

CHALENG 2008 Survey Results Summary

VISN 8

Site: VA North Florida/South Georgia HCS (VAMC Gainesville - 573 and VAMC Lake City - 573A4)

Note: CHALENG data is collected from two surveys. The CHALENG Point of Contact (POC) Survey is a self-administered questionnaire completed by the local VA homeless Veteran coordinator. The CHALENG Participant Survey is completed by federal, state, county, city, non-profit and for-profit agency representatives, as well as local VA staff and homeless Veterans themselves. Data was collected in the summer/fall of 2008.

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

1. **Estimated Number of Homeless Veterans:** 1,400
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:** 12

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	300
Transitional Housing Beds	78	200
Permanent Housing Beds	140	250

*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: 180

Need Ranking (1=Need Unmet 5= Need Met)	Site homeless Veteran mean score	Site provider mean score	VHA Mean Score (nationwide)*(all participants)
Personal hygiene	3.74	3.21	3.70
Food	3.80	3.55	3.85
Clothing	3.58	3.46	3.61
Emergency (immediate) shelter	3.35	2.45	3.50
Halfway house or transitional living facility	3.12	2.39	3.35
Long-term, permanent housing	2.35	2.28	2.64
Detoxification from substances	3.70	2.85	3.59
Treatment for substance abuse	3.71	2.90	3.78
Services for emotional or psychiatric problems	3.72	3.00	3.63
Treatment for dual diagnosis	3.51	2.78	3.42
Family counseling	3.12	2.73	2.99
Medical services	3.95	3.56	3.96
Women's health care	3.12	3.22	3.09
Help with medication	3.98	3.17	3.79
Drop-in center or day program	3.35	2.65	3.08
AIDS/HIV testing/counseling	3.86	3.36	3.62
TB testing	3.93	3.37	3.96
TB treatment	3.55	3.24	3.59
Hepatitis C testing	3.66	3.38	3.73
Dental care	2.21	2.45	2.90
Eye care	3.11	3.04	3.25
Glasses	3.15	3.08	3.19
VA disability/pension	2.86	3.29	3.12
Welfare payments	2.41	2.97	2.78
SSI/SSD process	2.49	2.95	2.90
Guardianship (financial)	2.43	2.76	2.75
Help managing money	2.84	2.54	3.00
Job training	2.64	2.73	2.98
Help with finding a job or getting employment	3.05	2.89	3.12
Help getting needed documents or identification	3.44	3.15	3.52
Help with transportation	3.46	2.93	3.28
Education	3.50	2.88	3.13
Child care	2.63	2.21	2.49
Family reconciliation assistance	2.49	2.50	2.63
Discharge upgrade	2.83	2.75	2.91
Spiritual	3.54	3.19	3.51
Re-entry services for incarcerated Veterans	3.02	2.61	2.80
Elder Healthcare	3.00	2.92	3.01
Credit counseling	2.61	2.70	2.77
Legal assistance for child support issues	2.46	2.31	2.60
Legal assistance for outstanding warrants/fines	2.33	2.33	2.69
Help developing social network	2.85	2.65	3.10

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

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

1. Existing Agreements with Community Service Types:

Service Types	Local VA has existing collaborative agreement with this agency type?
Correctional Facilities (Jails, prisons, courts)	Yes
Psychiatric/substance abuse inpatient (hospitals, wards)	Yes
Nursing homes	Yes
Faith-based organizations	Yes
Agencies that provide child care	Yes
Agencies that provide legal assistance for child support issues	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?	3.62	3.56
VA Service Coordination: Rate the ability of the VA to coordinate clinical services for homeless Veterans with your agency.	3.69	3.62

*Scores of non-VA community agency representatives who completed Participant Survey.

**VHA: Veterans Healthcare Administration (139 reporting POC sites, n=3,615).

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

Implementation Scale 1 = None , no steps taken to initiate implementation of the strategy. 2 = Low , in planning and/or initial minor steps taken. 3 = Moderate , significant steps taken but full implementation not achieved. 4 = High , strategy fully implemented.	Site Mean Score	VHA (nationwide) Mean Score**
Interagency Coordinating Body - Representatives from the VA and your agency meet formally to exchange information, do needs assessment, plan formal agreements, and promote access to services.	2.83	2.57
Co-location of Services - Services from the VA and your agency provided in one location.	2.35	1.84
Cross-Training - Staff training about the objectives, procedures and services of the VA and your agency.	2.00	1.93
Interagency Agreements/ Memoranda of Understanding - Formal and informal agreements between the VA and your agency covering such areas as collaboration, referrals, sharing client information, or coordinating services.	2.37	2.28
Interagency Client Tracking Systems/ Management Information Systems - Shared computer tracking systems that link the VA and your agency to promote information sharing, referrals, and client access.	1.71	1.60
Pooled/Joint Funding - Combining or layering funds from the VA and your agency to create new resources or services.	1.77	1.67
Uniform Applications, Eligibility Criteria, and Intake Assessments – Standardized form that the client fills out only once to apply for services at the VA and your agency.	1.98	1.80
Interagency Service Delivery Team/ Provider Coalition - Service team comprised of staff from the VA and your agency to assist clients with multiple needs.	2.39	2.19
Consolidation of Programs/ Agencies - Combining programs from the VA and your agency under one administrative structure to integrate service delivery.	2.30	1.99
Flexible Funding – Flexible funding used to fill gaps or acquire additional resources to further systems integration; e.g. existence of a VA and/or community agency fund used for contingencies, emergencies, or to purchase services not usually available for clients.	1.67	1.63
Use of Special Waivers - Waiving requirements for funding, eligibility or service delivery to reduce barriers to service, eliminate duplication of services, or promote access to comprehensive services; e.g. VA providing services to clients typically ineligible for certain services (e.g. dental) or community agencies waiving entry requirements to allow clients access to services.	1.82	1.68
System Integration Coordinator Position - A specific staff position focused on systems integration activities such as identifying agencies, staffing interagency meetings, and assisting with joint proposal development.	2.03	1.86

*Scored of non-VA community agency representatives who completed Participant Survey.

**VHA: Veterans Healthcare Administration (138 reporting POC sites, n=3,055. Mean score of sites).

E. Action Plans: FY 2008 and FY 2009

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

Long-term, permanent housing	We were awarded 140 vouchers to begin a new HUD-VA Supported Housing program.
Dental Care	We continue to use a fee-basis dental provider for our Homeless Veterans Dental Program (HVDP). There has been an increase in the number of Veterans served.
Emergency (immediate) shelter	Creating a Lake City shelter continues to be a goal: we are collaborating with other providers to develop a one-stop homeless center that would include this new shelter. Progress has been delayed over a year, however due to disagreement over the site.

***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	Alachua County Organization for Rural Needs, Inc. (ACORN) provides fee-basis care to our Veterans through the Homeless Veterans Dental Program (HVDP).
Agency #2	(no agency identified)
Agency #3	(no agency identified)

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

Emergency (immediate) shelter	Continue work with local coalitions. Plans under development include : (1) a One Stop Homeless Center with shelter for Gainesville/Alachua County; (2) new emergency shelter for Luke City/Columbia County; and (3) new shelter for Thomasville, Ga.
Long-term, permanent housing	Our VA Health Care for Homeless Veterans program plans to pursue additional HUD-VASH vouchers targeting Jacksonville and Tallahassee. Implement/Issue HUD-VASH vouchers received in FY08. Pursue additional staff to provide case management that will allow Veterans to access non-VA voucher programs.
Transitional living facility or halfway house	Continue efforts to mobilize new community partners to apply for VA Grant and Per Diem funding. Work with partners to bring projects funded in FY08 to operational status.

***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 8

Site: VAH Tampa, FL - 673

Note: CHALENG data is collected from two surveys. The CHALENG Point of Contact (POC) Survey is a self-administered questionnaire completed by the local VA homeless Veteran coordinator. The CHALENG Participant Survey is completed by federal, state, county, city, non-profit and for-profit agency representatives, as well as local VA staff and homeless Veterans themselves. Data was collected in the summer/fall of 2008.

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

- 1. Estimated Number of Homeless Veterans:** 1,570
- 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:** 45

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	192
Transitional Housing Beds	25	70
Permanent Housing Beds	105	250

*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: 61

Need Ranking (1=Need Unmet 5= Need Met)	Site homeless Veteran mean score	Site provider mean score	VHA Mean Score (nationwide)*(all participants)
Personal hygiene	3.74	3.04	3.70
Food	4.10	3.19	3.85
Clothing	3.16	3.19	3.61
Emergency (immediate) shelter	3.97	2.16	3.50
Halfway house or transitional living facility	3.87	2.43	3.35
Long-term, permanent housing	2.83	2.00	2.64
Detoxification from substances	3.93	2.80	3.59
Treatment for substance abuse	4.13	3.23	3.78
Services for emotional or psychiatric problems	3.97	3.18	3.63
Treatment for dual diagnosis	3.77	2.95	3.42
Family counseling	2.73	2.36	2.99
Medical services	4.35	3.45	3.96
Women's health care	3.05	3.36	3.09
Help with medication	4.20	3.59	3.79
Drop-in center or day program	2.92	2.68	3.08
AIDS/HIV testing/counseling	4.11	3.71	3.62
TB testing	4.41	3.95	3.96
TB treatment	3.57	3.81	3.59
Hepatitis C testing	4.07	3.77	3.73
Dental care	3.42	2.16	2.90
Eye care	4.23	3.05	3.25
Glasses	3.90	3.09	3.19
VA disability/pension	3.14	3.45	3.12
Welfare payments	2.59	3.05	2.78
SSI/SSD process	2.63	3.36	2.90
Guardianship (financial)	2.68	3.00	2.75
Help managing money	3.28	2.64	3.00
Job training	3.13	2.86	2.98
Help with finding a job or getting employment	3.14	2.91	3.12
Help getting needed documents or identification	3.73	2.86	3.52
Help with transportation	3.07	2.59	3.28
Education	3.13	2.68	3.13
Child care	2.68	1.96	2.49
Family reconciliation assistance	2.39	2.50	2.63
Discharge upgrade	2.63	2.86	2.91
Spiritual	3.65	3.14	3.51
Re-entry services for incarcerated Veterans	2.76	2.68	2.80
Elder Healthcare	3.35	3.05	3.01
Credit counseling	2.68	2.45	2.77
Legal assistance for child support issues	2.63	2.41	2.60
Legal assistance for outstanding warrants/fines	2.65	2.50	2.69
Help developing social network	3.39	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 Agreements with Community Service Types:

Service Types	Local VA has existing collaborative agreement with this agency type?
Correctional Facilities (Jails, prisons, courts)	Yes
Psychiatric/substance abuse inpatient (hospitals, wards)	Yes
Nursing homes	Yes
Faith-based organizations	Yes
Agencies that provide child care	Yes
Agencies that provide legal assistance for child support issues	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?	3.79	3.56
VA Service Coordination: Rate the ability of the VA to coordinate clinical services for homeless Veterans with your agency.	3.91	3.62

*Scores of non-VA community agency representatives who completed Participant Survey.

**VHA: Veterans Healthcare Administration (139 reporting POC sites, n=3,615).

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

Implementation Scale 1 = None , no steps taken to initiate implementation of the strategy. 2 = Low , in planning and/or initial minor steps taken. 3 = Moderate , significant steps taken but full implementation not achieved. 4 = High , strategy fully implemented.	Site Mean Score	VHA (nationwide) Mean Score**
Interagency Coordinating Body - Representatives from the VA and your agency meet formally to exchange information, do needs assessment, plan formal agreements, and promote access to services.	2.47	2.57
Co-location of Services - Services from the VA and your agency provided in one location.	1.73	1.84
Cross-Training - Staff training about the objectives, procedures and services of the VA and your agency.	1.93	1.93
Interagency Agreements/ Memoranda of Understanding - Formal and informal agreements between the VA and your agency covering such areas as collaboration, referrals, sharing client information, or coordinating services.	2.64	2.28
Interagency Client Tracking Systems/ Management Information Systems - Shared computer tracking systems that link the VA and your agency to promote information sharing, referrals, and client access.	1.50	1.60
Pooled/Joint Funding - Combining or layering funds from the VA and your agency to create new resources or services.	1.60	1.67
Uniform Applications, Eligibility Criteria, and Intake Assessments – Standardized form that the client fills out only once to apply for services at the VA and your agency.	1.67	1.80
Interagency Service Delivery Team/ Provider Coalition - Service team comprised of staff from the VA and your agency to assist clients with multiple needs.	2.29	2.19
Consolidation of Programs/ Agencies - Combining programs from the VA and your agency under one administrative structure to integrate service delivery.	1.93	1.99
Flexible Funding – Flexible funding used to fill gaps or acquire additional resources to further systems integration; e.g. existence of a VA and/or community agency fund used for contingencies, emergencies, or to purchase services not usually available for clients.	1.36	1.63
Use of Special Waivers - Waiving requirements for funding, eligibility or service delivery to reduce barriers to service, eliminate duplication of services, or promote access to comprehensive services; e.g. VA providing services to clients typically ineligible for certain services (e.g. dental) or community agencies waiving entry requirements to allow clients access to services.	1.57	1.68
System Integration Coordinator Position - A specific staff position focused on systems integration activities such as identifying agencies, staffing interagency meetings, and assisting with joint proposal development.	1.79	1.86

*Scored of non-VA community agency representatives who completed Participant Survey.
 **VHA: Veterans Healthcare Administration (138 reporting POC sites, n=3,055. Mean score of sites).

E. Action Plans: FY 2008 and FY 2009

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

Emergency (immediate) shelter	We continue to try to find more resources as some local shelter beds have closed.
Halfway house or transitional living facility	Several local agencies have applied for VA Grant and Per Diem funding.
Dental Care	Reduced county budgets have negatively impacted efforts to develop community dental care resources.

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

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

Agency #1	New Beginnings of Tampa added more shelter beds.
Agency #2	(no agency identified)
Agency #3	(no agency identified)

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

Long-term, permanent housing	Work with HUD and with local homeless coalitions to increase subsidized permanent housing.
Dental care	Work with county and state coalitions to advocate for funds for dental care for Veterans. Work with Homeless Veterans Dental Program for funds for homeless Veterans.
Emergency (immediate) shelter	Continue to work with coalitions, county and state government for more funding.

*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 8

Site: VAMC Bay Pines - 516

Note: CHALENG data is collected from two surveys. The CHALENG Point of Contact (POC) Survey is a self-administered questionnaire completed by the local VA homeless Veteran coordinator. The CHALENG Participant Survey is completed by federal, state, county, city, non-profit and for-profit agency representatives, as well as local VA staff and homeless Veterans themselves. Data was collected in the summer/fall of 2008.

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

1. **Estimated Number of Homeless Veterans:** 2,500
2. **Service Area type:** Predominantly urban
3. **Number of Homeless Veteran Families (Veterans with minor dependents) Served in FY 2008 by local VA homeless program:** 10

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	173	125
Transitional Housing Beds	94	150
Permanent Housing Beds	280	502

*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: 117

Need Ranking (1=Need Unmet 5= Need Met)	Site homeless Veteran mean score	Site provider mean score	VHA Mean Score (nationwide)*(all participants)
Personal hygiene	3.68	3.00	3.70
Food	3.85	3.62	3.85
Clothing	3.56	3.24	3.61
Emergency (immediate) shelter	3.55	2.76	3.50
Halfway house or transitional living facility	3.51	2.72	3.35
Long-term, permanent housing	2.80	2.38	2.64
Detoxification from substances	3.99	2.84	3.59
Treatment for substance abuse	4.03	3.20	3.78
Services for emotional or psychiatric problems	3.67	2.92	3.63
Treatment for dual diagnosis	3.59	2.75	3.42
Family counseling	3.22	2.58	2.99
Medical services	4.35	3.56	3.96
Women's health care	3.11	2.88	3.09
Help with medication	4.22	3.50	3.79
Drop-in center or day program	3.26	2.83	3.08
AIDS/HIV testing/counseling	3.74	3.28	3.62
TB testing	4.17	3.32	3.96
TB treatment	3.81	3.16	3.59
Hepatitis C testing	4.09	3.04	3.73
Dental care	3.11	2.48	2.90
Eye care	3.41	2.76	3.25
Glasses	3.38	2.76	3.19
VA disability/pension	2.74	3.25	3.12
Welfare payments	2.15	2.83	2.78
SSI/SSD process	2.37	2.65	2.90
Guardianship (financial)	2.58	2.39	2.75
Help managing money	3.09	2.54	3.00
Job training	3.06	2.58	2.98
Help with finding a job or getting employment	2.93	2.71	3.12
Help getting needed documents or identification	3.75	2.80	3.52
Help with transportation	3.37	2.76	3.28
Education	3.11	2.75	3.13
Child care	2.40	2.32	2.49
Family reconciliation assistance	2.62	2.26	2.63
Discharge upgrade	2.75	2.87	2.91
Spiritual	3.40	3.00	3.51
Re-entry services for incarcerated Veterans	2.97	2.09	2.80
Elder Healthcare	3.01	2.52	3.01
Credit counseling	3.04	2.52	2.77
Legal assistance for child support issues	2.38	2.48	2.60
Legal assistance for outstanding warrants/fines	2.49	2.61	2.69
Help developing social network	3.09	3.00	3.10

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

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

1. Existing Agreements with Community Service Types:

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

2. Community Ratings of VA/Community Integration*

Integration Scale: 1 (low) to 5 (high)	Site Mean Score	VHA (nationwide) Mean Score**
VA Accessibility: In general, how accessible do you feel VA services are to homeless Veterans in the community?	3.67	3.56
VA Service Coordination: Rate the ability of the VA to coordinate clinical services for homeless Veterans with your agency.	3.52	3.62

*Scores of non-VA community agency representatives who completed Participant Survey.

**VHA: Veterans Healthcare Administration (139 reporting POC sites, n=3,615).

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

Implementation Scale 1 = None , no steps taken to initiate implementation of the strategy. 2 = Low , in planning and/or initial minor steps taken. 3 = Moderate , significant steps taken but full implementation not achieved. 4 = High , strategy fully implemented.	Site Mean Score	VHA (nationwide) Mean Score**
Interagency Coordinating Body - Representatives from the VA and your agency meet formally to exchange information, do needs assessment, plan formal agreements, and promote access to services.	2.30	2.57
Co-location of Services - Services from the VA and your agency provided in one location.	1.79	1.84
Cross-Training - Staff training about the objectives, procedures and services of the VA and your agency.	1.65	1.93
Interagency Agreements/ Memoranda of Understanding - Formal and informal agreements between the VA and your agency covering such areas as collaboration, referrals, sharing client information, or coordinating services.	2.00	2.28
Interagency Client Tracking Systems/ Management Information Systems - Shared computer tracking systems that link the VA and your agency to promote information sharing, referrals, and client access.	1.42	1.60
Pooled/Joint Funding - Combining or layering funds from the VA and your agency to create new resources or services.	1.57	1.67
Uniform Applications, Eligibility Criteria, and Intake Assessments – Standardized form that the client fills out only once to apply for services at the VA and your agency.	1.58	1.80
Interagency Service Delivery Team/ Provider Coalition - Service team comprised of staff from the VA and your agency to assist clients with multiple needs.	2.04	2.19
Consolidation of Programs/ Agencies - Combining programs from the VA and your agency under one administrative structure to integrate service delivery.	1.83	1.99
Flexible Funding – Flexible funding used to fill gaps or acquire additional resources to further systems integration; e.g. existence of a VA and/or community agency fund used for contingencies, emergencies, or to purchase services not usually available for clients.	1.38	1.63
Use of Special Waivers - Waiving requirements for funding, eligibility or service delivery to reduce barriers to service, eliminate duplication of services, or promote access to comprehensive services; e.g. VA providing services to clients typically ineligible for certain services (e.g. dental) or community agencies waiving entry requirements to allow clients access to services.	1.43	1.68
System Integration Coordinator Position - A specific staff position focused on systems integration activities such as identifying agencies, staffing interagency meetings, and assisting with joint proposal development.	1.79	1.86

*Scored of non-VA community agency representatives who completed Participant Survey.
 **VHA: Veterans Healthcare Administration (138 reporting POC sites, n=3,055. Mean score of sites).

E. Action Plans: FY 2008 and FY 2009

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

Halfway house or transitional living facility	This remains an ongoing goal. We developed an e-mail group that informs possible candidates of VA Grant and Per Diem funding available.
Treatment for dual diagnosis	We work with our VA Dual Diagnosis Program to ensure seamless transition from the Domiciliary to the VA Substance Abuse Treatment Program. We also have relationships with community treatment programs.
Long-term, permanent housing	We have helped 150 Veterans through our HUD-VA Supported Housing program and been authorized for another 105 slots for FY 2009. Pinellas County Housing Authority has provided housing vouchers. We are contacting other local housing authorities about securing HUD Section 8 vouchers.

***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	Homeless Emergency Project, Inc. (HEP) was awarded contracts from VA Bay Pines during FY 2008. HEP provides housing for Veterans who complete their treatment at our Substance Abuse Treatment Program (SATP). HEP also provides emergency shelter and serves as an outreach site for our social work staff.
Agency #2	Still Standing, Inc. provides emergency shelter and long-term beds. The agency will help individuals with little or no money and staff are available all times of the day, night, and weekend to serve our Veterans.
Agency #3	Breaking Free by Faith, Inc. provides emergency shelter and long-term beds for homeless Veterans. The agency provides assistance with housing payments and financial counseling. It has taken many Veterans unable to pay at time of admission into their program.

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

<p>Long-term, permanent housing</p>	<p>Continue collaboration with the Pinellas County Housing Authority and surrounding housing authorities in our service area to educate and advocate prioritizing Section 8 Housing Vouchers for Veterans. Continue seeking and referring homeless Veteran to long-term permanent housing options. . Develop a mailing list to disseminate information on HUD funding. Develop a resource directory informing Bay Pines VA Social Workers of existing permanent housing availability. Develop community relationships with agencies that provide housing and refer eligible Veterans</p>
<p>Transitional living facility or halfway house</p>	<p>Inform community agencies of our Resource Directory sand invite them to continually submit new information to update the directory. Conduct 12 presentations about our VA homeless programs and solicit ideas on how to collaborate to create transitional housing. Conduct aggressive outreach to identify needy Veterans. Conduct monthly resource meetings for the homeless staff focusing on new resources in transitional living facilities or halfway houses.</p>
<p>Detoxification from substances</p>	<p>Explore a possible collaboration with a community-based detoxification facility. Conduct meetings with VA Bay Pines Substance Abuse Treatment Program (SATP) to discuss the effectiveness of treatment programs for Veterans with emphasis on treatment recommendations, length of treatment, either inpatient or outpatient, and criteria for admittance or rejection to treatment programs. Seek out community agencies and advocate for Veterans with substance abuse issues.</p>

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

CHALENG 2008 Survey Results Summary

VISN 8

Site: VAMC Miami, FL - 546

Note: CHALENG data is collected from two surveys. The CHALENG Point of Contact (POC) Survey is a self-administered questionnaire completed by the local VA homeless Veteran coordinator. The CHALENG Participant Survey is completed by federal, state, county, city, non-profit and for-profit agency representatives, as well as local VA staff and homeless Veterans themselves. Data was collected in the summer/fall of 2008.

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

1. **Estimated Number of Homeless Veterans:** 1,590
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:** 2

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

Housing type	# of Veteran-specific Beds in area*	# of additional beds site could use
Emergency Beds	10	50
Transitional Housing Beds	108	60
Permanent Housing Beds	105	75

*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: 133

Need Ranking (1=Need Unmet 5= Need Met)	Site homeless Veteran mean score	Site provider mean score	VHA Mean Score (nationwide)*(all participants)
Personal hygiene	3.61	3.03	3.70
Food	3.67	3.60	3.85
Clothing	3.21	3.28	3.61
Emergency (immediate) shelter	3.61	3.11	3.50
Halfway house or transitional living facility	3.79	2.90	3.35
Long-term, permanent housing	2.71	2.37	2.64
Detoxification from substances	3.58	3.19	3.59
Treatment for substance abuse	3.84	3.27	3.78
Services for emotional or psychiatric problems	3.95	3.16	3.63
Treatment for dual diagnosis	3.84	3.07	3.42
Family counseling	3.06	2.73	2.99
Medical services	4.16	3.71	3.96
Women's health care	2.72	3.03	3.09
Help with medication	4.07	3.40	3.79
Drop-in center or day program	3.63	2.82	3.08
AIDS/HIV testing/counseling	3.40	3.67	3.62
TB testing	3.62	3.58	3.96
TB treatment	3.48	3.44	3.59
Hepatitis C testing	3.46	3.29	3.73
Dental care	3.34	2.72	2.90
Eye care	3.48	3.13	3.25
Glasses	3.70	3.05	3.19
VA disability/pension	3.30	3.44	3.12
Welfare payments	2.27	2.98	2.78
SSI/SSD process	2.68	2.91	2.90
Guardianship (financial)	2.79	2.53	2.75
Help managing money	3.22	2.59	3.00
Job training	2.66	2.80	2.98
Help with finding a job or getting employment	2.89	2.95	3.12
Help getting needed documents or identification	3.80	2.95	3.52
Help with transportation	3.72	3.02	3.28
Education	3.13	2.90	3.13
Child care	2.66	2.48	2.49
Family reconciliation assistance	2.59	2.46	2.63
Discharge upgrade	2.89	2.91	2.91
Spiritual	3.38	3.09	3.51
Re-entry services for incarcerated Veterans	2.58	2.61	2.80
Elder Healthcare	3.00	2.70	3.01
Credit counseling	2.85	2.61	2.77
Legal assistance for child support issues	2.63	2.68	2.60
Legal assistance for outstanding warrants/fines	2.63	2.61	2.69
Help developing social network	3.36	3.00	3.10

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

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

1. Existing Agreements with Community Service Types:

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

2. Community Ratings of VA/Community Integration*

Integration Scale: 1 (low) to 5 (high)	Site Mean Score	VHA (nationwide) Mean Score**
VA Accessibility: In general, how accessible do you feel VA services are to homeless Veterans in the community?	3.87	3.56
VA Service Coordination: Rate the ability of the VA to coordinate clinical services for homeless Veterans with your agency.	3.96	3.62

*Scores of non-VA community agency representatives who completed Participant Survey.

**VHA: Veterans Healthcare Administration (139 reporting POC sites, n=3,615).

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

Implementation Scale 1 = None , no steps taken to initiate implementation of the strategy. 2 = Low , in planning and/or initial minor steps taken. 3 = Moderate , significant steps taken but full implementation not achieved. 4 = High , strategy fully implemented.	Site Mean Score	VHA (nationwide) Mean Score**
Interagency Coordinating Body - Representatives from the VA and your agency meet formally to exchange information, do needs assessment, plan formal agreements, and promote access to services.	2.57	2.57
Co-location of Services - Services from the VA and your agency provided in one location.	2.02	1.84
Cross-Training - Staff training about the objectives, procedures and services of the VA and your agency.	1.88	1.93
Interagency Agreements/ Memoranda of Understanding - Formal and informal agreements between the VA and your agency covering such areas as collaboration, referrals, sharing client information, or coordinating services.	2.19	2.28
Interagency Client Tracking Systems/ Management Information Systems - Shared computer tracking systems that link the VA and your agency to promote information sharing, referrals, and client access.	1.82	1.60
Pooled/Joint Funding - Combining or layering funds from the VA and your agency to create new resources or services.	1.75	1.67
Uniform Applications, Eligibility Criteria, and Intake Assessments – Standardized form that the client fills out only once to apply for services at the VA and your agency.	1.96	1.80
Interagency Service Delivery Team/ Provider Coalition - Service team comprised of staff from the VA and your agency to assist clients with multiple needs.	2.22	2.19
Consolidation of Programs/ Agencies - Combining programs from the VA and your agency under one administrative structure to integrate service delivery.	2.14	1.99
Flexible Funding – Flexible funding used to fill gaps or acquire additional resources to further systems integration; e.g. existence of a VA and/or community agency fund used for contingencies, emergencies, or to purchase services not usually available for clients.	1.56	1.63
Use of Special Waivers - Waiving requirements for funding, eligibility or service delivery to reduce barriers to service, eliminate duplication of services, or promote access to comprehensive services; e.g. VA providing services to clients typically ineligible for certain services (e.g. dental) or community agencies waiving entry requirements to allow clients access to services.	1.71	1.68
System Integration Coordinator Position - A specific staff position focused on systems integration activities such as identifying agencies, staffing interagency meetings, and assisting with joint proposal development.	1.84	1.86

*Scored of non-VA community agency representatives who completed Participant Survey.
 **VHA: Veterans Healthcare Administration (138 reporting POC sites, n=3,055. Mean score of sites).

E. Action Plans: FY 2008 and FY 2009

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

Halfway house or transitional living facility	Thirteen additional transitional housing beds were added.
Job training	Our VA Compensated Work Therapy program has become a major resource for participants in our VA Grant and Per Diem program.
Emergency (immediate) shelter	There are no plans for additional community shelters at this time, but beds could be possibly set-aside for Veterans for extended stays until a treatment/housing plan can be developed.

*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	Better Way of Miami, Inc. is a residential rehabilitation program targeting ex-offenders and substance abusers.
Agency #2	Keystone Hall is a community housing provider who took over a VA Grant and Per Diem program from a defunct provider.
Agency #3	(no agency identified)

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

Long-term, permanent housing	We will fully utilize the 105 HUD-VASH vouchers granted to this area.
Transitional living facility or halfway house	We will encourage community providers to apply for VA Grant and Per Diem funding. A VA Domiciliary has been proposed and awaits approval from VACO.
Treatment for substance abuse	We have developed relationships with local residential rehabilitation facilities. In addition, the Miami VA Medical Center may be expanding outpatient substance abuse services into a county in our catchment area.

***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 8

Site: VAMC West Palm Beach, FL - 548

Note: CHALENG data is collected from two surveys. The CHALENG Point of Contact (POC) Survey is a self-administered questionnaire completed by the local VA homeless Veteran coordinator. The CHALENG Participant Survey is completed by federal, state, county, city, non-profit and for-profit agency representatives, as well as local VA staff and homeless Veterans themselves. Data was collected in the summer/fall of 2008.

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

- 1. Estimated Number of Homeless Veterans: 633**
- 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: 15**

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

Housing type	# of Veteran-specific Beds in area*	# of additional beds site could use
Emergency Beds	15	69
Transitional Housing Beds	21	318
Permanent Housing Beds	35	175

*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: 60

Need Ranking (1=Need Unmet 5= Need Met)	Site homeless Veteran mean score	Site provider mean score	VHA Mean Score (nationwide)*(all participants)
Personal hygiene	4.30	3.36	3.70
Food	4.00	3.44	3.85
Clothing	4.04	3.21	3.61
Emergency (immediate) shelter	3.64	2.21	3.50
Halfway house or transitional living facility	4.48	2.82	3.35
Long-term, permanent housing	3.45	2.00	2.64
Detoxification from substances	4.22	3.47	3.59
Treatment for substance abuse	4.45	3.41	3.78
Services for emotional or psychiatric problems	4.22	3.55	3.63
Treatment for dual diagnosis	3.95	3.55	3.42
Family counseling	3.05	3.21	2.99
Medical services	4.48	3.85	3.96
Women's health care	2.86	3.15	3.09
Help with medication	4.32	3.50	3.79
Drop-in center or day program	3.39	3.03	3.08
AIDS/HIV testing/counseling	3.84	3.70	3.62
TB testing	4.57	3.73	3.96
TB treatment	3.75	3.73	3.59
Hepatitis C testing	4.16	3.73	3.73
Dental care	3.32	2.52	2.90
Eye care	4.17	3.12	3.25
Glasses	4.13	3.12	3.19
VA disability/pension	3.45	3.58	3.12
Welfare payments	2.83	3.34	2.78
SSI/SSD process	3.06	3.15	2.90
Guardianship (financial)	3.38	2.81	2.75
Help managing money	3.74	2.85	3.00
Job training	3.37	2.85	2.98
Help with finding a job or getting employment	3.55	2.97	3.12
Help getting needed documents or identification	3.76	2.97	3.52
Help with transportation	4.27	2.97	3.28
Education	3.75	2.91	3.13
Child care	2.56	2.59	2.49
Family reconciliation assistance	3.13	2.78	2.63
Discharge upgrade	2.56	3.10	2.91
Spiritual	4.42	3.24	3.51
Re-entry services for incarcerated Veterans	2.88	2.76	2.80
Elder Healthcare	2.86	3.03	3.01
Credit counseling	2.94	2.91	2.77
Legal assistance for child support issues	3.18	2.79	2.60
Legal assistance for outstanding warrants/fines	3.06	2.65	2.69
Help developing social network	3.59	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 Agreements with Community Service Types:

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

2. Community Ratings of VA/Community Integration*

Integration Scale: 1 (low) to 5 (high)	Site Mean Score	VHA (nationwide) Mean Score**
VA Accessibility: In general, how accessible do you feel VA services are to homeless Veterans in the community?	3.94	3.56
VA Service Coordination: Rate the ability of the VA to coordinate clinical services for homeless Veterans with your agency.	4.14	3.62

*Scores of non-VA community agency representatives who completed Participant Survey.

**VHA: Veterans Healthcare Administration (139 reporting POC sites, n=3,615).

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

Implementation Scale 1 = None , no steps taken to initiate implementation of the strategy. 2 = Low , in planning and/or initial minor steps taken. 3 = Moderate , significant steps taken but full implementation not achieved. 4 = High , strategy fully implemented.	Site Mean Score	VHA (nationwide) Mean Score**
Interagency Coordinating Body - Representatives from the VA and your agency meet formally to exchange information, do needs assessment, plan formal agreements, and promote access to services.	2.73	2.57
Co-location of Services - Services from the VA and your agency provided in one location.	2.03	1.84
Cross-Training - Staff training about the objectives, procedures and services of the VA and your agency.	2.42	1.93
Interagency Agreements/ Memoranda of Understanding - Formal and informal agreements between the VA and your agency covering such areas as collaboration, referrals, sharing client information, or coordinating services.	2.63	2.28
Interagency Client Tracking Systems/ Management Information Systems - Shared computer tracking systems that link the VA and your agency to promote information sharing, referrals, and client access.	2.00	1.60
Pooled/Joint Funding - Combining or layering funds from the VA and your agency to create new resources or services.	1.82	1.67
Uniform Applications, Eligibility Criteria, and Intake Assessments – Standardized form that the client fills out only once to apply for services at the VA and your agency.	2.25	1.80
Interagency Service Delivery Team/ Provider Coalition - Service team comprised of staff from the VA and your agency to assist clients with multiple needs.	2.44	2.19
Consolidation of Programs/ Agencies - Combining programs from the VA and your agency under one administrative structure to integrate service delivery.	2.50	1.99
Flexible Funding – Flexible funding used to fill gaps or acquire additional resources to further systems integration; e.g. existence of a VA and/or community agency fund used for contingencies, emergencies, or to purchase services not usually available for clients.	1.97	1.63
Use of Special Waivers - Waiving requirements for funding, eligibility or service delivery to reduce barriers to service, eliminate duplication of services, or promote access to comprehensive services; e.g. VA providing services to clients typically ineligible for certain services (e.g. dental) or community agencies waiving entry requirements to allow clients access to services.	2.00	1.68
System Integration Coordinator Position - A specific staff position focused on systems integration activities such as identifying agencies, staffing interagency meetings, and assisting with joint proposal development.	2.16	1.86

*Scored of non-VA community agency representatives who completed Participant Survey.
 **VHA: Veterans Healthcare Administration (138 reporting POC sites, n=3,055. Mean score of sites).

E. Action Plans: FY 2008 and FY 2009

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

Emergency (immediate) shelter	We work closely with a local emergency shelter; it's an important referral source.
Halfway house or transitional living facility	Two new VA Grant and Per Diem programs were established thanks to our VA Grant and Per Diem liaison's outreach to the community.
Long-term, permanent housing	West Palm Beach VA has established a HUD-VA Supported Housing program with two new staff social workers to be hired in FY 2009.

*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	Salvation Army Center of Hope provides emergency shelter and has been awarded VA Grant and Per Diem funding for FY 2009.
Agency #2	Stand Down House continues to provide support and services through its VA Grant and Per Diem program.
Agency #3	(no agency identified)

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

Emergency (immediate) shelter	Continue seeking improved relationships with existing emergency shelters.
Dental care	Continue to work closely with our dental department and attempt to coordinate services via the Palm Beach County Department of Health.
Discharge upgrade	Continue to work closely with VA service officers in order to advocate for homeless Veterans to have requests for discharge upgrade expedited.

*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 8

Site: VAMC San Juan, PR - 672

Note: CHALENG data is collected from two surveys. The CHALENG Point of Contact (POC) Survey is a self-administered questionnaire completed by the local VA homeless Veteran coordinator. The CHALENG Participant Survey is completed by federal, state, county, city, non-profit and for-profit agency representatives, as well as local VA staff and homeless Veterans themselves. Data was collected in the summer/fall of 2008.

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

1. **Estimated Number of Homeless Veterans:** 38
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	332	15
Transitional Housing Beds	12	18
Permanent Housing Beds	20	20

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

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

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

C. Rating of Need by CHALENG participants (homeless Veterans and VA/ community providers). Number of total participants: 20

Need Ranking (1=Need Unmet 5= Need Met)	Site homeless Veteran mean score	Site provider mean score	VHA Mean Score (nationwide)*(all participants)
Personal hygiene	3.90	3.86	3.70
Food	4.10	3.86	3.85
Clothing	4.00	3.57	3.61
Emergency (immediate) shelter	4.40	3.43	3.50
Halfway house or transitional living facility	3.56	2.71	3.35
Long-term, permanent housing	3.27	2.50	2.64
Detoxification from substances	3.00	3.29	3.59
Treatment for substance abuse	3.50	3.29	3.78
Services for emotional or psychiatric problems	3.20	3.43	3.63
Treatment for dual diagnosis	2.60	3.00	3.42
Family counseling	3.20	3.43	2.99
Medical services	3.80	3.71	3.96
Women's health care	3.11	3.57	3.09
Help with medication	3.50	3.83	3.79
Drop-in center or day program	2.80	3.83	3.08
AIDS/HIV testing/counseling	2.70	3.83	3.62
TB testing	3.20	3.67	3.96
TB treatment	3.20	3.60	3.59
Hepatitis C testing	3.30	3.50	3.73
Dental care	2.82	3.33	2.90
Eye care	3.64	3.50	3.25
Glasses	3.73	3.50	3.19
VA disability/pension	2.64	3.67	3.12
Welfare payments	2.00	3.67	2.78
SSI/SSD process	2.00	3.83	2.90
Guardianship (financial)	1.80	3.17	2.75
Help managing money	2.50	3.00	3.00
Job training	2.70	3.17	2.98
Help with finding a job or getting employment	3.18	3.50	3.12
Help getting needed documents or identification	2.33	3.83	3.52
Help with transportation	2.22	3.67	3.28
Education	2.44	3.67	3.13
Child care	2.11	3.33	2.49
Family reconciliation assistance	2.56	3.50	2.63
Discharge upgrade	1.80	3.50	2.91
Spiritual	3.56	3.86	3.51
Re-entry services for incarcerated Veterans	1.67	3.17	2.80
Elder Healthcare	2.18	3.29	3.01
Credit counseling	1.50	3.00	2.77
Legal assistance for child support issues	2.40	3.17	2.60
Legal assistance for outstanding warrants/fines	1.40	3.17	2.69
Help developing social network	2.60	3.67	3.10

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

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

1. Existing Agreements with Community Service Types:

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

2. Community Ratings of VA/Community Integration*

Integration Scale: 1 (low) to 5 (high)	Site Mean Score	VHA (nationwide) Mean Score**
VA Accessibility: In general, how accessible do you feel VA services are to homeless Veterans in the community?	3.89	3.56
VA Service Coordination: Rate the ability of the VA to coordinate clinical services for homeless Veterans with your agency.	3.89	3.62

*Scores of non-VA community agency representatives who completed Participant Survey.

**VHA: Veterans Healthcare Administration (139 reporting POC sites, n=3,615).

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

Implementation Scale 1 = None , no steps taken to initiate implementation of the strategy. 2 = Low , in planning and/or initial minor steps taken. 3 = Moderate , significant steps taken but full implementation not achieved. 4 = High , strategy fully implemented.	Site Mean Score	VHA (nationwide) Mean Score**
Interagency Coordinating Body - Representatives from the VA and your agency meet formally to exchange information, do needs assessment, plan formal agreements, and promote access to services.	3.57	2.57
Co-location of Services - Services from the VA and your agency provided in one location.	1.71	1.84
Cross-Training - Staff training about the objectives, procedures and services of the VA and your agency.	2.57	1.93
Interagency Agreements/ Memoranda of Understanding - Formal and informal agreements between the VA and your agency covering such areas as collaboration, referrals, sharing client information, or coordinating services.	2.71	2.28
Interagency Client Tracking Systems/ Management Information Systems - Shared computer tracking systems that link the VA and your agency to promote information sharing, referrals, and client access.	2.00	1.60
Pooled/Joint Funding - Combining or layering funds from the VA and your agency to create new resources or services.	2.14	1.67
Uniform Applications, Eligibility Criteria, and Intake Assessments – Standardized form that the client fills out only once to apply for services at the VA and your agency.	2.00	1.80
Interagency Service Delivery Team/ Provider Coalition - Service team comprised of staff from the VA and your agency to assist clients with multiple needs.	3.00	2.19
Consolidation of Programs/ Agencies - Combining programs from the VA and your agency under one administrative structure to integrate service delivery.	2.83	1.99
Flexible Funding – Flexible funding used to fill gaps or acquire additional resources to further systems integration; e.g. existence of a VA and/or community agency fund used for contingencies, emergencies, or to purchase services not usually available for clients.	1.86	1.63
Use of Special Waivers - Waiving requirements for funding, eligibility or service delivery to reduce barriers to service, eliminate duplication of services, or promote access to comprehensive services; e.g. VA providing services to clients typically ineligible for certain services (e.g. dental) or community agencies waiving entry requirements to allow clients access to services.	1.67	1.68
System Integration Coordinator Position - A specific staff position focused on systems integration activities such as identifying agencies, staffing interagency meetings, and assisting with joint proposal development.	2.67	1.86

*Scored of non-VA community agency representatives who completed Participant Survey.
 **VHA: Veterans Healthcare Administration (138 reporting POC sites, n=3,055. Mean score of sites).

E. Action Plans: FY 2008 and FY 2009

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

Emergency (immediate) shelter	We have some informal agreements with some faith-based shelters and one municipality agency.
Halfway house or transitional living facility	Local agencies submitted ten VA Grant and per Diem proposals but none were funded. We will continue to work on this.
Detoxification from substances	We have an informal agreements with Iniciativa Comunitaria to provide inpatient detoxification.

*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	Iniciativa Comunitaria provides free 21-day drug detoxification. We supply the medications and the agency provides the facility.
Agency #2	Salvation Army (San Juan) provides emergency shelter. They will add 18 more beds and move their site closer to our VA.
Agency #3	Casa de Nuestra Gente provides transitional housing for our Veterans. Its staff promotes a seamless transition of care by coming to the VA and coordinating Veteran admission to the program.

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

Emergency (immediate) shelter	Promote informal agreements to have available immediate emergency shelter year round.
Transitional living facility or halfway house	Encourage community-based organizations to apply for VA Grant and Per Diem funding.
Long-term, permanent housing	Promote long term permanent housing through HUD-VASH program and also using other housing programs available at municipalities and state agencies.

*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 8

Site: VAMC Orlando, FL-675

Note: CHALENG data is collected from two surveys. The CHALENG Point of Contact (POC) Survey is a self-administered questionnaire completed by the local VA homeless Veteran coordinator. The CHALENG Participant Survey is completed by federal, state, county, city, non-profit and for-profit agency representatives, as well as local VA staff and homeless Veterans themselves. Data was collected in the summer/fall of 2008.

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

1. **Estimated Number of Homeless Veterans:** 2,500
2. **Service Area type:** 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:** 60

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	187	100
Permanent Housing Beds	70	250

*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: 219

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	4.15	2.78	3.70
Food	4.20	3.02	3.85
Clothing	3.82	3.14	3.61
Emergency (immediate) shelter	3.85	2.40	3.50
Halfway house or transitional living facility	4.19	2.65	3.35
Long-term, permanent housing	2.62	2.24	2.64
Detoxification from substances	3.88	2.52	3.59
Treatment for substance abuse	3.93	2.74	3.78
Services for emotional or psychiatric problems	3.88	2.66	3.63
Treatment for dual diagnosis	3.70	2.55	3.42
Family counseling	3.13	2.56	2.99
Medical services	4.36	3.26	3.96
Women's health care	2.75	2.95	3.09
Help with medication	4.34	3.12	3.79
Drop-in center or day program	2.81	2.29	3.08
AIDS/HIV testing/counseling	3.80	3.00	3.62
TB testing	4.16	3.21	3.96
TB treatment	3.57	3.14	3.59
Hepatitis C testing	4.02	3.16	3.73
Dental care	3.63	2.75	2.90
Eye care	4.02	2.81	3.25
Glasses	3.98	2.81	3.19
VA disability/pension	2.76	3.18	3.12
Welfare payments	2.26	2.63	2.78
SSI/SSD process	2.31	2.61	2.90
Guardianship (financial)	2.59	2.50	2.75
Help managing money	3.07	2.38	3.00
Job training	2.70	2.78	2.98
Help with finding a job or getting employment	2.98	2.72	3.12
Help getting needed documents or identification	3.90	2.91	3.52
Help with transportation	3.29	2.51	3.28
Education	2.78	2.65	3.13
Child care	2.32	2.14	2.49
Family reconciliation assistance	2.35	2.35	2.63
Discharge upgrade	2.49	2.61	2.91
Spiritual	3.44	2.86	3.51
Re-entry services for incarcerated Veterans	2.48	2.17	2.80
Elder Healthcare	2.71	2.63	3.01
Credit counseling	2.66	2.46	2.77
Legal assistance for child support issues	2.48	2.13	2.60
Legal assistance for outstanding warrants/fines	2.35	2.12	2.69
Help developing social network	3.02	2.48	3.10

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

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

1. Existing Agreements with Community Service Types:

Service Types	Local VA has existing collaborative agreement with this agency type?
Correctional Facilities (Jails, prisons, courts)	Yes
Psychiatric/substance abuse inpatient (hospitals, wards)	Yes
Nursing homes	Yes
Faith-based organizations	No
Agencies that provide child care	No
Agencies that provide legal assistance for child support issues	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?	3.10	3.56
VA Service Coordination: Rate the ability of the VA to coordinate clinical services for homeless Veterans with your agency.	3.10	3.62

*Scores of non-VA community agency representatives who completed Participant Survey.

**VHA: Veterans Healthcare Administration (139 reporting POC sites, n=3,615).

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

Implementation Scale 1 = None , no steps taken to initiate implementation of the strategy. 2 = Low , in planning and/or initial minor steps taken. 3 = Moderate , significant steps taken but full implementation not achieved. 4 = High , strategy fully implemented.	Site Mean Score	VHA (nationwide) Mean Score**
Interagency Coordinating Body - Representatives from the VA and your agency meet formally to exchange information, do needs assessment, plan formal agreements, and promote access to services.	2.13	2.57
Co-location of Services - Services from the VA and your agency provided in one location.	1.50	1.84
Cross-Training - Staff training about the objectives, procedures and services of the VA and your agency.	1.75	1.93
Interagency Agreements/ Memoranda of Understanding - Formal and informal agreements between the VA and your agency covering such areas as collaboration, referrals, sharing client information, or coordinating services.	1.80	2.28
Interagency Client Tracking Systems/ Management Information Systems - Shared computer tracking systems that link the VA and your agency to promote information sharing, referrals, and client access.	1.50	1.60
Pooled/Joint Funding - Combining or layering funds from the VA and your agency to create new resources or services.	1.57	1.67
Uniform Applications, Eligibility Criteria, and Intake Assessments – Standardized form that the client fills out only once to apply for services at the VA and your agency.	1.61	1.80
Interagency Service Delivery Team/ Provider Coalition - Service team comprised of staff from the VA and your agency to assist clients with multiple needs.	1.86	2.19
Consolidation of Programs/ Agencies - Combining programs from the VA and your agency under one administrative structure to integrate service delivery.	1.71	1.99
Flexible Funding – Flexible funding used to fill gaps or acquire additional resources to further systems integration; e.g. existence of a VA and/or community agency fund used for contingencies, emergencies, or to purchase services not usually available for clients.	1.46	1.63
Use of Special Waivers - Waiving requirements for funding, eligibility or service delivery to reduce barriers to service, eliminate duplication of services, or promote access to comprehensive services; e.g. VA providing services to clients typically ineligible for certain services (e.g. dental) or community agencies waiving entry requirements to allow clients access to services.	1.66	1.68
System Integration Coordinator Position - A specific staff position focused on systems integration activities such as identifying agencies, staffing interagency meetings, and assisting with joint proposal development.	1.78	1.86

*Scored of non-VA community agency representatives who completed Participant Survey.
 **VHA: Veterans Healthcare Administration (138 reporting POC sites, n=3,055. Mean score of sites).

E. Action Plans: FY 2008 and FY 2009

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

Halfway house or transitional living facility	Two additional VA Grant and Per Diem program will start in late 2008.
Services for emotional or psychiatric problems	We have established a working relationship with local mental health providers and our own VA mental health programs.
Elder Healthcare	We are attempting to develop partnerships with local assisted living facilities to improve care for our elderly homeless Veterans.

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

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

Agency #1	Center for Drug-Free Living was approved for a VA Grant and Per Diem program.
Agency #2	Lakeside Behavioral Health helps our VA coordinate with community mental health providers to serve homeless Veterans.
Agency #3	(no agency identified)

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

Emergency (immediate) shelter	Continued efforts to network with local agencies to develop MOU for Veteran beds at local shelters.
Long-term, permanent housing	Continued work with HUD and coordination with local agencies to develop housing options.
Job training	Continued development of our VA Healthcare for Homeless Veterans service continuum to include vocational rehabilitation counselors for employment development.

*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.