



COMMONWEALTH of VIRGINIA

Department of Veterans Services

John Maxwell
Commissioner

Telephone: (804) 786-0220
Fax: (804) 786-0302

October 1, 2021

Delivered via electronic mail

The Honorable Ralph S. Northam
Governor, Commonwealth of Virginia
Richmond, VA 23219

The Honorable Kathleen T. Jabs
Acting Secretary of Veterans and Defense Affairs
Richmond, VA 23219

The Honorable Eileen D. Filler-Corn
Speaker of the Virginia House of Delegates
Richmond, Virginia 23219

The Honorable L. Louise Lucas
President Pro Tempore, Senate of Virginia
Richmond, Virginia 23219

Re: Annual report on the Virginia Department of Veterans Services (VDVS) – Virginia Veteran and Family Support (VVFS) Program

Dear Governor Northam, Secretary Jabs, Delegate Filler-Corn, and Senator Lucas:

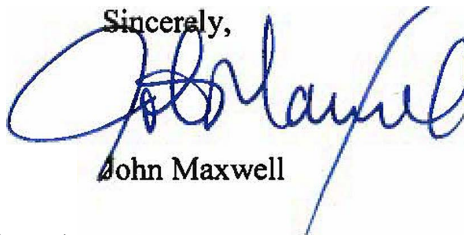
The Virginia Department of Veterans Services (VDVS) – Virginia Veteran and Family Support (VVFS) program provides outreach, connection, and support to veterans, members of the National Guard and Reserves, and their families. VVFS addresses the challenges of military and post-military service, transition, deployments, Post Traumatic Stress, and other behavioral health concerns, as well as Traumatic Brain Injuries and other physical injuries

VDVS operates VVFS in conjunction with the Department of Behavioral Health and Developmental Services (DBHDS) and the Department for Aging and Rehabilitative Services (DARS). Other state agencies, such as the Department of Military Affairs (DMA), the Department of Social Services (DSS), and the Virginia Department of Health (VDH), are vital partners, as are the U.S. Department of Veterans Affairs (VA), Virginia's Community Services Boards (CSBs), homeless Continuums of Care (CoC), and organizations such as the Virginia Hospital & Healthcare Association (VHHA).

The Code of Virginia, §2.2-2001.1(D) directs that VDVS report annually program results to the Governor, Secretary of Veterans and Defense Affairs, and the General Assembly. The attached pages provide that information for your review.

Governor Northam, Acting Secretary Jabs, Delegate Filler-Corn, and Senator Lucas
October 1, 2021
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VDVS is grateful for your support and we look forward to addressing any questions and concerns.

Sincerely,

John Maxwell

Attachment: VVFS 2021 Annual Report

Cc: Ms. Alison G. Land, Commissioner, DBHDS
Ms. Kathryn A. Hayfield, Commissioner, DARS
Mr. Michael Dick, Chairman, Board of Veterans Services
Ms. Denice Williams, Acting Chairman, Joint Leadership Council of Veterans Service Organizations

VIRGINIA DEPARTMENT OF VETERANS SERVICES

2021 ANNUAL REPORT

**ON THE VIRGINIA VETERAN AND FAMILY SUPPORT
PROGRAM**

TO

GOVERNOR RALPH S. NORTHAM,

ACTING SECRETARY KATHLEEN T. JABS,

AND

THE VIRGINIA GENERAL ASSEMBLY

October 1, 2021

THE VIRGINIA VETERAN AND FAMILY SUPPORT PROGRAM

MISSION

To monitor and provide resource connections and care coordination for behavioral health, rehabilitative, and other related supportive services to Virginia veterans, National Guard, Armed Forces Reserves, caregivers, and families.

ACTIVITIES

The Virginia Veteran and Family Support (VVFS) program is a focused response to the growing need to improve and expand services to our nation's veterans and their family members coping with the impact of deployment, military service, Post-Traumatic Stress Disorder (PTSD), and operational stress and/or traumatic brain injury (TBI). It is operated by the Virginia Department of Veterans Services (VDVS) in cooperation with the Department of Behavioral Health and Developmental Services (DBHDS) and the Department for Aging and Rehabilitative Services (DARS). VVFS serves veterans of all eras who are Virginia residents, members of the Virginia National Guard or Armed Forces Reserves (not in active federal service), and their family members.

The purpose and priorities of the VVFS program are:

- Build awareness of veterans service needs, and of VVFS as a resource to help address those needs, through marketing, outreach, and training for first responders, service providers and others;
- Collaborate with relevant agencies of the Commonwealth, localities, and service providers;
- Develop and implement a consistent method of determining how many veterans in the Commonwealth are currently in need of mental health, physical rehabilitation, or other services, or may be in need of such services in the future;
- Work with veterans to develop a coordinated resources plan that identifies appropriate service providers to meet the veteran's service needs;
- Refer veterans to appropriate and available providers on the basis of needs identified in the coordinated resources plan; and
- Monitor progress toward individually identified goals in accordance with the coordinated resource plan.

In 2021, VVFS continued investing in its partnerships with federal, state, and community partners to connect service members, veterans, and their families (SMVF) to resources and services. Due to COVID-19, VVFS shifted services to provide increased virtual care coordination to SMVF in need of resources while offering in-person services as needed. Through the Governor's Challenge and the Mayor's Challenge to Prevent Suicide among Service Members, Veterans, and their Families in Virginia, VVFS expanded virtual training, such as Military Culture Competency

(MCC) and Crisis Intervention Training (CIT), to state agencies and community partners to enhance knowledge and resource connections.

Creating continuums of care for SMVF for behavioral health, rehabilitative, and supportive services is a priority for VVFS; in doing so, the program is an important port of entry for SMVF to quickly access services when needed.

VVFS continues its partnership with the Department of Social Services and Virginia 2-1-1 to enhance the statewide 2-1-1 system. With additional call specialists, increased training on military and veteran competency, and increased collection of data, the 2-1-1 system is better able to connect veterans 24/7 to community, state, and federal resources. The system connected 4,755 veterans, active duty military, and their family members to services in FY21. The majority of referral needs were for utility and housing assistance, social services, and job-related services.

Governor’s Challenge and Mayor’s Challenge to Prevent Suicide Among Service Members, Veterans, and their Families

VVFS has continued its efforts as members of the [Governor’s Challenge and the Mayor’s Challenge to Prevent Suicide Among Service Members, Veterans and their Families](#). The City of Richmond was one of the first eight cities in the nation to join the Mayor’s Challenge, and Virginia was one of the first seven states to participate in the Governor’s Challenge. The United States Department of Veterans Affairs (USDVA) and the Department of Health and Human Services’ (HHS) Substance Abuse and Mental Health Services Administration (SAMHSA) sponsor both of these initiatives.

The Virginia team is implementing the USDVA’s [National Strategy for the Prevention of Veteran Suicide](#), which provides a framework for using a comprehensive public health approach to address the growing public health challenge among the veteran population. Secretary Daniel Carey, Health and Human Resources, and Acting Secretary Kathleen Jabs, Veterans and Defense Affairs, co-lead the Governor’s Challenge team in Virginia.

Nationwide, Governor’s Challenge teams focus on three main priorities:

1. To identify SMVF and screen for suicide risk
2. To promote connectedness and improve care transitions
3. To increase lethal means safety and safety planning

Tying into these national priorities, the theme of the Virginia’s Governor’s Challenge team is the “3C’s – *Care, Connect, and Communicate*”:

- Care: The provision of accessible and culturally competent behavioral health services.
 - Strategy: Identify, screen, and refer SMVF at risk of suicide in community services.
- Connect: Bringing military/veteran specific and community services together; forming systemic partnerships.

- *Strategy*: Increase engagement between VA Veterans Health Administration (VHA), Virginia Department of Veterans Services (VDVS), and partner organizations for SMVF referrals.
- *Communicate*: Educating the SMVF population on resources and behavioral health providers on military culture and suicide prevention best practices.
 - *Strategy*: Expand lethal means safety (particularly firearm safety) training to community stakeholders.

As part of the Governor’s Challenge, VVFS and the Benefits Division of VDVS joined *Virginia’s Identify SMVF, Screen for Suicide Risk, and Refer for Services (VISR)* pilot. The goal of the VISR pilot was to develop military culture, suicide prevention, and safety planning infrastructure in community agencies, including hospitals, local departments of social services, Community Service Boards (CSBs).

As part of the VISR initiative, VVFS trains all new VDVS Benefits staff in suicide prevention, risk screening, and safety planning. In addition, VVFS staff promote military culture and suicide prevention best practices among community partners such as Veterans Service Organizations, human services providers, employment support and faith-based programs. This includes Military Cultural Competency (MCC) and Transition Awareness Training for state and community agencies. VVFS provided both virtual and in-person training in response to COVID-19 and trained over 1,400 in MCC in FY21

During the initial VISR pilot screening phase (February – August, 2020), VISR pilot partner agencies identified 3,014 SMVF, of whom 2,311 were screened for suicide risk; 30% of those screened were at risk of suicide (defined as at least low risk, but also includes individuals at moderate and high risk). At-risk individuals were linked to behavioral health and supportive services responsive to their level of need. Prior to VISR pilot training and infrastructure development in these community agencies, some of these individuals may have been missed and at risk of crisis or suicide without life-saving support.

VISR SMVF Totals for February - August 2020 (Totals Across Sectors)	
Served	3,014
Screened for Suicide	2,311
Screened at Risk	696
Safety Plan Established	619
Referred to VHA	42
Referred to Military Treatment Facility (MTF)	18
Referred to VDVS	104

Since the end of the VISR pilot in August 2020, VVFS expanded risk screening in the Benefits service line from eight staff in the initial pilot to 77 staff members by July 2021. VVFS developed the training (suicide prevention, risk screening, and safety planning) and referral protocol (to VVFS for non-emergent needs and to the Veterans Crisis Line for urgent support) for the expansion among existing Benefits staff and now trains all new hires.

The table below shows the major increase in the total number of SMVF (426) screened for suicide risk during the initial phase (February-August 2020) of the VISR pilot by eight Benefits staff members compared to the total screened (412) in just the month of July 2021 by 77 staff. In July 2021, 61 individuals screened at risk of suicide and the VVFS and Benefits teams linked them behavioral health resources. This expansion helps ensure that the Benefits team is less likely to miss someone that is struggling and can collaborate with VVFS to link them to support to prevent a crisis or suicide.

Suicide Risk Level (C-SSRS)	February – August 2020 (total VSRs screening = 8)	July 2021 (total VSRs Screening = 77)
No risk	378	351
Low risk	40	48
Moderate risk	6	13
High risk	2	0
Total	426	412

To grow the best practices identified through the initial VISR Pilot in local communities in the Commonwealth, VVFS is coordinating the next phase of the VISR (2.0) for the Governor’s Challenge to Prevent Suicide team.

VVFS consulted with multiple states on the VISR pilot including KY, MD, MN, NC, NY, and WI. Staff also distributed VDVS/USDVA resource business cards that list the USDVA Suicide Crisis Hotline on one side and VVFS contact information for non-crisis services on the other. VVFS, DBHDS, and the USDVA disseminated the cards to State Police, local police departments, first responders, and other service providers across the Commonwealth.

SUPPORTIVE SERVICES

VVFS provides hands-on assistance navigating behavioral health, rehabilitative, and other supportive services, including peer and family support services to the most vulnerable veterans. This includes justice-involved veterans and those at risk for, or experiencing homelessness.

VVFS focuses supportive services in five areas:

1. **Case coordination and management;**
2. **Housing and Homeless Services;**
3. **Justice Involved Services program (JIS);**
4. **Mission: Healthy Relationships and Mission: Healthy Families (MHR, MHF);**
5. **Veteran Peer Support (VPS) Services**

CASE COORDINATION AND MANAGEMENT: REGIONAL HIGHLIGHTS

VVFS consists of four regions, which provide the core services of resource connections, care coordination, peer and group support to veterans and their family members. Following are some of the regional capacity building initiatives that VVFS supports:

- **STEP VA:** VVFS is assisting DBHDS and CSBs with the military and veterans services component of System Transformation Excellence and Performance in Virginia (STEP VA) in the public mental health system. As part of STEP VA, CSBs will increase clinical services and suicide prevention among SMVF. VVFS staff provide military culture and resource training to CSB staff, and partner on care coordination and peer support services delivery. VVFS staff also assist CSBs with building internal capacity for SMVF services through staff recruitment and training.
- **Crisis Intervention Team (CIT) Training:** VVFS staff provide SMVF crisis intervention training to partner agencies, law enforcement, and first responders. This training builds capacity in communities and solidifies partnerships throughout the regions for referral resources and care coordination. CIT training provides the program with referrals at vital intercept points to connect veterans experiencing crises to care treatment and other related supportive services.
- **Virginia National Guard:** VVFS staff continue to support ongoing planning and training with the Virginia National Guard. Through the Commander's Ready and Resilient Council (CR2C) and with the Risk Reduction, Readiness and Suicide Prevention (R3SP) office, VVFS streamlines behavioral health and supportive services referral partnerships with Readiness Centers and units statewide. In addition, over the last year, VVFS and DBHDS helped the R3SP office implement the Lock and Talk Virginia Lethal Means Safety (LMS) campaign. Suicide Intervention Officers in each unit were trained in LMS and distributed gunlocks and medication lock boxes to Service Members and families to increase safety and suicide prevention.
- **Military Cultural Competency (MCC) Training:** VVFS staff provide MCC training to community agencies, state agencies, and other providers serving veterans. VVFS is the lead MCC trainer for the VISR pilot through the Governor's Challenge for Suicide Prevention. This training builds provider knowledge in serving SMVF and provides information on key resource connections including outreaching VVFS services.

COVID-19:

In FY21, VVFS maintained a hybrid posture through both virtual services and in-person services to meet different needs while prioritizing safety. In addition to ongoing care coordination, staff invested significant effort in maintaining real-time awareness on service partner and resource operational posture, adjusting referrals and client advocacy accordingly. With clients, staff observed a decrease in new clients, but an increase in returning clients and the length of time working with these clients. By June, client referrals had increased noticeably, though lengths of interaction remain longer than pre-COVID. Given the community-based nature of VVFS, staff were more equipped to shift to both full-time telework and later hybrid operations. A small number of key barriers were identified (relating largely to paper documents and internet access),

but most have been resolved on a case-by-case basis and operations otherwise continue with only minor limitations.

VVFS North Region serves approximately 218,200 veterans and their families in 14 counties and six independent cities in Northern Virginia.

The North Region team is comprised of 12 team members: a Regional Director, Assistant Regional Manager, Senior Resource Specialist, Veteran Justice Specialist, two Veteran Peer Specialists, and six Resource Specialists, , strategically located in five VDVS offices (Fairfax, Loudoun, Manassas, Springfield, and Strasburg).

Due to the close proximity to 21 active duty military bases, the Pentagon, and Washington D.C, staff experienced a high demand for assistance for veterans and family members, particularly with mental health needs and related supportive services. In response, the region provides a high level of peer support, including groups, and care coordination for mental health.

In 2021, the region will increase its capacity of direct service staff to meet increased needs of veterans and family members in Northern Virginia. This included a new veteran peer specialist and two resource specialists. These increases in direct service staff resulted in the expansion of the DVS Manassas Office as well as the Strasburg office which is scheduled to move to Winchester.

Due to high population of veterans experiencing PTSD and TBI— particularly Operation Iraqi Freedom(OIF)/Operation Enduring Freedom(OEF) veterans —Peer Support Services have been pivotal to supporting the mental health needs and recovery of these veterans. Since the onset of the pandemic, the region transitioned its in-person peer support groups to a virtual format to continue meeting the needs of these veterans.

VVFS connects veterans and family members to licensed mental health clinicians who have experience working with veterans with PTSD and TBI. The region has established a network of nearly 20 clinicians to assist in bridging these barriers to mental health treatment. Due to COVID-19, many of the providers are offering telehealth services. The region leverages the Veteran Services Foundation for assessments and treatment to veterans who cannot access the VA and have financial barriers.

Regional staff continue to coordinate with six local homeless continua of care (CoC), the Washington D.C. VA Medical Center (VAMC), and the Martinsburg VAMC homeless services teams to connect veterans experiencing homelessness to permanent housing. Staff are active in meetings of Unite-Us Serving Together Collaborative and Homeless Veterans By-Name Housing to assist in care coordination with Supportive Services for Veteran Families (SSVF) and other CoC partners.

Staff are part of the treatment teams for both the Fairfax County Veteran's Docket and Prince William County's Veteran Docket, working directly with judges, attorneys, probation/parole personnel, and a VA Justice Coordinator. VVFS, in collaboration with Veteran Mentors, assist justice involved veterans in accessing mental health and/or substance abuse treatment, as well as

employment/vocational and education services to comply with the docket and successfully graduate from the program.

VVFS West Region serves approximately 99,500 veterans and their families in Southwest Virginia, which includes 32 counties and 13 independent cities.

The West Region team is comprised of 12 team members: Regional Director, Assistant Regional Manager, Senior Resource Specialist, Veteran Justice Specialist, Veteran Peer Specialist, and six Resource Specialists, strategically located in five VDVS offices (Abingdon, Big Stone Gap, Danville, Lynchburg, and Wytheville,), three CSBs (New River Valley, Piedmont, and Alleghany Highlands), and the Salem VAMC. The region also provides services at satellite offices and in communities across the region. In 2021, the West region team added critical capacity with a new Veteran Peer Specialist position in the Abingdon office.

Key partnerships and initiatives included the SWVA Crisis Intercept Mapping Collaborative and Southwest Virginia Together With Veterans (TWV). These initiatives included implementing suicide screening and lethal means safety planning for SMVF with partners in the region and bridging gaps in services through coordinated referrals. SWVA Together With Veterans continues promoting best practices from the Veterans Health Administration and the Governor's Challenge to Prevent Suicide designed to bolster grass roots, veteran-led, suicide prevention in rural communities. The SWVA TWV program is currently in phase four of five of the community development process. SWVA TWV and the Mental Illness Research, Education and Clinical Center (MIRECC) completed the second Community Assessment and Strengths, Weakness, Opportunities and Threat assessment as well as the MIRECC Action Plan. This process surveys key stakeholders from across SWVA to measure collaboration among people and organizations in our communities.

The region is involved in stakeholder collaboration and continues to participate in outreach across the region. This includes several suicide prevention committees and coalitions that address barriers to services specific to SWVA. This has also bolstered partnerships with the three VAMCs that serve veterans living in western and southwestern Virginia, including Beckley, West Virginia, James H. Quillen (Mountain Home), Tennessee, and Salem. Within these partnerships, VVFS West Region has worked closely with Salem VAMC and New River Valley Community Services to bridge partnerships in implementing the Salem VAMC telehealth program.

West Region staff provided training including Trauma Informed Care/Adverse Childhood Experiences (TIC/ACEs), Talk Saves Lives, Question Persuade and Refer, and Applied Suicide Intervention Skills Training (ASIST). The region also participated in a Caregiver Focus Group launched in August 2021 with a focus on better understanding the unique needs of SMVF caregivers in SWVA. The West Region Veteran Peer Specialist (VPS) currently facilitates one Veteran Peer Group in the New River Valley. The West Region VPS created and currently maintains the first VDVS VVFS Female Veteran Peer Group in a virtual model in FY21.

VVFS Central Region serves more than 158,500 veterans and their family members in Central Virginia, encompassing 29 counties and nine independent cities.

The Central Region team is comprised of 13 team members: a Regional Director, an Assistant Regional Manager, Senior Resource Specialist, five Resource Specialists, one Justice Resource Specialist, and four Veteran Peer Specialists, strategically located in five VDVS offices. (Charlottesville, Fredericksburg, Henrico, Petersburg, and Staunton), two offices shared with the Virginia Employment Commission (Chesterfield and Richmond), and the Region 10 CSB office in Palmyra. In 2021, the Central region team added critical capacity with a new Veteran Peer Specialist position in the Staunton office.

Due to the impacts of COVID-19, VVFS Central Region staff have experienced a high case volume (which continues to increase), mainly related to housing instability, literal homelessness, behavioral health, unemployment, and peer support. The increased strain on community partners has increased VVFS length and level of interaction with clients, but the region has still been successful in connecting to services. Throughout the year, outreach and services were conducted both in-person and virtually.

Regional staff continue to play a role in the delivery of MCC training, and have assisted in providing it virtually to a broad range of audiences. Key attendees include CSBs and other behavioral health providers.

Regional CIT trainings resumed in the Central Region and included the addition of new training programs in the Crater and Chesterfield areas. VVFS assisted with the veterans' component of their 40-hour training module. This increases the number of CIT programs VVFS is involved with to eight. Over the FY, interactions with law enforcement assisting veterans in crisis has created additional opportunities for training and collaboration with hostage negotiation and special response teams.

VVFS East Region: The East Region serves approximately 248,800 veterans and their families in the Greater Hampton Roads area, which includes 21 counties and 11 independent cities.

The East Region is comprised of nine members: Regional Director, Assistant Regional Manager, Veteran Justice Specialist, two Veteran Peer Specialists (one added this year), one Senior Resource Specialist, two Resource Specialists, and one Resource Specialist/Family and Caregiver Support Coordinator (the team built out this family and caregiver support capacity this year). East Region staff are strategically located in six VDVS offices (Chesapeake, Hampton, Norfolk, Oceana, Virginia Beach, and Williamsburg) and the Western Tidewater CSB office in Suffolk. In 2021, the East region team added critical capacity with a new Senior Resource Specialist position in the Hampton office.

The East Region continued to see high number of housing, including homelessness, cases across the region. They regularly coordinate with the five homeless CoCs and the Virginia Rent Relief Program to connect veterans and their families to resources. In addition, behavioral health cases increased and they refer these veterans and their families to Hampton VAMC, CSB, and private behavioral health providers such as the Cohen Clinic.

In FY21, VVFS developed a new partnership with Safe Harbor Recovery Center as they serve men and women diagnosed with substance use disorders. East Region successfully connected veterans to the Safe Harbor Recovery Center along with receiving referrals from the center as

well. In addition, East Region's Veteran Peer Specialist provides a monthly overview of VDVS/VVFS services to veterans currently in the program.

As a part of the Governor's Challenge, staff provide regular community training to partner agencies and first responders through CIT in the Hampton Roads area. In addition, the region continues to train community providers on MCC both in person and virtually. The East Region team co-hosts the Veterans Services Collaborative with the mental health team at the Hampton VA Medical Center to bridge referrals and care transitions between the VAMC and community behavioral health and supportive services providers. The region is also a member of the Crisis Intercept Mapping team hosted by Western Tidewater Community Services Board.

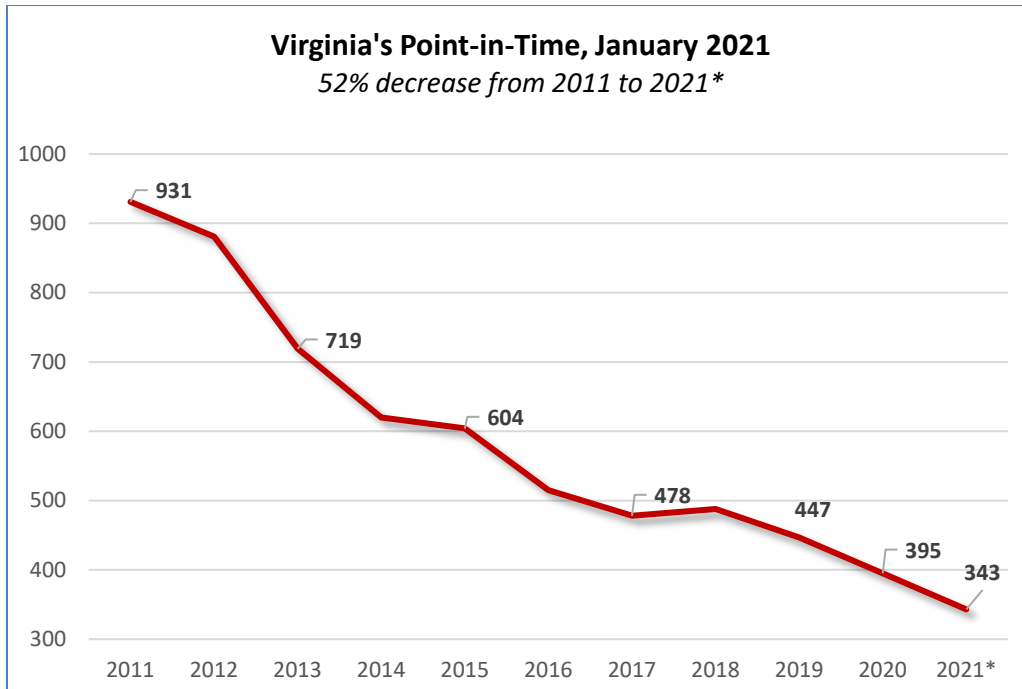
With some of the stress associated with COVID-19, the region added another Veteran Peer Specialist (VPS) to work with veterans and support them through behavioral health challenges. East Region's VPS provide monthly Peer Support groups virtually. East Region's Resource Specialist/Family and Caregiver Support Coordinator leads a monthly Family and Caregiver Support Strategy workgroup to increase the identification of caregivers in VVFS services and help staff determine if caregiving contributes to BH/other service needs. The workgroup is designing staff resource training and Client Management System enhancements for caregiver support statewide.

HOUSING AND HOMELESS SERVICES

VVFS continues to be a national leader in supporting the Commonwealth in sustaining efforts to ensure that veteran homelessness is rare, brief, and non-recurring. The VVFS Deputy Director, who also serves as the VVFS Housing Director, continues to provide statewide coordination and leadership with federal, state, and community organizations and serves on the National Coalition for Homeless Veterans' Executive Board.

The Governor's Coordinating Council on Homelessness (GCCH), chaired by the Secretary of Commerce and Trade and the Secretary of Health and Human Resources, continues to maintain the goal of the reduction and elimination of veteran homelessness as a key priority. As chair of the GCCH Veterans Committee, the VVFS Housing Director collaborates with three federal agencies, seven state agencies, and local homeless Continua of Care (CoC) partners to recommend strategies to the GCCH. In addition, the committee aligns priorities and works together to fill gaps and remove barriers in housing homeless veterans. In coordination with partners statewide, 585 previously homeless veterans entered permanent housing in FY21.

CoCs held the annual Point in Time (PIT) Count the last week of January 2021. This year's preliminary data showed, for veterans experiencing homelessness: 343 veterans – 325 sheltered; 18 unsheltered (due to COVID-19, some CoCs did not conduct an unsheltered count). This was a 13% decrease from the 2020 count of 395, and overall reduction of 63% since 2011. Women veterans experiencing homelessness had a 7% increase from 2020, increasing from 39 to 42. VVFS continues to work with communities in sustaining efforts of reducing veteran homelessness through coordinated entry and targeting of resources.



* Some CoCs in 2021 did not conduct an unsheltered count due to Covid-19

The VDVS Homeless Fund leverages Veterans Service Foundation (VSF) funds and coordinates with SSVF partners across the state to fill gaps in housing veterans experiencing homelessness, and provides prevention funds for previously chronically homeless veterans. Allowable expenses include rental deposits/arrears, utility assistance, beds, and other one-time expenses that may prevent a veteran from being housed. In FY21, VVFS used \$135,531 in VSF funds to assist 144 veterans with moves into permanent housing or homeless prevention.

The Dominion *Veteran EnergyShare* program, in conjunction with the VDVS Homeless Fund and administered by VVFS and Supportive Services for Veterans Families (SSVF) providers across the state, continued in FY21 to provide utility assistance to homeless veterans who move into permanent housing. The *Veteran EnergyShare* program is continuing as \$800,000 for calendar year 2021. This partnership has received national recognition as a best practice and has been vital in sustaining efforts in Virginia. In calendar year 2020, VVFS and SSVF providers utilized 1,203 *Veteran EnergyShare* vouchers for veterans experiencing homelessness or were at-risk.

In response to COVID-19, there has been an increase in homeless funding through SSVF for veterans through the CARES Act. This funding has prioritized higher risk veterans utilizing motel/hotel as emergency shelter and quickly moving veterans into permanent housing when possible. VVFS is also coordinating with the Department of Housing and Community Development (DHCD) Rent Relief Program (RRP) to prevent evictions for veterans financially affected due to COVID.

Other housing priorities that VVFS is coordinating with through the GCCH is expanding permanent supportive housing and supports through the Permanent Supportive Housing Steering Committee. These efforts includes participating in Advancing Housing-Related Supports for

Individuals with Substance Use Disorders State Medicaid Learning Collaborative with the Department of Medical Assistance Services (DMAS). This initiative provided technical assistance and planning support to better align and target housing and supportive services under the upcoming Medicaid Housing Support Need Benefit (Summer 2022) to individuals with substance use disorders and experiencing homelessness, including those involved in the criminal justice system. These efforts will enhance the ability to serve veterans in need of housing and supports that may be ineligible for VA homeless resources.

VVFS JUSTICE INVOLVED SERVICES PROGRAM (JIS)

VVFS Justice Involved Services program (JIS) provides resource connections, care coordination, and support to Virginia's veterans and service members across the criminal justice spectrum, including diversion, incarceration and while on supervision in the communities. JIS offers direct assistance to veterans and service members of any era, regardless of discharge status. The program provides services to veterans in treatment dockets, in local jails and state prisons, and on probation and/or parole supervision. In addition veterans can be referred electronically through the VVFS Justice mailbox- justice.vvfs@dvs.virginia.gov. The four VVFS Veteran Justice Specialists (VJS), one in each VVFS region, work with justice-involved veterans pre- and post-release. The Criminal Justice Director (CJD) oversees referrals and services delivery. Due to COVID-19, the JIS program has also expanded virtual services to connect with justice-involved veterans.

To address the needs of justice-involved veterans (JIVs) with serious medical and mental health conditions, VVFS leads the Justice Involved Veterans with Special Needs work group with the USDVA and VADOC. The CJD also conducts statewide collaborative quarterly meetings between the USDVA Veteran Justice Outreach and Healthcare for Reentry Veterans (HCRV) specialist staff and VVFS VJS staff. The group discusses program updates, issues related to the justice-involved veteran population, and training opportunities. In FY21, the CJD was appointed to Academic Consortium on Criminal Justice Health (ACCJH) Board of Directors and also serves on the Racial and Social Justice subcommittee. The goal of the ACCJH is to advance the field of health care for individuals in the criminal justice system.

The CJD collaborates with other key partners, including:

- The Virginia Department of Corrections (VADOC)
- The Virginia Regional Jail Association
- The Virginia Sheriffs' Association (VSA)
- The U.S. Department of Veterans Affairs (VA)
- The Attorney General's office
- Department of Behavioral Health and Developmental Services (DBHDS)

Veteran Treatment Dockets

In FY21, the Criminal Justice Director (CJD) and Veteran Justice Specialists promoted the creation of veteran treatment dockets in collaboration with the Supreme Court of Virginia, and provided technical assistance to various jurisdictions, including Loudoun and Chesterfield counties, Lynchburg, and Staunton. As of FY21, there are seven veteran treatment dockets in Virginia:

1. Fairfax County General District Court
2. Fairfax County Circuit Court

3. Fairfax County Juvenile and Domestic Relations Court
4. Hampton Circuit Court
5. Norfolk Circuit Court
6. Prince William General District Court
7. Rappahannock (Spotsylvania) Circuit Court

VVFS VJS regional staff are active members of the veteran docket team and connect veterans to resources in the community. The VJS team continued to work with veteran dockets during the pandemic via virtual meetings and videoconferencing.

Virginia was selected as one of five states to receive the Veterans Treatment Court Statewide Strategic Planning Technical Assistance from the Center for Court Innovation (CCI). As part of this effort, VVFS serves on the Veterans Docket Statewide Strategic Planning team. The goal of the team is to create new veteran dockets and increase veteran identification in the criminal justice system, particularly in local and regional jails.

Funding from the Bureau of Justice Assistance, granted to the Virginia Supreme Court, Office of the Executive Secretary (OES) is assisting in supporting these activities. One of the tools leveraged to increase identification of veterans in the criminal justice system is the USDVA's *Veterans Reentry Search Services (VRSS)* system. VVFS assisted the development of a VRSS training to expand usage among jails. Currently, only eight jails using the VA's VRSS system. As part of this effort, the Virginia team also developed the first veteran treatment docket curriculum.

Compensation and Pension (C&P) Examination Process

The CJD serves as the statewide contact for the VA and VA-contracted vendors to request C&P exams for incarcerated veterans and collaborates with the VADOC and the VA. Due to the COVID-19, in-person C&P exams for incarcerated veterans were suspended, but in-person exams resumed in March 2021. VVFS and VADOC collaborates with one of the VA-contracted vendors to conduct C&P psych exams via telehealth.

MISSION: HEALTHY RELATIONSHIPS & MISSION: HEALTHY FAMILIES

Mission: Healthy Relationships (MHR) and *Mission: Healthy Families (MHF)* are retreats held at various locations in Virginia and focus on effective communication skills through the provision of individualized and group support in a workshop format.

Mission: Healthy Relationships is a program focused on relationship enhancement and effective communication skills for couples. MHR was adapted from "8 Hours to a Lifetime of Relationship Satisfaction," a workshop designed by the National Multiple Sclerosis Society in conjunction with the U.S. Department of Health and Human Services, Administration for Children and Families.

Couples who experienced military transition, deployments, and/or are coping with the effects of operational combat stress, PTSD, TBI or other trauma-related experiences are taught a skills-based approach to relationship strengthening, enhancing relationship communication and resiliency skills and are provided connections to behavioral health, rehabilitative and supportive services. The goal is to improve the overall health and well-being and relationship satisfaction of

the couples who attend the weekend-long workshop. In FY21, VVFS postponed workshops due to the COVID-19 pandemic.

Mission: Healthy Families (MHF) retreats enhance family well-being for veteran families by allowing the families to step away from daily stressors and support one another as a unit. The retreats allow adults and children to engage in activities, which help strengthen skill building, resiliency and communication skills within the family unit. The weekend provides time for families to engage in directed and non-directed activities that focus on strengthening relationships and the health and welfare of each member of the family. In FY21, VVFS postponed the retreats due to the COVID-19 pandemic.

VETERAN PEER SUPPORT (VPS) SERVICES

VPS program leverages professional peer training and personal experiences to develop peer-to-peer relationships with veterans to provide support in increasing self-reliance, health, wellness, and quality of life. Peer services focus on veterans struggling with behavioral and rehabilitative needs affected by military service but who are disinterested in clinical treatment. VVFS Peer Specialists link with veterans who share similar military and post-military experiences in an effort to relate to the client.

With the hiring of six new VPS employees and a Peer Services Director (PSD), the program has increased its capacity to interact and assist these veterans. These interactions are based on trust and knowledge of military service, thus giving the VPS the opportunity to successfully direct the veteran toward a more productive and meaningful life.

The VPS program facilitates veteran support groups, providing structure to promote personal growth, self-awareness, coping strategies, and the opportunity to interact with other veterans. Due to the COVID-19 pandemic, VVFS adapted these groups to a virtual setting to facilitate connection and mutual support. The growth of these virtual meetings helps to meet the need of veterans to avoid isolation within their communities. In FY21, VVFS started the first Women's Veterans Group. This group assists women veterans across the Commonwealth to fellowship with other female veterans and space to share their needs. VVFS plans to expand all groups to in person once the pandemic has ceased to be a factor.

VVFS continues its work to sustain and grow partnerships with DOD and the Virginia National Guard (VaNG). Working through the Suicide Prevention Coordinators within the National Guard, VVFS successfully assisted veterans guard members that are experiencing anxiety, depression and other issues associated with military service. VVFS also provides peer support and resource connection to the Marine Corps' District Injured Support Cell (DISC). The DISC supplies support to Marine Corps Wounded, Ill and Injured within the state.

VVFS continues outreach efforts to the USDVA and other state and community partners such as DBHDS and DMAS. Coordinating with these peer support partners expand VVFS training and resource opportunities. These partnerships increase the identification of veterans that cannot access VA services due to discharge and/or reluctance to accept services.

SNAPSHOT OF VVFS SERVICES

During the pandemic, the severity and complexity of services required by veterans and families increased. At the same time, VVFS experienced a reduction in new veterans accessing services, but saw an increase in both previous clients returning for services, and the length of time they needed our services. With pandemic restrictions, VVFS significantly reduced its in-person outreach events, contributing to the decrease in new clients accessing services. However, since the end of FY21 and the start of FY22, VVFS is starting to return to pre-pandemic levels in the number of clients served.

Below are the data on resource referrals, comprehensive behavioral and rehabilitative health care coordination, and supportive services to Virginia's Veterans, National Guard, Armed Forces Reserves, caregivers and family members. (Change from 2020 denoted in italics).

- 1,742** Veterans and family members served in FY21 (-28)
- 2,403** Total individual services provided in FY21 (-449)
- 296** Total behavioral health services provided in FY21 (-85)
- 36** Total rehabilitative/medical services provided in FY21 (-4)
- 2,071** Total supportive services provided in FY21 (-360)
- 456** Total group services provided in FY21 (+33)
- 0** Veterans and family members served by *Mission: Healthy Relationships (MHR)* and *Mission: Healthy Families (MHF)* in FY21* (-114)
- 831** Individuals trained in Crisis Intervention Training (CIT) by VVFS (-328)
- 1,401** Individuals trained in Military Cultural Competency Training by VVFS (-936)
- 119** Veterans who received Behavioral Health/Financial Assistance through Veterans Services Foundation (-37)

HOMELESSNESS AND HOUSING

- 343** Estimated number of homeless veterans in Virginia on a single night in January 2021** (-52)
- 18** Estimated number of unsheltered veterans in Virginia on a single night in January 2021** (-54)
- 585** Number of homeless veterans housed statewide in FY21 (-362)
- 144** Veterans experiencing homelessness who received financial assistance through VVFS in FY21 (-40)

ANNUAL SERVICES PROVIDED

Annual Services Provided	FY19	FY20	FY21
Individual Services Delivered	3,196	2,852***	2,403***
Outreach and Training Events	729	507***	202***

**Unsheltered Point in Time counts used a different methodology due to COVID-19 and homeless Continuums of Care did not consistently collect veteran status*

***MHR/MHF were not held due to COVID-19*

****Services and events decreased due to COVID-19*

CONCLUSION

The hardships facing many of Virginia's veterans continue to become increasingly complex due to many factors, and specifically through the COVID pandemic. Assistance begins with increasing awareness of available resources and services while creating a network of federal, state, and community providers that are committed to serving Virginia's veterans and their families. Through the teammates who serve veterans and manage this highly effective and productive program, VDVS is able to improve the lives of veterans and their families in Virginia. We are dedicated to serving as a port of entry to services, not only with VDVS direct services, but as a resource connector and force extender. VVFS is honored to work and advocate on behalf of veterans and their families and we remain committed to enhancing supportive services across the Commonwealth.