

A horizontal banner image showing a close-up of a hand holding a silver pen, poised to write on a document with faint lines and numbers. The image is overlaid with a semi-transparent maroon gradient.

RESEARCH & EVALUATION

**FORMATIVE EVALUATION OF THE HOMELESS VETERANS
REINTEGRATION PROGRAM (HVRP): FINDINGS FROM
LITERATURE REVIEW, SITE VISITS, ANALYSES OF
PROGRAM ADMINISTRATIVE DATA, AND OPTIONS FOR
FUTURE EVALUATION
Draft Final Report**

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TABLE OF CONTENTS

| | |
|---|-------------|
| ABSTRACT | iv |
| ACKNOWLEDGEMENTS | v |
| TABLE OF ACRONYMS | vi |
| EXECUTIVE SUMMARY | viii |
| | |
| CHAPTER 1: INTRODUCTION | 1 |
| A. Background | 1 |
| B. Study Objectives, Methodology, and Organization of Report | 2 |
| | |
| CHAPTER 2: A REVIEW OF THE LITERATURE RELATED TO HOMELESS VETERAN REINTEGRATION | 5 |
| A. Background | 5 |
| 1. Purpose and Objective of this Review | 5 |
| 2. Background on Homelessness among Veterans | 5 |
| B. Literature Review Methodology | 7 |
| 1. Key Research Areas Addressed by Literature Review | 7 |
| 2. Literature Search Strategy and Selection of Studies and References | 8 |
| C. Key Findings from Literature - Conceptual Framework | 10 |
| D. Specific Focus Question Findings | 11 |
| 1. Research Area 1: Foundational Knowledge of Risk Factors and Pathways to Homelessness | 11 |
| 2. Research Area 2: Correlations and Trends..... | 18 |
| 3. Research Area 3: Review of Current Intervention and Support Programs and Practices..... | 23 |
| E. Conclusions | 34 |
| | |
| CHAPTER 3: FINDINGS FROM SITE VISITS WITH HVRP GRANTEEES | 37 |
| A. Overview of HVRP Sites Visited | 38 |
| 1. Site Selection Criteria and Characteristics of HVRP Sites Visited | 38 |
| 2. Economic Conditions in Areas Served by HVRP Grantees..... | 47 |
| B. HVRP Outreach, Recruitment, Intake, and Assessment Activities | 49 |
| 1. Types of Homeless Veterans Eligible for and Targeted for HVRP Enrollment | 49 |
| 2. Strategies for Recruiting HVRP Participants..... | 51 |
| 3. Intake and Assessment Procedures | 55 |
| C. Participant Flow and Program Services | 60 |
| 1. Overview of Participant Flow through Services | 60 |
| 2. Training Services | 61 |
| 3. Employment Services and Job Retention Activities | 67 |
| 4. Housing Assistance | 72 |
| 5. Supportive Services | 76 |
| 6. Case Management Services..... | 80 |

TABLE OF CONTENTS

| | |
|--|------------|
| D. Grantee Partnerships and Collaboration | 81 |
| E. Program Management and Staffing Levels | 84 |
| F. Grantee Performance Reporting and Data Systems | 86 |
| G. Sustainability, Lessons Learned, and Conclusions..... | 92 |
| CHAPTER 4: KEY FINDINGS FROM ANALYSES OF PROGRAM PERFORMANCE | |
| DATA | 96 |
| A. Introduction | 96 |
| B. Analyses of Program Enrollment and Participant Characteristics | 97 |
| 1. HVRP Enrollment Trends..... | 97 |
| 2. HVRP Participant Characteristics | 98 |
| C. HVRP Program Services | 102 |
| D. Analysis of Job Placement Outcomes | 105 |
| E. Analysis of Hourly Wage Outcomes | 109 |
| F. Regression Analyses | 112 |
| 1. Methodology and Data Sources Used in Regression Analysis | 112 |
| 2. Regression Analysis Results | 113 |
| G. Comparison of VOPAR Employment Outcomes with Unemployment Insurance Wage Record Data for an HVRP Grantee | 119 |
| CHAPTER 5: ALTERNATIVE EVALUATION DESIGNS FOR POTENTIAL FUTURE RIGOROUS STUDY OF HVRP | |
| A. Introduction | 123 |
| B. Randomized Controlled Trial | 127 |
| C. Differential Impact Study, Preferably Using a Randomized Controlled Trial | 132 |
| D. Evaluations of Modest Changes in HVRP, Preferably Using an RCT..... | 134 |
| E. Regression Discontinuity Design | 136 |
| F. Comparison Group Evaluation | 138 |
| G. Outcome Evaluation of Participants with Varying Characteristics | 141 |
| H. Conclusions and Next Steps..... | 143 |
| CHAPTER 6: STUDY CONCLUSIONS AND RECOMMENDATIONS FOR FUTURE PROGRAM DEVELOPMENT AND EVALUATION | |
| APPENDICES | |
| APPENDIX A: STUDY REFERENCES | 154 |
| APPENDIX B: SITE VISIT SUMMARIES..... | 162 |
| APPENDIX C: ADDITIONAL DETAILED VOPAR DATA ANALYSES..... | 199 |
| Appendix C-1: Distribution of HVRP Enrollments by Grantee, PY 2013..... | 200 |
| Appendix C-2: HVRP Participant Characteristics at Enrollment across Grantees, PY 2009-2012..... | 204 |
| Appendix C-3: Participant Characteristic Terms, “Other Selected Characteristics”... | 209 |

TABLE OF CONTENTS

| | |
|---|------------|
| Appendix C-4: HVRP Services Received across Grantees, PY 2009-2012 | 211 |
| Appendix C-5: HVRP Service Terms, “Services Received” | 213 |
| Appendix C-6: Distribution of HVRP Mean Hourly Wages by Grantee, PY 2013 | 216 |
| Appendix C-7: VOPAR DOL-VETS Competitive Grants Participant Tracking Sheet | |
| Demographics: | 220 |
| Appendix C-8: Additional Regressions Models Tested..... | 221 |
| Appendix C-9: Additional Analyses of Wage Record Data and VOPAR Data in One | |
| HVRP Grantee Site | 225 |

ABSTRACT

The Homeless Veterans Reintegration Program (HVRP) is intended to provide services to assist in reintegrating homeless veterans into meaningful employment. In May 2014, U.S. Department of Labor's (DOL) Chief Evaluation Office (CEO) contracted with Avar Consulting, Inc. to conduct a formative evaluation of the HVRP program. The overall purposes of this evaluation effort were to: document the types of services and supports offered by HVRP grantees; identify potentially promising practices or models; conduct statistical analysis of HVRP administrative data collected by the grantees; and provide alternative potential approaches for future experimental and non-experimental evaluation of HVRP. Study findings are based on (a) a literature review, (b) site visits to 12 HVRP grantees, and (c) analyses of HVRP administrative data.

Study results indicate HVRP grantees emphasize the importance of partnering with other service providers and establishing community collaborations to bring together the varied resources and services required to provide employment services and a range of other services to help homeless veterans achieve long-term self-sufficiency. HVRP grantees emphasize job readiness training, job placement services, limited funding of short-term training, case management, and provision of other supportive services. At the same time, HVRP grantees typically reach out to partners for more substantive and costly services, including provision of longer-term education and training (sometimes leading to certification and degrees), subsidized transitional/permanent housing, mental health and substance abuse treatment, childcare, and a host of other supports. Grantees also stress the need for careful screening and assessment of homeless veterans during the intake process to ensure that new recruits are suitable and ready to benefit from the menu of services provided with HVRP funding. This report assesses data collection and reporting requirements for the HVRP program and provides suggestions on how requirements might be improved. Finally, this report explores a variety of approaches for conducting an impact evaluation of the HVRP program, including weighing challenges, costs, and likely benefits to a range of methods including experimental and non-experimental designs.

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TABLE OF ACRONYMS

| | |
|-----------------|---|
| AHAR | Annual Homeless Assessment Report |
| AJC | American Job Center |
| CNA | Certified Nursing Assistant |
| CAP | Corrective Action Plan |
| CBO | Community-Based Organization |
| CDL | Commercial Driver's License |
| CEO | Chief Evaluation Office |
| CHALENG | Community Homelessness Assessment Local Education and Networking Group |
| CLEAR | DOL Clearinghouse for Labor Evaluation and Research |
| CoC | Continuum of Care |
| CPP | Cost per Placement |
| CWT | Compensated Work Therapy |
| CRRC | Community Resource and Referral Center |
| DOL | U.S. Department of Labor |
| DVOP | Disabled Veterans' Outreach Program |
| FBO | Faith-Based Organization |
| GAO | Government Accountability Office (formerly the General Accounting Office) |
| GPD | Grant and Per Diem |
| HFV/HVFP | Homeless Female Veterans/Homeless Veterans with Families Program |
| HMIS | Homeless Management Information System |
| HUD | U.S. Department of Housing and Urban Development |
| HUD-VASH | Housing and Urban Development-Veterans Affairs Supported Housing |
| HVRP | Homeless Veterans' Reintegration Program |
| IVTP | Incarcerated Veterans' Transition Program |
| LVER | Local Veterans' Employment Representative |
| MOU | Memorandum of Understanding |
| MST | Military Sexual Trauma |
| NCHV | National Coalition for Homeless Veterans |
| OEF | Operation Enduring Freedom |
| OIF | Operation Iraqi Freedom |
| OJT | On-the-Job-Training |
| OST | Occupational Skills Training |
| PHA | Public Housing Agencies |
| PTSD | Post-Traumatic Stress Disorder |
| PY | Program Year |
| RCT | Randomized Controlled Trial |
| RDD | Regression Discontinuity Design |
| SNAP | Supplemental Nutrition Assistance Program (formerly Food Stamps) |

| | |
|---------------|---|
| SOW | Statement of Work |
| SSDI | Social Security Disability Insurance |
| SSI | Supplemental Security Income |
| SSVF | Supportive Services for Veteran Families |
| TA | Technical Assistance |
| TIP | Transition in Place |
| TPR | Technical Performance Report |
| TWG | Technical Work Group |
| USICH | United States Interagency Council on Homelessness |
| VA | U.S. Department of Veterans Affairs |
| VETS | Veterans' Employment and Training Services |
| VOPAR | VETS Operations and Programs Activity Report |
| WIA | Workforce Investment Act |
| WIB | Workforce Investment Board |
| WIOA | Workforce Innovation and Opportunity Act |
| WRIS-2 | Wage Record Interchange System 2 |

EXECUTIVE SUMMARY

BACKGROUND

The Homeless Veterans Reintegration Program (HVRP), initially authorized under Section 738 of the Stewart B. McKinney Homeless Assistance Act,¹ is intended to “provide services to assist in reintegrating homeless veterans into meaningful employment within the labor force and to stimulate the development of effective service delivery systems that will address the complex problems facing homeless veterans.”² Under HVRP, funds are awarded on a competitive basis to eligible applicants such as: State and local Workforce Investment Boards (WIBs); public agencies; for-profit/commercial entities; and nonprofit organizations, including faith-based and community-based organizations. In June 2014, the U.S. Department of Labor (USDOL) awarded grants totaling \$36.7 million to 156 organizations nationwide to provide HVRP services to more than 12,000 veterans.³ HVRP grantees provide an array of services utilizing a case management approach that directly assists homeless veterans, as well as provide linkages for a variety of housing and supportive services available in their local communities.⁴

In May 2014, USDOL contracted with Avar Consulting, Inc., along with subcontractors Capital Research Corporation, Inc. and George Washington University, to conduct a formative evaluation of the HVRP program. In conducting this evaluation effort, the contractor worked under the guidance and oversight of the designated Contracting Officer’s Representative in the USDOL’s Chief Evaluation Office (CEO), as well as agency officials in USDOL’s Veterans’ Employment and Training Service (VETS) program office. The purpose of this formative evaluation was “to document the types of services and supports offered by grantees receiving awards under the HVRP, identify potentially promising practices or models, and conduct statistical analysis of administrative data collected by the grantees and other data as applicable on job placement and other outcomes of interest on HVRP participants.” Additionally, this study was intended to provide CEO/VETS with alternative potential approaches for future rigorous

¹ HVRP is currently authorized under Title 38 U.S.C. Section 2021, as added by Section 5 of Public Law 107-95, the Homeless Veterans Comprehensive Assistance Act of 2001.

² U.S. Department of Labor, “Veterans’ Employment and Training Service, Notice of Availability of Funds and Solicitation for Grant Application for Urban and Non-Urban Homeless Veterans’ Reintegration Program (HVRP) for Program Year (PY) 2014, July 1, 2014 through June 30, 2015,” available at: <http://www.dol.gov/vets/grants/2013/PY2013-HVRP-SGA.pdf>.

³ U.S. Department of Labor, “\$36M in Job-Training Grants to Help 12,000 Homeless Veterans Awarded by U.S. Labor Department,” VETS New Release, June 26, 2014, Release Number 14-1224-NAT, available at: <http://www.dol.gov/opa/media/press/vets/VETS20141224.htm>.

⁴ Under the HVRP program requirements, eligible participants are required to be “veterans who served in the active military, naval, or air service, and who were discharged or released under conditions other than dishonorable.” In addition, these veterans had to meet the definition of “homeless” as specified in The McKinney-Vento Homeless Assistance Act, as amended by The Homeless Emergency Assistance and Rapid Transition to Housing (HEARTH) Act of 2009. Included within this definition are individuals lacking a “fixed, regular and adequate nighttime residence,” living in emergency or transitional housing, or are at risk of losing their housing within 14 days.

(experimental and non-experimental) evaluation of HVRP. Study findings are based on (a) a literature review, (b) site visits to 12 HVRP grantees, and (c) analyses of HVRP administrative data.

KEY STUDY FINDINGS

Key Findings from Literature Review. The literature review confirmed that a set of risk factors for homelessness is associated with veteran status. A core set of these factors is the same for non-veteran homeless individuals, including childhood family abuse, neglect and/or dysfunction; having lived in foster care; and the presence of mental illness. For veterans, however, these factors may be exacerbated by combat exposure and/or Military Sexual Trauma (MST), both of which increase the risk of Post-Traumatic Stress Disorder (PTSD). These factors, combined with any combat-related disabilities, increase the overall chance of veterans becoming homelessness. Structural barriers, such as lack of access to transitional and permanent housing and a stable income, further heighten the risk of homelessness.

Key Findings from Site Visits to 12 HVRP Grantees. All grantees visited emphasized the importance of partnering with other service providers and establishing community collaborations in order to bring together the varied resources and services required to transition homeless veterans toward long-term self-sufficiency. The constraints on annual HVRP resources (a maximum \$300,000 per grant, per year) mean that HVRP grantees have to find their niche – emphasizing job readiness training, job placement services, limited funding of short-term training (in some cases to bolster credentials), case management, and provision of other supportive services – while at the same time reaching out to partners for more substantive and costly services, including provision of longer-term education and training (leading to certification and degrees), subsidized transitional/permanent housing, mental health and substance abuse treatment, childcare, and other supports. Grantees also stressed the need for careful screening and assessment of homeless veterans during the intake process to ensure that new recruits are suitable and ready to benefit from the limited menu of services that could be directly provided with HVRP funding. Because of funding constraints and an emphasis on meeting job placement goals within the confines of a program grant year, grantee administrators emphasized the need to target HVRP assistance on homeless veterans interested in working and those with good prospects for securing employment within the current program year. Additionally, for those not ready for entry into HVRP, grantee administrator and staff stressed the need for strong and responsive referral arrangements with the VA, American Job Centers (AJCs), Disabled Veterans’ Outreach Program (DVOP) specialists, education and training providers, housing providers, and other public/private health and human service agencies within the service area.

During visits, grantee administrators observed that HVRP performance measurement standards and requirements to exit program participants at the end of each program year have an effect on participant screening and selection, and the structure and delivery of services. For example, among the effects of the performance measurement system and the requirement to exit participants is that grantees are selective in terms of participant recruitment and enrollment in HVRP, typically, enrolling homeless veterans with a strong likelihood of job placement prior to

the end of the current program year. Additionally, HVRP grantees tend to avoid enrollment of new participants near the end of the program year because of concerns regarding their ability to place individuals in jobs before the end of the program year. Finally, grantees are reluctant to provide longer-term and more substantive education and job training assistance because of constrained HVRP funding and concerns that training may not be completed within the current program year (i.e., which may result in being unable to obtain a job placement for the participant by the close of the program year).

Key Findings from Analysis of Grantee and Participant Outcomes. Analysis of participant-level data from the VETS Operations and Programs Activity Report (VOPAR) system indicated that nearly two-thirds (62.5 percent) of HVRP participants were placed in employment between PY 2009 and PY 2013. Job placement rates varied somewhat by select participant characteristics, but not substantially; for example:

- Males were placed at a slightly higher rate than females (64.1 percent as compared to 59.2 percent).
- When comparing placement rates along racial and ethnic background lines, Hispanics had the highest placement rate (65 percent), while Native Americans had the lowest (53 percent).
- For the most part, younger participants were more likely to be placed, while older homeless veterans (especially those 65 years of age and older) were the less likely to be placed.
- Enrollees with a more recent last date of military service were generally more likely to be placed.

Mean hourly wages of participants rose consistently over the program years analyzed, increasing steadily from \$10.21 in PY 2009 to \$11.55 in PY 2013, a 13.1 percent increase (an inflation adjusted increase of 3.1 percent).

As part of this study, the Avar research team conducted a special analysis aimed at exploring the consistency of HVRP participant employment outcome data collected and reported through the program's VOPAR data system versus data collected on a quarterly basis through the Unemployment Insurance (UI) wage record system. The research team worked with one state workforce development agency that had the capability to match quarterly UI wage record earnings data for HVRP participants enrolled at an HVRP grantee site for two program years (PY 2012 and PY 2013). This exploratory analysis suggested that employment outcomes for HVRP participants can be substantially different depending upon the source of data used – for example, the employment rate when the two program years (PY 2012 and PY 2013) are combined was 75.8 percent of enrolled HVRP participants when the VOPAR data was used, as compared with 40.6 percent when UI wage record data was used for the one grantee site. The matching of HVRP participants with UI wage records generates quite different results in terms of numbers of participants employed each program year, with the UI wage record data resulting in half the number of participants employed at the one HVRP grantee site. While this analysis suggests that employment outcomes measured with VOPAR data are inconsistent with results when UI wage records are utilized, these results and their interpretation should be approached with substantial caution (as this program might not be representative of trends for other

grantees). The inconsistencies in employment results across the two data sources could arise from a number of factors (e.g., HVRP participants working in another state, working in non-covered employment, or being engaged in casual, irregular, or informal employment) and past studies have shown that results using administrative data sources (such as UI wage records) can generate quite different results compared with the collection of employment information through survey-type methods.

KEY STUDY RECOMMENDATIONS FOR FUTURE PROGRAM DEVELOPMENT AND EVALUATION

The results of the site visits and statistical analyses conducted under this formative evaluation suggest that USDOL should consider changes in four areas, as highlighted below.

Program Reporting Requirements:

- ❖ **Consider updating or replacing the VOPAR/TPR data system.** Grantee administrators/staff indicated that HVRP’s current reporting system is antiquated, burdensome for staff and participants, and limited in analytic capabilities -- and therefore, in need of a major overhaul. Some grantee administrators indicated that staff had to double and triple enter data on HVRP participants into the VOPAR/TPR data system and other participant tracking systems maintained by their organizations (such as the HUD’s Homeless Management Information System [HMIS]). Once participant-level data were entered into the VOPAR/TPR system and submitted to VETS, it was difficult and time-consuming to correct errors or omissions within the data system. Administrators also indicated that while the VOPAR/TPR system did facilitate quarterly reporting of participant enrollments, services, and outcomes to USDOL, the data system lacked advanced analytic capabilities and reporting features that could improve program performance (e.g., facilitate case management and provide administrators/staff with tools and dashboards for real-time tracking and analysis of enrollment trends, service utilization, and participant outcomes). In upgrading the VOPAR/TPR, several grantees suggested that if it were possible to piggyback or consolidate HVRP participant-level reporting with data already being collected for HUD’s HMIS, such a change would reduce the need to complete multiple forms for participants and reduce the data collection burden for HVRP participants and grantee staff. However, such consolidation or coordinating of data collection and reporting would require agencies funding and overseeing homeless programs to work together on defining common data elements (i.e., VETS could not accomplish this alone).

- ❖ **Consider adding a unique participant identifier to the VOPAR/TPR tracking system (or a replacement system) to allow for tracking of individual program participants across grantee years.** Using participant Social Security Number (SSN) as a unique participant ID, possibly scrambled by a fixed algorithm to protect privacy, would be particularly useful from an analytic standpoint, because of its potential for matching with UI wage record data (for pre- and post-participation analyses of earnings of HVRP participants).

- ❖ **Consider matching UI wage record data and VOPAR/TPR system data on employment outcomes for additional HVRP grantees.** The exploratory analysis of employment outcomes conducted for one grantee as part of this study suggests inconsistencies in employment outcomes for HVRP participants using UI wage record data versus data collected by grantee staff and entered into the VOPAR data system. Additional analyses are needed to determine if the patterns of inconsistency identified in this single HVRP grantee site under this study are borne out for other grantees, and if so, to determine contributing factors for such variance in outcomes by data source. Additionally, such analyses for additional HVRP grantees could be helpful for determining if USDOL should shift to measuring employment outcomes for HVRP participants based on UI wage record data, as is the case in other USDOL programs (such as the WIA/WIOA program).

Program Performance and Evaluation:

- ❖ **Consider eliminating the requirement that HVRP grantees submit Corrective Action Plans (CAPs) for exceeding performance standards.** Grantee administrators are unsure why they must submit a “corrective” action plan if their HVRP program is performing above program standards on program goals. Such a requirement may also have the unintended consequence of grantees not enrolling or delaying the enrollment of homeless veterans in HVRP, or delaying recording of job placements/retentions for a given quarter to avoid breaching a given performance standard (i.e., automatically tripping the need to submit a CAP).
- ❖ **Consider eliminating requirements that grantees exit participants at the end of each program year, allowing for carryover of participants (as long as the grantee’s contract and period of performance continues into the next program year).** The requirement to exit HVRP participants at the end of each program year can influence when and if grantees enroll HVRP participants during the program year: HVRP grantees are often reluctant to enroll new participants into HVRP in the final quarter (and even the 3rd quarter) for fear that they will be unable to record a job placement for the individual prior to the close of the program year. Additionally, such a requirement can result in reluctance on the part of HVRP grantees to enroll homeless veterans that are in need of longer-term and more substantive education or training services that could delay job placement beyond the end of the program year.
- ❖ **Consider options for future evaluations to determine HVRP participant outcomes and potential impacts.** Randomized controlled trials (RCTs) represent the gold standard for evaluating programs because they virtually guarantee any differences in outcomes between the treatment and control groups are due to the intervention, and the results are likely to be convincing to policy officials. However, based on input from VETS/CEO and Technical Work Group (TWG) members, implementation of an RCT of the HVRP program involving outright denial of services (i.e., random assignment to a control group that would be denied HVRP services in order to measure the overall impact of HVRP services) would not be likely to gain approval given expected objections to such denial of services to veterans within by USDOL, Congress, and veterans’ organizations. It may be possible to conduct smaller-scale

experimental studies that involve randomization of HVRP grantees or participants, as long as control group members are not denied basic HVRP-funded services. For example, such RCT studies could be aimed at better understanding marginal enhancements to existing HVRP services or introduction of new strategies or services. If a net impact evaluation proves impossible or infeasible, an outcome evaluation could be initiated to better understand how HVRP participant outcomes (including measures of short/long-term employment/earnings, self-sufficiency, and housing conditions/chronic homelessness) vary by participant subgroups, grantee characteristics, and labor market characteristics.

Program Funding:

- ❖ **Consider eliminating different grant ceilings for urban and non-urban grants.** The varying grant ceilings for urban and non-urban grants (set at \$300,000 and \$200,000, respectively) appear somewhat arbitrary, and may not reflect either the number of homeless veterans in need of services within a particular service area or the costs of serving each homeless individual. The non-urban grants visited as part of this study served multi-county areas or specific regions of a state, and as a result, may have as many or more homeless veterans in need of services as urban grants that serve a portion of a metropolitan area or share a service area with one or more other HVRP grantees. Further, non-urban HVRP grantees are expected to provide the same types of services as those in urban areas and may, in fact, have fewer potential partners in their service areas to which it is possible to refer participants for services.

Program Coordination:

- ❖ **Explore the relationship between the federal/state/local goals of eliminating homelessness among veterans (through immediate and early placement of homeless veterans into permanent housing) and potential implications for HVRP grantee recruitment and job placement/retention.** Several grantees indicated efforts to permanently house veterans rapidly (to eliminate veteran homelessness) could dry up the eligible pool of homeless veterans for enrollment in HVRP. Some grantees questioned whether rapid provision of permanent housing could reduce incentives (and be counterproductive) in terms of homeless veterans enhancing their employability, undertaking the time-consuming and arduous job search process, and in confronting and overcoming other challenges that contributed to chronic homelessness. Another option would be to consider relaxing the eligibility criteria for HVRP so that grantees could serve formerly homeless but permanently housed veterans in need of employment and training services to promote long-term self-sufficiency and/or a return to homelessness.
- ❖ **Consider coordinating HVRP grants with other funding sources targeted on assisting homeless veterans.** Grant administrators and staff interviewed for this study observed that homeless veterans served by HVRP typically also require housing and supportive services for substance abuse, mental health, and other issues. Grants for providing these three sets of services are awarded independently by VA, HUD, and DOL. Some grant administrators

observed that they could potentially provide a better mix of services if they had grants covering all three types of services. This belief is not universally shared, however, and some sites have expressed no concern about having to reach out to other organizations to provide services that they cannot provide. A future study could be launched to analyze how outcomes vary depending on whether the HVRP program controls the resources for housing and supportive services. This type of study could be undertaken either using randomized controlled trials (RCT) or a non-experimental approach. For example, under the RCT approach, the awards for several major programs assisting veterans and their families such as HVRP, Supportive Services for Veteran Families (SSVF), and the Grant and Per Diem Program would be awarded in two ways. Some of the awards would be for all three programs, but others would follow the current approach of making individual awards. If a non-experimental approach is used, then analyses would be conducted to see if outcomes are higher for grantees with multiple awards compared to grantees that only have HVRP awards, conditional on observed participant characteristics.

CHAPTER 1: INTRODUCTION

A. Background

The Homeless Veterans Reintegration Program (HVRP), initially authorized under Section 738 of the Stewart B. McKinney Homeless Assistance Act of 1987,⁵ is intended to “provide services to assist in reintegrating homeless veterans into meaningful employment within the labor force and to stimulate the development of effective service delivery systems that will address the complex problems facing homeless veterans.”⁶ Under HVRP, funds are awarded on a competitive basis to eligible applicants such as: State and local Workforce Investment Boards (WIBs); public agencies; for-profit/commercial entities; and nonprofit organizations, including faith-based and community-based organizations. In PY 2014, applicants fell into one of two categories – applicants serving “Urban” or applicants serving “Non-Urban” geographical areas. In June 2014, the U.S. Department of Labor (USDOL) awarded grants totaling \$36.7 million to 156 organizations nationwide to provide HVRP services to more than 12,000 veterans.⁷

HVRP grantees are to provide an array of services utilizing a case management approach that directly assists homeless veterans, as well as provide linkages for a variety of housing and supportive services available in their local communities. Among the services to be provided by

⁵ HVRP is currently authorized under Title 38 U.S.C. Section 2021, as added by Section 5 of Public Law 107-95, the Homeless Veterans Comprehensive Assistance Act of 2001.

⁶ U.S. Department of Labor, “Veterans’ Employment and Training Service, Notice of Availability of Funds and Solicitation for Grant Application for Urban and Non-Urban Homeless Veterans’ Reintegration Program (HVRP) for Program Year (PY) 2014, July 1, 2014 through June 30, 2015,” available at: <http://www.dol.gov/vets/grants/2013/PY2013-HVRP-SGA.pdf>.

⁷ U.S. Department of Labor, “\$36M in Job-Training Grants to Help 12,000 Homeless Veterans Awarded by U.S. Labor Department,” VETS New Release, June 26, 2014, Release Number 14-1224-NAT, available at: <http://www.dol.gov/opa/media/press/vets/VETS20141224.htm>.

HVRP grantees for homeless veterans are: occupational classroom and on-the-job training (OJT); job search and placement assistance; career counseling; life skills and money management; mentoring; and housing assistance. Some key characteristics of the service delivery approach are the following:

- The program is "employment focused" and veterans receive the employment and training services they need to re-enter the labor force. Job placement, training, job development, career counseling, and resume preparation are among the services provided directly by the grantees or through cooperative arrangements with other service providers.
- Additional services such as referral to temporary, transitional, and permanent housing; referral to medical and substance abuse treatment; work clothing and equipment; and transportation assistance are also provided to meet needs of homeless veterans and facilitate job placement and retention.
- The program features an outreach component using veterans who themselves have experienced homelessness, and in recent years, some grantees have utilized formerly homeless veterans in other positions where there is direct client contact, such as counseling, peer coaching, intake, and follow-up services.
- The initiative emphasizes establishment of linkages and coordination with various veterans' services programs and their staff, such as the Disabled Veterans' Outreach Program (DVOPs) and Local Veterans' Employment Representatives (LVERs) stationed in the local employment service offices of the State Workforce Agencies, Workforce Investment Boards (WIBs), American Job Centers (AJCs), Veterans' Workforce Investment Program, the American Legion, Disabled American Veterans, Veterans of Foreign Wars, and the Departments of Veterans' Affairs, Housing and Urban Development, and Health and Human Services.⁸

B. Study Objectives, Methodology, and Organization of Report

The purpose of this study was “to document the types of services and supports offered by grantees receiving awards under the HVRP, identify potentially promising practices or models,

⁸ U.S. Department of Labor, “Statement of Work for Evaluation of the Homeless Veterans Reintegration Program,” 2014 (highlighted features of HVRP program in CEO/VET’s original Statement of Work [SOW] for this evaluation project). Chapter 3 of this report documents and assesses key features of the HVRP program in greater detail based on site visits conducted to HVRP grantees under this evaluation effort.

and conduct statistical analysis of administrative data collected by the grantees and other data as applicable on job placement and other outcomes of interest on HVRP participants.”

Additionally, the site visits conducted and data collected were intended to support development of an evaluation design, providing CEO/VETS with alternative potential approaches for future rigorous (experimental and non-experimental) evaluation of HVRP. This evaluation effort was intended also to provide an assessment of the types and quality of data collected at the grantee level and to suggest potential alternatives for improving the quality and consistency of participant-level and grantee-level (aggregate) data reported to VETS on a quarterly and annual basis. The original SOW for this evaluation effort identified key study areas and key research questions that were intended to focus data collection and analysis tasks under this evaluation effort, including the following:

- **Grant Design and Administration:** Is the design of HVRP grants ideal for meeting the key objectives of the program (e.g., the measures used to track participant outcomes; the method of enrollment; the maximum grant amounts of \$300,000 for Urban grants and \$200,000 for Non-Urban grants).
- **Community Collaboration and Core Partners:** What role does community collaboration have in the overall reintegration efforts for the homeless veterans being served? What is the quality of these partnerships, and what particular partnership arrangements seem to lead to the greatest likelihood for reintegration for the homeless veteran? What is the strength and quality of the partnerships between HVRP programs and core partners? Are there any organizational or institutional factors that affect how HVRP programs integrate and leverage services from the core partners?
- **Comprehensive Assessments:** To what extent are HVRP participants assessed during the intake process? What are some of the tools being used for both case management and developing individual employment plans?
- **Developing Employment Opportunities:** To what extent do HVRP programs ensure success by creating job opportunities for their clients? What are some approaches that HVRP programs have utilized for job development?
- **Funding and Performance:** What role do the Federal HVRP grant dollars have in the overall service delivery approach for homeless veterans? What other resources do HVRP

grantees bring to bear to augment the service program? What other factors impact whether an HVRP grantee can achieve projected placement goals?

- **HVRP’s Community Impact:** One of the stated goals of HVRP is to foster inter-agency and community cooperation among homeless veterans service providers. Given HVRP’s focus on employment, what impact does this have on grant partners who are providing services to homeless veterans? What other benefits to the community can be attributed to the HVRP grant program and its partnerships and organizational arrangements?

The data collection, analysis, and report preparation tasks under this effort, conducted over a two-year period, included the following main research activities: (a) a literature review (see Chapter 2); (b) an “environmental scan,” with a particular focus on conducting site visits to 12 HVRP grantees (see Chapter 3); (c) analyses of administrative data collected on a quarterly and annual basis by HVRP grantees (and submitted to VETS) to assess participant characteristics, service utilization, and participant/program outcomes (see Chapter 4); (d) the identification and exploration of alternative evaluation designs for future rigorous study of HVRP (see Chapter 5); and (e) study conclusions and suggestions for future development of the HVRP program (see Chapter 6).⁹

⁹ Specifics about the methodology for the site visits, including selection of grantees for visits, are included in Chapter 3 of this report; additional details about the methodology and study limitations for participant-level analyses are included in Chapter 4.

CHAPTER 2: A REVIEW OF THE LITERATURE RELATED TO HOMELESS VETERAN REINTEGRATION

A. Background

1. Purpose and Objective of this Review

This literature review was conducted as part of an assessment of the U.S. Department of Labor (DOL) Veterans' Employment and Training Services' (VETS) Homeless Veterans Reintegration Program (HVRP). The assessment, overseen by DOL's Chief Evaluation Office (CEO), involved an in-depth analysis of HVRP sites across the United States during 2015. A review of existing literature supported this analysis by synthesizing existing evidence on risk factors for homelessness among veterans and promising practices related to services, including housing assistance, training and up-skilling, supported employment, and program-level partnerships to ensure veterans receive a comprehensive continuum of support. The intended goal of these service programs, including the HVRP, is to position veterans with long-term stability in housing and to successfully reintegrate them into meaningful employment. The HVRP is the only federal program wholly dedicated to providing employment assistance to homeless veterans, serving over 16,000 veterans annually.

2. Background on Homelessness among Veterans

In November 2009, President Barack Obama and then-Veterans Affairs Secretary Eric Shinseki announced a goal of ending homelessness among U.S. veterans within five years. To realize this ambitious goal, the United States Interagency Council on Homelessness (USICH) created *Opening Doors: Federal Strategic Plan to Prevent and End Homelessness 2010*. These efforts turned attention to the disproportionately high rates of homelessness among U.S. veterans. At the end of the five years the rate of veteran homelessness was not zero, but progress

was evident. In August 2014, the U.S. Department of Housing and Urban Development (HUD), the U.S. Department of Veterans Affairs (VA), and USICH announced a decline in veteran homelessness of 33 percent, or 24,837 people, since 2010 (Henry et al., 2014). Between 2013 and 2014 veteran homelessness declined by 11 percent, or 5,846 people (Henry et al., 2014).¹⁰ Despite this progress, the Department of Housing and Urban Development reported that more than 49,000 veterans were homeless in January 2014. Further, the rate of homelessness among veterans remains nearly double the rate of homelessness among non-veterans (Henry et al., 2014).

The definition of the key term “veteran” varies between programs and sources. However, most programs serving homeless veterans define “veteran” as an individual who has served in the military, regardless of active duty or discharge status (Perl 2013). Regarding the term “homeless individual,” the HVRP defines it to include persons who lack a fixed, regular, and adequate nighttime residence. It includes persons whose primary nighttime residence is either a supervised public or private shelter designed to provide temporary living accommodations; an institution that provides a temporary residence for individuals intended to be institutionalized; or a private place not designed for, or ordinarily used as, a regular sleeping accommodation for human beings.

There are three data sources widely relied on for estimating the number of homeless veterans (Balshem et al., 2011): (1) the Department of Housing and Urban Development’s (HUD) Point-in-Time (PIT) estimate (an approximate count of homelessness during a single night in January); (2) the Homeless Management Information System (HMIS) estimate (a count of sheltered homeless populations during a calendar year); and (3) the Department of Veterans

¹⁰ Some or all of this decrease in homelessness may be attributable to improvement in macroeconomic conditions (and decrease in unemployment rate) following the deep recession of 2007/08.

Affairs' (VA) Community Homelessness Assessment, Local Education, and Networking Group (CHALENG) Report Data. HUD and the VA annually collaborate to produce and release a veteran-specific supplement to the Annual Homeless Assessment Report (AHAR) to Congress, which incorporates data from multiple sources and is credited with being the most accurate. As the only federally-funded program wholly dedicated to serving homeless veterans, the HVRP sites and services are unique and important because they serve veterans who may be ineligible for other veteran programs and services because of co-occurring disorders such as severe Post-Traumatic Stress Disorder (PTSD), long histories of substance abuse, serious psychosocial problems, and legal issues. In particular, chronically homeless veterans require more time-consuming, specialized, intensive assessment, referrals, and counseling than is possible in other programs that work with veterans seeking employment. The employment focus of HVRP distinguishes it from most other programs for the homeless, which concentrate on more immediate needs such as emergency shelter, food, and substance abuse treatment. HVRP is also concerned with these aspects of aid, but emphasizes these supports in the context of securing stable long-term employment and housing.

B. Literature Review Methodology

1. Key Research Areas Addressed by Literature Review

This literature review focused on answering eight specific questions organized into three areas of focus: (1) foundational knowledge (pathways to homelessness and veteran-specific risk factors); (2) key data and correlations that illustrate the critical junctions in the individual homeless veteran's experience where intervention and assistance are critical (i.e., pre-conditions for homelessness, risk factors for chronic homeless, differences between generations of veterans, characteristics of women veterans, risk factors relating to military policy involving duration of

deployment, and redeployment and recruitment standards); and (3) homelessness intervention efforts and common approaches in serving homeless veterans, including housing interventions, transitional housing programs, skills training, supported employment programs, and streamlining and alignment among veteran assistance programs.

As discussed in further detail below, the literature available to address these areas of inquiry varies considerably – and there are few experimental studies to provide impact-type findings to address these questions (i.e., most of the literature is descriptive and is not causal in nature). The U.S. DOL Clearinghouse for Labor Evaluation and Research (CLEAR) establishes guidelines and ratings for causal evidence, with the highest rating assigned to randomized controlled trials, mid-level ratings for comparison group studies, and lowest ratings for non-experimental assessments and studies (DOL 2014). The literature used in this review reflects the significant gap in high-rigor causal evidence related to homeless veterans, with the vast majority of research on this subject meeting the guidelines only for the lowest tier of evidence.

2. Literature Search Strategy and Selection of Studies and References

The search strategy began with a scan of academic journals, newspaper articles, federally funded reports and agency websites referencing studies related to homelessness and veterans. No initial limitations were placed on publication year. Two sources were particularly relevant to the focus questions of this review: the research briefs highlighted by the National Coalition for Homeless Veterans (NCHV)¹¹, and a literature review completed in April 2011 by the

¹¹ NCHV is a nonprofit organization that acts as the resource and technical assistance center for a national network of community-based service providers and local, state, and federal agencies that provide emergency and supportive housing, food, health services, job training and placement assistance, legal aid, and case management support for hundreds of thousands of homeless veterans each year. Based on this review, NCHV is the most comprehensive known source of information about veteran service program development, administration, governance, and funding to all of the nation's homeless veteran service providers.

Department of Veterans Affairs, entitled *A Critical Review of Literature Regarding Homelessness Among Veterans* (Balshem et al., 2011). These resources effectively inventoried relevant findings up to 2011. Additional scans were conducted independently to identify more recent research from 2012, 2013, and 2014. This literature review process drew on a total of 45 research reports highlighted by NCHV related to employment and training, supportive services, housing, women veterans, Operation Iraqi Freedom/Operation Enduring Freedom (OIF/OEF), aging veterans, and other topics most critical for HVRP grantees. Their catalog of research draws on articles from the National Institutes of Health, the Government Accountability Office, the Pew Research Center, various medical and science journals, and federal agencies such as the Department of Veterans Affairs, the Department of Labor, and the Department of Defense. A chain-referral sampling technique was utilized to build out the full list of references, making use of referenced studies and cited research in each reviewed article. This technique allowed for layers of evidence to be collected on the specific topics and focus questions of the review.¹² An important source of information related to housing interventions and transitional housing programs, skill training, supported employment programs, and alignment of efforts across multiple agencies were promising practice reviews of veteran-focused programs. The promising practice compendiums, assembled by NCHV (NCHV 2007, 2011, and 2012), detailed a collection of successful HVRP profiles from across the country, including a wide range of market models. NCHV used questionnaires and interviews to compile the information presented in the profiles of the compendiums and made an effort to ensure the inclusion of programs

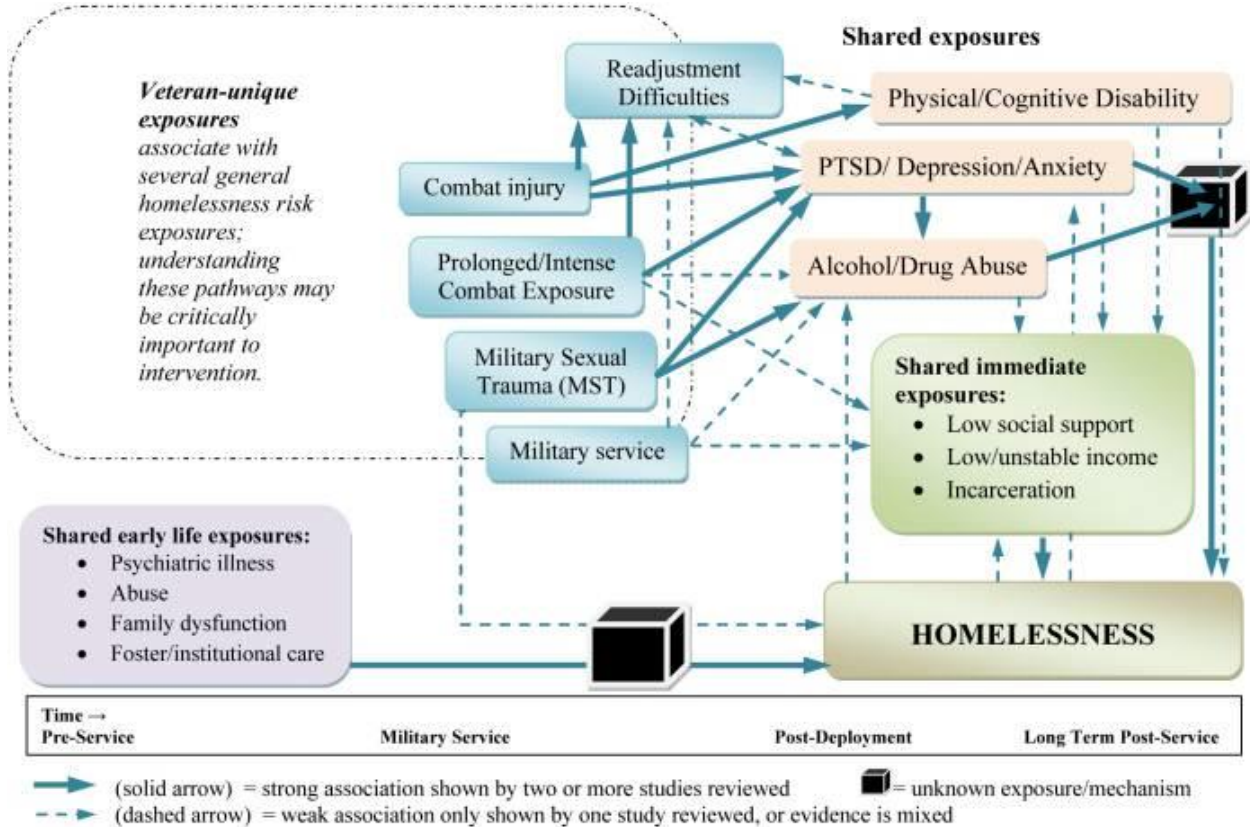
¹² Near the completion of this study (after the literature review had been completed), a member of the Technical Work Group (TWG) identified a number of additional studies that are of interest and should be included in literature reviews focusing on homeless veterans. A number of these studies are cited in footnotes, where appropriate in this review, with the full citation provided in Appendix A (Study References).

representing the full range of program types: urban, rural, faith-based and community-based organizations, local projects, regional networks, and public agency homeless veteran service providers. While the practices in these compendiums have not undergone rigorous evaluations or studies that provide CLEAR correlations between promising practices and improved homeless veteran outcomes, the findings in these profiles identify sites that demonstrate higher than average outcomes (such as completion of training, employment, retention in housing, and job retention) for the client base. This literature review summarizes practices and approaches from the higher performing HVRP sites, as well as Homeless Female Veterans/Homeless Veterans with Families Program and Incarcerated Veterans Transition Program higher-performing grantees, as potential critical success factors in serving homeless veterans.

C. Key Findings from Literature - Conceptual Framework

Based on an analysis of the individual pathways to homelessness, Balshem and colleagues designed a comprehensive conceptual framework to depict the relationship between veterans' pre-service, service, and post-service experiences and homelessness (Balshem et al., 2011). Reproduced in Exhibit 2-1, the graphic highlights certain risk factors for veteran homelessness based on the number of times each factor appeared in studies. The model assigns a value in terms of weak or strong correlation of a risk factor to veteran homelessness. The graphic is consistent with the latest available literature and illuminates the complexity and unknowns of an individual's pathway leading to homelessness or chronic homelessness.

EXHIBIT 2-1: RISK FACTORS FOR VETERAN HOMELESSNESS: CONCEPTUAL MODEL



Source: Balshem, H., Christensen, V., Tuepker, A., and Kansagara, D. (2011). A Critical Review of the Literature Regarding Homelessness Among Veterans. Department of Veterans Affairs, Washington D.C.

D. Specific Focus Question Findings

1. Research Area 1: Foundational Knowledge of Risk Factors and Pathways to Homelessness

a. What factors lead to disproportionate veteran homelessness?

Summary. The literature on veteran homelessness converges on at least three risk factors that increase veteran propensity toward homelessness, but fails to find consistent protective factors mitigating homelessness among veterans. The three risk factors are: (1) overall mental health status (correlated with Post-Traumatic Stress Disorder, or PTSD), (2) co-

occurring substance abuse issues, and (3) chronic illness (Shelton 2009, Johnson 1997, O'Toole 2003). Among the protective factors that mitigate homelessness within the general population, including education, marital status and family cohesion, the available literature is conflicting in its findings as they related to the veteran population.

Discussion. The literature on risk factors associated with veteran homelessness relies predominantly on self-reported data, which means that validity of these findings is contingent on the willingness and accuracy of study participants' self-disclosure (Fischer 1991). Among this evidence, however, there is significant agreement that mental health status, co-occurring substance abuse issues, and chronic illness heavily contribute to veteran homelessness (Shelton 2009, Johnson 1997, O'Toole 2003). In particular, exposure to intense or prolonged combat, combat injury, and Military Sexual Trauma (MST), all of which have an impact on a veteran's mental health (particularly PTSD), appear to directly affect an individual's ability to secure a stable income (Shelton 2009). Additionally, the prevalence of mental health, substance abuse, and chronic medical problems among homeless veterans is higher than among housed veterans (Shelton 2009), suggesting that there may be pre-existing variables among certain veterans that make them more vulnerable to PTSD, such as aforementioned military-related trauma, but also pre-existing traumas or conditions that occurred or existed before joining the military (Hamilton 2014). In Hamilton's study, which included a study group of homeless women veterans and a control group of housed women veterans, it was noted that there was a possible confounding factor in these data's statistical validity. Many of the women in the housed group shared the risk factors of the homeless group, but also had been homeless in the near past and were at risk for becoming homeless again in the near future. It is important to note the fluidity of these two

defined sub-groups in order to fully understand the data in many of these comparative studies (Hamilton 2014).

In addition to risk factors, literature on this topic also discusses protective characteristics that should be *expected* to shield veterans from becoming homeless, based on non-veteran homelessness studies. These characteristics include higher levels of education and historic family cohesion. Yet, some studies reviewed found that, among homeless veterans, these predicted protections appear not to have the associated, expected influence (Balshem et al., 2011). Despite higher than average levels of education compared to their non-veteran homeless peers, and a higher rate of past family cohesion (including a higher likelihood to be or have been married), rates of homelessness among veterans are twice that of non-veteran individuals. Reasons for this in the literature are based on conjecture: it may be that unique veteran experiences associated with combat, trauma, and post-deployment readjustment outweigh or cancel out the expected protections associated with a strong family support and history of support (Tessler et al., 2002). Some literature offers further conjecture that, in fact, individuals with a stronger and more stable family experience are actually more likely to be negatively affected by the trauma of deployment (Washington et al., 2010). A similar argument has been made for National Guard veterans, who are often older and more established in their civilian lives, and therefore tend to be less connected to social supports offered by the military in post-deployment. At least anecdotally, National Guard veterans are considered to have more serious post-deployment readjustment difficulties (USDOD Taskforce 2007).

Only a couple of studies relating to veterans have found marital status and education level to be protective factors (from becoming homeless) among their populations of interest (Lee et al., 2013, Hamilton et al., 2014). However, both studies focused on specific sub-groups among the

larger homeless veteran population; homeless and domiciled veterans seeking urgent care at a VA psychiatric unit, and women veterans. Both authors hypothesize that it could be that the positive correlation between marital status and education level can be explained by the context or gender specific factors of the study that was conducted. Regardless, further research is needed, particularly when comparing homeless veterans and non-homeless veterans (as opposed to comparison studies of homeless veterans and their non-veteran homeless peers).

b. **What characteristics are unique to women veterans that contribute to homelessness?**

Summary. Data from the VA suggest that as greater numbers of women in the military return to their communities after their service ends, the rate of homelessness among women veterans is likely to rise. This projection is based on interrelated factors: first, the increased enrollment by females in the military will likely increase incidents of Military Sexual Trauma (MST), which is strongly correlated to PTSD, a risk factor for veteran homelessness; and secondly, women veterans experience higher rates of unemployment compared to male veterans,

Discussion. There are currently 2.2 million women veterans in the United States. The VA projects that the number of women veterans will continue to grow to 2.5 million within the next 10 years. Quantitative data tell us that women veterans are four times more likely to experience homelessness than non-veteran women and that women veterans are disproportionately more at risk for homelessness than their male peers (Hamilton et al., 2014). While homeless veterans are predominantly men (90.2 percent), women veteran rates are at 9.8 percent compared to their 7.2 percent share of the total veteran population (Perl 2013). Women veterans also have worse employment rates than their male counterparts. Recent Bureau of Labor Statistics data show an increase in overall rates of women veteran unemployment from 4.6

percent in January 2014 to 6.2 percent in January 2015 (compared to decreases for male veterans from 5.7 percent in January 2014 to 5.1 percent in January 2015).

In a study among homeless women veterans in 2010 who received VA services, 39.1 percent of them were victims of MST (Perl 2013). The VA uses the term Military Sexual Trauma (MST), specifically defined by public law, to refer to sexual assault and to repeated, threatening sexual harassment occurring during military service. MST is conceptualized within an occupational exposure framework as a duty-related hazard and, therefore, sexual assault and sexual harassment are grouped together. The survey also found that women were the victims of 95 percent of sex crimes reported in the military, and female victims of MST are nine times more likely to suffer from PTSD than non-MST victims (Perl 2013). Perl suggests that as greater numbers of women in the military return to their communities after their service ends, the rate of homelessness among women veterans is likely to rise. This is based on a chain of correlations: increased enrollment by females in the military, high current and past rates of MST (reported by one in every five women veterans), correlations between MST and PTSD, and correlations between PTSD and veteran homelessness.

In 2013 and 2014, Hamilton conducted a rigorous structured qualitative ethnographic study, which compared homeless and housed women veterans. Hamilton argues that “gender and the military are both social institutions that may act in combination to create gendered social roots of homelessness that are particular to women” (Hamilton et al., 2014). The study data identified characteristics that are specifically associated with homelessness among women veterans: unemployment, disability, poor overall health, screening for an anxiety disorder or PTSD, and a history of MST. Hamilton reported that the number of homeless women veterans doubled between 2006 and 2010 (Hamilton et al., 2014).

Evidence suggests that sexual assault from before and during military service is associated with women veteran homelessness (Washington et al., 2010, Hamilton et al., 2014). In a study of 581 homeless women veterans, Tsai et al. (2011) found that 67 percent of the women reported having experienced rape (32 percent of the trauma was inflicted by a family member and 42 percent occurred while in the military). Multiple studies report an association of sexual abuse with increased risk of anxiety, depression, and poorer general health, all of which are considered risk factors for PTSD, substance abuse, disrupted social networks, and employment difficulties—all of which, in turn, are risk factors for homelessness (Hankin et al., 1999, Murdoch et al., 1995, Kimerling 2010, Suffoletta-Maierle 2003, Benda 2006). Awareness of MST has significantly increased over the past decade, but the evidence on MST prevalence varies dramatically across sources. Two studies in the 1990s cite 14 percent (Murdoch 1995) and 23 percent (Hankin et al., 1999) of women veterans in study samples reporting attempted rape, while a 2003 study (Murdoch et al., 1995) reports that 90 percent of women veterans in a sample reported sexual harassment while in the military. Inconsistencies in study inquiry questions explain some of this variation (“rape” vs. “attempted rape” vs. “sexual harassment”). Willingness to self-report based on increased public awareness of the problem may also explain the variation (Hamilton 2014). Sexual and physical abuse are typically underreported both inside and outside of military settings, and given the fact that non-military-related sexual abuse cannot be technically connected to service in the way it’s reported, there is an especially high risk that it remains underreported among veterans (Suffoletta-Maierle 2003).

The likely cumulative effects of abuse on an individual’s resiliency, coupled with the underreporting of sexual abuse, make it difficult to determine the magnitude and nature of MST’s relationship to homelessness. Further, given the range of associated outcomes, it may be

that MST, like combat exposure, exerts greater influence on intermediate outcomes, such as PTSD, than on homelessness itself.

Protective factors mitigating risk of homelessness for women veterans include being a college graduate and being married. While the correlation between these protective factors and homelessness among male veterans is debatable, women veterans who have received a degree or are married are less prone to homelessness (Hamilton et al., 2014). A likely reason for the strong protective effects of marriage for women veterans is because they are so much more likely to be the sole caregiver to their children, if unmarried or divorced. According to the Department of Defense, in 2010 more than 30,000 single mothers had been deployed to Iraq and Afghanistan, and more than 40 percent of active duty women had children. In the 2010 CHALENG report, the VA and community providers indicated accessible and affordable childcare as the most necessary and yet unmet need of veterans. Unstable childcare may also be related to unemployment for women veterans as well, especially among single mothers who have a reduced support network. Rigorous study is necessary to explain the interactions between marital status, parental status, unemployment, and homelessness for women veterans.

It is important to note, as a confounding factor, that women who have served in the military may be less likely to self-identify as veterans, and may have concerns for their safety and security that outweigh the potential benefits of services offered specifically to veterans. A GAO study in 2010 highlighted the failure of VA medical centers to consistently provide safe and private spaces and gender-specific care to women (GAO 2010). VA's Homeless Providers Grant and Per Diem Program (GPD) is offered annually (as funding permits) by the Department of Veterans Affairs Health Care for Homeless Veterans Programs to fund community agencies providing services to homeless veterans. The purpose of the GPD Program is to promote the

development and provision of supportive housing and/or supportive services with the goal of helping homeless veterans achieve residential stability, increase their skill levels and/or income, and obtain greater self-determination. GPD-funded organizations are reimbursed for the daily cost of housing a homeless veteran. According to a 2012 audit by the VA Office of Inspector General, 31 percent of GPD facilities did not address specific services or safety needs of women clients, including secure, separate living spaces, and a staff competent in handling trauma issues (VHA OIG 2012). If transitional programs for veterans cannot accommodate the unique needs of women veterans, women veterans may be less likely to access or even attempt to access services geared specifically to veterans, which may in turn increase their risk for homelessness. Also, if women who are veterans chose not to self-identify as veterans, important data may be missing from analysis.¹³

2. Research Area 2: Correlations and Trends

a. What trends or correlations can we identify related to chronic homelessness in the veteran population?

Summary. Veterans are more likely than non-veterans to experience chronic homelessness because with greater frequency they experience disabling physical and psychological conditions, often incurred or exacerbated by their time in the military, all of which are linked to continued homelessness. Further, this cycle contributing to chronic homelessness has increased over time because of the extensive recent military conflicts and deployment strategies and Military Sexual Trauma (MST) among a growing women veteran population.

¹³ Two additional reports identified by a TWG members as this study was being concluded that examine issues related to homeless female veterans (not reviewed for this study) are: Shaheen et al., 2013 and National Veterans Technical Assistance Center (2013). A full citation and a weblink to these reports are provided in Appendix A.

Discussion. A “chronically homeless” individual is defined federally as “either (1) an unaccompanied homeless individual with a disabling condition who has been continuously homeless for a year or more, or (2) an unaccompanied individual with a disabling condition who has had at least four episodes of homelessness in the past three years” (HUD 2007).

Childhood risk factors such as inadequate care from parents, experience with the foster care system, and prolonged periods of being a runaway youth are typically and consistently associated with adult chronic homelessness (Shelton 2009, Koegel 1995, Susser 1991). For veterans these factors also contribute to risk of homelessness but, as highlighted above, veterans demonstrate unique risk factors that make them even more vulnerable to homelessness, most notably the presence of PTSD. Two variables that are most commonly cited as a strong predictor of homelessness – childhood neglect and lack of a consistent guardian relationship – are not as strong predictors for veteran homelessness. Additionally, by definition a “chronically homeless” individual has a “disabling condition” that implies that homeless veterans are more likely than their non-veteran homeless peers to receive the title “chronically homeless” because of injury (psychological and physical) sustained while in the military.

Homeless veterans and non-veterans tend to have similar rates of alcohol and substance abuse (Winkleby & Fleshin 1993, O’Toole et al., 2003). While drug and alcohol abuse are widely assumed to be a high risk factor for homelessness, research is inconclusive on the subject. Inherent challenges to studies on the topic are that they rely on self-reported data and do not consistently or accurately distinguish between current and chronic/lifetime hazardous drinking practices (Erbes 2007). Among the veteran population, studies do not typically distinguish between veterans’ predisposition to substance abuse problems (i.e., exhibiting tendencies prior to

military service) and veterans that dramatically increase their substance use during or after military service (Erbes 2007).

The relationship between homeless veteran status and veteran incarceration is significant. Metraux et al. (2008) found in their review of the literature that inmates of local jails, as opposed to state or federal prison inmates, had a cyclical pattern of intermittent homelessness and incarceration leading to prolonged residential instability, but not “chronic homelessness” because they are often not labeled as having a “disabling condition.” In contrast, because state and federal prisons are often located remotely from inmates’ local communities, social ties that may be necessary to support successful integration upon release are often disrupted. Inmates of prison, therefore, are more likely to become homeless within 30 days of release and remain homeless over longer periods of time (Metraux 2008). In addition to factors that put prisoners at risk for subsequent and/or chronic homelessness, the review points to the “criminalization” of many of the activities of the homeless as factors increasing their risk for incarceration. This leads to what the review describes as an “‘institutional circuit,’ where a series of institutions provide sequential stints of housing in place of a stable, community-based living situation” (Metraux 2008).

The literature suggests that risk factors for chronic homelessness have not changed over time, but that certain risk factors have become more important. Military trauma has always been a risk factor for the development of mental illness, which also contributes to veteran chronic homelessness. Historically, the intermediary effect of exposure to trauma has been PTSD, but more recently MST has become an important and prevalent risk factor associated with homeless women veterans. Evidence also exists suggesting that repeated tours of duty negatively affect an individual’s ability to successfully readjust to civilian life. Recent combat wars in Iraq and Afghanistan are characterized as “high-redeployment” wars whereby individuals are deployed

repeatedly to combat areas over a lengthy period of time. Correlations between geography and veteran homelessness also exist, and while the data is not specific to “chronically” homeless veterans it could be informative for future research models. Homeless veterans (similar to the overall homeless population, and probably chronically homeless populations) are concentrated in certain parts of the country. Almost half of homeless veterans on a given night are located in four states: Florida, New York, California, and Texas. Meanwhile only 28 percent of all veterans reside in those same states. The share of homeless veterans located in the densest urban areas (or principal cities) is more than twice that of all veterans, 72 percent compared to 31 percent (HUD Supplemental 2009).

b. **What are the differences in duration of homelessness and identifiable causes/contributing factors of homelessness across generations of veterans (Vietnam vs. Iraq/Afghanistan)?**

Summary. The literature suggests that the Iraq/Afghanistan-era veterans may be at a higher risk for homelessness than previous generations of veterans. Because of the deployment conditions and recruitment strategies of the recent conflicts, the returning veterans are at higher risk for sustaining the mental health problems correlated with homelessness compared to prior war generations. Between 15 and 17 percent of veterans returning from Iraq and Afghanistan are screening positive for mental health-related trauma, including PTSD, and veterans returning from Iraq are seeking mental health services at higher rates than veterans returning from prior conflicts. If these predictive factors are accurate in predicting homelessness, then it is anticipated that there will be proportional increases of homelessness among the recently separated veterans.

Discussion. If the experiences of the Vietnam War are any indication, the risk of becoming homeless continues for many years after service. One study found that after the

Vietnam War, 76 percent of Vietnam-era combat troops and 50 percent of non-combat troops who eventually became homeless reported that at least 10 years passed between the time they left military service and when they became homeless (Perl 2013). Currently, about 47 percent of homeless veterans are Vietnam-era. A contributing factor to homelessness, mental health status has been a concern for troops returning from Iraq and Afghanistan. According to one study, between 15 and 17 percent of returning troops screened positive for depression, generalized anxiety, and PTSD (Tanielian & Jaycox 2008). Veterans returning from Iraq are seeking mental health services at higher rates than veterans returning from prior conflicts (Tanielian & Jaycox 2008). Research also found that the length and number of deployments of troops in Iraq result in greater risk of mental health problems (Tanielian & Jaycox 2008). Access to VA health services could be a critical component of reintegration into the community for some veterans, and there is concern that returning veterans might not be aware of the VA health programs and services available to them (VHA OIG 2012).

According to research, factors that predate military service also play a role in homelessness among veterans. A study by Rosenheck and Fontana (1994) found that three pre-service variables present in the lives of Vietnam-era veterans had a significant direct relationship to their subsequent homelessness: (1) exposure to physical or sexual abuse prior to age 18, (2) exposure to other traumatic experiences, such as experiencing a serious accident or natural disaster, or seeing someone killed, and (3) placement in foster care prior to age 16. Further research is needed to correlate these pre-enrollment factors with a predisposition or proclivity to join the military, or whether Armed Forces recruitment standards in times of war surges draw more heavily on individuals with high risk pre-enrollment characteristics. Qualitative data suggest that women veterans frequently join the military as a means of “escape” from abusive

situations or as a means for upward mobility in society (Hamilton 2014). So far, quantitative data are too sparse to test these conjectures.

3. Research Area 3: Review of Current Intervention and Support Programs and Practices

a. What is the evidence on promising practices in supported housing, such as Housing First approaches?

Summary. Literature on the promising practices and pitfalls of supported housing approaches, such as Housing First, suggests that adding vouchers to intensive case management reduces the risk of returning to homelessness, enhances quality of life, and may contribute to reduced alcohol and drug use. The studies suggest that simply securing housing is not enough to ensure successful community tenure for a population of homeless people with psychiatric problems, addictive problems, or both. Rather, the housing support must be embedded within a structure of wraparound resources to ensure veterans' long-term housing stability.

Discussion. An important study on interventions for homeless veterans involved an experimental evaluation of the collaborative Housing and Urban Development-Veterans Affairs Supported Housing (HUD-VASH) initiative. Over a three-year period, intensive case management without vouchers was compared to immediate access to rent subsidies through housing vouchers in combination with intensive case management. The latter was shown to significantly reduce days of homelessness by 36 percent (O'Connell et al., 2008). The results of this study suggest that adding vouchers to intensive case management, in addition to increasing the likelihood of obtaining housing, can help significantly reduce the risk of returning to homelessness, enhance quality of life, and may provide a buffer to increased alcohol and drug use and expenditures on substances over time. The study suggests that simply obtaining housing

is not enough to ensure successful community tenure for a population of homeless people with psychiatric problems, addictive problems, or both—resources must be in place to help ensure that housing is maintained (O’Connell et al., 2008). Future research is needed to explore whether vouchers alone (without intensive case management) would achieve similar results.¹⁴

This study helped inform the HUD-VASH Housing First pilot program, which between 2010 and 2013 helped 339,000 veterans and their children to secure housing (Fischer 2013). Between 2010 and 2013, the number of veterans experiencing homelessness dropped by 24 percent, and for veterans stably housed, there was an overall decrease in VA healthcare costs of 32 percent. The HUD-VASH pilot (2010-2013) enlisted 14 VA Medical Centers to participate in distributing 700 HUD-VASH vouchers in a “Housing First” approach to help chronically homeless veterans.

In the 2010-2013 HUD-VASH Housing First pilot, more than 90 percent of voucher recipients were male, and most were Vietnam or post-Vietnam veterans aged 45-64 years. Many (78 percent) were diagnosed or previously diagnosed with a mental illness or substance abuse condition. Upon admission, it took an average of 136 days for veterans to move into permanent housing, with lack of a security deposit and negative credit history presenting as the most persistent common barriers to veterans securing housing independently. In the 12 months following receipt of a housing voucher as part of the pilot, 84 percent of recipients were still living in permanent housing. Among the 115 who left the program, 37 percent moved on to more independent living arrangements; 20 percent were discharged to an institutional setting; 30 percent disengaged and returned to homelessness; and 13 percent died, most of natural causes.

Among the 700 served, the number of emergency room visits decreased by 27 percent; acute

¹⁴ The 2008 O’Connell study of the HUD-VASH initiative does not include a cost-benefit study. A cost-benefit analysis of vouchers and intensive case management interventions such as those tested under the HUD-VASH initiative would also be helpful addition to the literature.

inpatient hospitalizations decreased by 33 percent; and total number of hospital bed days declined by 71 percent. Overall, the VA realized a 32 percent decrease in healthcare costs once veterans became stabilized in permanent housing. Based on this data, the VA has officially adopted the “Housing First” approach for its homeless programs (Montgomery et al., 2014).¹⁵

A 2011 study (Tsai et al.) used data from the HUD-VASH program to examine if individuals can obtain housing without a voucher and whether greater employment earnings or better clinical outcomes were associated with such housing success. Data were used for an observational study that compared participants who at 3 months were: (1) independently housed without a voucher (n = 96), (2) independently housed with a voucher (n = 93), (3) housed in another individual’s place (n = 60), or (4) not yet housed (n = 170). Participants who obtained independent housing without a voucher worked more days and had higher employment income than those who did use a voucher. Based on these results, the authors suggest that housing vouchers may act as a disincentive to finding employment. About one-third of participants who lived in independent housing without a voucher had others living with them. While it is possible that living with others could inhibit an individual’s motivation to find independent housing, the authors argue that some elements of cohabitation (including sharing rent and living amidst peers) could be beneficial. While very few homeless services directly encourage veterans to live together, shared housing is often more affordable and has not been associated with negative effects on health or employment. The study suggests that clients should be offered various modes of access to supported housing, including the possibility of sharing housing with other veterans.

¹⁵ Montgomery et al., notes that further rigorous study is needed of the HUD-VASH program. The results reported in the Montgomery et al., study are not based on an experimental research design (with random assignment of participants to treatment and control groups) or a quasi-experimental design. Hence, it is not possible to determine impacts of vouchers and case management services provided under the intervention (i.e., no causal inferences are possible).

Beyond the HUD-VASH program, community organizations such as DOL's HVRP grantees can tap into the U.S. Department of Veterans Affairs Grant and Per Diem (GPD) program, which encourages a Transition in Place (TIP) model of support for homeless veterans. The TIP housing model offers residents housing in which support services transition out of the residence over time, rather than the resident. This leaves the resident in place at the residence and not forced to find other housing for 24 months or less. The concept of TIP is for each service agency to convert existing suitable apartment-style housing where homeless veteran participants would receive time-limited supportive services, optimally for a period of 6-12 months but not to exceed 24 months, into a permanent housing outcome for the participant. Upon transition housing/program completion the veteran must be able to "transition in place" by assuming the lease or other long-term agreement that enables the unit in which he or she resides to be considered the veteran's permanent housing (VA 2012). The TIP model is not appropriate for every homeless veteran, particularly those in need of specialized and comprehensive case management (NCHV Best Practices for HVRP Grantees: Housing Services).

For veterans with comprehensive needs, HUD-VASH funding can be more appropriate because it is inclusive of wide-ranging supports in addition to housing. However, in many cases, veterans who receive a HUD-VASH voucher are not eligible to enroll in HVRP because they are no longer considered homeless. Under the 2009 HEARTH Act, veterans are no longer considered chronically homeless after 90 days in a transitional housing program. If a veteran is enrolled in HUD-VASH without consideration of their need for job training and employment (a main focus of HVRP), that individual veteran may not receive needed services. As a result, HVRP and HUD-VASH programs must quickly and effectively understand the initial needs of a homeless veteran before making decisions about where to initially enroll them. HVRP grantee

organizations, according the NCHV Best Practice guide, must maintain strong relationships with HUD-VASH liaisons within their VA Medical Center and transitional and permanent housing contacts within the broader community to ensure their clients receive the most appropriate sequence of programming and services.

In addition to navigating between HUD-VASH and GPD program funds, the HVRP grantees must also coordinate among funds related to Continuum of Care (CoC) services and Supportive Services for Veteran Families (SSVF) programming. The CoC program (created by the HEARTH Act) consolidates several formerly separate programs into one large program in an effort to streamline eligibility and access. Funds from the CoC program can cover the costs of permanent housing supports for persons with disabilities, rapid re-housing or relocation services, transitional housing and supports for up to 24 months, supportive and referral services to sheltered and unsheltered individuals, homeless information management systems, and homeless prevention services (HUD Exchange CoC Program Eligibility). SSVF funds are intended to help very low-income veteran families to maintain housing stability. According to the Best Practice guide, coordinating eligibility between HVRP and SSVF funding takes dedicated program staffs that are cognizant of the limitations and spending restrictions on both programs.

b. What evidence exists on promising practices related to job search assistance, job retention, and training?

Summary. HVRP grantees with the most successful outcomes for their clients, in terms of job attachment and retention, effectively deliver case management, career counseling, and job development activities alongside support services. Job retention over the longer term improves when individuals are provided work experience during the program. Also, post-employment support is an important factor, including regular check-ins with employed veterans to

troubleshoot the first week on the job, the first 90 days on the job, and to coach individuals on communication, motivation, and retention/advancement goals.

Discussion. NCHV’s three rounds of HVRP best practice reviews, covering 2007, 2011, and 2012, describe a package of employment supports as part of the service menu for homeless veterans.¹⁶ HVRP grantees with the highest rates of job attachment and retention for their clients combine case management, career counseling, and job development activities with support services such as access to clothing, transportation, life skills training, assistance with legal issues, and transitional housing. These promising practice reviews profile the HVRP programs and their service components, and as noted previously, selected HVRP sites for profiling based on highest program outcomes on key measures of performance (e.g., job attachment and job retention). Effective HVRP grantees immediately engage clients with a “job coach,” and use an individualized service delivery approach to job preparation to ensure that effective job development occurs that benefits the client as well as fits the need of a prospective employer. This requires staff members with two sets of skills: case management and client coaching, as well as employer outreach and ability to assess a “best job fit.” Client services include “soft skill” training and preparation (punctuality, appearance, responsibility, etc.), as well as occupational skills training contingent on the job opportunities and best fit of a client to a potential job. Some HVRP grantees integrate military-style social and leadership structures into a college campus environment. Individual training plans seem to be a common tool among

¹⁶ As noted earlier in this review, “best practices” identified for homeless veterans and HVRP participants for the most part are not based on rigorous (experimental) research studies (i.e., randomized controlled trials, RCTs). Thus, “best practices” cited in the literature and in this review should be viewed with considerable caution and have not yet been subjected to the highest tier of rigorous (evidence-based) experimental study established as the “gold standard” by the U.S. Department of Labor. More rigorous, experimental study (i.e., RTCs) is needed, with a particular focus on determining impacts of HVRP services on homeless veteran employment, housing, and other associated outcomes.

HVRP sites. These tools help the case manager and client co-develop a plan for career building, which cultivates a client's sense of ownership of his or her pathway to reintegration.

Early assessment of client abilities and preferences for certain types of jobs also seem important to the success of employment services. Various assessment tools are used across the cohort of best practice grantees, but all seem to cover vocational assessment as well as interest assessments. Early intensive job search training is also common across sites, including search techniques, resume-building workshops, coaching on talking points related to unique homeless veteran gaps in employment records, and mock interviews.

Many HVRP sites specifically focus on short-term, specialized training and occupational certificates, and, in the best cases, regularly cross-check labor market information with employer feedback to ensure training meet actual demand. Special work-based projects within the community (such as housing restoration or retrofitting for energy efficiency), or often within the HVRP program itself (such as working in retail at a Goodwill organization or in the cafeteria on-site) also seem to be a common strategy for immediately engaging veterans in work experience while allowing hands-on coaching around work skills and soft skills. These work-based projects also immediately provide veterans with earning capacity and are correlated with longer-term job retention, based on self-reports by HVRP grantees.¹⁷

Finally, there is strong association between job retention and post-employment supports including regular check-ins with employed veterans to troubleshoot the first week on the job, the first 90 days on the job, and to coach individuals on communication, motivation, and retention/advancement goals.

¹⁷ A Technical Work Group (TWG) member observed there is some evidence to the contrary on the effectiveness of work-based projects, see Penk et al., 2010.

c. **What evidence exists on promising practices related to supported employment programs?**

Summary. No evidence-based studies on supported employment programs for homeless veterans were identified during the time of this review. However, researchers have identified a theoretical model for effective supported employment programs, including a discrete set of critical components to improve employment status, employment compensation and employment retention.^{18 19}

Discussion. The term “supported employment” traditionally refers to a service provision used to assist persons with disabilities participate in the labor market, helping them find meaningful jobs, and offering ongoing professional supports that help them maintain gainful employment. No research-based studies were located during this literature review that directly assessed supported employment for homeless veterans. A 2001 report “Implementing Supported Employment as an Evidence-based Practice” (Bond et al. 2001) may present some useful findings, but it should be noted that this summary of evidence-based practice is based on supported employment for individuals with severe mental illness, not veterans or homeless individuals. It is therefore used in this literature review as indirect evidence for the model.

According to Bond et al.:

...Supported employment for people with severe mental illness is an evidence-based practice, based on converging findings from eight randomized controlled trials and three quasi-experimental studies. The critical ingredients of supported employment have been well described, and a fidelity scale differentiates supported employment programs from other types of vocational services. The effectiveness of supported employment appears to be generalizable across a broad range of client characteristics and community settings.

¹⁸ A TWG member noted there are some evidence-based studies on supportive employment for veterans, including in some cases homeless veterans (note: full citations for these studies are included in Appendix A): Davis et al., 2012; Ottomanelli et al., 2013; Resnick et al., 2007; Rosenheck et al., 2007; Sinnott et al., 2014; and Twamley et al., 2013.

¹⁹ A TWG member noted there is also literature about using supported employment as an intervention for homeless adults (non-veterans): Burt, 2012; Gao et al, 2009; Marrone, 2005; Quimby et al., 2001; and Pickett-Schenk et al., 2002.

This literature review does not summarize any detail on the eight randomized control studies and three quasi-experimental studies referenced by Bond et al., but instead suggests that based on Bond's research there is a set of critical components that makes supported employment an effective approach to improved employment status, employment compensation, and employment retention. These criteria include:

- Commitment by program staff to competitive employment as an attainable goal for clients, rather than placing them in non-competitive work-like activities (sheltered workshops, or similar activities);
- Rapid and immediate job search, as opposed to lengthy pre-assessment and training before beginning the job search activity;
- Strong assessments of client preferences, strengths, and work experiences in order to inform job fit and placement;
- Follow-along supports that are maintained indefinitely; and
- Integration with full mental health and case management supports.

These criteria may be similar to some of the same defining criteria of high-performing HVRP grantees. The HVRP grantees with higher-than-average outcomes have adopted a job development approach for their homeless veteran clients with staff resources dedicated to: understand the competitive labor market; customize training and preparation accordingly for each homeless veteran client based on the labor market demand; approach employers directly to identify and deeply understand job openings and the skills, abilities and characteristics needed in a job applicant; client assessment of interests, strengths, and skills; and following up regularly with employers and veteran hires to ensure longer-term retention in the job.

Another study included here represents one of the most recent studies focusing on the efficacy question of supported employment outcomes (Ottomanelli et al., 2013). Like the Bond et al. study, this study did not focus on homeless veterans explicitly. It examined the impact of participation in a supported employment program on employment and health-related quality of life for veterans with spinal cord injury. Ottomanelli et al. found that employment had a positive

effect on an individual’s ability to participate in social relationships, move about in their home and community, and spend time in productive and normal roles, among 157 veterans with spinal cord injuries. While the results indicated positive impact of supported employment, the authors concluded that these findings did not reflect a statistically significant difference between supported employment intervention and “treatment as usual.”²⁰

d. What evidence exists on promising practices related to aligning and streamlining services available to veterans across multiple programs (with different federal funding, performance criteria, eligibility requirements, and sequence of service requirements)?

Summary. According to the literature, favorable outcomes for homeless veterans, in terms of employment and stability, are correlated with formal organizational collaboration mechanisms between veteran assistance programs and community-based organizations, such as Memorandums of Understanding (MOUs). Success also depends on program staff continually scanning, assessing, and cultivating relationships with the organizations in their community that can provide very specific needed services of their clients. Best practice programs reference calculated decision-making around what to provide in-house versus when to refer clients to outside partners.

Discussion. Best practices across HVRP grantees and a small sample of Homeless Female Veterans/Homeless Veterans with Families Program (HFV/VF) and Incarcerated Veterans Transition Program (IVTP) grantees reveal a wide array of strategies to align and streamline services available to veterans across multiple programs within a community. The HVRP grantees with the strongest outcomes for homeless veterans in terms of employment and

²⁰ The treatment as usual (TAU) condition typically involved referrals to vocational rehabilitation (VR) services outside the VA Spinal Cord Injury (SCI) Center. In the Ottomanelli et al. study, at the interventional sites, subjects were randomized without stratification or adjustment to Supported Employment (SE) or treatment as usual (TAU-IS). At observational sites, the SE condition was not available and all subjects received treatment as usual (TAU-OS).

stability highlight formal collaborative mechanisms such as MOUs between programs and community-based organizations. Perhaps more importantly, success depends on HVRP program staff continually scanning, assessing, and cultivating relationships with the organizations in their community that can provide very specific needed services of their clients. Across the approximately 60 best practice reviews, among all the best practice HVRP grantees, they each partnered with between 6 and 24 different service providers to cover the array of needs across their client base. Examples of essential program partners include (names of these programs may not be the same across all grantee sites):

- VA Homeless Program's Compensated Work Therapy Programs
- State Departments of Labor
- State Workforce Agencies (VETS, Wagner-Peyser Act, WIA/WIOA funded)
- Departments of Vocational Rehabilitation
- Departments of Criminal Justice
- Veterans Service Organizations
- State Housing Agencies
- State and local disability agencies
- U.S. Department of Housing and Urban Development programs
- U.S. Department of Labor programs
- Local veterans centers
- State or local legal service providers or centers
- National Guard bases and organizations
- Community-based organizations (such as Goodwill International and Salvation Army)
- Other education and training institutions
- Mayors' offices
- Opportunity Industrialization Centers (OICs)
- Operation Stand Downs

Best practice profiles suggest that the level of understanding of distinct roles and responsibilities across partner programs is quite sophisticated, and that clarity in roles and responsibilities results from years of partnership development, often pre-dating HVRP funds. Best practice compendiums suggest that high-performing HVRP grantees require high levels of cross-program trust and shared credibility in order to respond quickly to client needs, work

around or through complex program eligibility rules (and therefore funding mechanisms), and understand how to navigate complex, often restrictive, sequence of service requirements of each program.

Most HVRP best practice profiles reference some decision-making process or turning points in their decision-making process around what to provide in-house versus when to refer clients to outside partners. As an organization evolves in this arena, in-house services tend to consist of daily behavioral case management, financial literacy, self-determination counseling, peer support meetings, job training, and job development activities. In some cases, mental health counseling and addiction therapy are provided in-house, but this varies greatly. HVRP organizations tend to play strong oversight and connecting roles for transitional housing placement and needed legal services. Access to healthcare is contracted and referred out to VA hospitals and other veteran related healthcare providers.

E. Conclusions

This literature review confirms that a set of risk factors for homelessness is associated with veteran status. A core set of these factors is the same for non-veteran homeless individuals, including childhood family abuse, neglect and/or dysfunction; having lived in foster care; and the presence of mental illness. For veterans however, these factors may be exacerbated by combat exposure and/or MST, both of which increase the risk of PTSD. These factors combined with any combat-related disabilities increase the overall chance of veterans of entering a state of homelessness. Structural barriers, such as lack of access to transitional and permanent housing and a stable income, further heighten the risk of homelessness. The strength of any of these

associations remains unsubstantiated by scientifically rigorous standards, such as U.S. DOL's CLEAR guidelines. Specific recommended areas for further research include:

- **Study Area #1: Establishing causal relationships between veterans' pre-existing risk factors and homelessness:**
 - Additional studies are needed that distinguish between veterans' predispositions, such as a predisposition to substance abuse problems (i.e., exhibiting tendencies prior to military service) and veterans manifesting issues during service.
 - Deeper analysis is warranted that examines military recruitment standards beyond high school diploma status and aptitude test scores that might indicate predispositions for becoming homeless post-deployment.

- **Study Area #2: Explaining women veterans' disproportionately high rates of homelessness:**
 - Comparison studies are needed of women veteran homelessness to male veteran homelessness, as well as female non-veteran homelessness to assess like and unique variables.
 - More rigorous study needs to be conducted on risk factors unique to women veterans, with an effort to catch the part of the population who chooses not to self-identify as a veteran and with the goal of identifying preventative strategies and services for this subpopulation of veterans.

- **Study Area #3: Identifying evidence-based veteran support services:**
 - Rigorous studies and analyses are necessary to establish credible and evidence-based definitions of "best practices" related to supported employment, training and education, Housing First and other housing assistance initiatives, and coordination of services (including funding and eligibility standards) across programs.
 - Examination of how the definition of "veteran" (which sometimes excludes those that have not served on active duty or discharged under conditions other than dishonorable) is recommended and how these parameters may exclude a key population from study or resources.
 - Evaluation is needed of the implications of labeling someone as "chronically homeless" and veterans' predisposition for falling in this category as a population that is more likely to have documented "disabling conditions."

- **Study Areas #4: Identifying evidence-based veteran-specific risk factors for homelessness:**
 - Further research is needed that compares homeless veterans and non-homeless veterans, as well as comparison studies of homeless veterans and their non-veteran homeless peers.
 - Exploration is needed of how policy change could have preventative qualities, such as deployment strategies that minimize PTSD and on-the-ground management that addresses MST.

- Critical junctions should be identified in the homeless pathway where intervention is effective.
- Further examination of how military service not only predisposes individuals for homelessness because of inflicted mental trauma (PTSD/MST), but also potentially because of “disabling conditions” and chronic physical pain associated with injury sustained during combat is recommended.
- Further study is warranted on whether marital status (current, past) and/or family cohesion are protective factors for veterans against homelessness.
- Further study is needed on whether higher education is a protective factor against homelessness (e.g., including attendance in two- and four-year programs, attendance in trade schools and certificate-based programs, and if a degree or certificate earned makes a difference) and how educational status correlates with historic family wealth and class distinctions as a co-protective factor.
- Further rigorous study is necessary in order to examine the nature of veteran substance abuse and its correlation to homelessness and chronic homelessness.
- Further rigorous study that compares generations of homeless veterans to each other to determine specific risk factors and support needs of different sub-populations of veterans is recommended.

CHAPTER 3: FINDINGS FROM SITE VISITS WITH HVRP GRANTEES

This chapter presents findings from the 12 site visits conducted as part of this study. The chapter first discusses how HVRP grantees were selected for site visits and highlights key characteristics of the sites. It then provides an overview of HVRP participant flow through services, including how participants are recruited, the intake and assessment process, the key types of services provided to HVRP participants (including training, job placement and retention services, housing and supportive services, and case management services), collaboration/partnerships, program staffing, and data reporting.

Study findings in this chapter are primarily based on site visits conducted to 12 HVRP grantees in Spring/Summer 2015, supplemented where appropriate with analysis of VOPAR data.²¹ Two-person research teams spent two days at each selected grantee site, using a semi-structured interview guide to conduct 45-minute to three-hour interviews with HVRP program administrators and staff (e.g., case managers, vocational specialists, job developers, housing coordinators, workshop instructors, and intake specialists), as well as staff from key partner agencies. Overall, the site visit teams conducted a total of over 100 interviews with HVRP and partner agency administrators and staff. Topics covered during the interviews included various subjects and issues related to the grantee's organizational structure, program objectives, participant recruitment and flow through services, specific services and activities provided, partnering arrangements, and data collection systems and efforts. This section summarizes key

²¹ The criteria used in selecting the 12 grantees is discussed in the next section of this chapter. VOPAR analyses in this chapter are limited to the 12 grantee sites visited; see Chapter 4 for more extensive analyses of VOPAR data for all HVRP grantees for a five-year period, including regression analyses of factors related to participant employment outcomes.

findings from the interviews conducted and the program information collected during these site visits.

A. Overview of HVRP Sites Visited

1. Site Selection Criteria and Characteristics of HVRP Sites Visited

With guidance from VETS and CEO, 12 HVRP grantees were purposively selected for site visits from among the 156 HVRP grants funded during PY 2014. The initial key site selection criterion was to include grantee sites from among the three main categories HVRP grants, as follows: (a) urban grants (include eight sites for visits); (b) non-urban/rural grants (two sites), and; (c) grants targeted on serving females and/or families (two sites). In selecting grantees for visits within these three grant categories, the research team sought balance and variety among the 12 grantees selected for visits:

- grantees representing all major regions of the country (i.e., at least one grantee from each DOL region);
- at least two grantees serving an overlapping service area (i.e., two grantees serving the Los Angeles metropolitan area were among the grantees selected for visits);
- grants led by a variety of organization types, including Workforce Investment Boards (WIBs), state/local workforce agencies, large national nonprofit organizations, for-profit firms, veterans service organizations, and local community-based or faith-based organizations; and
- at least one site with potential access to Unemployment Insurance (UI) wage record data for HVRP participants to facilitate an initial exploration of how performance data submitted on a quarterly basis by grantees through the VET's VOPAR system compares with employment outcomes when UI wage record data are used (see Chapter 4 for the exploratory analysis).

Grantee performance on quarterly and annual performance was not considered in the site selection.²²

Given the site selection criteria used, as shown in Exhibit 3-1, the 12 HVRP grantees selected for site visits represent a fairly diverse set of the grantees funded in Program Year (PY) 2014 in terms of types of organizations and other grantee characteristics.²³ As shown in the exhibit, the sites selected were from 11 states, spread across all regions of the country. Ten of the 12 grantees visited were nonprofit organizations; one grantee was a for-profit firm (America Works); and the final grantee was a state veterans agency (Washington State Department of Veterans Affairs). The total number of years of HVRP funding for grantees ranged from two to 17 years, with two HVRP grantees receiving funding as early as PY 1998. At the time of the visits, the majority of grantees had received 12 or more years of funding, although three grantees were operating their first HVRP grants (and had received only two prior years of HVRP funding).

Annual organizational budgets of the 10 nonprofit grantees visited ranged from \$2.7 million to nearly \$39 million; the one state government agency visited (Washington State DVA) had the highest annual budget, at \$112 million. As shown in Exhibit 3-1, for nearly all grantees, HVRP funding accounted for a relatively small proportion of the grantee's overall annual budget. HVRP grant amounts ranged from \$120,000 to \$300,000 (averaging \$265,589), with organizations serving urban areas most commonly awarded grants of \$300,000. With the exception of Inner Voice (where HVRP funding accounted for 10 percent of the agency's annual budget), HVRP accounted for less than 2.5 percent of the budget for all other grantees. Thus, HVRP grant funding represented a fairly small share of each grantee organization's overall

²² One grantee in the original site selection was unable to participate in the study (Anne Arundel Workforce Development Corporation) and was replaced by Veterans Inc. of Massachusetts.

²³ See Appendix B for brief descriptive summaries of each of the 12 sites visited.

EXHIBIT 3-1: OVERVIEW OF HVRP GRANT AND GRANTEE CHARACTERISTICS FOR SITES VISITED

| HVRP Grantee | State | Type of Grant | Type of Organization | Year 1st HVRP Grant Received | Total Years of HVRP Funding | HVRP Grant Amount | Estimated Annual Budget (2014) |
|---|--------------|----------------------|-----------------------------|-------------------------------------|------------------------------------|--------------------------|---------------------------------------|
| New Directions | CA | Urban | 501(c)(3) | 2003 | 12 | \$300,000 | \$6,897,629 |
| Salvation Army | CA | Urban | 501(c)(3) | 2001 | 14 | \$300,000 | \$4,467,678 |
| The Workplace | CT | Urban | 501(c)(3) | 2006 | 9 | \$299,670 | \$21,000,000 |
| Mary Hall Freedom House | GA | Female/Families | 501(c)(3) | 2013 | 2 | \$235,000 | \$4,513,464 |
| Inner Voice | IL | Urban | 501(c)(3) | 2003 | 12 | \$270,000 | \$2,692,419 |
| Mountain Comprehensive Care Center | KY | Non-Urban/Rural | 501(c)(3) | 2013 | 2 | \$162,400 | \$38,754,141 |
| Veterans Inc. | MA | Urban | 501(c)(3) | 2000 | 15 | \$300,000 | \$12,500,000 |
| Easter Seals Greater Washington-Baltimore Region | MD | Female/Families | 501(c)(3) | 2013 | 2 | \$300,000 | \$12,600,000 |
| Minnesota Assistance Council for Veterans | MN | Non-Urban/Rural | 501(c)(3) | 2000 | 15 | \$120,000 | \$5,440,000 |
| America Works | NY | Urban | For-Profit | 2009 | 6 | \$300,000 | N/A |
| American GI Forum National Veterans Outreach Program | TX | Urban | 501(c)(3) | 1998 | 17 | \$300,000 | \$12,000,000 |
| Washington State Department of Veterans Affairs | WA | Urban | State Government Agency | 1998 | 17 | \$300,000 | \$112,000,000 |

funding level, and grantees looked for opportunities to coordinate and leverage HVRP grant funding with other funding sources/programs (both internal and external).

Types of funding, and the extent to which funding came from public or private sources, depended upon the mission, type of organization, and programs operated by the organization. For example, The Workplace, a local Workforce Investment Board (WIB), received about 90 percent of its funding from federal and state sources, particularly the Workforce Investment Act (WIA), H1-B training grants, and SSVF, in addition to foundation support from JP Morgan/Chase and Newman's Own Foundation. Slightly more than half the grantee organizations directly operated some type of emergency or transitional housing services, and as such, received substantial amounts of funding from the VA and HUD, including funds from the Grant and Per Diem, SSVF, and VASH programs. For example, Veterans Inc., which administers 255 transitional beds for homeless veterans, received about two-thirds of its funding from federal sources, including the Grant and Per Diem program (\$4.5 million) and SSVF (\$2 million), as well as other state and local sources. Other important funding sources for HVRP grantee organizations included: state mental health, substance abuse, and vocational rehabilitation grants; fee-for-services; and donations from a variety of sources. Because HVRP annual funding was limited to no more than \$300,000 for urban grants and \$200,000 for non-urban grants, as discussed later in this chapter, coordination of the HVRP-funded services with other funding sources and programs (such as funding to support emergency, transitional, and permanent housing from the VA and HUD) was critical to meet the varied needs of homeless veterans.

The grantee organizations visited as part of this study were quite varied in terms of their location, their target populations served (e.g., whether they primarily or exclusively served veterans), and the scope of their services (see Exhibit 3-2). Two of the grantees (Easter Seals Greater Washington-Baltimore Region and Salvation Army in Los Angeles) were local affiliates of large diversified national/international service organizations. Two other organizations (America Works and American GI Forum) had local offices or chapters of their organizations spread across various states and local areas of the country. For example, America Works, headquartered in New York City, has offices in eight states and the District of Columbia, and administers two HVRP grants (serving NYC and Miami). Two of the HVRP grantees visited provided veteran services throughout a single state (Washington State Department of Veterans Affairs and Minnesota Assistance Council for Veterans). Two other grantees had a regional focus, either across several states (with Veterans Inc. providing veterans services across New England and operating five HVRP grants), or a region of a state (with the Mountain Comprehensive Care Center providing behavioral health services across a 33-county area of Eastern Kentucky). The remaining four HVRP grantees visited served a local labor market area within a state (e.g., The Workplace, a WIB serving southwest Connecticut) or specific metropolitan areas (e.g., New Directions [City/County of Los Angeles], Inner Voice [Chicago/Cook County], and Mary Hall Freedom House [Atlanta/Fulton Counties]).

As also shown in Exhibit 3-2, five of the 12 HVRP grantees visited were veterans service organizations, focusing services primarily, or exclusively, on veterans. Other grantee organizations visited served veterans, but as part of a much wider population (e.g., The Workplace as a local WIB served disadvantaged/low-income adults and youth, dislocated workers, veterans, and a broad range of job seekers in Bridgeport, New Haven, and other towns

EXHIBIT 3-2: OVERVIEW OF ORGANIZATIONAL CHARACTERISTICS OF THE 12 GRANTEES VISITED

| HVRP Grantee | Type of Area Served | Primarily Serves Veterans | Overview of the Grantee Organization |
|--|--|---------------------------|---|
| New Directions (CA) | Local | x | Homeless veterans services agency providing a comprehensive range of services across Los Angeles metropolitan area, including substance abuse treatment/counseling, remedial education, job training/placement, parenting, and money management classes. |
| Salvation Army (CA) | National (Local Affiliate) | | Large, diversified, faith-based social service organization serving the needs of individuals experiencing lack of shelter, food and clothing due to natural disasters, war, and general economic circumstances; organization also provide assistance to active duty military stationed around the world. |
| The Workplace (CT) | Local | | Workforce Investment Board (WIB) that operates and oversees workforce programs, including WIA, American Job Centers, and wide range of other employment and training programs in Southwest Connecticut. |
| Mary Hall Freedom House (GA) | Local | | Nonprofit CBO that provides housing, counseling, employment services and residential treatment along with other supportive services aimed at improve the quality of life for individuals affected by alcohol and substance abuse and/or physical and emotional abuse and those with mental conditions. |
| Inner Voice (IL) | Local | | Nonprofit CBO that provides services for the homeless in the Chicago metropolitan area; Inner Voice has (since 1984) assisted veterans with housing, supportive services, and employment as part of their overall homeless assistance program. |
| Mountain Comprehensive Care Center (KY) | Regional (within state) | | Located in Eastern Kentucky, MCCC provides behavioral health services for children and adults, crisis services, foster care, developmental and intellectual disabilities services, substance abuse (SA) services and veterans counseling across a 5-county area. |
| Veterans Inc. (MA) | Regional (across states) | x | Nonprofit veterans service agency that provides transitional housing and range of employment, case management, and support services throughout the New England region; Veterans Inc. administers five HVRP grants in four states across New England. |
| Easter Seals (MD) | National (Local Affiliate) | | Large, diversified non-profit organization, established in 1919, that provides services to people with disabilities or special needs to ensure they receive “equal opportunities to live, learn, work and play within their communities;” Easter Seals specializes in providing sheltered workshops and subsidized employment opportunities for individuals with disabilities. |
| Minnesota Assistance Council for Veterans (MN) | Statewide | x | Nonprofit organization utilizing holistic approach to provide housing, employment, legal and supportive services assistance exclusively to veterans throughout Minnesota for 25 years by combining various federal and state grants (including HVRP and SSVF). |
| America Works (NY) | National Organization (Office Locations in 8 States & DC) | | Private workforce development firm serving New York City (and other states/localities) with extensive experience in providing direct placement and retention services for hard-to-place populations, including veterans, welfare/SNAP recipients, ex-offenders, homeless, and other low-income individuals; America Works administers second HVRP program serving Miami. |
| American GI Forum National Veterans Outreach Program, Inc. (TX) | National Organization (Chapters Located in 16 States/ Territories) | x | Headquartered in San Antonio, NVOP is the nation’s largest Hispanic veterans’ organization chartered by Congress, with service locations in five other Texas cities - Dallas, Houston, El Paso, Ft. Worth, and Austin; NVOP also has local chapters (or affiliates) in over a dozen other states. In addition to the six HVRP grants that fund services in five Texas cities, NVOP operates an SSVF grant, VA Grant and Per Diem, and HUD-funded Residential Center; services offered by the organization include employment and training for veterans, housing for the elderly, economic development projects (e.g., box manufacturing), and homeless veterans services. |
| Washington State Department of Veterans Affairs (WA) | Statewide | x | A cabinet-level state agency, DVA helps connect veterans and their families with benefits and services; the Veterans Services Division of the agency administers HVRP, transitional housing for veterans, and range of other veteran programs such as the Veterans Innovation Program and the Veterans Stewardship Program. |

in southwest Connecticut). As reflected in the types of grants received (i.e., urban versus non-urban grants), some grantees (including New Directions, Salvation Army, Inner Voice, Easter Seals, and America Works) provided services within urban and suburban areas, while other grantees provided their services spread across large geographic areas including small cities, towns, and rural areas (including the Minnesota Assistance Council for Veterans, Veterans Inc., Mountain Comprehensive Care Center, and Washington DVA). Exhibit 3-2 also provides some additional descriptive highlights of the 12 sites visited, demonstrating the considerable variation in the missions and types of services generally provided by the organizations visited as part of the study.

Finally, although the organizations were purposively selected for site visits, the blend of grantees selected was reasonably representative of HVRP grantees funded in PY 2014 in terms of participant characteristics (see Exhibit 3-3). While the race/ethnicity breakdown was very similar when totals for the 12 sites were aggregated and compared to the national average, there was some variation for several other participant characteristics, with the 12 sites visited having a somewhat lower percentage of males, individuals with disabilities, individuals aged 55 or older, individuals who had left the military 20 or more years ago, and chronically homeless individuals. The participants at the 12 sites visited were also (when aggregated) somewhat more likely to be welfare recipients.²⁴ Some of this variation compared to the national averages stemmed from the fact that the sites selected included two sites that served females and families, which would tend to be more likely to have some of these characteristics (e.g., be female, somewhat younger, have exited the military with fewer years of service, and receive welfare benefits). Using averages

²⁴ Under HVRP, a welfare and/or public assistance recipient is an individual who, during the course of the program year, receives or is a member of a family who receives cash welfare or public assistance payments under a Federal, state, or local welfare program.

**EXHIBIT 3-3: HVRP PARTICIPANT CHARACTERISTICS, 12 HVRP SITES VISITED
COMPARED TO ALL HVRP GRANTS NATIONALLY, PY 2013**

| HVRP Grantee | # of HVRP Participants Enrolled | % Male | % Caucasian | % African American | % Hispanic | % Disabled |
|---|---------------------------------|--------------|--------------|--------------------|-------------|--------------|
| The Salvation Army (CA) | 173 | 98.3% | 15.0% | 67.1% | 12.1% | 4.6% |
| Washington State DVA (WA) | 170 | 87.1% | 55.3% | 32.9% | 7.1% | 10.0% |
| America Works of New York, Inc. (NY) | 162 | 92.6% | 15.4% | 59.9% | 20.4% | 6.2% |
| Veterans Inc. (MA) | 152 | 100.0% | 75.7% | 15.8% | 7.2% | 36.8% |
| Inner Voice, Inc. (IL) | 127 | 95.3% | 11.0% | 81.9% | 7.1% | 3.1% |
| The Workplace, Inc. (CT) | 96 | 91.7% | 40.6% | 54.2% | 4.2% | 14.6% |
| American GI Forum (TX) | 94 | 89.4% | 36.2% | 34.0% | 26.6% | 29.8% |
| Easter Seals (MD) | 93 | 25.8% | 2.2% | 93.5% | 2.2% | 35.5% |
| Mary Hall Freedom House, Inc. (GA) | 89 | 2.2% | 5.6% | 93.3% | 1.1% | 20.2% |
| New Directions, Inc. (CA) | 82 | 95.1% | 41.5% | 35.4% | 17.1% | 6.1% |
| MN Assistance Council for Veterans (MN) | 63 | 90.5% | 90.5% | 6.3% | 1.6% | 33.3% |
| Mountain Comprehensive Care Center (KY) | 31 | 90.3% | 90.3% | 6.5% | 0.0% | 6.5% |
| Average - 12 Grantee Sites Visited | 111 | 79.8% | 39.9% | 48.4% | 8.9% | 17.2% |
| Average - All HVRP Sites | 103 | 89.9% | 38.4% | 49.9% | 8.2% | 21.1% |

| HVRP Grantee | % Age 34 or Less | % Age 35-54 | % Age 55+ | % Last Military Service 20+ Years | % Welfare Recipients | % Chronically Homeless |
|---|------------------|--------------|--------------|-----------------------------------|----------------------|------------------------|
| The Salvation Army (CA) | 13.9% | 49.1% | 37.0% | 70.5% | 78.6% | 4.0% |
| Washington State DVA (WA) | 30.0% | 55.9% | 14.1% | 43.5% | 42.9% | 21.2% |
| America Works of New York, Inc. (NY) | 22.8% | 54.3% | 22.8% | 45.7% | 42.0% | 15.4% |
| Veterans Inc. (MA) | 26.3% | 48.0% | 25.7% | 60.5% | 24.3% | 22.4% |
| Inner Voice, Inc. (IL) | 22.8% | 48.8% | 28.3% | 60.6% | 66.1% | 3.9% |
| The Workplace, Inc. (CT) | 16.7% | 57.3% | 26.0% | 18.8% | 39.6% | 77.1% |
| American GI Forum (TX) | 23.4% | 52.1% | 24.5% | 53.2% | 28.7% | 1.1% |
| Easter Seals (MD) | 24.7% | 60.2% | 15.1% | 40.9% | 54.8% | 9.7% |
| Mary Hall Freedom House, Inc. (GA) | 28.1% | 52.8% | 19.1% | 40.4% | 52.8% | 11.2% |
| New Directions, Inc. (CA) | 32.9% | 40.2% | 26.8% | 56.1% | 18.3% | 11.0% |
| MN Assistance Council for Veterans (MN) | 38.1% | 44.4% | 17.5% | 50.8% | 52.4% | 4.8% |
| Mountain Comprehensive Care Center (KY) | 29.0% | 67.7% | 3.2% | 32.3% | 51.6% | 38.7% |
| Average - 12 Grantee Sites Visited | 25.7% | 52.6% | 21.7% | 47.8% | 46.0% | 18.4% |
| Average - All HVRP Sites | 20.9% | 52.8% | 26.2% | 59.0% | 35.8% | 24.6% |

Source: U.S. Department of Labor, Veterans Employment and Training Service Operations and Programs Activity Report (VOPAR), PY 2013; analysis of participant-level data.

across the 12 sites while useful when comparing to national averages, masks the substantial differences in the characteristics of HVPR participants across the 12 sites visits. There were some very sharp differences in participant characteristics across sites as exhibited in the table, for example:

- the percentage of males varied from 2.2 percent at Mary Hall Freedom House and 25.8 percent at Easter Seals (the two grantees receiving grants targeted to recruit and serve females and families), to in excess of 90 percent male in eight sites visited;
- the percentage of Caucasians ranged from over 90 percent in two sites to less than 10 percent in two sites;
- the percentage of individuals age 55 or older ranged from 3.2 percent in MCCC to 37.9 percent at the Salvation Army;
- the percentage of chronically homeless served ranged from less than five percent in four sites to as high as 77.1 percent in one site; and
- the percentage of participants with a disability was less than 10 percent in five sites, but greater than 25 percent in four sites.

Much of this variation was due to differences in the homeless veteran population in the service area from which participants were drawn, as well as differences in the targeting of grants on certain subpopulations, and differences in referral sources and recruitment strategies used by grantees (see the discussion below in Section B on recruitment of HVRP participants for additional details). Additionally, some difference on select characteristics (such as disability status and receipt of welfare) may have resulted in part from differences across sites in ways participant data were collected and reported (e.g., some sites may have been more rigorous in asking about and collection on disability status, welfare receipt, and other participant characteristics).

2. Economic Conditions in Areas Served by HVRP Grantees

Economic conditions in the areas served by the 12 HVRP grantees visited varied considerably, with some grantees indicating that their service areas had largely recovered from the recession of 2008-09, while other grantees reporting that there had been a lag in recovery or that recovery had been better in some industry sectors versus others. Economic conditions specific to localities served affected the ability of grantees to place homeless veterans into jobs, as well as skill requirements for entry into jobs and wages paid. As shown in Exhibit 3-4, as of May 2015 (the time of most of the site visits), about half the grantees visited served areas where the unemployment rate was above the seasonally-adjusted unemployment rate for the U.S. of 5.5 percent. At most grantees sites, program administrators and staff indicated there had been substantial recovery and increasing availability of job openings in recent years (preceding the sites visits). However, as discussed later in this report, the ability of grantees to place HVRP participants in jobs often hinged less on local economic conditions and more on other factors specific to the homeless veterans served, such as their willingness to work, personal barriers/challenges to employment (e.g., substance abuse, mental health, and criminal background), educational degrees and skills, and prior work experience (e.g., including the extent to which the veteran's military experience translated to civilian jobs).

Regardless of the unemployment rate in their localities, many administrators noted that there was often an education or skill mismatch between the homeless veterans served by their HVRP programs and the skill requirements for available jobs in their localities (and especially for higher-wage jobs). Additionally, even those that met skill requirements for job vacancies in the locality might have substance abuse, mental health issues, or criminal records that made it

**EXHIBIT 3-4: UNEMPLOYMENT RATES FOR AREAS SERVED BY
HVRP GRANTEES**

| HVRP Grantee | HVRP Service Area | Unemployment Rate (May 2015) |
|--|--|-------------------------------------|
| American GI Forum National Veterans Outreach Program, Inc. (TX) | Austin-San Marcos, TX (Travis and Hays County) [Note: unemployment rate for Austin, TX metropolitan area shown.] | 3.1% |
| Minnesota Assistance Council for Veterans (MN) | Minnesota's 36 northern counties, focusing on the 8th Congressional District's 15 counties [Note: unemployment rate for Duluth, MN metropolitan area shown.] | 3.8% |
| Mountain Comprehensive Care Center (KY) | 33 primarily rural counties that make up the 5 th Congressional District in Eastern Kentucky [Note: unemployment rate for Lexington-Fayette metropolitan area shown.] | 4.2% |
| Washington State Department of Veterans Affairs (WA) | Puget Sound Region (King, Pierce, Thurston, Kitsap, and Snohomish Counties) [Note: unemployment rate for Seattle metropolitan area shown.] | 4.4% |
| Veterans Inc. (MA) | Worcester, Springfield, and surrounding cities and towns (Congressional districts 1, 2, and 3) [Note: unemployment rate for Worcester metropolitan area shown; Springfield, 5.2%.] | 4.7% |
| Easter Seals (MD) | Greater Washington-Baltimore Region (Washington, DC, Montgomery County, Baltimore County and City, Prince George's County, and Northern VA) [Note: unemployment rate for Washington metropolitan area shown; Baltimore, 5.6%.] | 4.7% |
| | **United States - Unemployment Rate (Not Seasonally Adjusted)** | 5.3% |
| The Workplace (CT) | Southwest Connecticut (Greater Bridgeport and Greater New Haven, CT) [Note: unemployment rate for Bridgeport metropolitan area shown.] | 5.4% |
| Inner Voice (IL) | Chicago/Cook County | 5.8% |
| Mary Hall Freedom House (GA) | Fulton County and Atlanta County (Congressional Districts 5 and 6) | 5.9% |
| America Works (NY) | New York City | 5.9% |
| New Directions (CA) | City/County of Los Angeles | 6.6% |
| Salvation Army (CA) | City/County of Los Angeles | 6.6% |

Note: Unemployment rates are for May 2015; unless otherwise indicated, the rate is for metropolitan area served by HVRP grantee.

Source: U.S. Bureau of Labor Statistics, Metropolitan Area Unemployment Rates (Not Seasonally Adjusted), May 2015 (available at: http://www.bls.gov/news.release/archives/metro_07012015.pdf).

impossible or challenging to place the homeless veteran into some occupations, particularly in the health care sector. As job markets began to recover after the Great Recession, a number of grantee administrators and staff noted that jobs in more traditional industry sectors (manufacturing and construction) were increasingly being replaced by job openings in health care, advanced manufacturing, hospitality/food service, security, janitorial services, and

commercial transport/transportation. In general, grantees noted that emerging occupations in health care and advanced manufacturing (particularly those paying at wage levels that could promote self-sufficiency and avoid a return to homelessness in the future) often required at least associates' degrees, licensing, and/or certifications.

Finally, a lack of reliable or inexpensive public transportation could be a challenge for veterans being served and securing jobs in some localities served, for example, in rural areas and small towns served by MACV (MN), Veterans Inc. (MA), and MCCC (KY), and even in certain areas within metropolitan (such as Baltimore and Los Angeles). In contrast, public transportation is affordable and readily available in New York City, and therefore, America Works of New York's HVRP participants typically did not experience transportation-related challenges to getting to jobs within NYC's five boroughs that might have been experienced in other grantee sites.

B. HVRP Outreach, Recruitment, Intake, and Assessment Activities

This section describes the steps taken by HVRP grantees to identify and recruit potentially eligible participants for program services and, once recruited, to determine their eligibility and individual service needs.

1. Types of Homeless Veterans Eligible for and Targeted for HVRP Enrollment

Under the HVRP program requirements, eligible participants are required to be "veterans who served in the active military, naval, or air service, and who were discharged or released under conditions other than dishonorable." In addition, these veterans had to meet the definition of "homeless" as specified in The McKinney-Vento Homeless Assistance Act, as amended by The Homeless Emergency Assistance and Rapid Transition to Housing (HEARTH) Act of 2009.

Included within this definition are individuals lacking a “fixed, regular and adequate nighttime residence,” living in emergency or transitional housing, or are at risk of losing their housing within 14 days.²⁵ Although the grant requirements included provisions for targeting specific populations (e.g., minority, female, economically disadvantaged, and/or disabled) to receive priority assistance, the majority of grantees reported that they served all suitable eligible homeless veterans under their HVRP initiatives, and did not target or prioritize specific subgroups for services. As described above, only Mary Hall Freedom House and Easter Seals operated grants that focused on providing services to specific population subgroups; both of these grantees targeted female homeless veterans and homeless veterans with families.

Several grantees targeted their outreach efforts on serving certain underserved population groups within their service areas. For example, MACV (in addition to seeking out general homeless veterans in general in the service area) made special efforts to reach and enroll Native American homeless veterans residing in their service area. Other grantees launched efforts to reach out to veterans with criminal records who might benefit from HVRP services. For example, staff at MCCC collaborated with a veteran re-entry program at a local prison to establish contact with, and recruit veterans at the time they were released. Finally, to meet job placement goals under their grants, through a combination of their outreach efforts and screening, grantees targeted homeless veterans who were interested in and capable of securing employment within the program year in which they were to be served (see discussion of assessment process, Section B.3 below).

²⁵ For the complete definition of “homeless or homeless individual,” see Appendix C-3.

2. Strategies for Recruiting HVRP Participants

HVRP grantees employed a variety of outreach and recruitment strategies to share information about the services available through HVRP and to identify potential participants for their programs. This section provides a description of the key sources the grantees used for HVRP referrals, followed by a discussion of the outreach and recruitment strategies they employed. A summary of key challenges to recruitment of participants identified by grantee staff is also presented.

Key Referral Sources. Because their HVRP organizational structure included a direct link to a significant pool of eligible referrals, only limited outreach and recruitment efforts were required of five of the grantees. These five grantees (The Workplace, Salvation Army, Mary Hall Freedom House, New Directions, and Veterans Inc.) received the vast majority of their referrals from either another program or service (e.g., transitional housing facility) operated concurrently by the grantee organization or a key service delivery partner. For example, Veterans Inc. operates a Grant and per Diem (GPD)-funded transitional housing facility for homeless veterans in Worcester from which substantial numbers of HVRP participants were identified from the pool of residents at the shelter and referred to HVRP for services. New Directions, a nonprofit organization serving only homeless veterans in Los Angeles, is housed on the VA campus. Consequently, the VA team operating the shelter at that site is well-positioned to provide a steady stream of pre-screened referrals to HVRP. Typically, the majority of referrals needed to meet enrollment goals for these five grantees originated from these sources. For example, staff at The Workplace estimated that approximately 90 percent of all program referrals were made by the VA Connecticut Health Care System.

The remaining seven grantees relied on a wide range of public and private partners for HVRP referrals. Across all grantees, VA offices and DVOPs were most often cited as the top sources for HVRP referrals. Other frequently mentioned referral partners included the Volunteers of America, emergency shelters and transitional housing facilities, community veterans' services offices, AJCs, and SSVF partners. Although some grantees mentioned the importance of word-of-mouth for referrals, only two ranked it as one of their top sources.

Outreach and Recruitment Activities. Although some grantees had ready access to a pipeline of eligible participants and were not required to conduct extensive outreach efforts, the majority of HVRP grantees conducted some outreach and recruitment activities (defined as “active efforts by program staff to encourage individuals in the designated service delivery area to avail themselves of program services”) that enabled them to identify and enroll eligible participants, and ultimately meet enrollment goals. The key approaches utilized by grantees included traditional outreach and recruitment strategies, which were, in many cases, some of the same methods used to recruit participants for other programs operated by the grantee organization. These included distribution of flyers, brochures, and other print materials describing HVRP eligibility requirements and services at various public sector and community-based organizations, and at events in their service areas frequented by veterans and homeless individuals in general. Sites for sharing information about the HVRP program typically included the VA, VA Medical/Health Centers, veterans service organizations, Stand Down events, job fairs for veterans, AJCs, emergency shelters and transitional housing facilities, food banks and pantries, soup kitchens, health care facilities, substance abuse treatment centers, and libraries and churches. HVRP administrators and staff (as well as key partner staff) also made presentations about program services at various public and nonprofit service agencies within the service area to

inform both partner staff and homeless veterans about HVRP. One grantee, Washington State DVA, convened quarterly orientation workshops for participants, local employers, service providers, and community networks to share information about program activities and job openings (see Exhibit 3-5 for additional details about Washington DVA and two other grantee approaches to outreach). Other grantees took advantage of various forms of the media as part of their outreach and recruitment strategies. For example, three grantees reported using social media (e.g., Facebook and Twitter) to share information about HVRP services and eligibility requirements, and two posted information about their HVRP initiatives on Craigslist. Nearly all grantees had information about their HVRP site (e.g., eligibility criteria, how to apply, available services) on the organization's website. Two grantees uploaded HVRP outreach materials to their organizations' websites, and another issued a public service announcement on a local radio station, and a third sent out email "blasts" about HVRP to over 300 partners each month. Several grantees also conducted direct street outreach to homeless veterans, with staff visiting sites where the target population might be living or congregating (such as isolated rural locations or in parks and under bridges in urban areas).

Recruitment Challenges. At the time of the site visits, only American GI Forum/NVOP, which struggled with turnover among case manager staff, was unable to enroll sufficient participants to meet grant enrollment goals. Eight other grantees cited some challenges or obstacles to recruiting and subsequently enrolling suitable and eligible HVRP participants (with the other three grantees identifying no challenges to recruitment or meeting enrollment goals under HVRP). Several grantees noted challenges in identifying HVRP candidates who were not only job-ready, but also interested in working. According to grantee staff, some homeless veterans receiving SSI or SSDI benefits were not willing to risk the loss of those

**EXHIBIT 3-5: ILLUSTRATION OF OUTREACH AND RECRUITMENT
ACTIVITIES IN SELECTED HVRP GRANTEE SITES**

| HVRP Grantee | Overview of Outreach and Recruitment Approaches Used to Identify Potential HVRP Participants |
|---|--|
| America Works (NY) | America Works (AW) staff made regular visits to inform staff and conduct direct outreach to homeless veterans at emergency and transitional shelters (including Borden Avenue Shelter, Atlantic Ave. Shelter, and others). The VA, DVOPs, and NYC Human Resource Administration were also sources of referrals. Word-of-mouth was the most common referral source, with current and past HVRP participants serving as a major source for new participants. Staff managed an ongoing e-mail chain that was sent out to over 300 organizations each month, as well as a Craigslist ad that promoted the program by emphasizing success regarding placement of homeless veterans into employment. |
| The Workplace, Inc. (CT) | About 90 percent of HVRP participants served by The Workplace were direct referrals from the VA Connecticut Health Care System to two transitional housing agencies - Columbus House, Inc. and Home for the Brave. The Workplace subcontracted with these two transitional facilities to recruit, enroll, assess, and provide HVRP funded-services. The balance of HVRP participants were walk-ins to the Workplace or other emergency/transitional housing facilities, the Workplace’s American Job Center (AJC), and referrals from DVOPs and veterans service organizations. The Workplace, Inc. had brochures/flyers describing the program, but generally counted on direct referrals from VA CT Health Care System. |
| Washington State Department of Veterans Affairs (WA) | Ongoing outreach and recruitment efforts were conducted by the HVRP team, other WDVA staff, and key partner staff (e.g. DVOPs/ LVERs, Catholic Community Services, county veterans’ offices) through visits to shelters, soup kitchens and homeless provider agencies and at Stand Down events, veterans summits, and through face-to-face contact. In addition to the distribution of flyers and brochures, information about HVRP was also posted on the WDVA website, Facebook, and Twitter. The HVRP team also increased awareness of available HVRP services through quarterly orientation workshops for participants, local employers, service providers and community networks, including staff from local community and technical colleges, apprenticeship and trade schools, workforce development councils, AJCs, and DVOPs/LVERs to network and share information about program activities and jobs. Other recruitment efforts focused on establishing contact with incarcerated veterans prior to their release. Although program referrals came from many community partners, local DVOPs/LVERs made more than half of all referrals to the HVRP program. |

benefits as a result of obtaining employment. Staff with the two grantees serving rural areas (i.e., MCCC and MACV) identified challenges associated with having to travel long distances to recruit enrollees scattered over a large geographic service area. Finally, grantee staff at one site noted that it had become increasingly difficult to identify eligible participants due to the implementation of “housing first” policies and goals for rapid elimination of veteran homelessness, which mandated moving homeless individuals into permanent housing quickly (often without addressing employability or other employment obstacles). Once homeless individuals were permanently housed, they became ineligible for HVRP enrollment and services.

3. Intake and Assessment Procedures

Individuals recruited for HVRP typically progressed through a series of steps to determine eligibility and suitability for enrollment in HVRP and participation in the education, training, and employment services offered by the program. This section summarizes the intake, screening, and assessment procedures implemented by the grantees as the first steps in their service delivery process.

Overview of Basic Intake, Assessment, and Eligibility Determination Process.

Although there was significant variation in the timing and sequencing of the steps involved in the intake, assessment, and eligibility determination process, most grantees included four types of activities in their established procedures for enrolling new HVRP participants: (1) pre-assessment and pre-screening; (2) eligibility determination/verification/enrollment; (3) comprehensive assessment of barriers to employment and identification of service needs, and; (4) creation of Employment Development Plans (EDP). These intake activities generally overlapped (and were not always distinct) activities, often conducted by HVRP staff during an initial group or individual orientation session followed by one or two subsequent in-person between program staff and each newly-recruited homeless veteran. Each of these four components is discussed below.

Pre-Assessment/Pre-Screening. At most sites, potential participants were first screened for HVRP eligibility and suitability during a pre-assessment session, typically conducted by HVRP staff, but in some cases, by a partner staff member making a referral to the HVRP program. During this meeting, a staff member first screened individuals for overall HVRP eligibility (i.e., homeless or at risk of homelessness, veteran, and discharged under conditions other than dishonorable), and then focused on assessing the individual's potential employability,

significant barriers to employment (e.g., substance abuse and mental health issues), and desire to work. Because of the HVRP grant's job placement goals for each program year, grantees sought to enroll homeless individuals that had a desire to become employed and were likely to secure employment prior to the end of the current program year. The pre-assessment enabled staff to screen those individuals that were uninterested in employment or ineligible/unsuitable for HVRP enrollment. Those deemed not eligible or appropriate for HVRP during intake were referred to other programs within the grantee organization or to other service providers in the service area to address other needs as appropriate, such as emergency housing, substance abuse or mental health treatment, medical help, or food assistance. In some circumstances, individuals who were referred elsewhere were invited to reapply to HVRP when their immediate needs and barriers were successfully addressed. Grantee staff emphasized that all veterans referred to, or expressing an interest in, HVRP services received some type of assistance in addressing barriers and needs even if they were not appropriate candidates for HVRP. Although estimates varied across grantees, some staff reported that as many as half of the homeless veterans screened were not enrolled in the program, chiefly because they were not job-ready or interested in seeking employment.

Eligibility Determination/Verification/Enrollment. Individuals who were determined to be HVRP-eligible and interested in employment typically progressed to a formal, more comprehensive intake and eligibility determination session as the next step in the enrollment process. During this intake session, the HVRP staff member would provide additional information about HVRP program requirements and services, and collect demographic data, information on personal, military, and employment history, and gather the documentation required to verify HVRP eligibility (e.g., DD214 [Certificate of Release or Discharge from

Active Duty], SSN, proof of homelessness/at-risk of homelessness). At this point, the eligible homeless veterans were formally enrolled in HVRP if they met eligibility requirements, were determined to be suitable for HVRP services, and agreed to enroll in the program. A full assessment of skills, barriers, and needs was conducted next, in many cases building off the pre-assessment begun previously.

Comprehensive Assessment of Barriers to Employment and Service Needs.

Although the timing of the comprehensive needs assessment varied across grantees, staff in all sites typically used a formal intake/assessment form to guide discussions and collect information about the participant that would help shape the plan for services. In general, data was collected on the enrollee's personal background, family situation, criminal background, housing situation, financial status, medical history, education and employment history, and specific barriers to employment (e.g., substance abuse and mental health issues, transportation, and child care needs). Much of this information might have been collected as part of the pre-assessment process, but this was usually an opportunity for the HVRP case manager to "dig deeper," often resulting in referrals to other service providers to address specific needs. The majority of the grantees reported that they did not use formal assessment tools, although several noted that they referred participants to DVOPs and other staff at AJCs for vocational assessments, interest inventories, and more formal testing (e.g., TABE, Work Keys). However, American GI Forum/NVOP did require participants to complete a five-phase assessment and development plan, which included online testing of reading and math skills, as well as occupational skills. Several grantees (e.g., New Directions, the Workplace, and Salvation Army) noted that HVRP participants referred directly from the VA would have received psychosocial and physical assessments at that facility.

Creation of Employment Development Plan (EDP). Information gathered as part of the intake and assessment process was used by a HVRP case manager or employment coordinator to develop an Employability Development Plan (EDP) or Individual Service Plan (ISP) with the enrollee. Staff at all 12 grantee sites reported that they worked with HVRP participants to create an EDP or ISP to identify goals (including personal, family, life skills, health/medical, education, training, and employment goals), and the strategies and timeline for achieving them. Other goals identified by either HVRP staff members or the participant were added to the plan, and it was modified and updated over the period of enrollment.

Two grantees, Salvation Army and New Directions, operated their grants under different organizational structures and referral arrangements, and, as a result, had slightly different intake and assessment processes. Unlike the other grantees, these two programs had pre-enrollment requirements for HVRP participants. Potential enrollees in the Salvation Army's HVRP initiative were required to reside in one of the grantee's transitional housing shelters for six weeks to 90 days while addressing barriers to employment before being considered for HVRP. Similarly, referrals from the co-located VA homeless shelter to New Directions' HVRP program had to participate in the first phase of the shelter's program, which included a 6-week customer services training component before enrollment in HVRP. Exhibit 3-6 provides two examples of the intake and selection process at two sites.

**EXHIBIT 3-6: ILLUSTRATION OF THE INTAKE AND ASSESSMENT PROCESS
AT SELECTED HVRP GRANTEE SITES**

| HVRP Grantee | Overview of Intake and Assessment Procedures Used to Screen, Assess, and Enroll HVRP Participants |
|---|---|
| <p align="center">Mountain Comprehensive Care Center (KY)</p> | <p>HVRP staff (and, in some cases, key partner staff) used a three-page intake/assessment form to guide pre-screening of potential participants referred for HVRP services. Completion of this pre-screening process, which was typically done by phone, allowed staff to identify those who were eligible and/or appropriate for HVRP services and to dismiss and refer elsewhere those who were not suitable or not likely to succeed in HVRP. Those who appeared eligible met one-on-one with an employment coordinator to complete the formal assessment process, which also included an inventory and discussion of barriers. Staff reported that personal barriers such as substance abuse issues and a criminal record did not result in an automatic rejection if the individual appeared willing to work. The majority of the potential participants who completed the full assessment with the employment coordinator were ultimately determined to be HVRP-eligible and enrolled. Potential HVRP participants were required to present a DD214 form with an “other than dishonorable” discharge, ID (e.g., driver’s license), and Social Security card, and be employable. No other formal assessments were required, although participants could be referred to the DVOP or the AJC for the TABE or other vocational interest assessments.</p> |
| <p align="center">Minnesota Assistance Council for Veterans (MN)</p> | <p>Homeless individuals recruited to the program were required to provide proof of military service and discharge status, as well as proof of homelessness, or being at-risk for homelessness (e.g., eviction letter). Potential participants typically met with a MACV case manager to complete a nine-page intake/assessment form that described personal and work background, collected demographic information, confirmed eligibility, explained HVRP, identified barriers and delineated participant job goals. This initial intake information could also be collected by a community partner providing the referral. Throughout the intake process, and subsequent meetings, case managers determined if a homeless veteran was truly interested in employment, the types of occupations and job vacancies for which the veteran was best suited, if the individual had the housing situation, resources and wherewithal to sustain employment once placed in a job. Those who were determined to be eligible and suitable for HVRP were referred to the HVRP Employment Coordinator for next steps in the employment process. Employment Coordinators and HVRP participants worked together to craft an Individual Employment Plan (IEP) while the MACV case manager addressed housing stability and other issues that may affect sustainability. No formal assessment tools (e.g., TABE, interest inventory) were utilized to evaluate incoming participants. During the intake process, those who were found to be unable/uninterested to work or unsuitable for HVRP were referred to other appropriate service providers (e.g., substance abuse centers, training programs, DVOPs, etc.), or VAHCS for mental and physical health screening, and might be reassessed in the future for HVRP enrollment.</p> |

Source: Site visits conducted with 12 grantees by research team.

C. Participant Flow and Program Services

This section examines the flow of participants through HVRP services, then examines the specific types of training, employment, case management, and support services provided by grantees to assist homeless veterans in making a transition from homelessness to employment and self-sufficiency.

1. Overview of Participant Flow through Services

Once homeless veterans completed the intake and assessment process, been determined eligible, and were enrolled in HVRP, they worked with a HVRP staff member to create an EDP which outlined the steps required to achieve personal, education, training, and employment goals (all described above). Under the guidance of their HVRP case manager, participants moved forward with efforts to pursue goals outlined in the EDP, ultimately focused on gainful employment. For most enrollees, this involved participation in multiple activities and services concurrently. For example, the participant might have needed to address an unstable housing situation with the help of the HVRP team or community partners, such as SSVF providers. Other barriers to employment such as legal, health, childcare, or transportation issues were tackled as well. At the same time, some participants were referred for basic skills training or GED testing based on skills assessments done during the intake process; others without a recent job history might enter a short-term job skills training program leading to a certification, such as certified nursing assistant (CNA) or commercial driver's license (CDL). In most sites, the majority of the HVRP enrollees were involved in activities that would increase the likelihood of employment, including job readiness/job search workshops, resume development, and help with interviewing skills. Those with a more recent employment history might have immediately moved to working with job developers and job placement staff to identify suitable jobs. After

the participant was placed in a job, he or she continued to receive job retention services, which included continued guidance and help through ongoing case management, as well as provision of supportive services such as work tools/clothing and transportation assistance. In some sites, staff continued to assist participants after placement in finding a better-paying job.

The following sections provide descriptions of the various types of services received by HVRP participants in the sites visited, beginning with a discussion of training activities, followed by an overview of employment and job retention services, then housing assistance, supportive services, and case management activities.

2. Training Services

Under HVRP reporting, any of the following activities are considered to be “training” activities: Classroom Training, On-the-Job Training (OJT), Occupational Skills Training, Apprenticeship Training, Upgrading and Retraining, and Other Training.²⁶ Slightly over four-fifths of HVRP participants (84.5 percent) across all HVRP grantees (nationally) received at least one type of training service offered by grantees in PY 2013 (see Exhibit 3-7).²⁷ When aggregated, the 12 grantees visited were fairly close to the national average in terms of the percentage of HVRP participants in PY 2013 receiving at least one training service (81.6 percent for the 12 sites visited versus 84.5 percent nationally). However, while 10 of the 12 sites had training rates in excess of 70 percent, there were two sites where the percentage receiving a training service lagged substantially below the national rate - MCCC and American GI Forum.

²⁶ The definitions for each of these training activities is provided Appendix C-5. The definitions provided are from a Glossary of Terms that VETS developed and is part of the documentation provided on-line for the VOPAR data system, available at: <http://www.dol.gov/vets/programs/common/main.htm>

²⁷ The percentage receiving at least one training service across HVRP grantees nationally was also fairly consistent across the four program years prior to PY 2013 (i.e., ranging from 83.2 percent to 86.6 percent of all HVRP participants between PY 2009 and PY 2013).

EXHIBIT 3-7: PERCENTAGE OF HVRP PARTICIPANTS RECEIVING AT LEAST ONE TRAINING SERVICE, 12 HVRP SITES VISITED COMPARED TO ALL HVRP GRANTS NATIONALLY, PY 2013

| HVRP Grantee | % Receiving Any Training Activity |
|---|--|
| Washington State Department of Veterans Affairs (WA) | 100.0% |
| Minnesota Assistance Council for Veterans (MN) | 100.0% |
| Inner Voice, Inc. (IL) | 99.2% |
| The Workplace, Inc. (CT) | 99.0% |
| America Works of New York, Inc. (NY) | 98.1% |
| New Directions, Inc. (CA) | 95.1% |
| The Salvation Army (CA) | 91.3% |
| Easter Seals Greater Washington-Baltimore Region (MD) | 89.2% |
| Mary Hall Freedom House, Inc. (GA) | 76.4% |
| Veterans Inc. (MA) | 71.1% |
| Mountain Comprehensive Care Center (KY) | 38.7% |
| American GI Forum (TX) | 21.3% |
| Average - 12 Grantee Sites Visited | 81.6% |
| Average - All HVRP Sites | 84.5% |

Source: U.S. Department of Labor, Veterans Employment and Training Service Operations and Programs Activity Report (VOPAR), PY 2009-13; analysis of participant-level data.

The HVRP Solicitation for Grant Applications (SGA) requested that applicants seeking grants through this project have the “ability to design, develop, and execute programs that assist eligible veterans by providing or collaborating with other entities to deliver job-driven training based on Labor Market Information (LMI) in the proposed area.”²⁸ All grantees recognized the need for relating education and training to LMI, but at the same time most grantees said that job training was not a primary focus of the program. The HVRP was viewed as a jobs program (i.e., emphasizing employment services and job placement) and any training offered needed to be accomplished in a very short period to ensure that there was time to place the participant in a job

²⁸ According to the SGA: LMI describes current and projected local, regional, state and national labor markets, such as the number and types of available jobs, their characteristics, and the characteristics of the labor supply. LMI can be used to guide jobseekers in choosing which fields of study, training and credentials to pursue.

prior to the end of the program year. For the most part, this approach was consistent with the goals of the participants (for securing a job and permanent housing) and HVRP program funding constraints. The following were among the reasons grantees provided for limiting training activities:

- Participants were generally not interested in training, especially long-term training. This may have some relationship to the fact that over half of the participants were over 45 years of age.
- Training, whether conducted on-site by staff, through contracts, or as individual enrollment in a tuition-based program, can be expensive and HVRP grant funding is not sufficient to support much of a training component.
- The amount of training necessary to equip this particular pool of participants with skills in demand generally exceeds the period of time they are or can be enrolled in the program.
- Grantees believe that finding work for the participants is the critical first step towards reducing homelessness. Training for other than brief periods may impede becoming self-sufficient.

One grantee pointed out that most of the applicants are not in a position to take advantage of any significant education and training opportunities. This grantee noted that having long-term educational goals should not be discouraged, but the HVRP participants should be encouraged to relate these goals to realistic funding mechanisms, such as the GI Bill, Pell grants, and working part-time while attending school. Training for high-demand occupations for HVRP participants was generally considered unrealistic unless the resulting jobs are in low-skill occupations such as security guards.

The fact that education and training do not appear to have been major objectives at most of the sites visited does not mean that training was ignored. Computer literacy and some more advanced computer training were offered on-site by a majority of the grantees, and other grantees referred clients to programs offered by community-based organizations and other

programs. Some grantees sponsored short-term training programs in security work (with certification), custodial work (certified for medical facilities), and customer service (retail and restaurants). Slightly longer-term programs included training for a commercial driver's license (CDL) and CNA.

Two programs should be mentioned, given their unique design. The Bell Salvation Army Center developed a relationship with a commercial trucking school trying to find a suitable site to deliver its commercial driving classroom training. They also needed to have space for trainees to practice driving large trucks. The Bell program is housed in a former World War II hangar that is at least two city blocks long. The interior of the building is devoted to transitional housing and temporary shelter facilities, food service, and classroom space. The shelter serves all types of homeless individuals, so a substantial portion of the building is utilized for Salvation Army programs. There was some vacant classroom space and there was enough exterior space to allow program participants to drive and maneuver large trucks, something that would be difficult to accomplish on-site in many areas. The Bell Center and trucking school agreed that in exchange for providing training and driving space, interested and eligible residents (i.e., medically fit, a 10-year satisfactory driving record, and passing a terrorist threat assessment performed by the Transportation Security Administration [TSA]) were allowed to participate in the program at low or no cost if they had no other financial support. This training normally costs \$4,000 per person.

New Directions, a program housed on the grounds of the LA Veterans Medical Center, jointly developed specialized on-the-job training for custodial trainees working with hazardous waste from both the hospital rooms and from the surgical suites. Proper handling and disposal of medical waste has become an area of concern for many coastal communities as well as inland

communities near waste sites. This training provided certified workers for the VA and also provided participants with a skill set that could be used throughout the country.

Participants interested in longer-term programs were referred to the local DVOP, or in a few cases, directly to other staff at the AJC for WIA-funded training, although grantees mentioned that the resources available through these channels have diminished over time.²⁹ Participants were informed about Pell Grants and GI benefits, but they were also referred to specialists with the VA. Exhibit 3-8 highlights approaches to training in several other HVRP sites.

Exhibit 3-9 shows the number of grantees of the 12 visited that made available and paid for various types of education and training services using HVRP funding. As shown in the exhibit, according to interviews with grantee staff, all 12 grantees made available basic skills training or assistance in obtaining a GED and occupational skills training, but only about half of the grantees provided these two categories of education and training using HVRP funding. As discussed earlier, the types of occupational training provided was typically short-term and, in most instances, directly related to finding a job prior to the end of HVRP program year. While most grantees also indicated that they made available OJTs (11 grantees) and post-secondary education (10 grantees), very few grantees indicated that HVRP grant funds were used to support such types of training activities. Finally, while about half of grantees visited (7 grantees)

²⁹ Beginning July 15, 2016, VETS required HVRP grantees to co-enroll HVRP participants into Wagner-Peyser Act-funded Employment Service (ES), a JVSG-funded DVOP service, or WIOA Title I-funded service (such as WIOA title I services for adults or dislocated workers), according to the service strategy and timeline outlined in each individual service plan. Under this requirement, HVRP grantees are required to co-enroll HVRP participants into one of the programs listed above. Program Letter No. 03-16 details policy and guidance for enrollment of HVRP participants in the public workforce system.

EXHIBIT 3-8: EXAMPLES OF TRAINING APPROACHES AT SEVERAL HVRP SITES VISITED

| HVRP Grantee | Overview of Training Approach and Types of Training Provided |
|--|--|
| Inner Voice (IL) | While the project does not pay for post-secondary degrees, assistance is offered, under special circumstances, for ABE/basic skills training or GED training. The HVRP staff has been able to secure OJT and occupational skills training without any cost to the project for some project participants. Participants are afforded the opportunity to get basic computer training on site. There is some short-term training provided in security operations, which qualifies them to do guard/protection work. |
| Veterans Inc. (MA) | If a participant is not computer literate, they are referred to a basic computer operations class on-site. A slightly more advanced Microsoft Office class is also offered. Project staff coordinate with DVOP/AJC to provide educational/training counseling to veterans, as well as connect veterans to assessment tools, training opportunities and long-term funding sources, and referrals to other supports/assistance. Quinsigamond Community College offers training courses for those looking for higher levels of training and certification (LPN, phlebotomy, medical coding, IT, restaurant management, A+ certification, welding, auto body repair, counseling certification). Between 20 and 30 HVRP participants attend QCC each year. |
| America Works (NY) | Because of the grantee’s work-first emphasis, very few (if any) participants undertake education or training services – individuals uninterested in immediate job placement are normally not enrolled in HVRP (but would be referred to VA, WIA, or other training institutions). America Works offers some very short-term training directly tied to job placement such as: (a) security guard (24 hours of training provided by Allied Security, who then hires the individual); (b) driving a stick shift (several hours of training) so individuals can be placed into parking attendant/valet jobs; and (c) food handling and customer services training (for restaurant/retail jobs). |
| American GI Forum National Veterans Outreach Program, Inc. (TX) | According to program administrators and staff, the focus of HVRP is on job placement as opposed to training: “We tell them if they are interested in getting a degree, we will refer them elsewhere.” One partner staff person noted, “HVRP is for those who are job ready; those who need help removing barriers or training are sent to Goodwill.” No long-term/high cost training is provided by HVRP; participants are referred to Goodwill (the primary training partner) and other community partners for CNA, CDL and welding training. Skill Point provides CDL and forklift training. Some participants are referred to AJCs, and Austin Community College for training resources. Although funding is available for OJT in the HVRP budget, it is used infrequently (OJTs used to be more popular) as employers are not interested in OJTs, in part because of the paperwork involved. |

Source: Site visits conducted with 12 grantees by research team.

EXHIBIT 3-9: TYPES OF TRAINING MADE AVAILABLE FOR HVRP PARTICIPANTS AND WHO ACTUALLY PROVIDES THE TRAINING SERVICE

| Type of Education or Training | # Grantees (of 12 Visited) that Make Service Available for HVRP Participants | # of Grantee (of 12 Visited) Providing Service using HVRP Funding |
|---|---|--|
| Basic skills training or GED attainment/completion | 12 | 5 |
| Occupational skills training | 12 | 6 |
| On-the-Job Training (OJT) | 11 | 2 |
| Post-secondary education (i.e., 2 or 4-year degree education program) | 10 | 1 |
| Subsidized employment/work experience | 7 | 0 |

Source: Site visits conducted with 12 grantees by research team.

indicated that they made subsidized employment/work experience available, no grantees indicated that such activities were supported by HVRP resources. Overall, while offering a breadth of education and training opportunities, limits on HVRP funding meant that grantees generally looked to other partners and programs to pay for upgrading of HVRP participants' skills and credentials.

3. Employment Services and Job Retention Activities

In addition to education and training services, HVRP grantees were tasked with providing activities designed to develop or increase the employability of participants. These services included instruction in job search skills and job search workshops, vocational counseling, mentoring, skills assessment, resume writing techniques, interviewing skills, job development services, job placement, and follow-up services to enhance retention. Grantees were responsible for providing these services to HVRP participants directly or by referring them to other employment services programs offered by the grantee organization or other public or private agencies in the service area. This section describes and assesses the employment and job retention services provided by the 12 HVRP grantees visited.

Employment Services. As discussed above, the primary focus of the service delivery model implemented by all HVRP grantees was on activities designed to help participants find employment quickly. HVRP administrators and staff recognized that the short-term employment goals of the grants (and the limited budgets associated with the grants) required a concentration of program resources and efforts on job search and job placement activities. All grantees visited offered job readiness/job search assistance activities, either provided directly by HVRP staff, or through staff employed by partner organizations (e.g., DVOPs), or both. According to VOPAR analyses, across the 12 grantees visited, 94.0 percent of participants received job search

EXHIBIT 3-10: PERCENTAGE OF HVRP PARTICIPANTS RECEIVING JOB SEARCH ASSISTANCE AND ATTENDING JOB CLUB WORKSHOP, 12 HVRP SITES VISITED COMPARED TO ALL HVRP GRANTS NATIONALLY, PY 2013

| HVRP Grantee | % Receiving Job Search Assistance | % Attending Job Club Workshop |
|---|--|--------------------------------------|
| The Workplace, Inc. (CT) | 100.0% | 70.8% |
| Inner Voice, Inc. (IL) | 100.0% | 23.6% |
| Mountain Comprehensive Care Center (KY) | 100.0% | 38.7% |
| Washington State Department of Veterans Affairs (WA) | 100.0% | 75.9% |
| America Works of New York, Inc. (NY) | 100.0% | 78.4% |
| The Salvation Army (CA) | 100.0% | 58.4% |
| American GI Forum (TX) | 100.0% | 0.0% |
| Minnesota Assistance Council for Veterans (MN) | 100.0% | 76.2% |
| Easter Seals Greater Washington-Baltimore Region (MD) | 100.0% | 41.9% |
| New Directions, Inc. (NY) | 98.8% | 51.2% |
| Mary Hall Freedom House, Inc. (GA) | 68.5% | 2.2% |
| Veterans Inc. (MA) | 61.2% | 0.0% |
| Average - 12 Grantee Sites Visited | 94.0% | 43.1% |
| Average - All HVRP Sites | 94.3% | 34.9% |

Source: U.S. Department of Labor, Veterans Employment and Training Service Operations and Programs Activity Report (VOPAR), PY 2009-13; analysis of participant-level data.

assistance in PY 2013 (which matched the national average of 94.3 percent). As shown in Exhibit 3-10, in 9 of the 12 sites visited, all HVRP participants received job search assistance, while in a tenth site, nearly all (98.8 percent) received job search assistance. In two sites, the percentage of participants receiving job search assistance was considerably lower – at about two-thirds of participants (68.5 percent at Mary Hall Freedom House and 61.2 percent at Veterans Inc.). Additionally, the exhibit displays the percentage of HVRP participants at each of the sites that attended job club workshops, another of the services aimed at getting participants back to work. As shown in the exhibit, the proportion of participants attending a job club workshop was slightly higher across the 12 sites visited (43.1 percent of participants) versus the national average across HVRP grantees (34.9 percent). There was considerable variation across the 12

grantees, ranging from three grantees reporting no participants attending job club workshops to two grantees reporting about three-quarters of participants attending such workshops.³⁰

Job search activities included help in completing job applications, resume writing, interview preparation, career counseling, and sharing job leads. All grantees had on-site HVRP case managers or employment coordinators available to provide these types of services in workshops and individually. For example, at the time of the site visit, MCCC had recently added a job-readiness component conducted by an HVRP staff member during a one-on-one meeting with the participant (typically at the second meeting with the participant). Some grantees offered these activities in a group format, such as job clubs or job readiness workshops. For example, Easter Seals held a quarterly job readiness workshop that focused on job search techniques, resume development, and interviewing and life skills. The Workplace's two subcontracted transitional housing partners (Home for the Brave and Columbus House) held weekly and bi-weekly job readiness workshops that included discussions and activities focusing on obtaining and sustaining employment (which were in addition to weekly one-on-one meetings during which enrollees were required to submit job search logs).

Other key employment services conducted by grantee staff included identification of job openings, identification of and outreach to "veteran-friendly" employers, and direct job placement assistance. Easter Seals, for example, had an HVRP job developer who established and maintained an active list of over 100 employers open to referrals of homeless veterans. New Directions also had job developers available to work one-on-one with HVRP participants to identify job vacancies tailored to interests and skills, and to assist with job placement. Several

³⁰ One factor in the variation across grantees is that grantees may define job clubs differently, with some sites considering workshops and other group activities focused on job readiness, interviewing skills, sharing of job leads, and resume development as a "job club," while other grantees did not.

grantees, including American GI Forum/NVOP, Veterans Inc, and Salvation Army, held job fairs with targeted employers for the HVRP participants.

While HVRP grantees provided some of these employment activities directly, most also relied heavily on the services offered to the target population by other community partners, particularly DVOPs. Although there was some variation in the intensity of the collaborations across grantees, nearly all grantees had relationships with one or more DVOPs in their service areas to address the employment needs of HVRP participants. A few sites reported that all HVRP enrollees were automatically referred to DVOPs, while staff at other sites indicated that they only sent those in need of specific services (e.g., testing, assessments, job placement assistance). Overall, staff with most grantees indicated that DVOPs played a key role in providing critical employment services to HVRP participants, participating in (and in some cases leading) job readiness and job search activities, job development, job placement, and job fairs.

Grantees also relied on partnerships and collaborations with other public and private service providers to meet the employment needs of their unemployed HVRP participants. In addition to the direct assistance provided by DVOPs, some grantee staff noted the contributions of the LVERs in establishing connections with employers and identifying job leads, and other AJC staff in general for job readiness and job search workshops. For example, HVRP participants at Salvation Army participated in job readiness workshops convened by the co-located homeless shelters. Similarly, Mary Hall Freedom House's HVRP participants took part in job clubs held at the VA's Community Resource and Referral Center (CRRC) and at other local programs serving veterans. Finally, the Inner Voice HVRP initiative was co-located with the local office of the Illinois Department of Employment Security, facilitating frequent

collaboration between the two agencies, particularly on suitable job openings for HVRP participants.

Job Retention Services. Once participants were placed in jobs, HVRP staff continued to maintain regular contact with them, as mandated by the grant provisions. Grantees were required to follow-up with participants for up to three quarters, at regular intervals to determine their current status and obtain data required for completing VOPAR/TPR reporting, to identify any additional service needs related to job retention, and to offer guidance and assistance as appropriate. Most grantees reported that they attempted to stay in contact with recently placed participants especially in the months after job placement (and up to nine months), offering ongoing case management, continued access to the organization's facilities and equipment, and supportive services, such as transportation assistance and work clothing/equipment (see below) during this period. For example, MACV's HVRP case managers contacted recently placed participants initially on a weekly, and then later on a bi-weekly basis, during the first two months of employment to ensure a smooth transition and to troubleshoot issues that might result in job loss.

HVRP staff utilized varying strategies to encourage employed participants to stay in contact. Five grantees offered incentives, typically in the form of gift cards or transportation passes, to persuade participants to check-in with staff on a regular basis after job placement. For example, HVRP staff at Easter Seals encouraged a continuing connection with the participant by providing a \$50 gift card at the end of the 90-day follow-up period to those participants who stayed in touch. Two grantees reported that they invited employed past participants to return to HVRP program sessions to share their job experiences with current enrollees. HVRP staff also contacted employers directly to discuss participant job performance, to troubleshoot new barriers

**EXHIBIT 3-11: ILLUSTRATION EMPLOYMENT AND JOB RETENTION
ACTIVITIES IN SELECTED HVRP GRANTEE SITES**

| HVRP Grantee | Overview of Employment Services and Job Retention Activities Offered to HVRP Participants |
|---------------------------|---|
| Veterans Inc. (MA) | <p>Participants worked with HVRP-funded case managers, as well as the local DVOP, to develop interviewing techniques, construct an individual employment plan (IEP), identify barriers to employment, and find employment opportunities that were related to the individual’s skills and career interests. Veterans Inc. offered a weekly resume development workshop, although the majority of resume development was done one-on-one with case managers and the DVOP. Job developers worked to establish relationships with local employers and identify openings that were appropriate for HVRP participants. In collaboration with the local DVOP, Veterans Inc. conducts an annual job fair that, in 2015, was attended by more than 500 veterans and in excess of 80 employers. Additionally, veterans that were 50 years of age and older were qualified through another of the grantee’s programs, Operation Able, to obtain work experience and training through paid employment at the Veterans Inc. shelter. Once participants were placed, staff stayed in touch with the veterans and employers to ensure that employment was ongoing, and that data was collected for VOPAR reporting. Veterans Inc. also offered placed participants access to certain facilities and support services as a way of keeping them in contact with staff.</p> |
| America Works (NY) | <p>Guided by a “work-first” approach, employment services were the focus of service delivery at America Works. America Works provided help with resume development, advice relating to the job search process, interview practice, and the provision of job leads. These job readiness services were all provided one-on-one and targeted to the specific needs of each participant (i.e., no group activities were offered). Program staff also cultivated relationships with local employers, identified positions at these businesses, and then secured interviews for participants. Participants returned to American Works’ offices with proof of employment (e.g., a paystub) to receive HVRP-funded metro cards during the 90-day follow-up period. Program staff utilized this time to talk with participants about their jobs and to ensure that any issues that came up were resolved. Additionally, if a participant showed an interest in finding a better paying position once placed in a job, America Works’ staff members worked with them to identify one that was appropriate.</p> |

Source: Site visits conducted with 12 grantees by research team.

to continued employment, and to identify any new job openings for other HVRP participants.

Exhibit 3-11 presents examples of the employment and job retention activities provided in two sites.

4. Housing Assistance

Along with job placement and retention, helping homeless veterans find and maintain permanent housing was an important goal for all HVRP grantees visited. While HVRP grantees

are to facilitate placement of HVRP participants into transitional and/or permanent housing, no HVRP grant funds are spent on payment of rental cost housing.

Generally, grantees found that homeless veterans came to their HVRP grant-funded programs already housed (usually in either emergency or transitional shelters, though small numbers of HVRP participants were living on the streets or with friends when initially recruited). Seven of the grantees directly administered transitional and/or permanent housing, enabling them to provide housing to some or all HVRP participants. These directly administered housing options were mostly transitional facilities, offering housing services to veterans and often other homeless individuals within the locality. Among the grantees visited, transitional housing units operated by HVRP grantees ranged in size from five beds (transitional housing through MACV), to a 300-bed facility administered by Mary Hall Freedom House. Veterans Inc. administered facilities expansive enough to offer housing to all HVRP participants enrolled during a program year, estimating that 60 to 65 of the 180 transitional beds located in Worcester, MA were occupied by HVRP participants at any given time. Another grantee, The Workplace, Inc., utilized two subcontractors (Home for the Brave and Columbus House) to provide housing for many of the veterans enrolled in its HVRP program.

Grantees that did not directly provide emergency or transitional housing for HVRP participants through their organizations found that there was generally enough emergency/transitional housing in their HVRP service area so that homeless veterans who were eligible for HVRP could be housed in a shelter prior to, or shortly after, HVRP enrollment. Several grantees noted it could take a few days for the relatively few veterans that entered their HVRP programs without emergency or transitional housing to gain entry to emergency or transitional facilities. One exception was one of MACV's sites that served rural areas

surrounding Duluth, MN, where HVRP program staff noted a lack of emergency shelter facilities and the associated challenges in finding available shelter space for participants.

In comparison to locating emergency or transitional housing, HVRP grantees tended to experience greater difficulties in securing permanent housing for HVRP participants, particularly with regard to identifying and placing homeless veterans into affordable, unsubsidized permanent housing.³¹ In many service areas, a scarcity of affordable (unsubsidized) rental units made it challenging for participants to secure permanent housing. Many landlords/property managers were unwilling to accept HUD-VASH and Section 8 vouchers, leading to increased pressure upon the public housing sector. Public housing, often with few vacancies and long waits for available units, was generally unable to meet local housing demands of low-income residents (with lengthy waits to obtain units), including those of HVRP participants. Several grantee administrators observed that HVRP participants with criminal records (particularly those with felony convictions) sometimes encountered difficulties in securing permanent housing. Finally, finding affordable rental housing units could be challenging in certain metropolitan areas (i.e., for the grantees serving metropolitan areas such as New York, Chicago, Washington, and Los Angeles), as well as rural areas, such as those served by the Minnesota Assistance Council for Veterans (MN) and Washington State Department of Veterans Affairs (WA).

All grantees provided participants with guidance and help in securing transitional or permanent housing, depending upon the participant's circumstances and preferences. When veterans first met with grantee intake staff or case managers and were assessed as homeless or at risk of homelessness, housing options were typically discussed, and participant eligibility for

³¹ As discussed later in this chapter (see Section C.5), HVRP grantees could not enroll HVRP participants if they were already housed in permanent units. Several grantees noted that placing homeless veterans in permanent housing using sources such as HUD-VASH could be problematic because veterans might not be able to support long-term permanent housing without first addressing barriers to employment, and successfully beginning to build savings.

various housing options was assessed as well. As noted, earlier, grantees could not use HVRP funding to pay housing (rental) costs for HVRP participants, with such rental costs paid or subsidized through various HUD, VA, or other state/local programs. Exhibit 3-12 provides several examples of the approaches to provision of housing assistance for HVRP participants used by grantees visited as part of this study.

EXHIBIT 3-12: ILLUSTRATION OF HOUSING APPROACHES AT SELECTED HVRP GRANTEE SITES

| HVRP Grantee | Overview of Housing Assistance/Services Provided for HVRP Participants |
|--|---|
| Mountain Comprehensive Care Center (KY) | Addressing the housing situation for potential HVRP participants was a key priority for HVRP employment coordinators. Referrals were made as needed to emergency shelters in the service area, including Salvation Army (Ashland), West Care, Safe Harbor, Shelter of Hope, and others. MCCC operated a 25-bed transitional housing facility for homeless veterans in Pikeville, funded by the VA’s Grant and Per Diem (GPD), and local banks. Many (more than half) of the residents were HVRP participants; most of the current HVRP participants were housed there. Other transitional housing was available through Safe Harbor and the Big Sandy CAP. Transitional housing was harder to find in the northern counties where there was a large homeless population. MCCC also has short-term rental assistance funds. Rapid Re-Housing and Homeless Prevention programs also operated in the service area. Permanent Supportive Housing was also available through Safe Harbor. HVRP families were referred to the Volunteers of America SSVF program for help in obtaining affordable permanent housing. Occasionally, the MCCC housing manager works with HVRP participants on housing, helping them get on the waiting list (which can take up to a year) for Section 8 permanent housing. Some VASH vouchers were available and HVRP staff work with the VA on getting these. Pike County Housing Authority had some vouchers available. |
| American GI Forum National Veterans Outreach Program, Inc. (TX) | All homeless veterans referred to HVRP were also provided with referrals to other community partners for emergency or transitional housing. This was part of the pre-enrollment stabilization phase (which could also include referral to the VA for treatment of substance abuse). The Austin Continuum of Care (CoC) oversaw all activities of the homeless service agencies in Austin; all homeless were referred to a provider for HUD’s HMIS coordinated assessment/screening for potential placement. Emergency and transitional housing in Austin was generally available to meet the needs of homeless veterans at facilities such as New Entry, the McCabe Center, Caritas (SSVF grantee), the ARCH/Front Steps, and the Salvation Army. Program staff noted that it takes 72 hours to get into a transitional housing facility. Some HVRP participants were also referred to Caritas/SSVF for help regarding permanent housing. Finding permanent housing in the Austin area was challenging, as the occupancy rate was over 95 percent. |
| The Workplace (CT) | Homeless veterans enrolled in the Workplace’s HVRP program were generally housed in one of the two transitional housing providers (Columbus House or Home for the Brave [HFTB]) prior to enrollment in HVRP. Both agencies were subcontracted to provide case management and job readiness services for HVRP participants under the Workplace’s HVRP grant. Beds at these two transitional facilities were available to veterans for up to two years as long as they meet the standards and requirements of the facilities. Participants worked with HFTB and Columbus House staff to identify and pursue permanent housing and were sometimes referred to the VA Supportive Services for Veterans Families (SSVF) or HUD-Veterans Affairs Supportive Housing (HUD-VASH) programs for help in securing permanent housing and other supportive services. |

Source: Site visits conducted with 12 grantees by research team.

5. Supportive Services

To a large extent, and when possible, HVRP grantees referred participants to other programs operated by their organizations, the VA, and a wide array of other public agencies and nonprofit community-based organizations for provision of supportive services. This was particularly the case when the supportive services needed were long-term in nature, and/or expensive to provide, such as childcare assistance, health care services, mental health counseling, and drug treatment. All HVRP grantees used HVRP funding to some extent to pay for supportive services, usually targeting HVRP grant resources on meeting temporary and short-term needs to encourage participant engagement in HVRP services and to facilitate job search and retention. Such supportive services were provided to HVRP participants while they were enrolled in services and seeking employment, and sometimes during the follow-up period as well.³²

According to VOPAR analyses, across the 12 grantees visited, 72.5 percent of participants received supportive services in PY 2013 (which was just below the national average 74.5 percent for all HVRP participants). As shown in Exhibit 3-13, in three-quarters of sites visited, over 60 percent of HVRP participants received supportive services, and in four sites all participants received such services. In three sites, less than half received supportive services

³² Under HVRP, supportive services are defined as “services which are necessary to enable an individual eligible for training, but who cannot afford to pay for such services, to participate in a training program funded under the grant. Such supportive services may include transportation assistance, health care referral, financial assistance (except as a post-termination service), drug and alcohol abuse counseling and referral, individual and family counseling and referral, special services and materials for individuals with disabilities and/or barriers to employment, job coaches, financial counseling, and other reasonable expenses required for participation in the training program and may be provided in-kind or through cash assistance.” The definitions provided are from a Glossary of Terms that VETS developed and is part of the documentation provided on-line for the VOPAR data system, available at: <http://www.dol.gov/vets/programs/common/main.htm>

EXHIBIT 3-13: PERCENTAGE OF HVRP PARTICIPANTS RECEIVING SUPPORTIVE SERVICES AND VARIOUS TYPES OF SUPPORTS SUCH AS TOOL/CLOTHING, 12 HVRP SITES VISITED COMPARED TO ALL HVRP GRANTS NATIONALLY, PY 2013

| HVRP Grantee | % Receiving Supportive Services | % Receiving Tools/Fees/ Work Clothes/ Boots |
|---|--|--|
| Inner Voice, Inc. (IL) | 100.0% | 44.1% |
| Mountain Comprehensive Care Center (KY) | 100.0% | 22.6% |
| America Works of New York, Inc. (NY) | 100.0% | 42.0% |
| Minnesota Assistance Council for Veterans (MN) | 100.0% | 15.9% |
| New Directions, Inc. (CA) | 92.7% | 72.0% |
| Washington State Department of Veterans Affairs (WA) | 74.7% | 72.9% |
| The Workplace, Inc. (CT) | 70.8% | 24.0% |
| Easter Seals Greater Washington-Baltimore Region (MD) | 68.8% | 39.8% |
| The Salvation Army (CA) | 64.2% | 32.4% |
| American GI Forum (TX) | 48.9% | 13.8% |
| Mary Hall Freedom House, Inc. (GA) | 36.0% | 9.0% |
| Veterans Inc. (MA) | 17.8% | 6.6% |
| Average - 12 Grantee Sites Visited | 72.8% | 32.9% |
| Average - All HVRP Sites | 74.5% | 38.9% |

Source: U.S. Department of Labor, Veterans Employment and Training Service Operations and Programs Activity Report (VOPAR), PY 2009-13; analysis of participant-level data.

(with the lowest being Veterans Inc., at 17.8 percent). With respect to receipt of tools, fees, work clothes, and boots, the 12 grantees reported through the VOPAR data system that about one-third of participants (32.9 percent) received such assistance (compared with 38.9 percent nationally across all HVRP grantees). Similar to provision of supportive services, there was considerable variation in provision of such assistance across the 12 grantees visited (ranging from 72.0 percent of participants at New Directions to 6.6 percent at Veterans Inc.).

Commonly, grantees utilized HVRP resources to provide participants with transportation-related support. All grantees visited offered HVRP participants public transportation vouchers, generally to facilitate attendance at HVRP-funded activities and particularly to facilitate job

search activities such as attending job fairs, visiting employers, and attending job interviews. Some grantees also provided transportation assistance (e.g., bus passes, gas reimbursement) for a short period of time after participants were placed in jobs to ensure their ability to reliably reach work sites and retain employment. About half of grantees visited offered HVRP participants reimbursement for mileage/gas used to drive to work, and two grantees occasionally assisted with reimbursement of car repair bills. One grantee, Veterans Inc., operated several shuttle buses (as part of the package of services offered through transitional housing facilities operated by the agency) and offered shuttle services to veterans in need of transportation to job interviews and work sites.

Additionally, all grantees indicated that HVRP funding was available to purchase work-specific clothing, equipment, and tools for HVRP participants. HVRP participants were often referred to clothing closets operated either by the grantee or by other agencies to obtain suitable clothing for job interviews and, once hired, for their jobs (therefore, there was not a need to use HVRP resources to pay for work clothing usually). Seven grantees paid for fees associated with obtaining identification documents (e.g., driver's licenses), as well as licensure fees (most often CDL fees). Where needed, all grantees directed participants toward sources of food assistance within their communities (e.g., SNAP, food pantries, and soup kitchens/canteens). Several grantees distributed food through their own food pantries, and one grantee (Veterans Inc.) operated a cafeteria as part of its temporary housing facility that provided free meals for veterans.

Four grantees cultivated connections with local sources of pro bono legal services, to which they referred participants, as needed. One grantee, MACV, created a program (VetLaw) that utilized local attorneys and volunteer law students to provide veterans in need with pro-bono

legal counsel. Through VetLaw, regular legal clinics were conducted, providing a wide-range of legal services to many veterans through a single event. In situations where homeless veterans required childcare to engage in HVRP services or seek employment, HVRP grantees referred participants to subsidized childcare programs (funded generally by state or local government agencies). One exception was Mary Hall Freedom House (a recipient of a HVRP grant targeting female veterans and families), which used HVRP funding to pay for childcare temporarily for a small number of homeless veterans while they searched for employment. Finally, HVRP grantees referred participants to the VA or local service providers for health, mental health, and substance abuse services. Exhibit 3-14 provides several examples of the approaches to provision of supportive services used by grantees visited.

**EXHIBIT 3-14: ILLUSTRATION OF PROVISION OF SUPPORTIVE SERVICES IN
SELECTED HVRP GRANTEE SITES**

| HVRP Grantee | Overview of Provision of Supportive Services for HVRP Participants |
|-------------------------------|--|
| The Workplace (CT) | HVRP funds were mostly used for the following supportive services: bus/rail passes; work clothing/tools, and; obtaining licenses (mostly CDLs). The Workplace’s AJC had clothing and food pantries, which were readily accessible to HVRP participants. A substantial number of referrals were made to the VA, AJC, DVOPs/LVERs, and other organizations for other supportive services. The Workplace had Melville Foundation funding to help offset cost of supportive services. |
| Easter Seals (MD) | Case managers maintained contact with participants after job placement to ensure that their supportive service needs were being met and jobs were retained. Partnering organizations provided most supportive services (e.g., participants were referred to A Wider Circle for free work clothing and the District of Columbia Food Pantries for emergency food needs). Small amounts of HVRP funds were used to purchase gas cards and work tools, and to pay for licensure fees. |
| America Works (NY) | Up to 90 days following job placement, participants were eligible to receive weekly/bi-weekly subway passes. Participants had to come in to AW offices and provide a weekly/bi-weekly pay stub to obtain each metro pass. This represented a fairly sizeable program cost, with subway passes costing about \$120 a month (about \$360 per placed individual over a 3-month period). The program also made daily subway passes available for some participants, primarily during the job search process. HVRP funds were also used (but for relatively few participants) to purchase work clothing, boots, and state IDs/licenses. Finally, New York City had a relatively large number of public/private organizations and charities that homeless veterans could visit to obtain food, work clothing, and other needed supports (especially food pantries and clothing closets). |
| American GI Forum (TX) | HVRP grant funds were used for the following support services: transportation (e.g., bus passes); work tools/equipment/shoes, and; emergency food needs. Other supportive services (e.g., legal aid, health care) were available through linkages established with other community partners (e.g., Goodwill, VA). Staff noted that HVRP funds for support services were very limited. Additionally, staff noted that approval time from the central office for these services (e.g., bus passes) might take up to a week. As a result, staff looked for other community resources to meet these needs quicker. |

6. Case Management Services

HVRP program requirements (similar to most programs serving the homeless population) stress the importance of case management as a strategy for planning program services to meet individual participant needs, tracking participant progress through services and troubleshooting challenges as they arise, and ensuring that participants receive and are referred to the services needed for achieving long-term self-sufficiency.³³ In all 12 sites visited, emphasis was placed on provision of case management throughout participation in HVRP, and to some extent, after exit from the program to help track participant outcomes and assist with employment and housing retention. Across the 12 HVRP sites visited, all prospective HVRP participants met with case managers upon intake or shortly thereafter.

The activities of case managers were fairly similar across grantees. Because HVRP programs tended to be relatively small (i.e., three to five staff), case managers often first meet new HVRP recruits as part of the intake and assessment process, assessing the status of participant eligibility, verifying veteran and homelessness status, and ensuring that intake forms were properly filled out by clients. As part of this process, case managers then often worked with HVRP participants to assess readiness and willingness to work, barriers to employment, services needed (both those provided in-house and those needing referrals to other agencies), suitable job positions, and steps toward permanent housing and employment. Case managers at all grantees helped veterans develop EDPs/ISPs and closely followed participant progression in meeting goals. Four grantees also utilized vocational specialists to identify job positions in the community, and work with participants to locate and apply to appropriate openings.

³³ Under HVRP, case management is defined as “a client centered approach in the delivery of intensive services designed to: prepare and coordinate comprehensive employment plans for participants; to assure access to the necessary training and supportive services; and to provide support during program participation and after job placement. See: Appendix-I HVRP Definition and Terms.

**EXHIBIT 3-15: ILLUSTRATION OF CASE MANAGEMENT APPROACHES AT
SELECTED HVRP GRANTEE SITES**

| HVRP Grantee | Overview of Case Management Approach for HVRP Participants |
|---|---|
| <p align="center">Mary Hall Freedom House (GA)</p> | <p>The case manager reviewed the pre-assessment documentation, ensuring all eligibility material had been submitted, gathered additional information about the homeless veteran, such as disability status, VA claims, housing needs, and financial status, and provided a basic overview of the program (e.g., explaining the objectives of the program and the services and support available through the grantee and partnering organizations). Once enrolled in HVRP each participant was assigned to a case manager (referred to as a Veteran Employment Services Specialist). The case manager was available to assist the HVRP participant with issues or other barriers to employment or overcoming homelessness.</p> |
| <p align="center">Minnesota Assistance Council for Veterans (MN)</p> | <p>All participants were assigned to a MACV case manager. Case managers first ensured client eligibility, then helped to assess job readiness, types of services needed, and coach veterans on job search and interview techniques. Case managers relayed information to the Employment Coordinator regarding each participant’s job readiness and interests to help focus job search efforts and identify appropriate job openings. The Employment Coordinator worked with local DVOPs and HVRP participants to refine the job search and employment activities.</p> |
| <p align="center">America Works (NY)</p> | <p>All HVRP participants were assigned to a case manager (referred to as Corporate Representative). Corporate Representatives work one-on-one with participants, particularly focusing efforts on job readiness and job placement. The case manager was responsible for tracking and documenting job placement/retention, as well as approving subway cards.</p> |

Source: Site visits conducted with 12 grantees by research team.

Furthermore, once placed, to the extent possible, case managers continued to stay in touch with participants (and employers) during the follow-up period to promote continued employment and housing retention, as well as to obtain documentation needed to report on job retention for HVRP reporting. Exhibit 3-15 illustrates the role that case managers played at selected grantee sites.

D. Grantee Partnerships and Collaboration

As was mentioned earlier in the report, it is likely that none of the HVRP grantees would have been able to operate their HVRP initiatives without partnerships and collaboration. The sites visited varied in their partnerships from those that were almost totally dependent on connections with other service providers to ones with minimal dependence on outside organizations. The relationships established by the grantees were with all levels of government, community-based organizations, public and private educational providers, community groups,

employers, and individuals donating time and skills. As part of the interview process during site visits, grantees administrators were asked to identify their three most important partners (see Exhibit 3-16 for responses).³⁴ As shown in Exhibit 3-16, the Department of Veteran Affairs was the most frequently ranked as the first, second, and/or third most important partner (i.e., identified 20 times among the 12 grantees) and identified as the most important partner by about half of the grantees (7 grantees). Some grantees were heavily dependent on the VA for program referrals and others needed the financial support for participants from the Supportive Services for Veteran Families (SSVF). The VA's Community Resource and Referral Centers (CRRCs) were ranked among the top three most important partners by five of the 12 grantees visited. CRRCs, which are relatively new and not operational nationwide, were ranked as important by HVRP grantees because they provided office space in a single facility for representatives of all types of organizations in the local area that serve veterans (i.e., a one-stop shop for veterans). HVRP grantees viewed this co-location of staff from programs serving veterans at CRRCs as not only helpful to veterans, but also useful for organizations providing services because staff can easily confer with each other about services offered and opportunities for collaboration. Clients are frequently sent from one organization to another, depending on their needs, without leaving the building.

The responses to the interview question regarding working with the DOL employment and training programs were interesting. Some sites acknowledged that they would be unable to provide many services to participants without these programs. Two grantees identified the DVOP/LVERs as their most important partnership, with four others stating they were their second or third most important partner. When the DVOP/LVERs were considered important

³⁴ Some grantees were unable to limit their answers to 3 and some provided fewer than 3 answers. All answers are included in the chart.

EXHIBIT 3-16: PARTNERS/COLLABORATING ORGANIZATIONS CONSIDERED MOST IMPORTANT IN THE IMPLEMENTATION OF THE HVRP PROGRAM AS IDENTIFIED BY 12 SITES

| PARTNER | # of Grantees Ranking Partner as Most Important | # of Grantees Ranking Partner as 2nd Most Important | # of Grantees Ranking Partner as 3rd Most Important | Total Times Ranked as 1st, 2nd, or 3rd Most Important Partner |
|---|--|---|---|---|
| Veterans' Administration Programs | 7 | 5 | 8 | 20 |
| VA-Unit/Program Not Specified | 5 | | | 5 |
| VA-SSVF | 2 | 3 | | 5 |
| VA- CRRC | | 2 | 3 | 5 |
| VA-Mental Health Homeless Programs | | | 3 | 3 |
| VA-Benefits Counselor | | | 1 | 1 |
| VA-Outreach | | | 1 | 1 |
| USDOL Programs | 4 | 4 | 8 | 16 |
| DVOP/LVER | 2 | 3 | 1 | 6 |
| Employment Service | 1 | | 3 | 4 |
| America's Job Centers | | 1 | 2 | 3 |
| WIA | | | 2 | 2 |
| DOL-VETS | 1 | | | 1 |
| Nonprofit Charitable Organizations | 2 | 6 | 1 | 9 |
| Goodwill | 1 | | | 1 |
| Catholic Charities | | 1 | | 1 |
| CARITAS | | 1 | | 1 |
| Hope Harbor—Salvation Army | | 1 | | 1 |
| Home for the Brave | 1 | | | 1 |
| Volunteers of America | | 1 | | 1 |
| Rally Point 6 | | | 1 | 1 |
| Columbus House | | 1 | | 1 |
| Every Woman Works | | 1 | | 1 |
| Housing Assistance | 3 | 0 | 0 | 3 |
| HUD | 2 | | | 2 |
| Neighborhood Assistance Corporation of America (NACA) | 1 | | | 1 |
| State and Local Veterans Assistance Programs | 0 | 1 | 2 | 3 |
| MGL Chapter 115 Housing (MA Vet Benefits) | | 1 | | 1 |
| County Veterans Assistance Fund (WA) | | | 1 | 1 |
| NYC Human Resources Administration | | | 1 | 1 |
| Private Sector Training Provider | 0 | 0 | 1 | 1 |
| Dolphin Trucking | | | 1 | 1 |
| Other | 1 | 0 | 0 | 1 |
| Emergency Shelters (unspecified) | 1 | | | 1 |

Source: Site visit discussions with grantee administrators and staff; some columns have more than 12 responses because grantees identified more than one type of partner as their first, second, or third most important partner.

partners, the reason given seemed to relate to the individual occupying the position and the DVOPs responsiveness to HVRP grantee staff. Some grantees reported that their relationship and collaboration with DVOPs in their locality shifted over time; for example, grantee staff may have been able to establish a good relationship with a DVOP, but when the DVOP left the position, staff may have had difficulty or been unable to establish a similar close relationship with the new DVOP. The Employment Service was ranked as the most important partner by one grantee and second most important by two others; while the local AJC was identified as a second or third most important partner by three grantees. Taken together, DOL employment and training programs were second in importance to the VA as a partner (i.e., ranked first, second, or third most important partner 16 times by the 12 grantees visited). The remaining important partnerships were scattered among community-based organizations, housing assistance providers, and a variety of state and local programs established to provide financial and other types of assistance to veterans. In Washington State, for example, each county has a County Veterans Assistance Fund with limited funds to support all veterans needing assistance; in Massachusetts, a similar program exists that helps with housing needs.

E. Program Management and Staffing Levels

The majority of grant funding for HVRP was used to support staff. In 11 of the sites, staff were hired specifically for HVRP or were already employed by the grantee and their time was redirected to providing services for the HVRP participants either on a part-time or full-time basis. The remaining grantee hired a HVRP Program Director and contracted out for the additional staff.

All the programs used other funding sources or collaborative relationships to fill some program needs. For example, no dedicated housing counseling or direct mental health services

were supported by any of the 12 grantees, but that did not mean those services were not made available to HVRP participants. Intake staff and caseworkers provided housing assistance in the form of referrals to housing programs managed by their parent organization or to other organization in the community operating suitable housing programs for the homeless.

Exhibit 3-17 categorizes the staffing functions directly supported by each of the 12 grantees visited. There were no prescribed job titles for each function across the projects, and in some cases, multiple functions were assigned to a single individual so, at best, the chart provides a general overview of staffing patterns and FTE (full-time equivalent) staff estimates. As is evident from the exhibit, in the absence of some level of outside or internal organizational support, these programs would have had a very difficult time providing the full range of services needed by homeless veterans served. Of the 12 sites visited, only three were able to support a full-time HVPR project director, and often administrators and staff were split between different funding sources.

Across the 12 sites visited, overall staffing averaged 4.0 FTEs, with FTEs ranging from as few as 1.1 (at Minnesota Assistance Council for Veterans, which also had the lowest budget of the 12 sites visited at \$120,000) to 7.0 FTEs (at American GI Forum). Eight of the 12 site visited had between 3.1 and 4.5 FTEs paid for with their HVRP grant funding for the current program year. On average, the sites had 3 staff members involved in direct service delivery, with job titles such as case manager, counselor, and job developer. On average, sites had one manager, and one person in a support function, such as accounting, information technology, or clerical work. Staffing levels were constrained by HVRP grant levels. Some grantees mentioned

EXHIBIT 3-17: FULL-TIME EQUIVALENT (FTE) STAFF, BY MAJOR TYPE OF STAFF, BY GRANTEE

| HVRP Grantee | HVRP Grant Award | Total FTE | Service Delivery | Management | Other Staff |
|---|-------------------------|------------------|-------------------------|-------------------|--------------------|
| American GI Forum (TX) | \$300,000 | 7.0 | 4.0 | 1.0 | 2.0 |
| Veterans Inc. (MA) | \$300,000 | 6.4 | 4.0 | 1.0 | 1.4 |
| The Salvation Army (CA) | \$300,000 | 4.5 | 4.0 | 0.5 | 0.0 |
| Inner Voice, Inc. (IL) | \$270,000 | 4.4 | 3.0 | 0.6 | 0.8 |
| Mary Hall Freedom House, Inc. (GA) | \$235,000 | 4.4 | 4.0 | 0.2 | 0.2 |
| The Workplace, Inc. (CT) | \$299,670 | 3.9 | 2.7 | 1.0 | 0.2 |
| Mountain Comprehensive Care Center (KY) | \$162,400 | 3.6 | 3.6 | 0.0 | 0.0 |
| Easter Seals Greater Washington-Baltimore Region (MD) | \$300,000 | 3.5 | 3.0 | 0.5 | 0.0 |
| Washington State Department of Veterans Affairs (WA) | \$300,000 | 3.2 | 3.0 | 0.2 | 0.0 |
| America Works of New York, Inc. (NY) | \$300,000 | 3.1 | 2.1 | 0.5 | 0.5 |
| New Directions, Inc. (CA) | \$300,000 | 2.6 | 1.8 | 0.5 | 0.3 |
| Minnesota Assistance Council for Veterans (MN) | \$120,000 | 1.1 | 1.0 | 0.1 | 0.0 |
| Average - 12 Grantee Sites Visited | \$265,589 | 4.0 | 3.0 | 0.5 | 0.4 |

Note: Full-time equivalent estimates are based on data provided by grantees during site visits, for the current program year. Site visits were conducted between in the Spring/Summer 2015.

that because of salaries offered, they were only able to attract recent college graduates for their openings and others said they had better success with candidates who had less than a college degree.

F. Grantee Performance Reporting and Data Systems

HVRP grantees are required to submit quarterly fiscal and performance reports. In order to meet the reporting requirements, grantees are required to have access to: (1) the Department of Labor’s Grantee Reporting System (GRS) for submission of the Standard Form (SF) 425 (Federal Financial Report), and; (2) the VETS Operations and Programs Activity Report

(VOPAR) for submission of performance reports.³⁵ An important part of the VOPAR reporting system, and a part of the system that was a focus of HVRP grantee comments during site visits, is the Technical Performance Report (TPR), an Excel application that was developed by the VETS National Office.³⁶ The TPR contains a series of Excel spreadsheets (or tabs) that are designed to assist grantees in reporting characteristics of each homeless veteran enrolled in HVRP (such as gender, ethnic background, age, time of last military service, and specific population subgroups of veterans, including economically disadvantaged, disabled, etc.). Additionally, the TPR provides several additional Excel spreadsheets to record employment and job retention information for each participant exited from HVRP on a quarterly basis. Once participant-level data is entered into the TPR worksheets, aggregate data on participant characteristics, enrollments, and outcomes are automatically tallied for most VOPAR reporting data elements. Additionally, for performance monitoring purposes, the VOPAR/TPR data system allows for automatic comparison of quarterly goals (for example, on enrollment, entered employment, and job retention) on a quarterly and annual basis. With HVRP grantees accountable for meeting quarterly performance goals, the VOPAR/TPR system allows for determination on a quarterly basis (by HVRP grantees and USDOL/VETS) of whether grantees meet key program performance measures.

Grantees were largely in agreement about the challenges and unintended consequences of the VOPAR data system and HVRP performance reporting. First, grantee administrators indicated that VOPAR/TPR data entry was time-consuming and sometimes duplicative of data

³⁵ For more detailed description of HVRP grantee reporting requirements see Veterans Employment and Training (VETS) *Technical Assistance Guide (TAG) for Competitive Grants Reporting, PY 2014* (available at <http://www.dol.gov/vets/grants/PY14-Competitive-Grants-TAG.pdf>).

³⁶ The TPR file is available at: <http://www.dol.gov/vets/programs/common/main.htm>.

already entered in other grantee data systems. Most grantees indicated they had alternative participant tracking systems for organizational reporting (such as Efforts to Outcomes) or for performance reporting on grants received from other funding sources (such as HUD, DOL, the VA, and foundations). For example, several grantees indicated that they used the Homeless Management Information System (HMIS) to gather similar participant-level data items on HVRP and other homeless individuals served by their agencies.³⁷ In addition to the VOPAR/TPR system, several grantees visited indicated that in the case of HVPR participants enrolled in other programs at the grantee organization, agency staff may have to enter individual-level data collected on homeless veterans into two, or even three, participant tracking systems. Sometimes the data entered would be exactly in the same format as data entered into the VOPAR/TPR (e.g., same coding for gender), while in other instances there were some differences in coding on the same types of variables (e.g., different coding for race/ethnicity variables). These grantees indicated that there was no ability at the grantee-level to electronically upload (or populate) data collected and entered into other participant tracking systems (such as HMIS) to the VOPAR/TPR spreadsheets. As a result, grantee administrators and staff indicated that they spent substantial

³⁷ A Homeless Management Information System (HMIS) is a local information technology system used to collect client-level data and data on the provision of housing and services to homeless individuals and families and persons at risk of homelessness. Each Continuum of Care is responsible for selecting an HMIS software solution that complies with HUD's data collection, management, and reporting standards. The U.S. Department of Housing and Urban Development (HUD) and other planners and policymakers use aggregate HMIS data to better inform homeless policy and decision making at the federal, state, and local levels. HMIS enables HUD to collect national-level data on the extent and nature of homelessness over time. Specifically, an HMIS can be used to produce an unduplicated count of homeless persons, understand patterns of service use, and measure the effectiveness of homeless programs. Data on homeless persons is collected and maintained at the local level. HMIS implementations can encompass geographic areas ranging from a single county to an entire state. The HEARTH Act, enacted into law on May 20, 2009, requires that all communities have an HMIS with the capacity to collect unduplicated counts of individuals and families experiencing homelessness. Through their HMIS, a community should be able to collect information from projects serving homeless families and individuals to use as part of their needs analyses and to establish funding priorities. Additional information on HMIS, including data items included in HMIS, can be found at <https://www.hudexchange.info/programs/hmis/>.

amounts of staff time double- and triple- entering data into multiple participant tracking systems (e.g., participant name, date of birth, gender, special target groups, job placement date, hourly wage, etc.).

Many HVRP grant administrators suggested the addition of a capability for HVRP grantees to automatically upload basic data from existing agency systems to the TPR worksheets (tabs) that would reduce duplicate data entry, and save grant funds that could be otherwise devoted to direct client services.³⁸ Additionally, several grantees mentioned that if it were possible to piggyback or consolidate HVRP participant-level reporting with data already being collected for HMIS data systems, such a change would reduce the need to complete multiple forms for participants, and reduce the data collection burden for both participants and grantee staff. However, such consolidation or coordinating of data collection and reporting would require agencies funding and overseeing homeless programs to work together on defining common data elements (i.e., VETS could not accomplish this alone).

A second issue related to the VOPAR system (and HVRP performance reporting, in general) is the requirement that all HVRP participants be exited as of the end of each program year (i.e., as of June 30, the end of the grant year). Other DOL funded workforce programs, such as WIA/WIOA, do not require participants to be exited at the end of each program year, but rather allow for carryover of participants from one program year to the next. At the grantee level, the requirement to exit HVRP participants that are still engaged in services at the end of each program year (i.e., as of June 30th of year program year) and then re-enroll such individuals the following day (July 1st) is burdensome and wasteful for both staff and participants. Probably

³⁸ This ability to upload from other systems may or may not be feasible, in part, because even if data elements collected are similar across programs, the coding of data elements might not be across data systems (e.g., race/ethnicity or service categories may be coded differently). Additionally, different programs may have varying reporting requirements to funders, necessitating different or more detailed breakdowns on data elements.

more critical to the operations and effectiveness of the HVRP program, however, is that such an artificial exit date, together with the need to meet employment and other performance goals, has potentially adverse effects on the stream of enrollments into HVRP, service delivery, and participant outcomes. Many grantees indicated that in order to meet performance reporting goals (particularly entered employment goals) for a program year, they had to carefully time enrollments into HVRP so that they were not too late in the reporting year. With respect to enrollments late in the program year (e.g., the final quarter), sites indicated that unless individuals were job-ready at the time of enrollment or shortly thereafter, it was challenging to obtain job placement or retention credit for the individual within the grant year. Though participants who enter late in the program year could be exited and then re-enrolled in the next program year, such enrollments counted against meeting performance standards in the current program year (i.e., if the participants could not be placed in jobs by the end of the program year). Furthermore, the need to exit individuals each year by June 30th meant that grantees had to be careful about enrolling participants in more substantive, human-capital building education and training services, especially after the 2nd or 3rd quarter of each program year (i.e., for fear they would still be engaged in training and not yet ready for job placement at the end of the program year). Most grantees indicated they carefully screened incoming participants on likelihood of employment by the end of the program year, and that they were unlikely to enroll homeless veterans in HVRP that needed longer periods of stabilization, training, or other services that would preclude job placement by the end of the program year.

Third, a related concern for several grantees was the requirement that grantees submit a Corrective Action Plan (CAP) if performance outcomes should fail to meet key performance goals by plus or minus 15 percent for a quarter on four key outcomes: number of enrollments,

number of placements, placement rate, and cost per placement..³⁹ Grantees all stated that they should not be required to complete a CAP if they exceeded performance requirements, which is time-consuming and difficult to justify to senior administrators within their own organizations.

Furthermore, HVRP grantees felt that the need to justify performance on a quarterly basis (and threat of the need to submit a CAP) could affect whether, and when, homeless individuals were enrolled in HVRP services. For example, grantees sometimes had to be quite strategic with the timing of new enrollments so that they would neither exceed nor underperform their enrollment goal. Several grantees indicated that they might hold off on new HVRP enrollments or become more selective if they had already met enrollment goals for a quarter (so as not to push above 15 percent of their enrollment goal). Several grantees indicated that care had to be taken both in setting goals for each given quarter, and making sure not to exceed or fall short of goals, as completing the CAP is time-consuming and could reflect negatively (and unjustifiably) on the organization. Grantees particularly questioned the need for, or desirability of, penalizing grantees for exceeding performance goals.

Several other challenges with regard to data collection and performance reporting were identified during site visit discussions with staff and administrators:

- **Once data is loaded onto a VOPAR/TPR spreadsheet and uploaded to VETS, it is time-consuming and difficult to change errant data entries.**
- **The VOPAR/TPR does not give full credit for all services provided to HVRP participants.** One site noted that VOPAR reporting did not track or give credit for much of the day-to-day work done by case managers, such as linking participants to other needed services.
- **VOPAR/TPR data entry is not real-time and does not offer advanced capabilities or analytics that are common in state-of-the-art performance reporting systems.** Grantees often held off on entry of participant-level data into TPR worksheets until near

³⁹ See Veterans' Program Letter No. 02-12, *Competitive Grants Quarterly Reporting Guidance* (Issued by Ismael Ortiz, Jr.), pp. 5-6 for additional details on standards for late reporting, inaccurate reporting, non-compliance issues, and poor performance that can necessitate CAP reporting by grantees.

the end of the quarter (though made sure that all data were entered on enrollments, placements, and retentions by the end of each quarterly reporting period). Hence, data entry into the system was not real-time and data entered into the VOPAR/TPR system was not easily used by grantees for tracking performance on a real-time basis.

Several grantees felt that given rapid changes in information technology in recent years and the number of years that the TPR/VOPAR system has been in the field, the time might be right for VETS to upgrade and/or overhaul of the data system. Additionally, grantee administrators generally agreed VETS should reconsider: (1) program requirements to exit all HVRP participants at the conclusion of each program year and (2) the requirement that grantees submit a CAP when performance exceeds performance goals.

G. Sustainability, Lessons Learned, and Conclusions

During site visit discussions, most grantees indicated that they planned to submit responses to future HVRP grant solicitations to continue to provide HVRP-funded activities in their communities. Because grantees were in varying base/option years on their current grants, the timing of when grantees would re-submit a proposal for future HVRP funding was more distant for some grantees than others. While planning to submit grant proposals in the future, most grantees indicated that they had not developed detailed sustainability plans if, and when, their grants ended (and if they are not re-funded). Most of the grantees indicated that they had some general ideas about the types of funding sources they might turn to in order to sustain their HVRP grant-funded activities should they not receive a continuation of HVRP funding. Several grantees said they would look to other private, state, or local funding sources. For most grantees, HVRP funding is a relatively small share of overall organization funding, and so, the grantee could draw upon other funding sources within their organizations to fund HVRP staff (which is typically the largest cost item for grantees) and continue program services (though perhaps

scaled-down from current services). Most grantees indicated that they would continue to serve homeless veterans even if their HVRP grants disappeared. For example, some grantees are veterans serving organizations (such as American GI Forum National Veterans Outreach Program, Veterans Inc., Washington State Department of Veteran Affairs) that would continue to serve a range of veterans, including homeless veterans; others run transitional shelters that would continue to house homeless veterans and other homeless populations (such as Veterans Inc. and the Salvation Army); and, others are large diversified human services organizations that would continue serving homeless veterans along with large numbers of disadvantaged/low-income individuals (such as Salvation Army and Easter Seals). Finally, there are many other veteran service organizations, and public/private human services agencies that target and serve veterans within the communities in which the HVRP programs operate – and many of these organizations currently serve as partners to, and collaborate with, HVRP grantees. Such organizations could also serve as HVRP grantees in the future or be relied upon to fill service gaps for homeless veterans should current HVRP grantees not receive future HVRP grants to serve the locality.

During site visits, grantee administrators and staff, as well as administrators at linked organizations, identified a number of key lessons in regards to serving homeless veterans with HVRP grant funds. Some of the grantees visited had received HVRP grant funds for 10 or more years, and so, had refined their initiatives over time based on their experiences and lessons learned with regard to effective service delivery and rapid placement of homeless veterans into jobs and housing. All grantees visited emphasized the importance of partnering with other service providers and establishing community collaborations in order to bring together the varied resources and services required to provide employment services and a range of other services to move homeless veterans toward long-term self-sufficiency. The constraints on annual HVRP

resources (at up to \$300,000 per grant, per year) meant that HVRP grantees had to find their niche – emphasizing job readiness training, job placement services, limited funding of short-term training (in some cases to bolster credentials), case management, and other support services – while at the same time reaching out to other partners for more substantive and costly services, including provision of longer-term education and training (leading to certification and degrees), subsidized transitional/permanent housing, mental health and substance abuse treatment, childcare, and a host of other supports. Grantees also stressed the need for careful screening and assessment of homeless veterans during the intake process to ensure that new recruits were suitable and ready to benefit from the limited menu of services that could be directly provided with HVRP funding. Because of funding constraints, and an emphasis on meeting job placement goals within the narrow confines of a program year, grantee administrators emphasized the need to target HVRP assistance on homeless veterans interested in working, and those with good prospects for employment within the current program year. Additionally, for those not ready for entry into HVRP, grantee administrator and staff stressed the need for strong and responsive referral arrangements with the VA, AJCs, DVOPS, education and training providers, housing providers, and other public/private health and human service agencies within the service area.

In addition to the lessons described above, several of the more common lessons learned in serving homeless veterans with HVRP funding were the following:

- **Placing and maintaining HVRP participants in transitional housing, particularly on-site or at a subcontracted provider’s site, is helpful in providing a structured environment while the veteran is engaged in HVRP services.** Maintaining close contact with transitional housing provider staff helps HVRP staff to: (a) identify specific barriers to employment that might not be evident at intake, (b) monitor participant involvement in program activities and progress in searching for a job, and (c) troubleshoot issues/challenges that may derail success in securing and retaining employment.

- **Placing veterans in permanent housing prior to addressing the underlying issues that led to homelessness and joblessness may be counterproductive in terms of retaining employment and housing over time.** If a homeless veteran is placed in permanent housing prior to enrollment in HVRP, he or she is no longer considered homeless, and hence, is ineligible for job readiness training, job placement assistance, and a host of other HVRP services.
- **In many cases, enrollment in HVRP has helped veterans learn what resources are available both through the program and within the community, including services available through the workforce development system (e.g., DVOPs, AJCs, and education and training providers).** Having access to wraparound, comprehensive services is beneficial in meeting the wide variety of needs of homeless veterans, and moving them towards self-sufficiency.
- **Several grantees noted that homeless veterans with criminal records can be challenging in placing into jobs and permanent housing (particularly homeless veterans that have been convicted of sexual and violent crimes).** In working with ex-offenders it is important for case managers to provide one-on-one job readiness and placement assistance to ensure resumes, cover letters, and approaches to job searches enable ex-offenders to advance through the employer screening process, and gain the opportunity to be considered for job openings. Working with veteran-friendly employers to identify job openings that the employer is willing to consider filling with an ex-offender is critical. Advocating on behalf of the veteran with the supervisor making the hiring decision can make a critical difference in terms of placement and sustained employment within the position.
- **Case managers or vocational specialists working with homeless veterans one-on-one is viewed as an effective way to determine participant needs, both at intake and throughout each participant's period of enrollment in HVRP, as well as allowing the creation of an employment development plan to address each veteran's needs, capabilities, desires, and constraints.** An ongoing case management relationship is also critical for early identification and troubleshooting employment, housing, mental health/substance abuse, and other issues before they lead to program attrition or job/housing loss. An ongoing connection with a HVRP staff member also facilitates tracking of employment outcomes (for reporting) and provision of follow-up support.
- **Finally, developing relationships with local employers is key to job placement and job retention.** Engagement with employers to identify job vacancies and providing suitable and motivated HVRP participants to fill such vacancies is vital to maintaining relationships with the employers over the long-term. Employers can also participate in job readiness workshops and job clubs to provide direct input to HVRP participants on effective job search strategies, available job opportunities and employers to consider during job search, and feedback during mock interviews on interview techniques and effectiveness.

CHAPTER 4: KEY FINDINGS FROM ANALYSES OF PROGRAM PERFORMANCE DATA

A. Introduction

As previously noted, HVRP grantees are required to submit quarterly performance reports via an automated data system referred to as the VETS Operations and Programs Activity Report (VOPAR). VETS monitors reports submitted by grantees to determine if grantee performance is within the acceptable range. As part of the VOPAR system, grantees submit participant-level data on a core set of data items each quarter. These participant-level data items are submitted via a spreadsheet on each enrolled HVRP participant each quarter. VETS provided the Avar research team with VOPAR participant-level records for all HVRP participants for a five-year period (PY 2009-13).⁴⁰ This chapter first provides frequencies and tabulations that examine patterns of enrollment, service delivery, and key outcomes (see Sections B-E) over the five-year period, and variation across grantees. Section F of this chapter provides exploratory regression analysis to examine participant job placement and hourly wage outcomes in relation to select participant characteristics and services received. The final section of this chapter examines job placement outcomes reported as part of the VOPAR system in comparison with data collected as part of the Unemployment Insurance wage record reporting system in one state.

⁴⁰ A copy of the VOPAR participant tracking form is available in Appendix C-7, and definitions of key data items included in the analysis of this chapter are provided in Appendix C-3 and C-5.

B. Analyses of Program Enrollment and Participant Characteristics

1. HVRP Enrollment Trends

As shown in Exhibit 4-1, participant enrollment in HVRP totaled 16,001 in PY 2013 across the 156 grantees. Between PY 2009-2013, annual enrollments averaged 15,628 participants. Over the five-year period, enrollment increased by 27.5 percent, with most of the growth occurring between PY 2009 and 2010 (a 25.9 percent increase). Between 2010 and 2013, enrollment levels were relatively stable.

EXHIBIT 4-1: TOTAL ENROLLMENT IN HVRP, PY 2009-13

| Program Year | Number Enrolled | Change from Previous Year |
|---------------------|------------------------|----------------------------------|
| PY 2009 | 12,548 | |
| PY 2010 | 15,802 | 25.9% |
| PY 2011 | 16,312 | 3.2% |
| PY 2012 | 17,477 | 7.1% |
| PY 2013 | 16,001 | -8.4% |
| Total | 78,140 | |
| Average per Year | 15,628 | |
| Change (PY 2009-13) | 27.5% | |

Note: HVRP grantees are required to exit participants by the end of each program grant year and reenroll them if additional services are needed in the next grant year; thus, the figures in the table do not provide an unduplicated count of participants.

Source: U.S. Department of Labor, Veterans Employment and Training Service Operations and Programs Activity Report (VOPAR), PY 2009-13; analysis of participant-level data.

In PY 2013, the average enrollment per grantee was slightly more than 100 participants (at 103 participants per grantee). As shown in Exhibit 4-2, about three-quarters (75.6 percent) of grantees had between 50 and 199 participants, with the highest concentration of grantees serving 100 to 149 participants (23.1 percent). Very few (9 grantees) enrolled more than 200 participants, with the highest enrollment in PY 2013 reaching 254 participants at one site.⁴¹

EXHIBIT 4-2: DISTRIBUTION OF HVRP ENROLLMENTS BY GRANTEE

| # of HVRP Enrollments per Grantee | Number of HVRP Grantees | Percent of Grantees | Cumulative Percent |
|-----------------------------------|-------------------------|---------------------|--------------------|
| 1-24 | 14 | 9.0% | 9.0% |
| 25-49 | 15 | 9.6% | 18.6% |
| 50-74 | 23 | 14.7% | 33.3% |
| 75-99 | 31 | 19.9% | 53.2% |
| 100-149 | 36 | 23.1% | 76.3% |
| 150-199 | 28 | 17.9% | 94.2% |
| 200+ | 9 | 5.8% | 100.0% |
| Total | 156 | 100.0% | |

Source: U.S. Department of Labor, Veterans Employment and Training Service Operations and Programs Activity Report (VOPAR), PY 2009-13; analysis of participant-level data.

2. HVRP Participant Characteristics

Exhibit 4-3 displays select participant characteristics collected as part of the VOPAR system for PY 2013 enrollees.⁴² Of the total 16,000 participants, over four-fifths (87.9 percent, 14,062) were male. The most common racial/ethnic group represented among participants was African American (49.9 percent), while the second-most populous group was Caucasian (38.4

⁴¹ Appendix C-1 provides a breakdown of participant enrollment by individual grantee for PY 2013.

⁴² Appendix C-2 includes tables of participant characteristics for PYs 2009, 2010, 2011, and 2012.

EXHIBIT 4-3: HVRP PARTICIPANT CHARACTERISTICS AT ENROLLMENT ACROSS GRANTEES, PY 2013

| Participant Characteristics (at Intake) | Number | Relative Percentage |
|--|---------------|----------------------------|
| Gender | | |
| Female | 1938 | 12.1% |
| Male | 14,062 | 87.9% |
| *Total* | 16,000 | 100.0% |
| Ethnic Background | | |
| Caucasian | 6,141 | 38.4% |
| African American | 7,977 | 49.9% |
| Hispanic | 1,316 | 8.2% |
| Native American | 149 | 0.9% |
| Other Minority | 415 | 2.6% |
| *Total* | 15,998 | 100.0% |
| Age | | |
| 18-24 | 569 | 3.6% |
| 25-29 | 1,320 | 8.2% |
| 30-34 | 1,457 | 9.1% |
| 35-44 | 2,692 | 16.8% |
| 45-54 | 5,756 | 36.0% |
| 55-64 | 3,971 | 24.8% |
| 65+ | 232 | 1.4% |
| *Total* | 15,997 | 100.0% |
| Last Military Service (Years Ago) | | |
| 0-3 | 2,003 | 12.5% |
| 4-7 | 1,534 | 9.6% |
| 8-11 | 1,061 | 6.6% |
| 12-15 | 884 | 5.5% |
| 16-19 | 1,067 | 6.7% |
| 20+ | 9,448 | 59.0% |
| *Total* | 15,997 | 100.0% |
| Other Selected Characteristics | | |
| Economically Disadvantaged | 15169 | 96.6% |
| Welfare Recipient | 5,540 | 35.8% |
| Homeless | 15,400 | 96.3% |
| Chronically Homeless | 3,794 | 24.6% |
| Disabled | 3,229 | 21.1% |
| Campaign Badge | 3,719 | 24.3% |
| Recently/Newly Separated | 1,830 | 12.1% |
| Stand Down | 1,175 | 7.9% |
| Operation Iraqi Freedom | 2,128 | 13.9% |
| Operation Enduring Freedom | 1,630 | 10.7% |

Source: U.S. Department of Labor, Veterans Employment and Training Service Operations and Programs Activity Report (VOPAR), PY 2009-13; analysis of participant-level data.

percent).⁴³ Over three-quarters of participants are between 35 and 64, while the most common age group of participants was 45 to 54 (36 percent). The majority of participants (59 percent) last served in the military over 20 years ago, while service in the last three years was the next most common category (12.5 percent). The vast majority of participants identified as economically disadvantaged (96.6 percent), as well as currently homeless (96.3 percent). About one-quarter of participants were chronically homeless (24.6 percent) and slightly more than one-fifth were disabled (21.1 percent). Relatively few participants identified as associated with attending Stand Down events (7.9 percent, 1,175).⁴⁴ Nearly one-quarter of the participants (24.3 percent) had received a campaign badge.⁴⁵

As depicted in Exhibit 4-4, characteristics of the participant pool were generally stable over the five-year period (PY 2009 to PY 2013), with some variation over the period for specific characteristics. A steady rise in female participants among enrollees is seen between 2009 and 2013 (5.4 percent to 12.1 percent). This change may in part be due to changes in the characteristics of the homeless veteran population (i.e., increasing numbers of homeless females in local areas served by HVRP grantees), as well as the addition of HVRP grants targeted on serving females and families during the period.⁴⁶ In terms of ethnicity, there was an increase in

⁴³ Note that VOPAR classifies race and ethnicity differently than some other DOL systems. For example, for WIA, race and ethnicity are entered as separate characteristics so that Hispanics can be of any race; in VOPAR, the racial categories refer to non-Hispanic members of the race.

⁴⁴ Appendix C-3 provides definitions of participant characteristic terms listed under the category “Other Selected Characteristics”.

⁴⁵ A campaign badge is an award made to members of the military who participate in battles or other operations of note.

⁴⁶ In 2010, DOL-VETS issued a special solicitation within its HVRP to address the particular employment issues of women veterans recognizing that their needs may be different from their male counterparts (SGA10-03). DOL funded 24 HVRP grants targeting women veterans and veterans with families in 15 states and the District of Columbia totaling over \$5 million during FY 2012-2013. Syracuse University, Institute for Veterans and Military Families, “Lessons Learned from the U.S. Department of Labor Grantees: Homeless Female Veterans & Homeless Veterans with Families,” Issue Brief: October 2013, available at: http://vets.syr.edu/wp-content/uploads/2013/11/NVTAC.Issue-Brief.FINAL_.Electronic.pdf

**EXHIBIT 4-4: HVRP PARTICIPANT CHARACTERISTICS AT ENROLLMENT
ACROSS GRANTEES, PY 2009-13**

| Participant Characteristics (at Intake) | PY 2009 | PY 2010 | PY 2011 | PY 2012 | PY 2013 |
|--|----------------|----------------|----------------|----------------|----------------|
| Gender | | | | | |
| Female | 5.4% | 9.7% | 10.2% | 10.6% | 12.1% |
| Male | 94.6% | 90.3% | 89.8% | 89.4% | 87.9% |
| *Total* | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% |
| Ethnic Background | | | | | |
| Caucasian | 39.0% | 38.2% | 39.2% | 39.4% | 38.4% |
| African American | 52.3% | 51.9% | 49.5% | 49.1% | 49.9% |
| Hispanic | 5.4% | 6.6% | 7.5% | 8.2% | 8.2% |
| Native American | 0.8% | 1.0% | 1.2% | 0.9% | 0.9% |
| Other Minority | 2.5% | 2.3% | 2.6% | 2.4% | 2.6% |
| *Total* | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% |
| Age | | | | | |
| 18-24 | 1.9% | 2.2% | 3.0% | 3.3% | 3.6% |
| 25-29 | 4.2% | 4.6% | 6.6% | 8.0% | 8.2% |
| 30-34 | 4.3% | 5.5% | 7.1% | 8.0% | 9.1% |
| 35-44 | 17.6% | 17.9% | 17.2% | 16.9% | 16.8% |
| 45-54 | 49.8% | 48.0% | 43.1% | 39.3% | 36.0% |
| 55-64 | 21.1% | 20.7% | 21.9% | 23.0% | 24.8% |
| 65+ | 1.1% | 1.0% | 1.2% | 1.5% | 1.4% |
| *Total* | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% |
| Last Military Service (Years Ago) | | | | | |
| 0-3 | 5.3% | 6.3% | 8.9% | 11.0% | 12.5% |
| 4-7 | 5.4% | 5.9% | 7.9% | 8.2% | 9.6% |
| 8-11 | 4.5% | 5.0% | 5.4% | 6.7% | 6.6% |
| 12-15 | 5.0% | 5.8% | 5.3% | 5.3% | 5.5% |
| 16-19 | 10.9% | 10.8% | 9.3% | 7.5% | 6.7% |
| 20+ | 68.9% | 66.1% | 63.0% | 61.3% | 59.0% |
| *Total* | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% |
| Other Selected Characteristics | | | | | |
| Economically Disadvantaged | 96.4% | 94.9% | 93.4% | 94.9% | 96.6% |
| Welfare Recipient | 32.6% | 34.3% | 32.5% | 34.4% | 35.8% |
| Homeless | 99.4% | 96.6% | 96.0% | 96.0% | 96.3% |
| Chronically Homeless | 32.9% | 30.9% | 27.4% | 25.0% | 24.6% |
| Disabled | 22.1% | 19.4% | 19.8% | 19.7% | 21.1% |
| Campaign Badge | 22.7% | 21.0% | 21.6% | 23.7% | 24.3% |
| Recently/Newly Separated | 6.2% | 7.0% | 9.3% | 11.8% | 12.1% |
| Stand Down | 13.0% | 11.3% | 10.1% | 7.4% | 7.9% |
| Operation Iraqi Freedom | 6.4% | 7.3% | 10.1% | 12.7% | 13.9% |
| Operation Enduring Freedom | 4.6% | 4.9% | 7.3% | 9.2% | 10.7% |

Source: U.S. Department of Labor, Veterans Employment and Training Service Operations and Programs Activity Report (VOPAR), PY 2009-13; analysis of participant-level data.

the percentage of Hispanics enrolled in HVRP occurred between 2009 and 2013 (5.4 percent to 8.2 percent). The percentage of participants in several age groups roughly doubled over the five-year period: 18-24 years of age (from 1.9 percent in 2009 to 3.6 percent in 2013), 25-29 years of age (from 4.2 percent to 8.2 percent), and 30-34 years of age (from 4.3 percent to 9.1 percent) occurred between 2009 and 2013, with decreases concentrated in the 45-54 age range. In more recent years, recently separated veterans (last military service between zero and seven years ago) are enrolled in 2013 at more than double the rate they were enrolled at in 2009. Significant decreases in enrollment are seen in that same period for veterans who were last serving in the military more than 15 years ago. The percentage of participants who were economically disadvantaged and homeless remained very high across all program years. The percentage of participants that were newly/recently separated rose consistently over the five-year period, in line with increased percentages that Operation Iraqi Freedom and Operation Enduring Freedom veterans accounted for of overall HVRP participants.

C. HVRP Program Services

As shown in Exhibit 4-5, slightly over four-fifths of HVRP participants (84.5 percent) received at least one type of training service offered by grantees in 2013.⁴⁷ It should be noted that with respect to receiving “any training activity,” grantees were required under their grants to provide at least one training activity to each HVRP participant, and there was a broad group of activities that VETS included in this category: Classroom Training, On-the-Job Training (OJT), Occupational Skills Training, Apprenticeship Training, Upgrading and Retraining, and Other

⁴⁷ Appendix C-4 includes tables of services received by participants in PYs 2009, 2010, 2011, and 2012.

EXHIBIT 4-5: HVRP SERVICES RECEIVED ACROSS GRANTEES, PY 2013

| Services Received | Number | Relative Percentage |
|---------------------------------|--------|---------------------|
| Any Training Activity | 13523 | 84.5% |
| Job Search Assistance | 15092 | 94.3% |
| Counseling/Vocational Guidance | 14410 | 90.1% |
| Job Club Workshop | 5582 | 34.9% |
| Compensated Work Therapy | 714 | 4.5% |
| Tools/Fees/ Work Clothing/Boots | 6220 | 38.9% |
| Other Supportive Services | 11916 | 74.5% |
| *Total* | 16001 | 100.0% |

Source: U.S. Department of Labor, Veterans Employment and Training Service Operations and Programs Activity Report (VOPAR), PY 2009-13; analysis of participant-level data.

Training.⁴⁸ As discussed earlier (see Chapter 3), the ceiling on HRVP funding (at \$300,000 for urban grantees and \$200,000 for non-urban grantees) was not sufficient to pay for more costly, longer-term training directly out of grant funds. Consequently, HVRP grantees typically referred participants to other programs, such as WIA or colleges (for Pell Grants) if participants needed or were seeking longer-term training. When training was provided that was paid with HVRP grant funds, it was in nearly all cases short-term, i.e., lasting as little as several days to as long as several months, such as commercial driver’s license (CDL) or certified nursing assistant (CNA) training. Nearly all HVRP participants received job search assistance (94.3 percent), as well as counseling/vocational guidance (90.1 percent). As discussed in Chapter 3, under their grant and quarterly reporting requirements, HVRP grantees focus their grant-funded efforts on provision of job search assistance, case management, and career guidance aimed directly at moving homeless veterans into jobs as quickly as possible, and by the end of each program year (June 30th). Among the approaches and methods used by grantees to rapidly move HVRP participants into

⁴⁸ Appendix C-5 provides definitions of HVRP service terms listed under the category “Services Received”.

employment included: job readiness workshops, one-on-one and group instruction on identifying personal strengths and goals, resume development and job application preparation, instruction on job interview techniques, provision of labor market information, and direct help to the participant in identifying, and referral to, job openings.

As also shown in Exhibit 4-5, about three-quarters of participants received supportive services. Such supportive services, as discussed in greater detail in the preceding chapter, could include (as defined under the terms of their grants): transportation assistance, health care referral, financial assistance (except as a post-termination service), drug and alcohol abuse counseling and referral, individual and family counseling and referral, special services and materials for individuals with disabilities and/or barriers to employment, job coaches, financial counseling, and other reasonable expenses required for participation in the training program and may be provided in-kind or through cash assistance.

Finally, less than 5 percent of HVRP participants were enrolled in and received compensated work therapy (CWT) program services (4.5 percent). CWT, a Department of Veterans Affairs (DVA)-sponsored program for veteran inpatients and outpatients (provided for under 38 U.S.C. 1718(a)), incorporates a work regimen with monetary incentives. DVA reimbursements to participants who are in the program are related to their productive capabilities. Under CWT, an effort is to be made to create a realistic work environment, with earnings commensurate with wages paid in the community for essentially the same quality and quantity of work. Although industrial business practices are utilized to simulate usual working conditions, therapy is still the primary objective of CWT.⁴⁹ Although CWT is not a key focus of

⁴⁹ The Department of Labor, Veterans' Employment and Training Service encourages and supports the use and integration of CWT to benefit the Homeless Veterans' Reintegration Program (HVRP) and Veterans' Workforce Investment Program (VWIP) enrolled participants by improving their job readiness.

HVRP service delivery, one strategy used by grantees is to enroll CWT participants in HVRP toward the end of their participation in CWT, to assist with their transition from CWT to unsubsidized employment.

As shown in Exhibit 4-6, there was relatively little year-to-year variation in percentage of HVRP participants receiving various types of HVRP services between 2009 and 2013. The percentage of participants receiving any training service ranged from 83.2 percent to 87.6 percent during that period.

EXHIBIT 4-6: HVRP SERVICES RECEIVED ACROSS GRANTEES, VARIATION PY 2009-13

| Services Received | PY 2009 | PY 2010 | PY 2011 | PY 2012 | PY 2013 |
|--------------------------------|---------|---------|---------|---------|---------|
| Any Training Activity | 85.0% | 87.6% | 85.6% | 83.2% | 84.5% |
| Job Search Assistance | 87.7% | 91.7% | 92.9% | 93.0% | 94.3% |
| Counseling/Vocational Guidance | 83.8% | 90.4% | 92.7% | 89.5% | 90.1% |
| Job Club Workshop | 36.8% | 36.6% | 37.7% | 35.4% | 34.9% |
| Compensated Work Therapy | 7.8% | 6.4% | 6.6% | 4.8% | 4.5% |
| Tools/Fees/Work Clothing/Boots | 41.7% | 42.5% | 44.6% | 40.5% | 38.9% |
| Other Supportive Services | 74.0% | 77.5% | 78.1% | 76.1% | 74.5% |
| *Total* | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% |

Source: U.S. Department of Labor, Veterans Employment and Training Service Operations and Programs Activity Report (VOPAR), PY 2009-13; analysis of participant-level data.

D. Analysis of Job Placement Outcomes

Under HVRP, the job placement rate “is calculated by dividing the number of applicants or program participants who were placed into employment or otherwise entered employment by the number of total participants (including carry-over registrants) who were registered for

For HVRP and VWIP purposes, CWT is considered a supportive service and is not to be considered a placement into employment.

EXHIBIT 4-7: HVRP JOB PLACEMENT RATE ACROSS GRANTEES, PY 2009-13

| Program Year | Number Enrolled | Number Placed | Placement Rate | Average Annual Unemployment Rate |
|-------------------|-----------------|---------------|----------------|----------------------------------|
| PY 2009 | 12,548 | 7,323 | 58.4% | 9.8% |
| PY 2010 | 15,802 | 9,318 | 59.0% | 9.3% |
| PY 2011 | 16,312 | 10,699 | 65.6% | 8.5% |
| PY 2012 | 17,477 | 11,316 | 64.7% | 7.8% |
| PY 2013 | 16,001 | 10,162 | 63.5% | 6.8% |
| Average | 15,628 | 9,764 | 62.5% | 8.4% |
| Change PY 2009-13 | | | 27.5% | 38.8% |

Source: U.S. Department of Labor, Veterans Employment and Training Service Operations and Programs Activity Report (VOPAR), PY 2009-13; analysis of participant-level data. Unemployment rate is monthly average seasonal adjusted rate for the United States for each program year (running from July through June of each year); data source for the unemployment rate is U.S. Bureau of Labor Statistics, Labor Force Statistics from the Current Population Survey, Seasonally Adjusted Unemployment Rate, LNS14000000.

services and enrolled in the program.”⁵⁰ As evidenced by Exhibit 4-7, on average, about two-thirds of HVRP participants (62.5 percent) were placed in employment between 2009 and 2013. An average of 9,764 participants were placed each program year, out of an average enrollee number of 15,628. Job placement rates rose from 2009 through 2011 (58.4 percent to 65.6 percent), and then subsequently declined slightly to 63.5 percent in 2013. As also shown in Exhibit 4-7, the average annual unemployment rate for the U.S. dropped over the same period (from 9.8 percent in PY 2009 to 6.8 percent in PY 2011). The improved job placement rates for PY 2011 through PY 2013 are likely in part a reflection of improving labor market conditions over the period, and a fairly steep and steady drop in the unemployment rate.

⁵⁰ The definitions provided are from a Glossary of Terms that VETS developed and is part of the documentation provided on-line for the VOPAR data system, available at: <http://www.dol.gov/vets/programs/common/main.htm>. Note that definitions for VOPAR are not always the same as definitions used for other DOL programs.

Exhibit 4-8 displays job placement rates for a five-year period (PY 2009-13) by selected participant characteristics.⁵¹ As shown in the final column of the exhibit, there was some variation in job placement rates in relation to certain characteristics, though not great variation across most characteristics. Males were placed at a slightly higher rate than females (64.1 percent as compared to 59.2 percent). When comparing placement rates along ethnic background lines, Hispanics had the highest placement rate (65 percent), while Native Americans had the lowest (53 percent). For the most part, younger participants were more likely to be placed, while those 65 years of age and older were the least likely to be placed. Of all the selected characteristics explored, participants that fell in the 65 years and older age range were the least likely to be placed (38.4 percent). Enrollees with a more recent last date of military service were generally more likely to be placed.

In general, across gender and ethnic backgrounds, placement rates increased from 2009 to 2013. Rates of job placement over the five-year period varied from year to year for some participant characteristics, and very little for others. For example, the job placement rate for females dropped between PY 2009 (59.1 percent) and PY 2010 (50.6 percent), but then ended up at nearly the same rate in PY 2013 (59.2 percent) as in PY 2009. By comparison, the job placement rate for males (58.3 percent) started out about a percentage point lower than that for females in PY 2009 but increased through PY 2011 (to 66 percent) and then slightly dipped to 64.1 percent in PY 2013 (about five percentage points higher than that for females). Hispanics and Caucasians saw greater increases in job placements than other ethnic groups over program years. Reflecting generally higher job placement rates in 2013 versus 2009, all age groups experienced an increase in job placement rates from 2009-2013, except for the 65-year and older

⁵¹ It should be noted that later in this chapter regression analyses are presented that examine in greater detail the relationship between a select group of participant characteristics and job placement rates.

EXHIBIT 4-8: HVRP JOB PLACEMENT RATES BY SELECTED PARTICIPANT CHARACTERISTICS ACROSS GRANTEES, PY 2009-13

| Participant Characteristics (at Intake) & Receipt of Service | PY 2009 | PY 2010 | PY 2011 | PY 2012 | PY 2013 |
|---|----------------|----------------|----------------|----------------|----------------|
| Gender | | | | | |
| Female | 59.1% | 50.6% | 61.8% | 60.0% | 59.2% |
| Male | 58.3% | 59.9% | 66.0% | 65.3% | 64.1% |
| Ethnic Background | | | | | |
| Caucasian | 56.5% | 58.6% | 63.3% | 64.4% | 63.8% |
| African American | 60.4% | 59.4% | 67.6% | 65.2% | 63.4% |
| Hispanic | 54.4% | 59.3% | 65.2% | 65.7% | 65.0% |
| Native American | 47.0% | 52.3% | 57.3% | 62.7% | 53.0% |
| Other Minority | 59.3% | 58.6% | 66.4% | 58.9% | 61.4% |
| Age | | | | | |
| 18-24 | 60.0% | 62.2% | 65.8% | 70.0% | 69.6% |
| 25-29 | 61.1% | 62.9% | 68.0% | 68.1% | 69.2% |
| 30-34 | 60.7% | 61.7% | 67.6% | 66.6% | 65.6% |
| 35-44 | 63.4% | 62.9% | 66.9% | 68.9% | 67.4% |
| 45-54 | 59.6% | 60.0% | 67.0% | 64.8% | 62.9% |
| 55-64 | 51.4% | 52.3% | 61.2% | 59.9% | 59.7% |
| 65+ | 39.4% | 40.1% | 49.7% | 51.0% | 38.4% |
| Last Military Service (Years Ago) | | | | | |
| 0-3 | 60.3% | 60.8% | 65.5% | 68.4% | 67.0% |
| 4-7 | 61.2% | 60.3% | 65.7% | 65.6% | 66.3% |
| 8-11 | 62.9% | 61.5% | 68.4% | 65.9% | 65.7% |
| 12-15 | 65.5% | 61.8% | 70.9% | 66.7% | 64.9% |
| 16-19 | 62.0% | 63.2% | 68.1% | 69.7% | 66.4% |
| 20+ | 56.8% | 57.5% | 64.5% | 63.1% | 61.6% |
| Other Selected Characteristics | | | | | |
| Economically Disadvantaged | 58.5% | 59.0% | 65.7% | 64.6% | 63.6% |
| Welfare Recipient | 53.9% | 56.2% | 62.0% | 61.8% | 61.6% |
| Homeless | 58.4% | 59.5% | 65.8% | 65.1% | 63.7% |
| Chronically Homeless | 54.8% | 56.6% | 64.6% | 62.9% | 60.0% |
| Disabled | 53.8% | 53.4% | 57.5% | 57.4% | 57.7% |
| Campaign Badge | 58.8% | 58.1% | 65.7% | 63.8% | 64.3% |
| Recently/Newly Separated | 61.8% | 62.5% | 66.4% | 66.0% | 68.0% |
| Stand Down | 57.8% | 58.8% | 70.3% | 68.8% | 67.4% |
| Operation Iraqi Freedom | 62.0% | 60.3% | 67.5% | 67.8% | 68.0% |
| Operation Enduring Freedom | 63.9% | 60.2% | 67.7% | 66.8% | 68.8% |
| Receipt of Service | | | | | |
| Any Training Activity | 60.5% | 60.9% | 68.1% | 67.5% | 65.7% |
| Job Search Assistance | 60.5% | 61.2% | 67.0% | 66.3% | 64.4% |
| Counseling/Vocational Guidance | 60.2% | 60.7% | 66.5% | 66.2% | 64.6% |
| Job Club Workshop | 59.1% | 63.2% | 66.5% | 65.9% | 65.4% |
| Compensated Work Therapy | 53.1% | 50.5% | 62.6% | 56.0% | 57.1% |
| Tools/Fees/Work Clothing/Boots | 73.4% | 72.5% | 77.9% | 78.9% | 78.4% |
| Other Supportive Services | 61.7% | 63.2% | 69.2% | 68.9% | 65.7% |

Source: U.S. Department of Labor, Veterans Employment and Training Service Operations and Programs Activity Report (VOPAR), PY 2009-13; analysis of participant-level data.

group, which saw a slight decline in job placement rate from 39.4 percent to 38.4 percent over the five-year period (though with an increase to as high as 51.0 percent during the period). Similarly, job placement rates generally increased over time regardless of participant date of separation from the military. Reflecting overall improvement in job placement rates between 2009 and 2013, job placement rates increased across all types of services provided through HVRP, although as shown in the table, there was some variability year-to-year in placement rates by types of services received.

E. Analysis of Hourly Wage Outcomes

As shown in Exhibit 4-9, average (mean) hourly wages of participants rose consistently over the program years analyzed, increasing 13.1 percent between 2009 and 2013. The mean hourly wage at placement in 2009 was \$10.21, which rose to \$11.55 by 2013 (2013’s median hourly wage was \$10.00⁵²). As also shown in the exhibit, over the five-year period there was a 3.1 percent increase in inflation-adjusted hourly wage.

EXHIBIT 4-9: HVRP PARTICIPANT UNADJUSTED AND ADJUSTED MEAN HOURLY WAGES AT PLACEMENT, PY 2009-13

| Program Year | Mean Hourly Wage | Inflation-Adjusted Mean (in 2013 Dollars) |
|---------------------|-------------------------|--|
| PY 2009 | \$10.21 | \$11.20 |
| PY 2010 | \$10.52 | \$11.22 |
| PY 2011 | \$10.79 | \$11.24 |
| PY 2012 | \$11.25 | \$11.48 |
| PY 2013 | \$11.55 | \$11.55 |
| Change PY 2009-13 | 13.1% | 3.1% |

Source: U.S. Department of Labor, Veterans Employment and Training Service Operations and Programs Activity Report (VOPAR), PY 2009-13; analysis of participant-level data. Hourly wages are inflation-adjusted in 2013 dollars using data from the U.S. Bureau of Labor Statistics Employment, Hours, and Earnings data (CES0500000011) from the Current Employment Survey (available at: <http://data.bls.gov/pdq/SurveyOutputServlet>).

⁵² Median hourly wage for HVRP participants increased from \$9.00 per hour in PY 2009 to \$9.50 in PY 2010 and then to \$10.00 per hour in PY 2011 through PY 2013.

Mean hourly wages differed along participant characteristics, as illustrated in Exhibit 4-10. Reflecting overall increases in mean hourly wages between program years 2009 and 2013, mean hourly wages increased within each characteristic grouping over the five-year period, except for the 18-19 year old age group. In 2013, females earned \$0.69 more (\$12.16) than their male counterparts. Hispanics had the highest hourly earnings of any ethnic group (\$11.89), while Native Americans were found to receive the lowest wages (\$11.11). The youngest age group, 18-24, was paid on average \$10.62 an hour, while the 35-44 year-old age group had the highest average wages, at \$12.06 an hour. Those receiving any training service had a mean hourly wage in 2013 of \$11.51. Hourly earnings did not range widely depending on the type of services that a participant received.

Mean hourly wage at the time of job placement among grantees ranged from \$7.63 to \$17.24 in 2013.⁵³ As demonstrated by Exhibit 4-11, 108 of the 156 grantees (69.2 percent of grantees) had an average hourly wage at placement between \$10.01 and \$13.00. Four grantees had mean hourly wages that were below \$9.00, and six grantees' average hourly wage exceeded \$15.01. Note that variation in wages among grantees is probably mostly due to variations in local labor supply and demand conditions and variations in the minimum wage rather than grantee policies.

⁵³ Appendix C-6 provides a breakdown of mean hourly wage by individual grantee for PY 2013.

**EXHIBIT 4-10: HVRP PARTICIPANT MEAN HOURLY WAGES AT PLACEMENT
BY SELECTED PARTICIPANT CHARACTERISTICS, PY 2009-13**

| Participant Characteristics (at Intake) & Receipt of Service | PY 2009 | PY 2010 | PY 2011 | PY 2012 | PY 2013 |
|---|--------------------|--------------------|--------------------|--------------------|--------------------|
| Gender | | | | | |
| Female | \$10.23 | \$10.70 | \$11.23 | \$11.76 | \$12.16 |
| Male | \$10.22 | \$10.53 | \$10.77 | \$11.19 | \$11.47 |
| Ethnic Background | | | | | |
| Caucasian | \$10.43 | \$10.61 | \$11.04 | \$11.28 | \$11.54 |
| African American | \$10.00 | \$10.35 | \$10.56 | \$11.05 | \$11.48 |
| Hispanic | \$10.83 | \$11.32 | \$11.21 | \$11.82 | \$11.89 |
| Native American | \$9.61 | \$11.50 | \$10.94 | \$12.52 | \$11.11 |
| Other Minority | \$10.78 | \$11.12 | \$11.29 | \$12.63 | \$12.20 |
| Age | | | | | |
| 18-24 | \$10.14 | \$10.04 | \$10.49 | \$10.64 | \$10.62 |
| 25-29 | \$10.18 | \$10.53 | \$10.93 | \$11.16 | \$11.76 |
| 30-34 | \$10.30 | \$11.07 | \$11.40 | \$11.53 | \$11.80 |
| 35-44 | \$10.64 | \$10.80 | \$11.22 | \$11.83 | \$12.06 |
| 45-54 | \$10.20 | \$10.55 | \$10.65 | \$11.15 | \$11.58 |
| 55-64 | \$9.89 | \$10.12 | \$10.59 | \$10.96 | \$11.14 |
| 65+ | \$9.67 | \$11.15 | \$11.23 | \$11.47 | \$10.48 |
| Last Military Service (Years Ago) | | | | | |
| 0-3 | \$10.79 | \$11.22 | \$11.35 | \$11.71 | \$11.89 |
| 4-7 | \$10.64 | \$10.73 | \$11.32 | \$11.53 | \$12.01 |
| 8-11 | \$10.39 | \$10.84 | \$11.37 | \$11.44 | \$11.55 |
| 12-15 | \$10.83 | \$11.01 | \$11.05 | \$11.62 | \$12.17 |
| 16-19 | \$10.48 | \$10.59 | \$11.09 | \$11.15 | \$11.65 |
| 20+ | \$10.03 | \$10.38 | \$10.55 | \$11.08 | \$11.32 |
| Other Selected Characteristics | | | | | |
| Economically Disadvantaged | \$10.19 | \$10.53 | \$10.79 | \$11.25 | \$11.51 |
| Welfare Recipient | \$9.78 | \$10.02 | \$10.36 | \$10.64 | \$11.19 |
| Homeless | \$10.23 | \$10.54 | \$10.80 | \$11.22 | \$11.51 |
| Disabled | \$10.46 | \$10.79 | \$10.90 | \$11.38 | \$11.72 |
| Campaign Badge | \$10.79 | \$11.02 | \$11.45 | \$11.69 | \$11.96 |
| Recently/Newly Separated | \$10.89 | \$11.25 | \$11.40 | \$11.69 | \$12.02 |
| Stand Down | \$10.10 | \$10.11 | \$10.05 | \$10.39 | \$11.19 |
| Chronically Homeless | \$10.07 | \$10.34 | \$10.36 | \$10.67 | \$11.00 |
| Operation Iraqi Freedom | \$10.91 | \$11.51 | \$11.73 | \$11.97 | \$12.13 |
| Operation Enduring Freedom | \$10.93 | \$11.58 | \$11.81 | \$11.95 | \$12.05 |
| Receipt of Service | | | | | |
| Any Training Activity | \$10.21 | \$10.50 | \$10.78 | \$11.21 | \$11.51 |
| Job Search Assistance | \$10.20 | \$10.52 | \$10.78 | \$11.23 | \$11.52 |
| Counseling/Vocational Guidance | \$10.22 | \$10.53 | \$10.79 | \$11.23 | \$11.51 |
| Job Club Workshop | \$10.27 | \$10.43 | \$10.66 | \$11.19 | \$11.54 |
| Compensated Work Therapy | \$9.57 | \$10.04 | \$9.81 | \$10.89 | \$11.70 |
| Tools/Fees/Work Clothing/Boots | \$10.15 | \$10.37 | \$10.72 | \$11.18 | \$11.41 |
| Other Supportive Services | \$10.21 | \$10.43 | \$10.65 | \$11.13 | \$11.50 |

Source: U.S. Department of Labor, Veterans Employment and Training Service Operations and Programs Activity Report (VOPAR), PY 2009-13; analysis of participant-level data.

EXHIBIT 4-11: DISTRIBUTION OF HVRP MEAN HOURLY WAGES BY GRANTEE, PY 2013

| Mean Hourly Wage (\$) | Number of HVRP Grantees |
|------------------------------|--------------------------------|
| < 9.00 | 4 |
| 9.01 - 10.00 | 18 |
| 10.01 - 11.00 | 37 |
| 11.01 - 12.00 | 41 |
| 12.01 - 13.00 | 30 |
| 13.01 - 14.00 | 13 |
| 14.01 - 15.00 | 7 |
| > 15.01 | 6 |
| Total | 156 |

Source: U.S. Department of Labor, Veterans Employment and Training Service Operations and Programs Activity Report (VOPAR), PY 2009-13; analysis of participant-level data.

F. Regression Analyses

1. Methodology and Data Sources Used in Regression Analysis

The VOPAR performance data was also used to conduct regression analyses to further explore HVRP employment outcomes in relation to participant characteristics and services received.⁵⁴ Similar to the tabulations in the previous section, the research team utilized VOPAR grantee performance data for five program years (PY 2009 through PY 2013) in conducting the exploratory multivariate analysis. Exhibit 4-12 shows the number of grantees and individual participant records included in the multivariate regression analysis. Records missing enrollment data were excluded from the analyses.⁵⁵

⁵⁴ The regression analyses should not be viewed as tests of formal models, but rather as a convenient way to present conditional means where many factors are held constant.

⁵⁵ The VOPAR data base does not provide unique participant IDs that carry forward with participants from one program year to the next, which makes it impossible to examine whether individuals cycle on and off from year to year or to examine participant involvement in HVRP from one grantee year to the next.

EXHIBIT 4-12: NUMBER OF HVRP GRANTEE AND PARTICIPANT OBSERVATIONS USED IN MULTIVARIATE ANALYSES

| | PY2009 | PY2010 | PY2011 | PY2012 | PY2013 |
|-------------------------------|---------------|---------------|---------------|---------------|---------------|
| # of HVRP Grantees | 85 | 138 | 142 | 159 | 156 |
| # of HVRP Participants | 12,548 | 15,802 | 16,312 | 17,477 | 16,001 |

The evaluation team identified two dependent/outcome variables of interest: job placement and hourly wage at placement. Job placement was coded as a dichotomous variable with “1” as “Yes” if the data indicated a job placement for any quarter during the program year for the participant, and with “0” as “No” if there was no indication of a job placement during the any of the quarters of program year. The hourly wages for each placed HVRP participant in PY2009, PY2010, PY2011, and PY2012 were adjusted to PY2013 dollars.⁵⁶

2. Regression Analysis Results

Exhibits 4-13 and 4-14 provide results of the regression analyses for job placement, while Exhibit 4-15 provide results for hourly wage.

Regression Results - Job Placement. The first two models explore the effects of program year, demographic characteristics, service receipt, and population subgroup characteristics on job placement rate, with one model using logistical (logit) regression (Exhibit 4-13) and the other model using a linear probability regression (Exhibit 4-14).⁵⁷ As expected, these two models were very similar in their results, identifying significant positive relationships

⁵⁶ The ratio for the wage adjustment was based on the Bureau of Labor Statistic’s data series on Employment, Hours, and Earnings from the Current Employment Statistics survey (National).

⁵⁷ Two additional models were estimated that were the same as those shown in Exhibits 4-13 and 4-14, though excluding receipt of the various services, to determine if omission of service receipt (e.g., receipt of any training activity, job search assistance, counseling/vocational guidance, job club workshop, or other supportive services) affected regression results. Leaving out service receipt had very little effect on the direction or statistical significance of the estimates provided with the service receipt (as shown in Exhibits 4-13 and 4-14). See Appendix C-8 for regression results for job placement rates without service receipt included in the logistic and LPM models for job placement.

EXHIBIT 4-13: LOGISTIC REGRESSION -- EFFECT OF PROGRAM YEAR, GENDER, RACE/ETHNICITY, AGE, SUBGROUP CHARACTERISTICS, AND SERVICES RECEIVED ON JOB PLACEMENT, PY 2009-13

| Independent Variables | Logit Coefficients | Odds Ratio |
|--|--------------------|------------|
| Program Year (Ref: PY2009) | | |
| PY2010 | -.037 | .964 |
| PY2011 | .258*** | 1.294 |
| PY2012 | .246*** | 1.278 |
| PY2013 | .202*** | 1.224 |
| Gender (1=female) | -.279*** | .756 |
| Race/Ethnicity (Ref: Caucasian) | | |
| African American | .078*** | 1.081 |
| Hispanic | .043 | 1.044 |
| Native American | -.330*** | .719 |
| Other Minority | -.077 | .926 |
| Age (Ref: 18-24) | | |
| 25-34 | .013 | 1.013 |
| 35-44 | .036 | 1.037 |
| 45-54 | -.125** | .883 |
| 55-64 | -.358*** | .699 |
| 65+ | -.845*** | .429 |
| Welfare Recipient (1=yes) | -.236*** | .790 |
| Disabled (1=yes) | -.312*** | .732 |
| Campaign Badge (1=yes) | -.071*** | .931 |
| Recently/Newly Separated (1=yes) | -.007 | .993 |
| Chronically Homeless (1=yes) | -.113*** | .893 |
| Operation Iraqi Freedom (1=yes) | .071* | 1.073 |
| Operation Enduring Freedom (1=yes) | .017 | 1.017 |
| Any Training Activity (1=yes) | .445*** | 1.561 |
| Job Search Assistance (1=yes) | .531*** | 1.700 |
| Counseling/Vocational Guidance (1=yes) | -.008 | .992 |
| Job Club Workshop (1=yes) | -.064*** | .938 |
| Other Supportive Services (1=yes) | .456*** | 1.577 |
| Constant | -.511*** | .600 |

Note: The dependent variable in this analysis is placement into employment.

N=68,268.

Model $\chi^2 = 3019.129$, $p < 0.001$.

-2 Log Likelihood = 87485.446.

* $P < .10$, ** $p < .05$, *** $p < .01$.

Ref=Reference Category.

EXHIBIT 4-14: LINEAR PROBABILITY REGRESSION -- EFFECT OF PROGRAM YEAR, GENDER, RACE/ETHNICITY, AGE, SUBGROUP CHARACTERISTICS, AND SERVICES RECEIVED ON JOB PLACEMENT, PY 2009-13

| Independent Variables | B | T |
|--|----------|----------|
| (Constant) | .379*** | 25.689 |
| Program Year (Ref: PY2009) | | |
| PY2010 | -.009 | -1.405 |
| PY2011 | .058*** | 9.623 |
| PY2012 | .056*** | 9.344 |
| PY2013 | .046*** | 7.675 |
| Gender (1=female) | -.064*** | -10.173 |
| Race/Ethnicity (Ref: Caucasian) | | |
| African American | .017*** | 4.438 |
| Hispanic | .010 | 1.316 |
| Native American | -.077*** | -4.061 |
| Other Minority | -.017 | -1.453 |
| Age (Ref: 18-24) | | |
| 25-34 | .003 | .244 |
| 35-44 | .008 | .645 |
| 45-54 | -.028** | -2.213 |
| 55-64 | -.081*** | -6.368 |
| 65+ | -.198*** | -9.839 |
| Welfare Recipient (1=yes) | -.054*** | -13.631 |
| Disabled (1=yes) | -.072*** | -15.303 |
| Campaign Badge (1=yes) | -.016*** | -3.219 |
| Recently/Newly Separated (1=yes) | -.001 | -.158 |
| Chronically Homeless (1=yes) | -.026*** | -6.107 |
| Operation Iraqi Freedom (1=yes) | .016* | 1.962 |
| Operation Enduring Freedom (1=yes) | .004 | .426 |
| Any Training Activity (1=yes) | .104*** | 19.080 |
| Job Search Assistance (1=yes) | .126*** | 15.220 |
| Counseling/Vocational Guidance (1=yes) | -.002 | -.271 |
| Job Club Workshop (1=yes) | -.014*** | -3.631 |
| Other Supportive Services (1=yes) | .106*** | 23.787 |

Note: The dependent variable in this analysis is placement into employment.

N=68,268.

F-ratio: 121.580; P-value: 0.000

R: 0.210; Squared R: 0.044; Adjusted Squared R: 0.044.

*P<.10, **p<.05, ***p<.01.

Ref=Reference Category.

between job placement and participant characteristics (with p-value <.01) in the two models for the following independent variables: (a) participating in PY 2011, PY 2012, or PY 2013 (compared with PY2009); (b) being African-American (compared with being Caucasian); and (c) receiving any training service, job search assistance, or supportive services (compared to not receiving these services). Statistically significant negative relationships on job placement (with p-value <.01) were found in the two models for the following independent variables: (a) being female (compared with being male); (b) being Native American (compared with being Caucasian); (c) being older, in the age ranges 55 to 64 and 65 and older (compared with being 18 to 24 years of age); (d) among those with the following special subpopulation characteristics: being a welfare recipient, disabled, Campaign Badge veteran, or chronically homeless; and, (e) attending a job club.⁵⁸ There were two other variables in the two models that were found to have a statistically significant relationship with job placement when significance levels were relaxed (to p value at <.05 or <.10): (a) being in the age group 45-54 (negative, significance at <.05); and (b) being an Operation Iraqi Freedom veteran (positive, significance at <.10). The magnitudes of the relationships are generally close to what was observed in the cross tabulations presented above.

Regression Results - Hourly Wage. Two linear regression models (using OLS) were used to explore the association of program year, select demographic characteristics, population subgroup characteristics with hourly wages of HVRP participants: one model provided regression results with and the other without the five types of service receipt (i.e., receipt of any training activity, job search assistance, counseling/vocational guidance, job club workshop, or other supportive services). The two models had similar results, and thus, only the model with

⁵⁸ In both models, attendance at job club workshops was found to have statistically significant negative associations with job placement, perhaps reflecting that those attending job club workshops were less job ready, less employable, or experiencing difficulty finding a job (and thus, referred to a job club).

services included is discussed (as shown in Exhibit 4-15). The analyses of hourly wages at placement were restricted to individuals who were placed in a job.⁵⁹ The model shown in Exhibit 4-15 indicated positive associations with hourly wage at placement for the following independent variables with p-value <.01: (a) participating in PY 2012 and PY 2013 (compared with PY 2009); (b) being female (compared to being male); (c) being Hispanic or other minority (compared with being Caucasian); (d) being in any age group above 25 (compared with being in the 18-24 age group); (e) among special subpopulations characteristics, being a Campaign-Badge veteran, recently/newly separated, Operation Iraqi Freedom veteran, and Operation Enduring Freedom veteran. At the p-value <.01 level, both models indicated negative associations with hourly wage at placement for the following independent variables: (a) being African-American (compared with being Caucasian); (b) being welfare recipient; (c) being chronically homeless; and, (d) receipt of three types of services (compared with not receiving each service): receipt of any training activity, job search assistance, or supportive services. In terms of participant characteristics, being disabled was found to have a positive effect on hourly wage rate at the <.05 level and at a <.10 significance level, receipt of counseling/vocational guidance had a positive association with hourly wage.

⁵⁹ Because selection into employment is not random, interpretation of the coefficients in the wage rate regressions is problematic.

EXHIBIT 4-15: ORDINARY LEAST SQUARES REGRESSION -- ASSOCIATION OF PROGRAM YEAR, GENDER, RACE/ETHNICITY, AGE, SUBGROUP CHARACTERISTICS, AND SERVICES RECEIVED WITH HOURLY WAGE AT PLACEMENT, PY 2009-13

| Independent Variables | B | T |
|--|-----------|----------|
| (Constant) | 10.746*** | 57.298 |
| Program Year (Ref: PY2009) | | |
| PY2010 | .015 | .198 |
| PY2011 | -.050 | -.659 |
| PY2012 | .261*** | 3.509 |
| PY2013 | .301*** | 3.985 |
| Gender (1=female) | .482*** | 6.003 |
| Race/Ethnicity (Ref: Caucasian) | | |
| African American | -.287*** | -5.909 |
| Hispanic | .437*** | 4.732 |
| Native American | .345 | 1.352 |
| Other Minority | .630*** | 4.245 |
| Age (Ref: 18-24) | | |
| 25-34 | .920*** | 6.207 |
| 35-44 | 1.726*** | 11.275 |
| 45-54 | 1.453*** | 9.634 |
| 55-64 | 1.155*** | 7.445 |
| 65+ | 1.238*** | 4.461 |
| Welfare Recipient (1=yes) | -.604*** | -12.229 |
| Disabled (1=yes) | .128** | 2.104 |
| Campaign Badge (1=yes) | .441*** | 7.035 |
| Recently/Newly Separated (1=yes) | .348*** | 3.446 |
| Chronically Homeless (1=yes) | -.385*** | -7.292 |
| Operation Iraqi Freedom (1=yes) | .421*** | 4.354 |
| Operation Enduring Freedom (1=yes) | .333*** | 3.123 |
| Any Training Activity (1=yes) | -.203*** | -2.735 |
| Job Search Assistance (1=yes) | -.317*** | -2.648 |
| Counseling/Vocational Guidance (1=yes) | .187* | 1.899 |
| Job Club Workshop (1=yes) | -.015 | -.313 |
| Other Supportive Services (1=yes) | -.513*** | -8.794 |

Note: The dependent variable in this analysis is hourly wage at placement. Nominal wages are converted to real wages using 2013 as base year.

N=42,386.

F-ratio: 36.320; P-value: 0.000.

R: 0.148; Squared R: 0.022; Adjusted Squared R: 0.021.

*P<.10, **p<.05, ***p<.01.

Ref=Reference Category.

G. Comparison of VOPAR Employment Outcomes with Unemployment Insurance Wage Record Data for an HVRP Grantee

As part of this study, the Avar research team conducted a special analysis aimed at exploring the consistency of HVRP participant employment outcome data collected and reported through the program's VOPAR data system with data collected on a quarterly basis through the Unemployment Insurance (UI) wage record system. The UI wage record data is collected by state employment agencies directly from employers on gross wages paid to employees during each quarter.⁶⁰ The research team worked with one state employment agency that had the capability to match quarterly UI wage record earnings data for HVRP participants enrolled at an HVRP grantee site for two program years (PY 2012 and PY 2013). As discussed later, this analysis comparing employment outcomes for HVRP participants using VOPAR and UI wage record data presented in this section is exploratory and should be approached with considerable caution. Additional and more systematic analyses across a much larger sample of HVRP grantees are needed in the future to determine whether the results for this one grantee are representative of HVRP grantees operating in other states and localities.

Exhibit 4-16 provides a comparison of employment outcomes for HVRP participants enrolled at one grantee site in PY 2012 and PY 2013 using VOPAR and UI wage record data.⁶¹ As shown in the exhibit, the employment outcomes for HRVP participants can be substantially different depending upon the source of data used. As shown in the final row of the exhibit, the employment rate when the two program years (PY 2012 and PY 2013) are combined is 75.8 percent of enrolled HVRP participants when the VOPAR data are used, as compared with 40.6

⁶⁰ There are some exclusion to workers covered under the UI wage record system, as discussed later in this chapter.

⁶¹ In developing the data file for this analysis, state agency personnel had to first add the Social Security number to the HVRP participant listing, as the VOPAR data does not contain this identifier. As noted in the exhibit, it was not possible to capture the SSN for all participants enrolled at the HVRP grantee site for the two program years analyzed (see the exhibit for the number of missing records in the analysis).

**EXHIBIT 4-16: COMPARISON OF EMPLOYMENT OUTCOMES USING VOPAR
VERSUS UI WAGE RECORD DATA, PY 2012 AND PY 2013, ONE URBAN HVRP
GRANTEE**

| Program Year/ Measure | A | B | C | D |
|-----------------------------|--|--|---|--|
| | # of HVRP Participants Indicated as Placed in VOPAR for Year | # of HVRP Participants Indicated as Placed in VOPAR and also Employed in UI Wage Records Data for Year | # of HVRP Participants Indicated as Not Placed in VOPAR but Employed in UI Wage Records Data for Year | # of HVRP Participants Indicated as Employed in UI Wage Record Data for Year |
| PY 2012 | | | | |
| HVRP Participants Employed | 110 | 41 | 15 | 56 |
| HVRP Participants Enrolled | 154 | | | 154 |
| Employment Rate | 71.4% | | | 36.4% |
| PY 2013 | | | | |
| HVRP Participants Employed | 75 | 40 | 3 | 43 |
| HVRP Participants Enrolled | 90 | | | 90 |
| Employment Rate | 83.3% | | | 47.8% |
| Total (PY 2012 and PY 2013) | | | | |
| HVRP Participants Employed | 185 | 81 | 18 | 99 |
| HVRP Participants Enrolled | 244 | | | 244 |
| Employment Rate | 75.8% | | | 40.6% |

Note: VOPAR data are based on individuals placed into employment during the program year; UI wage record data capture whether the individual has earnings during the program year. The number of participant enrollments above is a subgroup of total participants for each program year because Social Security numbers were not available for all participants.

percent when using UI wage record data. As also shown in the exhibit, the matching of HVRP participants with UI wage records generates quite different results in terms of numbers of participants employed each program year, with the UI wage record data resulting in half the number of participants employed (i.e., 99 versus 185 HVRP participants employed).

Additionally, Columns B and C in the exhibit show that participants that do show up in UI wage record data as employed are not always similarly captured within VOPAR data. As shown in Column B, for PY 2012 and PY 2013 combined, a total of 81 (of 99 participants identified as employed in UI wage record data) also were similarly identified as employed in VOPAR data. However, 18 of the 99 (18 percent) identified as employed using UI wage record data were not similarly identified as employed using VOPAR data.⁶²

While the exploratory analysis discussed above suggests that employment outcomes measured with VOPAR data are inconsistent with results when UI wage records are utilized, these results and their interpretation should be approached with considerable caution. The inconsistencies in employment results across the two data sources could arise from a number of factors, and past studies have shown that results using administrative data sources (such as UI wage records) can generate quite different results compared with the collection of employment information through survey-type methods (such as HVRP grantee staff contacts with employers/participants and/or collection of pay stubs used in collection employment outcomes for VOPAR reporting). A study by Barnow and Greenberg (2014) documents some of the key

⁶² Appendix Table C-8a provides a quarterly comparison of employment outcomes using VOPAR versus UI wage record data. Additionally, Appendix Table C-8b provides a breakdown of quarterly earnings, hours worked, and hourly wage rate for HVRP participants placed in employment by placement quarter using UI wage record data. The means provided in Table C-8c are average quarterly earnings for those HVRP participants employed during the quarter. Using wage records to explore employment outcomes appear to show higher hourly wage rates but lower employment rates (compared with VOPAR data). It should be noted that most states do not track hours worked in their wage record data and so it is not usually possible to calculate hourly wages with UI wage record data.

ways in which UI wage record data may underreport earnings or report earnings and employment that substantially differ from surveys and other methods:

...if either employers or the evaluation organizations have incorrect social security numbers for some sample members, then there will be a failure to match UI administrative data with some members of the research sample. Employers may also fail to report some earnings to avoid the tax used to finance UI benefit payments. Moreover, data maintained by state welfare or UI agencies usually exclude sample members who moved out of the state after they were randomly assigned. UI data also do not cover most individuals who work for the federal government, on small farms, for railroads, for selected nonprofits, at out-of-state jobs, in casual or irregular employment, or who are self-employed or independent contractors. Hotz and Scholz (2001, p. 303) suggest that these gaps in coverage account for at least 13% of all jobs. Wallace and Haveman (2007, p. 738) indicate that 9% of the workers in Wisconsin are not covered by UI records.

The Barnow and Greenberg study also points out that survey-type approaches may miss individuals because they cannot be located or refuse to be interviewed. They note that non-response is related to various socioeconomic characteristics (such as age, gender, marital status, household structure, education, and income). Additionally, the authors suggest that non-response is especially likely if the follow-up period is lengthy. In discussions with an agency official overseeing the HVRP grant that was the subject of this exploratory analysis, it was indicated that among the factors likely contributing to underreporting of employment outcomes using UI wage record data compared to using VOPAR data are the following: (1) participants work out-of-state (which is not a long commute for some participants involved in the HVRP grant that is the focus of the analysis); (2) participants work in non-covered employment (e.g., self-employed, federal government, nonprofit organizations, etc.); and (3) participants are engaged in casual, irregular, or informal employment.

CHAPTER 5: ALTERNATIVE EVALUATION DESIGNS FOR POTENTIAL FUTURE RIGOROUS STUDY OF HVRP

A. Introduction

The purpose of this chapter is to contrast the strengths and challenges of a variety of evaluation strategies that might be undertaken for the Homeless Veterans Reintegration Program (HVRP). Following the Chief Evaluation Office's philosophy regarding tiers of evidence, we first discuss using randomized controlled trials (RCTs) to estimate the impact of HVRP compared to no labor market intervention. Next, we explore the possibility of conducting a differential impact study of alternative HVRP structures using an RCT, where HVRP grantees are randomly assigned access to bid on one or more veterans services grants issued as a package. The final alternative involving RCTs is where relatively modest changes are introduced to a randomly selected group of grantees, while the control group consists of grantees that operate under the previous structure; two illustrations of potential modest changes are removing the penalties for achieving higher than planned performance and using a "stat" approach to monitor grantees in a region.

A potentially strong quasi-experimental approach would involve a regression discontinuity design (RDD). Under this approach, HVRP programs would be required to use a formal scoring mechanism for deciding which eligible veterans would be offered admittance to the program.

The next group of options would also make use of comparison groups rather than random assignment. These designs produce reasonable impact estimates if the treatment and comparison groups are well matched on all relevant variables. One approach is a propensity score matching

approach where the treatment group consists of HVRP participants and the comparison group would be drawn from a pool of homeless veterans (or possibly homeless individuals who are not veterans) who do not receive HVRP services and are selected to match the HVRP participants on characteristics expected to affect participation and outcomes of interest. Another comparison group design is a differential impact study where participants in grantees with different combinations of veterans grants would be matched and the data would then be used to estimate the impact of grantee service combinations on outcomes of interest; this type of study would address the same issues as the RCT differential impact study described earlier, but we would not be as confident that any differences in outcome are due to the differences in services received rather than unmeasured participant characteristics or other grantee characteristics.

If the designs described above are considered infeasible, unethical, or impractical, an outcome study can be conducted. In an outcome study, relationships between outcomes and grantee characteristics, participant characteristics, and local economic conditions would be explored through cross tabulations and regression analysis to see if there systematic variations in program evaluations associated with these variables.

All the suggested strategies have strengths and weaknesses, and some may be of more interest than others to the Department of Labor for cost or technical considerations. We therefore do not provide details regarding the evaluations for the strategies suggested at this time. Exhibit 5-1 provides an overview of the various evaluation options discussed in this memorandum.

EXHIBIT 5-1: OVERVIEW OF POTENTIAL OPTIONS FOR FUTURE EVALUATION OF HVRP

| Confidence in Cause-and-Effect | Approach | Summary of Approach | Data Sources | Advantages/ Benefits | Challenges/ Disadvantages | Difficulty | Cost |
|---------------------------------------|--|--|--|---|--|---|---|
| High | Randomized Controlled Trial | Randomly assign <i>applicants</i> to treatment or control status. | Administrative data (from HVRP grantees and UI wage record data); Surveys (of participants, pre- and post-program). | Only approach that assures unbiased estimates, findings easy to interpret. | Expensive, may be considered unethical, may generate objections from vet groups, could result in randomization bias, requires more time than other approaches. | Very difficult. | Very high. |
| High | Differential Impact Study RCT | Randomly assign <i>grantees</i> to be able to bid on package of HVRP, G&PD, and SSVF (T) or to bid separately. | Administrative data (from all agencies involved and UI wage record data); Surveys (of grantees and participants). | Can accurately test if single source for services improves outcomes and/or reduces costs. | Would require cooperation in procurement and administration across 2 or 3 federal agencies , which would be very difficult to achieve; as the unit of observation is the grantee, there would likely be few observations and might not be well matched. | Very difficult (due to need for high level of cooperation among agencies and large sample sizes required). | Medium to high (no participant surveys); Very high (participant surveys). |
| | Modest Change Differential Impact (e.g., no penalty for high outcomes or use of “Stat” approach). | Introduce modest changes on random basis (preferred) or on subset of grantees in location, or on all grantees; use comparative interrupted time series analyses. | Administrative data (from HVRP grantees and UI wage record data); Researcher-collected data (on participant characteristics, grantee characteristics, and economic conditions). | If RCT is used, results very credible unless sample size is small; if not random, results could suggest areas for more rigorous test. | Small sample sizes jeopardize statistical significance; if RCT not used, outcome differences could be due to other factors. | Very difficult (on fairness grounds; possible resistance in treating grantees differently). | Medium. |
| Medium/ High | Regression Discontinuity | Develop scoring instrument for those interested in program and ration slots based on score; estimate impacts by comparing those close to the cutoff. | Administrative data (from HVRP grantees and UI wage records); Researcher-collected data (scores on assessment); Surveys (of participants, pre- and post-program). | If requirements met, considered by many as strongest quasi-experimental design | May be resistance to using formal instrument for selection; requires at least 3 times as many observations as RCT. | Very difficult (due to sample sizes and reaching agreement on selection instrument). | High. |
| Medium | Comparison Group | Select comparison group of eligible individuals based on propensity score matching and use | Administrative data (from HVRP grantees, VA, and UI wage records); Surveys (of participants and comparisons, pre- and post- | Less expensive and less intrusive than RTC or RDD; approach widely used. | Considerable disagreement in evaluation community on when approach yields accurate estimates; administrative data may not capture employability. | Difficult (to obtain adequate information on comparison | Medium to high. |

EXHIBIT 5-1: OVERVIEW OF POTENTIAL OPTIONS FOR FUTURE EVALUATION OF HVRP

| Confidence in Cause-and-Effect | Approach | Summary of Approach | Data Sources | Advantages/ Benefits | Challenges/ Disadvantages | Difficulty | Cost |
|---------------------------------------|---|--|---|--|--|---|--|
| | | OLS to estimate impact. | program). | | | group; may be difficult to obtain donor pool information from VA). | |
| | Differential Impact Study Comparison Group | Use current administrative data in OLS framework to see how outcomes vary by various combinations of grants. | Administrative data (from all agencies involved); Surveys (of grantees and participants, pre- and post-program). | Good way to explore how outcomes vary by presence of multiple grants for homeless veterans. | Lack of RCT leads to questions about causality; study would require some cooperation from other agencies and their grantees; likely to be viable only in large cities, leading to small sample size. | Moderately difficult (to obtain cooperation from other organizations, but not as difficult as with RCT). | Medium to high (no participant surveys); very high (participant surveys). |
| Low | Outcome Study | Use OLS to analyze VOPAR data to see how outcomes vary by participant, grantee, and economy characteristics. | Administrative data (from HVRP grantees); Researcher-collected data (on local areas from BLS and Census sources); Surveys (of participants). | Can get ideas on how outcomes vary by grantee characteristics, participant characteristics, and economic conditions; very modest cost. | Does not provide impact estimates; if insufficient control variables available, could produce misleading ideas on factors driving outcome differences. | Easy. | Low. |

Finally, where appropriate, this memorandum incorporates perspectives and recommendations from a Technical Work Group (TWG) meetings held in July 2015 and June 2016, which were aimed at gaining expert advice and feedback on alternative approaches to future rigorous evaluation of the Homeless Veterans Reintegration Program (HVRP). The purpose of these meetings were to gain input from TWG members on the evaluation design for this study and initial input on potential options for future rigorous evaluation of the HVRP initiative (i.e., during the initial TWG meeting) and obtain feedback from TWG members on the draft final report (i.e., during the second TWG meeting). The TWG meetings were attended by the following individuals (note: the three TWG members and the research team members attended both sessions; some attendees from USDOL attended one of the two TWG meetings):

- **TWG Members:** John Rio (Advocates for Human Potential – a technical assistance contractor for HVRP grantees), Jeffrey Smith (University of Michigan), and Carolyn Heinrich (then at University of Texas at Austin, now at Vanderbilt University)
- **USDOL/CEO:** Christina Yancey (Project Officer) and Jonathan Simonetta (both TWG meetings); Adrienne Wong and Demetra Nightingale (initial TWG meeting only)
- **USDOL/VETS:** Dennis Johnson and Ralph Charlip (initial TWG meeting only); Sam Shellenberger and Maria Temiquel, (second TWG meeting only)
- **Avar Consulting, Inc.:** Joan Wang, Joyce Kaiser, Bethanie Wang, and Lynn Burns
- **George Washington University (GWU):** Burt Barnow (Principal Investigator)
- **Capital Research Corporation:** John Trutko (Project Director), Carolyn O'Brien, and Alexander Trutko

Input from the TWG members, USDOL/CEO, and USDOL/VETS attendees is provided on each of the future evaluation design options (where appropriate) in an italicized section that follows each of the major sections of this chapter.

B. Randomized Controlled Trial

Randomized controlled trials (RCTs) represent the gold standard for evaluating programs because they virtually guarantee any differences in outcomes between the treatment and control

groups are due to the intervention, and the results are likely to be convincing to policy officials. Although random assignment was generally viewed as impossible, infeasible, or unethical in past decades, in recent years the number of evaluations using RCTs has accelerated greatly and the approach is now widely used to evaluate programs and demonstrations sponsored by federal agencies.

In the case of HVRP, there are some concerns with using random assignment that must be considered:

- Homeless veterans are considered a highly vulnerable group, and it is generally considered unethical to subject vulnerable groups to experiments;
- Denying employment services to homeless veterans might be considered bad policy because we owe the veterans a debt of gratitude for their service and should provide them with more, not fewer, services;
- Veterans are well organized, and veterans organizations would likely object to any evaluation that resulted in some of them being denied services;
- HVRP grantees might also be strongly opposed to random assignment;
- The numbers of individuals served in a grant year by individual grantees is relatively small in many sites to support an RTC (e.g., less than 50 enrolled per quarter and often as few as 15 to 20 enrollees per quarter), and it might not be appropriate to pool samples across HVRP sites because of differences in localities served, populations served, and services provided.
- It is not clear that all sites, particularly rural sites, could recruit significantly more candidates for their slots, which is required in an RCT; and
- Under an RCT, because the number of people selected for the program would increase, sites might end up serving a somewhat different population than they do under the current program, resulting in what is sometimes termed “randomization bias.”

There are, of course, responses to the objections. Although we do not want to harm the homeless veterans, there is no scientific evidence that the program is effective or how effective it is, so an RCT would not necessarily be depriving homeless veterans of a valuable service, and if we learn that the program is ineffective, VETS and other agencies could work to develop a

stronger program. Second, an RCT would only deprive the control group of HVRP services, not the other programs that provide housing, health care, substance abuse treatment, and supportive services. Regarding the concerns related to the fact that an RCT would require sites to select more participants, recent RCTs such as the Job Corps and Workforce Investment Act (WIA) evaluations reduce the burden on individual sites and minimize randomization bias by including a large number of grantees and randomizing out a small proportion of those eligible for the intervention. Finally, potential harm from being in the control group can be partly mitigated by giving the control group highest priority for the program after an embargo period required to evaluate the impacts of the program.

If an RCT is selected as the evaluation strategy, grantees would be selected for the evaluation and asked to initially recruit more veterans for the program than they would serve, with the recruited population randomly assigned to treatment and control groups. In our site visits, we have observed that HVRP grantees typically recruit participants from a limited number of transitional housing programs, which would make increased recruitment straightforward. However at least one grantee, Mountain Comprehensive Care Center in Kentucky, directly recruited homeless veterans in rural areas from a variety of places, including off the street. If it is considered ethical and feasible to conduct an RCT, then an RCT would provide the strongest evaluation design for determining the impact of the HVRP.

Data for an RCT could be collected from several sources, depending upon resources available and precision desired. At a minimum, data would include unemployment insurance (UI) wage record data for several years prior to random assignment and several years after the date of random assignment. The pre-program earnings data will be useful as control variables in the impact analyses and should improve the precision of the earnings and employment estimates.

The post-program data will provide the key dependent variables for the analysis--employment and earnings after random assignment. Two types of data collected by the grantees will be useful for the evaluation. First, data collected for assessing potential participants' suitability for the program should be available for both the treatment and control groups, again permitting their use as control variables; data collected by the grantees may also be useful for subgroup analysis, although this may be limited by sample sizes. In addition, data maintained by grantees on services received can be linked to participant data to provide a richer picture of how services vary by participant characteristics.

Personal surveys of the participants are likely to be expensive, but potentially very useful. Surveys can capture outcome variables not likely available from administrative data. For example, to the extent that participants can be located, the surveys can be used to measure the impact of HVRP on housing status. An outcome of "could not locate" in this instance is likely to be a potential proxy for homelessness. There are also relatively short measures of some mental health conditions that could possibly be incorporated into follow-up interviews; for example, the CESD-R is a 20-item instrument that is used to measure depression and is freely available. Survey data is also likely to be useful because formerly homeless individuals may be more likely to work in the informal labor market than the general population, so personal interviews may be more likely to capture this source of income than UI wage record data.

TWG Meeting Findings/Recommendations – Randomized Controlled Trials

- **Randomized Control Trial (RCT) Denying Access to HVRP Is not Likely to Be Feasible.** *There was general agreement on the part of TWG members and CEO/VETS attendees that a RCT involving denial of enrollment and receipt of HVRP-funded services would not be feasible. An RCT involving outright denial of services (i.e., random assignment to a control group that would be denied HVRP services in order to measure the overall impact of HVRP services) was not likely to gain approval given likely objection to such denial of services to veterans within DOL, Congress, and veterans' organizations.*
- **TWG Members Raised Several Concerns (in Addition to Denial of Services) that Could Pose Serious Challenges to Experimental Studies Designed to Determine Effects of HVRP:**
 - **Concern with treatment contrast** – *Homeless veterans may obtain a range of services from other service providers (e.g., VA, transitional/permanent housing providers, health care providers, state veterans agencies, etc.) – a large sample is likely to be needed if there is little contrast between what treatment and control group members receive in terms of services.*
 - **Difficult to interpret net impacts** – *Related to the above challenge, one TWG member questioned how meaningful estimates of impacts would be from such a study – such estimates would be the average impact of varying services and interventions received by treatment and control group members.*
 - **Concern over the selection process** – *It was observed that grantees are often very careful, and can be highly selective in who they choose to enroll in HVRP (and may hold off selection until they can judge likelihood of job placement), because of concern over achieving rigorously monitored performance outcomes (such as job placement rate). This could make it difficult to set up an experiment and to generalize results to all homeless veterans. Understanding the selection process is of critical importance prior to implementing a RCT.*
 - **DOL-VETS staff indicated that Veteran Affairs (VA) and HUD are highly unlikely to be agreeable to combining grants (e.g., HVRP and SSVF) in a systematic manner to support an experimental study (e.g., to test whether such coordination of funding leads to better participant outcomes).**

C. Differential Impact Study, Preferably Using a Randomized Controlled Trial

All the sites interviewed have noted that the veterans served by HVRP typically also require housing and supportive services for substance abuse, mental health, and other issues. Grants for providing these three sets of services are awarded independently by VA, HUD, and DOL. Some of the people we have interviewed have opined that they can provide a better mix of services if they have grants covering all three types of services. This belief is not universally shared, however, and some sites have expressed no concern about having to reach out to other organizations to provide services that they cannot provide or to locate potential participants. The purpose of this type of study would be to analyze how outcomes vary depending on whether the HVRP program controls the resources for housing and supportive services.

This type of study could be undertaken either using randomized controlled trials or a non-experimental approach. The RCT approach would be best in large metropolitan areas where typically a large number of awards for each type of program. Under the RCT approach, the awards for several major programs assisting veterans and their families such as HVRP, Supportive Services for Veteran Families (SSVF), and the Grant and Per Diem Program would be awarded in two ways. Some of the awards would be for all three programs, but others would follow the current approach of making individual awards. If a non-experimental approach is used, then analyses would be conducted to see if outcomes are higher for grantees with multiple awards compared to grantees that only have HVRP awards. Analyses could be conducted within metropolitan areas or by pooling across areas.

Although this type of study could provide some useful information about structuring the various programs for homeless veterans, the experimental approach would likely be difficult to implement and the results would not necessarily be easy to interpret. The experimental approach

would require VA and DOL (and possibly HUD) to coordinate the award of their grants, and although this is not impossible, it is likely to be difficult to coordinate across two or more agencies' contracting departments. In addition, the organizations that win coordinated procurements might simply be better performers than those who cannot win large combined procurements. Finally, this type of study can only be undertaken in a large metropolitan area (to assure that there will sufficient grantees in both categories), so the number of awards in an individual area is likely to be small and the project is likely to be feasible in only a limited number of labor markets large enough to offer a number of grants for each program. In addition, with a small number of grantees in each area, even random assignment of grantees to eligibility status is likely to be insufficient to guarantee that grantees in the treatment and control groups will be very similar. There are strong risks of selection bias (where more qualified grantees are more likely to receive the coordinated grants) and sampling bias (where small samples are likely to produce differences in characteristics between the grantees in the two groups).

For these reasons, we believe a non-experimental approach is likely to be the best strategy at this time. The analysis would look at how outcomes vary within and across labor market areas among HVRP grantees holding just the HVRP grant and various combinations of other grants. It is unlikely that definitive evidence can be obtained from such a study, but it may be able to document patterns of greater success with multiple grants that will warrant further study, possibly including an RCT.

Because we believe that this type of evaluation should be considered exploratory, we recommend relying on grantee data and UI wage records for the evaluation in the first phase. If the results are promising, subsequent evaluations of this type could add survey data for the participants to obtain better outcome data and control variables.

TWG Meeting Findings/Recommendations – Differential Impact Study

- ***Smaller-Scale, Differential Experimental Designs Featuring Random Assignment May Be Feasible.*** While there are likely to be reservations regarding a study involving random assignment that would result in some veterans being denied access to the program, it may be possible to conduct smaller-scale experimental studies that involve randomization of HVRP grantees or participants, as long as control group members are not denied basic HVRP-funded services. For example, such RCT studies could be aimed at better understanding marginal enhancements to existing HVRP services or introduction of new strategies or services. Such studies would fit well with VETS administrators' expressed interest in understanding new approaches and best practices that might improve (for example) job placement and retention rates. TWG group members provided an illustration of smaller scale studies (involving random assignment) that might be useful:
 - ***Instead of randomizing HVRP participants, DOL might consider a study that randomizes by grantee. For example, one TWG member observed that the focus of such a study featuring random assignment of grantees might be "Professional Development (PD)," whereby some (or all) current grantees could be randomly assigned to treatment and control groups for staff to receive (or not receive) intensive personal development (perhaps provided by a VETS/HVRP technical assistance contractor). Grantee-level results on job placement, placement into transitional/permanent housing, and other outcomes could then be compared for the treatment and control groups (of grantees).***

D. Evaluations of Modest Changes in HVRP, Preferably Using an RCT

The HVRP program could systematically be modified in minor ways that prior research or common sense suggests could lead to improved outcomes with an assessment, ideally through an RCT, but if necessary through non-experimental methods, to see if the change affects outcomes. We offer two possibilities here, but these are just examples of small program modifications that could be tested.

The first simple experiment would be to modify the performance standards system for a randomly selected group of grantees so that they would not be subject to sanctions for performing too well. Sites that serve more participants than planned, have more placements than planned, or have a lower cost per placement than planned have their ratings lowered and are subject to sanctions if the deviations are more than 15 percent of the plan. If these provisions were

removed for a random subset of grantees it would be interesting to observe if these outcomes improved and by how much they improved.

A second example is to apply the “performanceStat” approach in a sample of grantees in several large metropolitan areas and conduct a difference-in-difference analysis to see if grantees included in the PerformanceStat treatment group improve in their outcomes relative to the control group. In simplest terms, the PerformanceStat approach has grantees meet with the granting agency periodically to review their performance over time and in comparison to other grantees (Behn 2014). The PerformanceStat approach grew out of efforts in New York City to compare performance by police offices; the approach was adopted to the city’s welfare program and later spread to other cities and states. The experiment could be implemented by randomly assigning half the grantees in a metropolitan area to participate in PerformanceStat meetings while the other grantees would be reviewed in the traditional manner.

Although we believe the two activities suggested here are promising, VETS might have other ideas on ways to encourage better outcomes that preferably can be tested through random assignment. The idea of testing interesting small changes fits in well with the popular book by Jim Manzi advocating learning through small RCTs (Manzi 2012).

The data issues here are similar to those noted in the prior section. In the first round of such experiments, we would suggest using readily available administrative data from the programs and UI wage record data. Personal interviews can be added in subsequent rounds if appropriate.

TWG Meeting Findings/Recommendations – Evaluation of Modest Changes to HVRP

- ***A possibility for an RCT would be to rollout new enhancements to HVRP in a phased manner to test impacts of a new service or administrative enhancement. One example would be rollout of a “PerformanceStat” approach, whereby a group of grantees would be randomly selected (perhaps using a stratified random sample) for a quarterly, in-depth review of outcomes (using a “PerformanceStat” approach). Another example might be to gradually phase-in job placement and retention incentives (e.g., in the form of gift cards) or other financial incentives for HVRP participants served by randomly selected grantees. It may also be possible to conduct a small-scale test of such enhancements in geographic areas where there are multiple grantees (e.g., perhaps having 4 grantees in a major urban area implement an enhancement prior to 4 other grantees in the same area holding off on implementing the enhancement for a one or two-year trial period).***

E. Regression Discontinuity Design

A regression discontinuity design (RDD) takes advantage of a situation where treatment eligibility is based on the score of a “forcing variable,” such as a test score or some measureable characteristic of potential participants, that is used to determine which individuals receive or are eligible to receive the treatment of interest. In the modern interpretation of RDD, the individuals who are close to the cutoff score for entry are viewed as nearly identical, so the difference in outcome scores can be attributed to the treatment. A major advantage of the RDD approach is that there are a number of diagnostic tests, many graphical, that can be used to test whether the assumptions are met; this is contrary to propensity score matching where the most important assumption, namely that the evaluator can observe all the relevant variables contributing to the participation decision, cannot be tested (Jacob et al. 2012, Imbens & Lemieux 2007). Although the original RDD models assumed that those below the cutoff score never participate in the program and those above the cutoff always participate (called a “sharp RDD”), modern analysis only requires an increase in the probability of participating above the cutoff score (called a “fuzzy RDD”).

As noted above, it appears that many of the sites we visited typically have “feeder sources” such as transitional housing that they manage, from which they draw their participants; the programs are subject to very strict performance criteria and they enroll a limited number of participants each year, enabling the sites to be highly selective in selecting HVRP participants. For an RDD to be a feasible approach to evaluating HVRP, grantees would need to develop a quantitative measure that would be used to screen eligible veterans and select them into the program. It is not clear if HVRP sites would be willing to specify a selection rule for several reasons. First, they might simply prefer to use an informal selection approach as they are currently doing, as that approach gives them more flexibility. Second, specifying a firm selection rule might call attention to the possibility that the sites are “creaming” or trying to select those most likely to obtain a job even without the program.

If an RDD is used to evaluate HVRP, it would most likely be what is called a “fuzzy RDD,” where the cutoff on the forcing variable is not the only factor used to determine participation but where the probability of participating increases at the cutoff point.

When the underlying assumptions of the RDD are met, this can be a strong design, although it requires large sample sizes (typically at least three times as large as when random assignment is used). Although this approach is potentially feasible, we believe that it is unlikely that grantees could be convinced to develop and use a quantitative measure that could be used to rank potential participants. If there is interest, the first step would be to explore whether HVRP sites would be willing to use a formal screening mechanism.

At this time, we would recommend using data available through grantee records and UI wage records. If the approach proves viable, then including personal interviews can be considered further.

TWG Meeting Findings/Recommendations – Regression Discontinuity Designs

- ***Regression Discontinuity Designs (RDD) Are Not Likely To Be Feasible.*** However, as a smaller-scale study, it might be possible and interesting to compare organizations (and communities) that lost HVRP grants with those that received grants. For example, it might be interesting to compare a city like Jacksonville (that does not have a current HVRP grant) with a city similar to Jacksonville that has a grant(s). A challenge to such a study would be obtaining data on homeless veterans in communities without a HVRP grant.

F. Comparison Group Evaluation

If random assignment proves infeasible, the primary alternative strategy for determining the overall impact of HVRP would be to select a comparison group of homeless veterans and contrast the employment and other outcomes of the comparison group and the treatment group. There are several challenges to using a comparison group approach, but the greatest challenge is likely to be that a source of data on homeless veterans must first be identified that has rich enough data that it would be possible to see if the nonparticipating veterans are similar to the HVRP participants. In addition, the data must be made available to the evaluator. Based on the literature review, review of VOPAR data, and conversations with HVRP sites, the HVRP participants tend to be ages 45 to 60, of all races and both genders, and likely to have mental health and/or substance abuse issues. Although employment-ready homeless veterans sometimes come into contact with the veterans' service system through contact with the Disabled Veterans Outreach Program (DVOP) and Local Veterans Employment Representatives (LVER) staff or other staff at American Job Centers (Wagner-Peyser or WIA), the most common source of services appears to be Department of Veterans Affairs (VA) staff.

At this point we have not had much contact with VA staff in our evaluation, although we have met some VA staff in conjunction with our HVRP site visits, so we do not know what data VA programs maintain on the veterans they serve or if they would be willing to share such data. However, VA appears to be the best potential source of a large number of potentially suitable

comparison group members. An alternative source of homeless, job-ready veterans would be the network of transitional housing in an area and possibly shelters (depending on how participants are recruited in a particular area). As noted above, transitional housing appears to be a common source of participants for HVRP, with some veterans recruited from shelters and the street, with the mix varying by location. It would be simpler to contact the VA in an area than to search for comparison group members through contact with various transitional housing units and shelters.

If VA staff are willing to participate in such an evaluation, and suitable data are available, propensity score matching could be used to form a comparison group of homeless veterans who are similar to HVRP participants on key variables related to program participation and employment outcomes. A side benefit of using propensity score matching to evaluate HVRP is that in estimating propensity scores, the participation equations could be used to determine which characteristics are associated with enrollment in HVRP and which characteristics appear to reduce the likelihood of enrolling.

The general approach in propensity score matching is to start with the treatment group and a large pool of eligible people who did not receive the treatment. The two groups are then pooled, and estimates of the probability of enrolling in the program (the propensity score) are then calculated, typically using logit or probit analysis, where variables that are considered likely to affect enrollment and the outcome of interest are included in the equation. At this point, the comparison group is formed using one of a large number of procedures; the simplest approach is to select the person in the pool of eligible people who has the closest probability of participation to the treatment group person, but there are a number of approaches that include matching many comparison group members to each participant; Monte Carlo simulations have indicated that approaches using a large number of people in the pool, such as kernel matching and inverse

probability weighting combined with ordinary least squares, perform better than nearest neighbor matching (Caliendo & Kopeinig 2008, Smith & Todd 2005). There are also a number of ways that program impact can be determined, including a simple analysis of variance and use of regression analysis.

Using a comparison group established through propensity score matching is a popular approach to program evaluation when random assignment cannot be used. In the context of HRVP, the main challenges are obtaining cooperation from VA to obtain data on veterans being considered for the comparison group and the adequacy of the data available for selecting a comparison group that would be similar to the HVRP participants. We cannot address the issue of dealing with VA here, but if this general approach is of interest, the next steps would be to verify VA cooperation and to explore the adequacy of matching variables. Based on site visits conducted, it appears that HVRP sites do a careful job of screening potential participants. The program has strict performance standards for placements, and programs take care only to admit participants they believe have a high probability of finding a job. This means that in establishing a comparison group it would be important to find homeless veterans who are truly job ready or close to being job ready. Unfortunately, the HVRP sites visited appear to rely primarily on informal assessments rather than formal instruments. Thus, it is unlikely that recorded job readiness measures will be available for either HVRP participants or potential comparison group members.

Although it is worth exploring the use of a comparison group design should random assignment not be available, we believe that there are serious barriers to this approach. Considerable effort must be given to exploring what job readiness data are maintained by VA so that the comparison group can be matched on the job readiness status of potential comparison

group members. It would also be important to determine what demographic and socioeconomic data are tracked by VA that can be used in the match.⁶³

For comparison group studies, it is likely impractical to conduct surveys for studies that use a large comparison group donor pool to form the comparison group. It would be feasible to conduct personal interviews for the final comparison group, but it is not clear if such a strategy is worthwhile.

TWG Meeting Findings/Recommendations – Comparison Group Evaluation

TWG members were in agreement that a Propensity Score Matching or other comparison group studies would be difficult to mount because of the difficulties involved in identifying an appropriate comparison group with sufficient sample size.

G. Outcome Evaluation of Participants with Varying Characteristics

If a net impact evaluation proves impossible or infeasible, an outcome evaluation can be used to better understand what the outcomes are and how they vary by participant subgroups, grantee characteristics, and labor market characteristics. Rather than provide impact estimates, an outcome study more modestly attempts to explore what the outcomes are on key variables, what the frequencies of specific outcomes are, and how the outcomes vary by key characteristics of participants, programs, and locations.

This project includes some outcome analyses, so a decision of whether additional outcome studies would be useful should await the completion of the project. Our outcome

⁶³ A member of the technical work group for the project pointed out that one complication with a comparison group is that there has to be temporal alignment with the treatment group, i.e., there must be some date when each comparison group member would have applied. If the comparison group members have applied for some employment-related services, that information can be used in generating information needed for temporal alignment.

analyses were presented in Chapter 4 and involved using the VOPAR data to produce frequency distributions for the key outcomes of the program as well as other outcomes that are tracked in VOPAR, as well as cross tabulations and regression analyses showing how outcomes vary with characteristics of participants, programs, and sites.

For outcome studies, we recommend using only program administrative data and pre- and post-program UI wage record data. As these studies do not produce impact estimates, the additional costs of surveys are likely not worth incurring.

TWG Meeting Findings/Recommendations – Outcome Evaluation

- ***Conduct Analyses of Existing Data to Better Understand Factors Associated with Better Outcomes.*** As a preliminary step, the TWG recommended analyses of existing VOPAR data to assess variation in grantee and participant outcomes. For example, existing data could be analyzed to explore whether grantees with other sources of funds, or with certain types of partnerships, perform differently on employment and housing outcomes. Regression analyses could be conducted to preliminarily examine variation in HVRP participant outcomes by participant demographics, services received, and other grantee characteristics.
- ***VETS is primarily interested in job placement/earnings outcomes (labor market outcomes) and would, in the future, be interested in linking UI wage record data with HVRP participant-level data.*** VETS administrators expressed interest in better understanding how job placement data collected by HVRP grantees is consistent with earnings data collected through an independent source (such as the wage record data). Employment outcomes should be a key focus of future empirical studies of HVRP.
- ***Need for a Better Understanding of Selection Process of Homeless Individuals for HVRP Enrollment.*** TWG members observed that HVRP grantees appear to be highly selective in enrolling homeless veterans in HVRP (i.e., primarily based on likelihood of employability). As a result, an important first step (paving a way for more rigorous experimental study) would be to develop a detailed understanding of the criteria and process used (and how they vary across grantees) to determine whether a recruited homeless veteran eventually gets enrolled in HVRP. Additionally, a better understanding of how grantee staff determine which services are provided for each HVRP participant would be helpful in designing future rigorous studies, particularly if non-experimental designs are required.
- ***Need for Better Data – Both at Individual- and Grantee-Levels – to Support Future (Rigorous) Evaluation.*** TWG members agreed that an immediate focus with respect to HVRP should be on improving program data collection, which would both prepare the

program for future rigorous evaluation and demonstrate that VETS is moving incrementally in the right direction to be able to provide valid quantifiable results at the grantee and individual participant-level.

- ***One vital first step would be to collect Social Security Number (SSN) from each participant and submit this identifier as part of participant-level data submitted to VETS.*** *Such a step would permit cross-program year tracking of HVRP participants, as well as allow for matching with wage record earnings data. Being able to match to wage record data would provide an independent verifiable source of employment data (versus job placement data collected by grantees), as well as support future rigorous evaluation efforts. If it is not possible to collect SSN, then a consistent client identifying number for each participant would be helpful from the standpoint of tracking participation across program years.*
- ***A second step would be to secure and match wage record data and additional DoD data to HVRP participants.*** *Wage record data should be collected for pre-participation and post-participation quarters. DOL-CEO staff notes that Wage Record Interchange System 2 (WRIS-2) agreements⁶⁴ and ability of HVRP grantees to co-enroll participants at AJCs will likely help to improve availability of data on HVRP participants to facilitate outcome and more rigorous evaluation of HVRP participation (at the participant- and grantee-levels) in coming years.*

H. Conclusions and Next Steps

In this chapter, we have raised some possible approaches to evaluating the HVRP program. These suggestions are not offered as an alternative to past studies that have identified promising practices, but instead are intended to help DOL learn more about how effective the HVRP program is and how it can be improved. The approaches offered here are not necessarily mutually exclusive. For example, a net impact evaluation of the program could be pursued at the

⁶⁴ The Wage Record Interchange System (WRIS) was developed to facilitate the interstate exchange of wage data between participating states for the primary purpose of assessing and reporting on state and local performance for programs authorized under the Workforce Investment Act (WIA) of 1998. The WRIS Advisory Group has developed the WRIS 2 Data Sharing Agreement for wage record data sharing with non-Department of Labor programs. This Agreement was developed from the interest of some states to share aggregate outcomes with partner programs not covered under the terms of the WRIS Data Sharing Agreement. WRIS2 extends the WRIS data sharing model to One-Stop Career Center partner programs such as education programs and other programs not under the jurisdiction of the Department of Labor, as well as other programs. Participation is completely voluntary, as is state participation in WRIS, and is also dependent on the states' laws governing the use of unemployment compensation information. Additional background is available on WRIS2 at: <http://www.doleta.gov/performance/wris2.cfm>.

same time that outcome studies are conducted and small modifications are made in selected locations. Next steps are to explore which of the options presented here are of highest interest and are feasible. Work can then be done to flesh out the details of the most promising approaches.

CHAPTER 6: STUDY CONCLUSIONS AND RECOMMENDATIONS FOR FUTURE PROGRAM DEVELOPMENT AND EVALUATION

Although HVRP grants are limited in size (\$300,000 for grantees serving urban areas and \$200,000 for grantees serving non-urban areas), key objectives of the program for grantees and participants are ambitious: move homeless veterans into employment; help ensure that those finding jobs retain them and upgrade to better ones over the long term; help homeless veterans stabilize their housing situation and transition to permanent housing; and provide for or arrange other services as appropriate to promote self-sufficiency and help ensure that homeless veterans served do not return to homelessness. HVRP grantees typically can hire three to five staff with their HVRP grants to provide services including: participant recruitment and intake, assessment, ongoing case management, training, employment services, housing counseling/referral, and other supports/assistance, as appropriate, for about 100 (on average) homeless veterans per year. Services and assistance should be tailored to the needs of each participant, with attention to ensuring that participants find and retain jobs within the current grant program year (in order to meet quarterly and annual performance standards under their grants). With limited funding under their HVRP grants, grantees must look for opportunities to collaborate with other programs offered through their own organizations and with other public and nonprofit organizations operating in their service areas (i.e., to obtain additional job training, education, child care, and housing services). The site visits and data analyses conducted as part of this research project suggest the following key findings about the HVRP program:

- **Grantees carefully screen homeless veterans for enrollment in HVRP to focus program resources on those that are the most likely to be employable within the current program year.** HVRP grantees target enrollment and services on those homeless veterans that they determine to be most likely to benefit from assistance in terms of finding and retaining employment. For example, most HVRP grantees are

reluctant to enroll homeless veterans that have substantial substance abuse or mental health issues that need to be addressed prior to securing a job, are interested in or in need of longer-term education/training, or are not interested in obtaining jobs (e.g., because they receive disability benefits or for other reasons). The assessment and screening of homeless veterans prior to HVRP enrollment stems in part from limited grant amounts and performance standards that emphasize job placement within the current grant-funded program year.

- **While all programs had a clear focus on job placement, retention, and moving homeless veterans toward permanent housing and long-term self-sufficiency, there was not a standard program structure or service delivery model across grantees visited.** While the number of program staff funded by each HVRP grant tended to be relatively limited (usually three to five program staff), there was no standard organizational structure or staffing plan across the grantee organizations visited as part of this study. All grantees relied upon partnerships to provide the services needed by the homeless veterans served, but there was not a typical group of partnering organizations or approach to structuring such partnerships. Across grantees visited, there was similarity in types of services provided – recruitment, intake and assessment, emphasis on employment-related services, referral to permanent housing, ongoing case management, and support services – but the flow of participants through services, sequencing of services, and specific activities in which participants were engaged varied substantially across grantees.
- **HVRP funds are not used to pay for housing assistance for homeless veterans.** Prior to enrollment in HVRP in the sites visited, most homeless veterans were housed in emergency shelters or, more commonly, transitional facilities, sometimes operated by the grantee organization, and, in other cases, by partnering agencies. The small number of homeless veterans coming to programs while living on the streets, or temporarily living with friends/relatives, were typically referred for emergency or transitional housing prior to HVRP enrollment (in part, so that they would be more ready to search for and retain jobs). HVRP case managers and staff played important roles in providing counseling on housing options, linking participants with other housing assistance programs, and directly assisting them in upgrading their housing circumstances while enrolled in HVRP (e.g., easing the transition from emergency to transitional, and from transitional to permanent housing). HVRP program administrators and staff in several sites visited indicated that goals for immediate elimination of veteran homelessness and moving homeless veterans into permanent housing prior to receiving other services could make it difficult to meet future HVRP enrollment goals (i.e., because once placed in permanent housing, veterans are ineligible to receive HVRP-funded services). Some administrators also felt that placing homeless veterans in permanent housing before addressing employment barriers and substance abuse/mental health issues could be counterproductive in terms of promoting long-term economic self-sufficiency and avoiding future spells of homelessness.

- **HVRP grantees did not use significant HVRP grant funds to pay for substantive education or training to upgrade occupational skills and long-term earnings.** Homeless veterans seeking longer-term education or occupational training would likely be referred for guidance and assistance to a DVOP, American Job Center, local Workforce Investment Board, and/or college/community college/training institution. They would also be informed about availability of Pell Grants, the Montgomery GI Bill, and other sources of financial aid/scholarships. Grantees did provide or refer HVRP participants for some types of relatively inexpensive, short-term training paid for with either HVRP grant funds (such as to obtain CDLs and certifications such as a CNA), or WIA funds, generally as long as training could be completed, and a job placement could be obtained, within the current program grant year at a relatively low cost.
- **The extent of involvement and role of DVOPs and AJCs varied substantially across HVRP grantees.** In most grantee sites visited, DVOPs were involved to some extent in providing employment services, job placement, and case management assistance for some of the HVRP participants. In several grantee sites, there was a very strong and cohesive partnership with the DVOP (usually located at a nearby AJC), with all (or nearly all) HVRP participants referred to the DVOP for assessment and ongoing help with job readiness and job search assistance (and often, subsequent referral to other unassisted services and staff-assisted workforce services available at the AJC). DVOPs also played a role in referral of homeless veterans to grantees for HVRP enrollment in many sites. With several sites visited, the connection of HVRP grantee staff and HVRP participants with DVOPs and AJC staff was more tangential, with HVRP grantee staff informing HVRP participants of workforce services available through the AJC and DVOP, but not regularly referring HVRP participants for AJC/DVOP assistance.
- **HVRP performance measurement standards and requirements to exit program participants at the end of each program year have an effect on participant screening and selection, and the structure and delivery of services.** Among the impacts of the performance measurement system and the requirement to exit participants at the end of each program year are the following:

 - Grantees are selective (i.e., creaming/skimmming) in terms of participant recruitment and enrollment in HVRP, typically, enrolling only employable homeless veterans with a strong likelihood of job placement prior to the end of the current program year. Grantees generally refer those that are assessed as less employable to the VA, veterans' service organizations, and other public/private service agencies in the locality, or delay HVRP enrollment until the homeless veteran appears to be more readily employable.
 - Grantees tend to avoid enrollment of new participants near the end of the program year because of concerns regarding their ability to place individuals in jobs before the end of the program year.
 - As noted earlier, grantees are reluctant to provide longer-term and more substantive education and job training assistance to build human capital -- in

part because of the costs of such assistance and the relatively modest HVRP funding levels, but also because of fears that participants will not complete training by the end of the program year, and will therefore be delayed in finding a job, which would adversely affect efforts to meet job placement and retention performance standards.

- **Despite collection of job placement, retention, and housing outcomes for each HVRP participant and VETS careful monitoring of performance for each grantee by quarter/year, without an experimental design (featuring random assignment of homeless veterans to treatment and control groups) or a rigorous non-experimental design (featuring a carefully constructed comparison group), it is not possible to determine in an unbiased manner the impacts of HVRP services.** For example, while it is possible to determine the job placement or job retention outcomes (as well as hours worked and hourly wages) of HVRP participants, it is not possible to determine whether homeless veterans served would have obtained or retained their jobs without HVRP assistance without an experimental/rigorous non-experimental research design. It is also unclear without a more rigorous (experimental) study, how HVRP services impact long-term participant earnings and housing circumstances, as well as whether the HVRP program makes a critical difference in terms of achieving long-term self-sufficiency and reducing chronic homelessness. It should, however, be noted that these points are true of all reporting systems that focus exclusively on participants; for example, the WIASRD reporting system for the WIA/WIOA program has the same issues.

KEY STUDY RECOMMENDATIONS FOR FUTURE PROGRAM DEVELOPMENT AND EVALUATION

The results of the site visits and statistical analyses conducted under this formative evaluation suggest that USDOL should consider changes in four areas, as highlighted below.

Program Reporting Requirements:

- ❖ **Consider updating or replacing the VOPAR/TPR data system.** Grantee administrators/staff indicated that HVRP's current reporting system is antiquated, burdensome for staff and participants, and limited in analytic capabilities -- and therefore, in need of a major overhaul. Some grantee administrators indicated that staff had to double and triple enter data on HVRP participants into the VOPAR/TPR data system and other participant tracking systems maintained by their organizations (such as the HUD's Homeless Management Information System [HMIS]). Once participant-level data were entered into the VOPAR/TPR system and submitted to VETS, it was difficult and time-consuming to correct errors or omissions within the data system. Administrators also indicated that while the VOPAR/TPR system did facilitate quarterly reporting of participant enrollments, services, and outcomes to USDOL, the data system lacked advanced analytic capabilities and

reporting features that could improve program performance (e.g., facilitate case management and provide administrators/staff with tools and dashboards for real-time tracking and analysis of enrollment trends, service utilization, and participant outcomes). In upgrading the VOPAR/TRP, several grantees suggested that if it were possible to piggyback or consolidate HVRP participant-level reporting with data already being collected for HUD's HMIS, such a change would reduce the need to complete multiple forms for participants and reduce the data collection burden for HVRP participants and grantee staff. However, such consolidation or coordinating of data collection and reporting would require agencies funding and overseeing homeless programs to work together on defining common data elements (i.e., VETS could not accomplish this alone).

- ❖ **Consider adding a unique participant identifier to the VOPAR/TPR tracking system (or a replacement system) to allow for tracking of individual program participants across grantee years.** Using participant Social Security Number (SSN) as a unique participant ID, possibly scrambled by a fixed algorithm to protect privacy, would be particularly useful from an analytic standpoint, because of its potential for matching with UI wage record data (for pre- and post-participation analyses of earnings of HVRP participants).⁶⁵

- ❖ **Consider matching UI wage record data and VOPAR/TPR system data on employment outcomes for additional HVRP grantees.** The exploratory analysis of employment outcomes conducted for one grantee as part of this study suggests inconsistencies in employment outcomes for HVRP participants using UI wage record data versus data collected by grantee staff and entered into the VOPAR data system. Additional analyses are needed to determine if the patterns of inconsistency identified in this single HVRP grantee site under this study are borne out for other grantees, and if so, to determine contributing factors for such variance in outcomes by data source. Additionally, such analyses for additional HVRP grantees could be helpful for determining if USDOL should shift to measuring employment outcomes for HVRP participants based on UI wage record data, as is the case in other USDOL programs (such as the WIA/WIOA program).

⁶⁵ As noted earlier in Chapter 3, beginning July 15, 2016, VETS required HVRP grantees to co-enroll HVRP participants into Wagner-Peyser Act-funded Employment Service (ES), a JVSF-funded DVOP service, or WIOA Title I-funded service (such as WIOA title I services for adults or dislocated workers), according to the service strategy and timeline outlined in each individual service plan (see Program Letter No 03-16 for additional details). Although reporting requirements have not yet been finalized, co-enrollment into these programs would likely necessitate collection of SSN on new HVRP participants so that pre-program and post-program quarterly earnings could be obtained for participants. The collection of SSN would contribute to future evaluation efforts by facilitating matching of HVRP participants to pre-program and post-program UI wage record data. Additionally, required changes to data collected on WIOA participants and other participants to capture whether a WIOA participant is an HVRP participant and the HVRP grantee number also would be useful in future evaluation efforts.

Program Performance and Evaluation:

- ❖ **Consider eliminating the requirement that HVRP grantees submit Corrective Action Plans (CAPs) for exceeding performance standards.** Grantee administrators are unsure why they must submit a “corrective” action plan if their HVRP program is performing above program standards on program goals. Grantee administrators indicated that preparing a CAP each quarter is time-consuming and sometimes leads to confusion within the grantee organization’s leadership as to why the federal government requires the grantee to submit a “corrective” action plan if the HVRP program is performing at or above program standards on program goals. Such a requirement may also have the unintended consequence of grantees not enrolling or delaying the enrollment of homeless veterans in HVRP, or delaying recording of job placements/retentions for a given quarter to avoid breaching a given performance standard (i.e., automatically tripping the need to submit a CAP).

- ❖ **Consider eliminating requirements that grantees exit participants at the end of each program year, allowing for carryover of participants (as long as the grantee’s contract and period of performance continues into the next program year).** The requirement to exit HVRP participants at the end of each program year can influence when and if grantees enroll HVRP participants during the program year: HVRP grantees are often reluctant to enroll new participants into HVRP in the final quarter (and even the 3rd quarter) for fear that they will be unable to record a job placement for the individual prior to the close of the program year. Additionally, such a requirement can result in reluctance on the part of HVRP grantees to enroll homeless veterans that are in need of longer-term and more substantive education or training services that could delay job placement beyond the end of the program year. Finally, to the extent that participants are reenrolled in the next program year, the current system leads to double-counting the number of individuals enrolled in the program over time (e.g., the same individual can be counted as an enrollment in two consecutive program years).⁶⁶

- ❖ **Consider options for future evaluations to determine HVRP participant outcomes and potential impacts.** Randomized controlled trials (RCTs) represent the gold standard for evaluating programs because they virtually guarantee any differences in outcomes between the treatment and control groups are due to the intervention, and the results are likely to be convincing to policy officials. However, based on input from VETS/CEO and Technical Work Group (TWG) members, implementation of an RCT of the HVRP program involving outright denial of services (i.e., random assignment to a control group that would be denied

⁶⁶ A TWG member observed in response to this alternative: “...it is important to recognize that the alternative, though likely preferable, also would be expected to generate some (different) strategic responses. When grantees have more control over the program year in which participants exit, and when the performance standards are non-linear, as with meeting a threshold, grantees have a clear incentive to carefully time program exit so that participants count against the program year performance in which they do the most good or the least harm. Evidence of exactly such behavior was observed in the context of JTPA. Also, the alternative set-up will likely require some rules about mandatory program exit when no services have been received for some specified period.”

HVRP services in order to measure the overall impact of HVRP services) would not be likely to gain approval given expected objections to such denial of services to veterans by USDOL, Congress, and veterans' organizations. It may be possible to conduct smaller-scale experimental studies that involve randomization of HVRP grantees or participants, as long as control group members are not denied basic HVRP-funded services. For example, such RCT studies could be aimed at better understanding marginal enhancements to existing HVRP services or introduction of new strategies or services. If a net impact evaluation proves impossible or infeasible, an outcome evaluation could be initiated to better understand how HVRP participant outcomes (including measures of short/long-term employment/earnings, self-sufficiency, and housing conditions/chronic homelessness) vary by participant subgroups, grantee characteristics, and labor market characteristics.

Program Funding:

- ❖ **Consider eliminating different grant ceilings for urban and non-urban grants.** The varying grant ceilings for urban and non-urban grants (set at \$300,000 and \$200,000, respectively) appear somewhat arbitrary, and may not reflect either the number of homeless veterans in need of services within a particular service area or the costs of serving each homeless individual. The non-urban grants visited as part of this study served multi-county areas or specific regions of a state, and as a result, may have as many or more homeless veterans in need of services as urban grants that serve a portion of a metropolitan area or share a service area with one or more other HVRP grantees. Further, non-urban HVRP grantees are expected to provide the same types of services as those in urban areas and may, in fact, have fewer potential partners in their service areas to which it is possible to refer participants for services. Additionally, on a per-participant basis it may be even more costly to recruit and serve HVRP participants in rural areas. For example, higher transportation costs and the lack of other programs to provide supportive services may result in higher program costs in rural areas (e.g., there may not be a clothing closet or food pantry available within the service area to which the homeless veteran can be referred).

Program Coordination:

- ❖ **Explore the relationship between the federal/state/local goals of eliminating homelessness among veterans (through immediate and early placement of homeless veterans into permanent housing) and potential implications for HVRP grantee recruitment and job placement/retention.** Several grantees indicated efforts to permanently house veterans rapidly (to eliminate veteran homelessness) could dry up the eligible pool of homeless veterans for enrollment in HVRP. Some grantees questioned whether rapid provision of permanent housing could reduce incentives (and be counterproductive) in terms of homeless veterans enhancing their employability, undertaking the time-consuming and arduous job search process, and in confronting and overcoming other challenges that contributed to chronic homelessness. Another option would be to consider relaxing the eligibility criteria for HVRP so that grantees could serve formerly

homeless but permanently housed veterans in need of employment and training services to promote long-term self-sufficiency and/or prevent a return to homelessness.

- ❖ **Consider coordinating HVRP grants with other funding sources targeted on assisting homeless veterans.** Grant administrators and staff interviewed for this study observed that homeless veterans served by HVRP typically also require housing and supportive services for substance abuse, mental health, and other issues. Grants for providing these three sets of services are awarded independently by VA, HUD, and DOL. Some grant administrators observed that they could potentially provide a better mix of services if they had grants covering all three types of services. This belief is not universally shared, however, and some sites have expressed no concern about having to reach out to other organizations to provide services that they cannot provide. A future study could be launched to analyze how outcomes vary depending on whether the HVRP program controls the resources for housing and supportive services. This type of study could be undertaken either using randomized controlled trials (RCT) or a non-experimental approach. For example, under the RCT approach, the awards for several major programs assisting veterans and their families such as HVRP, Supportive Services for Veteran Families (SSVF), and the Grant and Per Diem Program would be awarded in two ways. Some of the awards would be for all three programs, but others would follow the current approach of making individual awards. If a non-experimental approach is used, then analyses would be conducted to see if outcomes are higher for grantees with multiple awards compared to grantees that only have HVRP awards.

APPENDICES

APPENDIX A:
STUDY REFERENCES

APPENDIX A: STUDY REFERENCES

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APPENDIX B:
SITE VISIT SUMMARIES

Homeless Veterans Reintegration Program (HVRP) Project Summary
New Directions, Los Angeles, CA

| HVRP Program at a Glance | |
|--|--|
| HVRP Program Name | Homeless Veterans Reintegration Project (HVRP) |
| Organization | New Directions |
| Type of Organization | 501(c)(3) Non-profit |
| HVRP Service Area | Los Angeles, CA |
| HVRP Current Grant Start Date | 7/1/2012 |
| Grant Award for Current Year | \$300,000 |
| Year of Initial HVRP Funding | 2003 |
| Type of HVRP Grant | Urban |
| Target Population | Not targeted |
| # HVRP Enrollments (2014) | 80 |
| % Placed in Jobs (2014) | 97.5% |
| Average Wage at Placement (2014) | \$12.89 |
| % Entered Employment 1st Quarter (2014) | 65.4% |
| % Still Employed 180 Days After Employment Entry (2014) | 5.9% |
| Cost per Placement (2014) | \$3,846.15 |

Founded by a homeless veteran, New Directions was named after the drug treatment program that the founder believed saved his life. Shortly after New Directions was established in 1992, the Veterans Administration (VA), under the authority of Title V of the McKinney Act, leased New Directions a 60,000 square foot building on the Los Angeles VA campus that could be converted to a homeless facility. An HVRP grantee since 2003, New Directions provides homeless veterans in the Los Angeles area with housing, supportive services, and employment assistance to promote long-term self-sufficiency.

OUTREACH AND RECRUITMENT PROCESS

New Directions is located on the VA campus, therefore, most referrals for shelter services come directly from the VA (this is generally the pool from which most HVRP participants are selected). As a result, additional outreach and recruitment efforts are limited. Staff attend Stand-down events, Job Fairs, and other community activities designed to assist the homeless, but recruitment is generally not the objective. They will take referrals from other organizations, but these individuals must be determined eligible by the VA before being housed at the shelter since the VA provides funding for beds at the facility. Unlike the HVRP program which requires only an “other than a dishonorable discharge” to participate, the VA requires an honorable discharge for eligibility. Consequently, all residents in the shelter must possess an honorable discharge. VA staff also conduct mental and physical assessments. Other necessary documentation includes a valid ID and Social Security card.

INTAKE AND ASSESSMENT PROCESS

Potential participants are generally referred to New Directions for housing and are provided beds on site, if available. During this process, an Individual Service Plan is developed, which addresses all client needs (e.g., legal, medical, and psychological), and also includes employment/vocation goals. Participants indicating an interest in employment may have action steps established, such as completing assessments, job club, customer service classes, and job search. The customer service classes are designed to train participants for any kind of contact with customers in a work setting. The program is offered for 2.5 hours per week for 6 weeks. During this period, participants also develop a Goal Plan (or comprehensive services plan). Participants who appear suitable for enrollment in HVRP are interviewed

to determine interest, deterrents to employment, skills, and job readiness. An assessment tool from McGraw Hill is available but because participants are generally not interested in additional formal education few take these tests. Up until this point, participants are considered to be in Phase 1 of the shelter's program (and not yet enrolled in HVRP). Job developers and case managers review the pool of participants to determine which individuals are ready for job assistance and placement services, and HVRP enrollment. Those individuals selected for enrollment move on to Phase 2, which might include some type of short-term training to obtain a credential, job search skills, or resume preparation. Participants may also receive job development assistance, and be referred to the AJC to work with staff there or to look at job openings. Once the participant obtains a job, they move into Phase 3, which involves continued support, including working with the employer or participant to resolve any issues that may arise. Phase 4 is the mandatory tracking for HVRP follow-up outcomes, plus general follow-up with clients to help ensure job retention. Veterans can be considered for enrollment in HVRP at any time after the completion of the customer service training as long as barriers initially identified as being serious enough to hinder job placement are either eliminated, or under control.

OVERVIEW OF THE HVRP SERVICES

Education and Training Services. New Directions residents are enrolled in customer service training (described above) and are also afforded the opportunity to participate in computer training on-site. There is also some short-term training provided in security operations, as well as general custodial and health facility custodial work. Participants who complete security and health facility custodial training receive certificates which, according to staff, are almost essential to obtain employment in those fields. The health facility custodial program, which is specialized, provides training in dealing with medical waste. Very few HVRP participants are referred to the AJC for WIA-financed training. According to staff, most of the applicants are not in a position to take advantage of any significant educational and training opportunities. However, if there is interest, New Directions staff will help individuals identify appropriate programs, and provide information on the GI Bill or Pell grants that may be needed to finance education or training. The HVRP program is primarily a work readiness/job search assistance program, so individuals interested in long-term education or training may not be suitable for HVRP enrollment.

Employment and Job Retention Services. The New Directions program has job developers on staff that work one-on-one with HVRP participants. Additionally, participants may visit the American Job Center or DVOP/LVER for job leads and job search assistance. New Directions staff contact participants/employers at 30, 60, 90, 180, and 270 days after placement to check on job retention, as well as to troubleshoot any issues and determine whether the employer has additional job openings. One retention challenge cited by staff is that some participants may appear to be job ready and interested in work, but once on the job, old habits return and the desire to be free from structure may result in them walking off the job or not showing up work. Job loss can also be a problem for New Directions job developers, as employers can become reluctant to take additional program referrals if earlier referrals do not work out.

Transitional and Permanent Housing Assistance. At the time of HVRP enrollment, all participants are housed in New Directions' shelter. Once homeless veterans are enrolled in HVRP, efforts are made to assist them in identifying permanent housing. Most staff, however, felt that efforts to identify permanent housing should not be undertaken until the HVRP participant had received life skills training, demonstrated commitment to the program, and spent considerable time on the job. Once employed, participants may stay in the New Directions' shelter for up to two years. When HVRP participants secure permanent housing, they are encouraged to continue to participate in weekly meetings and other events at New Directions, as well as to share their experiences with other HVRP participants.

Supportive and Other Services. HVRP funds are used for the following supportive services: bus/subway passes; work clothing and tools; license fees; and to reimburse costs of lunches during the job

search and for a short period after obtaining a job. Other support service needs can be considered on a case-by-case basis and HVRP participants may be referred to other human service agencies for additional supports that are not covered by the HVRP program.

KEY PARTNERSHIPS

The VA is a key partner for the New Directions HVRP, providing virtually all referrals to the program, as well as funding for housing of HVRP participants and additional array of services to which homeless veterans can be referred. The VA must approve all HVRP participants in order for them to receive GPD funding for transitional housing provided by New Directions. HUD also provides funding for the maintenance of the New Directions shelter.

LESSONS LEARNED AND ACCOMPLISHMENTS

According to staff, the ability of this program to provide on-site transitional housing has been beneficial, as it provides the team with the opportunity to assess homeless veterans over a longer period to ensure that they are suitable for enrollment in HVRP (e.g., staff have an opportunity to determine if the homeless veteran is ready and willing to work). This arrangement also provides a steady stream of eligible veterans for HVRP assessment and enrollment. Staff noted there are challenges associated with finding employment for the HVRP participants with criminal records (especially felonies), requiring considerably more time and effort on the part of job developers to identify employers willing and able to hire ex-offenders and working closely with employers to convince them to consider ex-offenders for specific job openings. One important lesson reported by staff is that it is often more effective to market HVRP to employers as a program serving veterans, as opposed to a program serving homeless veterans. Employers often are receptive to hiring veterans, but may have preconceived notions about homelessness and be reluctant to hire homeless individuals. In terms of accomplishments, New Directions administrations note that the HVRP program has consistently met grant goals for job placement, retention, and housing-related outcomes. Staff believe that HVRP has long-term benefits for the homeless veterans served in terms of helping to get them back on their feet, securing jobs and permanent housing, and reintegrated program participants back into mainstream society.

**Homeless Veterans Reintegration Program (HVRP) Project Summary:
Salvation Army Bell Shelter, Bell, California**

| HVRP Program at a Glance | |
|--|-------------------------------------|
| HVRP Program Name | HVRP |
| Organization | Salvation Army |
| Type of Organization | 501 (c)(3) Non-profit - Faith Based |
| HVRP Service Area | City and County of Los Angeles |
| HVRP Current Grant Start Date | 7/1/2014 |
| Grant Award for Current Year | \$300,000 |
| Year of Initial HVRP Funding | 2001 |
| Type of HVRP Grant | Urban |
| Target Population | None Identified |
| # HVRP Enrollments (2014) | 179 |
| % Placed in Jobs (2014) | 68.2% |
| Average Wage at Placement (2014) | \$12.71 |
| % Entered Employment 1st Quarter (2014) | 72.1% |
| % Still Employed 180 Days After Employment Entry (2014) | 31.8% |
| Cost per Placement (2014) | \$2,459.02 |

The Salvation Army Bell Shelter is located in a converted 40,000 square foot hangar, formerly used as a U.S. Army Air Base, in the city of Bell. It is the only program of its kind in California to fulfill a key objective of the 1987 Stewart B. McKinney Homeless Assistance Act, which encouraged the use of vacant Federal facilities as homeless shelters. The largest homeless shelter west of the Mississippi, the Bell Shelter operates a comprehensive program that offers transitional care for up to 350 homeless men and women. Services provided include: emergency shelter; transitional housing; substance abuse rehabilitation; case management; counseling; on-site health care and medical referrals; HIV/AIDS education; ESL classes; computer training; vocational assistance; job referrals; and life skills classes. The Bell Shelter's HVRP program provides employment services to eligible homeless veterans at the shelter, as well those from shelters operated by other Salvation Army facilities in the area. They may also accept referrals from other area shelters as long as space is available.

OUTREACH AND RECRUITMENT PROCESS

Because there are homeless veterans already residing in the Bell Shelter and Hope Harbor (the other Salvation Army shelter in downtown Los Angeles) and because direct referrals are made by the VA, extensive outreach activities are not critical to meeting HVRP enrollment targets. Salvation Army team members visit soup kitchens, participate in homeless veteran events, and generally support community efforts to aid both the general homeless populations as well as veterans. However, because there is a "waiting period" before veterans are enrolled in the program (described below), encouraging walk-in applicants, or engaging in general street recruitment would be counterproductive. The Long Beach VA occasionally refers individuals who are potentially eligible for HVRP to the Bell shelter's program.

INTAKE AND ASSESSMENT PROCESS

The Bell Shelter team is selective in terms of its acceptance of new program enrollees. During the current year, team members conducted assessments for over 300 potentially-eligible participants, but ultimately enrolled 187 new HVRP participants. In addition to providing the required program documentation (i.e., DD214, referral letters from the VA for beds, medical and psychiatric screening), the participants must have a desire to work and be sufficiently substance-free to participate in training and be referred to

employers. The Bell Shelter operates a four-phase program. (1) The individual must be living in transitional housing, preferably on-site in the shelter for 6 weeks to 90 days during which time they focus on building up stamina through good nutrition and abstinence from drugs and alcohol. Participants work with a caseworker to develop a short-term plan to address medical and psychological barriers to employment. (2) During the second phase, which can last between 6 and 12 weeks, the participant is enrolled in HVRP and works with a caseworker to develop an employment and training Individual Employment Plan (IEP), which includes specific activities (e.g., training, job search activities) to enhance employability. (3) Next, with the assistance of staff, DVOPs, and LVERs, the participants engage in efforts to obtain a job (with a target wage of \$11 or more per hour. (4) Once placed in a job, the participant continues to work closely with the case manager to address any job-related issues, ensure job retention, and transition the individual to permanent housing.

OVERVIEW OF THE HVRP SERVICES

Education and Training Services – Bell Shelter has agreements with a number of organizations that either provide training directly, or arrange for training through other providers. These include WIA/WIOA programs (although resources are limited), the LA Adult Education programs, community colleges, and private schools. HVRP resources are not used to cover the costs of education and training, as the veterans normally have access to GI bill funding or other training monies. One of the more interesting partnerships that Bell has with a training provider is with Dolphin Trucking. The shelter provides Dolphin with a classroom and driving space for their big rig trucks, in exchange for tuition-free training for residents of the shelter. For some education and training programs, arrangements can be made to reduce tuition for veterans who already have some resources for tuition. Any participant indicating an interest in training is provided counseling through the AJC, the case managers at the shelter, or HVRP staff.

Employment and Job Retention Services. To prepare participants for employment, HVRP provides a number of employment-related services. For example, job readiness workshops, which include instruction on job interview techniques, resume preparation, and soft skills training, are offered every Thursday at the Bell Shelter. A similar program is offered at Hope Harbor by Chrysalis, a non-profit organization that provides job readiness instruction, job search, transitional jobs, and post-employment follow-up. The organization utilizes volunteers, and relies on contributions and income derived from Chrysalis Enterprises, a services operation utilizing homeless workers. Assistance with career planning is provided on an individual basis during sessions with the employment counselor. Job development and outreach to employers is conducted through direct cold calls, as well as review and follow-up of help-wanted solicitations and on-line listings. Job developers also coordinate placement efforts and cooperate with DVOPs. Staff estimates that they refer at least 40 percent of HVRP participants to the AJC for Wagner-Peyser registration and/or possible WIA enrollment. Staff also work closely with employers to provide information about job openings. Job Fairs are also viewed as an opportunity to identify employment opportunities for their clients. The shelter also has several non-binding agreements with employers that indicate a willingness to consider referrals from the HVRP program. During the enrollment period, participants are asked to sign a form authorizing the program to make contact with employers in order to verify employment. Staff first contacts employed participants to request a pay stub. (If the participant complies, he/she may receive a gas card or some other type of transportation assistance). If staff cannot confirm employment with participants, they contact employers at 30, 60, 90, 180, and 270 days after placement to check on job retention. Clients can access supportive service funds during this period if there is a need for work clothing or transportation. In addition, if some type of short-term training becomes necessary to keep a job, the program could consider supporting that request.

Transitional and Permanent Housing Assistance. Enrollment in HVRP does not occur until the participant has completed at least one phase of the shelter's assessment programs (see above). At the time of enrollment, participants have typically been placed in some type of housing (usually at the Bell or

Hope Harbor Shelters). Once the individual obtains a job, he/she can attempt to secure permanent housing. Staff feel that moving into permanent housing should not be encouraged until the participant has a steady job. Participants can be considered for transitional stand-alone housing on the Bell property as a stepping-stone to independent living. Clients are also counseled about housing either by shelter employees or other social service organizations.

Supportive and Other Services. Although the majority of the HVRP budget is devoted to providing direct assistance to clients, the program also funds some supportive services, including, bus/subway passes, work clothing and tools, license fees, and costs of lunches during the job search and for a short period after obtaining a job.

KEY PARTNERSHIPS

The VA is a key partner in the delivery of services to homeless veterans. In addition to being the primary source of referrals to the shelter, the VA also provides funding (through the Grant and Per Diem program [GPD]) for 95 beds set aside for veterans in the shelter. They also provide transportation to the VA Center for mental, physical and substance abuse assistance, and some support services monies through the Support Services for Veterans Families (SSVF) program. While referral by the VA to the shelter does not mean automatic enrollment in HVRP, many of the enrollees come from this source. Hope Harbor, another Salvation Army shelter supported by VA GPD funding, houses 50 veterans. As described above, the shelter also has a partnership with Dolphin Trucking, a for-profit school that trains commercial truck drivers. In exchange for classrooms and space to drive big rig trucks, Dolphin waives all or part of the tuition for shelter residents (depending on whether the participant has access to scholarship funds). Training is provided on the Salvation Army property adjacent to the Bell Shelter. The HVRP program at the Bell Shelter has a number of non-binding agreements with other organizations to identify ways to partner to provide services to veterans in this program.

LESSONS LEARNED AND ACCOMPLISHMENTS

Because the Bell Shelter has been operating this program for 14 years, many of the issues faced in serving this population have been addressed by ongoing changes in program design. The team has also learned to recognize that certain circumstances and characteristics of enrollees may affect program operations and their ability to deliver services. For example, if many homeless veterans with felony records are enrolled, placement will be challenging. Staff also felt that the presence of on-site housing for veterans is a huge advantage for program operations. When enrollees are housed on-site, the grantee is able to keep track of the enrollees' progress and problems, and they can easily conduct follow-up. They are also able to intercede early in the process if the participants are having problems. Some staff felt that moving veterans into permanent housing too soon may be a disservice, as he/she may not be ready to undertake the demands of self-sufficiency.

**Homeless Veterans Reintegration Program (HVRP) Project Summary:
The Workplace, Inc., Bridgeport, CT**

| HVRP Program at a Glance | |
|--|---|
| HVRP Program Name | The Workplace Homeless Veterans Reintegration Project (HVRP) |
| Organization | The Workplace, Inc. [Southwest Connecticut's Regional Workforce Investment Board] |
| Type of Organization | 501-c-3 (Workforce Investment Board) |
| HVRP Service Area | Southwest Connecticut (Greater Bridgeport and Greater New Haven, CT) |
| HVRP Current Grant Start Date | 7/1/2011 |
| Grant Award for Current Year | \$299,670 |
| Year of Initial HVRP Funding | 2006 |
| Type of HVRP Grant | Urban |
| Target Population | Not Targeted (All Homeless Veterans) |
| # HVRP Enrollments (2014) | 79 |
| % Placed in Jobs (2014) | 60.8% |
| Average Wage at Placement (2014) | \$11.61 |
| % Entered Employment 1st Quarter (2014) | 75% |
| % Still Employed 180 Days After Employment Entry (2014) | 33.3% |
| Cost per Placement (2014) | \$6,243.13 |

Workplace, Inc., Southwest Connecticut's Workforce Investment Board (WIB), administers workforce development funds and coordinates providers of job training and education programs, including the American Job Centers (referred to as CTWorks One-Stop Career Centers). The Workplace, Inc. oversees the HVRP grant and subcontracts recruitment/enrollment and most direct client services funded by HVRP to two transitional housing organizations – Columbus House, Inc. and Home for the Brave (HFTB).

OUTREACH AND RECRUITMENT PROCESS

About 90 percent of HVRP participants are direct referrals from VA Connecticut Health Care System to two HVRP transitional housing agencies -- Columbus House, Inc. and Home for the Brave – that are subcontracted to provide HVRP funded-services. The balance of HVRP participants are walk-ins to Workplace or other emergency/transitional housing facilities, the Workplace's American Job Center (AJC), and referrals from DVOPS, veterans' organizations, and other sources. The Workplace, Inc. has brochures/flyers describing the program, but generally counts on direct referrals from VA CT Health Care System. The Workplace, Inc. has not encountered major challenges to recruitment; the main constraint is that HVRP enrollments are limited by the number of available beds at two subcontracted transitional facilities and turnover of those beds. Additionally, some referrals to transitional housing facilities are not ready for work or may be reluctant to pursue employment because of potential loss of disability benefits (including SSI, SSDI and VA benefits).

INTAKE AND ASSESSMENT PROCESS

About half of those assessed during the intake process are not subsequently enrolled, mainly because the homeless veteran (residing at one of the two transitional facilities) is determined not ready or willing to work. During the intake interview, an HVRP vocational specialist reviews background documentation on the individual provided by the VA (including a bio-psychosocial report) and completes HVRP intake

forms. A focus of this initial interview is to determine if the individual is suitable for HVRP and is interested and able to pursue work. Additionally, a determination is made concerning whether the individual needs occupational training. Participants take a computer literacy test and may be referred to the Workplace's AJC for more extensive assessment, including taking the KeyTrain skill development for WorkKeys (an interactive web-based assessment and learning tool). HVRP participants work closely with HVRP staff at HFTB and Columbus House on development of an Individual Employment Plan (IEP) to guide service delivery and establish a clear set of attainable goals.

OVERVIEW OF THE HVRP SERVICES

Education and Training Services. If a HVRP participant does not pass the computer literacy test, he/she is required to attend a weekly (Microsoft) computer skills training course. A small proportion of the HVRP enrollees are referred to the AJC for WIA ITAs for tuition and other assistance to obtain occupational training, generally at community colleges (e.g., Housatonic Community College) or other training providers. HVRP enrollees are also encouraged to use (and helped to access) GI Bill or Pell grants to finance education or training.

Employment and Job Retention Services. After intake, unemployed HVRP participants are required to attend pre-employment workshop meetings during which Home for the Brave and Columbus House staff lead discussions and activities focused on acquiring and sustaining employment. Vocational specialists employed at both subcontractor sites meet weekly with participants to discuss job search progress and provide job leads, as well as help with the development of resumes and interview skills. At Home for the Brave, unemployed HVRP participants are required to submit a job search log with five job search contacts weekly. Many HVRP participants are referred to the Workplace's AJC, where they meet with DVOPs and other AJC staff for job search assistance, referral to WIA/WIOA, and referral to other support services. Once HVRP participants become employed, vocational specialists continue to contact participants monthly (for a 9-month follow-up period) to monitor job retention and to collect VOPAR data. Vocational specialists also engage employers to discuss participant job performance, to help identify and address barriers to retaining employment, and if necessary, to collect VOPAR data.

Transitional and Permanent Housing Assistance. All HVRP participants have been referred to one of the two transitional housing providers (Columbus House or HFTB) prior to enrollment in HVRP – and hence, they are in transitional housing at the time of HVRP enrollment. Beds at these two transitional facilities are available to veterans for up to two years as long as they meet the standards and requirements of the facilities. Participants work with HFTB and Columbus House staff to identify and pursue permanent housing on an on-going basis, and may also be referred to the VA Supportive Services for Veterans Families (SSVF) or HUD-Veterans Affairs Supportive Housing (HUD-VASH) programs for help in securing permanent housing and other supportive services.

Supportive and Other Services. HVRP funds are used for a variety of supportive services, such as purchasing participants' bus/rail passes, work clothing, and tools, and to pay licensure fees (e.g., most often commercial drivers' licenses/CDLs). The Workplace's AJC has a food and clothing pantry that may be accessed by HVRP members as well. Melville Foundation funding (a source of foundation funding to the Workplace, Inc.) may be used to help offset the cost of incidentals. Often HVRP participants work with DVOPs or WIA staff located at the Workplace's AJC to obtain help or referrals for supportive services; they may also obtain assistance with supportive services from the VA or other veterans services organizations.

KEY PARTNERSHIPS

Four key partnerships were identified at this HVRP grantee site, two of which were sub-contractors, and two of which were Connecticut government agencies:

- *Home for the Brave (HFTB) and Columbus House.* These two sub-contractors are non-profits that focus on providing transitional housing, and are allocated almost \$170,000 of HVRP funds (HFTB - \$128,403, Columbus House - \$40,000). In addition to transitional housing, these partners provide the bulk of HVRP participant services, including case management; job readiness, placement, and retention assistance; help with securing permanent housing; and referrals for education, training, housing, and supportive services.
- *VA Connecticut Health Care System.* The VA CT Health Care System provides approximately 90 percent of HVRP referrals to this grantee. Additionally, this agency must approve all HVRP participants as eligible to receive subsidized transitional housing at HFTB and Columbus House.
- *Connecticut Department of Labor (CTDOL).* The Connecticut Department of Labor's Employment Service (including DVOPs) for the Bridgeport area are located in the same building as the Workplace's AJC. CTDOL connects HVRP connects participants to DVOPs and provides other Wagner-Peyser services, such as assessment, counseling, and job placement assistance for HVRP participants.

LESSONS LEARNED AND ACCOMPLISHMENTS

The HVRP grant has provided the Workplace, Inc. with an opportunity to serve homeless veterans and connect them with an array of services offered by the workforce development system. The grant has also enabled the Workplace, Inc. to strengthen linkages with the VA-CT Health Care System, which both provides referrals of homeless veterans to HVRP and health services to veterans. The two subcontracted transitional housing providers indicated that this grant allowed them to provide a fuller array of workforce development services, and particularly assist HVRP participants in obtaining and retaining jobs. The grantee also believed that partnering with subcontractors that already had experience working with homeless veterans helped to increase program success. The grantee believed that job placement was more likely if vocational specialists were creative in identifying positions, and worked hard to explain skill transferability to employers and HVRP participants. Continued support of participants by staff was important in ensuring job retention, and in overcoming the numerous barriers that homeless veterans faced in securing and maintaining permanent housing.

Homeless Veterans Reintegration Program (HVRP) Project Summary
Mary Hall Freedom House, Georgia

| HVRP Program at a Glance | |
|--|---|
| HVRP Program Name | TROOPS (Training, Reintegration, Outreach, Opportunity, and Program Services) |
| Organization | Mary Hall Freedom House |
| Type of Organization | 501 (c)(3) Non-profit |
| HVRP Service Area | Fulton County and Congressional Districts 5 & 6 Atlanta |
| HVRP Current Grant Start Date | 7/1/2014 |
| Grant Award for Current Year | \$235,000 |
| Year of Initial HVRP Funding | 2013 |
| Type of HVRP Grant | Urban |
| Target Population | Female and Male Head of Household (single with children under 18) |
| # HVRP Enrollments (2014) | 72 |
| % Placed in Jobs (2014) | 80.6% |
| Average Wage at Placement (2014) | \$10.17 |
| % Entered Employment 1st Quarter (2014) | 67.2% |
| % Still Employed 180 Days After Employment Entry (2014) | 15.4% |
| Cost per Placement (2014) | \$3,105.89 |

Mary Hall Freedom House is a non-profit provider of services for single women and women with children needing physical and mental health treatment, addiction recovery assistance, and housing and support services in the Atlanta area. The agency operates both outpatient and residential programs. Mary Hall Freedom House operates transitional and permanent housing for persons in addiction recovery, individuals diagnosed with HIV/AIDS, and those suffering homelessness. Individuals and families are provided basic necessities along with housing. To ensure that women are able to break the cycle of poverty, in addition to these housing and treatment programs, the grantee also provides employment readiness programs, GED classes, vocational training, and transportation assistance, as well as life skills guidance, such as shopping, banking, and housekeeping instruction. Family counseling, parenting classes, childcare, and after school programs are also offered. In 2011, Mary Hall Freedom House partnered with the United States Department of Veterans Affairs and established two-year transitional housing to help homeless veterans become self-sufficient. Mary Hall partnered with Rooms to Go (retail furniture), which provided furnishings for 37 women and 17 families. Primary operating funding comes from federal, state, and local grants.

OUTREACH AND RECRUITMENT PROCESS

Outreach efforts consist primarily of spreading information about the program throughout the community, and targeting other shelters, food pantries, community organizations, and groups serving the homeless. Some staff attempt to meet with homeless persons on the streets, in parks, and in other areas where homeless individuals congregate. The Community Resource and Referral Center (CRRC), operated by the VA, is a major source of referrals for HVRP-funded services. CRRC is housed on a former military base (transferred to the VA in 2012) and currently contains six buildings on 10 acres. Ultimately, all the regional VA medical services will relocate to this site, and thus, it will become a natural referral point for homeless veterans. CRRC has a domiciliary and a number of human service organizations operating on-

site, with additional letters of intent to operate programs to assist veterans from other community, state, and federal agencies. This grantee maintains an office a CRRC, and as female veterans come to this campus for health or other services, they may be referred to the HVRP staff member on the premises, or to the Mary Hall facility for possible enrollment in HVRP.

INTAKE AND ASSESSMENT PROCESS

Generally, new recruits for Mary Hall's HVRP initiative are referred by other organizations (coming to the program with appointments) or as a result of Mary Hall's outreach efforts. A Pre-Screening Form often accompanies referrals, or may be completed by the case manager during the initial meeting, at which time some additional information about the client is collected on the TROOPS Application form. During this process, additional information is gathered as well (i.e., DD214, GA driver's license or ID card, proof of homelessness). Staff then conducts an assessment interview, during which the case manager gathers additional information about the individual such as disability status, VA claims, housing needs, and financial status. A basic overview of the TROOPS Program is provided, detailing objectives of the program, and the services and support to be provided (including improving skills, occupational training, job search assistance, housing, and access to childcare and transportation). Participants must be immediately work-ready. Program staff rarely receive referrals of homeless veterans with active substance abuse problems, though some homeless veterans who has completed treatment and been substance free for at least 7 months are considered for HVRP enrollment. If the veteran wants to work, and is either job ready or does not have serious barriers to employment, she/he is assigned a Vocational Training Coach and enrolled in HVRP. The Coach answers questions, and goes over the expectations that the program has in terms of client performance (e.g., maintaining an employment search log and dressing appropriately for job interviews). The Vocational Coach also completes a Client Assessment Form, which includes documentation and assessments of the individual's literacy, job skills, life skills, interests, and job preferences, along with identifying specific barriers to employment. All this information is entered into the case management/participant tracking system, Effort to Outcome (ETO), in order to track participant needs and progress through enrollment in HVRP. Currently, a web-based crosswalk is used to translate military skills into those appropriate for civilian occupations.

OVERVIEW OF THE HVRP SERVICES

Education and Training Services. Most of those enrolled in HVRP engaged in an employment readiness program component, which includes activities such as resume preparation, interviewing skills, basic computer literacy, use of technology, and job retentions skills. Much of this employment readiness training is provided by Coca Cola (pro bono) in their academy or by Every Woman Works (EWW), another CBO. Most HVRP participants are not in a position to enroll in longer-term educational and training opportunities because of their immediate need for employment. Having long-term educational goals is not discouraged, but the clients are encouraged to relate these goals to realistic funding mechanisms, such as savings, the GI Bill, Pell grants, and working part-time-while attending school. Any occupational training is paid for with other resources, and is generally part-time. If the training is very short term (such as to take a position as a security guard), it may be supported with HVRP funding. DVOPs visit the Mary Hall facility to make presentations to HVRP participants and connect participants to training resources. Clients are afforded the opportunity to get basic computer training on site as well as participate in job club activities.

Employment and Job Retention Services. The program has one-full time Veteran Employment Recruiter/trainer, two Veteran Employment Services Specialists, a Veteran Employment Services Manager (similar to a case manager), and a HR Career Development Director who provides part-time oversight. With this staff, they are able to provide some employment services, but they rely heavily on other services available in the area. Job readiness, interview preparation, soft skills, resume preparation, career planning, and job search and placement assistance are provided in house, by Coca Cola, and by the DVOPs. Job Placement, and job development were to have been supported under contracts with Urban

League and Every Woman Works in year one of the grant, but were some challenges encountered in early implementation or performance under these contracts. Now these functions are mostly performed by in-house staff and DVOPs. Job clubs/support groups used to be offered in-house, but now there are several programs that female veterans can attend offered by VA's Community Resource and Referral Center (CRRRC), Veterans Heart, and Women Veterans Interactive in Atlanta, which provides peer support and mentoring. Gift cards are provided to participants as long as they remain in contact with program staff. Amounts increase up to \$75 depending on how long they stay in touch after being placed.

Transitional and Permanent Housing Assistance. The grantee operates Elizabeth Place, a residential housing unit only available to single female veterans and female veterans with children. This is a transitional housing program designed with the flexibility to provide services to homeless women and women with children committed to investing two years in the program. There is space for 37 residents and 17 families. VA's SSVF program provides support for the housing units. In addition to this transitional housing program, Mary Hall also operates emergency housing in downtown Atlanta in the Trinity Church that is available to any homeless woman with or without children. Stays in the facility are limited to 90 days. Individuals may not remain in the center during the day. They are expected to be seeking employment or other long-term care. This center may house veterans but is not exclusively for veterans. Mary Hall also operates or finds and funds other housing units devoted to assisting women with disabilities, substance abuse, health issues, and long-term homelessness. They have one permanent housing unit for disabled women. It is difficult to identify the number of homeless that can be served given that several of the programs assist families but they have housing for at least 300.

Supportive and Other Services. Most of the HVRP budget is devoted to providing staff assistance to clients. Supportive service funds are allocated for childcare, bus/subway cards, gas cards, background screening, tools, fees, special work clothing, and special progress awards. These awards are made when clients complete components of the job readiness training programs.

KEY PARTNERSHIPS

Key partnerships are with the Veteran's Administration, Coca Cola Foundation, and Every Woman Works, as described above.

LESSONS LEARNED AND ACCOMPLISHMENTS

While there is no competition for homeless females, there is competition for homeless female veterans at this site. This is further exacerbated by the fact that many female veterans do not always self-identify as veterans, and shelter intake forms may not have this as an identifier on their intake forms. Grantee staff report that it is important to be able to identify mental health problems before veterans are enrolled so treatment can be offered, and that these individuals do not waste time participating in programs that may not be helpful. Enrolling individuals with mental health issues and then removing them from the program results in the individual experiencing unnecessary failures. Staff also feel that chronically homeless individuals, regardless of gender or military service, are hard to serve as they have become increasingly cynical over time, and may not invest or engage in the activities that will help them get jobs. Staff turnover at this site resulted in the need to re-establish connections and partnerships with other community organizations. Staff noted that it is critical to ensure that guidance provided to potential participants during the early stages of implementation is in writing. Despite the various problems experienced during the first year of the program, staff felt that they learned valuable lessons from those experiences. Staff recruitment and oversight has improved, and dependence on outside contractors has decreased.

**Homeless Veterans Reintegration Program (HVRP) Project Summary
Inner Voice, Chicago, Illinois**

| HVRP Program at a Glance | |
|--|--|
| HVRP Program Name | Homeless Veterans Reintegration Project (HVRP) |
| Organization | Inner Voice, Chicago, Illinois |
| Type of Organization | 501(c)(3) Non-profit |
| HVRP Service Area | Chicago |
| HVRP Current Grant Start Date | 7/1/2012 |
| Grant Award for Current Year | \$270,000 |
| Year of Initial HVRP Funding | 2003 |
| Type of HVRP Grant | Urban |
| Target Population | Not targeted |
| # HVRP Enrollments (2014) | 127 |
| % Placed in Jobs (2014) | 81.1% |
| Average Wage at Placement (2014) | \$11.42 |
| % Entered Employment 1st Quarter (2014) | 65.0% |
| % Still Employed 180 Days After Employment Entry (2014) | 26.9% |
| Cost per Placement (2014) | \$2,621.36 |

Inner Voice, a non-profit provider of services to the homeless in the metropolitan Chicago area, has been providing direct assistance to this population since 1984. They have always assisted veterans with housing, supportive services, and employment as part of their overall homeless assistance program, and have been a HVRP grantee since 2003. In addition to the services provided through the HVRP grant, as of July 1, 2014, Inner Voice also operated the Learning Center (Support Services Only grant), Family Regeneration Project, Chronic Homelessness Initiative, Eddie Beard Veterans' Transitional Housing Program, Pioneer House Transitional Housing Program, Rental Housing Support Grant, Veterans' Grant Per Diem (GPD), and their major assistance program, Continuum of Care. Funding for these activities is mostly provided by grants from the Department of Veterans Affairs, and the Department of Housing and Urban Development. In the year ending June 30, 2014, 72 percent of the organization's total budget was from government contracts and awards.

OUTREACH AND RECRUITMENT PROCESS

Inner Voice staff conduct outreach and recruitment through a variety of methods. Staff participate in homeless veterans' or veterans' gatherings such as job fairs, VA-sponsored meetings, veterans' service activities at the community college, and Stand down sessions. The program receives direct referrals from the VA, the Illinois Department of Employment Security's operation on site, the DVOP, and other partner organizations.

INTAKE AND ASSESSMENT PROCESS

Generally, potential HVRP participants are referred to the program by other organizations, or they come on their own as a result of hearing about the HVRP program as a result of Inner Voice's outreach efforts. If a veteran interested in HVRP is not already in the facility utilizing services from the One-Stop, an appointment is made for an initial meeting. A Pre-Assessment Form is completed during the initial meeting, at which time general information about client needs and desires are collected along with required forms and documentation, including a DD214, valid ID and Social Security Card, usually a referral letter from the VA or other organization in contact with homeless veterans, and a resume (note: a resume may also be completed or refined as part of the service process). During this initial meeting, it is

determined if the client needs immediate or long-term assistance before beginning the job search process, or concurrently with job search activities. The Pre-Assessment form is also utilized to refer clients to potential employers. Needs identified on the form include housing, medical, mental health services, credit counseling, educational opportunities, substance abuse services, vocational training, and domestic violence issues. If it is determined that the issues confronting the client are not severe enough to impede job search and employment, the client will be enrolled in the program and an Individual Development Plan will be completed. If the issues are severe, the client is asked to make appointments with the appropriate service providers and then return if, and when, the problems are resolved or under control.

OVERVIEW OF THE HVRP SERVICES

Education and Training Services. According to staff, most applicants are not in a position to take advantage of any significant educational and training opportunities; rather, these are individuals who need housing and money to live. Unless they can be assured of room, board, and living allowances, along with payment of tuition and school supplies, discussions regarding educational opportunities do not happen often. Clients are afforded the opportunity to get basic computer training on site, as well as participate in job club activities. There is short-term training provided in security operations, which results in receiving a certificate as a security guard.

Employment and Job Retention Services. The program team includes a case manager, a recruitment and placement specialist, and an employment relations and job development specialist. While each of these staff has a unique role, they all participate in aiding HVRP participants in obtaining and retaining employment. The employment opportunities may come directly to an Inner Voice staff member, or may result from calls from a community organization, most likely from the Illinois Department of Employment Security (located on the floor below) advising Inner Voice staff of suitable openings. The Inner Voice staff and DVOP are in constant communication and are jointly committed to assisting veterans. Some employers are also committed to the hiring of homeless veterans and willing to consider hiring homeless veterans with substantial barriers to employment, such as criminal records or prior drug and alcohol dependence. Because the homeless veteran population is urgently in need of work as a step toward becoming self-sufficient, the program views all employment opportunities as meaningful, and based on discussions with homeless veterans, have found that many homeless veterans are willing to work at almost any job in order to get a start.

Transitional and Permanent Housing Assistance. Transitional and permanent housing programs operate throughout the city, however, Inner Voice has direct control over only a small number of housing units or beds. Inner Voice's Eddie Beard Homeless Veterans Transitional Housing program, offering 16 transitional beds, gives priority for HVRP participants. If there are no vacancies at this facility, Inner Voice refers HVRP participants to a variety of other housing facilities throughout the city. In general, transitional housing can be found for homeless veterans once they are engaged with Inner Voice staff. One unique feature of the Inner Voice program is its relationship with a pool of property owners and managers that have exhibited a willingness to help homeless veterans to obtain transitional and permanent housing. The success of this relationship is dependent on two elements: the long-term relationship between the parties (agency and landlords) and the existence of case managers who provides a link between the homeless veteran and the landlord.

Supportive and Other Services. Inner Voice's HVRP program provides subway cards, work clothing, and some other types of special work clothing. The HVRP program can provide homeless veterans with gasoline cards (though not pay for automobile repairs). One challenge faced in obtaining support services is that Inner Voice's Support Services Only (SSO) grant was not renewed in 2014, as a result of a change in HUD priorities. When Inner Voice lost these funds, it affected the agency's ability to provide supportive services for homeless veterans to supplement services funded by the HVRP grant. Additionally, because HUD made significant overall cuts in SSO funding to other human service agencies

in Chicago meant that Inner Voice could not turn to other agencies for support service assistance for HVRP participants.

KEY PARTNERSHIPS

Key partnerships are with the Illinois Department of Employment Services, the Veteran's Administration, National Able Network, and the U.S. Department of Housing and Urban Development. Inner Voice receives grant funds from the VA and HUD, as well as referrals of homeless veterans. Additionally, Inner Voice staff refer HVRP participants to an array of VA and HUD programs for housing, health, and a range of other services.

LESSONS LEARNED AND ACCOMPLISHMENTS

Inner Voice staff felt that the location of HVRP program operations has a significant effect on the organization's ability to successfully provide services to the homeless veteran population. Inner Voice's administrative functions are housed in the same location as the National Able Network (NAN), which also operates an HVRP grant. Because Inner Voice also has a large number of other government grants, the organization decided to partially finance an Able staff member to provide support for program accounting functions. This co-location also allows the Executive Director of Inner Voice to consult and collaborate with NAN personnel. On the service delivery side, Inner Voice's HVRP staff are located on the 3rd floor of a building that houses a One-Stop Center that includes full-time WIA, Job Service, and Unemployment Insurance activities along with DVOP, Job Corp, and a myriad of other outstationed social service agency staff. This means that once homeless veterans have arrived at any of the building's reception points, they can be directed to an appropriate staff member to handle their immediate needs without traveling all over town. In the case of HVRP, the main focus is on stabilizing the housing situation of homeless veterans and concurrently assisting veterans in finding employment. If an HVRP grantee manages a housing program with available beds, job preparation/search activities can be initiated more quickly.

**Homeless Veterans Reintegration Program (HVRP) Project Summary:
Mountain Comprehensive Care Center, Prestonsburg, Kentucky**

| HVRP Program at a Glance | |
|--|--|
| HVRP Program Name | Homeless Veterans Reintegration Program (HVRP) |
| Organization | Mountain Comprehensive Care Center (MCCC) |
| Type of Organization | 501-c-3 Non-profit |
| HVRP Service Area | 33 Counties in Kentucky |
| HVRP Current Grant Period | 7/1/2014 |
| Grant Award for Current Year | \$162,400 |
| Year of Initial HVRP Funding | 2013 |
| Type of HVRP Grant | Rural |
| Target Population | Not Targeted (All Homeless Veterans) |
| # HVRP Enrollments (2014) | 76 |
| % Placed in Jobs (2014) | 47.4% |
| Average Wage at Placement (2014) | \$8.98 |
| % Entered Employment 1st Quarter (2014) | 69.4% |
| % Still Employed 180 Days After Employment Entry (2014) | 24.0% |
| Cost per Placement (2014) | \$3,706.65 |

Mountain Comprehensive Care Center (MCCC) provides behavioral health services for children and adults, crisis services, foster care, developmental and intellectual disabilities services, substance abuse services, and veterans counseling in a five-county area in Eastern Kentucky. Because MCCC was in the process of developing housing units for homeless veterans in cooperation with the Veterans' Administration (VA), as well as offering mental health and substance abuse treatment services for veterans as part of their existing menu of services, the addition of employment services for homeless veterans under an HVRP grant seemed like a natural fit. Although most programs offered by MCCC are limited to the organization's targeted five-county service area, the first HVRP grant, awarded in 2013, provided services to veterans in seven counties; the current grant expanded the service area even more to include the 33 primarily rural counties that make up the 5th Congressional District. Three HVRP-funded employment coordinators assigned to specific geographic areas conduct outreach, intake, assessment and case management activities, assist with the job search process, and provide supportive services, working closely with key community partners such as Volunteers of America, the VA, DVOPs and LVERs and the AJCs to help homeless veterans find employment leading to self-sufficiency.

OUTREACH AND RECRUITMENT PROCESS

The entire HVRP team, including the employment coordinators as well as an HVRP-funded outreach coordinator and the project director, participates in outreach and recruitment efforts. Because of the large service area and the diversity among the types of communities served (i.e., primarily rural areas with no available public transportation as well as some small cities and towns), a wide variety of methods are employed, tailored to meet the characteristics and needs of each specific service area. Two of the employment coordinators have no permanent offices; their outreach and recruitment efforts often require significant travel to meet potential participants "where they are" (e.g., at partner organizations that serve homeless veterans, other public facilities). Overall, flyers are distributed at food pantries, homeless shelters, libraries, veterans service organizations, churches, other faith based/community based organizations, and during presentations made by staff at gatherings for veterans in general and, in some cases, homeless veterans specifically, including job fairs, StandDown events and VA outreach days. Staff

also conduct direct street outreach, visiting locations frequented by homeless veterans, including abandoned buildings and remote locations in the woods. Information about HVRP services is also shared through spots on local TV channels in some areas, press releases in local newspapers and on-air interviews with local radio stations. Some HVRP team members educate fellow members of community organizations such as Rotary and the Chamber of Commerce about HVRP services available to veterans. One employment counselor also works with a veteran re-entry program at a prison to conduct outreach and establish contacts with veterans at the time they are to be released. Most of the HVRP referrals are made by the DVOPs, the Volunteers of America, and the VA, although referrals also come from many other partner organizations, including, for example, homeless shelters, state Vocational Rehabilitation, Veterans Courts and the Kentucky National Guard.

INTAKE AND ASSESSMENT PROCESS

HVRP staff (and, in some cases, by key partner staff) use a three-page intake/assessment form to guide pre-screening of potential participants referred for HVRP services. Completion of this pre-screening process, which is typically done by phone, allows staff to identify those who are eligible and/or appropriate for HVRP services (i.e., homeless, ready and willing to work, and a veteran with other than dishonorable discharge) and to eliminate and refer elsewhere those who are not suitable or not likely to succeed in HVRP. Those who appear eligible, meet one-on-one with an employment coordinator to complete the formal assessment process, which also includes an inventory and discussion of barriers. Staff report that personal barriers such as substance abuse issues and a criminal record do not necessarily result in an automatic rejection if the individual appears willing to work, with the HVRP Project Director making all final enrollment decisions. The majority of the potential participants who complete the full assessment with the employment coordinator are ultimately determined to be HVRP-eligible and enrolled. Potential HVRP participants must present a DD 214 form with an “other than dishonorable discharge,” State ID, and Social Security Card, and be employable. No other formal assessments are required, although participants may be referred to the DVOP or the AJC for the TABE or other vocational interest assessments.

OVERVIEW OF THE HVRP SERVICES

Education and Training Services. Provision of education and training services is not the focus of the grantee’s HVRP program; most efforts are concentrated on helping participants secure employment. Although no HVRP funds are available to support education and training activities, participants interested in and in need of these services to obtain employment are typically referred to the DVOPs and the AJCs for assistance. DVOPs and LVERs can also facilitate OJT opportunities, assist with enrollment at local technical colleges and help with financial assistance for tuition through the GI Bill. Staff reported that while WIA/WIOA providers in the service area have only limited funds available for training, some resources are available through Vocational Rehabilitation. Any training completed by HVRP participants is usually short-term training, in fields such as welding or industrial maintenance. The grantee recently added an in-house soft skills job readiness component to their HVRP services. Typically conducted on a one-on-one basis, this instruction is provided by either the outreach coordinator or the employment coordinator, usually during the second meeting with the participant. Instruction on job readiness, interviewing skills, resume writing, completion of job applications, career counseling and the job search process in general is provided.

Employment and Job Retention Services. All members of the HVRP team work directly with participants throughout the job search process to help them obtain employment and, once a job is found, to ensure job retention. Because the employment coordinators must cover a large service area, they are often required to travel long distances, meeting participants in remote locations, such as AJCs, libraries or other public facilities, to share information on job leads and monitor progress. In addition to the one-on-one job readiness training provided by the employment coordinators (described above), participants may also receive similar instruction from DVOPs, LVERs and other AJC staff at job readiness/job search

workshops and job clubs sponsored by the AJCs; job clubs are also operated by local Community Action Programs. Although HVRP employment coordinators conduct some job development directly with employers, this is more often done by LVERs, who also share information on job openings and upcoming job fairs. Staff report that some local employers are willing to consider hiring veterans with barriers to employment, such as criminal records or prior drug and alcohol dependence. To track job retention, HVRP staff follow-up with employers and participants at the program mandated intervals (30, 60, 90, 180, and 270 days after placement). In addition, the grantee provides a \$25 gift card for those who remain employed for an entire quarter.

Transitional and Permanent Housing Assistance. Addressing the housing needs of potential HVRP participants is a key priority for HVRP employment coordinators. Referrals are made to emergency shelters in the service area, including Salvation Army (Ashland), West Care, Safe Harbor, and the Shelter of Hope. MCCC operates a 25-bed transitional housing facility for homeless veterans in Pikeville, KY funded by HUD, the VA Grant and Per Diem (GPD) program, and local banks. At the time of the site visit, more than half of the residents were HVRP participants, and most of the current HVRP participants are housed there. Other transitional housing is available through Safe Harbor and the Big Sandy CAP, although transitional housing is reportedly harder to find in the northern counties in the service area where there is a larger homeless population. MCCC also has short-term rental assistance funds that can be used to assist veterans. HVRP participants can also be referred to the Volunteers of America SSVF program for help in obtaining affordable permanent housing. Some VASH vouchers are available, and HVRP staff collaborate with the VA to acquire these vouchers for eligible participants. The MCCC housing manager can also work with HVRP participants on housing, helping them get on the waiting list (which can take up to a year) for Section 8 permanent housing. Despite the expansion of the service area in the second year of program operations, it appears that, overall, there is an adequate supply of emergency, transitional, and permanent supportive housing to meet the needs of the homeless veterans.

Supportive and Other Services. Supportive services for HVRP participants may be provided using HVRP grant funds or they may be made available through referrals to other partner agencies or organizations. HVRP resources are used to purchase work clothes, boots, non-skid shoes and tools for those participants who find a job. Gas cards, bus tokens and car repairs under \$100 may also be covered by the grant. HVRP staff or a Veterans Benefits Coordinator affiliated with MCCC (or by the VA) may provide benefits counseling. Mental health, substance abuse, and medical services are provided by the VA and MCCC, as well as other state and local social service agencies. Legal services are generally provided by legal aid programs or on a pro bono basis from local lawyers. Although staff reported that a local dentist in one of the counties served provides discounted services, resources for critical dental services are an area of unmet need. Despite the presence of food pantries and food distribution services, they are not able to meet local demand for food assistance.

KEY PARTNERSHIPS

The grantee's key partnerships for operating the HVRP program and providing services to homeless veterans are with the parent organization, MCCC, Volunteers of America (e.g., referrals, assistance in securing permanent housing), the DVOPs and LVERs (e.g., referrals, job readiness, education and training, job search, job development, and job placement), and the AJCs (e.g., job readiness, job search, job development.) The VA is also a key partner, providing Grant and Per Diem support for housing, as well as medical and psychological services.

LESSONS LEARNED AND ACCOMPLISHMENTS

MCCC's HVRP provides case management and supportive services to help homeless veterans residing in a very large, primarily rural service area find and retain employment. Staff feel that the most critical component of the HVRP program is the one-on-one case management offered by a dedicated employment coordinator who addresses the needs and barriers of each veteran, and then provides one-on-one support

to help them navigate the various support systems available. Staff also note that while most programs for veterans are not specifically targeted to those who are homeless, HVRP provides an opportunity to address their unique needs, and to focus primarily on helping them find employment. However, the lack of adequate HVRP grant funding for the training needed for high demand jobs was identified as a challenge for the team. Other challenges associated with the requirements of serving a large and diverse service area were noted, such as the additional costs associated with staff travel time, participant transportation issues and need for staff space in multiple offices. According to staff, there are also cultural challenges associated with attempts to serve homeless veterans in a rural service area. For example, some potential participants are very suspicious of representatives of the government, so attempting to find them and convince them to accept assistance can be difficult. Many of the homeless veterans have a unique set of barriers, including substance abuse, mental health issues, and criminal backgrounds which create challenges to finding employment. Staff indicate that many veterans are overwhelmed and distracted at the time of their discharge, and may not process what is being shared during the pre-release sessions done by the military, such as the Transition Assistance Program (TAP) workshops. This results in homeless veterans being unaware of many services and benefits available to them through the VA. Staff also stressed the critical importance of ongoing interaction and communication among providers of services to the homeless and to veterans in providing the best service possible. Finally, HVRP staff consider the assistance they provide to homeless veterans that helps them stabilize their lives and find employment to be their most important accomplishment.

**Homeless Veterans Reintegration Program (HVRP) Project Summary:
Veterans Inc., Worcester, MA**

| HVRP Program at a Glance | |
|--|--|
| HVRP Program Name | Massachusetts Urban Grant |
| Organization | Veterans Inc. |
| Type of Organization | 501 (c)(3) |
| HVRP Service Area | Worcester, Springfield, and surrounding cities and towns. Congressional districts MA-001, -002, -003 |
| HVRP Current Grant Period | 7/1/2012 - |
| Grant Award for Current Year | \$300,000 |
| Year of Initial HVRP Funding | 2000 |
| Type of HVRP Grant | Urban |
| Target Population | Not Targeted (All Homeless Veterans) |
| # HVRP Enrollments (2014) | 136 |
| % Placed in Jobs (2014) | 83.1% |
| Average Wage at Placement (2014) | \$13.55 |
| % Entered Employment 1st Quarter (2014) | 69.0% |
| % Still Employed 180 Days After Employment Entry (2014) | 23.1% |
| Cost per Placement (2014) | \$2,654.87 |

Veterans Inc. is a non-profit organization working to end homelessness in veteran populations, and is, “the largest provider of support services to veterans and their families in New England.” Veterans Inc. has centers throughout the New England region, and has been serving veterans since their inception in 1990. The agency has a total of five HVRP grants spread throughout New England, with this particular grant targeting homeless veterans in the Worcester and Springfield localities. Veterans Inc. oversees the HVRP grant, working with veterans to provide job readiness training, housing, job placement assistance, case management, and a range of other supportive services aimed at promoting long-term self-sufficiency.

OUTREACH AND RECRUITMENT PROCESS

Most HVRP participants originate from the GPD program, also administered by the grantee. The grantee distributes literature about HVRP to local organizations, including the local Workforce Center and shelters. StandDown events, co-hosted with the local DVOP, also attract homeless veterans. The most common referral sources are the VA and the local DVOP. The DVOP refers around 20 veterans to Veterans Inc. for HVRP eligibility assessment each month.

INTAKE AND ASSESSMENT PROCESS

Homeless veterans are first screened for eligibility by providing proof of military service, and homelessness or at-risk for homelessness status. Because most HVRP participants originate from the GPD-funded transitional facilities operated by Veterans Inc., potential participants are already screened by the grantee by the time they are considered for HVRP enrollment. Eligibility is initially assessed through an in-house intake form that gathers personal and military history information, elicits employment and income histories, and mental health, legal, and substance abuse histories. Subsequently, staff meets with potential participants to gather more in-depth information regarding employability and barriers to employment. Potential participants are also sent to meet with the local DVOP to discuss employment, as well as take any formal assessments (i.e., TABE, interest inventories). Furthermore, all participants work with Veterans Inc. staff to develop an Individual Employment Plan (IEP).

OVERVIEW OF THE HVRP SERVICES

Education and Training Services. Participants are screened one-on-one for employability, including occupational training needs. Veterans Inc. coordinates with the AJC/DVOP to provide additional employment and educational counseling to veterans, and help them access educational/training resources available to them as veterans. If a participant is not computer literate, they are enrolled in an on-site basic computer operations class, and additionally, a more advanced Microsoft Office class is also offered. Compensated Work Therapy is accessed by 10-15 percent of HVRP participants, lasting up to one year, and on average paying \$9-11/hour. Typically, CWT participants would not be enrolled in HVRP until the latter stages of their involvement in CWT and only if the veteran is interested in securing an unsubsidized job. If a participant desires certification or an associates degrees they are usually referred to Quinsigamond Community College (QCC), which offers a full range of training courses (LPN, phlebotomy, medical coding, IT, restaurant management, A+, welding, auto body repair, counseling certification). Veterans Inc. helps 20-30 HVRP participants enroll in QCC courses each year.

Employment and Job Retention Services. Participants work with HVRP-funded case managers, as well as the local DVOP, to develop interviewing techniques, construct an IEP, identify barriers to employment, and find employment opportunities that are related to the individual's skills and career interest. Veterans Inc. offers a weekly resume development workshop, though the majority of resume development is done one-on-one with case managers and the DVOP. Job developers work to establish relationships with local employers, and identify openings that are appropriate for HVRP participants. In collaboration with the local DVOP, Veterans Inc. conducts an annual job fair that, in 2015, was attended by between 350-800 veterans and 60-80 employers. Up to 30 percent of attending HVRP participants obtained jobs as a result of the fair. Additionally, veterans that are in excess of 50 years of age are qualified through the grantee's program, Operation Able, to obtain work experience and training through paid employment at the Veterans Inc. shelter. Once participants are placed, staff continue to stay in touch with the veterans and employers to ensure that employment is ongoing, and that data is collected for VOPAR reporting. Veterans Inc. also continues to offer placed participants access to certain facilities and support services, as a way of keeping them in contact.

Transitional and Permanent Housing Assistance. Veterans Inc. administers 180 transitional beds for veterans in need of housing in the Worcester area. Each year, about 60 of the GPD participants in these beds are eventually enrolled in HVRP. HVRP funding is not used directly to pay for housing assistance. Participants are discouraged from accessing HUD/VASH benefits until after program enrollment, because they become ineligible for HVRP enrollment once they do so.

Supportive and Other Services. Veterans Inc., using various grant funding sources, offers many in-house supportive services to veterans. They offer transportation services to placed participants using HVRP funds. Additionally, through the agency's Dress for Success service, Veterans Inc. has a large collection of professional clothing for veterans to utilize. HVRP funds are occasionally used for the purchase of specialty work clothing and tools. Legal assistance is available to veterans through some local attorneys that offer their services pro bono.

KEY PARTNERSHIPS

Veterans Inc. does not subcontract with other agencies to provide services to HVRP participants. The VA and local DVOP, and to a smaller extent local shelters, provide the majority of referrals to the grantee. The DVOP, through the local Workforce Center, works closely with Veterans Inc. to ensure that veterans are being granted access to required services, and employment opportunities. Securitas is an employer that works closely with Veterans Inc., providing many HVRP participants with employment opportunities (generally as security guards).

LESSONS LEARNED AND ACCOMPLISHMENTS

Staff at Veterans Inc. believes that HVRP funding has helped homeless veterans to better reintegrate into the civilian workforce, and address housing and employment barriers to promote long-term self-sufficiency. In addition to employment and stable housing, the grantee believes that the program helps veterans develop better self-esteem and confidence. Veterans Inc. believes that having access to other veteran-oriented grants, in addition to HVRP, allows for a more holistic approach to treating veteran issues, and more likely ensures sustained employment and stable housing.

**Homeless Veterans Reintegration Program (HVRP) Project Summary:
Easter Seals, Silver Spring, MD**

| HVRP Program at a Glance | |
|--|--|
| HVRP Program Name | Homeless Female Veterans and Veterans with Families (HFVWWF) |
| Organization | Easter Seals Greater Washington-Baltimore Region |
| Type of Organization | 501 (c)(3) |
| HVRP Service Area | Greater Washington-Baltimore Region |
| HVRP Current Grant Period | 8/6/2013 – 6/30/2017 (Follow-up period through 3/31/2018) |
| Grant Award for Current Year | \$300,000 |
| Year of Initial HVRP Funding | 2013 |
| Type of HVRP Grant | Urban/Suburban |
| Target Population | Homeless female veterans and homeless veterans with families |
| # HVRP Enrollments (2014) | 100 |
| % Placed in Jobs (2014) | 72.0% |
| Average Wage at Placement (2014) | \$18.71 |
| % Entered Employment 1st Quarter (2014) | 68.1% |
| % Still Employed 180 Days After Employment Entry (2014) | 26.5% |
| Cost per Placement (2014) | \$3,990.99 |

Easter Seals is a non-profit organization dedicated to providing “services to ensure that all people with disabilities or special needs have equal opportunities to live, learn, work and play within their communities.” Easter Seals has 14 service centers in the Washington-Baltimore region, and has been serving veterans (and their families) and individuals with disabilities for more than 74 years. Easter Seals oversees the HVRP grant, working with homeless female veterans and veterans with families to provide job readiness training, job placement assistance, case management, and a range of other supportive services aimed at promoting long-term self-sufficiency.

OUTREACH AND RECRUITMENT PROCESS

Easter Seals utilizes a number of different outreach techniques, including the posting of traditional marketing materials (e.g., flyers), visiting of transitional/emergency shelters to meet with homeless veteran in person, and attending job fairs (especially those targeting veteran populations). The outreach/employment specialist conducts outreach on the streets and at emergency and transitional facilities throughout the Greater Baltimore-Washington area. Word-of-mouth is one of the most important referral sources. The most common referral sources are transitional housing facilities, American Job Centers (through DVOPs), and the VA Medical Center.

INTAKE AND ASSESSMENT PROCESS

Homeless veterans are first screened for eligibility by providing proof of service, and homelessness or at-risk for homelessness status. Eligibility is determined partly through a one-page pre-screening assessment that is done in-person with HVRP-funded employment specialists, and elicits employment and income histories, and mental health, legal, and substance abuse histories. Subsequently, an eight-page assessment form is completed to gather more in-depth information regarding participants, with a particular focus on employability and motivation to search for work. Employment specialists are selective in enrolling

homeless veterans' in HVRP, screening carefully to ensure that participants are ready and willing to work. Employment specialists work with participants upon initial enrollment to develop an Individual Employment Plan (IEP) to help guide job placements, and career building activities.

OVERVIEW OF THE HVRP SERVICES

Education and Training Services. Participants are screened one-on-one for employability, including occupational training needs. Participants are helped through the enrollment process at Northern Virginia Community College or Prince Georges Community College if they are interested in pursuing higher education. Some training and licensure programs are funded through HVRP (e.g., security training, CDL training and licensure, computer skills training), though are usually low-cost programs.

Employment and Job Retention Services. A job club is offered once a quarter to participants that are yet to be placed, and emphasizes job search techniques, resume development, and interview techniques, as well as life skills. Participants also work with HVRP-funded case managers one-on-one to develop an IEP, and from there identify job placements that are appropriate. A HVRP job developer works to develop relationships with local employers and maintains a active list of over 100 local employers to which referrals of homeless veterans can be made. Easter Seals sometimes initially places participants with employers by paying the veteran's salary for 90-180 days, at which point an employer decides if they want to permanently hire the veteran. Once veterans are placed, the job developer calls the participant and employer monthly to assess the placement, troubleshoot challenges, and provide job retention assistance. Staff attempt to stay in contact with participants for 90-days post-completion, and incentivize the on-going connection with the participant by making available a \$50 gift card at the end of the 90-day follow-up period.

Transitional and Permanent Housing Assistance. Program participants are referred to a wide array of emergency and transitional housing facilities if they are in need of shelter. Commonly, participants will be referred to Access Housing, Veterans on the Rise, or US Vets. Participants are discouraged from accessing HUD/VASH benefits until after program enrollment, because they become ineligible for HVRP enrollment once they do so.

Supportive and Other Services. Participants are often referred to external supportive services, and little HVRP funding is used to directly fund such services. Participants are referred to A Wider Circle for free work clothing and DC Pantry for emergency food supplies. Easter Seals utilizes HVRP funding to purchase gas cards for participant work-related travel, work tools, and to pay for licensure fees. Although HVRP funds are not generally used for car repairs, participants may be offered up to \$500, at the discretion of Easter Seals staff.

KEY PARTNERSHIPS

Easter Seals does not subcontract with other agencies to provide services to HVRP participants. Local transitional housing facilities, AJCs (through DVOPs and LVERs), and the VA Medical Center are among the partnering agencies that make referrals of homeless female veterans to the HVRP program. Local social service organizations are utilized to provide emergency food and clothing supplies to participants.

LESSONS LEARNED AND ACCOMPLISHMENTS

Easter Seals program staff believe that the HVRP initiative helps homeless female veterans and families to access resources to prepare for employment, and provides resources to fund case management, which helps to ensure job placement and retention. Veterans are able to gain valuable skills and connections to enable steady employment, but more importantly, developed self-esteem and the confidence necessary to becoming self-sufficient and overcome homelessness.

Homeless Veterans Reintegration Program (HVRP) Project Summary:

Minnesota Assistance Council for Veterans (MACV), Duluth, MN

| HVRP Program at a Glance | |
|--|--|
| HVRP Program Name | MACV Homeless Veterans Reintegration Program (HVRP) |
| Organization | Minnesota Assistance Council for Veterans (MACV) |
| Type of Organization | 501(c)(3) |
| HVRP Service Area | Minnesota's 36 northern counties, focusing on the 8 th Congressional District's 15 counties |
| HVRP Current Grant Start Date | 7/1/2013 |
| Grant Award for Current Year | \$120,000 |
| Year of Initial HVRP Funding | 2000 |
| Type of HVRP Grant | Rural |
| Target Population | Not Targeted (All Homeless Veterans) |
| # HVRP Enrollments (2014) | 59 |
| % Placed in Jobs (2014) | 71.2% |
| Average Wage at Placement (2014) | \$11.85 |
| % Entered Employment 1st Quarter (2014) | 71.4% |
| % Still Employed 180 Days After Employment Entry (2014) | 20.0% |
| Cost per Placement (2014) | \$2,115.86 |

The Minnesota Assistance Council for Veterans (MACV), a nonprofit organization that has been serving veterans and their families in Minnesota for over 25 years, provides outreach, transitional and permanent housing, direct job placements, employment retention services, legal services, and referrals to healthcare facilities and substance abuse and mental health treatment centers. MACV oversees the only three HVRP grants awarded in Minnesota -- two rural grants serving the Northern and Southern counties of the state, and an urban grant serving the Minneapolis/St. Paul metropolitan area. Through these and other grants for veterans (e.g. SSVF), MACV directly provides the homeless veteran population of Minnesota with housing, employment, and legal assistance services.

OUTREACH AND RECRUITMENT PROCESS

MACV staff conducts outreach at local emergency shelters and transitional housing facilities, homelessness forums, and Minnesota StandDown events. (MACV also serves as the state coordinator for the StandDown events.) Additionally, they identify, and reach out to, veterans that are soon to be released from Minnesota jails that are assessed as at-risk for homelessness. They also are provided referrals through Minnesota Department of Veterans Affairs, hospital-based social workers, The Salvation Army, food pantries, American Job Centers, the Yellow Ribbon network, county veterans service officers, veterans service organizations, the Veteran Affairs Health Care System (VAHCS) and other members of the continuum of care (COC) network. Word-of-mouth is a common referral source, with current HVRP participants being a major source for new participants. Overall, the community veterans services officers (CVSO) and the DVOPs refer the most HVRP participants in Duluth. Staff of MACV also engage local homeless veteran populations through social media, and traditional print and radio ads. Specific challenges to recruitment are a widely dispersed homeless veteran population (across a large rural area served by the grantee) and lack of adequate access to transportation for homeless veterans served by the program.

INTAKE AND ASSESSMENT PROCESS

Initially, homeless individuals recruited to the program must provide proof of military service and discharge status, as well as proof of homelessness or being at-risk for homelessness (e.g., eviction letter). Potential participants typically meet with a MACV case manager to complete a nine-page intake/assessment form that describes personal and work background, collects demographic information, confirms eligibility, explains HVRP, identifies barriers and delineates participant job goals. This initial intake information can also be collected by a community partner, such as a CVSO. Throughout this intake process, and subsequent meetings, case managers determine if an individual is truly interested in employment, what types of positions they may be suited to, if they have the resources and wherewithal to sustain employment, and their housing situation. Those who are found to be unable to work and unsuitable for HVRP are referred to other appropriate service providers (e.g., substance abuse centers, training programs, DVOPs, etc.), or VAHCS for mental and physical health screening, and may be reassessed in the future. Those who are determined to be eligible and suitable for HVRP are referred to the HVRP Employment Coordinator for next steps in the employment process. Employment Coordinators and HVRP participants work together to craft an Individual Employment Plan (IEP) and employment while the MACV case manager addresses housing stability and other issues that may affect sustainability. No formal assessment tools (e.g., TABE, interest inventory) are utilized to evaluate incoming participants.

OVERVIEW OF THE HVRP SERVICES

Education and Training Services. Although the focus of HVRP is on employment, some short-term training programs (CDL, CNA, etc.) offered through local vocational/technical schools and community colleges are funded through the HVRP grant. A majority of HVRP participants receive some sort of training during enrollment, such as CNA training. Clients are referred to DVOPs and AJCs for resume preparation, interview coaching, job readiness workshops and additional vocational testing and employment assessments. Participants may also be referred to the DVOP or the AJC, as well as Vocational Rehabilitation for assistance in obtaining and funding education or training.

Employment and Job Retention Services. MACV attempts to place participants in paying jobs as quickly as possible, sometimes even placing HVRP participants in positions that are below previous earning levels initially. They believe quick employment helps to immediately begin addressing debt and housing-affordability issues – and once employed, participants can later (with additional job experience or additional training) move to higher paying jobs. Employment coordinators offer employment services through teaching participants how to use Internet job search tools, appropriate interview techniques, and by identifying suitable positions. A monthly job club is held to practice interview techniques, share job leads, and provide a forum for employers to talk about their company and available employment opportunities, as well as to meet individually with participants to discuss career interests and possible employment opportunities. The Employment Coordinator works to identify available job openings at local businesses, encourage employers to hire veterans enrolled in HVRP, and provide participants information regarding employment opportunities. Participants are referred to local DVOPs and LVERs to get further assistance developing resumes, identifying barriers to employment, and finding appropriate job openings. Once placed, MACV case managers contact HVRP participants and employers on a weekly/bi-weekly basis for the first two months of employment to ensure a smooth transition and to help resolve employment challenges that might lead to job loss. During the following seven-month period, case managers continue to periodically reach-out to participants and employees to ensure employment is sustained and to address challenges to job retention. Veterans may receive public transportation passes, gas cards, or clothing vouchers as incentive to remain in contact with MACV during the follow-up period.

Transitional and Permanent Housing Assistance. MACV case managers work closely with HVRP participants to help them stabilize their housing situations. MACV directly operates two housing models in the service area: (1) a 10-bed transitional housing facility that veterans may be eligible to stay in for two years before moving on to independent, permanent, housing, and; (2) Duluth Veterans Place, an 11-

unit permanent supportive housing facility for veterans who are disabled and/or chronically homeless; there are also 5 units of transitional housing at this facility. Participants may also be referred to local emergency shelters or other housing programs if MACV housing is at capacity, or if they are ineligible for transitional or permanent housing. Few subsidized transitional or permanent housing slots are available for HVRP participants located in the sparsely populated areas of northern Minnesota. Additionally, there is a lack of affordable housing units in and around Duluth, making it a challenge to move homeless individuals into permanent housing. It can also be difficult to find housing for veterans with criminal backgrounds.

Supportive and Other Services. Veterans may be provided HVRP-funded gas vouchers and public transportation passes when needed to support employment. Additionally, specialty work tools, work clothing, limited food vouchers, and, in some cases, even haircuts may be purchased for participants using HVRP funds. Participants entering the program with legal issues are offered pro bono attorney services and advice through the MACV's VetLaw program, which is partially funded with SSVF grant funds. VetLaw legal clinics provide a venue for clients to seek legal counsel from attorneys and volunteer law students free of charge (primarily regarding housing law, family law, upgrade of discharge status, and criminal record expungement). Veterans with substance abuse problems may be referred to a substance abuse treatment program at the Veteran Affairs Medical Center in St. Cloud, Minnesota. In addition, HVRP participants are frequently referring to other community partners for a wide variety of supportive services as needed, including the VA, food pantries, counseling centers, clinics and shelters.

KEY PARTNERSHIPS

Subcontractors are not utilized by MACV to provide services to HVRP participants. Through the use of HVRP funds, and their SSV grants, MACV is able to offer most of the key services needed by homeless veterans in house. County Veterans Service Officers (CVSOs) are a valuable source of referrals, as well as services for the veterans. Other key partners include local shelters, food pantries, and jails, VAHCS, Minnesota StandDown events, and AJCs. Local DVOPs play a critical role in many areas, identifying and referring appropriate veterans to MACV, while LVERs identify jobs, and work to persuade local businesses to hire veterans, including HVRP participants.

LESSONS LEARNED AND ACCOMPLISHMENTS

The HVRP grant awarded to MACV enables the organization to serve homeless veteran needs in a more comprehensive manner than previously possible, with a particular focus on finding and retaining employment. The additional funds and staffing afforded through the grant has allowed for a wider array of services to be offered to veterans and enabled MACV to implement a much-needed, three-pronged service delivery system in-house, focusing on employment, housing and legal needs. In turn, this has led to more participants placed in sustained employment and permanent housing. A greater availability of affordable housing is needed to successfully place all participants in permanent housing. Additionally, criminal records and lack of access to reliable transportation (especially among HVRP participants living in more remote and isolated rural areas of Minnesota) are key challenges to securing and retaining employment.

**Homeless Veterans Reintegration Program (HVRP) Project Summary:
America Works of New York, Inc., New York, NY**

| HVRP Program at a Glance | |
|--|--|
| HVRP Program Name | America Works of New York, Inc.'s HVRP Program |
| Organization | America Works of New York |
| Type of Organization | For-Profit |
| HVRP Service Area | New York City (5 Boroughs – Manhattan, Queens, Bronx, Brooklyn, and Staten Island) |
| HVRP Current Grant Start Date | 7/1/2012-6/30/2015 |
| Grant Award for Current Year | \$300,000 |
| Year of Initial HVRP Funding | 2009 |
| Type of HVRP Grant | Urban |
| Target Population | Not Targeted (All Homeless Veterans) |
| # HVRP Enrollments (2014) | 176 |
| % Placed in Jobs (2014) | 80.7% |
| Average Wage at Placement (2014) | \$12.08 |
| % Entered Employment 1st Quarter (2014) | 63.4% |
| % Still Employed 180 Days After Employment Entry (2014) | 15.6% |
| Cost per Placement (2014) | \$1,828.72 |

America Works (AW) of New York Inc., a for-profit workforce development agency, provides job readiness training, direct job placement, and employment retention services for unemployment and underemployed individuals in New York City, such as veterans, welfare/SNAP recipients, ex-offenders, and homeless, and other low-income individuals. AW administers the HVRP grant and directly provides all HVRP grant-funded services (i.e., without reliance on subcontractors). Under its HVRP grant, AW utilizes a “workfirst” approach that emphasize rapid (within days or weeks of HVRP intake) placement of homeless veterans into jobs.

OUTREACH AND RECRUITMENT PROCESS

AW staff conduct regular visits to inform staff and direct outreach to homeless veterans at emergency and transitional shelters (including Borden Ave. Shelter, Atlantic Ave. Shelter, and others). The VA, DVOPS, and NY Human Resource Administration are also sources of referrals. Word-of-mouth is the most common referral source, with current and past HVRP participants being a major source for new participants. Staff of AW manage an on-going e-mail chain that is sent out to over 300 organizations each month, as well as a Craigslist ad that promotes the program through emphasizing success regarding homeless veteran employment. No specific challenges to recruitment were noted, and the grantee was able to meet enrollment goals.

INTAKE AND ASSESSMENT PROCESS

Individuals are initially requested to provide proof of military service, then proof of homelessness, or at-risk for homelessness (e.g., eviction letter). AW turns away a number of individuals that cannot provide proof of homelessness. During the intake interview, participants fill out a form that describes personal and work background, as well as demographic information, and job-related goals. Throughout this intake process, and early meetings, case managers and the HVRP Director determine if an individual is truly interested in employment and are suitable for HVRP program enrollment. Those who are found to be unwilling or unable to work are referred to the VA, or other service providers. No formal assessment

tools (e.g., TABE, interest inventory) are utilized to evaluate incoming participants. Case managers and participants work together to craft an Employment Development Plan (EDP).

OVERVIEW OF THE HVRP SERVICES

Education and Training Services. Very few (if any) HVRP participants receive or are referred to education or training services, as AW's work-first approach emphasizes rapid job placement (often within several days to a week of HVRP intake). Individuals uninterested in immediate employment are not generally enrolled in AW's HVRP initiative (and would likely be referred to a training provider prior to HVRP enrollment). Under its HVRP initiative, AW offers some types of short-term training that are directly tied to job placement, including a 24-hour security training course offered through Allied Security (who then hire the trainees) and a two-hour stick shift course (to enable participants to become eligible for jobs that require driving proficiency), so that participants can easily be placed in parking attendant/valet jobs, and security positions.

Employment and Job Retention Services. Employment services are the key services provided by AW under the HVRP grant, utilizing a work-first approach as a guiding principle. The main ways in which these services manifest are help with resume development, advice relating to job search, interview practice, and the provision of job leads. These services are all provided in a one-on-one setting, and group classroom and job readiness activities are not offered. Program staff also cultivate relationships with local employers, identify positions at these businesses, and then secure interviews for participants. Once gainful employment is attained, program staff follow-up with participants for 90 days. Participants return to AW's offices with proof of employment (paystub) to receive HVRP-funded metro cards during the 90-day follow-up period. Program staff utilize this time to talk with participants about their jobs, and to ensure that any issues that come up are resolved. Additionally, if a participant shows an interest in finding a better paying position, AW staff members will work with them to identify one that is appropriate. Case managers also follow-up with employers to ensure that the job placement is a good fit.

Transitional and Permanent Housing Assistance. Within New York City, a considerable range of emergency and transitional housing options are available to homeless veterans. New York also has a "right to shelter" law that obligates the state to provide shelter to any homeless person that requests it. Housing is available in all five boroughs, though the most affordable units are located in the Bronx. Direct AW does not offer housing assistance, though participants in need of it are referred to emergency shelters or transitional and permanent housing providers. Participants may be referred to Help USA (a SSVF grant recipient) to receive assistance with housing, and AW also has referral arrangements with GPD and HUD-VASH grantees.

Supportive and Other Services. One of the major supportive services offered through HVRP funding is metro cards for participants. Participants are eligible to receive metro cards for up to 90 days following job placement with proof of employment. This represents a fairly substantial program cost, at around \$120 per month for each placed participant. Less commonly, HVRP funds are utilized to purchase work clothing, tools, and state IDs and licenses for program participants. New York City has a significant number of organizations and charities that homeless veterans can visit to obtain food, work clothing, and other various supportive services, to which AW consistently refers participants.

KEY PARTNERSHIPS

AW does not utilize subcontractors to provide services to HVRP participants. Partnerships in general are limited, with AW providing most services in-house. Emergency and transitional shelters, NYHRA, DVOPs, and VA refer prospective participants to AW for HVRP enrollment. AW may also refer participants to external partners (SSVF grantees, emergency and transitional housing providers, NYHRA, and VA) for housing, training, and other supportive services, when appropriate.

LESSONS LEARNED AND ACCOMPLISHMENTS

Working one-on-one with HVRP participants to enhance employability and emphasizing a work-first approach, AW has been able to rapidly and effectively transition homeless veterans into employment. AW has been able to improve employment prospects for HVRP participants by establishing close relationships with employers that can provide rapid placement of homeless participants into jobs (particularly in security, parking, retail, and food preparation/handling). In addition, AW has been able to increase job retention and the likelihood of staying in contact with participants after employment by offering metro cards to participants during the first 90-days following employment. When participants come in to provide their paystubs to obtain their metro cards, staff have the opportunity to discuss employment and housing status (and potential upgrades).

**Homeless Veterans Reintegration Program (HVRP) Project Summary:
American GI Forum National Veterans Outreach Program, Inc., Austin, Texas**

| HVRP Program at a Glance | |
|--|--|
| HVRP Program Name | Homeless Veterans Reintegration Project (HVRP) – Austin-San Marcos |
| Organization | American GI Forum National Veterans Outreach Program, Inc. (NVOP) |
| Type of Organization | 501(c) (3) |
| HVRP Service Area | Austin and San Marcos (Travis and Hays Counties) Texas |
| HVRP Current Grant Start Date | 7/1/2012 |
| Grant Award for Current Year | \$300,000 |
| Year of Initial HVRP Funding | 1998 |
| Type of HVRP Grant | Urban |
| Target Population | Not Targeted (All Homeless Veterans) |
| # HVRP Enrollments (2014) | 106 |
| % Placed in Jobs (2014) | 48.1% |
| Average Wage at Placement (2014) | \$11.73 |
| % Entered Employment 1st Quarter (2014) | 39.2% |
| % Still Employed 180 Days After Employment Entry (2014) | 0.0% |
| Cost per Placement (2014) | \$5,072.53 |

The American GI Forum National Veterans Outreach Program (NVOP), a non-profit organization, has been providing services to veterans and their families for 43 years. Headquartered in San Antonio, NVOP has service locations in five other Texas cities - Dallas, Houston, El Paso, Ft. Worth, and Austin. Services offered by the organization include employment and training for veterans, housing for the elderly, economic development projects (e.g., box manufacturing), and homeless veterans services. In addition to the HVRP grant that serves homeless veterans in the Austin-San Marcos area, NVOP administers five other HVRP grants that fund services in four Texas cities, including two grants for San Antonio. The organization operates many other federal- and state-funded projects, including an SSVF program, a VA Grant and Per Diem and HUD-funded Residential Center, and a program targeting families receiving public assistance funded by the Texas Workforce Commission. NVOP oversees operations of the HVRP grant in Austin-San Marcos, with day-to-day activities conducted by five on-site staff. The HVRP team works with a number of key partners (e.g., Goodwill, Caritas [SSVF grantee], Texas Veterans Commission [oversees DVOPs/LVERs], VA, Workforce Solutions/AJCs and the county veterans service office) for referrals, employment and training activities, and assistance with housing and other supportive services.

OUTREACH AND RECRUITMENT PROCESS

Local outreach and marketing efforts are conducted by all members of the HVRP team through distribution of flyers and pamphlets, information posted on Facebook, Craigslist and the NVOP website, and presentations made during street outreach, visits to emergency shelters, transitional housing facilities, food pantries, food kitchens, churches, libraries, Stand Down events, Career Fairs, and to other community partner organizations (e.g., VA, Urban League, veterans service organizations, the county veterans service office, AJCs), when they provide information about services available through HVRP. Although the majority of the referrals to HVRP are through word-of-mouth, the VA, Goodwill Central Texas, and Caritas (a SSVF grantee) are also important referral sources. Partner staff report that homeless

veterans identified as job-ready are referred to HVRP for services. The grantee has faced significant challenges in meeting enrollment goals, attributed in part to frequent turnover among case manager staff. In addition, some otherwise-eligible veterans receive disability benefits sufficient to support themselves, and are not interested in seeking employment or participating in HVRP.

INTAKE AND ASSESSMENT PROCESS

Individuals referred to HVRP must complete a NVOP pre-enrollment intake/assessment application as part of the screening process, typically with the HVRP intake specialist or other team member. Those who are not eligible or appropriate for HVRP are referred to other partners (e.g., housing providers, veterans service organizations, VA, MH/SA treatment centers) for services as needed. A DD214, photo ID, birth certificate, SSN, and other verifications are collected. Once eligibility is confirmed, the remainder of the 5-phase Individual Services Strategy Plan (ISSP) is completed; this package includes the socio-economic assessment (e.g., MH/SA, legal, housing needs), an occupational skills assessment, and an employment and training plan. Reading and math skills are tested as part of the occupational skills assessment using an on-line assessment; participants who score below the 9th grade level participate in online remedial training to improve basic skills. Participants who are not immediately job ready pursue education and training activities; those who are job ready begin the job search process.

OVERVIEW OF THE HVRP SERVICES

Education and Training Services. The primary focus of HVRP is on job placement as opposed to training; although HVRP has some resources for training, long-term and/or high-cost training is not funded by the grant. Participants in need of training prior to employment are typically referred to Goodwill (the primary training resource for HVRP) or other community partners for training and certification in, for example, CNA, CDL, forklift driving, and welding. Some participants may also be referred to the AJC or Austin Community College for assistance with training resources. Although funding is available in the HVRP budget for OJT positions, they are used infrequently, reportedly because employers are not willing to deal with the paperwork involved.

Employment and Job Retention Services. HVRP case managers provide one-on-one work readiness training, including help with resume development, mock interviews, and job search strategies, as well as direct job development and job placement. Participants are also referred to the DVOPs and LVERs, or to Workforce Solutions, for individual job search or job placement assistance, as well as the group job readiness and job search classes and workshops available at the AJCs. Targeted mini-job fairs are also sponsored in conjunction with veteran-friendly employer partners. Follow-up after job placement is conducted by two different parties to ensure accountability: the assigned case manager checks in with the participant, and MIS staff from NVOP headquarters in San Antonio follows-up with the employers to verify employment. Follow-up is typically conducted every week for the first month; during the second month follow-up is done every 15 days. After that, follow-up is conducted every 30 days, up to 270 days. Supportive services and continued case management may be provided for up to three quarters after placement.

Transitional and Permanent Housing Assistance. Although the HVRP grant does provide any direct housing assistance, all homeless veterans referred to HVRP are provided with referrals to other community partners for emergency or transitional housing. Some participants are also referred to Caritas, the SSVF grantee, for help with permanent housing. The Austin Continuum of Care (CoC) oversees all activities of the homeless service agencies in Austin; all homeless individuals receive an HMIS coordinated assessment/screening from a partner agency to determine an appropriate placement. Emergency and transitional housing in Austin is generally available to meet the needs of homeless veterans at facilities such as New Entry, the McCabe Center, Caritas, the ARCH/Front Steps, and the Salvation Army. However, finding permanent housing in the Austin area where the occupancy rate is over 95 percent is challenging; few public housing units are available. Some housing assistance partners

reportedly focus placement efforts on private landlords with a smaller number of properties who are more likely to rent to homeless veterans who are ex-offenders or who have other barriers

Supportive and Other Services. HVRP grant funds are used to pay for supportive services necessary to obtain and sustain employment, including transportation costs (e.g., bus passes), work tools, equipment and shoes, and emergency food needs. Staff noted that HVRP funds available for support services are very limited. In addition, approval time from NVOP headquarters for these resources may take up to a week. As a result, staff look for other available community resources to pay for these expenses on a timelier basis. Other supportive services (e.g., legal aid, health care) are obtained through linkages established with other community partners.

KEY PARTNERSHIPS

The grantee partners with a number of employment and training providers for outreach and referral as well as employment and training services, including the Texas Veterans Commission (including the DVOPs and LVERs), the local Workforce Solutions/AJCs, Goodwill Central Texas (for multiple services), and local staffing/temporary agencies (e.g., Peak Performers). The team also works closely with other community organizations for referrals, as well as housing assistance, SA/MH treatment, and other supportive services, including the VA, veterans services organizations (e.g., American Legion, VFW), the county VSO, The Salvation Army, Caritas (SSVF), Urban League, New Entry, and the ARCH/Front Steps.

LESSONS LEARNED AND ACCOMPLISHMENTS

NVOP's HVRP in Austin-San Marcos identifies and assists in stabilizing homeless veterans by linking them with community resources to address housing, mental health, substance abuse, and other critical needs, and then focusing efforts on helping those who are work-ready to find and retain employment. The grantee has faced a number of programmatic and operational challenges. The program has been plagued by constant turnover among case managers, which is attributed in part to the non-competitive salaries offered in Austin's thriving economy. Although NVOP had operated a Veterans Workforce Investment Program in Austin for three years prior to the award of the HVRP grant, only one experienced case manager from that program carried over to HVRP. Furthermore, compared to the NVOP HVRP in San Antonio, the Austin HVRP team does not benefit from having other in-house programs and resources (e.g., SSVF) that would enable them to offer participants wrap-around services; they also do not have access to as many other community resources as the HVRP team in San Antonio. At the time of the site visit, the grantee had been unable to meet their performance goals and was on a CAP, however, a new outreach specialist had been added to boost enrollment, and the team felt that operations were stabilizing and performance was beginning to improve.

**Homeless Veterans Reintegration Program (HVRP) Project Summary:
Washington State Department of Veterans Affairs, Olympia, WA**

| HVRP Program at a Glance | |
|--|---|
| HVRP Program Name | Washington State Department of Veterans Affairs' Homeless Veterans Reintegration Program (HVRP) |
| Organization | Washington State Department of Veterans Affairs (WDVA) |
| Type of Organization | State Agency |
| HVRP Service Area | Puget Sound Region (King, Pierce, Thurston, Kitsap and Snohomish Counties) |
| HVRP Current Grant Start Date | 7/1/2011 |
| Grant Award for Current Year | \$300,000 |
| Year of Initial HVRP Funding | 1998 |
| Type of HVRP Grant | Urban |
| Target Population | Not Targeted (All Homeless Veterans) |
| # HVRP Enrollments (2014) | 170 |
| % Placed in Jobs (2014) | 80.6% |
| Average Wage at Placement (2014) | \$13.74 |
| % Entered Employment 1st Quarter (2014) | 70.1% |
| % Still Employed 180 Days After Employment Entry (2014) | 19.8% |
| Cost per Placement (2014) | \$2,189.78 |

Washington State Department of Veterans Affairs (WDVA) is a cabinet-level state agency that helps connect veterans and their families with benefits and services. The Veterans Services Division of the agency administers HVRP, the VA-funded Grant and Per Diem (G&PD) transitional housing facility for homeless veterans (Building 9) and other programs such as the Veterans Innovation Program and the Veterans Stewardship Program. In addition to the HVRP urban grant, WDVA also operates a rural HVRP grant which serves the 12-county, 5th Congressional District in the eastern part of the state. Although WDVA administers the grant and directly provides all HVRP-funded services, a well-established network of state and local partners collaborates to provide wrap-around services that help homeless veterans find and keep employment.

OUTREACH AND RECRUITMENT PROCESS

Ongoing outreach and recruitment efforts are conducted by the HVRP team, other WDVA staff and key partner staff (e.g. DVOPS/ LVERS, Catholic Community Services, county veterans' offices) through visits to shelters, soup kitchens and homeless provider agencies and at Stand Down events, veterans summits, and through face-to-face contact. In addition to the distribution of flyers and brochures, information about HVRP is also posted on the WDVA website, Facebook and Twitter. The HVRP team increases awareness of available HVRP services through quarterly orientation workshops for participants, local employers, service providers and community networks, including staff from local community and technical colleges, apprenticeship and trade schools, workforce development councils, AJCs, and DVOPS/LVERs to network and share information about program activities and jobs. Other recruitment efforts focus on establishing contact with incarcerated veterans prior to their release. Although program referrals come from many community partners, at the time of the site visit more than half of all referrals were made by the DVOPS/LVERs. No specific challenges to recruitment were reported and the grantee was able to meet enrollment goals.

INTAKE AND ASSESSMENT PROCESS

All individuals referred to HVRP are first screened during a pre-enrollment assessment, conducted by an HVRP team member or by a partner agency staff member (e.g., DVOP). This pre-enrollment assessment focuses on determining eligibility (i.e., verifying veteran status and homelessness or at risk for homelessness), employability and desire to be employed. Those deemed not eligible for HVRP are referred for other services as needed, such as emergency housing, substance abuse or mental health treatment or resources for food. Individuals who are HVRP-eligible and willing to work complete an enrollment intake and needs assessment to determine needs, barriers and skills; information on education and employment history, military background, skills and criminal background are collected as part of this process. Individuals eligible for HVRP but not immediately work ready develop an Employability Development Plan (EDP) with either an HVRP case manager or partner case manager which outlines steps to become job ready (e.g., remedial education, job prep, job skills training, certification/licensing). Participants who are job ready typically work with a DVOP to develop an Individualized Employment Plan (IEP). No other formal assessments (e.g., TABE) are required, although resources for vocational assessments and testing (e.g., GED) are available for employability development.

OVERVIEW OF THE HVRP SERVICES

Education and Training Services. Although the program focuses on employment for participants, HVRP resources are available for classroom, occupational and on-the-job training. Overall, the majority of the training provided directly by HVRP is short-term (e.g., 6 weeks or less), upgrading or retraining job skills training and/or certification or licensing for occupations such as CNA and CDL. Life skills and money management instruction are also offered directly by the grantee. In addition to the support provided by HVRP case managers, participants work closely with DVOPs/LVERs at the American Job Centers (AJCs) on career counseling, vocational guidance job skills development, and coordination of training through the AJC. The grantee relies heavily on established relationships with key partners to supplement grant resources for education and training; for example, HVRP resources paid for transportation costs and groceries while WIA funds covered the actual training fees for one participant enrolled in a training program for truck drivers.

Employment and Job Retention Services. Regardless of the initial source of the referral or the original case manager (e.g., DVOP, Catholic Community Services), employment is emphasized as the main goal of WDVA's HVRP. DVOPs and LVERs play a critical role in the provision of employment and retention services for HVRP enrollees. All HVRP participants are connected to the DVOPs/LVERs and to the AJCs for help with resume development, interviewing skills, other job readiness activities, job search and job placement services (including registration in the state's Services, Knowledge, and Information Exchange System (SKIES), as well as access to job club workshops and peer support groups. A DVOP is even stationed at the VA Medical Center that serves the HVRP service area, multiple student volunteers are also available at this location to provide assistance to veterans seeking employment. Following placement in a job, regular contact is maintained (by either the HVRP case manager or the partner agency case manager) with both the participant and the employer through the first 90 days of employment, typically by phone or email. Continued case management and provision of supportive services as needed are available after placement. WDVA has a data sharing agreement with the state's Employment Security Department (ESD) for verification of wages and job retention.

Transitional and Permanent Housing Assistance. Emergency shelters and transitional housing facilities are generally able to meet the needs of homeless veterans in the service area through state-managed housing (e.g., WDVA's G&PD Building 9) and shelters/facilities operated by non-profit CBOs and FBOs (e.g., Catholic Community Services, Salvation Army). Permanent housing is also available, except in Seattle/King County area where rents are prohibitively high and housing is scarce (2 percent vacancy rate). Although no housing assistance is provided directly with HVRP grant funds, WDVA is able to facilitate access to its VA-funded Building 9 transitional housing facility with 60 beds; referrals

are also made to other transitional facilities such as Catholic Community Services' Drexel House. The HVRP team also collaborates with SSVF grantee partners for referrals and assistance in obtaining permanent housing with HUD/VASH vouchers.

Supportive and Other Services. HVRP grant funds are available to cover supportive services required to support employment, including food (i.e., grocery store vouchers), transportation assistance (e.g., bus tickets/tokens, transit system passes, gas/oil), work tools, work clothing and fees, such as union dues. Referrals are made to a wide array of community partners, both within WDVA and elsewhere (e.g., VA), for benefits counseling, mental health and substance abuse counseling and treatment and medical, dental and legal services. Referred veterans who are determined to be ineligible for HVRP are also referred to partner agencies for these services.

KEY PARTNERSHIPS

As a state agency, WDVA is well-positioned to leverage critical resources from other state and local partners to support HVRP participants. For example, WDVA has a particularly strong partnership with the state's Employment Security Department (ESD), the agency that oversees DVOPs and LVERs. This relationship facilitates provision of outreach and recruitment efforts, case management, employment and training and job retention services to HVRP participants; ESD can also provide wage and retention verifications for participants. Another key partner is Catholic Community Services, an SSVF grantee, which also contributes to HVRP operations by providing outreach and recruitment, case management and assistance with both transitional and permanent housing. Other partners include the VA, county veterans' assistance programs, Rally Point 6 (a resource center for veterans) and other housing assistance and MH/SA treatment and counseling programs.

LESSONS LEARNED AND ACCOMPLISHMENTS

WDVA's HVRP fills a critical gap by implementing a holistic, individualized approach to addressing the multitude of service needs for homeless veterans, specifically focusing on employment and providing resources for short-term training and supportive services not available elsewhere. The grantee has been able to capitalize on its unique position as a cabinet-level state agency to draw on existing partnerships at the federal, state and local levels and link this population with a wide array of needed services. Administrators and staff feel that facilitating coordination among the various providers of services is critical to meeting the needs of this population. Key challenges include providing services to previously incarcerated veterans, particularly those classified as sexual offenders, as they are more difficult to place in jobs. Although the majority of HVRP participants served have been older veterans, staff believe that the expected increase in the number of younger veterans will significantly change service needs, including more costs of child care, auto insurance and treatment for TBI.

APPENDIX C:
ADDITIONAL DETAILED VOPAR DATA ANALYSES

Appendix C-1: Distribution of HVRP Enrollments by Grantee, PY 2013

| Grantee | Number Enrolled | Relative Percentage | Cumulative Percentage |
|---------------------|------------------------|----------------------------|------------------------------|
| HV-23333-12-60-5-42 | 254 | 1.6% | 1.6% |
| HV-23385-12-60-5-42 | 253 | 1.6% | 3.2% |
| HV-24656-13-60-5-48 | 250 | 1.6% | 4.7% |
| HV-23273-12-60-5-22 | 220 | 1.4% | 6.1% |
| HV-23372-12-60-5-21 | 218 | 1.4% | 7.5% |
| HV-24618-13-60-5-39 | 217 | 1.4% | 8.8% |
| HV-23263-12-60-5-48 | 215 | 1.3% | 10.2% |
| HV-23271-12-60-5-24 | 200 | 1.2% | 11.4% |
| HV-23272-12-60-5-36 | 200 | 1.2% | 12.7% |
| HV-22134-11-60-5-48 | 199 | 1.2% | 13.9% |
| HV-23290-12-60-5-6 | 185 | 1.2% | 15.1% |
| HV-23369-12-60-5-11 | 180 | 1.1% | 16.2% |
| HV-24671-13-60-5-24 | 179 | 1.1% | 17.3% |
| HV-24519-13-60-5-36 | 176 | 1.1% | 18.4% |
| HV-24662-13-60-5-6 | 175 | 1.1% | 19.5% |
| HV-23391-12-60-5-6 | 174 | 1.1% | 20.6% |
| HV-22133-11-60-5-6 | 173 | 1.1% | 21.7% |
| HV-23284-12-60-5-6 | 173 | 1.1% | 22.8% |
| HV-23327-12-60-5-45 | 172 | 1.1% | 23.8% |
| HV-22127-11-60-5-53 | 170 | 1.1% | 24.9% |
| HV-24674-13-60-5-42 | 167 | 1.0% | 25.9% |
| HV-22137-11-60-5-32 | 162 | 1.0% | 26.9% |
| HV-23289-12-60-5-36 | 162 | 1.0% | 28.0% |
| HV-23365-12-60-5-48 | 162 | 1.0% | 29.0% |
| HV-24946-13-60-5-39 | 161 | 1.0% | 30.0% |
| HV-22145-11-60-5-36 | 160 | 1.0% | 31.0% |
| HV-23299-12-60-5-27 | 160 | 1.0% | 32.0% |
| HV-24672-13-60-5-1 | 159 | 1.0% | 33.0% |
| HV-23287-12-60-5-11 | 158 | 1.0% | 34.0% |
| HV-24670-13-60-5-26 | 157 | 1.0% | 34.9% |
| HV-24659-13-60-5-24 | 156 | 1.0% | 35.9% |
| HV-23301-12-60-5-25 | 152 | 0.9% | 36.9% |
| HV-24663-13-60-5-44 | 152 | 0.9% | 37.8% |
| HV-23876-12-60-5-12 | 151 | 0.9% | 38.8% |
| HV-22135-11-60-5-39 | 150 | 0.9% | 39.7% |
| HV-23326-12-60-5-39 | 150 | 0.9% | 40.6% |
| HV-23330-12-60-5-17 | 150 | 0.9% | 41.6% |
| HV-24826-13-60-5-48 | 147 | 0.9% | 42.5% |
| HV-23364-12-60-5-19 | 146 | 0.9% | 43.4% |

| Grantee | Number Enrolled | Relative Percentage | Cumulative Percentage |
|---------------------|------------------------|----------------------------|------------------------------|
| HV-23384-12-60-5-47 | 144 | 0.9% | 44.3% |
| HV-22146-11-60-5-6 | 143 | 0.9% | 45.2% |
| HV-23329-12-60-5-26 | 142 | 0.9% | 46.1% |
| HV-23367-12-60-5-48 | 140 | 0.9% | 47.0% |
| HV-23262-12-60-5-8 | 138 | 0.9% | 47.8% |
| HV-23393-12-60-5-6 | 137 | 0.9% | 48.7% |
| HV-24657-13-60-5-18 | 134 | 0.8% | 49.5% |
| HV-24523-13-60-5-8 | 132 | 0.8% | 50.3% |
| HV-24739-13-60-5-48 | 132 | 0.8% | 51.2% |
| HV-24944-13-60-5-13 | 132 | 0.8% | 52.0% |
| HV-22136-11-60-5-6 | 130 | 0.8% | 52.8% |
| HV-23373-12-60-5-17 | 130 | 0.8% | 53.6% |
| HV-24661-13-60-5-35 | 130 | 0.8% | 54.4% |
| HV-24665-13-60-5-12 | 129 | 0.8% | 55.2% |
| HV-23269-12-60-5-17 | 127 | 0.8% | 56.0% |
| HV-23389-12-60-5-25 | 123 | 0.8% | 56.8% |
| HV-24530-13-60-5-26 | 121 | 0.8% | 57.6% |
| HV-22130-11-60-5-41 | 120 | 0.7% | 58.3% |
| HV-23370-12-60-5-13 | 120 | 0.7% | 59.1% |
| HV-22149-11-60-5-15 | 118 | 0.7% | 59.8% |
| HV-24529-13-60-5-17 | 116 | 0.7% | 60.5% |
| HV-23275-12-60-5-55 | 114 | 0.7% | 61.2% |
| HV-23279-12-60-5-17 | 113 | 0.7% | 61.9% |
| HV-24673-13-60-5-42 | 113 | 0.7% | 62.6% |
| HV-22128-11-60-5-48 | 112 | 0.7% | 63.3% |
| HV-23371-12-60-5-26 | 112 | 0.7% | 64.0% |
| HV-22143-11-60-5-33 | 108 | 0.7% | 64.7% |
| HV-23268-12-60-5-41 | 108 | 0.7% | 65.4% |
| HV-22132-11-60-5-12 | 107 | 0.7% | 66.1% |
| HV-23386-12-60-5-22 | 107 | 0.7% | 66.7% |
| HV-23282-12-60-5-18 | 106 | 0.7% | 67.4% |
| HV-23296-12-60-5-12 | 103 | 0.6% | 68.0% |
| HV-23303-12-60-5-6 | 103 | 0.6% | 68.7% |
| HV-24522-13-60-5-40 | 102 | 0.6% | 69.3% |
| HV-24534-13-60-5-6 | 99 | 0.6% | 69.9% |
| HV-24829-13-60-5-6 | 99 | 0.6% | 70.6% |
| HV-23325-12-60-5-17 | 98 | 0.6% | 71.2% |
| HV-23278-12-60-5-36 | 97 | 0.6% | 71.8% |
| HV-24604-13-60-5-15 | 97 | 0.6% | 72.4% |
| HV-22125-11-60-5-9 | 96 | 0.6% | 73.0% |

| Grantee | Number Enrolled | Relative Percentage | Cumulative Percentage |
|---------------------|------------------------|----------------------------|------------------------------|
| HV-22142-11-60-5-25 | 96 | 0.6% | 73.6% |
| HV-23274-12-60-5-34 | 95 | 0.6% | 74.2% |
| HV-22148-11-60-5-25 | 94 | 0.6% | 74.8% |
| HV-23366-12-60-5-48 | 94 | 0.6% | 75.3% |
| HV-24520-13-60-5-36 | 94 | 0.6% | 75.9% |
| HV-24733-13-60-5-24 | 93 | 0.6% | 76.5% |
| HV-23270-12-60-5-6 | 92 | 0.6% | 77.1% |
| HV-24644-13-60-5-6 | 92 | 0.6% | 77.7% |
| HV-23266-12-60-5-51 | 90 | 0.6% | 78.2% |
| HV-23281-12-60-5-12 | 90 | 0.6% | 78.8% |
| HV-24731-13-60-5-13 | 89 | 0.6% | 79.3% |
| HV-24736-13-60-5-39 | 89 | 0.6% | 79.9% |
| HV-24658-13-60-5-25 | 87 | 0.5% | 80.4% |
| HV-24664-13-60-5-36 | 86 | 0.5% | 81.0% |
| HV-23300-12-60-5-25 | 84 | 0.5% | 81.5% |
| HV-22144-11-60-5-6 | 82 | 0.5% | 82.0% |
| HV-23277-12-60-5-42 | 82 | 0.5% | 82.5% |
| HV-23297-12-60-5-6 | 82 | 0.5% | 83.0% |
| HV-23280-12-60-5-4 | 80 | 0.5% | 83.5% |
| HV-23368-12-60-5-56 | 79 | 0.5% | 84.0% |
| HV-23265-12-60-5-55 | 78 | 0.5% | 84.5% |
| HV-22139-11-60-5-6 | 77 | 0.5% | 85.0% |
| HV-22140-11-60-5-25 | 77 | 0.5% | 85.5% |
| HV-24532-13-60-5-41 | 75 | 0.5% | 86.0% |
| HV-24730-13-60-5-17 | 75 | 0.5% | 86.4% |
| HV-23387-12-60-5-25 | 74 | 0.5% | 86.9% |
| HV-22138-11-60-5-36 | 70 | 0.4% | 87.3% |
| HV-23363-12-60-5-25 | 70 | 0.4% | 87.8% |
| HV-23291-12-60-5-6 | 69 | 0.4% | 88.2% |
| HV-23388-12-60-5-18 | 66 | 0.4% | 88.6% |
| HV-24947-13-60-5-42 | 66 | 0.4% | 89.0% |
| HV-24675-13-60-5-27 | 63 | 0.4% | 89.4% |
| HV-23331-12-60-5-25 | 61 | 0.4% | 89.8% |
| HV-22131-11-60-5-19 | 60 | 0.4% | 90.2% |
| HV-23392-12-60-5-24 | 60 | 0.4% | 90.5% |
| HV-23871-12-60-5-53 | 60 | 0.4% | 90.9% |
| HV-24740-13-60-5-21 | 60 | 0.4% | 91.3% |
| HV-22141-11-60-5-41 | 59 | 0.4% | 91.7% |
| HV-22147-11-60-5-36 | 59 | 0.4% | 92.0% |
| HV-23383-12-60-5-26 | 58 | 0.4% | 92.4% |

| Grantee | Number Enrolled | Relative Percentage | Cumulative Percentage |
|---------------------|------------------------|----------------------------|------------------------------|
| HV-24537-13-60-5-36 | 58 | 0.4% | 92.8% |
| HV-23873-12-60-5-42 | 56 | 0.3% | 93.1% |
| HV-23264-12-60-5-6 | 54 | 0.3% | 93.4% |
| HV-23332-12-60-5-36 | 54 | 0.3% | 93.8% |
| HV-24729-13-60-5-36 | 53 | 0.3% | 94.1% |
| HV-24741-13-60-5-6 | 52 | 0.3% | 94.4% |
| HV-24738-13-60-5-53 | 50 | 0.3% | 94.8% |
| HV-24825-13-60-5-6 | 50 | 0.3% | 95.1% |
| HV-24597-13-60-5-24 | 48 | 0.3% | 95.4% |
| HV-24726-13-60-36 | 48 | 0.3% | 95.7% |
| HV-23276-12-60-5-9 | 47 | 0.3% | 96.0% |
| HV-24667-13-60-5-25 | 47 | 0.3% | 96.3% |
| HV-23298-12-60-5-72 | 45 | 0.3% | 96.5% |
| HV-20680-10-60-5-48 | 44 | 0.3% | 96.8% |
| HV-24945-13-60-5-26 | 40 | 0.2% | 97.1% |
| HV-23328-12-60-5-46 | 38 | 0.2% | 97.3% |
| HV-24734-13-60-5-6 | 38 | 0.2% | 97.5% |
| HV-24824-13-60-5-25 | 37 | 0.2% | 97.8% |
| HV-20685-10-60-5-6 | 35 | 0.2% | 98.0% |
| HV-20676-10-60-5-42 | 32 | 0.2% | 98.2% |
| HV-24728-13-60-5-12 | 32 | 0.2% | 98.4% |
| HV-24526-13-60-5-21 | 31 | 0.2% | 98.6% |
| HV-24727-13-60-5-6 | 27 | 0.2% | 98.7% |
| HV-20666-10-60-5-1 | 22 | 0.1% | 98.9% |
| HV-20691-10-60-5-32 | 22 | 0.1% | 99.0% |
| HV-20667-10-60-5-42 | 20 | 0.1% | 99.1% |
| HV-20675-10-60-5-55 | 18 | 0.1% | 99.3% |
| HV-20688-10-60-5-6 | 18 | 0.1% | 99.4% |
| HV-24735-13-60-5-26 | 16 | 0.1% | 99.5% |
| HV-20682-10-60-5-26 | 15 | 0.1% | 99.6% |
| HV-20678-10-60-5-53 | 14 | 0.1% | 99.7% |
| HV-20677-10-60-5-8 | 13 | 0.1% | 99.7% |
| HV-24732-13-60-5-6 | 11 | 0.1% | 99.8% |
| HV-20669-10-60-5-25 | 10 | 0.1% | 99.9% |
| HV-24827-13-60-5-15 | 10 | 0.1% | 99.9% |
| HV-20679-10-60-5-9 | 7 | 0.0% | 100.0% |
| HV-20694-10-60-5-24 | 5 | 0.0% | 100.0% |
| Total | 16001 | 100.0% | |
| Average | 103 | | |

**Appendix C-2: HVRP Participant Characteristics at Enrollment across Grantees,
PY 2009-2012**

1. HVRP Participant Characteristics at Enrollment across Grantees, PY 2009

| Participant Characteristics (at Intake) | Number | Relative Percentage | Cumulative Percentage |
|--|--------|---------------------|-----------------------|
| Gender | | | |
| Female | 682 | 5.4% | 5.4% |
| Male | 11861 | 94.6% | 100.0% |
| *Total* | 12543 | 100.0% | |
| Ethnic Background | | | |
| Caucasian | 4886 | 39.0% | 39.0% |
| African American | 6551 | 52.3% | 91.3% |
| Hispanic | 673 | 5.4% | 96.7% |
| Native American | 100 | 0.8% | 97.5% |
| Other Minority | 317 | 2.5% | 100.0% |
| *Total* | 12527 | 100.0% | |
| Age | | | |
| 18-19 | 17 | 0.1% | 0.1% |
| 20-24 | 218 | 1.7% | 1.9% |
| 25-29 | 524 | 4.2% | 6.1% |
| 30-34 | 539 | 4.3% | 10.4% |
| 35-44 | 2209 | 17.6% | 28.0% |
| 45-54 | 6233 | 49.8% | 77.8% |
| 55-64 | 2640 | 21.1% | 98.9% |
| 65+ | 142 | 1.1% | 100.0% |
| *Total* | 12522 | 100.0% | |
| Last Military Service (Years Ago) | | | |
| 0-3 | 665 | 5.3% | 5.3% |
| 4-7 | 672 | 5.4% | 10.7% |
| 8-11 | 563 | 4.5% | 15.2% |
| 12-15 | 626 | 5.0% | 20.2% |
| 16-19 | 1360 | 10.9% | 31.1% |
| 20+ | 8603 | 68.9% | 100.0% |
| *Total* | 12489 | 100.0% | |
| Other Selected Characteristics | | | |
| Economically Disadvantaged | 11496 | 96.4% | |
| Welfare Recipient | 3832 | 32.6% | |
| Homeless | 12462 | 99.4% | |
| Disabled | 2645 | 22.1% | |
| Campaign Badge | 2642 | 22.7% | |
| Recently/Newly Separated | 728 | 6.2% | |
| Stand Down | 1454 | 13.0% | |
| Chronically Homeless | 3947 | 32.9% | |
| Operation Iraqi Freedom | 743 | 6.4% | |
| Operation Enduring Freedom | 529 | 4.6% | |

2. HVRP Participant Characteristics at Enrollment across Grantees, PY 2010

| Participant Characteristics (at Intake) | Number | Relative Percentage | Cumulative Percentage |
|--|--------|---------------------|-----------------------|
| Gender | | | |
| Female | 1527 | 9.7% | 9.7% |
| Male | 14271 | 90.3% | 100.0% |
| *Total* | 15798 | 100.0% | |
| Ethnic Background | | | |
| Caucasian | 6042 | 38.2% | 38.2% |
| African American | 8193 | 51.9% | 90.1% |
| Hispanic | 1046 | 6.6% | 96.7% |
| Native American | 151 | 1.0% | 97.7% |
| Other Minority | 367 | 2.3% | 100.0% |
| *Total* | 15799 | 100.0% | |
| Age | | | |
| 18-19 | 17 | 0.1% | 0.1% |
| 20-24 | 332 | 2.1% | 2.2% |
| 25-29 | 726 | 4.6% | 6.8% |
| 30-34 | 871 | 5.5% | 12.3% |
| 35-44 | 2829 | 17.9% | 30.2% |
| 45-54 | 7589 | 48.0% | 78.3% |
| 55-64 | 3276 | 20.7% | 99.0% |
| 65+ | 157 | 1.0% | 100.0% |
| *Total* | 15797 | 100.0% | |
| Last Military Service (Years Ago) | | | |
| 0-3 | 995 | 6.3% | 6.3% |
| 4-7 | 930 | 5.9% | 12.2% |
| 8-11 | 795 | 5.0% | 17.2% |
| 12-15 | 919 | 5.8% | 23.0% |
| 16-19 | 1711 | 10.8% | 33.9% |
| 20+ | 10443 | 66.1% | 100.0% |
| *Total* | 15793 | 100.0% | |
| Other Selected Characteristics | | | |
| Economically Disadvantaged | 14598 | 94.9% | |
| Welfare Recipient | 5082 | 34.3% | |
| Homeless | 15248 | 96.6% | |
| Disabled | 2802 | 19.4% | |
| Campaign Badge | 2953 | 21.0% | |
| Recently/Newly Separated | 975 | 7.0% | |
| Stand Down | 1549 | 11.3% | |
| Chronically Homeless | 4445 | 30.9% | |
| Operation Iraqi Freedom | 1019 | 7.3% | |
| Operation Enduring Freedom | 683 | 4.9% | |

3. HVRP Participant Characteristics at Enrollment across Grantees, PY 2011

| Participant Characteristics (at Intake) | Number | Relative Percentage | Cumulative Percentage |
|--|--------|---------------------|-----------------------|
| Gender | | | |
| Female | 1670 | 10.2% | 10.2% |
| Male | 14641 | 89.8% | 100.0% |
| *Total* | 16311 | 100.0% | |
| Ethnic Background | | | |
| Caucasian | 6394 | 39.2% | 39.2% |
| African American | 8067 | 49.5% | 88.7% |
| Hispanic | 1223 | 7.5% | 96.2% |
| Native American | 199 | 1.2% | 97.4% |
| Other Minority | 428 | 2.6% | 100.0% |
| *Total* | 16311 | 100.0% | |
| Age | | | |
| 18-19 | 11 | 0.1% | 0.1% |
| 20-24 | 471 | 2.9% | 3.0% |
| 25-29 | 1081 | 6.6% | 9.6% |
| 30-34 | 1152 | 7.1% | 16.6% |
| 35-44 | 2807 | 17.2% | 33.9% |
| 45-54 | 7025 | 43.1% | 76.9% |
| 55-64 | 3568 | 21.9% | 98.8% |
| 65+ | 193 | 1.2% | 100.0% |
| *Total* | 16308 | 100.0% | |
| Last Military Service (Years Ago) | | | |
| 0-3 | 1455 | 8.9% | 8.9% |
| 4-7 | 1296 | 7.9% | 16.9% |
| 8-11 | 887 | 5.4% | 22.3% |
| 12-15 | 867 | 5.3% | 27.6% |
| 16-19 | 1524 | 9.3% | 37.0% |
| 20+ | 10276 | 63.0% | 100.0% |
| *Total* | 16305 | 100.0% | |
| Other Selected Characteristics | | | |
| Economically Disadvantaged | 14938 | 93.4% | |
| Welfare Recipient | 4843 | 32.5% | |
| Homeless | 15640 | 96.0% | |
| Disabled | 2930 | 19.8% | |
| Campaign Badge | 3225 | 21.6% | |
| Recently/Newly Separated | 1388 | 9.3% | |
| Stand Down | 1470 | 10.1% | |
| Chronically Homeless | 4046 | 27.4% | |
| Operation Iraqi Freedom | 1481 | 10.1% | |
| Operation Enduring Freedom | 1065 | 7.3% | |

4. HVRP Participant Characteristics at Enrollment across Grantees, PY 2012

| Participant Characteristics (at Intake) | Number | Relative Percentage | Cumulative Percentage |
|--|--------|---------------------|-----------------------|
| Gender | | | |
| Female | 1856 | 10.6% | 10.6% |
| Male | 15621 | 89.4% | 100.0% |
| *Total* | | | |
| Ethnic Background | | | |
| Caucasian | 6885 | 39.4% | 39.4% |
| African American | 8576 | 49.1% | 88.5% |
| Hispanic | 1434 | 8.2% | 96.7% |
| Native American | 166 | 0.9% | 97.6% |
| Other Minority | 411 | 2.4% | 100.0% |
| *Total* | 17472 | 100.0% | |
| Age | | | |
| 18-19 | 23 | 0.1% | 0.1% |
| 20-24 | 553 | 3.2% | 3.3% |
| 25-29 | 1400 | 8.0% | 11.3% |
| 30-34 | 1390 | 8.0% | 19.3% |
| 35-44 | 2951 | 16.9% | 36.2% |
| 45-54 | 6868 | 39.3% | 75.5% |
| 55-64 | 4025 | 23.0% | 98.5% |
| 65+ | 261 | 1.5% | 100.0% |
| *Total* | 17471 | 100.0% | |
| Last Military Service (Years Ago) | | | |
| 0-3 | 1914 | 11.0% | 11.0% |
| 4-7 | 1438 | 8.2% | 19.2% |
| 8-11 | 1176 | 6.7% | 25.9% |
| 12-15 | 928 | 5.3% | 31.2% |
| 16-19 | 1309 | 7.5% | 38.7% |
| 20+ | 10705 | 61.3% | 100.0% |
| *Total* | 17470 | 100.0% | |
| Other Selected Characteristics | | | |
| Economically Disadvantaged | 16232 | 94.9% | |
| Welfare Recipient | 5519 | 34.4% | |
| Homeless | 16752 | 96.0% | |
| Disabled | 3130 | 19.7% | |
| Campaign Badge | 3777 | 23.7% | |
| Recently/Newly Separated | 1850 | 11.8% | |
| Stand Down | 1125 | 7.4% | |
| Chronically Homeless | 3930 | 25.0% | |
| Operation Iraqi Freedom | 1982 | 12.7% | |
| Operation Enduring Freedom | 1433 | 9.2% | |

Appendix C-3: Participant Characteristic Terms, “Other Selected Characteristics”

Campaign Badge Veteran. A veteran who served on active duty during a war (e.g., WWII), action (e.g., Korea, Vietnam, Desert Storm, Operation Enduring Freedom), or in a campaign or expedition for which a campaign badge or an expeditionary medal has been authorized (e.g. Haiti, Somalia, Bosnia and Grenada). Campaign Veterans are deemed to be Eligible Veterans regardless of days served. A complete listing is available on the following web site maintained by the Office of Personnel Management (OPM):
<http://www.opm.gov/veterans/html/vgmedal2.asp>

Chronically Homeless. An unaccompanied homeless individual with a disabling condition who has either been continuously homeless for a year or more, OR who has had a least four (4) episodes of homelessness in the past three (3) years. In order to be considered chronically homeless, a person must have been sleeping in a place not meant for human habitation (e.g., living on the streets) and/or in an emergency homeless shelter. A disabling condition as defined as a diagnosable substance use disorder, serious mental illness, developmental disability, or chronic physical illness or disability including the co-occurrence of two (2) or more of these conditions. A disabling condition limits an individual’s ability to work or perform one (1) or more activities of daily living.

Disabled Veteran. (1) A veteran who is entitled to compensation regardless of rating, or who but for the receipt of military retired pay would be entitled to compensation, under laws administered by the Secretary, or (2) a person who was discharged or released from active duty because of a service-connected disability. Disabled Veterans are deemed to be Eligible Veterans regardless of days served.

Economically Disadvantaged. An individual who (a) receives, or is a member of a family which receives, cash welfare payments under a Federal, state, or local welfare program; (b) has, or is a member of a family which has, received a total family income for the six-month period prior to application for the program involved (exclusive of unemployment compensation, child support payments, and welfare payments) which, in relation to family size, was not in excess of the higher of (i) the official poverty line (as defined by the Office of Management and Budget, and revised annually in accordance with section 673 (2) of the Omnibus Budget Reconciliation Act of 1981 (42 U.S.C. 9902(2)), or (ii) 70 percent of the lower living standard income level; (c) is receiving (or has been determined within the 6-month period prior to the application for program involved to be eligible to receive) food stamps pursuant to the Food Stamp Act of 1977; (d) qualifies as a homeless individual under section 103 of the Stewart B. McKinney Homeless Assistance Act; (e) is a foster child on behalf of whom state or local government payments are made; or (f) in cases permitted by regulations of the Secretary of Labor, is an individual with a disability whose income meets the requirements of clause (a) or (b), but who is a member of a family whose income does not meet such requirements.

Homeless. Persons who lack a fixed, regular, and adequate nighttime residence. It also includes persons whose primary nighttime residence is either a supervised public or private shelter

designed to provide temporary living accommodations; an institution that provides a temporary residence for individuals intended to be institutionalized; or a public or private place not designed for, or ordinarily used as, a regular sleeping accommodation for human beings. [Reference 42 U.S.C., Section 11302 (a)].

Recently Separated Veteran. Refers to an individual who applies for program participation or assistance within 48 months of separation from active U.S. military service [29 U.S.C. 1503 (27) (c)].

Special Disabled Veteran. (1) A veteran who is entitled to compensation (or who but for the receipt of military retired pay would be entitled to compensation) under laws administered by the Secretary for a disability rated at (a) 30 percent or more, or (b) 10–or 20 percent in the case of a veteran who has been determined under section 3106 of this title to have a serious employment handicap; or (2) a person who was discharged or released from active duty because of a service-connected disability.

Stand Down. An event held in a local community where a variety of social services are provided to homeless veterans. Stand Down organizers partner with local businesses and social service providers such as the State Workforce Agency including the Disabled Veterans’ Outreach Program (DVOP) and Local Veterans’ Employment Representative (LVER) staff, Department of Veterans’ Affairs, Department of Health and Human Services, Federal Emergency Management Agency (emergency food and shelter grants), Veteran Service Organizations, and local non-profit organizations including faith-based and community-based organizations. The Director for Veterans’ Employment and Training Service (DVET) is a vital link to determining the needs of veterans within his/her respective State. VETS’ encourages outreach efforts by supporting local Stand Down Events. VETS allows all HVRP grantees to obligate up to \$8,000 per event per year of their existing funds or may grant awards to eligible entities that do not currently have an existing HVRP grant. The DVET is the primary point of contact for all Stand Down inquiries.

Welfare and/or Public Assistance Recipient. An individual who, during the course of the program year, receives or is a member of a family who receives cash welfare or public assistance payments under a Federal, state, or local welfare program.

Note: The definitions provided are from a Glossary of Terms that VETS developed and is part of the documentation provided on-line for the VOPAR data system, available at: <http://www.dol.gov/vets/programs/common/main.htm>.

Appendix C-4: HVRP Services Received across Grantees, PY 2009-2012

1. HVRP Services Received across Grantees, PY 2009

| Services Received | Number | Relative Percentage |
|---|--------|---------------------|
| Any Training Activity | 10666 | 85.0% |
| Job Search Assistance | 11003 | 87.7% |
| Counseling/Vocational Guidance | 10516 | 83.8% |
| Job Club Workshop | 4619 | 36.8% |
| Compensated Work Therapy | 983 | 7.8% |
| Tools/Fees/Specific Work Clothing/Boots | 5235 | 41.7% |
| Other Supportive Services | 9290 | 74.0% |
| *Total* | 12548 | 100.0% |

2. HVRP Services Received across Grantees, PY 2010

| Services Received | Number | Relative Percentage |
|---|--------|---------------------|
| Any Training Activity | 13843 | 87.6% |
| Job Search Assistance | 14483 | 91.7% |
| Counseling/Vocational Guidance | 14288 | 90.4% |
| Job Club Workshop | 5786 | 36.6% |
| Compensated Work Therapy | 1013 | 6.4% |
| Tools/Fees/Specific Work Clothing/Boots | 6718 | 42.5% |
| Other Supportive Services | 12245 | 77.5% |
| *Total* | 15802 | 100.0% |

3. HVRP Services Received across Grantees, PY 2011

| Services Received | Number | Relative Percentage |
|---|--------|---------------------|
| Any Training Activity | 13971 | 85.6% |
| Job Search Assistance | 15157 | 92.9% |
| Counseling/Vocational Guidance | 15122 | 92.7% |
| Job Club Workshop | 6152 | 37.7% |
| Compensated Work Therapy | 1070 | 6.6% |
| Tools/Fees/Specific Work Clothing/Boots | 7270 | 44.6% |
| Other Supportive Services | 12743 | 78.1% |
| *Total* | 16312 | 100.0% |

4. HVRP Services Received across Grantees, PY 2012

| Services Received | Number | Relative Percentage |
|---|--------|---------------------|
| Any Training Activity | 14541 | 83.2% |
| Job Search Assistance | 16245 | 93.0% |
| Counseling/Vocational Guidance | 15642 | 89.5% |
| Job Club Workshop | 6195 | 35.4% |
| Compensated Work Therapy | 843 | 4.8% |
| Tools/Fees/Specific Work Clothing/Boots | 7080 | 40.5% |
| Other Supportive Services | 13306 | 76.1% |
| *Total* | 17477 | 100.0% |

Appendix C-5: HVRP Service Terms, “Services Received”

Compensated Work Therapy (CWT). A Department of Veterans Affairs (DVA) sponsored program for veteran inpatients and outpatients provided for under 38 U.S.C. 1718(a). CWT incorporates a work regiment with monetary incentives. DVA reimbursements to participants who are in the program are related to their productive capabilities. Every effort is to be made to create a realistic work environment - earnings should be commensurate with wages paid in the community for essentially the same quality and quantity of work and that payments to the patient be prompt and at regular intervals. Although industrial business practices are utilized to simulate usual working conditions, therapy is still the primary objective. The Department of Labor, Veterans’ Employment and Training Service encourages and supports the use and integration of CWT to benefit the Homeless Veterans’ Reintegration Program (HVRP) and Veterans’ Workforce Investment Program (VWIP) enrolled participants by improving their job readiness. For HVRP and VWIP purposes, CWT is considered a supportive service and is not to be considered a placement into employment.

Counseling/Vocational Guidance. A form of assistance which provides guidance in the development of a participant’s vocational goals and the means to achieve those goals; and/or assist a participant with the solution to one or more individual problems that may pose a barrier(s) to sustained employment. The participant is achieving vocational goals, e.g. PTSD counseling substance abuse, counseling job training, etc.

Job Club Workshop/Activities. A form of job search assistance provided in a group setting. Usually job clubs provide instruction and assistance in completing job applications and developing resumes and focus on maximizing employment opportunities in the labor market and developing job leads. Many job clubs use telephone banks and provide group support to participants before and after they interview for job openings.

Job Search Assistance. An activity, which focuses on building practical skills and knowledge to identify and initiate employer contact and conduct successful interview with employers. Various approaches may be used to include participation in a job club, receive instruction in identifying personal strengths and goals, resume application preparation, learn interview techniques, and receive labor market information. Job search assistance is often self-service activity in which individuals obtain information about specific job openings or general jobs or occupational information.

Supportive Services. Services which are necessary to enable an individual eligible for training, but who cannot afford to pay for such services, to participate in a training program funded under the grant. Such supportive services may include transportation assistance, health care referral, financial assistance (except as a post-termination service), drug and alcohol abuse counseling and referral, individual and family counseling and referral, special services and materials for individuals with disabilities and/or barriers to employment, job coaches, financial counseling, and other reasonable expenses required for participation in the training program and may be provided in-kind or through cash assistance.

Training Activities. Any of the following activities were considered to be training activities under the HVRP reporting: Classroom Training, On-the-Job Training (OJT), Occupational Skills Training, Apprenticeship Training, Upgrading and Retraining, and Other Training. VETS “Glossary of Terms” provides definitions for the following training activities:

- A. **Classroom Training** – Any training of the type normally conducted in an institutional setting, including vocational education, which is designed to provide individuals with the technical skills and information required to perform a specific job or group of jobs. It may also include training designed to enhance the employability of individuals by upgrading basic skills, throughout the provision of courses such as remedial education, training in the primary language of persons with limited English language proficiency, or English as a second language training.
- B. **On-the-Job Training (OJT)** – Training by an employer that is provided to a paid participant while engaged in productive work in a job that: (a) provides knowledge or skill essential to the full and adequate performance of the job; (b) provides reimbursement to the employer of up to 50 percent of the wage rate of the participant, for the extraordinary costs of providing the training and additional supervision related to the participant is being trained, taking into account the content of the training, the prior work experience of the participant, and the service strategy of the participant, as appropriate. Usually in the OJT agreement, there is a promise on the part of the employer to hire the trainee upon successful completion of the training.
- C. **Occupational Skills Training** – Includes both (1) vocational education which is designed to provide individuals with the technical skills and information required to perform a specific job or group of jobs, and (2) on-the-job training.
- D. **Apprenticeship Training** – A formal occupational training program that is a structured, systematic program of on-the-job supervised training that is clearly identified and commonly recognized throughout an industry. It involves manual, mechanical or technical skills and knowledge and related instruction to supplement the on-the-job training. It may be registered or unregistered.
- E. **Upgrading or Retraining** – Training given to an individual who needs such training to advance above an entry-level or dead-end position. This training shall include assisting enrolled eligible veterans in acquiring needed state certification to be employed in the same field as they were trained in the military (i.e., Commercial Truck Driving License (CDL), Emergency Medical Technician (EMT), Airframe & Power Plant (A&P), Teaching Certificate, etc.).
- F. **Life Skills/Money Management Training** – Activities and guidance provided to enrolled participants regarding the building of life skills including personal

financial management, work ethics, development of supportive social networks, meal planning and preparation, personal hygiene and grooming, etc.

Note: The definitions provided are from a Glossary of Terms that VETS developed and is part of the documentation provided on-line for the VOPAR data system, available at:

<http://www.dol.gov/vets/programs/common/main.htm>.

Appendix C-6: Distribution of HVRP Mean Hourly Wages by Grantee, PY 2013

| Grantee | Mean Hourly Wage |
|---------------------|-------------------------|
| HV-24829-13-60-5-6 | \$17.24 |
| HV-24825-13-60-5-6 | \$16.94 |
| HV-23392-12-60-5-24 | \$16.37 |
| HV-24733-13-60-5-24 | \$16.16 |
| HV-24735-13-60-5-26 | \$16.10 |
| HV-23287-12-60-5-11 | \$15.08 |
| HV-24827-13-60-5-15 | \$15.00 |
| HV-24644-13-60-5-6 | \$14.79 |
| HV-23871-12-60-5-53 | \$14.78 |
| HV-24659-13-60-5-24 | \$14.44 |
| HV-22138-11-60-5-36 | \$14.31 |
| HV-22144-11-60-5-6 | \$14.19 |
| HV-24597-13-60-5-24 | \$14.01 |
| HV-20694-10-60-5-24 | \$14.00 |
| HV-22127-11-60-5-53 | \$13.88 |
| HV-24726-13-60-36 | \$13.83 |
| HV-24667-13-60-5-25 | \$13.58 |
| HV-24729-13-60-5-36 | \$13.55 |
| HV-23290-12-60-5-6 | \$13.47 |
| HV-24739-13-60-5-48 | \$13.30 |
| HV-24520-13-60-5-36 | \$13.28 |
| HV-22147-11-60-5-36 | \$13.26 |
| HV-23299-12-60-5-27 | \$13.08 |
| HV-24519-13-60-5-36 | \$13.07 |
| HV-23263-12-60-5-48 | \$13.05 |
| HV-23329-12-60-5-26 | \$13.02 |
| HV-22133-11-60-5-6 | \$12.97 |
| HV-24662-13-60-5-6 | \$12.96 |
| HV-23297-12-60-5-6 | \$12.89 |
| HV-23369-12-60-5-11 | \$12.77 |
| HV-22146-11-60-5-6 | \$12.74 |
| HV-23303-12-60-5-6 | \$12.73 |
| HV-22130-11-60-5-41 | \$12.72 |
| HV-23301-12-60-5-25 | \$12.71 |
| HV-23373-12-60-5-17 | \$12.69 |
| HV-22139-11-60-5-6 | \$12.68 |
| HV-23387-12-60-5-25 | \$12.64 |
| HV-24671-13-60-5-24 | \$12.62 |
| HV-24824-13-60-5-25 | \$12.61 |
| HV-23367-12-60-5-48 | \$12.50 |
| HV-23271-12-60-5-24 | \$12.43 |
| HV-23284-12-60-5-6 | \$12.41 |
| HV-24728-13-60-5-12 | \$12.39 |
| HV-24730-13-60-5-17 | \$12.37 |
| HV-20677-10-60-5-8 | \$12.32 |

| Grantee | Mean Hourly Wage |
|---------------------|-------------------------|
| HV-24665-13-60-5-12 | \$12.24 |
| HV-23274-12-60-5-34 | \$12.16 |
| HV-22142-11-60-5-25 | \$12.15 |
| HV-23365-12-60-5-48 | \$12.14 |
| HV-24732-13-60-5-6 | \$12.11 |
| HV-24727-13-60-5-6 | \$12.11 |
| HV-24604-13-60-5-15 | \$12.08 |
| HV-23332-12-60-5-36 | \$12.07 |
| HV-23391-12-60-5-6 | \$12.06 |
| HV-22141-11-60-5-41 | \$12.04 |
| HV-23279-12-60-5-17 | \$12.03 |
| HV-20688-10-60-5-6 | \$11.93 |
| HV-23264-12-60-5-6 | \$11.92 |
| HV-20685-10-60-5-6 | \$11.92 |
| HV-22140-11-60-5-25 | \$11.89 |
| HV-23269-12-60-5-17 | \$11.87 |
| HV-24734-13-60-5-6 | \$11.87 |
| HV-23368-12-60-5-56 | \$11.85 |
| HV-23262-12-60-5-8 | \$11.85 |
| HV-23873-12-60-5-42 | \$11.82 |
| HV-23331-12-60-5-25 | \$11.79 |
| HV-24534-13-60-5-6 | \$11.78 |
| HV-23330-12-60-5-17 | \$11.78 |
| HV-24741-13-60-5-6 | \$11.77 |
| HV-22132-11-60-5-12 | \$11.72 |
| HV-22134-11-60-5-48 | \$11.69 |
| HV-23275-12-60-5-55 | \$11.66 |
| HV-22125-11-60-5-9 | \$11.59 |
| HV-22136-11-60-5-6 | \$11.59 |
| HV-23393-12-60-5-6 | \$11.52 |
| HV-24532-13-60-5-41 | \$11.48 |
| HV-24736-13-60-5-39 | \$11.48 |
| HV-23276-12-60-5-9 | \$11.46 |
| HV-23266-12-60-5-51 | \$11.45 |
| HV-24658-13-60-5-25 | \$11.44 |
| HV-22148-11-60-5-25 | \$11.44 |
| HV-23270-12-60-5-6 | \$11.44 |
| HV-20675-10-60-5-55 | \$11.43 |
| HV-22143-11-60-5-33 | \$11.42 |
| HV-24738-13-60-5-53 | \$11.37 |
| HV-23389-12-60-5-25 | \$11.37 |
| HV-23289-12-60-5-36 | \$11.35 |
| HV-24663-13-60-5-44 | \$11.34 |
| HV-23366-12-60-5-48 | \$11.29 |
| HV-23291-12-60-5-6 | \$11.23 |
| HV-24670-13-60-5-26 | \$11.19 |
| HV-24657-13-60-5-18 | \$11.17 |
| HV-22131-11-60-5-19 | \$11.15 |

| Grantee | Mean Hourly Wage |
|---------------------|-------------------------|
| HV-24526-13-60-5-21 | \$11.15 |
| HV-20680-10-60-5-48 | \$11.13 |
| HV-20682-10-60-5-26 | \$11.08 |
| HV-23325-12-60-5-17 | \$11.08 |
| HV-20691-10-60-5-32 | \$10.96 |
| HV-24529-13-60-5-17 | \$10.94 |
| HV-23300-12-60-5-25 | \$10.93 |
| HV-22149-11-60-5-15 | \$10.91 |
| HV-23277-12-60-5-42 | \$10.90 |
| HV-23385-12-60-5-42 | \$10.88 |
| HV-24661-13-60-5-35 | \$10.83 |
| HV-24523-13-60-5-8 | \$10.82 |
| HV-23876-12-60-5-12 | \$10.81 |
| HV-24826-13-60-5-48 | \$10.72 |
| HV-23268-12-60-5-41 | \$10.72 |
| HV-24530-13-60-5-26 | \$10.71 |
| HV-24664-13-60-5-36 | \$10.69 |
| HV-22135-11-60-5-39 | \$10.60 |
| HV-20667-10-60-5-42 | \$10.59 |
| HV-23326-12-60-5-39 | \$10.56 |
| HV-24673-13-60-5-42 | \$10.54 |
| HV-23371-12-60-5-26 | \$10.54 |
| HV-24945-13-60-5-26 | \$10.52 |
| HV-22137-11-60-5-32 | \$10.51 |
| HV-23273-12-60-5-22 | \$10.49 |
| HV-23280-12-60-5-4 | \$10.49 |
| HV-24946-13-60-5-39 | \$10.47 |
| HV-23386-12-60-5-22 | \$10.44 |
| HV-23384-12-60-5-47 | \$10.43 |
| HV-24947-13-60-5-42 | \$10.42 |
| HV-23370-12-60-5-13 | \$10.40 |
| HV-23296-12-60-5-12 | \$10.35 |
| HV-22145-11-60-5-36 | \$10.34 |
| HV-23282-12-60-5-18 | \$10.32 |
| HV-23278-12-60-5-36 | \$10.27 |
| HV-24656-13-60-5-48 | \$10.27 |
| HV-24618-13-60-5-39 | \$10.25 |
| HV-24675-13-60-5-27 | \$10.24 |
| HV-23272-12-60-5-36 | \$10.22 |
| HV-23363-12-60-5-25 | \$10.10 |
| HV-23327-12-60-5-45 | \$10.02 |
| HV-23364-12-60-5-19 | \$9.97 |
| HV-20669-10-60-5-25 | \$9.94 |
| HV-20678-10-60-5-53 | \$9.93 |
| HV-24674-13-60-5-42 | \$9.91 |
| HV-23388-12-60-5-18 | \$9.80 |
| HV-22128-11-60-5-48 | \$9.79 |
| HV-23281-12-60-5-12 | \$9.78 |

| Grantee | Mean Hourly Wage |
|---------------------|---------------------------------|
| HV-23265-12-60-5-55 | \$9.77 |
| HV-23333-12-60-5-42 | \$9.74 |
| HV-24522-13-60-5-40 | \$9.71 |
| HV-24731-13-60-5-13 | \$9.68 |
| HV-24944-13-60-5-13 | \$9.62 |
| HV-24537-13-60-5-36 | \$9.58 |
| HV-23372-12-60-5-21 | \$9.38 |
| HV-23328-12-60-5-46 | \$9.32 |
| HV-20666-10-60-5-1 | \$9.14 |
| HV-23383-12-60-5-26 | \$9.13 |
| HV-24740-13-60-5-21 | \$9.12 |
| HV-20676-10-60-5-42 | \$8.45 |
| HV-24672-13-60-5-1 | \$8.28 |
| HV-20679-10-60-5-9 | \$8.25 |
| HV-23298-12-60-5-72 | \$7.63 |

Appendix C-7: VOPAR DOL-VETS Competitive Grants Participant Tracking Sheet

Participant ID: _____
 Participant Name: _____

Assessment Date/Quarter: _____ 1st 2nd 3rd 4th
 Enrollment Date/Quarter: _____ 1st 2nd 3rd 4th
 Placement Date/Quarter: _____ 1st 2nd 3rd 4th
 Quarter Exited: _____ 1st 2nd 3rd 4th
 Hourly Wage at Placement: _____

Green Job (if applicable):

- Energy-efficient building, construction, and retrofits industries
- Renewable electric power industry
- Energy efficient and advanced drive train vehicle industry
- Bio-fuels industry
- Deconstruction and materials use industries
- Energy efficiency assessment industry serving the residential, commercial, or industrial sectors
- Manufacturers that produce sustainable products using environmentally sustainable processes and materials
- Other _____ (Describe in quarterly TPR)

Demographics:

Gender: Male Female

Ethnic Background: Caucasian African American Hispanic
 Native American Other Minority

DOB/Age: _____ 18-19 20-24 25-29 30-34
 35-44 45-54 55-64 65+

Last Military Service (Yrs Ago): 0-3 4-7 8-11 12-15
 16-19 20+

Other Subgroups (check all that apply):

- Economically Disadvantaged
- Welfare Recipient
- Homeless
- Disabled
- Special Disabled
- Campaign Badge
- Recently/Newly Separated
- Stand-Down
- Chronically Homeless
- Operation Iraqi Freedom
- Operation Enduring Freedom

Quarter Placed in Transitional or Permanent Housing: 1st 2nd 3rd 4th
 Quarter Referred to VA for Benefits: 1st 2nd 3rd 4th

If applicable, check the quarter the training or service was first provided to the participant:

Any Training Activity (other than Life Skills/Money Mgmt.) 1st 2nd 3rd 4th
 Job Search Assistance 1st 2nd 3rd 4th
 Counseling/Vocational Guidance 1st 2nd 3rd 4th
 Job Club Workshop 1st 2nd 3rd 4th
 Compensated Work Therapy 1st 2nd 3rd 4th
 Tools/Fees/Specific Work Clothing/Boots 1st 2nd 3rd 4th
 Other Supportive Services 1st 2nd 3rd 4th

Appendix C-8: Additional Regressions Models Tested

| Appendix C-8a: Logistic Regression: Effect of Program Year, Gender, Race/Ethnicity, Age, and Subgroup Characteristics on Job Placement: Program Years 2009 Through 2013 | | |
|---|-----------|------------|
| Independent Variables | Estimates | Odds Ratio |
| Program Year (Ref: PY2009) | | |
| PY2010 | -.007 | .993 |
| PY2011 | .277*** | 1.319 |
| PY2012 | .262*** | 1.299 |
| PY2013 | .227*** | 1.254 |
| Gender (1= <i>female</i>) | -.290*** | .748 |
| Ethnicity (Ref: Caucasian) | | |
| African American | .094*** | 1.099 |
| Hispanic | -.002 | .998 |
| Native American | -.315*** | .730 |
| Other Minority | -.048 | .953 |
| Age (Ref: 18-24) | | |
| 25-34 | .011 | 1.011 |
| 35-44 | .040 | 1.041 |
| 45-54 | -.111** | .895 |
| 55-64 | -.345*** | .708 |
| 65+ | -.868*** | .420 |
| Welfare Recipient (1= <i>yes</i>) | -.201*** | .818 |
| Disabled (1= <i>yes</i>) | -.304*** | .738 |
| Campaign Badge (1= <i>yes</i>) | -.055** | .947 |
| Recently/Newly Separated (1= <i>yes</i>) | -.015 | .985 |
| Chronically Homeless (1= <i>yes</i>) | -.095*** | .909 |
| Operation Iraqi Freedom (1= <i>yes</i>) | .069* | 1.072 |
| Operation Enduring Freedom (1= <i>yes</i>) | .039 | 1.040 |
| Constant | .612*** | 1.843 |

Note: The dependent variable in this analysis is placement into employment.

N=68,227.

Model $\chi^2 = 1270.427$, $p < 0.001$.

-2 Log Likelihood = 89168.268.

* $P < .10$, ** $p < .05$, *** $p < .01$.

Ref=Reference Category.

| Appendix C-8b: Linear Probability Regression: Effect of Program Year, Gender, Race/Ethnicity, Age, and Subgroup Characteristics on Job Placement: Program Years 2009 Through 2013 | | |
|--|----------|----------|
| Independent Variables | B | T |
| (Constant) | .641*** | 48.117 |
| Program Year (Ref: PY2009) | | |
| PY2010 | -.001 | -.106 |
| PY2011 | .065*** | 10.674 |
| PY2012 | .062*** | 10.296 |
| PY2013 | .054*** | 8.918 |
| Gender (1=female) | -.068*** | -10.666 |
| Race/Ethnicity (Ref: Caucasian) | | |
| African American | .022*** | 5.574 |
| Hispanic | .000 | -.006 |
| Native American | -.075*** | -3.908 |
| Other Minority | -.011 | -.920 |
| Age (Ref: 18-24) | | |
| 25-34 | .007 | .524 |
| 35-44 | .014 | 1.063 |
| 45-54 | -.020 | -1.627 |
| 55-64 | -.076*** | -5.867 |
| 65+ | -.204*** | -10.018 |
| Welfare Recipient (1=yes) | -.047*** | -11.780 |
| Disabled (1=yes) | -.072*** | -15.194 |
| Campaign Badge (1=yes) | -.013** | -2.486 |
| Recently/Newly Separated (1=yes) | -.002 | -.288 |
| Chronically Homeless (1=yes) | -.022*** | -5.190 |
| Operation Iraqi Freedom (1=yes) | .016** | 1.973 |
| Operation Enduring Freedom (1=yes) | .009 | .994 |

Note: The dependent variable in this analysis is placement into employment.

N=68,268.

F-ratio: 61.869; P-value: 0.000

R: 0.137; Squared R: 0.019; Adjusted Squared R: 0.018.

*P<.10, **p<.05, ***p<.01.

Ref=Reference Category.

Exhibit C-8c: Effect of Program Year, Gender, Race/Ethnicity, Age and Subgroup Characteristics on Hourly Wage at Placement: Program Years 2009 Through 2013

| Independent Variables | B | t |
|------------------------------------|-----------|---------|
| (Constant) | 10.060*** | 62.576 |
| Program Year (Ref: PY2009) | | |
| PY2010 | -.012 | -.150 |
| PY2011 | -.069 | -.918 |
| PY2012 | .238*** | 3.195 |
| PY2013 | .294*** | 3.906 |
| Gender (1=female) | .487*** | 6.063 |
| Race/Ethnicity (Ref: Caucasian) | | |
| African American | -.286*** | -5.919 |
| Hispanic | .483*** | 5.233 |
| Native American | .340 | 1.330 |
| Other Minority | .629*** | 4.231 |
| Age (Ref: 18-24) | | |
| 25-34 | .916*** | 6.171 |
| 35-44 | 1.717*** | 11.208 |
| 45-54 | 1.437*** | 9.514 |
| 55-64 | 1.138*** | 7.325 |
| 65+ | 1.238*** | 4.458 |
| Welfare Recipient (1=yes) | -.628*** | -12.731 |
| Disabled (1=yes) | .118* | 1.942 |
| Campaign Badge (1=yes) | .436*** | 6.948 |
| Recently/Newly Separated (1=yes) | .362*** | 3.585 |
| Chronically Homeless (1=yes) | -.399*** | -7.552 |
| Operation Iraqi Freedom (1=yes) | .424*** | 4.380 |
| Operation Enduring Freedom (1=yes) | .320*** | 2.994 |

Note: The dependent variable in this analysis is adjusted hourly wage at placement. Nominal wages are converted to real wages using 2013 as base year.

N=42,386.

F-ratio: 39.607; P-value: 0.000.

R: 0.139; Squared R: 0.019; Adjusted Squared R: 0.019.

*P<.10, **p<.05, ***p<.01.

Ref=Reference Category.

Appendix C-9: Additional Analyses of Wage Record Data and VOPAR Data in One HVRP Grantee Site

Exhibit C-9a: Quarterly Comparison of Employment Outcomes Using VOPAR Versus UI Wage Record Data, PY 2012 and PY 2013, One Urban HVRP Grantee

| Placement Quarter | A | B | C | D |
|------------------------------------|---|---|--|---|
| | # of HVRP Participants Indicated as Placed in VOPAR for Quarter | # of HVRP Participants Indicated as Placed in VOPAR and also Employed in UI Wage Records Data for Quarter | # of HVRP Participants Indicated as Not Placed in VOPAR, but Employed in UI Wage Record Data for Quarter | # of HVRP Participants Indicated as Employed in UI Wage Record Data for Quarter |
| PY 2012 Participants Placed | | | | |
| Quarter 1 (7/1/2012 - 9/31/2012) | 27 | 10 | 2 | 12 |
| Quarter 2 (10/1/2012 - 12/31/2012) | 31 | 12 | 2 | 14 |
| Quarter 3 (1/1/2013 - 3/31/2013) | 23 | 8 | 5 | 13 |
| Quarter 4 (3/1/2013 - 6/30/2013) | 29 | 11 | 6 | 17 |
| *PY 2012 Placements* | 110 | 41 | 15 | 56 |
| *PY 2012 Enrollments* | 154 | | | 154 |
| *PY 2012 Placement Rate* | 71.4% | | | 36.4% |
| | | | | |
| PY 2013 Participants Placed | | | | |
| Quarter 1 (7/1/2013 - 9/31/2013) | 20 | 13 | 0 | 13 |
| Quarter 2 (10/1/2013 - 12/31/2013) | 17 | 6 | 1 | 7 |
| Quarter 3 (1/1/2014 - 3/31/2014) | 20 | 12 | 1 | 13 |
| Quarter 4 (3/1/2014 - 6/30/2014) | 18 | 9 | 1 | 10 |
| *PY 2013 Placements* | 75 | 40 | 3 | 43 |
| *PY 2013 Enrollments* | 90 | | | 90 |
| *PY 2013 Placement Rate* | 83.3% | | | 47.8% |

Note: The number of participant enrollments above is a subgroup of total participants for each program year because Social Security numbers were not available for all participants.

**Exhibit C-9b: Earnings of Employed HVRP Participants in Quarter of Placement Using
UI Wage Record Data, PY 2012 and PY 2013,
One Urban HVRP Grantee**

| Placement Quarter (PY 2012) | Mean Quarterly Earnings of Employed HVRP Participants (in Placement Quarter) | Mean quarterly Hours of Employment in Placement Quarter | Hourly Earnings Using Quarterly Hours and Earnings Information) |
|------------------------------------|---|--|--|
| Quarter 1 (7/1/2012 - 9/31/2012) | \$9,705 | 423 | \$22.94 |
| Quarter 2 (10/1/2012 - 12/31/2012) | \$4,202 | 303 | \$13.87 |
| Quarter 3 (1/1/2013 - 3/31/2013) | \$5,786 | 368 | \$15.72 |
| Quarter 4 (3/1/2013 - 6/30/2013) | \$3,722 | 254 | \$14.65 |

| Placement Quarter (PY 2013) | Mean Quarterly Earnings of Employed HVRP Participants (in Placement Quarter) | Mean quarterly Hours of Employment in Placement Quarter | Hourly Earnings (using quarterly hours and earnings information) |
|------------------------------------|---|--|---|
| Quarter 1 (7/1/2013 - 9/31/2013) | \$6,124 | 353 | \$17.35 |
| Quarter 2 (10/1/2013 - 12/31/2013) | \$5,640 | 265 | \$21.28 |
| Quarter 3 (1/1/2014 - 3/31/2014) | \$5,849 | 397 | \$14.73 |
| Quarter 4 (3/1/2014 - 6/30/2014) | \$5,789 | 343 | \$16.88 |