

U.S. Department of Veterans Affairs' (VA)
Fiscal Year (FY) 2024 Veteran Homelessness National Goals
Office Hours

VHA Homeless Programs Office
October 10, 2024

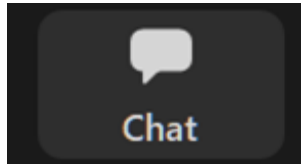
Housekeeping

- This call will be recorded.
- The webinar will last approximately 60 minutes.
- All attendees will be muted.
- Questions can be submitted using the chat function.
- If you have questions following the call, please email VHA11HPO38kGoalSupport@va.gov.

Zoom Controls

Typically, on the bottom of the screen

All participants are muted upon entry



Please use the chat to add questions or comments during the call.

Agenda

- Progress Updates
- Final Actions
- Using a Trauma-Informed Approach Within Homeless Programs
- Q&A



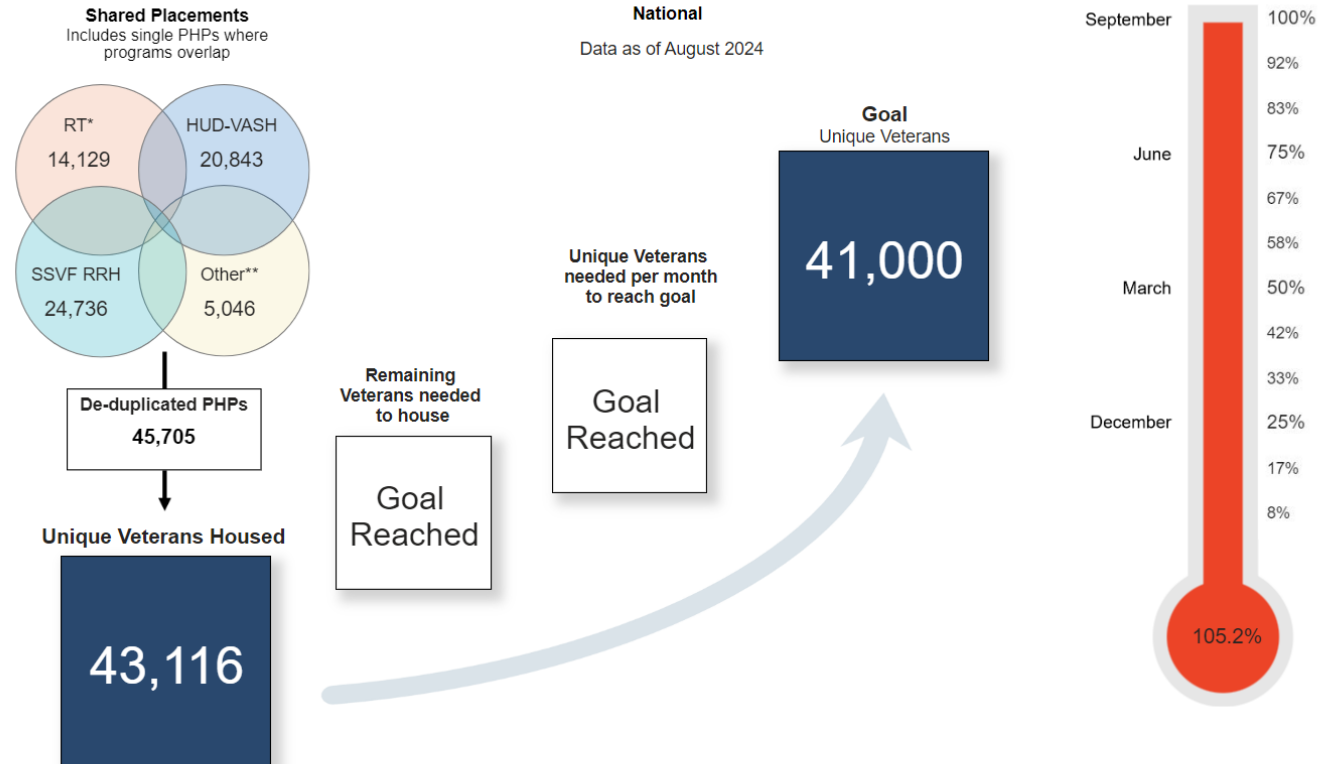
Progress Update



Goal 1: Permanent Housing

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Permanent Housing: VA has made a commitment to permanently house (PH) at least 41,000 unique Veterans in FY 2024. De-duplicated permanent housing placements (PHPs) for unique Veterans made during FY 2024 from the following programs count toward this goal: Grant and Per Diem (GPD), Health Care for Homeless Veterans (HCHV) Contracted Residential Services (CRS), HCHV Low Demand Safe Haven (LDSH), Housing and Urban Development-VA Supportive Housing (HUD-VASH), and Supportive Services for Veteran Families (SSVF) – Rapid Re-Housing (RRH) homeless services who obtain permanent housing (PH), Mental Health Residential Rehabilitation Treatment (MHRRT), HCHV Case Management (CM), and for Veterans homeless at entry for the following programs: GPD CM, SSVF – Homelessness Prevention (HP), Veterans Justice Outreach (VJO), and Health Care for Reentry Veterans (HCRV).



* RT Programs: GPD and HCHV CRS/LDSH
 ** Other: MH RRTP, GPD CM, HCHV CM, Homeless VJP, and SSVF HP
 *** Nationally, Unique Veterans Housed represents all unique Veterans across facilities

Veteran Detail

Veteran level access is limited to HOMES users.

Goal 2: Prevention of Returns to Homelessness

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Prevention of Returns to Homelessness: For Veterans who become permanently housed in FY 2024, no more than 5% return to homelessness.

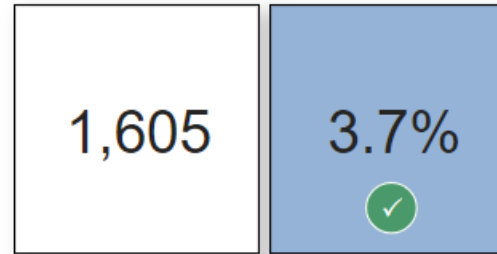
National

Veterans placed in housing as of August 2024

Veterans Housed
in FY 2024



Returns to Homelessness



Goal: \leq 5%

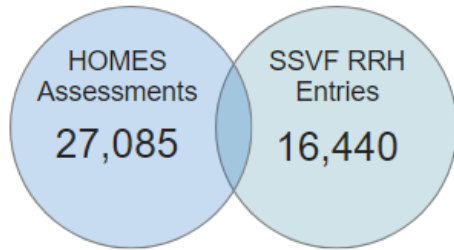
Goal 3: Engagement with Unsheltered Veterans

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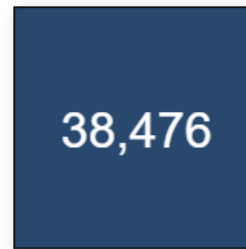
Engagement with Unsheltered Veterans: Nationally, VA will increase outreach to and engage with no less than 40,000 unique unsheltered Veterans

National
Data as of August 2024

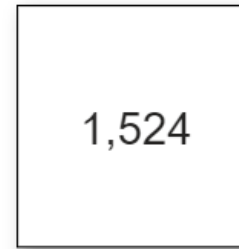
Unsheltered Veteran Engagement
Unsheltered Veterans de-duplicated by type of engagement (includes Veterans unsheltered at both assessment and SSVF RRH program entry)



Unique Unsheltered Veteran Engagement



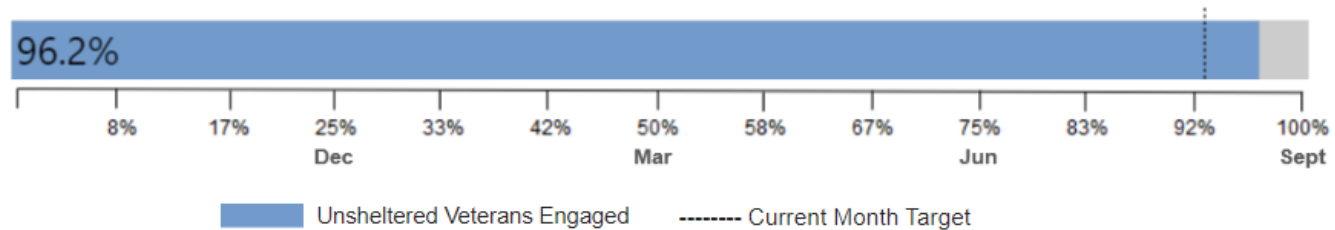
Remaining Unsheltered Veterans Needed



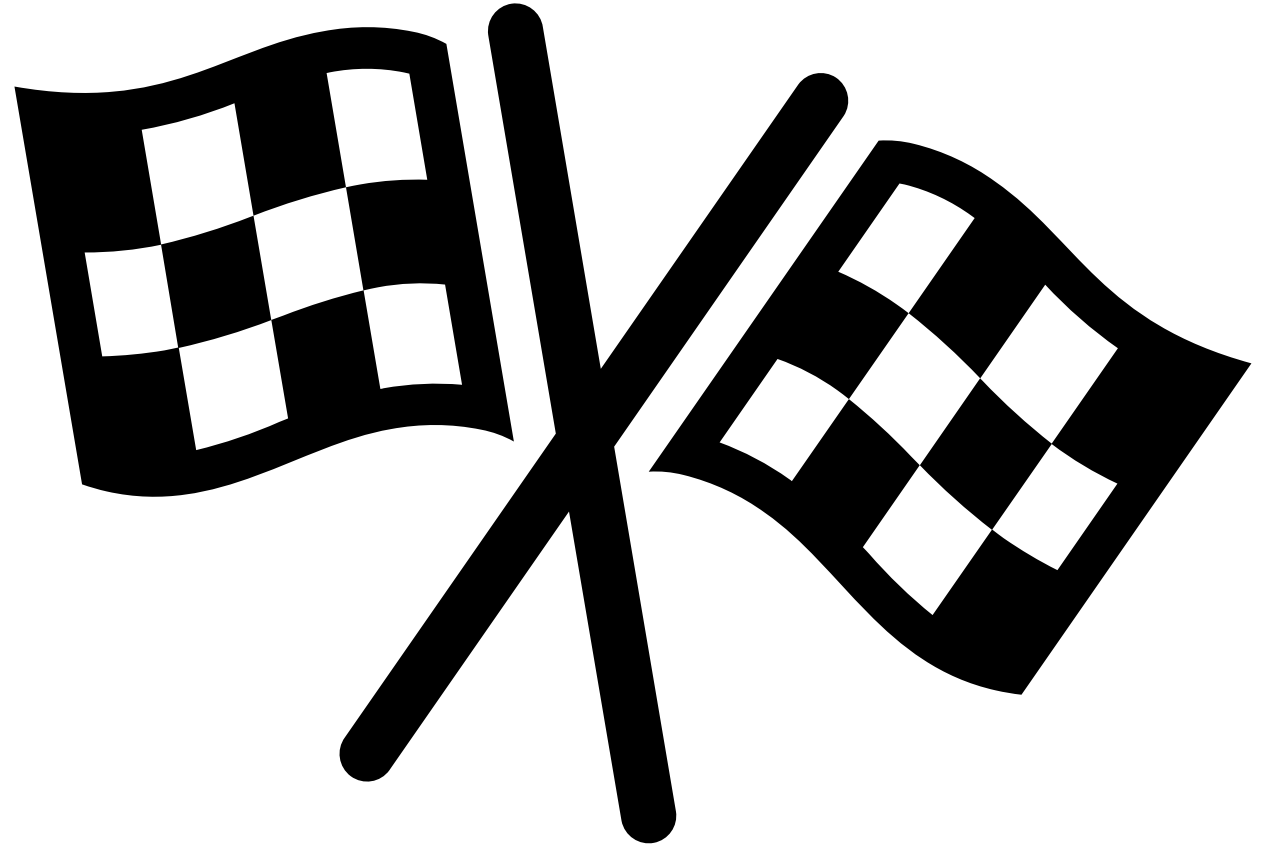
Unsheltered Veterans needed per month to reach goal



Goal Unique Veterans



Final Actions



Sustaining Your Progress

- With the end of fiscal year 2024, we want to emphasize the importance of remaining vigilant with these goals. **Our work is not done.**
- It is critical that we continue our efforts, and the Homeless Programs Office is here to help.
- If you need additional support, don't hesitate to contact your local Network Homeless Coordinator or the Business Intelligence Team for assistance.

Important Dates

- To ensure that all your hard work is reflected in these goals, we want to clarify some important dates about the closeout of the measures at the end of the year:
 - **Performance in the goals will reflect all services through 9/30/2024.** This includes permanent housing dates, returns to homelessness, re-housing dates, and program entry dates through 9/30/2024 for all measures.
 - **All services occurring through 9/30/2024 must be documented in HOMES by 10/11/2024.**
 - HMIS documentation was due 10/7/2024.
 - For a complete description of each measure and technical specifications, please refer to the [HPO FY 2024 Goals and Technical Manual](#) and contact the [Business Intelligence Team](#) with any questions.

Using a Trauma-Informed Approach Within Homeless Programs



Presenters

- Shara Katsos, LICSW, National Education Coordinator, National Center for Homelessness Among Veterans
- Molly Batschelet, LCSW-S, LCDC Coordinated Entry Systems Integration National Program Coordinator, Health Care for Homeless Veterans
- Masaki Hirayama, LCSW Health System Specialist, Clinical Operations, Homeless Programs Office
- Karen Guthrie, LICSW, CATCH Supervisor, Co-Coordinator, VA Boston Healthcare System
- David Chesley, Peer Specialist, VA Boston Healthcare System

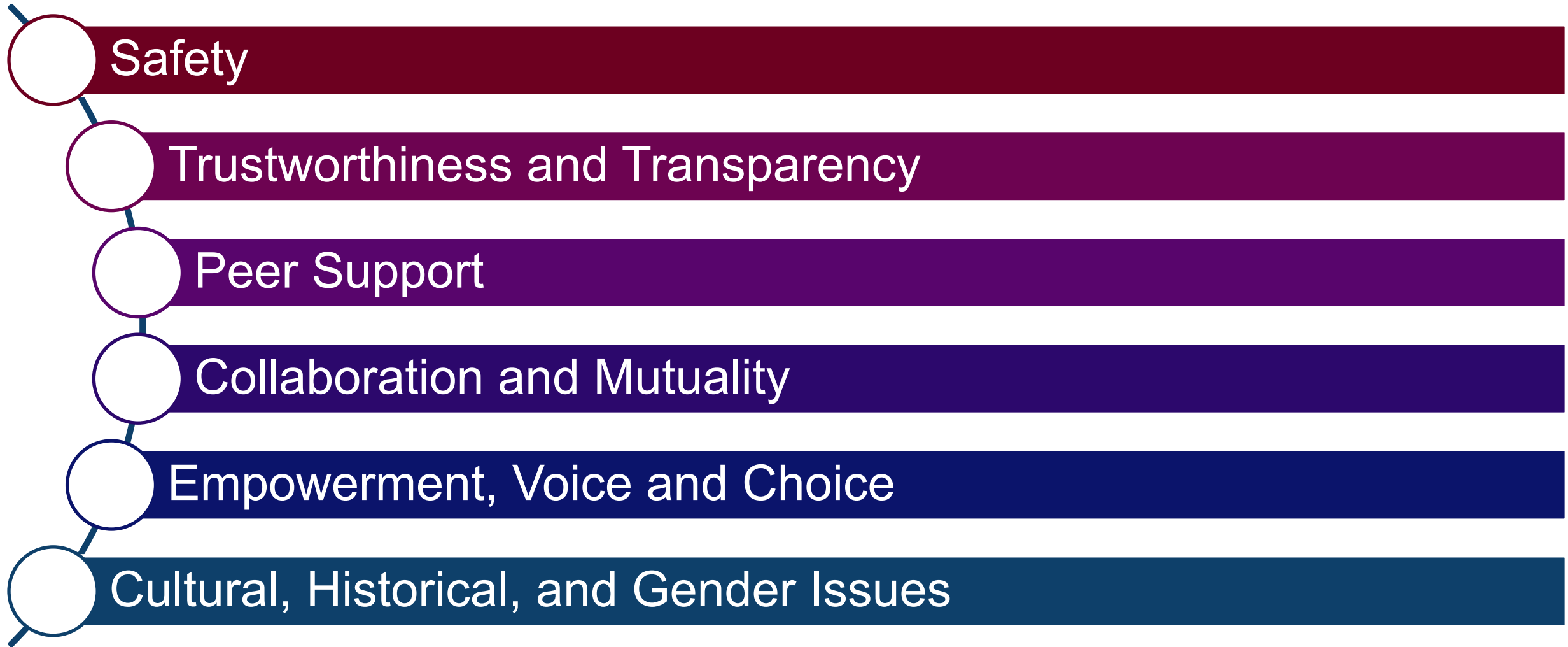
Trauma Defined

“Individual trauma results from an **event**, series of events, or set of circumstances that is **experienced** by an individual as physically or emotionally harmful or threatening and that has lasting adverse **effects** on the individual's functioning and physical, social, emotional, or spiritual well-being.” ([Substance Abuse and Mental Health Services Administration](#), SAMHSA)

Trauma-Informed Care (TIC) Key Assumptions

- A program, organization, or system that is trauma-informed:
 - Realizes the widespread impact of trauma and understands potential paths for recovery;
 - Recognizes the signs and symptoms of trauma in clients, families, staff, and others involved with the system;
 - Responds by fully integrating knowledge about trauma into policies, procedures, and practices; and
 - Seeks to actively resist re-traumatization.

TIC Background and Foundations: Key Principles



Traditional to Trauma-Informed System & Leader Mindsets

- **Judgment/Certainty:** Believes there is a “right” way to do things and pushes for that.
 - **Power over:** Takes a top-down approach with a hierarchy for input and decision-making. “Leaders” maintain control. Power sharing and collaboration is limited.
 - **Transactional:** Seeks input as needed. Check-box approach to partnership. Pre-set needs, goals, and agenda.
 - **Reactive:** Focused on quick fixes driven by immediate crises and needs. Limited time for reflection and intentional planning.
 - **Belief in selective expertise:** Identifies and relies on a select group of “experts” to provide the answers.
 - **Rigid:** Seeks to maintain the status quo. Not open to making changes and taking risks to try new things.
 - **Siloed:** Limited collaboration across programs or divisions. Limited sense of the bigger picture and collective action.
- **Curious:** Leads with curiosity and willingness to learn and explore options and perspectives.
 - **Power with:** Values shared input, decision-making, and transparency. Leaders empower others as partners and “co-developers.”
 - **Relational:** Prioritizes relationship-building. Values authenticity and trust. Identifies joint needs and goals.
 - **Reflective:** Open to complexity and time to collaborate and plan. Prioritizes space for self-awareness, reflection, and process.
 - **Belief in collective expertise:** Believes in the wisdom and capacities of all. Values lived expertise and diverse perspectives.
 - **Flexible:** Willing to adapt and integrate new practices and approaches. Open to learning, changing, and taking risks.
 - **Integrated:** Sees and values cross-program efforts to support integrated approach to service delivery and culture.

Establish Trusting and Supportive Relationships

- Utilize a relationship-centered approach among leadership and staff that fosters a sense of partnership and collaboration.
- Provide standards for engaging Veterans based on trauma-informed principles.
- Establish and maintain a process for monitoring quality of engagement and collaboration with Veterans across programs.
- Establish and maintain a process for identifying and addressing issues of disproportionality and disparity.
- Maintain a commitment to peer-led programming across Homeless Programs.
- Offer standards for ensuring culturally and gender responsive practice across Homeless Programs.

Incorporating TIC: Outreach, Engagement, and Assessment

- Ask about the meeting environment.
 - Can I come into your campsite or home? If in an office, do you prefer door open or closed?
 - Would you like to meet at your camp or somewhere else in the community?
- Be consistent, showing up to outreach or home visits when you say you will, and try and avoid unannounced visits when possible.
- Only ask necessary questions. The Veteran may not be ready for a full HOMES Assessment during initial outreach visits. Pace assessment with the Veterans comfort level and remember questions can be declined by the Veteran or deferred by staff.

Incorporating TIC: Intake and Enrollment

- Be transparent, providing clear information about services available, program expectations, and any limitations about programs and services. When discussing program expectations, focus on empowerment, flexibilities, and choice, versus 'requirements.'
- Treatment plan goals should be driven by the Veteran, with support from the case manager, and goals can evolve over time.
 - Start slowly with smaller goals, when needed.
 - Ask the Veteran what goals they want to work on first (and it may not be housing) and let them lead the way.

Resources

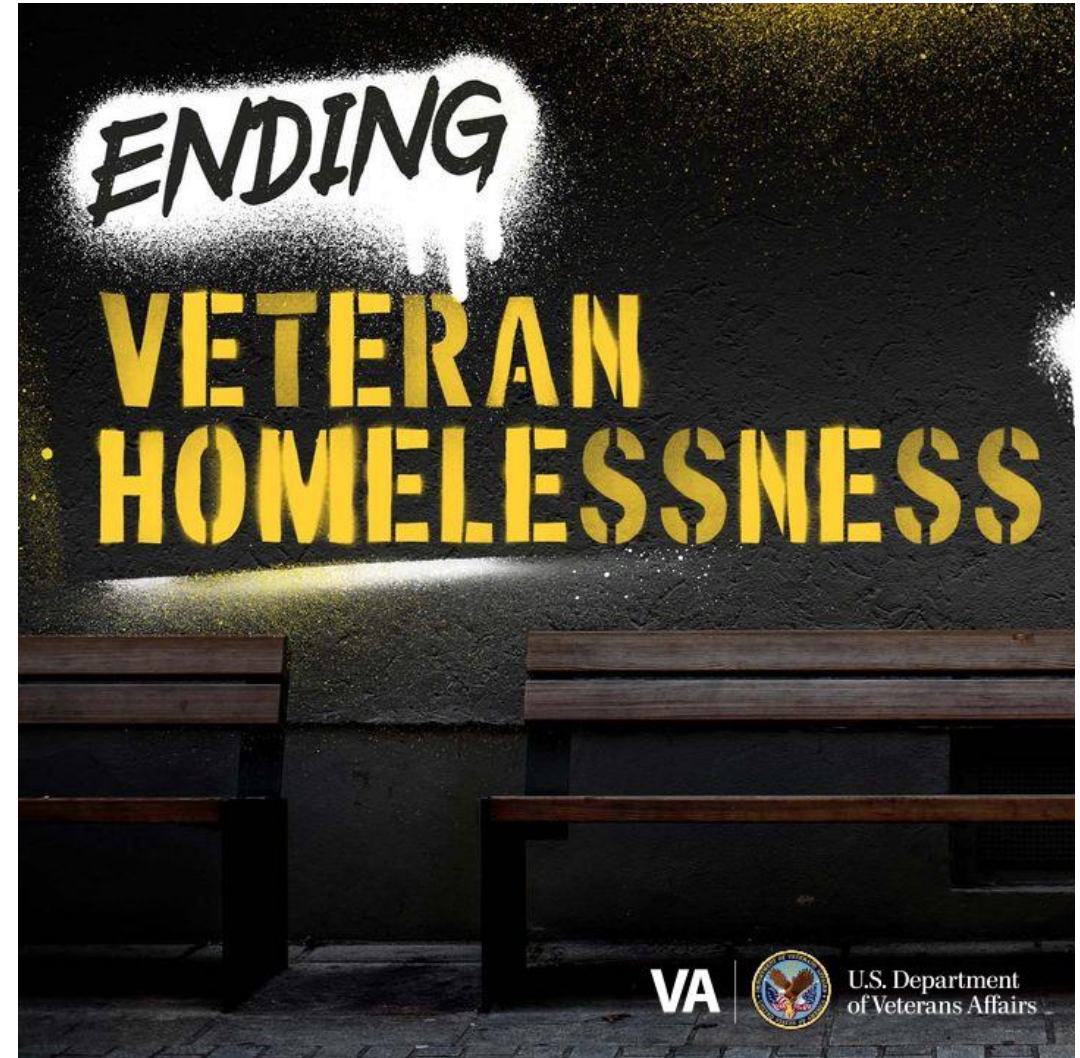
- [Trauma-Informed-Design-Quick-Reference-Guide](#)
- [Trauma-Informed Organizational Toolkit for homeless services](#)
- [The Increasing Need for Trauma-informed Care Shelters - Homeless and Housing Strategies for California](#)
- [SAMHSA's Concept of Trauma and Guidance for a Trauma-Informed Approach](#)
- [Air.org Trauma-Informed Care](#)

Panel Discussion and Q&A



Podcast Episode on Trauma Informed Care

- Each month on the [Ending Veteran Homelessness](#) podcast, we explore how our country works to ensure every Veteran has a safe and stable place to call home.
- April 2024's episode: [S1EP24: How Understanding Trauma Helps VA Better Serve Homeless Veterans](#) ([spreaker.com](https://www.spreaker.com))
- Subscribe today on [Apple Podcasts](#), [Spotify](#), or your podcatcher of choice!



Wrapping Up

- The recording of this call will be posted to the [VHA Homeless Programs Hub](#) in the coming days and [VA.gov/Homeless](#).
- Join our Office Hours calls on the first Thursdays of the month at 3:00 p.m. Eastern / 2:00 p.m. Central / 11:00 p.m. Mountain / 12:00 p.m. Pacific / 9:00 a.m. Hawaii.
 - **The final Office Hours Call is Thursday, November 7, 2024.**
 - For questions, please email VHA11HPO38kGoalSupport@va.gov.

“Never doubt that a small group of thoughtful, committed citizens can change the world; indeed, it's the only thing that ever has.” – Margaret Mead