Part 1: Demographics

r are 21 Domograpino	
* 1. Contact Information	
Name of person completing the survey:	
l	
Title of person completing the survey:	
l	
Email Address of person completing the	
survey:	
'	
* 2. Primary Organizatio	n Person Completing Represents:

* 3. Continuum of Care I	Number:

Part 2: Survey Completion

	have a Veteran leadership team/committee or other group charged with community station efforts related to ending homelessness among Veterans?
○ N/A	
* 5. Is the Veteran leader	ship team/committee an official group under the Continuum of Care?
Yes	
No	
○ N/A	
* 6. Was this survey comp Yes No	pleted with support from the CoC Governing body or Collaborative Applicant?
7. If you answered "Yes	" to the previous question, who is the CoC point of contact?
Name	
Organization	
Email Address	
Phone Number	
8. If you answered "No"	' to the previous question, please explain.
No response	
Experiencing capacity c	challenges
Significant leadership tr	
Other	
Out of	

/ Voc					
Yes					
No					
	swer to the previous q			e point of contact? (F	lease provide th
Name, Orga	nization, Email Addre	ss, and Phone N	iumber for each)		
11. If the an	swer to the previous q	uestion was "No	o" please explain.		
O No respo	nse				
Multiple \	'AMCs cover area but not a	II participated			
VAMC ca	pacity challenges				
Staff tran	sition				
Other					

Part 3: Mayor or Public Official Involvement and Milestones

* 12. Does your community have a commitment from the support of your efforts to end homelessness among value involvement and 4 being actively engaged, possibly consistent level. Additional detail on levels will be provided	Veterans? Please rate from 0 to 4 with 0 being no co-chairing a committee and barrier busting from a
0 - No Involvement	4 - Actively Engaged
13. How would you describe the Mayor's Office or oth homelessness?	ner local Public Official's role in ending Veteran
Actively participates in leadership meetings	
Serves as chair or co-chair	
Assists with system barrier busting and/or leveraging of reso	ources
* 14. Is your community participating in the Mayors Chapursuing the Federal Criteria and Benchmarks? Pleas	, , , , , , , , , , , , , , , , , , , ,
Mayors Challenge	
Built for Zero (Community Solutions)	
Federal Criteria and Benchmarks	
None related to Veterans	
Other (please specify)	

	Т
* 15. If applicable, when would you anticipate that your community could submit a Claim to the Federal	
Partners based on the Federal Criteria and Benchmarks in hopes of Federal Confirmation?	
Submitted – approved	
Submitted - pending	
Next Month	
Next 3 Months	
Next Six Months	
Next Year	
Conger than a year	
Never - pursuing but will not submit	
Never – pursuing but not attainable	
N/A – not pursuing	

Part 4: Planning and Implementation Efforts

General Coordinated Entry Questions
* 16. What type of Coordinated Entry access model or models is your community using? Please select all that apply.
Single Point of Access
Multi-Site Centralized Access
No Wrong Door
Assessment Hotline
N/A
* 17. What coordinated entry common assessment tool has the CoC chosen or developed?
* 18. Are you experiencing challenges with Coordinated Entry? Please check all that apply.
Lack of buy-in from providers
Speed of system
Lack of resources to meet need
Challenges with assessment tool
Challenges with master list/by-name list/active list
Challenges with case conferencing
Challenges with integrating VA resources
Challenges coordinating across large geography (like Balance of State)
Challenges with HMIS
No challenges
Other (please specify)

Yes		
○ No		
In Progress		
If yes, please explain a	and include information on how those resources are targeted and prioritized	i.
20. Daga valus aam	annumity, house any forms aligned, consistent Chalter Diversion as	tivitio o 2
_	nmunity have any formalized, consistent Shelter Diversion ac	uvilles?
Yes		
No		
In Progress		
If yes, please explain.		
ii yes, piease expiairi.		

Part 4: Planning and Implementation Efforts

VA Integration into Coordinated Entry Systems
* 21. Does the Continuum of Care have written policies and procedures for Coordinated Entry that includes Veteran resources? (Responses should reflect the full Continuum of Care geography)
Yes
○ No
In Progress
22. If you answered "Yes" to the last question, is/are the VA Medical Centers covering this CoC included in the Policies and Procedures?
Yes
○ No
O In Progress
23. If you answered "No" to the last question, what is your timeline for formalizing the Policies and Procedures to include VA Medical Centers?
2 weeks
1 month
2 months
3 months+
* 24. Do your Coordinated Entry Policies and Procedures include clear protocol for identifying and connecting Veterans to permanent housing?
Yes
○ No
☐ In Progress
* 25. Does the community have a process for connecting Veterans with employment services while obtaining housing? Please note that employment is never a prerequisite in order to obtain permanent housing. Yes No
☐ In Progress

* 26. Does the cor	mmunity have a process for connecting Veterans to benefits while obtaining housing?
Yes	
No	
In Progress	
	entinuum of Care use the SSI/SSDI Outreach, Access, and Recovery (SOAR) model to he sabling conditions access SSI/SSDI?
Yes	
O No	
In Progress	
28. If you answe	ered "Yes" to the previous question, who is the SOAR Point of Contact in the CoC?
Name	
Organization	
Email	
Linaii	
29. If you answe CoC?	ered "No" to the previous question, would SOAR technical assistance be beneficial for you
Yes	
No	
	Intinuum of Care have a process for connecting Veterans with legal services to address fere with housing placement, such as unresolved civil matters, fines, child support, and fenses?
Yes	
No	
On Progress	

Part 5: Partnerships

Yes	
No	
If no, please explai	1.
32. If "Yes" was	s the answer to the previous question, who is/are the points of contact?
VAMC Name	
VAMC Code	
Name	
Email	
33. Does comm	unity case conferencing currently take place?
Yes	
○ No	
If yes, how frequen	tly do meetings occur? (weekly, bi-weekly, monthly, bi-monthly, quarterly)
34 Is there a de	esignated individual from the VAMC or VAMCs assigned to Case Conferencing and the
	Name List/Active List?
Yes	
No	
If no, please explaiı	1.

<u> </u>				
VAMC Code				
Name				
Email				
VAMC Name				
VAMC Code				
Name				
Email				
VAMC Name				
VAMC Code				
Name				
Email				
ordination level is a 4 but 6	others at a 2, please			
36. What is your level of contract residential servers of a Partnership or	others at a 2, please			HCHV) outreach and
36. What is your level o	others at a 2, please	e use 2 for your response.		HCHV) outreach and 4 - Enhanced
ordination level is a 4 but 6 36. What is your level of contract residential server 0 - Partnership or Resource Does not Exist	others at a 2, please of coordination wit vices?	e use 2 for your response. Th VA Health Care for Hon	neless Veterans (F	HCHV) outreach and
ordination level is a 4 but 6 7 36. What is your level of contract residential served of a Partnership or Resource Does not Exist in Community 7 37. What is your level of 0 - Partnership or Resource Does not Exist	others at a 2, please of coordination wit vices? 1 - Awareness	e use 2 for your response. Th VA Health Care for Hon	neless Veterans (F	4 - Enhanced Coordination/Collabo /ASH)?
ordination level is a 4 but 6 36. What is your level of contract residential served of the contract residential served o	others at a 2, please of coordination wit vices? 1 - Awareness of coordination wit	e use 2 for your response. th VA Health Care for Hon 2 - Basic Communication th HUD and VA Supportive	neless Veterans (F 3 - Coordination e Housing (HUD-V	4 - Enhanced Coordination/Collabor /ASH)?
ordination level is a 4 but 6 36. What is your level of contract residential served of a Partnership or Resource Does not Exist in Community 37. What is your level of 0 - Partnership or Resource Does not Exist in Community	others at a 2, please of coordination wit vices? 1 - Awareness of coordination wit 1 - Awareness	e use 2 for your response. th VA Health Care for Hon 2 - Basic Communication th HUD and VA Supportive	a - Coordination Housing (HUD-V	4 - Enhanced Coordination/Collabor /ASH)? 4 - Enhanced Coordination/Collabor

hat serve your commur	nity?			
0 - Partnership or Resource Does not Exist				4 - Enhanced
in Community	1 - Awareness	2 - Basic Communication	3 - Coordination	Coordination/Collaboration
40. What is your level o	f coordination with	n other VA programs like S	Safe Haven, Veter	ans Justice
Outreach(VJO), and Co	mmunity Resourc	ce and Referral Center (C	RRC)	
0 - Partnership or				
Resource Does not Exist				4 - Enhanced
in Community	1 - Awareness	2 - Basic Communication	3 - Coordination	Coordination/Collaborati
11 What is your level o	f coordination VA	Homeless Veterans Com	munity Employme	ent Services (HVCES)
	r coordination vA	Tiomeless veterans com	manity Employme	int Scrvices (TTV CES)
0 - Partnership or Resource Does not Exist				4 - Enhanced
in Community	1 - Awareness	2 - Basic Communication	3 - Coordination	Coordination/Collaborat
-				
Work Group/Committee		n the Continuum of Care ((CoC) Governing I	
Work Group/Committee 0 - Partnership or Resource Does not Exist		n the Continuum of Care ((CoC) Governing I	4 - Enhanced
Work Group/Committee	?			4 - Enhanced
Work Group/Committee 0 - Partnership or Resource Does not Exist	?			4 - Enhanced
Work Group/Committee 0 - Partnership or Resource Does not Exist	?			4 - Enhanced
Work Group/Committee 0 - Partnership or Resource Does not Exist	?			4 - Enhanced
Work Group/Committee 0 - Partnership or Resource Does not Exist	?			4 - Enhanced
Work Group/Committee 0 - Partnership or Resource Does not Exist	?			4 - Enhanced
Work Group/Committee 0 - Partnership or Resource Does not Exist	?			4 - Enhanced
Work Group/Committee 0 - Partnership or Resource Does not Exist	?			4 - Enhanced
Work Group/Committee 0 - Partnership or Resource Does not Exist	?			4 - Enhanced
Work Group/Committee 0 - Partnership or Resource Does not Exist	?			4 - Enhanced
Work Group/Committee 0 - Partnership or Resource Does not Exist	?			4 - Enhanced
Work Group/Committee 0 - Partnership or Resource Does not Exist	?			4 - Enhanced
Work Group/Committee 0 - Partnership or Resource Does not Exist	?			4 - Enhanced
Work Group/Committee 0 - Partnership or Resource Does not Exist	?			4 - Enhanced
Work Group/Committee 0 - Partnership or Resource Does not Exist	?			4 - Enhanced
Work Group/Committee 0 - Partnership or Resource Does not Exist	?			
Work Group/Committee 0 - Partnership or Resource Does not Exist	?			4 - Enhanced
Work Group/Committee 0 - Partnership or Resource Does not Exist	?			4 - Enhanced

Part 6: Data and Data Sharing

	ommunity have an active or "by-name" list of Veterans experiencing homelessness?
Yes	
No	
In Progress	
44. If you answe	red "Yes" to the previous question, how often the list is updated?
Daily	
Weekly	
Bi-weekly	
Monthly	
Quarterly	
-	red "Yes" to the previous question, what is the number of days the community waits to n's status to missing when he/she can no longer be located or contacted?
0-10 days	
1-30 days	
31-60 days	
61-90 days	

	same one?
	Yes
	No
	In Progress
[,] 48.	Does this release include all Veterans?
	Yes
\bigcirc	No
	In Progress
	N/A
prog	grams that allow you to share data for the purposes of the By-Name/Master List/Active List? Yes
\bigcirc	No
	In Progress
	Other (please specify)
	Other (please specify)
50.	Other (please specify) Is your master list/by-name list/active list held in HMIS?
· 50.	
· 50.	Is your master list/by-name list/active list held in HMIS?
50. 	Is your master list/by-name list/active list held in HMIS? Yes
	Is your master list/by-name list/active list held in HMIS? Yes No
	Is your master list/by-name list/active list held in HMIS? Yes No Partial (Combination of HMIS and Manual Compilation)
	Is your master list/by-name list/active list held in HMIS? Yes No Partial (Combination of HMIS and Manual Compilation) If you answered "No" to the previous question, do you plan to maintain it in HMIS?
51.	Is your master list/by-name list/active list held in HMIS? Yes No Partial (Combination of HMIS and Manual Compilation) If you answered "No" to the previous question, do you plan to maintain it in HMIS? Yes
51.	Is your master list/by-name list/active list held in HMIS? Yes No Partial (Combination of HMIS and Manual Compilation) If you answered "No" to the previous question, do you plan to maintain it in HMIS? Yes No

53. If you answered "No" to the previous question, do you intend to include it in HMIS?
Yes
○ No
* 54. Is the VA Medical Center able to access HMIS for read-only information?
Yes
○ No
* 55. Is the VAMC able to enter data into HMIS (not required)?
Yes
○ No
* 56. Does your data include all Veterans who are unsheltered and experiencing homelessness?
Yes
○ No
* 57. Does your data include all Veterans who are sheltered and are experiencing homelessness?
Yes
○ No
* 58. Are there any programs in your community that are not accounted for in your data? Select all that apply:
SSVF
☐ GPD
☐ HCHV
Faith-Based organizations serving persons experiencing homelessness
Domestic Violence
Non-CoC funded organizations
Other
□ N/A

	currently on the by-name list/master list/active list at the moment? Please r the category breakdowns of Veterans that are Sheltered/Unsheltered mate
the total number of Sheltere	
the total number of Shellere	a/onshellered veterans.
Number of Veterans Total	
Number of Veterans who are Unsh	eltered
Unsheltered - On Street	
Unsheltered - In Camp/Tent City	
Unsheltered - In Car	
Unsheltered - Other Place not mea	
(abandoned building, subway stati	on, sewer, etc.)
Number of Veterans who are Sheli	orad
Number of veteralis who are shell	sieu
Sheltered - Emergency Shelter	
Chellered Emergency Gheller	
Sheltered - Non-VA Transitional H	pusina
Sheltered - VA Grant and Per Dien	ı
Sheltered - Safe Haven	
60. Of all of the Veterans wh	o are sheltered and unsheltered, how many are chronically homeless?
(number)	
61. What percentage of all \	eterans who are sheltered and unsheltered are chronically homeless?
(percentage)	,,
(porsontage)	

	average monthly inflow		=	
system? To calc	ulate the monthly avera	age, please use the t	ime period of the las	st 90 days.
64. Approximate	ly what percentage of \	√eterans self-resolv€	??	
0-5%				
6-10%				
11%-15%				
16-20%				
21-25%				
26%-30%				
26%-30% 31%+ 65. What is the a		=		xperiencing homelessne eriod of the last 90 days
26%-30% 31%+ 65. What is the a		=		=
26%-30% 31%+ 65. What is the ato housing place	ment? To calculate the	monthly average, p	lease use the time p	eriod of the last 90 days
26%-30% 31%+ 65. What is the ato housing place		monthly average, p	lease use the time p	eriod of the last 90 days
26%-30% 31%+ 65. What is the ato housing place	ment? To calculate the	monthly average, p	lease use the time p	eriod of the last 90 days
26%-30% 31%+ 65. What is the ato housing place	ment? To calculate the	monthly average, p	lease use the time p	eriod of the last 90 days
26%-30% 31%+ 65. What is the ato housing place	ment? To calculate the	monthly average, p	lease use the time p	eriod of the last 90 days
26%-30% 31%+ 65. What is the ato housing place	ment? To calculate the	monthly average, p	lease use the time p	eriod of the last 90 days
26%-30% 31%+ 65. What is the ato housing place	ment? To calculate the	monthly average, p	lease use the time p	eriod of the last 90 days
26%-30% 31%+ 65. What is the ato housing place	ment? To calculate the	monthly average, p	lease use the time p	eriod of the last 90 days
26%-30% 31%+ 65. What is the ato housing place	ment? To calculate the	monthly average, p	lease use the time p	eriod of the last 90 days
26%-30% 31%+ 65. What is the ato housing place	ment? To calculate the	monthly average, p	lease use the time p	eriod of the last 90 days

Part 7: Permanent Housing

* 67. Do you have enough permanent housing available to place every Veteran experiencing homelessness in 90 days or less after being identified? Yes No
68. If you answered "Yes" to the previous question, is the existing permanent housing currently available to Veterans experiencing homelessness affordable (ex. available to Veterans if they only spend ~40% of their income on rent and utilities.) It is understood that many households may be spending more than 40% of their income on housing. This question is focused on understanding resources/needs.
Yes
○ No
* 69. Do you have challenges with a tight rental market (ex. Vacancy rate of 5% or less)? Yes
○ No
* 70. Are you working with your local apartment association?
Yes
○ No
☐ In Progress
○ N/A
* 71. Do you need political support to assist you with landlord engagement?
Yes
○ No

	Do you have a community landlord incentive fund/contingency/risk mitigation fund?
	Yes
	No
	In Progress
	N/A
73.	If you answered "Yes" to the previous question, does the fund cover the following? Check all that app
	Damages
	Utility arrears
	Vacancy Payments
	Support for Landlords to Meet Code Requirements
	Application Fees
	Other
\bigcirc	No
75.	If you answered "Yes" to the previous question, how is the landlord incentive fund funded? Check all
that	t apply.
	Municipal General Revenue
	Dedicated Funding Source
	Philanthropic Resources
	Corporate Funded
	Faith Community Funded
76	
76.	If you answered "Yes" to the previous question, who administers the landlord incentive fund?
76.	If you answered "Yes" to the previous question, who administers the landlord incentive fund?
76.	If you answered "Yes" to the previous question, who administers the landlord incentive fund? CoC SSVF
76.	If you answered "Yes" to the previous question, who administers the landlord incentive fund? CoC SSVF City
76.	If you answered "Yes" to the previous question, who administers the landlord incentive fund? CoC SSVF

Part 8: Adoption of Best Practices

* 77. Has the Continuum of Care implemented a CoC-wide prioritization strategy for ensuring the most intensive resources (HUD-VASH, PSH) are targeted to the Veterans that need it most?
Yes
○ No
○ In Progress
* 78. Has the Continuum of Care embraced a CoC-wide Housing First approach?
Yes – fully embrace Housing First
Yes – somewhat embrace Housing First
○ No
O I don't know
* 79. Does the Continuum of Care use frequent Case Conferencing or another process to match Veterans to available housing resources and also identify system barriers?
Yes – at least monthly
163 – at least monthly
Yes - less than monthly
Yes - less than monthly
Yes - less than monthly No
Yes - less than monthly No Not Sure * 80. Has the Continuum of Care worked to integrate GPD programs and the new models into coordinated
Yes - less than monthly No Not Sure * 80. Has the Continuum of Care worked to integrate GPD programs and the new models into coordinated entry system with the support of the VA Medical Center?
Yes - less than monthly No Not Sure * 80. Has the Continuum of Care worked to integrate GPD programs and the new models into coordinated entry system with the support of the VA Medical Center? Yes
Yes - less than monthly No Not Sure * 80. Has the Continuum of Care worked to integrate GPD programs and the new models into coordinated entry system with the support of the VA Medical Center? Yes No
Yes - less than monthly No Not Sure * 80. Has the Continuum of Care worked to integrate GPD programs and the new models into coordinated entry system with the support of the VA Medical Center? Yes No In Progress

82. If you answered	"Yes" to the previous question, please provide values for the following.	
How many beds?		
What is the occupancy		
rate?		
83. If your communit	ty has GPD bridge housing and the occupancy is low, why?	
Difficulty accessing	beds	
Need additional sup	port with how to fully integrate	
Other		
* 84. Do your meeting	s have formalized agendas, action items, and notes?	
Yes		
○ No		
() In Progress		
* 85. Does everyone i	n your leadership team understand your goals and your data?	
Yes		
O No		
O In Progress		

Part 9: Federal Criteria and Benchmarks

Please indicate to what extent the Continuum of Care or the community for which you are
responding has reached the following federal criteria.
* 86. Criteria 1: Has your community identified all Veterans experiencing homelessness?
Yes
○ No
In Progress
* 87. Criteria 2: Does your community provide shelter immediately to any Veteran experiencing unsheltered homelessness who wants it?
Yes
○ No
In Progress
Not pursuing
* 88. Criteria 3: Does your community only provide service-intensive transitional housing in limited instances?
Yes
○ No
In Progress
Not pursuing
* 89. Criteria 4: Does your community have the capacity to assist Veterans to swiftly move into permanent housing?
Yes
○ No
☐ In Progress
Not pursuing

* 90. Criteria 5: Does your community have the resources, plans, and system capacity in place should any Veteran become homeless or be at risk of homelessness in the future?
Yes
○ No
☐ In Progress
Not pursuing

Part 10: Technical Assistance

	Would your community be interested in receiving Technical Assistance related to ending homelessnes: ong Veterans?
	Yes
	No
	note that this is an exploratory list. It may not be all-inclusive. Additionally, technical assistance is meant in the st sense which could include connection to existing tools or hands-on support based on availability.
92. app	If yes, what areas of technical assistance would be the most helpful to your community? Check all tha
	By Name/Master List
	Coordinated Entry
	Case Conferencing Strategies
	Prioritization Strategies
	System Wide Progressive Engagement & Assistance Strategies
	Housing First and Trauma-Informed Care
	Rapid Re-housing
	Engaging Leadership/Convening Partners
	Developing Emerging Leaders
	System Mapping
	Grant and Per Diem Models and Coordination
	Quality Improvement/Sustainability
	Shelter Diversion Practices
	Targeting RRH to High-Need Veteran Households
	Rural/BOS Challenges
	Data sharing and/or data best practices
	Data analysis/analytics
	Other (please specify)

	SSVF Technical Assistance
	HUD Vets@Home Technical Assistance (Current or Former)
	Built for Zero (Community Solutions)
	ERPI (through VAMC)
_	HUD Priority Community TA
_	Don't know
	None
	Other (please specify)
۱4. ۱	What are some areas or issues that are proving most difficult for your community in your efforts to e
	elessness among Veterans?
	elessitess afforty veteralis:
)5. I	Please further describe the levels of coordination indicated in Part 5: Partnerships. For example, if
	Please further describe the levels of coordination indicated in Part 5: Partnerships. For example, if
	Please further describe the levels of coordination indicated in Part 5: Partnerships. For example, if tionship was rated a 0 or 1 under Part 5, please tell us why and what might help with improving the
ela	ionship was rated a 0 or 1 under Part 5, please tell us why and what might help with improving the
ela	·
ela	ionship was rated a 0 or 1 under Part 5, please tell us why and what might help with improving the
ela	ionship was rated a 0 or 1 under Part 5, please tell us why and what might help with improving the
ela	ionship was rated a 0 or 1 under Part 5, please tell us why and what might help with improving the
ela	ionship was rated a 0 or 1 under Part 5, please tell us why and what might help with improving the
ela	ionship was rated a 0 or 1 under Part 5, please tell us why and what might help with improving the
ela	ionship was rated a 0 or 1 under Part 5, please tell us why and what might help with improving the
ela	ionship was rated a 0 or 1 under Part 5, please tell us why and what might help with improving the
ela ela	tionship was rated a 0 or 1 under Part 5, please tell us why and what might help with improving the tionship. If a relationship was rated as a 3 or 4, please tell us what is working well.
ela ela	ionship was rated a 0 or 1 under Part 5, please tell us why and what might help with improving the
ela ela ela	tionship was rated a 0 or 1 under Part 5, please tell us why and what might help with improving the tionship. If a relationship was rated as a 3 or 4, please tell us what is working well. What successes have you had with your VA partners? And/Or How have VA resources and staff ad
ela ela ela	tionship was rated a 0 or 1 under Part 5, please tell us why and what might help with improving the tionship. If a relationship was rated as a 3 or 4, please tell us what is working well.
ela ela ela	tionship was rated a 0 or 1 under Part 5, please tell us why and what might help with improving the tionship. If a relationship was rated as a 3 or 4, please tell us what is working well. What successes have you had with your VA partners? And/Or How have VA resources and staff ad
ela ela ela	tionship was rated a 0 or 1 under Part 5, please tell us why and what might help with improving the tionship. If a relationship was rated as a 3 or 4, please tell us what is working well. What successes have you had with your VA partners? And/Or How have VA resources and staff ad
ela ela 96.	tionship was rated a 0 or 1 under Part 5, please tell us why and what might help with improving the tionship. If a relationship was rated as a 3 or 4, please tell us what is working well. What successes have you had with your VA partners? And/Or How have VA resources and staff ad
ela ela 96.	tionship was rated a 0 or 1 under Part 5, please tell us why and what might help with improving the tionship. If a relationship was rated as a 3 or 4, please tell us what is working well. What successes have you had with your VA partners? And/Or How have VA resources and staff ad
ela ela 96.	tionship was rated a 0 or 1 under Part 5, please tell us why and what might help with improving the tionship. If a relationship was rated as a 3 or 4, please tell us what is working well. What successes have you had with your VA partners? And/Or How have VA resources and staff ad
ela ela 96.	tionship was rated a 0 or 1 under Part 5, please tell us why and what might help with improving the tionship. If a relationship was rated as a 3 or 4, please tell us what is working well. What successes have you had with your VA partners? And/Or How have VA resources and staff ad
ela ela 96.	tionship was rated a 0 or 1 under Part 5, please tell us why and what might help with improving the tionship. If a relationship was rated as a 3 or 4, please tell us what is working well. What successes have you had with your VA partners? And/Or How have VA resources and staff ad
ela ela ela	tionship was rated a 0 or 1 under Part 5, please tell us why and what might help with improving the tionship. If a relationship was rated as a 3 or 4, please tell us what is working well. What successes have you had with your VA partners? And/Or How have VA resources and staff ad

98. Tell us abo	ut how you are creatin	g sustainability wit	hin your system?	
00.4				
99. Any additio	nal comments and/or	feedback:		