HPO Policy Guidance on Accessing Emergency Housing (EH)

The VA Homeless Program Office (HPO) has developed guidelines to help local VA Medical Centers, VA homeless programs and their community partners implement local protocols to ensure that Veteran households experiencing unsheltered homelessness or those in unsafe congregate shelter settings can access Emergency Housing (EH) ondemand. It is vital that Veterans in these dangerous situations are engaged and brought into services as quickly as possible to ensure their safety.

Emergency Housing is any temporary or transitional setting, including hotels and motels and traditional VA or community shelter beds that are used to provide immediate, safe accommodations to Veterans experiencing homelessness. EH services can be delivered by, Health Care for Homeless Veterans (HCHV) Contracted Residential Service (CRS), Grant & Per Diem (GPD), Supportive Services for Veteran Families (SSVF) programs, and non-VA community options. Generally, EH should meet or exceed safety protocol related to public health and infectious disease, including the ability to isolate or create socially distant living and sleeping spaces. EH should be regarded as only the first step in a process designed to facilitate the movement of Veterans into permanent housing of their choosing as quickly as possible. The following includes guidelines for the use of EH to ensure Veteran safety:

Emergency Housing (EH) Referral Quick Reference Guide	
HCHV CRS, Placements via 4201 Authority, and GPD	 HCHV CRS should be used as primary EH Programs. VAMCs should, when available, access VAMC funds to support hotel/motel stays under the 4201 Authority when other EH resources are not available or in support of clinical needs, including isolation for those exposed to COVID-19. GPD is transitional housing but can function as an alternative to EH when HCHV CRS or safe community options are unavailable for immediate placement. Veterans enrolled in GPD Bridge Housing or HCHV CRS are expected to be coenrolled in a permanent housing program such as SSVF, HUD-VASH, or another non-VA permanent housing program. Co-enrollments may occur after EH placement and should not be a barrier to or delay EH placement. VA homeless programs are expected to be active partners in the local Continuum of Care to ensure adequate housing options are available to all Veterans regardless of VA eligibility or preference.
Community-based EH	 Should be considered, where safe and appropriate, in order to ensure that Veterans are not left unsheltered or in congregate settings that may otherwise increase risk of contracting COVID-19. Must be secured for those individuals with military experience who are not otherwise eligible for VA services.
SSVF EH	 Should be used <u>only</u> when appropriate HCHV CRS, hotel/motel placement made with VAMC funds under the 4201 Authority, community, or GPD options are not available or when the specific clinical needs of a Veteran household requires hotel/motel EH and no such hotel/motel option exists other than SSVF EH. Some examples of this clinical need may include keeping families together when community-based family shelter options do not exist in in the community, or if a chronically or long-term homeless Veteran with well-established resistance to program involvement is willing to accept EH. Veterans may be enrolled in SSVF for housing services even if SSVF is not providing the EH resources. SSVF EH is for those Veteran households seeking permanent housing (PH). Veterans enrolled in SSVF must have active case management that includes planning for PH placement designed to make the stay EH as brief as possible while ensuring the immediate and ongoing safety of the Veteran household.