FY 2005 CHALENG (Community Homelessness Assessment, Local Education and Networking Groups) Participant Survey

Shade Circles Like This--> ●

Not Like This--> ⊗ ✓

DO NOT FOLD, PHOTOCOPY OR FAX THIS FORM

For optimum accuracy, please print carefully and avoid contact with the edges of the box. The following will serve as an example: | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 |

Today's date: _____

Name: _____

Agency name: _____

Street address: _____

City: _____ State: _____ Zip: _____

Phone number: _____ Fax number: _____

Email: _____

1. Are you a homeless or formerly homeless veteran? (check only one if applicable)

○ Homeless Veteran ○ Formerly Homeless Veteran

2. Title Category/Your Program Function (please check one):

○ Executive/Top Level Manager (Executive Director, CEO, Commander)
○ Administrative/Mid-Level Manager (Program Coordinator, Program Supervisor)
○ Clinician (social worker, case manager, nurse, outreach worker, doctor, CSO, LVER, DVOP, VDOP)
○ Elected Government Official or representative
○ Board Member
○ Other (financial officer, attorney, police officer, office manager, admin staff, planning staff, etc.)

3. As part of Executive Order 13198, we are collecting information for the Federal Faith-Based and Community Initiative. In your opinion, **is the agency you represent for CHALENG a faith-based organization? (please check one)**

○ No ○ Yes ○ Not Sure ○ Not representing an agency

4. Personal Invovlement in CHALENG: I first became involved in CHALENG...

○ Beginning CHALENG meeting (11 years ago) ○ 2-10 years ago ○ 1 year ago ○ Today

OFFICE USE ONLY - DO NOT WRITE BELOW THIS LINE

Station _____ Affiliated VA _____ | | | 1 | 3 | 1 |

5. Please select the choice that best describes the facility you are from (CHECK ONLY ONE)

○ VA Medical Center
○ VA Regional Office
○ VA Outpatient Clinic
○ Vet Center
○ VISN
○ VA Central Office
○ VA National Cemetary Admin (NCA)
○ State Department of Veterans Affairs
○ Veteran Service Organization
○ Non Profit Community Agency
○ Private For Profit Community Agency
○ Department of Defense (DOD)
○ Department of Labor (DOL)
○ Housing and Urban Development (HUD)
○ Social Security Administration (SSA)
○ Department of Agriculture (USDA)
○ Other Federal Government Agency
○ Other State Government Agency
○ Local Government Agency
○ Correctional Agency
○ Other

6 . COMMUNITY FEEDBACK, PART I (ALL PARTICIPANTS COMPLETE)

General Assessment Questions
Please shade one circle per line

	Not Accessible				Highly Accessible
VA Accessibility: In general, how accessible do you feel VA services are to homeless veterans in the community?	1 ○	2 ○	3 ○	4 ○	5 ○

	Not Able				Highly Able
VA Service Coordination: Rate the ability of the VA to coordinate clinical services for homeless veterans with your agency.	1 ○	2 ○	3 ○	4 ○	5 ○

PLEASE TURN OVER AND COMPLETE OTHER SIDE

7. NEEDS (ALL PARTICIPANTS COMPLETE) - Please rate the following needs of homeless veterans in your community area: This is an overall rating. Thus you are assessing the unmet/met needs of homeless veterans in your area based on all local resources, not just VA resources.

Unmet ← 1	2	3	4	→ Met 5	Rating - Please shade one circle per line
○	○	○	○	○	1. Assistance with personal hygiene
○	○	○	○	○	2. Food
○	○	○	○	○	3. Clothing
○	○	○	○	○	4. Immediate shelter (an emergency place to stay)
○	○	○	○	○	5. Transitional living facility or halfway house
○	○	○	○	○	6. Long-term, permanent housing
○	○	○	○	○	7. Detoxification from substances
○	○	○	○	○	8. Treatment for substance abuse
○	○	○	○	○	9. Services for emotional or psychiatric problems
○	○	○	○	○	10. Treatment for dual diagnosis
○	○	○	○	○	11. Family counseling
○	○	○	○	○	12. Medical services
○	○	○	○	○	13. Women's health care
○	○	○	○	○	14. Help with medication
○	○	○	○	○	15. Drop-in center or day program
○	○	○	○	○	16. AIDS/HIV testing/counseling
○	○	○	○	○	17. TB testing
○	○	○	○	○	18. TB treatment
○	○	○	○	○	19. Hepatitis C testing
○	○	○	○	○	20. Dental care
○	○	○	○	○	21. Eye care
○	○	○	○	○	22. Glasses
○	○	○	○	○	23. VA disability/pension
○	○	○	○	○	24. Welfare payments
○	○	○	○	○	25. SSI/SSD process
○	○	○	○	○	26. Guardianship (financial)
○	○	○	○	○	27. Help managing money
○	○	○	○	○	28. Job training
○	○	○	○	○	29. Help with finding a job or getting employment
○	○	○	○	○	30. Help getting needed documents or identification
○	○	○	○	○	31. Help with transportation
○	○	○	○	○	32. Education
○	○	○	○	○	33. Child care
○	○	○	○	○	34. Legal assistance
○	○	○	○	○	35. Discharge upgrade
○	○	○	○	○	36. Spiritual
○	○	○	○	○	37. Re-entry services for incarcerated veterans
○	○	○	○	○	38. Elder health care
○	○	○	○	○	39. Other:_____

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8. Which **three** needs from **NEEDS** question 7 (1-39) are the most important for you to work on now?

1. ☐☐ 2. ☐☐ 3. ☐☐

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9 . COMMUNITY FEEDBACK, PART II (IMPORTANT: VA STAFF SKIP)

We are interested in the amount of collaboration between VA and other government and community agencies. Please let us know to what extent your agency and the VA have set up or implemented each of the following strategies:

1 = None, no steps taken to initiate implementation of the strategy.
2 = Low, in planning and/or initial minor steps taken.
3 = Moderate, significant steps taken but full implementation not achieved.
4 = High, strategy fully implemented.

Strategy - Please shade one circle per line	None 1	2	3	High 4
Interagency Coordinating Body - The VA and your agency meet formally to promote access to services.	○	○	○	○
Co-location of Services - The VA and your agency's services are in one location.	○	○	○	○
Cross-Training - Training that involves both the VA and your agency.	○	○	○	○
Interagency Agreements/ Memoranda of Understanding - Agreements between the VA and your agency to coordinate services.	○	○	○	○
Interagency Client Tracking Systems/Management Information Systems - Shared computer tracking systems that link the VA and your agency.	○	○	○	○
Pooled/Joint Funding - Combining of funds from the VA and your agency to create new services.	○	○	○	○
Uniform Applications, Eligibility Criteria, and Intake Assessments - Standardized forms to apply for services both at the VA and your agency.	○	○	○	○
Interagency Service Delivery Team/Provider Coalition - Team comprised of VA and agency staff to assist clients with multiple needs.	○	○	○	○
Consolidation of Programs/Agencies - Combining programs in order to integrate service delivery.	○	○	○	○
Flexible Funding - Flexible funding used to get additional resources to further systems integration e.g. contingency/emergency fund, or a fund to purchase unavailable services.	○	○	○	○
Use of Special Waivers - Waiving requirements for funding, eligibility or service delivery to reduce barriers to service, eliminate duplication of services, or promote access to comprehensive services.	○	○	○	○
System Integration Coordinator - A staff position focused on systems integration activities such as identifying agencies, staffing interagency meetings, and assisting with joint proposal development.	○	○	○	○