

VIRGINIA DEPARTMENT OF VETERANS SERVICES

2022 ANNUAL REPORT

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

TO

GOVERNOR GLENN YOUNGKIN,

SECRETARY CRAIG CRENSHAW,

AND

THE VIRGINIA GENERAL ASSEMBLY

October 1, 2022

THE VIRGINIA VETERAN AND FAMILY SUPPORT (VVFS) 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 (DVS) in cooperation with the Department of Behavioral Health and Developmental Services (DBHDS) and the Department for Aging and Rehabilitative Services (DARS). VVFS serves transitioning service members, veterans of all eras who are Virginia residents, members of the Virginia National Guard or Armed Forces Reserves, and their caregivers and family members.

In accordance with Virginia Code 2.2-2001.1, the purpose and priorities of the VVFS program are:

- Build awareness of veterans service needs and the availability of the program 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.

With the change of administration, DVS and VVFS are operating on a metric driven approach to monitor agency performance in support of the Thrive objective. VVFS four Objectives and Key Results (OKR) consist of the following:

- 90% of all new VVFS clients will have a needs assessment completed in seven days of initial client contact for the purpose of creating a coordinated resource plan (FY22- 98% out of 1390)

- 90% of veterans with a identified behavioral health need will be connected to an appropriate resource (FY22: 98% out of 353)
- 90% of veterans experiencing literal homelessness will be connected to a shelter/housing resource (FY22: 95% out of 189)
- DVS field office staff (VVFS and Benefits) will screen 95% of new Service Members, Veterans, and families for suicide risk per month.(Jan – June 2022: 94% out of 6809)

In 2022, VVFS continues to expand and sustain partnerships with federal, state, and community partners in connecting Service Members, Veterans and their Families (SMVF) to resources and services. Through the Governor’s Challenge to Prevent Suicide among Service Members, Veterans, and their Families (statewide) and the Mayor’s Challenge to Prevent Suicide among Service Members, Veterans, and their Families (Richmond), VVFS continues trainings, such as Military Culture Competency (MCC) and Crisis Intervention Team (CIT), to state agencies and community partners to enhance knowledge and resource connections.

Creating a continuum of care for SMVF for behavioral health, rehabilitative, and supportive services is a continual priority to ensure there is no wrong door and SMVF can 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 5,898 veterans, active duty military, and their family members to services in FY22. 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 continued coordination of the Governor’s Challenge and the Mayor’s Challenge to Prevent Suicide Among Service Members, Veterans and their Families.¹ 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 (VA), the Department of Health and Human Services (HHS), and the Substance Abuse and Mental Health Services Administration (SAMHSA) sponsor both of these initiatives.

The Virginia team is implementing the VA’s National Strategy for the Prevention of Veteran Suicide,² which provides a framework for using a comprehensive public health approach to address the growing challenge among the veteran population. Secretary John Littel, Health and Human

¹ Governor's and mayor's challenges to prevent suicide among service members, veterans, and their families. SAMHSA. (n.d.). R.f. <https://www.samhsa.gov/smvf-ta-center/mayors-governors-challenges>

² National strategy for preventing veteran suicide. *U.S. Dept. of Veterans Affairs*. (n.d.). R.f. https://www.mentalhealth.va.gov/suicide_prevention/docs/Office-of-Mental-Health-and-Suicide-Prevention-National-Strategy-for-Preventing-Veterans-Suicide.pdf

Resources, and Secretary Craig Crenshaw, 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 resources and community services together; forming systemic partnerships.
 - Strategy: Increase engagement between 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 Benefits service lines joined Virginia's Identify SMVF, Screen for Suicide Risk, and Referral for Services (VISR) Pilot. The goal of the VISR pilot is to develop military culture, suicide prevention, and safety planning infrastructure in community agencies (including hospitals, local departments of social services, Community Service Boards (CSBs), and the Up Center Cohen Veterans Network Clinic.

In DVS, the VISR work continues after the initial VISR pilot implementation. In FY22, VVFS assisted in expanding risk screening in the Benefits service line from eight staff in the initial pilot to all Benefits staff in January 2022. 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.

Since January 2022, DVS has significantly increased suicide screenings. During the initial pilot, VVFS and Benefits screened approximately 420 per month. From January – June 2022, the monthly average increased to 1,063 (94% of new clients). The table below shows the total number of SMVF screened for suicide risk. A total of 680 individuals screened at risk of suicide and the VVFS and Benefits teams linked them to behavioral health resources, VVFS peer support, and other supportive services. 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)	January – June 2022 (All VVFS and Benefits)
No risk	5699
Low risk	570
Moderate risk	87
High risk	23
Total	6379

Beginning in FY23, VVFS staff are training DVS team members in the education, transition, and employment service lines in suicide risk screening and prevention to continue expansion of VISR Pilot best practices.

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. **Care 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**

CARE COORDINATION AND MANAGEMENT: REGIONAL HIGHLIGHTS

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

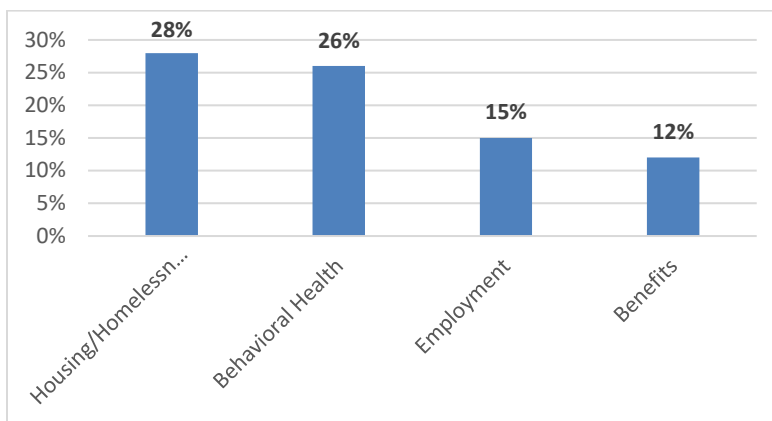
- **VISR:** VVFS staff continue to train all new DVS Benefits staff in suicide prevention, risk screening, and safety planning. In addition, VVFS staff promote military culture and suicide prevention best practices among community partners such as Veterans Service Organizations, human services providers, employment support and faith-based programs. VVFS has consulted with multiple states on the VISR Pilot including KY, MD, MN, NC, NY, and WI. In addition, VVFS is coordinating the next phase of the VISR Pilot (2.0) for the Governor’s Challenge to Prevent Suicide team to grow these best practices in local communities in the Commonwealth.

- **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 increased clinical services and suicide prevention among SMVF. VVFS staff provide military culture and resource training to CSB staff, partner on care coordination and peer support services delivery and expansion of suicide prevention initiatives including the Lock and Talk Virginia lethal means safety campaign. VVFS staff also assist CSBs with building internal capacity for SMVF services through staff recruitment (including specialized Navigator positions) and training.
- **Crisis Intervention Team (CIT) training:** VVFS staff provide SMVF crisis intervention team 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 trainings provide 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.
- **Military Cultural Competency (MCC) training:** VVFS staff continue to 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 community provider knowledge in serving SMVF and provides information on key resource connections including outreaching VVFS services. Staff provided both virtual and in-person MCC to approximately 1,300 community services providers and partners in FY22.

VVFS North Region

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

Most significant needs of veterans and family members in the region:



Due to the close proximity to active duty military bases, the Pentagon, and Washington D.C, experiencing 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 FY22, the region expanded capacity of direct service staff to meet the increased needs of veterans and family members in Northern Virginia. This included a new VPS and two RS. 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 Front Royal in October 2022.

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. The region is continuing to provide virtual peer support groups to continue meeting the needs of these veterans. The region has established a network of nearly 20 clinicians to assist in bridging barriers to mental health treatment for veterans and their families. These providers offer both in-person and telehealth services. The region leverages the Veteran Services Foundation (VSF) for assessments and treatment services to veterans who cannot access the VA and have financial barriers.

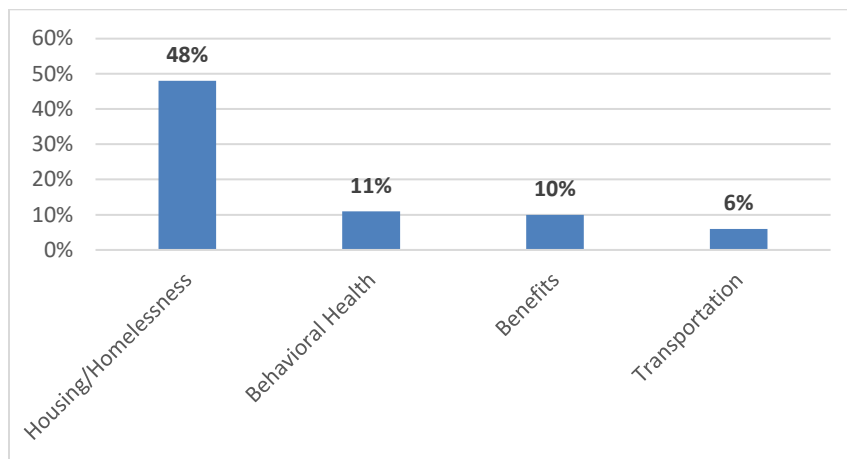
Regional staff continue to coordinate with six local homeless continua of care (CoC), the Washington D.C. VA Medical Center (VAMC), and the Martinsburg WV VAMC homeless services teams to connect veterans experiencing homelessness to permanent housing. Staff are active in meetings of Unite-Us Serving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

The region has supported efforts for a new Loudoun County veteran treatment docket in the past year, which will be operational in FY23. Staff are also part of the treatment teams for both the Fairfax County Veteran’s Docket and Prince William County’s Veteran Docket. They 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:

The West Region team is comprised of 12 team members: RD, ARM, SRS, VJS, two VPS, and six RS, 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 VA Medical Center. The region also provides services at satellite offices and in communities across the region. In September 2021, the West region team added critical capacity with a new VPS in the Abingdon office.

Most significant needs of veterans and family members in the region:



Key partnerships includes the region's 12 CSBs, the Highlands CSB Veteran Recovery Coordinator, Crisis Intervention Teams (CIT), Virginia Employment Commission (VEC), Virginia Department of Health (VDH), homeless CoCs, Virginia Army National Guard, and U.S. Army Reserves. The region also provided support for the Military Culture Competency and Crisis Intervention Trainings by implementing suicide screenings, lethal means safety planning, and coordinating referrals for the SMVF population. Other initiatives include the SWVA Crisis Intercept Mapping Collaborative and Southwest Virginia Together With Veterans (TWV).

TWV promotes best practices from the Veterans Health Administration and the Governor's Challenge to Prevent Suicide and is designed to bolster grass roots, veteran-led, suicide prevention in rural communities. TWV program is currently in phase five of the community development process to perform the suicide prevention and awareness action plan and measure results. This process surveys key stakeholders from across SWVA to measure collaboration among people and organizations in our communities.

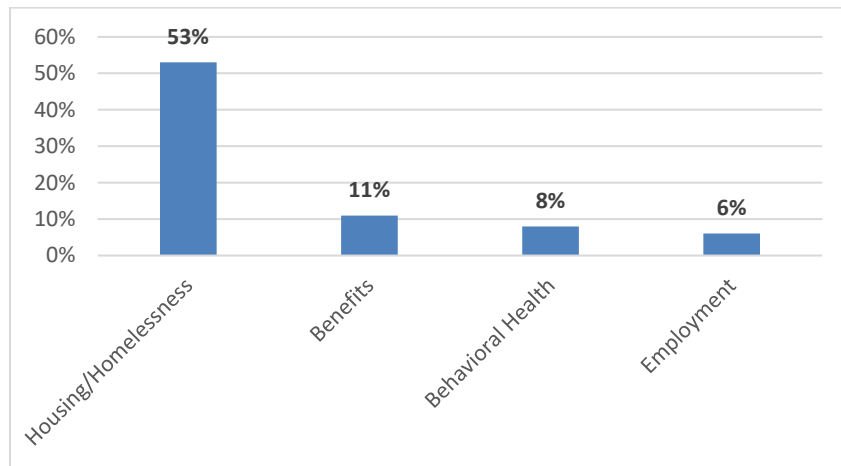
The region has provided regular behavioral health and suicide prevention trainings including Talk Saves Lives, Question Persuade and Refer (QPR), Trauma Informed Care/Adverse Childhood Experiences (TIC/ACEs), Mental Health First Aid (MHFA) and Applied Suicide Intervention Skills Training (ASIST). The region also facilitates Caregiver Focus Groups to better understand the unique needs of SMVF caregivers in SWVA and provide training and resource connections for the SMVF population. The West region VPS facilitates a Veteran Peer Group in the New River

Valley, as well as launched and facilitated the first VVFS statewide Female Veteran Peer Group in a virtual model.

VVFS Central Region

The Central Region team is comprised of 13 team members: an RD, ARM, SRS, five RS, one VJS, and four VPS, strategically located in five VDVS offices. (Charlottesville, Fredericksburg, Henrico, Petersburg, and Staunton), two offices shared with the VEC (Chesterfield and Richmond), and the Region 10 CSB office in Palmyra.

Most significant needs of veterans and family members in the region:



In FY22, the region experienced the highest number of clients in program history. These included a spectrum of needs from eviction prevention, homelessness, behavioral health, and peer support. The region coordinated with the Virginia Rent Relief and other local eviction prevention programs to assist veterans and their families facing eviction and/or housing instability. There has also been an increase in justice-involved veterans due to the Department of Corrections (DOC) early release protocol.

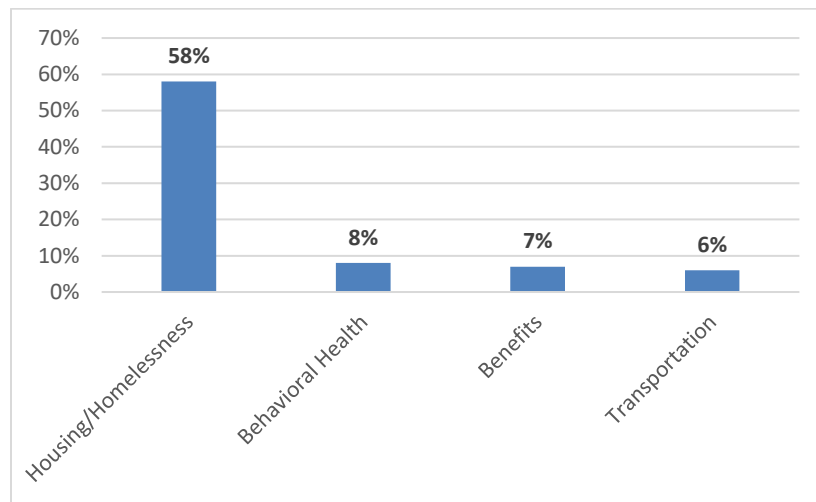
Staff continued participating in the Richmond Mayors Challenge to Prevent and End Veterans Suicide among SMVF. Other partners in this initiative include DBHDS, the Richmond Behavioral Health Authority, Central Virginia VAMC, first responders, the Virginia National Guard, and local Veterans Service Organizations. The team is continuing its efforts in identifying SMVF that are at-risk of suicide and improving resource connections with necessary services. This includes veterans facing housing instability who are at higher risk.

Central region staff provided outreach to multiple Virginia National Guard Yellow Ribbon events, a resource fair hosted by the Military Retiree's Club of Richmond, and other community events. The region increased outreach to the VA CBOCs as well the VA homeless programs. They also provided trainings that included eight regional 40-hour CIT training programs. The region is continuing MCC and suicide prevention training to community partners.

VVFS East Region:

The East Region is comprised of nine members: RD, ARM, SRS, VJS, two VPS, two RS, and one RS/Family and Caregiver Support Coordinator. 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.

Most significant needs of veterans and family members in the region:



The East region continued to see a high number of housing, including homelessness, cases. The team coordinated with the five homeless CoCs, SSVF providers, and the Virginia Rent Relief Program/Virginia Mortgage Relief to connect veterans and their families to resources. In addition, behavioral health cases also increased and the region regularly coordinated with the Hampton VAMC, local CSBs, and private behavioral health providers such as the Cohen Clinic to access services.

As a part of the Governor's Challenge, staff provided regular community training to partner agencies and first responders through CIT and MCC in the Hampton Roads area. The region co-hosted 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/supportive services providers. The region is also a member of the Crisis Intercept Mapping team hosted by Western Tidewater Community Services Board.

East Region team members routinely staffed tables at regional outreach events, providing information on DVS/VVFS services to the community. These include the Military Children's Gala, the Tidewater Rod Run, and Hire Vets Now monthly events. The team worked closely with DVS Benefits to provide cross-referrals to clients.

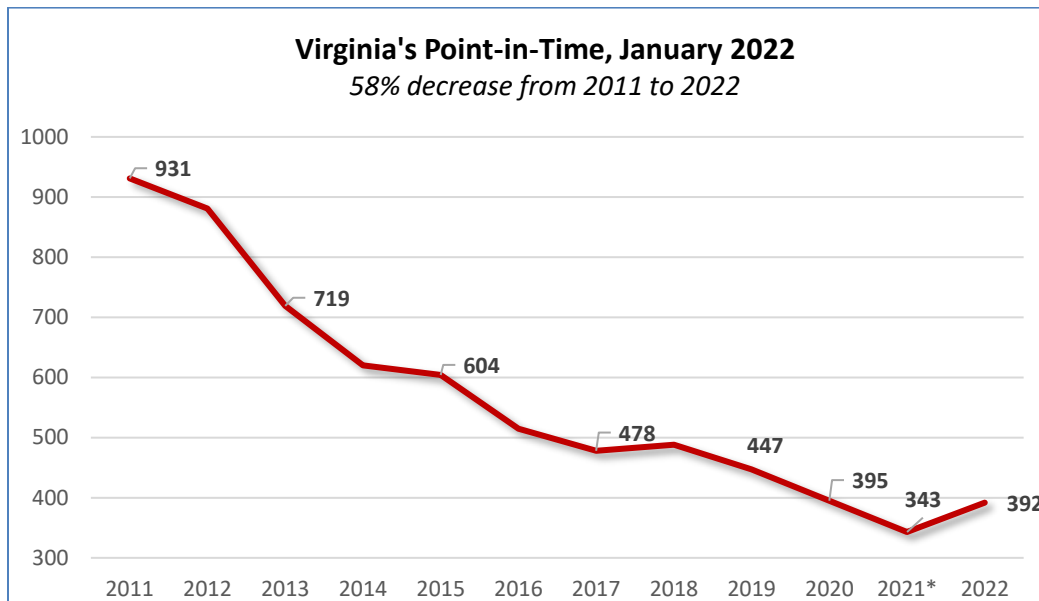
HOUSING AND HOMELESS SERVICES

VVFS supports the Commonwealth in sustaining efforts to ensure that veteran homelessness is rare, brief, and non-recurring and continues to be recognized as a national leader. 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.

CoCs held the annual Point in Time (PIT) Count the last week of January 2022. This year's preliminary data showed, for veterans experiencing homelessness: 392 veterans – 345 sheltered; 47 unsheltered. This was a 14% increase from the 2021 count of 343; however, some COCs did not conduct an unsheltered count in 2021, making the number lower.

VVFS continues to work with communities in sustaining efforts of reducing veteran homelessness through coordinated entry and targeting of resources. In coordination with partners statewide, 642 previously homeless veterans entered permanent housing in FY22.



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

The VDVS Homeless Fund continues leveraging Veterans Service Foundation (VSF) funds, coordinating 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 FY22, VVFS used \$230,000 in VSF and agency funds to assist 228 veterans with moves into permanent housing or homeless prevention.

The Dominion *Veteran EnergyShare* program, administered by VVFS and Supportive Services for Veterans Families (SSVF) providers across the state, continued in FY22 to provide utility assistance to homeless veterans who move into permanent housing. The *Veteran EnergyShare* program is continuing with \$800,000 for calendar year 2022. This partnership has received national recognition as a best practice and has been vital in sustaining efforts in Virginia. In calendar year 2021, VVFS and SSVF providers utilized 1,228 *Veteran EnergyShare* vouchers for veterans experiencing homelessness or were at-risk.

Other housing initiatives that VVFS is involved with include expanding permanent supportive housing through participation with the Permanent Supportive Housing Steering Committee. These efforts include participating in Health and Housing Institute facilitated by the National Academy for State Health Policy (NASHP). These efforts 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)

The VVFS Justice Involved Services (JIS) program 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. Virginia Dept. of Corrections reported 3,988 veterans in November 2022 (includes those incarcerated in state correctional facilities, on state probation and parole supervision, and state responsible veterans in local jails).

VVFS has been instrumental in providing capacity support to VVFS treatment dockets. Below is a list of active veteran treatment dockets:

- Fairfax General District Court
- Fairfax Circuit Court
- Fairfax Juvenile & Domestic Relations Court
- Hampton Circuit Court
- Norfolk Circuit Court
- Prince William
- Spotsylvania/Rappahannock

The four VVFS Veteran Justice Specialists (VJS) (one in each VVFS region) work with justice-involved veterans pre- and post-release. The JIS program provides virtual and in-person services for justice-involved veterans.

To address the needs of justice-involved veterans (JIVs) with serious medical and mental health conditions, the U.S. Department of Veterans Affairs (VA) Veteran Justice Outreach program staff led the Justice Involved Veterans with Special Needs discharge planning work group with the VJS staff and VADOC. In FY22, the group met to coordinate housing placements for veterans releasing from incarceration in need of assisted living facilities and nursing homes.

The VVFS Criminal Justice Director (CJD) conducts statewide collaborative quarterly meetings between the VA 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. The CJD continues to provide statewide technical assistance and advocacy on addressing the needs of the justice-involved veteran population and serves on the Academic Consortium on Criminal Justice Health (ACCJH) Board of Directors and ACCJH 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.

In FY22, the CJD also joined the Justice and Housing workgroup led by the Corporation for Supportive Housing. The group is conducting environmental scans to address barriers to accessing housing for justice-involved individuals, reviewing tenant selection plans, holding focus group meetings, and examining background-screening criteria in housing.

VETERAN PEER SUPPORT (VPS) SERVICES

The VVFS Veteran Peer Support (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. The program has with a specific focus on veterans struggling with behavioral and rehabilitative needs affected by military service but presently disinterested in clinical treatment. VVFS Peer Specialists link with veterans who share similar military and post-military experiences to build a supportive relationship and connect to services. VVFS currently employs 10 VPS representatives across the state.

The VPS program facilitates veteran support groups that promote personal growth, self-awareness, coping strategies, and the opportunity to interact with other veterans. VVFS facilitates four virtual groups. VVFS adapted these groups to a virtual setting to facilitate connection and mutual support. In FY22, VVFS started the first Women's Veterans Group. This group assists women veterans across the commonwealth to fellowship with other women veterans and space to share their needs.

VVFS continues its work to sustain and grow partnerships with Department of Defense (DoD) and the Virginia National Guard (VaNG). Working through the behavioral health program within the National Guard, VVFS successfully assisted veterans guard members who 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) and the Army Wounded Warrior (AW2).

VVFS continues outreach efforts to the VA and other state and community peer support programs such as DBHDS and DMAS by coordinating with these partners to expand VVFS training and resource opportunities. These partnerships increase the identification of veterans who cannot access VA services due to discharge and/or reluctance to accept services. VVFS continues to provide peer support presentations, webinars, and technical assistance to nonprofit partners such as VOCAL, Mental Health America, CSBs, Virginia Employment Commission, Virginia Department of Health, and peer specific organizations throughout the Commonwealth.

VVFS Peer Support also played a significant part in the VA's VetXL and Veterans Experience Action Center (VEAC) initiatives. These National pilot demonstration initiatives allowed veterans across the commonwealth to have instant access to VA benefits, healthcare, veteran specific resources, veteran peer support, and other supportive resources by either chat or phone. In FY22, the VPS Program has worked to streamline and provide cross connection services to incarcerated veterans involved with Veteran Justice Representatives and to Resource Specialist whose clients are at risk of suicide and/or have behavioral health barriers.

FY22 VVFS SERVICES

Provides 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.

- 2,180** Veterans and family members served in FY22 (+438, 2021)
- 2,683** Total individual services provided in FY22 (+280, 2021)
- 351** Total behavioral health services provided in FY22 (+55, 2021)
- 35** Total rehabilitative/medical services provided in FY21 (-1, 2021)
- 2,297** Total supportive services provided in FY22 (+226, 2021)
- 1915** Total group services provided in FY22 (+1459, 2021)
- 0** Veterans and family members served by *Mission: Healthy Relationships* (MHR) and *Mission: Healthy Families*(MHF) in FY22* (0, 2021)
- 690** Individuals trained in Crisis Intervention Training (CIT) by VVFS (-140, 2021)
- 1,252** Individuals trained in Military Cultural Competency Training by VVFS (-149, 2021)
- 268** Veterans who received Behavioral Health/Financial Assistance through Veterans Services Foundation (+149, 2021)

HOMELESSNESS AND HOUSING

- 392** Estimated number of homeless veterans in Virginia on a single night in January 2022 (+49, 2021)
- 47** Estimated number of unsheltered veterans in Virginia on a single night in January 2022** (+29, 2021)
- 642** Number of homeless veterans housed statewide in FY22 (+57, 2021)
- 228** Veterans experiencing homelessness who received financial assistance through VVFS in FY22(+84, 2021)

Annual Services Provided	FY20	FY21	FY22
Individual Services Delivered	2,852	2,402	2,683
Outreach and Training Events	507	202	408

*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