Five Strategies for Building a Successful Relationship with Your Local VA

Eric Shinseki, the Secretary of the U.S. Department of Veterans Affairs (VA) recently committed to ending homelessness among veterans in five years. In order to reach that goal, each local VA Medical Center has been asked to create and implement its own five year plan for ending veteran homelessness. As a result, there is a renewed focus on creating strong partnerships between VA Medical Centers and local homelessness assistance systems so that strategies to end homelessness can be coordinated and resources maximized to end homelessness for veterans.

To help VA Medical Center and communities forge these partnerships, the Alliance has looked for existing models of cooperation and collaboration. This brief identifies five promising strategies that homelessness assistance systems have used to create or strengthen their relationship with their local VA Medical Center. These strategies have been identified based on interviews with several communities that have strengthened the partnership between the two systems in recent years, including Minneapolis, MN; San Francisco, CA; and Washington, DC.

Bring VA staff into the community and the larger homelessness assistance system.

Inviting VA personnel responsible for issues relating to homelessness to participate in the community's effort to end veteran homelessness and all homelessness is one of the most successful strategies for strengthening relationships with local VA Medical Centers. Including VA staff in community meetings and projects around homelessness often helps them to feel like they are part of the broader effort to end homelessness, rather than working separately within VA. VA personnel can be invited to sit on local committees, attend meetings about homelessness (not just veteran-specific ones), join Continuum of Care meetings, and participate in planning for key community efforts.

Some communities have had further success in this area by inviting VA personnel to explain VA initiatives around homeless veterans during one of these broader community meetings. Minneapolis, MN, for example, invited local VA staff to discuss the joint U.S. Department of Housing and Urban Development and VA Supportive Housing (HUD-VASH) initiative with local homelessness assistance providers. The conversation not only helped to demystify the HUD-VASH process and goals for providers, but also sparked a discussion that was useful for VA staff members.

Shared projects between the homelessness and VA systems can also be particularly effective at forging relationships. For example, San Francisco, CA operates a Project Homeless Connect

specifically for veterans and is creating a supportive housing site for veterans, both in conjunction with the local VA Medical Center.

Make ending veteran homelessness a local priority.

Make ending homelessness among veterans a priority for your whole community. This will demonstrate to local VA Medical Center staff that there is a community-wide effort to work together to achieve this goal; it is not something which VA staff must solve alone. Ending veteran homelessness is a top priority in Washington, DC, and leaders in the homelessness assistance system have communicated that goal very clearly to local VA staff, resulting in a common vision and shared efforts to make their mutual goal a reality.

Some cities have strengthened their relationships with their local VA Medical Centers by demonstrating that special steps are being taken to serve veterans experiencing or at risk of homelessness. For example, Minneapolis, MN has developed specific guidance for front-line staff in homelessness assistance programs for when a veteran presents at intake. Not only are front-line staff required to ask about veteran status upon intake, but they can then use that information to connect veterans with benefits to which they are entitled and help match potential clients with available VA programs.

Increase transparency and cooperation.

Increasing transparency and coordination in joint initiatives between the local VA Medical Center, homelessness assistance system, and other partners can result in individuals and agencies taking a greater responsibility for their roles in the initiative. By creating a real-time database for HUD-VASH implementation shared by the local VA Medical Center, public housing authority, and homelessness system, Washington, DC was able to dramatically increase transparency in the HUD-VASH process. The database allowed all users to identify the bottlenecks in the system and troubleshoot accordingly. This resulted in improved efficiency and coordination in the system and ensured that each individual in all three systems involved in implementing HUD-VASH took responsibility for his/her tasks.

Another, even simpler way to increase coordination is to exchange client information between the two systems, whether done through a database or not. Local VA Medical Centers have release forms available that veterans can sign that permit the Medical Center to share information about its clients with the local homelessness assistance system. The homelessness assistance system can also share information with VA. This kind of information-sharing allows both systems to identify a veteran experiencing or at risk of homelessness and work immediately to identify the best solution for that individual.

Help VA staff whenever possible through sharing resources and knowledge.

While there are currently several VA programs to address a range of needs among homeless veterans, there are ways in which the homelessness assistance system can help fill in the gaps.

For example, many local VAs have trouble placing clients into HUD-VASH units because the programs cannot fund rental applications, security deposits, and other basic fees. Minneapolis, MN has had great success in strengthening its relationship with its local VA through connecting VA staff with homelessness assistance providers in the community who can provide flexible funds to cover some of these costs. As a result, the HUD-VASH placement process has been simplified and streamlined, and there is a stronger connection between the VA system and the homelessness assistance system.

For many local VA Medical Centers, programs like HUD-VASH and the Grant and Per Diem (GPD) program constitute the entire extent of their experience in addressing homelessness. As a result, the knowledge and experience of the community's broader homelessness assistance system can be valuable. Housing location and identification, for example, are not always strategies with which VA personnel have experience. Washington, DC, among other cities, has been able to help its local VA by conducting housing location and identification for HUD-VASH units. This streamlines the HUD-VASH process for clients, makes things simpler for VA staff, and creates a stronger connection between the two systems.

Build political will.

With strong political will to end homelessness among veterans comes increased resources and a commitment to solutions. All involved agencies and systems in communities with strong political will to address this problem face top-down pressure to produce results. Building political will may involve meeting with top elected officials, generating public pressure to end homelessness among veterans, or undertaking other activities to ensure that elected officials are putting pressure on local systems to prevent and end veteran homelessness. Washington, DC, for example, has found a great deal of success in bringing all partners to the table because of increased political will to around the issue. Communities that have or are able to create strong political will to solve the problem have reported increased success in partnering with their local VA Medical Center and making progress on the goal of ending homelessness among veterans.