

## CHALENG 2008 Survey Results Summary

### VISN 9

#### Site: VAMC Huntington, WV - 581

**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:** 140
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:** 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	60
Transitional Housing Beds	0	25
Permanent Housing Beds	35	80

\*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: 31**

<b>Need Ranking (1=Need Unmet .... 5= Need Met)</b>	<b>Site homeless Veteran mean score</b>	<b>Site provider mean score</b>	<b>VHA Mean Score (nationwide)*(all participants)</b>
Personal hygiene	4.63	2.95	3.70
Food	3.88	3.10	3.85
Clothing	4.38	3.20	3.61
Emergency (immediate) shelter	4.38	3.00	3.50
Halfway house or transitional living facility	2.50	2.10	3.35
Long-term, permanent housing	2.50	2.05	2.64
Detoxification from substances	4.00	2.58	3.59
Treatment for substance abuse	4.25	3.00	3.78
Services for emotional or psychiatric problems	4.38	3.00	3.63
Treatment for dual diagnosis	3.88	2.80	3.42
Family counseling	3.13	2.45	2.99
Medical services	4.25	3.50	3.96
Women's health care	2.83	3.00	3.09
Help with medication	3.71	3.16	3.79
Drop-in center or day program	3.71	2.45	3.08
AIDS/HIV testing/counseling	4.00	2.90	3.62
TB testing	4.50	3.50	3.96
TB treatment	4.00	3.30	3.59
Hepatitis C testing	3.88	3.25	3.73
Dental care	4.13	2.85	2.90
Eye care	3.50	3.05	3.25
Glasses	2.88	2.95	3.19
VA disability/pension	3.63	3.45	3.12
Welfare payments	3.00	3.30	2.78
SSI/SSD process	3.13	3.32	2.90
Guardianship (financial)	3.25	2.63	2.75
Help managing money	3.00	2.50	3.00
Job training	3.38	2.75	2.98
Help with finding a job or getting employment	3.38	2.95	3.12
Help getting needed documents or identification	4.13	2.75	3.52
Help with transportation	3.38	2.95	3.28
Education	4.25	2.70	3.13
Child care	3.38	2.63	2.49
Family reconciliation assistance	2.88	2.15	2.63
Discharge upgrade	2.88	2.80	2.91
Spiritual	3.50	3.10	3.51
Re-entry services for incarcerated Veterans	3.25	2.50	2.80
Elder Healthcare	3.25	3.26	3.01
Credit counseling	3.25	2.65	2.77
Legal assistance for child support issues	3.25	2.55	2.60
Legal assistance for outstanding warrants/fines	3.13	2.40	2.69
Help developing social network	3.63	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:**

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

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

<b>Integration Scale:</b> 1 (low) to 5 (high)	<b>Site Mean Score</b>	<b>VHA (nationwide) Mean Score**</b>
<b>VA Accessibility:</b> In general, how accessible do you feel VA services are to homeless Veterans in the community?	3.50	3.56
<b>VA Service Coordination:</b> Rate the ability of the VA to coordinate clinical services for homeless Veterans with your agency.	3.60	3.62

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

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

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

<b>Implementation Scale</b> <b>1 = None</b> , no steps taken to initiate implementation of the strategy. <b>2 = Low</b> , in planning and/or initial minor steps taken. <b>3 = Moderate</b> , significant steps taken but full implementation not achieved. <b>4 = High</b> , strategy fully implemented.	<b>Site Mean Score</b>	<b>VHA (nationwide) Mean Score**</b>
<b>Interagency Coordinating Body</b> - Representatives from the VA and your agency meet formally to exchange information, do needs assessment, plan formal agreements, and promote access to services.	2.25	2.57
<b>Co-location of Services</b> - Services from the VA and your agency provided in one location.	1.94	1.84
<b>Cross-Training</b> - Staff training about the objectives, procedures and services of the VA and your agency.	1.40	1.93
<b>Interagency Agreements/ Memoranda of Understanding</b> - Formal and informal agreements between the VA and your agency covering such areas as collaboration, referrals, sharing client information, or coordinating services.	1.87	2.28
<b>Interagency Client Tracking Systems/ Management Information Systems</b> - Shared computer tracking systems that link the VA and your agency to promote information sharing, referrals, and client access.	1.40	1.60
<b>Pooled/Joint Funding</b> - Combining or layering funds from the VA and your agency to create new resources or services.	1.60	1.67
<b>Uniform Applications, Eligibility Criteria, and Intake Assessments</b> – Standardized form that the client fills out only once to apply for services at the VA and your agency.	1.56	1.80
<b>Interagency Service Delivery Team/ Provider Coalition</b> - Service team comprised of staff from the VA and your agency to assist clients with multiple needs.	1.73	2.19
<b>Consolidation of Programs/ Agencies</b> - Combining programs from the VA and your agency under one administrative structure to integrate service delivery.	1.81	1.99
<b>Flexible Funding</b> – Flexible funding used to fill gaps or acquire additional resources to further systems integration; e.g. existence of a VA and/or community agency fund used for contingencies, emergencies, or to purchase services not usually available for clients.	1.63	1.63
<b>Use of Special Waivers</b> - Waiving requirements for funding, eligibility or service delivery to reduce barriers to service, eliminate duplication of services, or promote access to comprehensive services; e.g. VA providing services to clients typically ineligible for certain services (e.g. dental) or community agencies waiving entry requirements to allow clients access to services.	1.56	1.68
<b>System Integration Coordinator Position</b> - A specific staff position focused on systems integration activities such as identifying agencies, staffing interagency meetings, and assisting with joint proposal development.	1.88	1.86

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

**E. Action Plans: FY 2008 and FY 2009**

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

<b>Long-term, permanent housing</b>	Our VA was awarded 35 HUD-VA Supported Housing vouchers; more will be requested.
<b>Halfway house or transitional living facility</b>	Roark-Sullivan Lifeway Center will open in November 2008 with 12 VA Grant and Per Diem beds.
<b>Detoxification from substances</b>	Huntington area community task force is working to establish a Healing Place-model substance abuse recovery center which will include social detoxification services.

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

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

<b>Agency #1</b>	Huntington Housing Authority collaborated with our VA to start our HUD-VA Supported Housing program.
<b>Agency #2</b>	Roark Sullivan Lifeway Center will start accepting clients into its new VA Grant and Per Diem program.
<b>Agency #3</b>	Prestera is the lead agency spearheading a local task force to create a social recovery program which will include social detoxification.

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

<b>Long-term, permanent housing</b>	Secure permanent housing through the use of 35 Section 8 vouchers issued under HUD-VASH program. Work with Network Homeless Coordinator to requisition additional vouchers.
<b>Transitional living facility or halfway house</b>	The Roark-Sullivan Lifeway Center (VA Grant and Per Diem program) will begin accepting clients in November 2008.
<b>Help managing money</b>	VA Grant and Per Diem program will implement life skills training emphasizing money management and credit ratings. Individual money management needs will be assessed in treatment plans and addressed individually or through groups.

**\*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 9

**Site: VAMC Lexington, KY - 596**

**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: 117**
- 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)**

<b>Housing type</b>	<b># of Veteran-specific Beds in area*</b>	<b># of additional beds site could use</b>
Emergency Beds	30	0
Transitional Housing Beds	108	0
Permanent Housing Beds	35	30

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

<b>Homeless Veteran Program Beds actually on VA campus?*</b>	
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: 57**

<b>Need Ranking (1=Need Unmet .... 5= Need Met)</b>	<b>Site homeless Veteran mean score</b>	<b>Site provider mean score</b>	<b>VHA Mean Score (nationwide)*(all participants)</b>
Personal hygiene	3.71	3.24	3.70
Food	4.25	3.60	3.85
Clothing	4.06	3.52	3.61
Emergency (immediate) shelter	3.90	3.44	3.50
Halfway house or transitional living facility	3.97	3.36	3.35
Long-term, permanent housing	2.97	2.88	2.64
Detoxification from substances	4.16	3.17	3.59
Treatment for substance abuse	4.53	3.52	3.78
Services for emotional or psychiatric problems	4.09	2.84	3.63
Treatment for dual diagnosis	3.57	2.84	3.42
Family counseling	2.90	2.76	2.99
Medical services	4.45	3.52	3.96
Women's health care	2.91	3.17	3.09
Help with medication	4.28	3.32	3.79
Drop-in center or day program	2.90	2.52	3.08
AIDS/HIV testing/counseling	3.66	3.08	3.62
TB testing	4.25	3.60	3.96
TB treatment	3.61	3.36	3.59
Hepatitis C testing	4.03	3.48	3.73
Dental care	4.00	2.84	2.90
Eye care	4.03	2.88	3.25
Glasses	3.94	2.80	3.19
VA disability/pension	3.26	3.56	3.12
Welfare payments	2.87	3.12	2.78
SSI/SSD process	3.03	3.20	2.90
Guardianship (financial)	2.79	2.96	2.75
Help managing money	3.06	2.84	3.00
Job training	3.25	3.08	2.98
Help with finding a job or getting employment	3.53	3.08	3.12
Help getting needed documents or identification	3.91	3.56	3.52
Help with transportation	3.66	3.00	3.28
Education	3.16	3.04	3.13
Child care	2.53	2.60	2.49
Family reconciliation assistance	2.48	2.52	2.63
Discharge upgrade	2.84	2.80	2.91
Spiritual	3.88	3.25	3.51
Re-entry services for incarcerated Veterans	2.93	3.04	2.80
Elder Healthcare	3.21	2.96	3.01
Credit counseling	2.77	2.60	2.77
Legal assistance for child support issues	2.97	2.32	2.60
Legal assistance for outstanding warrants/fines	2.93	2.36	2.69
Help developing social network	3.52	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 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**
<b>VA Accessibility:</b> In general, how accessible do you feel VA services are to homeless Veterans in the community?	3.76	3.56
<b>VA Service Coordination:</b> Rate the ability of the VA to coordinate clinical services for homeless Veterans with your agency.	3.80	3.62

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

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

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

<b>Implementation Scale</b> <b>1 = None</b> , no steps taken to initiate implementation of the strategy. <b>2 = Low</b> , in planning and/or initial minor steps taken. <b>3 = Moderate</b> , significant steps taken but full implementation not achieved. <b>4 = High</b> , strategy fully implemented.	<b>Site Mean Score</b>	<b>VHA (nationwide) Mean Score**</b>
<b>Interagency Coordinating Body</b> - Representatives from the VA and your agency meet formally to exchange information, do needs assessment, plan formal agreements, and promote access to services.	2.88	2.57
<b>Co-location of Services</b> - Services from the VA and your agency provided in one location.	2.13	1.84
<b>Cross-Training</b> - Staff training about the objectives, procedures and services of the VA and your agency.	2.29	1.93
<b>Interagency Agreements/ Memoranda of Understanding</b> - Formal and informal agreements between the VA and your agency covering such areas as collaboration, referrals, sharing client information, or coordinating services.	2.83	2.28
<b>Interagency Client Tracking Systems/ Management Information Systems</b> - Shared computer tracking systems that link the VA and your agency to promote information sharing, referrals, and client access.	1.83	1.60
<b>Pooled/Joint Funding</b> - Combining or layering funds from the VA and your agency to create new resources or services.	1.77	1.67
<b>Uniform Applications, Eligibility Criteria, and Intake Assessments</b> – Standardized form that the client fills out only once to apply for services at the VA and your agency.	2.35	1.80
<b>Interagency Service Delivery Team/ Provider Coalition</b> - Service team comprised of staff from the VA and your agency to assist clients with multiple needs.	2.30	2.19
<b>Consolidation of Programs/ Agencies</b> - Combining programs from the VA and your agency under one administrative structure to integrate service delivery.	2.09	1.99
<b>Flexible Funding</b> – Flexible funding used to fill gaps or acquire additional resources to further systems integration; e.g. existence of a VA and/or community agency fund used for contingencies, emergencies, or to purchase services not usually available for clients.	1.57	1.63
<b>Use of Special Waivers</b> - Waiving requirements for funding, eligibility or service delivery to reduce barriers to service, eliminate duplication of services, or promote access to comprehensive services; e.g. VA providing services to clients typically ineligible for certain services (e.g. dental) or community agencies waiving entry requirements to allow clients access to services.	1.74	1.68
<b>System Integration Coordinator Position</b> - A specific staff position focused on systems integration activities such as identifying agencies, staffing interagency meetings, and assisting with joint proposal development.	2.65	1.86

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

**E. Action Plans: FY 2008 and FY 2009**

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

<b>Services for emotional or psychiatric problems</b>	We are still in discussion with our VA leadership to establish a Mental Health Intensive Case Management (MHICM) program.
<b>Long-term, permanent housing</b>	We were awarded new HUD-VA Supported Housing vouchers this year.
<b>Emergency (immediate) shelter</b>	We continue to work closely with local shelters to ensure time Veteran access.

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

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

<b>Agency #1</b>	Hope Center Shelter for Men received funding for a 30-bed substance abuse treatment/transitional housing program.
<b>Agency #2</b>	Catholic Action provides drop-in services (meals, showers, beds) for all in need.
<b>Agency #3</b>	Central Kentucky Housing and Homeless Initiative (CKHHI) is a community collaborative effort to end homelessness in the community.

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

<b>Services for emotional or psychiatric problems</b>	Work with local homeless shelter in implementing dual diagnosis treatment planning.
<b>Long-term, permanent housing</b>	Implementing and staff expanding HUD-VASH program.
<b>VA disability/pension</b>	Work with local Veteran Service Officer to streamline pension and disability applications for homeless Veterans.

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

## CHALENG 2008 Survey Results Summary

### VISN 9

**Site: VAMC Louisville, KY - 603**

**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:** 405
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:** 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	20
Transitional Housing Beds	121	50
Permanent Housing Beds	70	100

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

Homeless Veteran Program Beds actually on VA campus?*	
Emergency Beds	No
Transitional Housing Beds	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: 157**

<b>Need Ranking (1=Need Unmet .... 5= Need Met)</b>	<b>Site homeless Veteran mean score</b>	<b>Site provider mean score</b>	<b>VHA Mean Score (nationwide)*(all participants)</b>
Personal hygiene	3.96	3.39	3.70
Food	4.16	3.98	3.85
Clothing	3.73	3.58	3.61
Emergency (immediate) shelter	4.24	3.75	3.50
Halfway house or transitional living facility	4.24	3.32	3.35
Long-term, permanent housing	3.03	2.58	2.64
Detoxification from substances	3.99	3.48	3.59
Treatment for substance abuse	4.12	3.81	3.78
Services for emotional or psychiatric problems	3.81	3.59	3.63
Treatment for dual diagnosis	3.69	3.30	3.42
Family counseling	3.01	2.86	2.99
Medical services	4.18	3.78	3.96
Women's health care	3.07	3.28	3.09
Help with medication	4.04	3.46	3.79
Drop-in center or day program	3.28	3.44	3.08
AIDS/HIV testing/counseling	3.62	3.83	3.62
TB testing	4.52	4.14	3.96
TB treatment	3.89	3.86	3.59
Hepatitis C testing	3.76	3.75	3.73
Dental care	3.68	2.95	2.90
Eye care	3.87	2.91	3.25
Glasses	3.82	2.78	3.19
VA disability/pension	2.80	3.44	3.12
Welfare payments	2.52	3.12	2.78
SSI/SSD process	2.56	3.16	2.90
Guardianship (financial)	2.59	3.10	2.75
Help managing money	3.05	2.83	3.00
Job training	2.93	3.09	2.98
Help with finding a job or getting employment	3.08	3.21	3.12
Help getting needed documents or identification	3.72	3.31	3.52
Help with transportation	3.92	2.84	3.28
Education	3.58	2.95	3.13
Child care	2.72	2.46	2.49
Family reconciliation assistance	2.55	2.57	2.63
Discharge upgrade	3.04	3.15	2.91
Spiritual	3.82	3.47	3.51
Re-entry services for incarcerated Veterans	2.73	2.77	2.80
Elder Healthcare	3.31	3.08	3.01
Credit counseling	2.59	2.89	2.77
Legal assistance for child support issues	2.58	2.72	2.60
Legal assistance for outstanding warrants/fines	2.71	2.75	2.69
Help developing social network	3.43	2.91	3.10

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

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

### 1. Existing Agreements with Community Service Types:

Service Types	Local VA has existing collaborative agreement with this agency type?
Correctional Facilities (Jails, prisons, courts)	No
Psychiatric/substance abuse inpatient (hospitals, wards)	No
Nursing homes	Yes
Faith-based organizations	No
Agencies that provide child care	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**
<b>VA Accessibility:</b> In general, how accessible do you feel VA services are to homeless Veterans in the community?	3.83	3.56
<b>VA Service Coordination:</b> Rate the ability of the VA to coordinate clinical services for homeless Veterans with your agency.	3.90	3.62

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

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

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

<b>Implementation Scale</b> <b>1 = None</b> , no steps taken to initiate implementation of the strategy. <b>2 = Low</b> , in planning and/or initial minor steps taken. <b>3 = Moderate</b> , significant steps taken but full implementation not achieved. <b>4 = High</b> , strategy fully implemented.	<b>Site Mean Score</b>	<b>VHA (nationwide) Mean Score**</b>
<b>Interagency Coordinating Body</b> - Representatives from the VA and your agency meet formally to exchange information, do needs assessment, plan formal agreements, and promote access to services.	2.42	2.57
<b>Co-location of Services</b> - Services from the VA and your agency provided in one location.	1.84	1.84
<b>Cross-Training</b> - Staff training about the objectives, procedures and services of the VA and your agency.	1.90	1.93
<b>Interagency Agreements/ Memoranda of Understanding</b> - Formal and informal agreements between the VA and your agency covering such areas as collaboration, referrals, sharing client information, or coordinating services.	2.07	2.28
<b>Interagency Client Tracking Systems/ Management Information Systems</b> - Shared computer tracking systems that link the VA and your agency to promote information sharing, referrals, and client access.	2.05	1.60
<b>Pooled/Joint Funding</b> - Combining or layering funds from the VA and your agency to create new resources or services.	1.90	1.67
<b>Uniform Applications, Eligibility Criteria, and Intake Assessments</b> – Standardized form that the client fills out only once to apply for services at the VA and your agency.	1.95	1.80
<b>Interagency Service Delivery Team/ Provider Coalition</b> - Service team comprised of staff from the VA and your agency to assist clients with multiple needs.	2.10	2.19
<b>Consolidation of Programs/ Agencies</b> - Combining programs from the VA and your agency under one administrative structure to integrate service delivery.	1.88	1.99
<b>Flexible Funding</b> – Flexible funding used to fill gaps or acquire additional resources to further systems integration; e.g. existence of a VA and/or community agency fund used for contingencies, emergencies, or to purchase services not usually available for clients.	1.58	1.63
<b>Use of Special Waivers</b> - Waiving requirements for funding, eligibility or service delivery to reduce barriers to service, eliminate duplication of services, or promote access to comprehensive services; e.g. VA providing services to clients typically ineligible for certain services (e.g. dental) or community agencies waiving entry requirements to allow clients access to services.	1.62	1.68
<b>System Integration Coordinator Position</b> - A specific staff position focused on systems integration activities such as identifying agencies, staffing interagency meetings, and assisting with joint proposal development.	1.77	1.86

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



**E. Action Plans: FY 2008 and FY 2009**

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

<b>Long-term, permanent housing</b>	We received 70 HUD-VA Supported Housing vouchers; also, more HUD Shelter Plus Care slots are available.
<b>Emergency (immediate) shelter</b>	Interlink Counseling opened up three new social detoxification beds. Louisville-area shelters continue to move toward transitional housing (reducing regular emergency bed capacity).
<b>Help with finding a job or getting employment</b>	We have increased referrals to local Department of Labor programs. List of employers for ex-offenders has been updated; general list of employment services obtained from our VA Compensated Work Therapy 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.**

<b>Agency #1</b>	Interlink Counseling Services added three non-medical detoxification beds, primarily for use by homeless Veterans.
<b>Agency #2</b>	(no agency identified)
<b>Agency #3</b>	(no agency identified)

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

<b>Long-term, permanent housing</b>	Work to identify sources of case management so that Shelter Plus Care vouchers can be utilized. Increase referrals to Section 8 waiting list, which has been moving more quickly. Greater collaboration with Wellspring's new permanent housing program.
<b>Emergency (immediate) shelter</b>	Increase networking with shelters that have not historically been responsive to VA outreach attempts. Stress the need to community shelters for a greater number of emergency beds.
<b>Help with finding a job or getting employment</b>	Utilize CWT referral sources through greater collaboration with that program. Continue to refer to CWT program itself. Update program lists of community agencies that provide employment referral and related assistance.

\*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 9

#### Site: VAMC Memphis, TN - 614

**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: 950
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	0	5
Transitional Housing Beds	144	10
Permanent Housing Beds	146	0

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

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

\*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: 100**

<b>Need Ranking (1=Need Unmet .... 5= Need Met)</b>	<b>Site homeless Veteran mean score</b>	<b>Site provider mean score</b>	<b>VHA Mean Score (nationwide)*(all participants)</b>
Personal hygiene	4.23	3.21	3.70
Food	4.39	3.21	3.85
Clothing	3.77	3.43	3.61
Emergency (immediate) shelter	4.14	2.86	3.50
Halfway house or transitional living facility	4.48	3.13	3.35
Long-term, permanent housing	3.24	2.93	2.64
Detoxification from substances	4.10	3.19	3.59
Treatment for substance abuse	4.41	3.38	3.78
Services for emotional or psychiatric problems	3.92	3.57	3.63
Treatment for dual diagnosis	3.88	3.27	3.42
Family counseling	3.29	2.86	2.99
Medical services	4.46	3.71	3.96
Women's health care	2.85	3.17	3.09
Help with medication	4.56	3.40	3.79
Drop-in center or day program	3.84	3.20	3.08
AIDS/HIV testing/counseling	4.08	3.36	3.62
TB testing	4.61	3.79	3.96
TB treatment	3.85	3.79	3.59
Hepatitis C testing	3.99	3.86	3.73
Dental care	3.71	2.93	2.90
Eye care	4.12	3.00	3.25
Glasses	4.04	3.00	3.19
VA disability/pension	2.94	3.40	3.12
Welfare payments	2.23	2.93	2.78
SSI/SSD process	2.45	2.93	2.90
Guardianship (financial)	2.73	3.07	2.75
Help managing money	3.61	3.14	3.00
Job training	2.97	3.07	2.98
Help with finding a job or getting employment	3.24	3.13	3.12
Help getting needed documents or identification	4.25	3.07	3.52
Help with transportation	4.00	3.29	3.28
Education	3.69	3.21	3.13
Child care	2.82	2.43	2.49
Family reconciliation assistance	3.03	2.43	2.63
Discharge upgrade	3.26	2.79	2.91
Spiritual	4.20	3.07	3.51
Re-entry services for incarcerated Veterans	3.17	2.79	2.80
Elder Healthcare	3.26	2.79	3.01
Credit counseling	3.34	2.57	2.77
Legal assistance for child support issues	2.84	2.64	2.60
Legal assistance for outstanding warrants/fines	3.00	2.50	2.69
Help developing social network	3.77	2.93	3.10

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

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

### 1. Existing Agreements with Community Service Types:

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

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

Integration Scale: 1 (low) to 5 (high)	Site Mean Score	VHA (nationwide) Mean Score**
<b>VA Accessibility:</b> In general, how accessible do you feel VA services are to homeless Veterans in the community?	3.69	3.56
<b>VA Service Coordination:</b> Rate the ability of the VA to coordinate clinical services for homeless Veterans with your agency.	3.63	3.62

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

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

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

<b>Implementation Scale</b> <b>1 = None</b> , no steps taken to initiate implementation of the strategy. <b>2 = Low</b> , in planning and/or initial minor steps taken. <b>3 = Moderate</b> , significant steps taken but full implementation not achieved. <b>4 = High</b> , strategy fully implemented.	<b>Site Mean Score</b>	<b>VHA (nationwide) Mean Score**</b>
<b>Interagency Coordinating Body</b> - Representatives from the VA and your agency meet formally to exchange information, do needs assessment, plan formal agreements, and promote access to services.	2.53	2.57
<b>Co-location of Services</b> - Services from the VA and your agency provided in one location.	2.13	1.84
<b>Cross-Training</b> - Staff training about the objectives, procedures and services of the VA and your agency.	2.13	1.93
<b>Interagency Agreements/ Memoranda of Understanding</b> - Formal and informal agreements between the VA and your agency covering such areas as collaboration, referrals, sharing client information, or coordinating services.	1.93	2.28
<b>Interagency Client Tracking Systems/ Management Information Systems</b> - Shared computer tracking systems that link the VA and your agency to promote information sharing, referrals, and client access.	1.67	1.60
<b>Pooled/Joint Funding</b> - Combining or layering funds from the VA and your agency to create new resources or services.	1.73	1.67
<b>Uniform Applications, Eligibility Criteria, and Intake Assessments</b> – Standardized form that the client fills out only once to apply for services at the VA and your agency.	1.93	1.80
<b>Interagency Service Delivery Team/ Provider Coalition</b> - Service team comprised of staff from the VA and your agency to assist clients with multiple needs.	2.27	2.19
<b>Consolidation of Programs/ Agencies</b> - Combining programs from the VA and your agency under one administrative structure to integrate service delivery.	1.93	1.99
<b>Flexible Funding</b> – Flexible funding used to fill gaps or acquire additional resources to further systems integration; e.g. existence of a VA and/or community agency fund used for contingencies, emergencies, or to purchase services not usually available for clients.	1.73	1.63
<b>Use of Special Waivers</b> - Waiving requirements for funding, eligibility or service delivery to reduce barriers to service, eliminate duplication of services, or promote access to comprehensive services; e.g. VA providing services to clients typically ineligible for certain services (e.g. dental) or community agencies waiving entry requirements to allow clients access to services.	1.60	1.68
<b>System Integration Coordinator Position</b> - A specific staff position focused on systems integration activities such as identifying agencies, staffing interagency meetings, and assisting with joint proposal development.	1.80	1.86

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

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

**E. Action Plans: FY 2008 and FY 2009**

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

<b>Halfway house or transitional living facility</b>	We are still encouraging local agencies to apply for VA Grant and Per Diem funding and/or create new programs.
<b>Glasses</b>	We will use funding from our Stand Down budget to help Veterans obtain glasses. Still have not found community resources.
<b>Long-term, permanent housing</b>	We were awarded 105 HUD-VA Supported Housing 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.**

<b>Agency #1</b>	Diersen Charities provides transitional housing for special needs clients like chronically mental ill clients and newly-released sex offenders.
<b>Agency #2</b>	Genesis House provides residential, long-term treatment for dually-diagnosed individuals.
<b>Agency #3</b>	Millington Federal Correctional Camp allows us to interview incarcerated Veterans for re-entry program

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

<b>Transitional living facility or halfway house</b>	Goal is to develop beds targeting sub-populations of homeless Veterans, such as those who are medically fragile, have chronic mental illness, are women and/or men with children.
<b>Glasses</b>	No funding to purchase glasses.
<b>Treatment for dual diagnosis</b>	We need a long-term residential treatment program for dual diagnosis clients.

\*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 9

#### Site: VAMC Mountain Home, TN - 621

**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: 600
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: 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	0	75
Transitional Housing Beds	90	10
Permanent Housing Beds	35	30

\*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: 77**

<b>Need Ranking (1=Need Unmet .... 5= Need Met)</b>	<b>Site homeless Veteran mean score</b>	<b>Site provider mean score</b>	<b>VHA Mean Score (nationwide)*(all participants)</b>
Personal hygiene	4.23	4.00	3.70
Food	4.47	4.20	3.85
Clothing	4.25	4.00	3.61
Emergency (immediate) shelter	4.13	3.90	3.50
Halfway house or transitional living facility	4.20	3.90	3.35
Long-term, permanent housing	2.92	3.30	2.64
Detoxification from substances	3.92	3.10	3.59
Treatment for substance abuse	3.98	3.00	3.78
Services for emotional or psychiatric problems	3.59	3.20	3.63
Treatment for dual diagnosis	3.43	2.90	3.42
Family counseling	2.84	2.67	2.99
Medical services	4.03	3.89	3.96
Women's health care	2.16	3.17	3.09
Help with medication	3.90	3.90	3.79
Drop-in center or day program	3.52	3.10	3.08
AIDS/HIV testing/counseling	3.75	3.78	3.62
TB testing	4.23	3.40	3.96
TB treatment	3.45	3.13	3.59
Hepatitis C testing	3.93	3.00	3.73
Dental care	2.52	2.00	2.90
Eye care	3.59	2.50	3.25
Glasses	3.85	2.60	3.19
VA disability/pension	2.65	3.67	3.12
Welfare payments	2.27	3.33	2.78
SSI/SSD process	2.55	3.30	2.90
Guardianship (financial)	2.47	2.25	2.75
Help managing money	3.00	2.33	3.00
Job training	2.71	3.00	2.98
Help with finding a job or getting employment	3.48	2.90	3.12
Help getting needed documents or identification	3.97	3.80	3.52
Help with transportation	3.90	3.70	3.28
Education	3.37	3.30	3.13
Child care	2.37	2.50	2.49
Family reconciliation assistance	2.60	2.50	2.63
Discharge upgrade	2.48	3.30	2.91
Spiritual	4.17	3.60	3.51
Re-entry services for incarcerated Veterans	2.69	3.00	2.80
Elder Healthcare	2.71	2.38	3.01
Credit counseling	2.84	2.25	2.77
Legal assistance for child support issues	2.48	2.40	2.60
Legal assistance for outstanding warrants/fines	2.61	2.40	2.69
Help developing social network	3.33	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	Yes
Agencies that provide child care	No
Agencies that provide legal assistance for child support issues	No
Agencies that provide legal assistance for outstanding warrants/fines	No

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

Integration Scale: 1 (low) to 5 (high)	Site Mean Score	VHA (nationwide) Mean Score**
<b>VA Accessibility:</b> In general, how accessible do you feel VA services are to homeless Veterans in the community?	4.10	3.56
<b>VA Service Coordination:</b> Rate the ability of the VA to coordinate clinical services for homeless Veterans with your agency.	4.50	3.62

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

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

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

<b>Implementation Scale</b> <b>1 = None</b> , no steps taken to initiate implementation of the strategy. <b>2 = Low</b> , in planning and/or initial minor steps taken. <b>3 = Moderate</b> , significant steps taken but full implementation not achieved. <b>4 = High</b> , strategy fully implemented.	<b>Site Mean Score</b>	<b>VHA (nationwide) Mean Score**</b>
<b>Interagency Coordinating Body</b> - Representatives from the VA and your agency meet formally to exchange information, do needs assessment, plan formal agreements, and promote access to services.	3.00	2.57
<b>Co-location of Services</b> - Services from the VA and your agency provided in one location.	1.80	1.84
<b>Cross-Training</b> - Staff training about the objectives, procedures and services of the VA and your agency.	2.50	1.93
<b>Interagency Agreements/ Memoranda of Understanding</b> - Formal and informal agreements between the VA and your agency covering such areas as collaboration, referrals, sharing client information, or coordinating services.	2.80	2.28
<b>Interagency Client Tracking Systems/ Management Information Systems</b> - Shared computer tracking systems that link the VA and your agency to promote information sharing, referrals, and client access.	2.40	1.60
<b>Pooled/Joint Funding</b> - Combining or layering funds from the VA and your agency to create new resources or services.	2.00	1.67
<b>Uniform Applications, Eligibility Criteria, and Intake Assessments</b> – Standardized form that the client fills out only once to apply for services at the VA and your agency.	2.56	1.80
<b>Interagency Service Delivery Team/ Provider Coalition</b> - Service team comprised of staff from the VA and your agency to assist clients with multiple needs.	2.89	2.19
<b>Consolidation of Programs/ Agencies</b> - Combining programs from the VA and your agency under one administrative structure to integrate service delivery.	2.56	1.99
<b>Flexible Funding</b> – Flexible funding used to fill gaps or acquire additional resources to further systems integration; e.g. existence of a VA and/or community agency fund used for contingencies, emergencies, or to purchase services not usually available for clients.	1.60	1.63
<b>Use of Special Waivers</b> - Waiving requirements for funding, eligibility or service delivery to reduce barriers to service, eliminate duplication of services, or promote access to comprehensive services; e.g. VA providing services to clients typically ineligible for certain services (e.g. dental) or community agencies waiving entry requirements to allow clients access to services.	1.78	1.68
<b>System Integration Coordinator Position</b> - A specific staff position focused on systems integration activities such as identifying agencies, staffing interagency meetings, and assisting with joint proposal development.	2.10	1.86

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

**E. Action Plans: FY 2008 and FY 2009**

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

<b>Long-term, permanent housing</b>	We use the HUD Shelter Plus Care program and have implemented our HUD-VA Supported Housing program with 70 permanent housing vouchers.
<b>Help with finding a job or getting employment</b>	VA supported a proposal submitted by a local homeless coalition to provide vocational training and job placement opportunities for Veterans.
<b>Dental Care</b>	VA Dental Clinic and our homeless program continue to explore Homeless Veteran Dental Program funding.

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

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

<b>Agency #1</b>	Salvation Army (Kingsport) joined together with ARCH (Appalachian Regional Coalition on Homelessness) in applying for a VA Per Diem Only grant. The application was approved, and a 15-bed program has opened.
<b>Agency #2</b>	Appalachian Regional Coalition on Homelessness (ARCH) assisted Salvation Army in their successful VA Grant and Per Diem application -- and provides regional leadership.
<b>Agency #3</b>	Kingsport Housing and Redevelopment Authority runs the local HUD Shelter Plus Care program. It assists approximately 20 formerly homeless Veterans by providing vouchers and other services.

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

<b>Long-term, permanent housing</b>	Continue use of the HUD Shelter Plus Care Program to maximum benefit. Explore other permanent housing options in local area and improve access where possible.
<b>Help managing money</b>	There has been an employment task force developed under the Regional Homeless Coalition. It will continue to meet to explore opportunities for improvements in this important area.
<b>Dental care</b>	Community partners will continue to look for ways to enhance services at our Johnson City Dental Clinic. National, state, and county funding sources will be identified and, if applicable, applied for.

**\*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 9

#### Site: VAMC Nashville, TN - 626 (Nashville and Murfreesboro)

**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:** 472
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:** 8

#### 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	30
Transitional Housing Beds	111	26
Permanent Housing Beds	92	148

\*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**

<b>Need Ranking (1=Need Unmet .... 5= Need Met)</b>	<b>Site homeless Veteran mean score</b>	<b>Site provider mean score</b>	<b>VHA Mean Score (nationwide)*(all participants)</b>
Personal hygiene	4.33	3.74	3.70
Food	4.45	4.20	3.85
Clothing	4.06	3.77	3.61
Emergency (immediate) shelter	3.73	3.69	3.50
Halfway house or transitional living facility	4.42	3.77	3.35
Long-term, permanent housing	2.27	2.97	2.64
Detoxification from substances	4.40	3.67	3.59
Treatment for substance abuse	4.29	3.64	3.78
Services for emotional or psychiatric problems	4.04	3.47	3.63
Treatment for dual diagnosis	3.34	3.37	3.42
Family counseling	2.72	3.03	2.99
Medical services	4.39	3.89	3.96
Women's health care	2.84	3.51	3.09
Help with medication	4.36	4.00	3.79
Drop-in center or day program	3.13	3.42	3.08
AIDS/HIV testing/counseling	4.14	3.33	3.62
TB testing	4.13	3.81	3.96
TB treatment	3.44	3.56	3.59
Hepatitis C testing	3.62	3.47	3.73
Dental care	2.73	3.42	2.90
Eye care	3.02	3.28	3.25
Glasses	2.91	3.03	3.19
VA disability/pension	2.50	3.44	3.12
Welfare payments	2.12	3.00	2.78
SSI/SSD process	2.24	3.19	2.90
Guardianship (financial)	2.28	2.84	2.75
Help managing money	3.24	3.34	3.00
Job training	3.09	3.53	2.98
Help with finding a job or getting employment	3.80	3.74	3.12
Help getting needed documents or identification	4.37	3.97	3.52
Help with transportation	4.18	3.74	3.28
Education	3.52	3.23	3.13
Child care	2.28	2.58	2.49
Family reconciliation assistance	2.23	2.75	2.63
Discharge upgrade	2.33	3.22	2.91
Spiritual	4.19	3.55	3.51
Re-entry services for incarcerated Veterans	2.77	3.19	2.80
Elder Healthcare	2.79	3.00	3.01
Credit counseling	2.44	3.06	2.77
Legal assistance for child support issues	2.30	2.81	2.60
Legal assistance for outstanding warrants/fines	2.68	3.19	2.69
Help developing social network	3.60	3.42	3.10

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



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

**1. Existing Agreements with Community Service Types:**

<b>Service Types</b>	<b>Local VA has existing collaborative agreement with this agency type?</b>
Correctional Facilities (Jails, prisons, courts)	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\***

<b>Integration Scale:</b> 1 (low) to 5 (high)	<b>Site Mean Score</b>	<b>VHA (nationwide) Mean Score**</b>
<b>VA Accessibility:</b> In general, how accessible do you feel VA services are to homeless Veterans in the community?	4.15	3.56
<b>VA Service Coordination:</b> Rate the ability of the VA to coordinate clinical services for homeless Veterans with your agency.	4.39	3.62

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

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

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

<b>Implementation Scale</b> <b>1 = None</b> , no steps taken to initiate implementation of the strategy. <b>2 = Low</b> , in planning and/or initial minor steps taken. <b>3 = Moderate</b> , significant steps taken but full implementation not achieved. <b>4 = High</b> , strategy fully implemented.	<b>Site Mean Score</b>	<b>VHA (nationwide) Mean Score**</b>
<b>Interagency Coordinating Body</b> - Representatives from the VA and your agency meet formally to exchange information, do needs assessment, plan formal agreements, and promote access to services.	3.19	2.57
<b>Co-location of Services</b> - Services from the VA and your agency provided in one location.	2.23	1.84
<b>Cross-Training</b> - Staff training about the objectives, procedures and services of the VA and your agency.	2.31	1.93
<b>Interagency Agreements/ Memoranda of Understanding</b> - Formal and informal agreements between the VA and your agency covering such areas as collaboration, referrals, sharing client information, or coordinating services.	3.19	2.28
<b>Interagency Client Tracking Systems/ Management Information Systems</b> - Shared computer tracking systems that link the VA and your agency to promote information sharing, referrals, and client access.	2.30	1.60
<b>Pooled/Joint Funding</b> - Combining or layering funds from the VA and your agency to create new resources or services.	2.60	1.67
<b>Uniform Applications, Eligibility Criteria, and Intake Assessments</b> – Standardized form that the client fills out only once to apply for services at the VA and your agency.	2.92	1.80
<b>Interagency Service Delivery Team/ Provider Coalition</b> - Service team comprised of staff from the VA and your agency to assist clients with multiple needs.	3.16	2.19
<b>Consolidation of Programs/ Agencies</b> - Combining programs from the VA and your agency under one administrative structure to integrate service delivery.	2.96	1.99
<b>Flexible Funding</b> – Flexible funding used to fill gaps or acquire additional resources to further systems integration; e.g. existence of a VA and/or community agency fund used for contingencies, emergencies, or to purchase services not usually available for clients.	2.48	1.63
<b>Use of Special Waivers</b> - Waiving requirements for funding, eligibility or service delivery to reduce barriers to service, eliminate duplication of services, or promote access to comprehensive services; e.g. VA providing services to clients typically ineligible for certain services (e.g. dental) or community agencies waiving entry requirements to allow clients access to services.	2.33	1.68
<b>System Integration Coordinator Position</b> - A specific staff position focused on systems integration activities such as identifying agencies, staffing interagency meetings, and assisting with joint proposal development.	2.75	1.86

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

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

**E. Action Plans: FY 2008 and FY 2009**

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

<b>Treatment for substance abuse</b>	We continue to refer ineligible Veterans to community programs for services. As the number of community programs referral sources increase, the number of ineligible Veterans without treatment access will decline.
<b>VA disability/pension</b>	We have a strong relationship with VA Regional Office outreach staff. We have a VARO point-of-contact to help expedite claims for VA service-connected and non-service connected benefits.
<b>SSI/SSD process</b>	We have two good contacts at SOAR (SSI/SSDI Outreach, Access, and Recovery) who help our Veterans.

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

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

<b>Agency #1</b>	Park Center has a strong case management team that assists Veterans who are not eligible for VA care. The staff provides substance abuse counseling and helps Veterans secure Social Security Disability Insurance (SSDI).
<b>Agency #2</b>	VA Regional Office expedites claims for incarcerated and homeless Veterans in Nashville.
<b>Agency #3</b>	Building Lives provides case management, housing, disability counseling, and recovery counseling.

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

<p><b>Treatment for substance abuse</b></p>	<p>We continue to maintain and build strong relationships with Middle Tennessee treatment programs and Mental health providers. Buffalo Valley provides a 5 day relapse prevention program for Veterans and a 21 day treatment program for Veterans that are not eligible for VA care.</p>
<p><b>Emergency (immediate) shelter</b></p>	<p>We will continue to seek out all resources for immediate emergency shelter specifically designated for Veterans. We will encourage local programs and facilities to consider implementation of a 30 bed area for safe shelter where Veterans can stay to await placement in GPD treatment or other transitional housing.</p>
<p><b>Long-term, permanent housing</b></p>	<p>We will continue to explore all possibilities for long term housing. We are currently educating providers on working with VASH housing and will step up our efforts to secure additional vouchers. We will maintain our excellent working relationship with community providers and reach out to work with all new area programs (Urban Housing Solutions). We will encourage local agencies to participate in our 2009 Grant writing workshop at VA Nashville.</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.**