

HUD-VASH Case Management Services

Background and Overview:

The U.S. Department of Veterans Affairs (VA) is seeking a Contractor to assist with the provision of housing placement and case management services through the HUD-VASH program. The Department of Veterans Affairs (VA) HUD-VASH program is a partnership between the U.S. Department of Housing and Urban Development (HUD) and VA to place and maintain homeless Veterans in permanent, community based housing using HUD Section 8 Housing Choice Vouchers that are paired with ongoing VA case management services. Many of these Veterans have co-morbid conditions that include serious mental illnesses, substance abuse disorders, and other serious medical conditions. VA intends to engage a Contractor to provide housing placement services and on-going case management to VA referred Veterans and their families.

Entities that are interested in providing these services should be aware that HUD-VASH is a national program serving Veterans and their families throughout the country. This program continues to expand and has become one of the largest VA interventions to assist homeless Veterans. It is also the first VA homeless program that offers services to both the Veterans and their family. It represents one of VA's most significant efforts to achieve the President's goal of ending homelessness among Veterans.

Primary target populations for HUD-VASH include chronically homeless, chronically mentally ill Veterans; Veteran families with minor children; and returning Iraq and Afghanistan Veterans. To be eligible for the HUD-VASH program, Veterans must:

- Be eligible for VA health care as determined by the local VA medical center
- Be homeless or at imminent risk for homelessness based on McKinney-Vento Act definitions
- Be assessed by the HUD-VASH program at the VA medical center to have ongoing medical, mental health, substance abuse, or other serious psychosocial conditions or stressors that prevent the Veteran from obtaining and/or maintaining permanent housing on his/her own.

HUD-VASH Veterans are admitted to the program based on a demonstrated need for ongoing case management due to advanced age, mental health, substance abuse, medical and/or other co-occurring serious psychosocial issues. The program prioritizes Veterans assessed to be highly vulnerable with a high likelihood of death due to homelessness. In addition to targeting the most vulnerable homeless Veterans, HUD-VASH seeks to utilize a Housing First approach to working with Veterans to ensure rapid housing placement and stabilization. Housing First is an approach that centers on providing homeless individuals with housing quickly and then providing services and treatment as needed. What differentiates a Housing First approach from other strategies is that there is an immediate need and primary focus on helping individuals and families quickly access and sustain permanent housing.

Through this contract, the VA seeks to expedite the placement of HUD-VASH Veterans and their families in affordable, permanent housing and assist them in maintaining housing thereafter. This housing must meet the criteria for inclusion in HUD's Section 8 Housing Choice Voucher program.

Period of Performance:

The period of performance for this contract shall be for a base year plus four 1-year options.

Base Year:	January 1, 2017 through December 31, 2017
Option Year One:	January 1, 2018 through December 31, 2018
Option Year Two:	January 1, 2019 through December 31, 2019
Option Year Three:	January 1, 2020 through December 31, 2020
Option Year Four:	January 1, 2021 through December 31, 2021

Contract Type:

This shall be an indefinite delivery indefinite quantity firm fixed-price contract.

Place of Performance:

Performance shall occur at the Contractor's location unless otherwise required by work requirements listed in the PWS.

Contract Award Meeting:

The Contractor shall not commence performance on the tasks in the awarded PWS until the Contracting Officer has conducted a kick off meeting or has advised the Contractor that a kick off meeting is waived.

Government Furnished Property:

Government furnished property shall not be provided to the Contractor. All equipment required by the Contractor shall be provided at their expense.

Method of Inspection and Acceptance:

The Contracting Officer's Representative (COR) shall evaluate all deliverables submitted. The COR is responsible for certifying of invoices for payment only for deliverables received and deemed by the COR to be acceptable. A Quality Assurance Surveillance Plan shall be used by the COR to assure the success, through the uses of negative incentives, for failure of the vendor for meeting the stated performance standards.

VA Liaison shall be identified by the HUD-VASH Coordinator at each site. They shall act as the clinical liaison for all client related issues between the Contractor and the VA homeless team. They shall provide the clinical oversight. They shall not provide direct clinical supervision. They shall not be the final authority on acceptance or rejection of the tasks and deliverables.

Tasks and Associated Deliverables:

The VA is seeking a contract with a community-based case management Contractor which has community based housing placement and case management experience in working with a population similar to the HUD-VASH Veterans: chronically homeless, with advanced age, mental health, substance abuse, medical and/or other co-occurring psychosocial issues, highly vulnerable, with a high likelihood of death from homelessness. The Contractor shall work in conjunction with the San Francisco VA Health Care System in the Sonoma, CA, Mendocino, CA and Lake County, CA area.

Contractor shall be expected to have experience in implementing the Housing First approach in housing homeless individuals, as this approach shall be used with a minimum of 100 HUD-VASH Veterans on the case load.

There shall be one contracted Contractor per medical center; the Contractor shall work within the San Francisco VA Health Care System catchment areas:

Clearlake VA Clinic
15145 Lakeshore Drive
Clearlake, CA 95422

Santa Rosa VA Clinic
3841 Brickway Blvd
Santa Rosa, VA 95403

Ukiah VA Clinic
630 Kings Court
Ukiah, CA 95482

Contractor shall work with a minimum of 100 cases based on needs of the VA. There shall be a minimum of 100 Section 8 Housing Vouchers assigned to the Sonoma, CA, Mendocino, CA and Lake County, CA area Public Housing Authorities. Referrals shall be made at the discretion of the VA.

Contractor shall work with Veterans and their families with a wide range of backgrounds and biopsychosocial challenges and vulnerabilities including but not limited to severe mental illness, chronic and current substance abuse, and serious medical problems. Veterans shall be screened and admitted to the HUD-VASH program by the VA and referred to Contractor based on VA clinical assessment. Veterans may be currently homeless, or already housed by the VA HUD-VASH program and in need of ongoing community based case management services.

Contractor shall provide the following case management services:

1. Engagement of the Veteran in the VASH process. Contractor shall carry responsibility for interviewing, counseling and case managing identified Veterans by conducting psychosocial assessments to identify treatment needs which affect the Veterans' adjustment to their environment, and establish treatment goals. Contractor shall utilize counseling strategies to include crisis intervention and case management including both short- and long-term services.
2. Contractor shall assess the psychosocial and environmental needs or dysfunction secondary to or exacerbating the social, substance or psychiatric problems, which might contribute to Veterans' readjustment challenges in the community. Contractor establishes and maintains an intensive therapeutic relationship with the Veteran, family, staff, and community programs/agencies, and is responsible for formulating case-management treatment goals and plans that address identified needs, stressors and problems.
3. Contractor shall conduct high-risk screening, psychosocial assessment and treatment planning, actively involving the Veteran and their family or significant others, in coordination with the team members. Psychosocial assessments shall include goals for clinical treatment. Contractor coordinates and documents clinical case management and psychosocial services and documents the overall effectiveness of the case management services provided. Specifically, Contractor shall:
 - a. Psychosocial Assessment: The case manager is responsible for utilizing the "Social Work Psychosocial Assessment" template in Computerized Patient Record System (CPRS). This assessment should be completed within 30 days of admission to the program. The psychosocial assessment is updated when there are significant changes in the Veteran's status or condition, but at a minimum of once every year.
 - b. Individual Service Plan / Treatment Plan: The case manager is responsible for utilizing the "HUD-VASH Individual Service Plan" template and progress note title in CPRS. The Individual Service Plan should be completed within 30 days of the Psychosocial Assessment. In addition, the case manager shall use a collaborative approach in completing the plan with the Veteran and shall provide a signed copy to the HUD-VASH participant. The Individual Service Plan should be updated annually or when there are significant changes in the Veteran's status or condition. Care should be taken to develop measurable goals, which are revisited during regular meetings between the case manager and the Veteran.
 - c. Review the Individual Service Plan / Treatment Plan at least every ninety (90 days) in a clinical meeting with VA Liaison. Make changes in plans in consultation with the Veterans and the VA liaison.
 - d. Conduct home visits to the Veteran. The number of Veteran visits per month shall be based on Veterans' needs (acuity level). Visits may occur either at the Veteran's residence, at another location agreeable to the Veteran, or in the course of accompanying Veterans to appointments. Phone contacts, while an acceptable way to communicate with a Veteran, are not considered visits in meeting the minimum monthly visit requirements in each phase. There is a very strong preference for at least one visit per month to the Veteran's residence to assess the Veteran's clinical and environmental safety and housing stability.
 - e. Screen each Veteran for suicidal and homicidal risk with each contact. This screening shall be documented in regular progress notes in the VA medical record. If the Veteran is a danger to him/herself or others Contractor shall take immediate steps to provide appropriate intervention. Crisis management shall be conducted in consultation and coordination with VA HUD-VASH program leadership.
 - f. Utilize a Critical Time Intervention model for case management as described here: <http://www.criticaltime.org/model-detail/>.
 - g. Maintain professional boundaries with Veteran. Contractor staff should under no circumstances engage in sexual activities or sexual contact with Veterans or their family members, whether such contact is

consensual or forced. Contractor should under no circumstances take unfair advantage of any professional relationship or exploit Veteran clients or their family members to further their personal, religious, political, or business interests. Contractor staff should not engage in dual or multiple relationships with Veterans or their family members in which there is a risk of exploitation or potential harm to the Veteran or Veteran family. Contractor is responsible for taking steps to protect Veterans and their family members and is responsible for setting clear, appropriate, and culturally sensitive boundaries.

- h. Coordinate with VA Liaison during weekly case conferences regarding updates and changes in Veterans' care plans to foster a collaborative relationship with the VA and Contractor in meeting Veterans' needs. Case conferencing may be done in person or by telephonic conference calls as determined by the VA.
 - i. Provide monthly status reports and other data tracking information as requested by VA liaison.
4. Contractor shall work in close collaboration with VA HUD-VASH program staff to ensure Veterans' connections to needed VA medical, mental health, and substance abuse treatment and care.
 5. Contractor shall take primary responsibility for assisting Veterans in completing public housing authority (PHA) Section 8 application and other benefits paperwork as needed.
 6. Contractor shall assist Veterans in obtaining the needed documentation required by the PHA to include but not limited to, birth certificates, driver's license, income verification and any additional information required by housing authority and or potential landlord.
 7. Contractor shall accompany Veterans to voucher session briefings, medical appointments, and other appointments as needed while working with Veterans to foster independence and a sense of self-determination.
 8. Contractor shall provide hands on assistance to enable Veteran to find suitable housing, including but not limited to transporting Veteran around neighborhoods to locate vacant apartments; helping Veterans do on line housing searches if locally available; advocating with potential landlords; assisting Veterans with obtaining necessary furniture and household items to establish a household.
 9. Contractor shall provide life skills education and support to Veterans, including but not limited to:
 - a. Budgeting
 - b. Apartment maintenance (cleanliness, safety, minor repairs, etc.)
 - c. How to be a good neighbor/tenant
 - d. Mental Health Wellness Self-Management / mental health recovery living skills (if applicable)
 - e. Relapse prevention (if applicable)
 - f. Healthy lifestyle/living
 - g. Community resources and how to access
 - h. Parenting/family living skills (if applicable)
 - i. Family reunification and/or development of relevant social support networks
 10. Contractor shall provide transportation for Veterans to attend appointments at the VA, PHA, benefits agencies, meetings with landlords, etc. Transportation may include assistance in obtaining Clipper cards, bus fare, or subsidized transportation services, etc.
 11. Contractor shall advocate with potential landlords on behalf of the Veteran. Contractor shall advise any potential landlord that their agency shall be following the Veteran once housed.
 12. Contractor shall assist Veteran in securing necessary funding for move in costs, including but not limited to accessing outside funding for deposits, utility deposits, and furnishings as well as budgeting for these items.
 13. Contractor shall assist Veteran in the establishment of utility services such as electricity, gas, water, etc.
 14. Contractor shall notify VA of any negative incident occurring with Veteran within 24 hours of being informed or aware of the incident, if not sooner. Contractor shall complete a written incident report within 48 hours of notification. Incidents include but are not limited to: death, fire, drug / police raid, suicide / suicide attempt, 911 call (police / fire dept. / paramedics / other), severe medical illness / emergency, severe psychiatric illness / emergency, sexual assault, act of violence by Veteran against other(s), abusive behavior by Veteran against staff, act of violence by other(s) against Veteran, abusive behavior by staff against Veteran, accident, medication problems or adverse drug reactions, or other untoward events.
 15. Contractor shall attend all subsequent meetings between the Veteran and the housing authority including annual certifications, MOVE briefings, interim appointments, etc.
 16. Veterans shall be discharged from the case management portion of HUD-VASH upon successful community reintegration. This is also referred to as "graduation."

17. All discharges / graduations from case management must be approved by the VA HUD-VASH program. Veteran discharge from case management may be contingent upon the PHA's ability to supply a regular Section 8 Housing Choice voucher for the Veteran.
18. Contractor shall be staffed by the following:
 - a. Licensed Clinical Social Worker or Licensed Clinical Psychologist full time on staff. Schedule must permit 24-hour supervision of case management personnel for the purposes of clinical oversight, documentation and crisis management. The Licensed Clinical Social Worker or Licensed Psychologist must be available for team conferences. In addition, he/she must supervise any non-clinical/non-licensed Contractor staff providing related supportive services to Veterans to ensure quality of care, such as peer support specialists, vocational services counselors, etc.
 - b. Case Managers shall be Master's level clinicians, preferably Master of Social Worker.
 - c. Housing Specialist with experience working with homeless individuals and with Public Housing Authorities. The Housing Specialist must be knowledgeable of community resources and experienced in housing placement.
19. Contractor shall agree to:
 - a. Security/background investigation via NACI (National Agency Check with Written Inquiries) and a SAC (Special Agreement Check) which includes electronic fingerprinting for all contracted staff working with Veterans.
 - b. Without Compensation (WOC) status for case managers and their supervisor at the VA for documentation purposes.
 - c. Enter information into the VA Homeless Operations Management and Evaluation System (HOMES)
 - d. All Contractor employees and subcontractors under this contract or order are required to complete VA's on-line Information Security and Privacy combined Awareness Training Course and the Privacy Policy Awareness Training Course annually. The Privacy Awareness Training requirement may be fulfilled under additional privacy awareness training options. Contractors must provide signed certifications of completion to the COR during each year of the contract. This requirement is in addition to any other training that may be required of the Contractor and subcontractor(s).
 - e. All Contractor employees shall abide by all San Francisco VA Health Care System and Social Work Services policies pertaining but not limited to clinical documentation, Talent Management System (TMS) required trainings, SWS productivity standards, etc.
20. Contractor shall ensure that sufficient staff is available to provide the documented needs of the Veterans as well as the ability to make home visits consistent with treatment plans and the needs of the Veteran. VA expects a minimum of 1:25 case manager to client ratio; Contractor shall meet or exceed this ratio. Caseloads shall be determined by the HUD-VASH Supervisor in collaboration with Contractors based on the following factors:
 - a. Veteran acuity, e.g., vulnerabilities and risks regarding physical health, mental health, substance use, history of homelessness, and trauma
 - b. HUD voucher allocations
21. Contractor shall ensure consistency of case management services to enhance staff ability to engage and form relationships with Veterans and provide consistent and highly skilled interventions.
22. Contractor shall have procedures in place to ensure clients have access to case management services twenty-four (24) hours per day, seven (7) days per week, which shall include crisis management and referral.
23. Contractor shall be subject to performance standards specified in the Quality Assurance Surveillance Plan.
24. Confidentiality and Record keeping:
 - a. Contractor protects printed and electronic files containing sensitive data in accordance with the provisions of the Privacy Act of 1974 and other applicable laws, Federal regulations, VA statutes and policy, and VHA policy. Incumbent protects the data from unauthorized release or from loss, alteration, or unauthorized deletion. Contractor follows applicable regulations and instructions regarding access to computerized files, release of access codes, etc.
 - b. Contractor uses word processing software to execute several office automation functions such as storing and retrieving electronic documents and files; activating printers; inserting and deleting text, formatting letters, reports, and memoranda; and transmitting and receiving e-mail.

- c. The Contractor shall maintain clinical records and documentation on all contacts with Veteran. Records must be kept in a secure locked environment approved by VA liaison. Documentation must comply with and satisfy standards and procedures as determined by local VA.
25. Contractor shall use word processing software to execute several office automation functions such as storing and retrieving electronic documents and files; activating printers; inserting and deleting text, formatting letters, reports, and memoranda; and transmitting and receiving e-mail.
 26. Contractor shall have general liability insurance coverage of \$5 Million to \$10 Million to cover employee malfeasance.