

Veterans' Program Community and Human Services 500 SW 7th Street Suite #100 Renton, WA 98057 (206) 477-7022 (206) 205-3213 FAX

King County Veterans Program (KCVP) Advisory Board Annual Retreat/Training April 19, 2017 Summary

9:00 a.m.

Julia Sheridan Co- Chairperson- Introduction

- Salute the Flag
- Welcome Purpose of the day
- Introductions of KCVP Advisory Board & King County Veterans Program /CSD Staff
- Tour of the Wounded Warrior Project

10:00 a.m.

Bryan Fry gave an overview of the King County Veterans Program, history, process/procedures and accomplishments How King County Veterans Program Works:

- Veterans Eligibility
- Case Management
- KC Veterans Program Funding
- Employment & Education Training
- VIBE Data Base
- Veterans Scenarios and Role Play

12:15 p.m. Lunch

1:15 p.m.

Leo Flor gave an overview on the Veterans and Human Services Levy Renewal.

- Executive transmittal of ballot Measure
- Councils passes of a Ballot Measure
- Key dates July & August
- Four Strategies will they change
- What has worked

What Levy will focus on?

- 1. Continue to serve Veterans
- 2. Focusing on how we serve homeless population in King County
- 3. The future focusing on older adults

2:15 p.m.

Committee Breakouts - Responsibilities and Chairpersons Elected

- Executive Committee
- Budget Committee
- Program Committee
- Appeals Committee

3:00 p.m. Wrap up/Adjournment



KCVAB, April 20, 2016 NOTES: Training Retreat (9 am—3:00 pm)

SUB-Committee Notes From the 3M note sheets

Stan Gunno, Chairman, Moved between groups for continuity

King County Veterans Advisory Board Retreat

Retreat Board Members present broke into small group sub-committees to focus energy onto the areas of urgent importance to the KCVAB per Chair Stan Gunno's request.

Housing/Veteran Homelessness SUB-Committee

1. Baby Boomer Aging Population

Heaviest Concentration of Veterans
Vietnam, Gulf Wars, Global War on Terrorism (GWOT)

- Women
- ➤ Shelters (Temp)
- ➤ Shelters (Interim)
- ➤ Housing (Permanent)
- 2. King County / Seattle/ Generation X, Y, Millennials
 - ➤ HOUSING: Veterans Rent
- 3. Types of Housing
 - ➤ Women Only
 - > Shelters (Temp)
 - > Shelters (Interim)
 - ➤ Housing (Permanent)
 - ♣ Habitat / Non-Profits (Furniture)
- 4. Housing /Medical (CBOC) Model Shown*
 - ➤ Public Private Ventures (PPV)
 - Community /City/County Owned Land
 - Developers Tax Credit ("...which they then sell to individuals at a huge profit," D. M. Bradford)
 - Non Profits Great Resources (furniture, move in items, community resources)

Members: Monique Brown, Chair, Don Michael Bradford Chuck Murrell

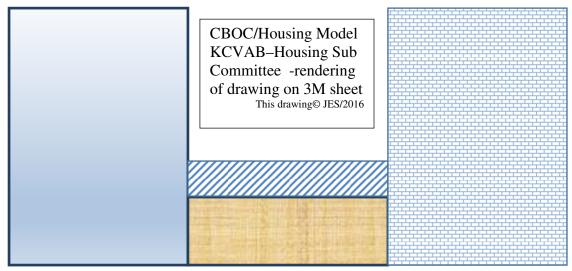


Figure 3 Temp/Transitional/ Interim Figure 3CBOB Center W/Program Center Figure 3 Permanent Housing (Senior, Housing upstairs Women, etc.)

Page, 2 Continued

Housing/Veteran Homelessness SUB-Committee (Continued)

- 5. Research
 - ➤ Women —Monique
 - Shelter- Temporary, Interim, etc.
 - Transitional
 - Permanent Housing
 - ➤ Vietnam /Gulf War Vets —Chuck
 - Current Outreach / Housing
 - Demographic Trends in King County
 - ➤ Permanent Housing —Don Michael Bradford
 - PPV's
 - County / City Collaborative
 - HUD/VA Federal Funds

Employment SUB-Committee

Train to employment — including "Certifications" Wish List

- Tuition Gaps
- Tools, Uniforms, Equipment, Books, Lab Fees
- Employer Delivered Training
- Trained Veteran Employment Specialist (i.e. Resume Translation)
- Certificate Programs
- Employer Incentives
- Grants for OJT
- Realistic education Expectation
- Developmental Occupational Training and Employment
 - ➤ Post Traumatic Stress (PTS)
 - > Physical Disability
 - > Age

Members:

Gary Cashman, Chair

Carrol Stripling John Phillips
Dion McNeeley Clark Silliman

Retreat Notes, Page 3 (Cont'd)

Levy Renewal SUB-Committee

PRIORITY from highest

- 1. Homelessness
- 2. Supporting Veterans
- 3. Unite and Heal the Family
- 4. Establish Thriving Health Environment
 - Mental Health
 - Physical Health
- 5. Effective Community Engagement
- 6. Ongoing Community Publicity About Levy Success

Members: David Waggoner, Chair Julia Sheriden Ad HOC, Leo Flor (VHSLR Manager)

* NOTE: The following information was copied from the VA website (http://www.va.gov/homeless/nchav/models/housing-first.asp) for informational purposes only by JES.



Promoting data-driven, evidence-based solutions to end Veteran homelessness

Home » Model Development & Implementation » Housing First

Housing First

Overview

Housing First is an evidence-based, cost-effective approach to ending homelessness for the most vulnerable and chronically homeless individuals. The Housing First model prioritizes housing and then assists the Veteran with access to healthcare and other supports that promote stable housing and improved quality of life. The model does not try to determine who is "housing ready" or demand treatment prior to housing. Instead, treatment and other support services are wrapped around Veterans as they obtain and maintain permanent housing. Within the U.S. Department of Veterans Affairs (VA), the Housing First model is being implemented through the U.S. Department of Housing and Urban Development (HUD)-VA Supportive Housing (VASH) program. The program combines Housing Choice vouchers for Veterans to rent privately-owned housing, and support through VA case management services that include health care, mental health treatment, vocational assistance, and job development.

Goals & Objectives

In October 2012, VA made Housing First the official policy for the HUD-VASH program. The Center's *Model Implementation Framework* (CMIF) was utilized to monitor and ensure fidelity of the initially funded sites while developing additional enhancements and guide recommendations for site expansion. Sites were selected based on their assessed potential for fully implementing all components the Housing First model. The Assertive Community Treatment (ACT) Teams funded at the Housing First model development sites were provided two initial trainings and technical assistance onsite and via semi-monthly telephone conferences.

Technical Assistance

In Fisal Year (FY) 2014, the Center provided consultation and guidance by conducting individual visits, biweekly conference calls, and individual phone calls with those sites initially designated as Housing First Model Development

Programs. Eighteen (18) sites were reviewed in 15 networks by a consultative multi-disciplinary team. A trend analysis and educational needs assessment was conducted during the first quarter of FY 2015. This assessment was used to develop educational curriculum for FY 2015.

Results

A demonstration project that compared a Housing First program offering immediate permanent housing without requiring treatment compliance, abstinence, or housing readiness with a treatment-first program for 177 homeless Veterans found that the Housing First initiative successfully reduced time to housing placement, from 235 to 35 days; housing retention rates were significantly higher among Housing First tenants; and emergency room use declined significantly among the Housing First cohort.

(For more information, download the abstract of the manuscript accepted for publication in the Journal of Community Psychology or the Housing Chronically Homeless Veterans presentation made at the 2012 NAEH conference.)

Contacts:

- a. Ann Elizabeth Montgomery, PhD / Ann.Montgomery2@va.gov for more information about the Housing First evaluation.
- b. Roger Casey, PhD / Roger.Casey@va.gov for more information about the Housing First model implementation process.

For more information, get the Housing First Implementation brief.

Second resource for useful information

Housing First: Veteran centered care helping to end Veteran homelessness

Posted on Monday, December 29, 2014 4:14 pmMarch 16, 2015 Posted in Guest Posts by Vincent Kane 18 views Edit

When it comes to homeless programs, VA's policy is "Housing First," an evidence-based, low-barrier, supportive housing model that emphasizes permanent supportive housing to end homelessness. This Housing First approach contributed to a 33 percent reduction in homelessness among Veterans between 2010 and 2014, as measured during annual point-in-time counts.

This approach provides Veterans who are experiencing homelessness—particularly those who have been homeless for prolonged periods, and have mental health and/or addictive disorders—with permanent housing, as quickly as possible. There are no prerequisites for receiving housing, instead, permanent housing is provided as the *initial* service, followed by other services, such as healthcare and employment, based on the Veteran's needs and preferences.

For Veterans in the U.S. Department of Housing and Urban Development-Veterans Affairs Supportive Housing (HUD-VASH) program, the Housing First approach is often provided over a longer period of time to support community-based housing stability. In Supportive Services for Veteran Families (SSVF), the principles of Housing First are incorporated into the practice of rapid rehousing. Rapid rehousing is intended for shorter durations than HUD-VASH, but it still places a priority on moving a Veteran or Veteran family experiencing homelessness into permanent housing as quickly as possible. While originally aimed primarily at Veterans experiencing homelessness due to short-term financial crises, SSVF programs across the country have begun to assist single Veterans and families with limited or no income, survivors of domestic violence and those struggling with mental health conditions and addictions.

Studies conducted inside and outside of VA have demonstrated that Housing First is both a clinically effective and fiscally efficient model of permanent supported housing that can be implemented successfully in all VA homeless programs. In 2010, 177 homeless Veterans entered a demonstration project comparing Housing First programs to treatment-first programs. The Housing First initiative successfully reduced waiting time from 223 to 35 days, housing retention rates were significantly higher among Housing First tenants, and emergency room use declined significantly among the Housing First cohort. Housing First works, because Veterans are more likely to achieve stability and improved quality of life when the risks, uncertainty and trauma associated with homelessness are removed.

Vincent Kane, the former Director of the National Center on Homelessness Among Veterans, oversaw various initiatives to promote research and data-driven solutions for Veterans who are homeless or at risk for homelessness. Through research, evaluation, dissemination science, and model development efforts, Kane and the team at the VA National Center on Homelessness among Veterans supports a comprehensive set of initiatives designed to prevent and end homelessness among Veterans. These activities include collaborating on a research agenda that assesses the current portfolio of services offered to Veterans experiencing homelessness; developing and validating various practice models and program implementation strategies to prevent homelessness and maximize community engagement; and introducing evidence-based practices to VA.

Tags:

Homeless

- Homelessness
- HUD-VASH

Post navigation

Previous Post:

Veterans celebrate Christmas in every clime and place

Next Post:

VA resources for preventing stress and suicide

Author



Vincent Kane

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THE DEPUTY SECRETARY OF VETERANS AFFAIRS WASHINGTON

March 1, 2016

A MESSAGE FROM THE DEPUTY SECRETARY

An Open Letter to the Grantees of the Department of Veterans Affairs (VA) Homeless providers Grant and Per Diem (GPO) Program

The GPO Program has been providing community-based transitional housing with supportive services since 1994. The Department is grateful for the efforts of all our community partners who have worked for years to address the challenges facing Veterans experiencing homelessness. As VA and our Federal and community partners advance towards the goal of preventing and ending Veteran homelessness, and the landscape of needs and services change, it is important to make certain that the housing resources in each community are best-suited to ensuring that homelessness among Veterans is rare, brief, and non-recurring.

VA expects all grantees to work in partnership with local continuums of care and VA medical centers to make data-informed decisions regarding the types of housing interventions and approaches that will best enable your community to swiftly and directly resolve homelessness among Veterans. One innovation that we encourage grantees to pursue, which aligns with Housing First principles, is the utilization of GPO beds as Bridge Housing. The Bridge Housing model is transitional housing used as a short-term stay when a Veteran has been offered and accepted a permanent housing intervention, but access to that permanent housing is still being arranged. VA strongly supports GPO grantees examining the existing local housing resources and needs and, as appropriate, requesting a change of scope to convert a portion of their existing beds to Bridge Housing.

Through enhanced performance expectations, VA has seen continued improvements in GPO Program housing outcomes with more than 15,500 exits to permanent housing in fiscal year 2015. However, even with these improvements, we know that we need to continue to strengthen all parts of our homeless services continuum to resolve homelessness quickly. VA believes that all grantees should be taking steps to lower barriers to entry, reduce lengths of stay, and improve exits to permanent housing. I urge all grantees to consider how the suggestions outlined in this letter could best be incorporated into your programs, and expect that we will see continued progress on our path to transformation. Your agency's compassionate service to our Nation's heroes is commended, and we look forward to a continued partnership in this time of transition.

Enclosed is a document that will provide additional information on VA's overall vision for the GPO Program.

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Quartes, Director, VA GPO National Program Office, by email at Jeffery. Quartes@va.gov or Ms. Chelsea Watson, Deputy Director, VA GPO National Program Office, by email at Chelsea. Watson@va.gov, or by phone at 1 (877) 332-0334.

I appreciate your continued support and commitment to ending homelessness among Veterans.

Sincerely,

Sloan D. Gibson

Enclosure

The Department of Veterans Affairs (VA) Homeless Providers Grant and Per Diem (GPO) Program Vision Statement December 2015

The GPO Program has been providing community-based transitional housing with supportive services since 1994. As VA, our Federal and community partners advance toward ending Veteran homelessness and the landscape of needs and

services for homeless Veterans evolves, it is important to ensure that the housing resources in each community are consistent with the Housing First approach; are being aligned with other programs and agencies; and are best-suited to ensuring that homelessness among Veterans is rare, brief, and non-recurring.

The Department's overall vision, in collaboration with Federal and community partners, for the GPO Program is to shift the program to eventually focus on and support three different types of transitional housing models:

- Bridge Housing emphasizing short lengths of stay and rapid connections to permanent housing.
- Service-intensive transitional housing transitional housing not being used as Bridge Housing, but in which Veterans are still actively working, with the assistance of appropriate services and supports, to achieve permanent housing as quickly as possible.
- Transition in Place housing a housing model where Veterans are provided time-limited transitional housing assistance with the lease converting to the Veteran as their permanent housing after a short period of assistance.

The plan encompasses short-range, mid-range and long-range objectives for change to meet the current and future needs of homeless Veterans.

- Short-range plans include promoting improved access to services which can be accomplished with lower barriers to entry; promoting short-stay components which provide quick access to permanent housing, referred to as Bridge Housing; and reducing underutilized transitional housing beds.
- *Mid-range* plans involve examining the current transitional housing stock to ensure that transitional housing resources are aligned with the needs in each community.

• Long-range plans include those program modifications which would require legislative changes such as certain modifications to the per diem payment system and converting a portion of the national supply of existing transitional housing to permanent housing.

December 21, 2015

As these plans get implemented, VA is already actively encouraging community leaders-including GPO providers, the local Continuum of Care, and the VA Medical Center-to use data to determine how much and what type of GPO Program-funded housing, along with other housing interventions, will enable a community to most effectively and efficiently end homelessness among Veterans and to be able to meet future needs. Following is a list of frequently asked questions regarding the GPO Program. Interested stakeholders are always encouraged to contact the GPO Program office at (toll-free) 1-877-332-0334 with questions. December 21, 2015 2

Department of Veterans Affairs Homeless Providers Grant and Per Diem (GPO) Bridge Housing

Frequently Asked Questions

VA believes that all grantees should be taking steps to lower barriers to entry, reduce lengths of stay, and improve exits to permanent housing. One innovation that we encourage grantees to pursue, which aligns with Housing First principles, is the utilization of GPO beds as "Bridge Housing". The bridge housing model can offer grantees a level of flexibility to maximize the utilization of their transitional housing beds.

VA strongly supports GPO grantees examining the existing local housing resources and needs and, as appropriate, requesting a change of scope to convert a portion of their existing beds to bridge housing. The following are some frequently asked questions related to the bridge housing model.

Question: What is Bridge Housing?

Answer: Bridge Housing is transitional housing used as a short-term stay when a Veteran has been offered and accepted a permanent housing intervention (e.g., Supportive Services for Veteran Families (SSVF), Department of Housing and Urban Development (HUD)-VA Supportive Housing (VASH), Housing Coalition/Continuum of Care) but, access to that permanent housing is still being arranged. Bridge Housing is generally provided for up to 90 days. Goals in the Individual Service Plan (ISP) should be very short-term with the focus on a move to permanent housing.

In order to be successful in Bridge Housing, certain criteria should be met:

• The Veteran needs a permanent housing plan. At the time of admission, there should be a reasonable expectation that the Veteran will move into permanent housing within 90 days, as in the following circumstances: Veterans who have and/or are in the process of obtaining a HUD-VASH voucher; Veterans who have permanent housing located, but need assistance and/or extra time before they move in; and Veterans who may be able to regain their

permanent housing after resolving short-term issues (such as in the case where a Veteran has been asked to leave his or her family's home).

- Collaboration with other resources (SSVF, HUD-VASH, local Housing Coalitions/Continuums of Care). As part of the permanent housing plan, Veterans in Bridge Housing should have the resources available (such as SSVF, HUD-VASH, or some other resource) to help them move into permanent housing quickly.
- Lower Barriers/Expectations. Given the short timeframe of Bridge Housing, there should not be an expectation that Veterans in this "track" will complete many parts of the grant project's established program. Goals in the ISP should be very short-term with the focus on the move to permanent housing, rather than the completion of treatment goals. Many Veterans in this track may also have unresolved mental health or substance abuse issues that might keep them from participating in a traditional grant project program. Those issues should not be regarded as reasons to not link Veterans to appropriate permanent housing options.

Question: Can Bridge Housing be implemented without a formal change of scope?

Answer: The VA GPO National Program Office encourages GPO-funded organizations to submit a written change of scope request prior to implementing a bridge housing model. This will ensure that changes that differ from what was stated in the original application are documented and approved. In addition, this will help our office to ensure that the proposed change to providing short stay services are in line with the guidance our office has provided on Bridge Housing.

Question: Can we convert all the beds in our project to Bridge Housing?

Answer: No, you can only use up to 50 percent of your beds at any given time for Bridge Housing. The addition of Bridge Housing services to the services provided in the original grant application is seen as an enhancement of services and would be allowable under a change of scope. Changing the entire grant project to Bridge

Housing would be a substantial change to the original grant application that would likely affect whether the original grant application would have scored as well in the year it was funded and would not be approved.

Question: Do we have to designate a set number of beds for Bridge Housing?

Answer: No, you do not have to designate a fixed number of beds for the Bridge Housing component to your program. Organizations will have a level of flexibility to maximize the utilization of their transitional housing beds, subject to the prohibition discussed above on conversions of over 50 percent of your beds.

Question: If we add Bridge Housing, will our per diem rate change?

Answer: Your per diem rate is based on the daily cost of care for your grant project, minus other sources of income up to the current maximum per diem rate. The Bridge Housing component would only impact per diem to the extent that calculation changed for your grant project (for example, daily cost of care increasing from the addition of 24-hour staff to support the Bridge Housing).

Question: What should we do if we have additional questions about Bridge Housing?

Answer: Contact the VA GPO National Program Office at 877-332-0334.

Veterans Health Administration February 25, 2016

This is the link to the actual website and letter: http://www.va.gov/HOMELESS/docs/GPD/DEPSEC_Letter_to_GPD_Grantees.pdf

ALSO: check out this page: http://www.hines.va.gov/services/homeless/