

# Legal Services for Homeless Veterans and Veterans At-Risk for Homelessness (LSV-H) Grant Program

FY24 Grantee Onboarding Day 3 August 15, 2024

Recording: <a href="https://veteransaffairs.webex.com/recordingservice/sites/veteransaffairs/recording/playback/803ef8973d5e103dabe9d2a79f302644">https://veteransaffairs.webex.com/recordingservice/sites/veteransaffairs/recording/playback/803ef8973d5e103dabe9d2a79f302644</a>

Password: Homeless1!









## **Legal Services for Veterans Team**



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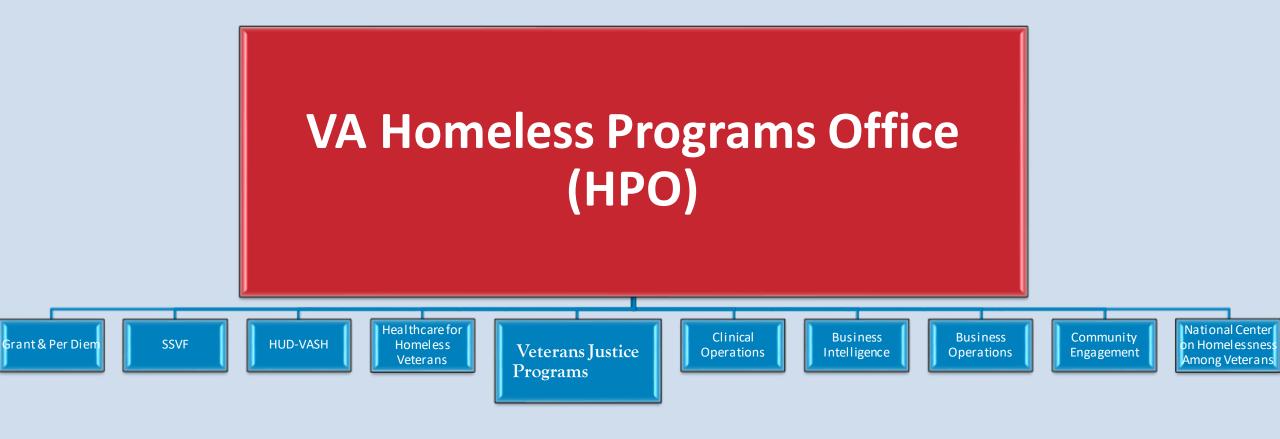
Heather Monroe, LCSW
Legal Services for Veterans
Grants Management Specialist

## Agenda

- Organizational Structure
- Suicide Prevention
- Outreach
- Resources
- Next Steps



## **Organizational Structure**







# **HPO Grants Comparison**

LSV-H	SSVF
Authorized by Public Law 116-315	Authorized by Public Law 110-387
Focus on the Provision of Legal Services to remove barriers to housing stability	Focus on Housing Prevention & Rapid Re-housing
No income threshold	Must be eligible for SSVF (income below 80% AMI)
Veteran must be homeless or at-risk of experiencing homelessness	Veteran must be homeless or at imminent risk of experiencing homelessness
Veteran* only, with a focus on women Veterans	All members of the Veteran* household may be eligible
No cost to Veteran	Veteran could cost share for legal services
Administered through VJP Legal Services for Veterans National Office	Administered through <u>Supportive Services for Veteran</u> <u>Families National Office</u>





## **Organizational Structure: VJP**



Project CHALENG

Veterans Justice Outreach Healthcare for Re-entry

Peer Support Services Legal Services for Veterans





#### Project CHALENG - VA Homeless Programs







# 2023 CHALENG Survey Fact Sheet



Fact Sheet

Office of Public Affa Media Relations Washington, DC 20-(202) 461-7600 www.va.gov

C. Ranking of Veteran Need, All responses (One to four scale, with one equals unmet and four equals met)

#### **Top Ten Highest Unmet Needs**

Rank	Highest Unmet Needs: All responses	Mean Score
1	Housing for Registered Sex Offenders	2.16
2	Legal Assistance for Credit Issues/Debt Collection	2.28
3	Legal Assistance to Expunge a Criminal Record	2.32
4	Family Law (i.e., divorce, child custody)	2.35
5	Child Care	2.36
6	Tax Issues	2.39
7	Legal Assistance for Child Support Issues	2.41
8	Legal Assistance for Outstanding Warrants and Fines	2.46
9	Discharge Upgrade Appeals	2.51
10	Financial Guardianship	2.52

#### **Top Ten Highest Met Needs**

Rank	Highest Met Needs: All responses	Mean Score
1	Medical Services	3.48
2	Case Management	3.38
3	Food	3.30
4	Personal Hygiene (shower, haircut)	3.27
5	HIV/AIDS Testing and Treatment	3.22
6	Services for Emotional or Psychiatric Problems	3.22
7	Substance Abuse Treatment	3.21
8	Eye Care and Glasses	3.19
9	Clothing	3.18
10	Emergency/Immediate Shelter	3.16





# **Legal Services for Veterans Program (LSV)**

- Outreach, training and coordination designed to expand equitable access to legal service to Veterans
- Further Veterans' legal service access through the continued growth of Medical Legal Partnership (MLP) model within the VHA
- Establish and administer Veterans Health Administration's (VHA) new legal services grant programs



# Office of Suicide Prevention





# Suicide Prevention and Veterans Justice Outreach

Dr. Stacie Kalvels
National Manager for Innovations
Office of Suicide Prevention
August 15, 2024

## **Objectives**

- Provide background of suicide, specifically, the public health approach to suicide prevention
- Gain knowledge of demographics of suicide risk in specific Veteran populations.
- Describe lethal means safety and the impact of lethal means safety in a crisis.
- Define what actions learners can take in suicide prevention, including resources available for Veterans.
- Understand resources are available for Veterans in crisis, regardless of eligibility for VA care.
- Learn about legislative requirements of suicide prevention.



### **Facts About Veteran Suicide**



#### Suicide is a National Public Health Issue

 Suicide is a national issue, with rising rates of suicide in the general population.

 For every death by suicide, approximately 135 individuals are impacted.



#### Suicide is a Complex Issue with No Single Cause

- Suicide is often the result of a complex interaction of risk and protective factors at the individual, community, and societal levels.
- Risk factors are characteristics that are associated with an increased likelihood of suicidal behaviors. Protective factors can help offset risk factors.
- To prevent Veteran suicide, we must maximize protective factors while minimizing risk factors at all levels, throughout communities nationwide.



#### **Risk and Protective Factors**

#### Risk

- Prior suicide attempt
- Mental health issues
- Substance abuse
- Access to lethal means
- Recent loss
- Legal or financial challenges
- Relationship issues
- Unemployment
- Homelessness

#### **Protective**

- Access to mental health care
- Sense of connectedness
- Problem-solving skills
- Sense of spirituality
- Mission or purpose
- Physical health
- Employment
- Social and emotional well-being

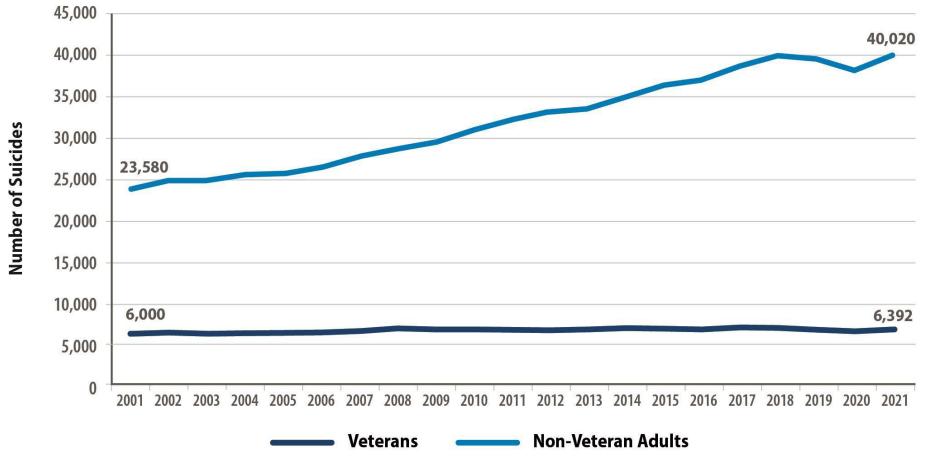


**Goal:** Minimize risk factors and boost protective factors



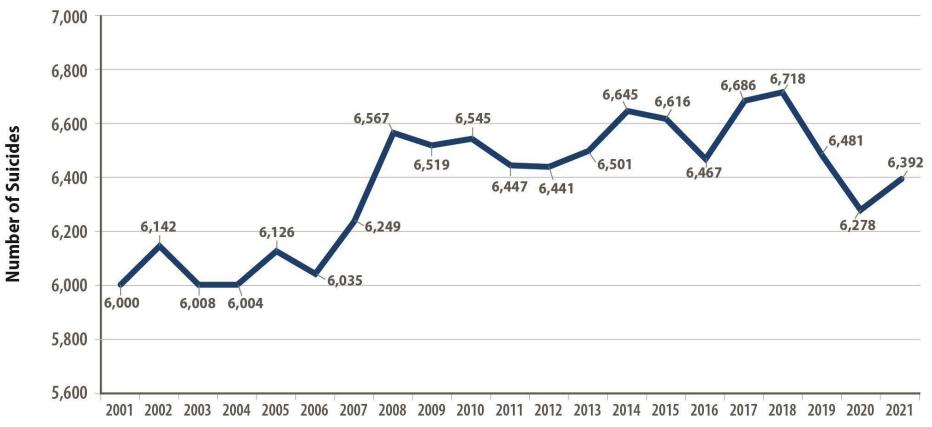
#### Suicide Deaths Among Veterans and Non-Veteran U.S. Adults,

#### by Year, 2001-2021





#### Veteran Suicide Deaths, 2001–2021





#### **Heavily Impacted Groups in 2021**



#### **Women Veterans**

 24.1% increase in the ageadjusted suicide rate



#### American Indian/ Alaska Native Veterans

- Unadjusted suicide rate was 46.3 per 100,000
- 51.8% increase in the unadjusted suicide rate from 2020–2021



#### **Homeless Veterans**

- 112.9 per 100,000 suicide rate was highest observed from 2001–2021
- Suicide rate increased 38.2% since 2020
- Suicide rate was 186.5% higher than for those not homeless



#### **Priority Group 5**

- Had highest suicide rate at
   57.1 per 100,000
- Suicide rate increased 9.8% from 2020



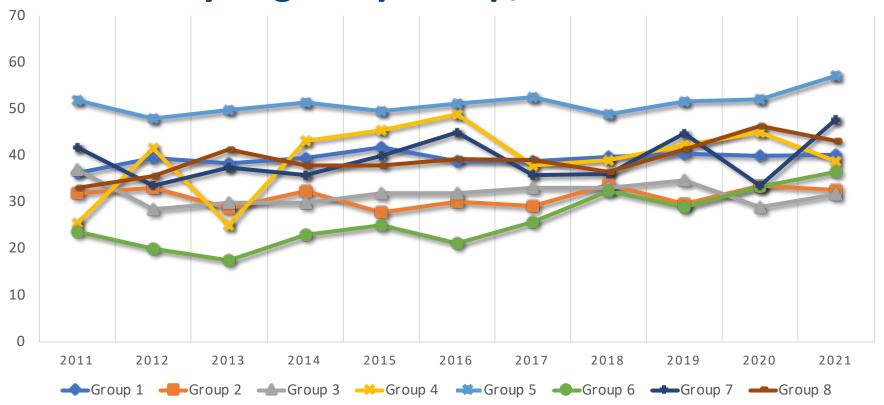
#### Justice-Involved Veterans

- Suicide rate of
   151.0 per
   100,000 was the highest over this period
- Suicide rate increased 10.2% since 2020



#### Suicide Rate Among Enrolled Recent Veteran VHA Users, by

#### VHA Priority Eligibility Group, 2001-2021

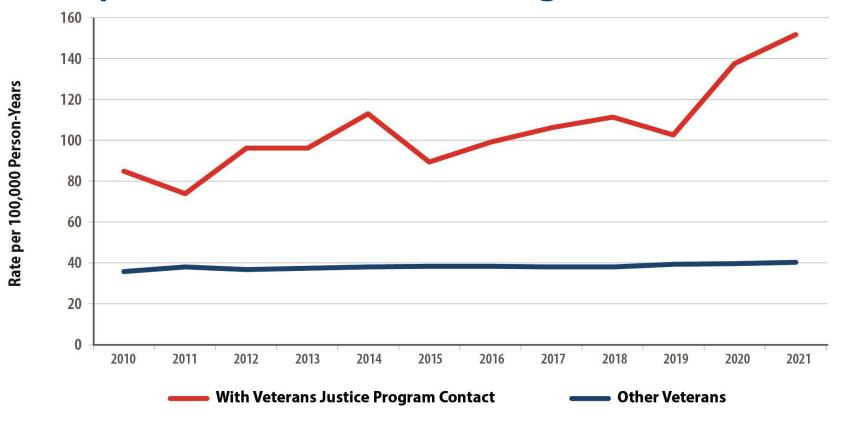


Priority Group 5 has continued to have higher rates of suicide and increase in suicide rate from 2020-2021. Priority Group 5 do not receive service-connection compensation from VA.



#### Unadjusted Suicide Rate, Recent Veteran VHA Users, by

Receipt of Veterans Justice Program Services, 2010–2021



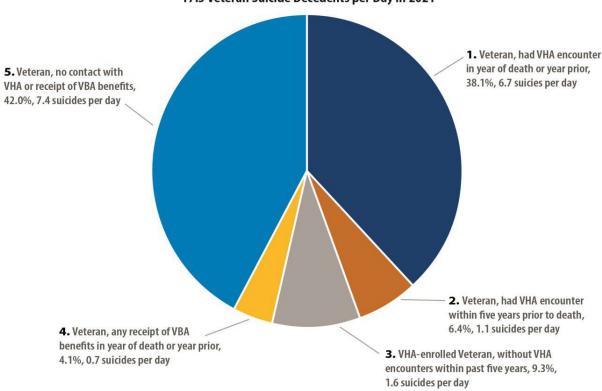
Justice-Involved
Veterans have higher rates of suicide since 2001 and have seen an increase in rates specifically in 2021.



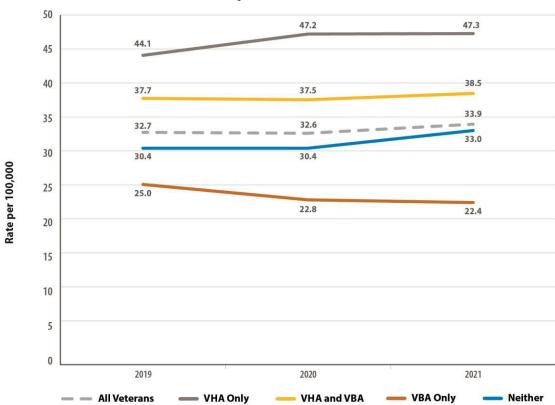
#### **VBA Data Highlights**

#### Veteran Suicide Deaths in 2021, Sequential Mutually Exclusive Categories of VA Points of Contact, Percentage and Average Suicides Per Day

17.5 Veteran Suicide Decedents per Day in 2021



# Unadjusted Suicide Rate, Veterans, by Mutually Exclusive Categories of VHA and VBA Services Receipt, 2019-2021





# Firearm Use



Firearm suicide rate among Veteran men was **62.4% higher** than

for non-Veteran men in 2021.

**72%** 

of Veteran suicides

were by *firearm* in 2021.



Firearm suicide rate among Veteran women was **281.1% higher** than non-Veteran women in 2021. There was a **14.7%** increase in Veteran

women firearm suicide deaths

from 2001-2021.

#### **Firearm**

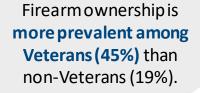
Suicide

From 2020 to 2021, the percentage of Veteran suicides that involved firearms *increased* by

**5.7**%

#### 1 in 3

Veteran firearm owners store at least one firearm unlocked and loaded.



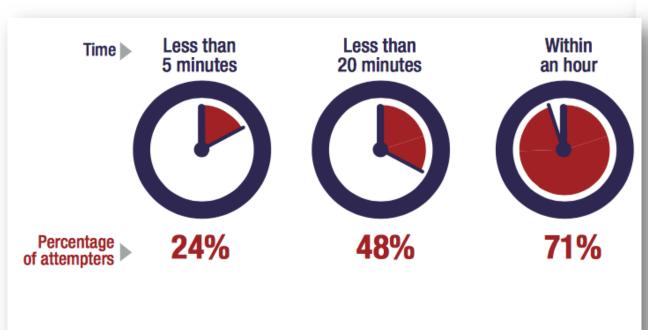


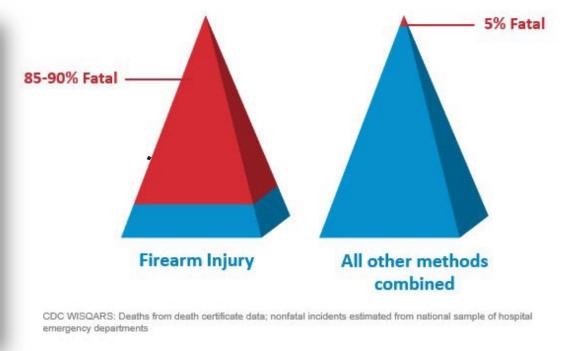
#### What is Lethal Means Safety?

- In the context of suicide prevention, safe storage of lethal means is any action that builds in time and space between a person with thoughts of suicide and a suicide method.
- Effective lethal means safety education and counseling is collaborative and Veteran-centered. It respects the important role that firearms and medications may play in Veterans' lives and is consistent with their values and priorities.



# Most Suicide Crises are Brief Time from Decision to Action < 1 hour





Source: Simon, T.R., Swann, A.C., Powell, K.E., Potter, L.B., Kresnow, M., and O'Carroll, P.W. Characteristics of Impulsive Suicide Attempts and Attempters. SLTB. 2001; 32(supp):49-59.

Source: CDC WISQARS and US Dept. of Veterans Affairs https://www.mirecc.va.gov/lethalmeanssafety/facts/



#### **Lethal Means Safety Works**

- Reducing access to lethal suicide methods is one of the few population interventions that has been shown to decrease suicide rates.
- About 90 percent of people who survive a suicide attempt do not go on to die by suicide.
- If we can collaborate with Veterans ahead of time to help them survive a suicide crisis, we have likely prevented suicide for the rest of their lives.



## **VA Public Health Approach**

Veteran suicide is a complex problem that cannot be addressed through a single solution, nor can it be addressed by VA or clinical intervention alone. VA is committed to a public health approach that includes both community prevention and clinical interventions.

#### **Public Health Approach**

Core Tenets and Guiding Vision

1

Suicide is preventable.

2

Suicide prevention requires a public health approach combining clinical and community-based approaches.

3

Everyone has a role to play in suicide prevention.

These are the foundation for our efforts to implement the National Strategy (2018), VA/DoD CPG for the Assessment and Management of Patients at Risk for Suicide (2019), and the White House strategy for Reducing Military and Veteran Suicide (2021).





Promote secure firearm storage for Veteran suicide prevention.



Continue expansion of readily accessible crisis intervention services.

#### **Call to Action:**

# **Key Themes**

Everyone has a role to play

in suicide prevention.



Implement and sustain community collaborations focused upon community-specific Veteran suicide prevention plans.



Improve tailoring of prevention and intervention services to the needs, issues, and resources unique to Veteran subpopulations.



Advance suicide prevention meaningfully into non-clinical support and intervention services, including financial, occupational, legal, and social domains.



Increase access to and utilization of mental health services across a full continuum of care.



Integrate suicide prevention within medical settings to reach all Veterans.

### **VA Suicide Prevention Resources**



# Free, Confidential Support 24/7/365

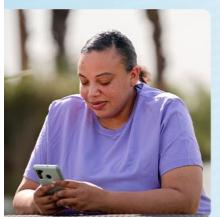
- Veterans
- Service members
- Family members
- Friends







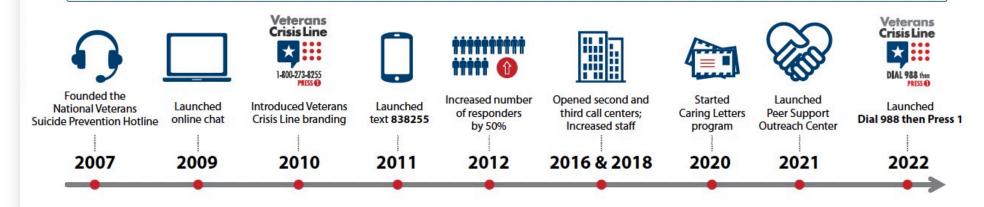
CHAT
VeteransCrisisLine.net/Chat



**TEXT**838255



The Veterans Crisis Line is a free, confidential resource available to any Veteran, even if they are not enrolled in VA health care or registered with VA. Care does not end when the conversation is over. The Veterans Crisis Line can connect Veterans to their local suicide prevention coordinators, who will follow up and coordinate care.





More than 8 million calls



More than 399,000 texts



975,000 chats



1.6 million referrals

to VA Suicide Prevention Coordinators

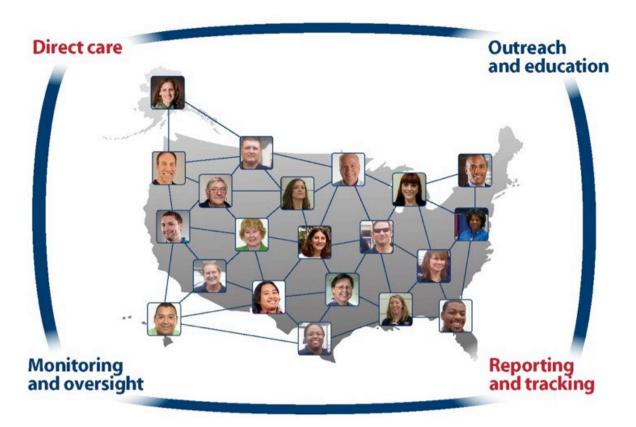
More than

337,000 dispatches of emergency services

07/2024

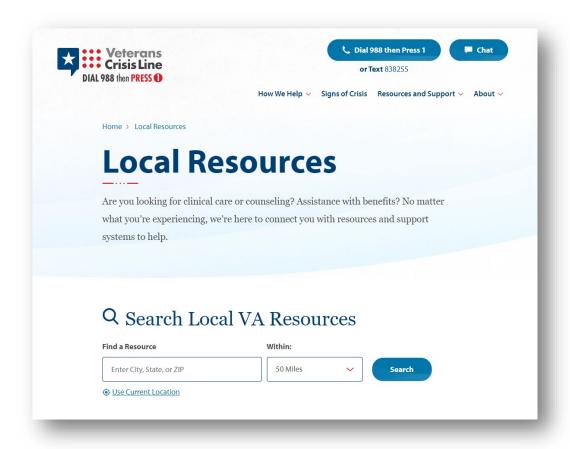
# Find a Local VA SPC at VeteransCrisisLine.net/Resource Locator

More than 400 SPCs nationwide.





#### **VeteransCrisisLine.net/Resource Locator**







#### Non-Eligible Veterans

- 988 is available 24/7 across the country.
- Veterans Crisis Line (988 press 1) and 988 offer services regardless of Veteran status.
- Additional resources available upon crisis deescalation.





# **VA Suicide Prevention Legislative Mandates**



#### Legislative Highlights

# Joshua Omvig Veterans Suicide Prevention Act (2007)

- Public Law 110-110
- "The Secretary shall develop and carry out a comprehensive program designed to reduce the incidence of suicide among veterans"
- Creation of Suicide Prevention Coordinators
- 24-hour mental health care, creation of Veterans Crisis Line

#### **Strong Veterans Act of 2022**

- H.R. 6411
- "To amend title 38, United States Code, to make certain improvements in the mental health care provided by the Department of Veterans Affairs, and for other purposes."
- 27 Sections to further strengthen mental health and suicide prevention programs at VA
- Increased training, mental health care delivery, and research



### **COMPACT Act, Section 201 BLUF**



Section 201 of <u>COMPACT Act</u> states VA will provide, pay for and reimburse for emergent suicide care for eligible individuals at VA medical facilities and at non-Department facilities.



Eligible individuals include all Veterans regardless of eligibility for VHA health care benefits (includes OTH discharges).



Emergent suicide care includes inpatient or crisis residential care for no more than 30 days and/or outpatient medical and mental healthcare for no more than 90 days. If the individual remains in acute suicidal crisis, extensions may be provided. Each **new** crisis is a new episode of eligibility.



VA will ensure eligible Veterans are not financially responsible for costs associated with emergent suicide care, including emergency transportation.

#### **COMPACT Act, Section 201 Impact:**

- VA providing cost-free mental health and medical emergent suicide care removes the cost barrier
- By extending eligibility and access to acute and follow up suicide care, the net of protection VA will provide to prevent suicide increases dramatically
- COMPACT 201 benefit potentially increases eligibility to an additional 9 million unenrolled Veterans, potentially doubling the needed services



# **Questions?**



## **Annual Report Resources**

#### **Veteran Suicide Data and Reporting**

To view all collective resources for the 2023 Annual Report, visit the data page. All other links will take you directly to the products listed.

#### **National Data Appendix**

The data presented here is meant to accompany the annual report.

#### **State Data Appendix**

The data presented here is meant to accompany the annual report.

#### **Report FAQs**

This document focuses on frequently asked questions about the annual report.

# **2023 National Veteran Suicide Prevention Annual Report**

#### **Methods Report**

This document provides background regarding the methods used by the VA's Office of Mental Health and Suicide Prevention to assess suicide mortality among Veterans. This represents a supplement to information included in the annual report.

#### \*State Data Sheets

The 2021 state data sheets present the latest findings from VA's ongoing analysis of suicide rates and include the most up-to-date state-level suicide information for the United States.

\*This link will take you to the general Suicide Prevention Data page. You must scroll halfway down the page and click on View Individual State Data Sheets, to view data for each U.S. state, island, and territory.

## VA Tools and Resources for Veterans and Supporters

Make the Connection: VA's premier mental health literacy and anti-stigma website highlights Veterans' real, inspiring stories of recovery and connects Veterans and their family members and friends with local resources.

Reach Out: Get support designed specifically for you. Family members or friends can find resources that are designed for the Veterans in your life.

<u>Safety Planning</u>: Information on safety planning and a template for developing a safety plan. A safety plan is a written list of coping strategies and sources of support that at-risk Veterans can use before or during a suicidal crisis.

**VA Mental Health:** VA's repository of mental health resources, information, and data materials.

## VA Tools and Resources for Veterans and Supporters

<u>VA S.A.V.E. Training</u>: Training designed to teach anyone who interacts with Veterans how to recognize warning signs of crisis and what to do to help a Veteran who may be at risk.

<u>VA Suicide Prevention</u>: Explore suicide prevention resources to build networks of support among community-based organizations, Veterans Service Organizations, health care providers, and other members of your community that strengthen protective factors for Veterans.

<u>VA Resource Locator</u>: This tool can help Veterans find local mental health and suicide prevention resources, including their local suicide prevention coordinator.

<u>Veterans Crisis Line</u>: A free, anonymous, confidential resource available to Veterans in crisis, as well as concerned family members and friends. Dial 988 then Press 1, chat at <u>VeteransCrisisLine.net/Chat</u>, or text to **838255**.

## **Stay Connected**

Follow us on social media to stay up to date on our programs and initiatives.



@deptvetaffairs

@veteransmtc



U.S. Department of Veterans Affairs

Veterans Health Administration

**Make the Connection** 



@DeptVetAffairs

@veteranshealth

#### References

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- 3. Finlay, A. K., Blue-Howells, J., Stimmel, M., Yu, M., Stewart, K. & Clark, S. (2020). Veterans Justice Program: Connecting Veterans with Veterans Health Administration Mental Health and Substance Use Disorder Treatment [Fact Sheet 2020]. Menlo Park, CA: Center for Innovation to Implementation. (Updated 07/09/2020).
- 4. Palframan KM, Blue-Howells J, Clark SC, McCarthy JF. Veterans Justice Programs: Assessing Population Risks for Suicide Deaths and Attempts. Suicide Life Threat Behav. 2020 Aug;50(4):792-804. doi: 10.1111/sltb.12631. Epub 2020 Mar 9. PMID: 32147866.
- 5. Charlier, J., & Reichert, J. (2020). Introduction: Deflection— Police- Led Responses to Behavioral Health Challenges. https://www.nadcp.org/. Retrieved March 10, 2023, from https://www.nadcp.org/wp-content/uploads/2020/10/Journal-for- Advancing-Justice-Volume-III\_final.pdf

#### **References Continued**

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   Where They Are [PowerPoint Slides]. Police, Treatment, and Community Collaborative, United
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- 8. Cleveland EC, Azrael D, Simonetti JA, Miller M. Firearm ownership among American veterans: findings from the 2015 National Firearm Survey. Inj Epidemiol. 2017 Dec 19;4(1):33. doi: 10.1186/s40621-017-0130-y. PMID: 29256160; PMCID: PMC5735043.
- 9. U.S. Department of Veterans Affairs, PTSD: National Center for PTSD. The Relationship Between PTSD and Suicide. Retrieved January 23, 2024, from https://www.ptsd.va.gov/professional/treat/cooccurring/suicide\_ptsd.asp.



# **OUTREACH**





# Medical Legal Partnerships (MLP)

- Collaboration between VA clinicians and pro-bono legal service providers
- Co-located & embedded at a VA facility consistent dates and times
- Consultation specific to Veteran needs
- More than just a referral
- Training across disciplines
- Priority: Veteran-centric care
- VA Memorandum of Understanding (MOU) executed
- Listing found on LSV website: VA MLP\_LC list





# **VA-Affiliated Legal Clinics**

- Informal relationship between VA clinicians and probono legal service providers
- Can be co-located at a VA facility
- Referral driven
- Variable days/times/services provided
- Less formal than MLP





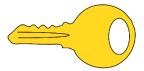


# Bay Pines VA Medical-Legal Partnership (MLP): LSV-H Grant Recipient

Pye N. Young – Managing Attorney

# Tips for building A Positive MLP Relationship

#### **Consistency is Key!**



## Communicate with your VA Provider:

- Identify your main contact/liaison and establish regular communication with them (meetings, updates, etc.)
- Inform your VA liaison of the scope of your grant, how your program intakes/accepts new clients

#### Be Present & Involved:

- Request a confidential meeting space on site at the VA, but be flexible if one is not available. Establish regular 'office hours' for client accessibility
- Attend VA on site events on a regular basis (Stand Down, Resource Fairs, etc...)
- Regular presentations to the VA partner on various legal topics



#### Provide Access:

- Share your contact information (Name, e mail, Tel. Number, Hours of operation, etc...)
- Hand outs & Flyers can be shared electronically & in person for quick reference!

## Outreach & Involvement



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# LAKESIDE CLINIC MEDICAL-LEGAL PARTNERSHIP





The Medical-Legal Partnership is expanding to provide further services to Veterans who are unhoused or at risk of becoming unhoused.

#### AREAS OF LAW

- VA Benefits (service-connected disability, pension, overpayment defense, discharge upgrade)
- Housing (landlord-tenant, HUD-VASH)
- Family Law (child support/custody, divorce)
- Domestic Violence Injunctions (petitioning FOR an injunction only)
- Advanced Directives (power of attorney, health care surrogate, living will)
- Consumer Financial Protection (identity theft, debt collection, lemon law)
- Sealing/Expungement
- And more!

#### **CLINIC INFO**

#### Walk-In Clinic

The clinic is open the first and third Wednesdays of each month, 10:00 a.m.-2:00 p.m. at

Bay Pines VA Building 102, Room 105 Bay Pines, FL 33744

January 17, 2024

February 7, 2024 February 21, 2024

March 6, 2024 March 20, 2024

April 3, 2024

April 17, 2024 May 1, 2024

May 15, 2024

June 5, 2024 June 19, 2024

#### Telephone

(727) 490-4040

# **RESOURCES**





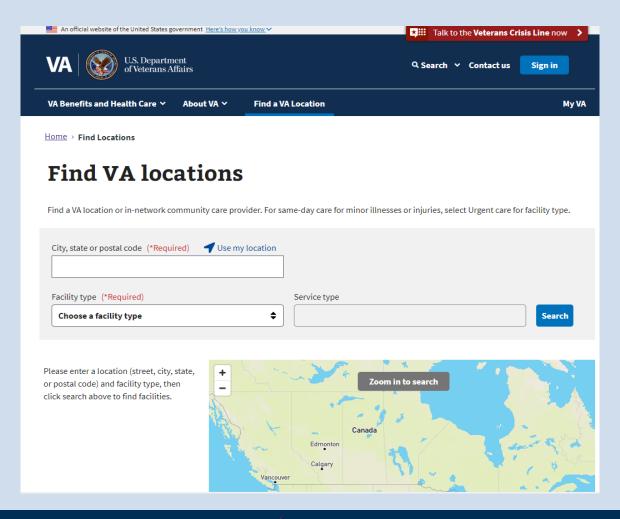
## **LSV-H Grantee Toolkit**

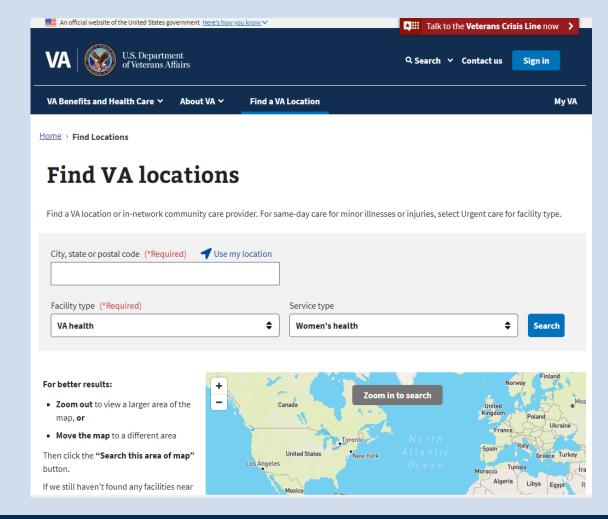
https://www.va.gov/HOMELESS/LSV-H Toolkit.asp

- **Talking Points**
- Grantee Quick Guide
- Customizable Brochure
- Promotional Social Media Content
- Social Media Graphics

## **Find VA Locations**

#### https://www.va.gov/find-locations/









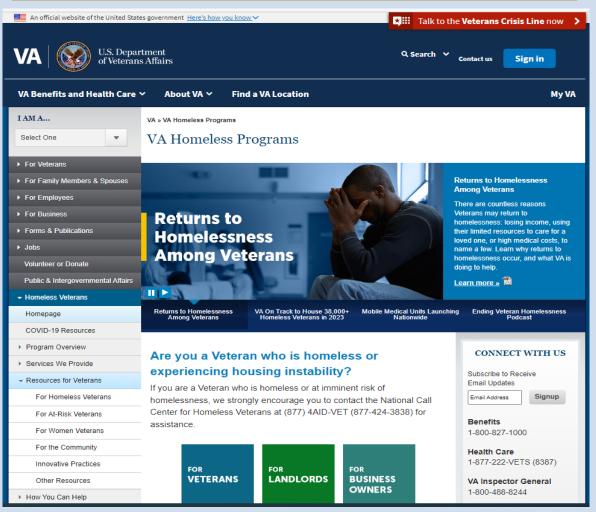
## **Women Veterans Health Care**

https://www.womenshealth.va.gov/WOMENSHEALTH/overview.asp



# **VA Homeless Programs**

## https://www.va.gov/homeless/



# VA Legal Services for Veterans

## https://www.va.gov/homeless/lsv.asp



## **Connect Homeless and At-Risk Veterans to VA**

Veterans who are homeless or at risk of homelessness—and their family members, friends and supporters—can make the call to or chat online with the National Call Center for Homeless Veterans, where trained counselors are ready to talk confidentially 24 hours a day, 7 days a week.



National Call Center for Homeless Veterans

877-424-3838

va.gov/homeless



## **Veterans Crisis Line**

- Veterans
- Service Members
- Family Members
- Friends



Confidential crisis chat at **VeteransCrisisLine.net/Chat** or text **838255** 





## **LSV-H Veteran Survey**

#### **LSV-H Grant Survey for Veterans**

- Purpose: To learn from Veterans ways to improve the LSV-H
   grant program to better meet their needs
- Format: A brief survey, administered by a VA-funded evaluation team separate from the LSV-H grant program team
- Request: Share an informational flyer with Veterans to whom you deliver legal services through the LSV-H grant program
- Flyer available on the LSV Provider website



Legal Services for Homeless Veterans and Veterans At-Risk for Homelessness (LSV-H)

A new VA program that gives awards to organizations to provide legal services to Veterans

fore information about SV-H is available at the //www.va.gov/homeless/sv.aso

For any questions or concerns, please call or text Samantha at (617) 963-6766

## You are invited to complete a survey about the legal services you received

 Please consider completing a 10-minute survey to help the VA improve the new legal services program for Veterans (LSV-H).

You can access the survey online at https://vhaordfedramp.gov1.qualtrics.com/jfe/form/SV\_ 6Sxl2Hr0TMZ9R9c or scan this QR code:



- All of your answers are <u>confidential</u>. The LSV-H legal service organization that helped you with your legal needs will <u>not</u> be notified that you completed the survey.
- If you prefer to complete the survey by phone, please text or leave a message at (617) 963-6766 with the best phone number to reach you.
- A \$20 CVS gift card will be provided if you complete the survey and provide a mailing address.





## **Next Steps**

- Review the resources and information shared during the Onboarding Sessions
- Note important due dates:
  - > SF425
  - Quarterly reports
- Reach out to your local VA facility and make connections
- Log into eGMS and confirm accuracy of Grant Contacts
- Familiarize and register with SQUARES
- Visit & bookmark the LSV Grant Provider website:

https://www.va.gov/HOMELESS/LSV Provider.asp

- Contact LSV Program Office with questions: <u>lsvgrants@va.gov</u>
- Save the Date(s), National LSV-H Grantee Call:
  - > 1st Wednesday of month 2pm ET beginning October 2, 2024

# **Q&A** and Discussion

