for double-sided copying.

OMB No. 1290-xxxx

Exp. Date xx/xx/2021

Key informant INTERVIEW Guide

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| --- | --- | --- | --- |
| Respondents | | | |
| Respondent Type | Agency Name | Respondent Role | What They Might Know |
| HVRP Grantee |  | Grantee/Program Supervisor  Direct service staff | Outreach and referral  Screening and eligibility  Program model  Partnership network  Employment services landscape  Use module A |
| HVRP Direct Service Partners (eg. shelters, day centers, food programs. transitional housing, SSVF, HUD-VASH) |  | Direct service staff | Referral of HVRP households  Program model  Partnership network  Employment services landscape  Use module B |
| Continuum of Care |  | Policy/Community  -level planners | Referral of HVRP households  How HVRP fits in community response Program activities SSVF and HUD-VASH  Use module B |
| VA Medical Center or health care facility |  | Policy/Community Level  Practice/Direct Service | Referral of HVRP households Program activities Provision of other services from VA to HVRP households, SSVF and HUD-VASH  Use module B |
| Workforce Development Board, or AJC |  | Practice/Direct Service | Referral of homeless veterans  Provision of other DOL services to HVRP households  Use module B |
| Other (fill in) |  |  |  |

INTERVIEW GOALS

* Understand how the grantee conducts outreach and how the participant enters the program.
* Understand what population the site is targeting HVRP to and what the program eligibility requirements are beyond DOL guidelines.
* Understand the screening and assessment process.
* Understand the key ingredients of the program model.
* Understand the partnership network and strength.
* Understand the local landscape for services to end homelessness.
* Understand the local landscape for employment services, absent HVRP.
* Understand how well the implementation is going in the community.
* Understand the effects of COVID-19 on programs and veterans.

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INTERVIEW INTRODUCTION

Hello. My name is \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, and I am part of a team of researchers from the Urban Institute/Mathematica/SPR that is working on a study for the U.S. Department of Labor of the Homeless Veterans’ Reintegration Program (HVRP). Thank you for agreeing to meet today. I’m going to start the interview by providing an overview of the study then I will review our informed consent procedures:

* The study focuses on how communities across the country have implemented HVRP and the impact of the program on veterans’ employment outcomes.
* We have questions about the program enrollment, services, and partnerships.
* The information collected during the study will be used to help inform the development of future employment programs.
* This is your chance to share your experiences and opinions with DOL.
* Your participation in this interview is voluntary and you can choose not to answer any questions.
* All the information you provide will be private, and we will not share it with anyone except for research staff working on the study.
* The information collected will be included in a report and other task documentation for DOL. We will not quote you by name in project memos, case studies, or reports. Should DOL request to see any of our notes from our interviews, we would remove all personally identifying information to prevent those outside the research team from knowing who provided the information.
* Everyone working on the research team has signed a nondisclosure agreement form agreeing to these terms.
* Do you have any questions?
* If you agree, we would like to record this interview. The recording will only be used to help in the notetaking process and won’t be shared with anybody outside the research team. Do I have permission to record our conversation?

Okay, let’s get started.

A. Grantee module

A1. Agency and community description

First, I’d like to ask some general questions about your organization and community.

Agency

* What type of agency is <grantee organization>?
* Prompts: Nonprofit? Direct service? Veteran service specific?
* What types of services does your agency provide?
* What populations does it tend to serve?
* Please describe the role of HVRP in your agency.
* Prompt: Are HVRP and its programming considered central service elements? Or, complementary to additional services?
* How does HVRP programming connect to other types of programming your agency offers?
* How long has your agency been an HVRP grantee?
* Did your agency provide these types of services to veterans prior to becoming an HVRP grantee? If yes, for how long?
* [HVRP grantee]: Does the grantee agency have other HVRP grants? If so, please describe the location/type of the other grants.
* What is the relationship across the grants?
* Does your agency provide services to veterans who are not a part of the HVRP program? Is so, what services are available to them?

Community

* What geographic area does your agency serve?
* How would you describe the area?
* Prompt: What about its demographics?
* Prompt: What about its economy and labor market? Its housing market?
* Can you tell me broadly about your service community?
* Are there other agencies providing similar services for veterans? For homeless veterans?
* In what ways is your organization unique in your community?
* What community planning groups are active? In which does your agency participate?
* In what ways do organizations coordinate to provide services to veterans? To homeless veterans?
* Does your community have a plan to end homelessness?
* Are veterans a target population in that plan? If yes, what are the specific employment or strategies for veterans?
* What role has/does your agency play in the local plan to end homelessness or Continuum of Care (CoC) planning and governance committees?
* Does your CoC or did your CoC have a housing first policy? Please explain?
* What progress has been made toward ending veteran homelessness relative to the 10-year plan?
* Does your community create progress reports on progress toward 10-year plan goals? [Request copy]
* Does your agency utilize any CoC processes or resources to supplement the work of HVRP?

Effects of COVID-19

* In what ways has COVID-19 affected the operations of your organization’s HVRP program?
* Were resources shifted from HVRP to different activities or vice versa?
* Did the agency change the target population for HVRP in any way? How?
* Did the agency struggle with staffing to meet expanded demand or need to shift staff dedicated to HVRP to serve other purposes?

A2. HVRP Grant Management, Structure, and Staffing

Next, I’d like to talk about management and staffing.

Management and funding

* How is HVRP administered within your program?
* Is there a full- or part-time director of HVRP?
* Is that director responsible for overseeing other programming in the agency?
* Who is involved in decision making for the HVRP grant?
* What is the role of the agency leadership?
* What is the role of the HVRP team?
* What percent of the agency’s overall budget is the HVRP grant?
* Have you sought any supplemental funding to support HVRP activities?
* If yes, from where, what amounts in comparison to HVRP resources?
* What activities do these supplemental resources support?
* Are any of these activities available to non-HVRP veterans?
* Did COVID-19 affect your plans to seek supplemental funding?
* How does your program work with regional DOL-VETS?
* What are the primary points on which HVRP staff and regional DOL-VETS staff coordinate and work on collaboratively?
* Are there regular meetings, committees, or working groups for the purposes of coordination?
* What have been the successes of this coordination work? Challenges?
  + In what ways, if any, has COVID-19 affected the management of your HVRP grant?

Staffing

* How many staff are dedicated to HVRP programming?
* What are the staff roles (supervisory, intake, case management)? [Request copies of job descriptions to understand expectations for key roles]
* How many staff fill each of these positions/roles?
* How many of these staff are veterans? Do any staff providing HVRP services provide other types of services in your agency, or work for multiple programs? What are their roles?
* Did this change when your organization responded to COVID-19?
* What are considered to be the core competencies required for staff?
* Prompt: For participant-facing staff?
* Prompt: For supervisory staff?
* What types of onboarding and ongoing trainings do HVRP staff receive? Which are required?
* Prompt: Service delivery models? Motivational interviewing? Trauma-informed care? Stages of change?
* Prompt: Work readiness assessments? Case management? Employer outreach?
* Did the make-up of your staff and how you train them change as a result of COVID-19? If so, please describe.

Technical assistance

* Has your agency accessed or utilized any external technical assistance or training to improve HVRP program performance?
* Have you or your team accessed any training for staff from either the NVTAC or NVTI?
* Have you made use of the www.nvtac.org website to support your HVRP work?
* How were these resources helpful? How were they not helpful?
* What technical assistance materials or resources you have found most helpful?
* Did you request and receive technical assistance as it related to the pandemic, and the need to provide services remotely? If so, please describe.
* Is there any technical assistance or training that your staff need that you have been unable to access?

Performance monitoring

* How does your agency monitor HVRP performance?
* What employment outcomes are you most interested in?
* What other types of outcomes?
* What other ways is performance measured?
* Prompt: Participant feedback? Surveys? Focus groups?
* Prompt: Participant/consumer advisory board?
* Prompt: Partner feedback? Referral agency feedback?
* How does your agency use performance information to evaluate and improve programming?
* How is performance information used to evaluate staff?
* What is the process for using performance information to modify programming?

A3. Outreach, referrals, and target populations

Next I’d like to discuss outreach and referral processes.

* How do prospective HVRP participants hear about or first approach the program?
* Do HVRP staff conduct outreach to recruit participants into HVRP?
* Are there agencies in the community or as part of the grantee organization that refer eligible participants into the program? If so, please tell us about them.
* Are there other pathways to the program?
* What have been the most effective ways to connect to potentially eligible homeless veterans?

Outreach

* Do you have an outreach coordinator or specific outreach staff?
* Do these staff only work for HVRP or do they have other agency responsibilities?
* What are the qualifications or characteristics that you look for when hiring outreach staff?
* What types of outreach activities do staff conduct?
* Prompt: Attend community events and stand downs, flyers and marketing in agencies and shelters, present to other agency staff, visit AJCs, etc.?
* What are the responsibilities of the outreach workers?
* What types of information do they provide about HVRP, and what type of information do they collect from prospective veterans?
* Do outreach workers pre-screen veterans? If so, when and where does this occur? What do they screen on?
* Are they responsible for getting the veterans to intake workers? If so, how?
* About how many veterans do you identify each month through outreach activities?
* Are there specific types of homeless veterans that you target for outreach, (e.g. chronically homeless veterans, formerly incarcerated, female veterans, veterans with families)?
* Have outreach strategies and experiences changed over time? If yes, how? Why?
* What changes, if any, were made in response to COVID-19?
* How, if at all, has the number of veterans identified for HVRP services changed as a result of COVID-19?
* What would you describe as the challenges the program has faced in conducting outreach to prospective participants? What challenges are due to COVID-19? Please explain?
* What strategies have you used to successfully overcome challenges?
* Do you think most veterans in the community find out about HVRP? Why or why not?

Referrals

* Does your agency receive referrals for any services or programming through the community’ coordinated entry process for homelessness? Do you receive referrals for HVRP programming through a coordinated entry?
* What are the agencies (or programs within your own organization) that refer veterans for HVRP?
* From which do you receive the most referrals? Why?
* How, if at all, has this changed due to your community’s COVID-19 response?
* Do you have MOUs with those agencies? May I have a copy?
* What are the steps in the referral process?
* What information do you receive from the agency?
* What is the veteran told about HVRP?
* Besides any prescreening done by the outreach worker, what other prescreening is done by the agency?
* At what point does the HVRP staff meet with the referred veteran?
* What kind of referral? For example, is it a “cold” referral—that is, the veteran is given information to reach out? Or is it “warm” –that is, the referring agency introduces the veteran to HVRP?
* Are there forms staff use during this process? [Request copy]
* About how many veterans are referred from partner organizations each month?
* How, if at all, did this change as a result of COVID-19?
* What aspects of the referral process has worked well? What challenges have you faced?
* Have referral pathways or processes changed over time? If yes, how? Why?
* Were any changes in these processes the result of COVID-19? Please explain.

A4. Program eligibility and enrollment

Let’s talk about eligibility and enrollment.

* What are the eligibility criteria for your HVRP program—beyond the federal criteria (homeless and other than dishonorable discharge)?
* Have you made any changes to these criteria as a result of COVID-19? If so, please explain.
* Are preferences given to veterans who meet some additional criteria?
* Prompts: Veterans who are also in other programming within your agency? Veterans of a particular discharge type? Veterans of a particular age or disability status?
* How were these additional criteria determined—by the program? In conjunction with other community agencies that offer complementary programming?
* What HVRP applicant characteristics suggest to you that the veteran would not be a good candidate for your program?
* What is the process that is followed to determine whether a veteran is eligible for HVRP?
* Which HVRP staff screen for eligibility criteria?
* At what point in the staff’s contact with the prospective participant does this occur?
* Does the program use/provide an intake packet of materials? [request copy]
* Do HVRP staff use assessment/eligibility forms during the eligibility/enrollment process? If so, can we have a copy?
* What are the responsibilities of staff responsible for enrollment?
* What types of information do they provide about HVRP, and what type of information do they collect from prospective veterans?
* How do staff determine the veteran’s suitability for HVRP?
* What in particular do you look for in determining suitability?
* In what ways do you determine the veteran’s job readiness?
* Do enrolling staff use any assessment forms? Are these developed internally or from another source? [request copy]
* Have the processes for eligibility determination and enrollment changed as a result of COVID-19? If so, please explain.
* How do you administer assessments in light of social distance requirements?
* Do you conduct these activities in different places as a result of social distance requirements?
* What have been the effects of social distancing on your ability conduct proper intake and assessment activities?
* What are the primary reasons that prospective participants are not eligible for HVRP?
* Prompt: Federal requirements: definition of homelessness? Veteran’s discharge status?
* Prompt: Do not meet additional criteria or preferences?
* Prompt: HVRP suitability or job readiness?
* Are veterans ever turned away or put on a waiting list because there are not enough HVRP slots available? Please describe how common this was before COVID-19.
* Did that change following the dramatic increase in unemployment associated with COVID-19?
* If you place veterans on a waiting list: Do you currently have a waiting list? How many veterans are on it?
* If waiting list/turn away: What information is provided to the veterans about other resources or next steps?
* How often does the program contact or engage with veterans on a waiting list?
* What are the next steps for those turned away/not eligible/put on a waiting list?
* Are veterans referred to other similar services in the community or provided referrals to other types of services? Which programs?
* Can the veterans re-apply for the program? Please describe how common this is.
* Does it tend to be veterans with particular needs? If so, what are they?
* Is there a timeframe given for when they can reapply? If so, what is it?
* Did your organization see more veterans re-applying for the program due to COVID-19-related employment challenges?
* Has the program identified a sufficient number of eligible veterans for the HVRP program?
* If a challenge identifying veterans, what have been the challenges? What do you attribute the problem to?
* If not a challenge, to what do you attribute your ability to identify the right number of veterans?
* What would you describe as successes you have experienced in the enrollment processes? Challenges?
* What leads some homeless veterans to enroll in HVRP and others to only seek or receive services at the AJC?
* Are there differences between HVRP veterans and non-HVRP homeless veterans? If so, please describe.
* Has the process—from outreach to enrollment-- changed over time? Why?
* How has the make-up of participants changed over time? Why?
* How has ability to keep participants enrolled across program years changed your enrollment process?

A5. Program Services

Let’s talk about program services.

* What would you say is your HVRP program’s overall services approach? What is the program’s theory of change or philosophy?
* What are the key components of your HVRP program? And how do you define each?
* Prompt: Job search assistance?
* Prompt: Job placement services?
* Prompt: Job retention services?
* Prompt: Counseling and vocational guidance?
* Prompt: Classroom training?
* Prompt: Tools/fees/specified work clothing
* For each of these components, how and where are the service provided?
* Who provides—HVRP program staff, grantee staff, partner staff?
* How many hours per week do staff spend conducting each of the different components?
* What services are provided at the grantee/other entity’s offices? Are the locations convenient to the participants?
* Which of these services are funded by HVRP, and which are not? If not, how else are these services provided?
* Prompt: Other federal grants, state/local funding, grant funding, in-kind, other?
* How has the delivery of services been affected by COVID-19 with stay-at-home orders and social distancing requirements?
* During the height of the pandemic, was your program able to provide remote services after these requirements first went into effect? Please describe.
* If so, is your program continuing to provide any services remotely? If so, which ones? Please describe.
* What supports are provided to enable participants’ access to remote services?
* What are the challenges to providing remote services for the program?

Participant flow

* Do all participants generally receive the same set of employment-related services? If not, why not?
* Which services would all participants receive?
* Which services are provided depending on participants’ characteristics/needs or other factors?
* What is the sequence and duration of services?
* Do veterans have to receive services in a particular order or are certain services considered pre-requisites for others? Please describe.
* Are there time limits for how long a veteran can receive a particular service component?
* Are any of these services available to a veteran after they exit the program?
* Are there other follow-up/after care services available for veterans?
* Are there other services that you think of as being provided through HVRP?
* If so, what are they? What agency/partner is the provider of these services?
* Have there been any changes to the types of services or duration of services offered over time? If yes, what types of changes? And, why?
* Please explain the role of COVID-19 in any of these changes.
* What are the criteria for which a participant can be dismissed or removed from the program?
* What is the process by which a participant can be removed? Please describe how common this is.
* Are they given several chances to comply?
* Does the participant have any appeal opportunity or recourse?
* What are the criteria in which a veteran who exited the program (either by personal choice or removed for above reasons) can be readmitted to the program? Please describe how common this is and if it increased as a result of COVID-19.
* Are there any requirements or conditions put in place for readmittance? Did this changes as a result of COVID-19?
* What is the process or procedure for being readmitted to the program?

Case management

* How would you describe your program’s approach to case management?
* How many HVRP caseworkers are there?
* What is the maximum client capacity for a case manager?
* What is the current case manager to client ratio?
* How often do case managers meet with participants?
* What is required, and what is usual practice?
* How do they meet (phone, in person at HVRP office, in person elsewhere)?
* Are veterans engaged in these meetings, requesting/scheduling meetings?
* What are the challenges to engaging clients?
* What strategies have been used to overcome these challenges?
* Have engagement strategies changed over time? If yes, why? And how?
* Do case managers create Employment Development Plans (EDP) with clients?
* If so, please describe. What does it include? Request a copy.
* How often is it reviewed and/or updated?
* How has case management changed as a result of COVID-19?
* Are there different expectations for frequency of meetings?
* What new challenges in engagement have emerged as a result of providing virtual case management ?

Service provision

* When it comes to helping veterans find employment, what is the most important service your HVRP program provides? What has been the least effective?
* What would you describe as successes you have experienced in providing these services? What have been the challenges?
* Prompt: Successes/challenges related to participants: overcoming challenges, keeping engaged, finding the right mix of services to meet needs
* Prompt: Successes/challenges related to services: availability, accessibility, etc.
* How has the program changed over time? Why?
* Prompt: provision of services – philosophy, sequence of services, focus of services
* Prompt: make-up of participants changed over time?
* Have there been other program changes as a result of COVID-19 that we have not discussed?

A6. Employment strategies and partnerships

The next set of questions focus on employment strategies and partnerships with employers and workforce development.

Employer outreach

* To what extent does your agency work with employers as part of your HVRP program? What is the nature of this work?
* How would you characterize the core components of your agency’s work with employers?
* Are there staff who conduct employer outreach?
* If so, which staff? Are they dedicated to outreach, or do they have other responsibilities?
* What is their background? What are the core competencies for these staff?
* How do staff determine employer needs?
* What types of information from employers are collected and used to be able to meet the employer needs?
* What are the key elements of employer outreach?
* What is the “pitch” to employers?
* What tools do outreach staff use with employers? (Examples: brochures, references from other employers, sample job seeker resumes, handouts)
* Are employers offered any kinds of benefits to participating in the program?
* In what ways, if any, is employer outreach and relationship development coordinated with other agency programs or staff, or with other partners?
* Prompt: Do staff implementing other programs at your agency build or use employer relationships?
* Prompt: Is there strategic sharing of employer resources between agency or partner programs?
* Prompt: Do you share with other organizations and partners information about employers interested in hiring veterans?
* Prompt: Do you share information about job openings?
* What are the challenges in engaging employers? What have been the successes?
* Have employer outreach strategies changed over time? If yes, how? Why?
* How, if at all, has your work with employers changed as a result of COVID-19?
  + How, if at all, has the type of employers that your agency works with shifted as a result of the changes in the economy due to COVID-19?
  + How have employer outreach activities and practices changed as a result of COVID-19?
  + Are there new challenges in engaging employers as a result of COVID-19?

Job development

* How do staff develop job positions for HVRP participants in general and for specific participants?
* Are the approaches or processes different? How?
* How do staff manage employer relationships to support continued job placements?
* What job development activities are undertaken to pair participants with positions?
* What assessments of HVRP participants are conducted before making the job referral/placement?
* What types of job placements do participants tend to receive? With what kind of employers?
* Prompt: To what extent do participants work in the gig economy? Self-employment?
* Prompt: Do job placements tend to be with smaller local businesses or larger regional or national businesses?
* What are the challenges to pairing participants with positions with employers? What have been the successes?
* Have practices and opportunities for pairing participants with potential job openings changed over time? If yes, how? Why?
* How, if at all, has COVID-19 affected these practices? Affected the types of opportunities provided to participants?

Public workforce system

* Does your agency help HVRP participants access services in the public workforce system through the local AJC? If so, what type of help/support is provided?
* Prompt: Do HVRP staff accompany veterans to the AJC?
* Prompt: Do they direct them there? If so, do they follow up to make sure they enrolled?
* What, if any, formal processes are there for enrolling HVRP participants in AJC services?
* Did these processes change as a result of COVID-19? If so, please explain.
* What have been the challenges in enrolling HVRP participants at the AJC? What has worked well?
* In what ways, if any, did COVID-19 exacerbate these challenges, or change the nature of the challenges?
* In your experience, what portion of HVRP participants participate in activities at or available through the AJC? To what do your attribute this high/low proportion of participation?
* How, if at all, did this shift as a result of COVID-19?
* What AJC services do HVRP participants typically receive?
* Prompt: WIOA training, Employment service workshops, DVOP case management
* Have any of your participants received job training paid for by the AJC? What kind of training?
* How, if at all, did the types of services participants receive change as a result of COVID-19?
* How does your agency coordinate your HVRP participants’ services with the different AJC programs?
* Do you know what services clients are receiving? How?
* Do you talk regularly with case workers from the different programs at the AJC? Which ones and in what ways?

A7. Program Linkages

You’ve told us about some of the many services and partners you work with across your programs. We’re interested in learning more about how these relate to HVRP and help support veterans.

Internal to grantee organization

* How are other programs and services provided by your organization used to support HVRP participants?
* Which programs are leveraged?
* Is enrollment in these other programs required for HVRP participants?
* Are HVRP participants encouraged to enroll in other types of programming offered by your agency?
* Did the availability of the services and resources provided by other programs increase or decrease as a result of COVID-19? Did access to them become more challenging?
* What is the process for referring participants to these other programs?
* What is the process for co-enrolling them in each of the other programs?
* What share of HVRP enrollees are enrolled in these other programs?
* Are participants with certain characteristics more likely to co-enroll in other programs offered by your agency?

External to grantee organization

* Outside of your grantee organization, which agencies are the HVRP program’s primary partners?
* Prompt for: VA, veteran service organization, AJC, SSVF, CoC, other community organization
* To what extent are participants referred to the programs of each of these primary partners?
* How are referrals made, and how does it vary by partner? For example, is it a “cold” referral—that is, the veteran is given information to reach out? Or is it “warm” –that is, the referring agency introduces the veteran to HVRP?
* How, if at all, are referrals tracked?
* To what extent are participants co-enrolled in the programs of these primary partners?
* Prompt: What share of HVRP enrollees are enrolled in each of the programs?
* Are there types of participants who are more likely to co-enroll in partner agency programming? If so, what are their characteristics?
* What is the process for co-enrolling in each of the programs?
* How are referrals to partner agencies and enrollment with partner agencies monitored and managed?
* Generally, how do participants benefit from co-enrollment in other programming types—either at your agency or with other agencies?
* How, if at all, did co-enrollment change due to COVID-19? For example, did participants’ greater needs result in more co-enrollment, or were there more challenges to co-enrolling?
* What role does each partner play in your HVRP program?
* In what ways do they support your program: i.e., leverage resources, system of support, etc.?
* What role do they play for participants: referral, assessment, service provision, funding, housing?
* How, if at all, have their roles changed as a result of COVID-19?
  + Prompt: Do some partners have other priorities as a result of COVID-19 that has affected their partnership with HVRP?
* If there are other HVRP grantees nearby, what is your relationship with them?
* To what extent are your target populations and service models the same or different?
* How, if at all, do you coordinate outreach and services?
* In what ways, does your HVRP program support participants’ housing needs?
* Do they receive housing referrals as part of the program? If so, what types of housing (e.g., HUD-VASH, RRH, GPD)?
* What is your relationship with these different programs? Which, if any, are provided by your agency?
* Do all HVRP participants receive this assistance with their housing needs?
* In what ways has COVID-19 change how the HVRP program is able to help participants with their housing needs?
* To what extent do you coordinate with these housing programs to provide services to the veterans?
* Prompt: Do you conduct joint case conferences; share a common Service Plan; conduct joint staff training?
* What is the frequency of contact between HVRP and the staff of different partners, such as training providers and housing staff?
* How do staff communicate? Is communication mostly informal, or are there scheduled meetings or case conferences? Please describe.
* How, if at all, did COVID-19 change the nature of communication between partners?
* What is the purpose of the communications? Are staff discussing specific customers, processes, or other topics?

A8. Other services in the community

* What other employment services are available in the community for homeless veterans?
* How are these different from HVRP?
* What services would a homeless veteran likely access in the absence of HVRP?
* Who provides them? Are the services provided by HVRP partners?
* What other non-employment services are available in the community for homeless veterans (e.g. housing services, mental health services, substance use services)?
* Does your program help participants apply for Pandemic Unemployment Benefits?
* What are the service gaps in the community? Have those changed as a result of COVID-19?
* In what ways is the community working to address these gaps?
* What do you think are the most important (non-employment) services for helping homeless veterans find and maintain employment?

A9. Data systems

* What types of client data do you collect beyond what is required for technical performance reporting (TPRs)?
* What types of information do you share with partner agencies?
* Are there some partners you share more information with than others? Which ones and why?
* Has this changed over time? If yes, why?
* How, if at all, does the grantee use Homeless Management Information System (HMIS)? Why or why not?
* What are the challenges with using HMIS?
* Prompt: Is there a usage fee? Other requirements?
* What successes have you had in sharing data for the purposes of coordinating services for veterans?
* What are the challenges to sharing data?

A10. Wrap up

* Overall, what do you like about HVRP?
* What do you see as your primary successes as a grantee?
* What do you see as the primary challenges to implementing HVRP?
* What would you change about HVRP if you could?
* Overall, how did COVID-19 affect the HVRP program? What did you learn about providing services to vulnerable populations during the pandemic? Is there anything about your experience with HVRP that you think I should know that we have not touched on yet today?

B. PARTNER/SERVICE PROVIDER MODULE

**B1. Agency and community description**

*First, I’d like to ask some general questions about your organization and community.*

Agency

* What type of agency is <grantee organization>?
* Prompts: Nonprofit? Direct service? Veteran service specific?
* What types of services does your agency provide?
* What populations does it tend to serve?
* Please describe your role in HVRP.

Community

* What geographic area does your agency serve?
* How would you describe the area?
* Prompt: What about its demographics?
* Prompt: What about its economy and labor market?
* Can you tell me broadly about your service community?
* Prompt: Are there other agencies providing similar services for veterans? For homeless veterans?
* Prompt: In what ways is your organization unique in your community?
* Prompt: What community planning groups are active? In which does your agency participate?
* Prompt: In what ways do organizations coordinate to provide services to veterans? To homeless veterans?
* Does your community have a plan to end homelessness?
* Are veterans a target population in that plan? If yes, what are the specific employment or strategies for veterans?
* What role has/does your agency play in the local plan to end homelessness or Continuum of Care (CoC) planning and governance committees?
* What progress has been made toward ending veteran homelessness relative to the 10-year plan?
* Does your community create progress reports on progress toward 10-year plan goals? [Request copy]
* Does your CoC or did your CoC have a housing first policy? Please explain.
* How has your community’s service providers shifted priorities or focus during COVID-19? What have been primary response activities? Are there other activities that have become less of a priority?

B2. Role in HVRP referrals

* Do you refer veterans to the HVRP program? If so, please describe the process.
* Prompt: Do you inform HVRP of the referral?
* Prompt: Do you receive information about whether or not the individual enrolled?
* How do you determine which individuals to refer to HVRP?
* Do you administer [VA] screening questions for housing instability and homelessness?
* If yes, how do you use that information to refer veterans for services?
* Does a positive answer for housing instability or homelessness prompt a referral for HVRP?
* What type of information does HVRP provide to you to help you refer likely eligible veterans?
* Do you receive referrals from HVRP? If so, please describe the process.
* Prompt: Does HVRP inform you of the referral or rely on the participant?
* Prompt: Do they receive information about whether or not the individual enrolled?
* What type of information do you provide HVRP to help refer the appropriate clients to you?
* How would you assess the referral process? Is it efficient? How could it be changed?
* How have any of your referral policies or processes changed as a result of COVID-19?

B3. Services provided

* Do you provide direct services to veterans or homeless veterans? If so, what services do you provide?
* Prompt: Employment-related assistance? Housing? Mental health? Substance use? Physical health? Other supportive services?
* Has there been a shift in the types of services that veterans are requesting as a result of COVID-19?
* In what was have you shifted service delivery mechanisms? Example: telephone or video conferencing service delivery.
* Are the services you provide to non-HVRP participants the same that you provide to HVRP participants? Describe any differences.
* For the services you provide to HVRP participants, how are they funded?
* Prompt: If not provided through HVRP, how are they funded?
* What is the service structure for the services you provide to homeless veterans and to HVRP participants?
* Prompt: Duration of services?
* Prompt: Sequence of services?
* Prompt: What constitutes completion?
* Have you made any changes to the service structure—for example, extending the duration of services—as a result of COVID-19?
* How do you coordinate the provision of these services with the HVRP grantee?
* Prompt: How do you communicate participants’ receipt of /progress in your services?
* For veterans with ongoing medical (physical, mental, substance use) or other needs, how do you, if at all, coordinate care/services?
* Prompt: Case conferencing?
* Prompt: Data sharing?

For AJC partners:

* What process, if any, has been established between the AJC and the HVRP grantee to register HVRP participants at the AJC? Please describe.
* Prompt: Does an HVRP staff member bring the participants to the AJC? If so, what information is shared?
* Prompt: Does the HVRP participant visit the AJC on his/her own? If so, does the participant come with a referral form, or any type of documentation from the HVRP program? Is the HVRP program notified that the participant has registered? How?
* How, if at all, have these processes changed as a result of COVID-19?
* Similarly, does the AJC have a process or guidelines for referring veterans to HVRP for additional services? If so, please describe.
* Prompt: Do veterans complete a form that identifies them as potentially eligible for HVRP?
* Prompt: Are there particular characteristics that would result in a veteran’s referral? If yes, please describe.
* Prompt: Is the potentially eligible veteran provided information about HVRP? If so, what information is provided?
* To what extent do the staff of the AJC and HVRP grantee coordinate and share information about the veterans that they are both serving?
* Is information shared about the services they are receiving? Any challenges the veterans are encountering?
* Is this a formal or informal process? Please describe.
* How, if at all, have these processes changed as a result of COVID-19?
* How does the AJC identify and confirm a veteran’s status?
* What paperwork is required?
* When? At what point in the intake process, service flow?
* Is paperwork required for some services but not others? Please explain.
* Similarly, does the AJC collect information on customers’ housing status? What paperwork would be required?
* Please describe the service flow at the AJC once a veteran is identified.
* Prompt: To whom are they referred for services? When?
* Prompt: Are assessments conducted? When?
* How, if at all, does that flow differ if the veteran is homeless? An HVRP participant?
* Turning to the services provided, what types of services do HVRP participants typically participate in at the AJC?
* Prompt: Case management? Job search? Training?
* How, if at all, has the services provided to HVRP participants changed as a result of COVID-19?
* How do these services complement the services provided by the HVRP grantee?
* In general, how do the services homeless veterans receive through the AJC compare to those received through HVRP? Are some services provided by one entity and not the other? Please describe.
* How, if at all, has this changed as a result of COVID-19?
* In addition to any coordination that occurs for veterans both are serving, what types of ongoing coordination occur between the HVRP grantee and the AJC?

For DVOP/LVERs:

* What types of services are provided to veterans served by DVOP and LVERs?
* Do you conduct assessments? Please describe.
* Are you referring the veterans to other services? Please describe.
* How has delivery of these assessments and services changed as a result of COVID-19?
* What does coordination between these programs and the HVRP grantee (and other providers of similar services) look like?
* To what extent do you refer veterans on your caseload to HVRP? And vice versa?
* To what extent does your caseload overlap with HVRP?
* For those veterans on both caseloads, do you coordinate the services you each provide? How?
* What are the characteristics of the veterans that the DVOP serves?
* What leads some homeless veterans to enroll in HVRP and others to only seek or receive services at the AJC?
* Are there differences between HVRP veterans and non-HVRP homeless veterans? If so, please describe.
* Did these trends change during the COVID-19 period?
* Are there any differences in services available or provided to HVRP participants relative to other, non-HVRP participants?
* Please describe how the services are structured.
* Prompt: What are the skills/competencies of staff providing the services?
* Prompt: What are the case management ratios?
* Prompt: What is the duration of services?
* Prompt: What is the order of services?

For CoC PARTNERS:

* Do you or other CoC connected agencies refer veterans to the HVRP program? If yes, please describe the process.
* Prompt: Do you inform HVRP of the referral?
* Prompt: Do you receive information about whether or not the individual enrolled?
* Is referral to HVRP integrated into coordinated entry?
* How do you determine which individuals to refer to HVRP?
* What type of information does HVRP provide to you to help you refer likely eligible veterans?
* How would you assess the referral process? Is it efficient? How could it be changed?
* How, if at all, did the referral process change as a result of COVID-19?
* Are the services the same provided to non-HVRP veterans? Describe any differences.
* Is the HVRP an active participant in CoC planning processes?
* Prompt: Please describe the relationship between the HVRP agency and the CoC governing body.
* Prompt: Does the HVRP agency send representatives to CoC meetings and/or participate in CoC working groups?
* In what ways, if any, has the CoC’s interaction with the HPRP program changed as a result of COVID-19?

B4. Partnership with grantee

Please describe your partnership with the HVRP grantee.

* Do you have an MOU or some other formalized agreement with the HVRP grantee? What does it specify for each partner? Request a copy.
* Is your partnership specific to HVRP, or is it broader?
* When did your partnership begin, and how?
* Did the HVRP grantee reach out to your organization?
* To what extent are you involved in any planning around the HVRP grant? In what ways do you communicate with the grantee/program about services/partnerships?
* Do you share any data about participants? Please describe.
* Has your partnership with the grantee changed over time? If yes, how and why? Were any changes the result of COVID-19?
* How would you characterize the strength of your partnership with the HVRP grantee? In what ways could it be stronger?

**B5. Other services in the community**

* What other employment services are available in the community for homeless veterans?
* How are these different from HVRP?
* What services would a homeless veteran likely access in the absence of HVRP?
* Has the availability or accessibility of these services changed as a result of COVID-19?
* What other non-employment services are available in the community for homeless veterans (e.g. housing services, mental health services, substance use services)?
* What are the service gaps in the community?
* In what ways is the community working to address these gaps?
* What do you think are the most important (non-employment) services for helping homeless veterans find and maintain employment?

**B6. Data systems**

* What types of information do you share with the HVRP grantee? With other agencies?
* Are there some partners you share more information with than others? Which ones and why?
* Has this changed over time? If yes, why?
* What successes have you had in sharing data for the purposes of coordinating services for veterans?
* What are the challenges to sharing data?
* How widely is HMIS used across the community? What are the challenges to using HMIS?

**B7. Wrap up**

* Overall, what are your impressions of the HVRP program? What have been its successes? Challenges?
* What would you change about HVRP if you could?
* In general, what is your assessment of the community’s resources to help homeless veterans achieve sustainable employment? What would you change if you could?
* Overall, how has COVID-19 affected the community’s ability to provide services to homeless veterans?
* Is there anything about your experience with HVRP or serving homeless veterans that you think I should know that we have not touched on yet today?