=Need Unmet	Site homeless	Site provider	VHA Mean Score	
5= Need Met)	Veteran mean score	mean score	(nationwide)*(all	
Personal hygiene	3.90	3.05	participants) 3.70	
	3.95	3.51		
Food Clothing			3.85	
	3.35	3.33	3.61	
Emergency (immediate) shelter	3.45	2.74	3.50	
Halfway house or transitional living	3.16	3.00	2.25	
facility	2.26	2.64	3.35	
Long-term, permanent housing	2.26	2.64	2.64	
Detoxification from substances	3.80	3.06	3.59	
Treatment for substance abuse	3.89	3.33	3.78	
Services for emotional or psychiatric	3.05	3.32	0.00	
problems	0.05	0.40	3.63	
Treatment for dual diagnosis	2.95	3.18	3.42	
Family counseling	2.68	3.00	2.99	
Medical services	3.85	3.71	3.96	
Women's health care	3.21	3.10	3.09	
Help with medication	4.28	3.37	3.79	
Drop-in center or day program	3.31	2.58	3.08	
AIDS/HIV testing/counseling	3.89	3.34	3.62	
TB testing	4.42	3.68	3.96	
TB treatment	3.83	3.63	3.59	
Hepatitis C testing	4.22	3.59	3.73	
Dental care	2.84	3.03	2.90	
Eye care	3.11	2.91	3.25	
Glasses	3.11	3.09	3.19	
VA disability/pension	3.11	3.42	3.12	
Welfare payments	2.59	3.06	2.78	
SSI/SSD process	2.53	3.00	2.90	
Guardianship (financial)	2.65	2.63	2.75	
Help managing money	2.76	2.86	3.00	
Job training	3.00	3.19	2.98	
Help with finding a job or getting	2.60	3.26		
employment			3.12	
Help getting needed documents or	3.89	3.29		
identification			3.52	
Help with transportation	3.15	3.06	3.28	
Education	2.79	3.14	3.13	
Child care	2.53	2.31	2.49	
Family reconciliation assistance	2.94	2.66	2.63	
Discharge upgrade	2.69	2.77	2.91	
Spiritual	3.39	3.54	3.51	
Re-entry services for incarcerated	2.76	2.72		
Veterans			2.80	
Elder Healthcare	2.67	2.84	3.01	
Credit counseling	2.67	2.63	2.77	
Legal assistance for child support issues	2.53	2.41	2.60	
Legal assistance for outstanding	2.19	2.34		
warrants/fines			2.69	
Help developing social network	3.00	2.97	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 <i>I</i>	Agreements	with Con	nmunity	Service <sup>-</sup>	Types:
----	-------------------	------------	----------	---------	----------------------	--------

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

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

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?	3.71	3.56
<b>VA Service Coordination</b> : Rate the ability of the VA to coordinate clinical services for homeless Veterans with your agency.	3.66	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

Community Agencies Implementation Scale	Site Mean	VHA
	Score	(nationwide)
<b>1 = None</b> , no steps taken to initiate implementation of the strategy.	Score	
2 = Low, in planning and/or initial minor steps taken.		Mean Score**
<b>3 = Moderate</b> , significant steps taken but full implementation not		
achieved.		
4 = High, strategy fully implemented.	0.00	0.57
Interagency Coordinating Body - Representatives from the VA and	2.80	2.57
your agency meet formally to exchange information, do needs		
assessment, plan formal agreements, and promote access to		
services.	2.00	4.04
<b>Co-location of Services</b> - Services from the VA and your agency	2.00	1.84
provided in one location.	0.00	1.02
<b>Cross-Training</b> - Staff training about the objectives, procedures and	2.38	1.93
services of the VA and your agency.	2.24	2.20
Interagency Agreements/ Memoranda of Understanding - Formal	2.34	2.28
and informal agreements between the VA and your agency covering		
such areas as collaboration, referrals, sharing client information, or		
coordinating services.	2.25	1.60
Interagency Client Tracking Systems/ Management Information	2.20	1.60
<b>Systems</b> - Shared computer tracking systems that link the VA and		
your agency to promote information sharing, referrals, and client		
access.	1.70	1.67
<b>Pooled/Joint Funding</b> - Combining or layering funds from the VA and your agency to create new resources or services.	1.70	1.07
Uniform Applications, Eligibility Criteria, and Intake	2.00	1.80
Assessments – Standardized form that the client fills out only once	2.00	1.00
to apply for services at the VA and your agency.		
Interagency Service Delivery Team/ Provider Coalition - Service	2.46	2.19
team comprised of staff from the VA and your agency to assist clients	2.70	2.10
with multiple needs.		
Consolidation of Programs/ Agencies - Combining programs from	2.14	1.99
the VA and your agency under one administrative structure to	2.17	1.33
integrate service delivery.		
Flexible Funding – Flexible funding used to fill gaps or acquire	1.64	1.63
additional resources to further systems integration; e.g. existence of a	1.04	1.00
VA and/or community agency fund used for contingencies,		
emergencies, or to purchase services not usually available for clients.		
Use of Special Waivers - Waiving requirements for funding, eligibility	1.69	1.68
or service delivery to reduce barriers to service, eliminate duplication	1.03	1.00
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.		
System Integration Coordinator Position - A specific staff position	1.93	1.86
focused on systems integration activities such as identifying	1.00	1.00
agencies, staffing interagency meetings, and assisting with joint		
proposal development.		
*Scored of non-VA community agency representatives who compl	atad Dartiain	

\*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	Our program received 70 HUD-VA Supported Housing vouchers. We will continue to also help Veterans who may exceed the income level for HUD-VA Supported Housing.
Women's health care	We educate Veterans about women's health care available at our VA.
Halfway house or transitional living facility	Christ Central provides16 beds. Technical grant writing workshop was held in March 2008 and another workshop will be held in January 2009.
*The Action Plan con	sisted of proposed strategies the local VA program and its

\*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	Christ Central Ministries recently opened up a 16-bed facility with another 16 beds available shortly (final capacity will be 96 beds). The facility will provide job training (small appliance repair, horticulture, computer-assisted design). Veterans successfully completing the program may obtain a scholarship to a college operated by Christ Central.
Agency #2	(no agency identified)
Agency #3	(no agency identified)

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

Emergency (immediate) shelter	The program has a contract with Christ Central Ministries. Currently, the agency can house 16 Veterans. We expect to house an additional 16 (total 32) shortly. The agency will eventually have the capacity to house 96 Veterans. Our staff will work with VA hospital staff to ensure that no Veterans are discharged to the streets/shelters.
Long-term, permanent housing	Our program has received 70 HUD-VASH vouchers. Our VA Health Care for Homeless Veterans program will assist our Veterans in locating affordable housing. Placement in HUD housing for a period of time could result in our Veterans ultimately owning his/her own home
Transitional living facility or halfway house	The contract housing at Christ Central provides immediate and transitional shelter/housing. VA Health Care for Homeless Veterans staff will work with hospital staff to ensure that no Veterans are discharged to the streets/shelters.

\*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 7

#### Site: VAMC Dublin, GA - 557

**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, nonprofit 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: 875

#### 2. Service Area type: Predominantly rural

## **3.** Number of Homeless Veteran Families (Veterans with minor dependents) Served in FY 2008 by local VA homeless program: 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	0
Transitional Housing Beds	0	0
Permanent Housing Beds	0	25

\*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: 87

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	4.43	3.61	3.70
Food	4.31	3.68	3.85
Clothing	4.42	3.55	3.61
Emergency (immediate) shelter	4.00	2.97	3.50
Halfway house or transitional living	2.83	2.23	3.50
facility	2.03	2.23	3.35
Long-term, permanent housing	2.35	2.39	2.64
Detoxification from substances	3.98	3.13	3.59
		3.52	
Treatment for substance abuse Services for emotional or psychiatric	4.37 3.71	3.39	3.78
problems	3.71	3.39	3.63
Treatment for dual diagnosis	3.43	3.20	3.42
Family counseling Medical services	2.86 4.34	2.74	2.99
		4.00	3.96
Women's health care	3.03	3.26	3.09
Help with medication	4.33	3.52	3.79
Drop-in center or day program	3.16	2.16	3.08
AIDS/HIV testing/counseling	4.02	3.73	3.62
TB testing	4.53	3.90	3.96
TB treatment	3.74	3.84	3.59
Hepatitis C testing	3.88	3.55	3.73
Dental care	3.57	3.03	2.90
Eye care	4.08	2.94	3.25
Glasses	3.94	3.03	3.19
VA disability/pension	2.63	3.41	3.12
Welfare payments	2.23	2.69	2.78
SSI/SSD process	2.73	2.91	2.90
Guardianship (financial)	2.71	2.31	2.75
Help managing money	3.79	2.38	3.00
Job training	2.96	2.97	2.98
Help with finding a job or getting	3.38	3.21	
employment			3.12
Help getting needed documents or	3.85	3.58	
identification			3.52
Help with transportation	3.20	2.22	3.28
Education	3.25	2.79	3.13
Child care	2.61	1.88	2.49
Family reconciliation assistance	2.41	2.31	2.63
Discharge upgrade	2.90	2.48	2.91
Spiritual	4.04	3.23	3.51
Re-entry services for incarcerated	3.05	2.70	
Veterans			2.80
Elder Healthcare	2.95	3.00	3.01
Credit counseling	2.67	2.35	2.77
Legal assistance for child support issues	2.61	2.28	2.60
Legal assistance for outstanding warrants/fines	2.93	2.13	2.69
Help developing social network	3.60	2.81	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 <i>I</i>	Agreements	with Con	nmunity	Service <sup>-</sup>	Types:
----	-------------------	------------	----------	---------	----------------------	--------

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

### 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?	3.74	3.56
VA Service Coordination: Rate the ability of the VA to coordinate clinical services for homeless Veterans with your agency.	3.48	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

Community Agencies		
Implementation Scale	Site Mean	VHA
<b>1 = None</b> , no steps taken to initiate implementation of the strategy.	Score	(nationwide)
2 = Low, in planning and/or initial minor steps taken.		Mean Score**
3 = Moderate, significant steps taken but full implementation not		
achieved.		
4 = High, strategy fully implemented.		
Interagency Coordinating Body - Representatives from the VA and	2.46	2.57
your agency meet formally to exchange information, do needs		
assessment, plan formal agreements, and promote access to		
services.		
Co-location of Services - Services from the VA and your agency	2.07	1.84
provided in one location.		
Cross-Training - Staff training about the objectives, procedures and	1.48	1.93
services of the VA and your agency.		
Interagency Agreements/ Memoranda of Understanding - Formal	1.96	2.28
and informal agreements between the VA and your agency covering		
such areas as collaboration, referrals, sharing client information, or		
coordinating services.		
Interagency Client Tracking Systems/ Management Information	1.58	1.60
Systems - Shared computer tracking systems that link the VA and		
your agency to promote information sharing, referrals, and client		
access.		
Pooled/Joint Funding - Combining or layering funds from the VA	1.85	1.67
and your agency to create new resources or services.		
Uniform Applications, Eligibility Criteria, and Intake	1.77	1.80
Assessments – Standardized form that the client fills out only once		
to apply for services at the VA and your agency.		
Interagency Service Delivery Team/ Provider Coalition - Service	1.92	2.19
team comprised of staff from the VA and your agency to assist clients		
with multiple needs.		
Consolidation of Programs/ Agencies - Combining programs from	2.15	1.99
the VA and your agency under one administrative structure to		
integrate service delivery.		
Flexible Funding – Flexible funding used to fill gaps or acquire	1.65	1.63
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.		
Use of Special Waivers - Waiving requirements for funding, eligibility	1.73	1.68
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.		
System Integration Coordinator Position - A specific staff position	1.69	1.86
focused on systems integration activities such as identifying		
agencies, staffing interagency meetings, and assisting with joint		
proposal development.	leted Particip	

\*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 now have 35 HUD-VA Supported Housing vouchers and are working with HUD to explore other housing opportunities.
Halfway house or transitional living facility	Two non-VA agencies provide transitional housing; we may be working with two additional agencies soon.
Help with finding a job or getting employment	We have increased the number of VA Compensated Work Therapy positions on site. We are partnering with a local technical college on a work-readiness 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	Veterans in Christ provides much-needed transitional housing to our Veterans.
Agency #2	Georgia Department of Labor does an excellent job in reaching out to Veterans and providing job training, job opportunities, and other resources.
Agency #3	Salvation Army (Savannah) provides logistical support, outreach, and a location for our annual Savannah Stand Down.

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

Long-term, permanent housing	Increase utilization of the HUD-VASH program within our service area. Improve and develop positive relationships with local leasing agents and realtors.
Transitional living facility or halfway house	Foster growth of non-VA transitional housing resources. Continue to work on planning and development of VA Compensated Work Therapy transitional residence facilities in Macon, Albany, Savannah.
Help with finding a job or getting employment	Continue developing a relationship with area technical college to provide work ready study. Continue to create VA Compensated Work Therapy positions within the facility and community. Work with Veterans with legal issues and felony forgiveness in the work force.
*The Action Plan out	lines proposed strategies the local VA program and its community

\*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 7

#### Site: VAMC Tuscaloosa, AL - 679

**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, nonprofit 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: 79

#### 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	8	10
Transitional Housing Beds	127	60
Permanent Housing Beds	44	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: 99

Need Ranking (1=Need Unmet	Site homeless Veteran mean score	Site provider mean score	VHA Mean Score (nationwide)*(all
5= Need Met)			participants)
Personal hygiene	4.13	3.73	3.70
Food	4.30	3.91	3.85
Clothing	3.75	3.94	3.61
Emergency (immediate) shelter	3.88	3.69	3.50
Halfway house or transitional living	3.43	3.64	0.00
facility	0.10	0.01	3.35
Long-term, permanent housing	3.00	3.38	2.64
Detoxification from substances	4.02	3.52	3.59
Treatment for substance abuse	4.12	3.94	3.78
Services for emotional or psychiatric	3.87	4.09	
problems	0.01	1.00	3.63
Treatment for dual diagnosis	3.73	3.97	3.42
Family counseling	3.09	3.56	2.99
Medical services	4.13	4.22	3.96
Women's health care	2.75	3.87	3.09
Help with medication	4.25	4.06	3.79
Drop-in center or day program	3.39	3.09	3.08
AIDS/HIV testing/counseling	3.89	3.87	3.62
TB testing	4.07	4.06	3.96
TB treatment	3.61	4.00	3.59
Hepatitis C testing	3.69	3.97	3.73
Dental care	3.29	3.55	2.90
Eye care	3.72	3.78	3.25
Glasses	3.72	3.75	3.19
VA disability/pension	2.42	3.88	3.12
Welfare payments	1.98	3.61	2.78
SSI/SSD process	2.72	3.55	2.90
Guardianship (financial)	2.26	3.69	2.75
Help managing money	3.16	3.71	3.00
Job training	2.71	3.78	2.98
Help with finding a job or getting	2.72	3.78	2.30
employment	2.12	5.70	3.12
Help getting needed documents or	3.38	3.71	0.12
identification	3.50	5.71	3.52
Help with transportation	3.26	3.26	3.28
Education	3.13	3.42	3.13
Child care	2.50	2.67	2.49
Family reconciliation assistance	2.60	3.23	2.63
Discharge upgrade	2.38	3.69	2.03
Spiritual	3.76	4.07	3.51
Re-entry services for incarcerated	2.64	3.20	0.01
Veterans	2.07	0.20	2.80
Elder Healthcare	2.90	3.73	3.01
Credit counseling	2.41	3.35	2.77
Legal assistance for child support issues	2.57	3.07	2.60
Legal assistance for outstanding	2.28	3.10	2.00
warrants/fines	2.20	5.10	2.69
wananto/111100	2.83	3.77	2.03

\*\*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 Ty	pes:
--	------

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

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

Integration Scale: 1 (low) to 5 (high)	Site Mean Score	VHA (nationwide) Mean Score**
VA Accessibility: In general, how accessible do you feel VA services are to homeless Veterans in the community?	4.09	3.56
VA Service Coordination: Rate the ability of the VA to coordinate clinical services for homeless Veterans with your agency.	4.00	3.62

\*Scores of non-VA community agency representatives who completed Participant Survey. \*\*VHA: Veterans Healthcare Administration (139 reporting POC sites, n=3,615).

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

Community Agencies		
Implementation Scale	Site Mean	VHA
<b>1</b> = <b>None</b> , no steps taken to initiate implementation of the strategy.	Score	(nationwide)
2 = Low, in planning and/or initial minor steps taken.		Mean Score**
<b>3 = Moderate</b> , significant steps taken but full implementation not		
achieved.		
4 = High, strategy fully implemented.		
Interagency Coordinating Body - Representatives from the VA and	2.73	2.57
your agency meet formally to exchange information, do needs		
assessment, plan formal agreements, and promote access to		
services.		
Co-location of Services - Services from the VA and your agency	2.43	1.84
provided in one location.		
Cross-Training - Staff training about the objectives, procedures and	2.57	1.93
services of the VA and your agency.		
Interagency Agreements/ Memoranda of Understanding - Formal	2.52	2.28
and informal agreements between the VA and your agency covering		
such areas as collaboration, referrals, sharing client information, or		
coordinating services.		
Interagency Client Tracking Systems/ Management Information	2.22	1.60
Systems - Shared computer tracking systems that link the VA and		
your agency to promote information sharing, referrals, and client		
access.		
Pooled/Joint Funding - Combining or layering funds from the VA	2.35	1.67
and your agency to create new resources or services.		
Uniform Applications, Eligibility Criteria, and Intake	2.45	1.80
Assessments – Standardized form that the client fills out only once		
to apply for services at the VA and your agency.		
Interagency Service Delivery Team/ Provider Coalition - Service	2.73	2.19
team comprised of staff from the VA and your agency to assist clients		
with multiple needs.		
Consolidation of Programs/ Agencies - Combining programs from	2.59	1.99
the VA and your agency under one administrative structure to		
integrate service delivery.		
Flexible Funding – Flexible funding used to fill gaps or acquire	2.64	1.63
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.		
Use of Special Waivers - Waiving requirements for funding, eligibility	2.45	1.68
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.		
System Integration Coordinator Position - A specific staff position	2.50	1.86
focused on systems integration activities such as identifying		
agencies, staffing interagency meetings, and assisting with joint		
proposal development.		
*Scored of non-VA community agency representatives who compl	I Interi Dentinin	

\*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, addit	ocal HUD Continuum of Care applied recently for five ional Shelter Plus Care vouchers for homeless Veterans, but ot receive them.
	10-bed Salvation Army VA Grant and Per Diem program has full since its opening in December 2007.
a job or getting employment	Tuscaloosa VA Medical Center provided supported oyment to 18 Veterans over the past year.

\*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 provides transitional housing services to our homeless Veterans.`
Agency #2	The Tuscaloosa Housing Authority collaborates with us in the operation of the HUD-VA Supported Housing and HUD Shelter Plus Care permanent housing programs.
Agency #3	James O. Ellis Center provides free dental care for the homeless. They assist Veterans who have needs and are ineligible for VA dental care.

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

Long-term, permanent housing	The local HUD continuum submitted an application for an additional four Shelter Plus Care units. Our local medical center will make referrals and fill 35 units through the HUD-VASH program.
Dental care	In compliance with the Homeless Veterans Dental Program, our medical center will refer all eligible Veterans for dental care.
Transitional living facility or halfway house	Our local medical center submitted a proposal to provide transitional housing to women and children. The plan is to for a local community provider to convert a vacant VA building. The Salvation Army expressed interest in an additional VA Per Diem grant.

\*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.