CHALENG (Community Homelessness Assessment, Local Education and Networking Groups), Provider Needs Assessment

OMB No. 2900-xxxx Estimated Burden: 8 minutes per respondent Expiration Date: xx/xx/xxxx

The Paperwork Reduction Act of 1995: This information is collected in accordance with section 3507 of the Paperwork Reduction Act of 1995. Accordingly, we may not conduct or sponsor and you are not required to respond to, a collection of information unless it displays a valid OMB number. We anticipate that the time expended by all individuals who complete this survey will average 1,067 hours, or 8 minutes per respondent. This includes the time it will take to follow instructions, gather the necessary facts and respond to questions asked. The results of this needs assessment will lead to improvements in the quality of service delivery by helping to identify gaps in Homeless Program services, and designing new services to fill those gaps. Participation in this survey is voluntary and failure to respond will have no impact on benefits to which you may be entitled.

VA Form 10-APR 2014

2015 CHALENG

Responder: Identification

1. Which of the following best describes your reasons for taking the CHALENG survey?	Please only answer if you indicated that you work for a Federal agency other than the VA.					
 I work for the VA I work for another Federal Agency I work for a state or local government agency or a community-based homeless provider I am an interested member of the community 2. Did you complete a CHALENG survey last year? Yes No 3. In your opinion, is the agency you represent faith-based? Yes No 	1b. Which of the following best describes your organizational affiliation? O Department of Housing and Urban Development O Department of Labor O United States Interagency Council for Homelessness O Department of Health and Human Services O Department of Education O Department of Defense O Social Security Administration O Department of Justice O Department of Transportation					
Provider's Identification	 Department of the Interior Other Please only answer if you DO NOT work for the federal government.					
Please only answer if you indicated that you work for the VA.	1c. Which of the following best describes your organizational affiliation?					
1a. Which of the following best describes your organization and affiliation? VA Central Office Veterans Benefit Administration VA National Cemetery Administration VISN VA Medical Center VA Regional Office VA Outpatient Clinic Vet Center	 State Department of Veterans Affairs State or Local Health and Human Services Agency State or Local Mental Health Department State or Local Correctional Agency or Law Enforcement Organization Other State or Local Government Agency Veterans Services Organization Private Non-profit Community-based Organization Private For-profit Community-based Organization Other 					

Based on your experience serving homeless Veterans, please help us understand how well the needs of male and female Veterans are being met in the following areas:

Housing			(Treatment Services continued))	
	Never ← → Always Met Met N/A*	Never ← ▲ Always Met N/A*		Never Always	Never Always
1. Emergency/Immediate Shelter	Male O O O O O	Female O O O O O	4. Dental Care		
2. Transitional Living Facility an d Halfway House	$Male \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc$	Female OOOOO	5. Detoxification from Substance		
3. Long-Term Permanent Housing	Male 🔿 🔿 🔿 🔿	Female OOOOO	6. Substance Abuse Treatment	Male () () () () () () () () () () () () ()	
4. Registered Sex Offender Housing	Male 🔿 🔿 🔿 🔿	Female OOOOO	7. HIV/AIDS Testing and Treatment		
5. Affordable Housing	Male 🔿 🔿 🔿 🔿	Female OOOOO	8. Hepatitis C Testing and Treatment		
6. Emergency Housing for Families	Male () () () () ()	Female OOOOO	9. Eye Care and Glasses		
7. Landlord Relations and Tenancy	$^{\rm Male} \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc$	Female OOOOO	10. Personal Hygiene (Shower, Haircut, etc.)	Male () () () () ()	
8. Assisted Living for the Elderly		Female O O O O O	11. Medication Management	Male 0 0 0 0 0 0	
9. Goods (Furniture and Ho fiselwav es)		Female 0 0 0 0 0	12. Elder Healthcare and Resources		
Apartment			13. Health and Wellness*	Male 0 0 0 0 0 0	
Treatment Servic	es		14. Treatment for Dual Diagnosis	Male 0 0 0 0 0 0	
1. Medical Services	Male () () () () ()	Female 0 0 0 0 0	15. Case Management	Male 0 0 0 0 0 0	Female $\bigcirc \bigcirc \bigcirc \bigcirc \bigcirc$
2. Services for Emotional	Male 🔿 🔿 🔿 🔿	Female OOOOO	16. Parent Education	Male 0 0 0 0 0 0	
orPsychiatric Problems			17. Military Sexual Trauma	Male 0 0 0 0 0 0	
3. TB Testing and Treatment	Male 00000	Female 🔿 🔿 🔿 🔿 🔿			
* N/A: non-applicable			*Health and Wellness: an overall approac	h to health and well being that	emphasizes preventing illness

*Health and Wellness: an overall approach to health and well being that emphasizes preventing illness and prolonging life through diet, exercise, exercise, and self care

Income/Benefits Services:

Legal Assistance:

	Never Always Met N/A	Never Met ► Always Met N/A			Never ← Met	→ ^{Aln}	let N/A	Na N	iver	+ Always Met NIA
1. VA Disability/Pension	$^{\rm Male}~\bigcirc~\bigcirc~\bigcirc~\bigcirc~\bigcirc~\bigcirc~\bigcirc~\bigcirc~\bigcirc~\bigcirc~\bigcirc~\bigcirc~\bigcirc~\bigcirc~\bigcirc~\bigcirc~\bigcirc~\bigcirc~\bigcirc$	Female $\bigcirc \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc$	1. Legal Assistance to Help Restore a Driver's License	Male	0 0	00	00	Female	000	000
2. Welfare Payments	Male $\bigcirc \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc$	Female $\bigcirc \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc$	2. Financial Guardianship	Male	00	000	00	Female	000	000
3. Supplemental Security Income (SSI) and Social Security Disability (SSD)	Male () () () () ()	Female () () () () ()	3. Heip Getting identification and Legal Documents	Male	00	000	00	Female	000	000
4. Money Managing		Female () () () () ()	4. Re-Entry Services for Incarcerated Veterans	Male	00	00	00	Female	000	000
5. Food		Female OOOOO			~ ~					
6. Clothing	${}^{\rm Male} \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc$	Female O O O O O	5. Legal Assistance for Child Support Issues	Male	00	000	00	Female	000	000
7. Credit Counseling	${}^{\rm Male} \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc$	Female OOOOO	6. Legal Assistance for Outstanding Warrants and Fines	Male	00	000	00	Female	000	000
8. Family Reconciliation Assistance	$^{\rm Male} \bigcirc \bigcirc$	Female $\bigcirc \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc$	7. Legal Assistance to Prevent Eviction and Foreclosure	Male	00	000	00	Female	000	000
9. Social Networking		Female $\bigcirc \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc$								
10. Move- In Assistance	Male $\bigcirc \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc$	Female $\bigcirc \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc$	Education/Job Se	rvi	ces	:				
11. Utility Assistance		${}^{\text{Female}} \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc$	1. Education	Male	00	000	00	Female	000	000
12. Discharge Upgrade	Male $\bigcirc \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc$	Female O O O O O	2. Job Training	Male	00	000	00	Female	000	000
13. Family and Marital Counseling	Male () () () () ()	Female () () () () ()	3. Finding a Job or Getting Employment	Male	00	000	00	Female	000	000
14. Transportation*		Female O O O O O	4. Life Skills Training*	Male	00	00	00	Female	000	000
15. Child Care		Female O O O O O	5. Vocational Rehabilitation**	Male	00	00	00	Female	000	000
16. Basic Services (Phone, Voicemail, Address)		Female () () () () ()	*Life skills training: learning to cope with in communication, literacy, decision-makin management, and planning							
17. Financial Assistance to Prevent Eviction or Foreclosure		Female 00000	** Vocational Rehabilitation: a process that enables people with functional, psychological, cognitive, or emotional impair developmental conditions to overcome barriers to accessing, maintaining,							
*Transportation: includes transportation for disabled Veterans and Veterans with dependent children			Peturning to employment							

Community Partnerships:

	Never - Always NXA.	Mever + Always Met N/A	Based on your experience serving homeless Veterans, please help us understand how well the needs of female Veterans are being met in the following areas:
1. Drop-In Center and Day Program	Male () () () () ()	Female 0 0 0 0 0	Nerver Adveys NAA
2. Spiritual	$Male \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc$	Female OOOOO	
3. Prevention*	$Male \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc$	Female OOOOO	O O O 3. Breastfeeding Information And Supplies O O O 4. Women's Specific Healthcare Provider Availability
*Prevention: services to stop Veterans awey/shousing loss for households facin jadispiaad prison			 O O O O O S. Domestic Violence Support Services
	Not Very Accessible Accessible	Not Very Accessible Accessible N/A	
4. In general how accessible do you feel VA services are to homeless Veterans in your community?		Female () () () () ()	
	Not Mostly N/A	Not Mostly N/A	
5. How able is the VA to coordinate services for homeless Veterans?		Female () () () () ()	
	Not Aware Mostlly N/A	Not Mostily N/A Aware Aware	
6. How aware of Veterans' needs and resources are community homeless agencies?	Male 🔿 🔿 🔿 🔿	Female () () () () ()	

Women's Issues:

Thank you for your participation in the CHALENG survey! If you would like more information or if you have any concerns, please contact the Call Center for Homeless Veterans: