

## HOMELESS VETERAN CONTACT AND REFERRAL MANAGEMENT

**1. REASON FOR ISSUE:** This Veterans Health Administration (VHA) directive states policy for homeless Veteran contact management in VHA and the National Call Center for Homeless Veterans; defines referral roles, responsibilities and reporting requirements for Department of Veterans Affairs (VA) medical facilities; and states oversight requirements for VHA program offices responsible for Veteran homeless and treatment services.

**2. SUMMARY OF MAJOR CHANGES:** This directive:

a. Updates responsibilities for the Assistant Under Secretary for Health for Operations; Executive Director, Homeless Programs Office; and Executive Director, Office of Member Services (see paragraph 5).

b. Defines contact management and referral (see paragraph 3).

**3. RELATED ISSUES:** VHA Directive 1501, VHA Homeless Programs, dated October 21, 2016.

**4. RESPONSIBLE OFFICE:** The Office of Member Services (15MEM) is responsible for the contents of this directive. Questions may be referred to [VHAMSBusinessPolicyOffice@va.gov](mailto:VHAMSBusinessPolicyOffice@va.gov).

**5. RESCISSIONS:** VHA Directive 1502, Homeless Veteran Contact and Referral Management, dated June 7, 2017, is rescinded.

**6. RECERTIFICATION:** This VHA directive is due to be recertified on or before the last working day of May 2027. This VHA directive will continue to serve as national VHA policy until it is recertified or rescinded.

**BY DIRECTION OF THE OFFICE OF THE  
UNDER SECRETARY FOR HEALTH:**

/s/ RimaAnn O. Nelson  
Assistant Under Secretary for Health  
for Operations

**NOTE:** All references herein to VA and VHA documents incorporate by reference subsequent VA and VHA documents on the same or similar subject matter.

**May 20, 2022**

**VHA DIRECTIVE 1502**

**DISTRIBUTION:** Emailed to the VHA Publications Distribution List on May 23, 2022.

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## HOMELESS VETERAN CONTACT AND REFERRAL MANAGEMENT

### 1. PURPOSE

This Veterans Health Administration (VHA) directive states policy for homeless Veteran contact management in VHA and the National Call Center for Homeless Veterans (NCCHV). The directive defines referral roles, responsibilities and reporting requirements for Department of Veterans Affairs (VA) medical facilities and specifies oversight requirements for VHA program offices which are responsible for Veteran homeless and treatment services. **AUTHORITY:** 38 U.S.C. §§ 2031, 7301(b).

### 2. BACKGROUND

NCCHV was established in March 2010 to ensure homeless Veterans or Veterans at risk of homelessness always have free access to responders. The VHA Health Resource Center, a division of the Office of Member Services, assumed management of NCCHV on March 17, 2015, in order to:

- a. Improve Veterans' access to responders through state-of-the-art forecasting and scheduling.
- b. Standardize NCCHV processes in order to accurately refer Veterans to appropriate service providers.
- c. Monitor and report contact management data and referrals and escalate cases when necessary.

### 3. DEFINITIONS

a. **Contact Management.** Contact management is receiving and responding to inquiries from Veterans, their beneficiaries and caregivers, and other external customers received by NCCHV. Contact management also includes capturing data on each contact and customer interaction.

b. **Referral.** For purposes of this directive, referral is forwarding service requests from incoming contacts to the appropriate VA medical facility entity.

### 4. POLICY

It is VHA policy to serve Veterans who are homeless or at risk of homelessness through effective contact management strategies and to monitor the resolution of these contacts in order to contribute to ending Veteran homelessness.

### 5. RESPONSIBILITIES

a. **Under Secretary for Health.** The Under Secretary for Health is responsible for ensuring overall VHA compliance with this directive.

b. **Assistant Under Secretary for Health for Operations.** The Assistant Under Secretary for Health for Operations is responsible for:

(1) Supporting the Office of Member Services with implementation and oversight of this directive.

(2) Communicating the contents of this directive to each of the Veterans Integrated Service Networks (VISNs).

(3) Assisting VISN Directors to resolve implementation and compliance challenges in all VA medical facilities within that VISN.

(4) Providing oversight of VISNs to ensure compliance with this directive and its effectiveness.

c. **Executive Director, Office of Member Services.** The Executive Director, Office of Member Services or designee is responsible for:

(1) Providing oversight of the VHA Health Resource Center, under which NCCHV is aligned, including:

(a) Approving adequate resolution of referrals to VISN and VA medical facility Homeless Coordinators.

(b) Resolving contact management deficiencies through escalation to the Homeless Programs Office and VISN and VA medical facility Directors to ensure all NCCHV referrals to VA medical facility Homeless Coordinators are resolved within 5 business days.

(c) Ensuring VA medical facility Homeless Coordinators review each NCCHV referral routed to their VA medical facility within 1 business day, make contact with the homeless Veteran or their representative and document all referral activities in the approved NCCHV web application within 4 hours of executing such actions.

(2) Ensuring NCCHV employees provide, respond to and resolve NCCHV web application and homeless Veteran consult-related issues from VA medical facility points of contact within 2 hours of the request for assistance.

(3) Ensuring NCCHV employees receive appropriate orientation on Homeless Programs Office resources for homeless Veterans to provide value-added information to homeless Veterans and their families.

(4) Reporting Veteran satisfaction ratings reported on customer surveys to the Homeless Programs Office; the annual goal for customer surveys is 90% or higher satisfaction with their NCCHV experience.

(5) Developing and managing operational NCCHV response metrics based upon stakeholder needs with a goal of an average speed of answer of 30 seconds and an

annual cumulative abandonment rate of no more than 5% of calls received. **NOTE:** *Response metrics are measured by the customer relationship management system managed by the VA Office of Information and Technology and used by NCCHV responders.*

(6) Developing operations plans to determine resource needs and requesting an annual funding allocation for NCCHV operations expenditures and related information technology infrastructure from the Homeless Programs Office.

(7) Communicating to VA medical facility Homeless Coordinators the requirement to document all NCCHV referrals and the final outcome of the referral in the approved NCCHV web application within 5 business days. **NOTE:** *If the Veteran is currently enrolled in VHA health care, documentation also must be made in the Veteran's electronic health record (EHR).*

d. **Executive Director, Homeless Programs Office.** The Executive Director, Homeless Programs Office, is responsible for:

(1) Promoting NCCHV to VA stakeholders (e.g., VHA program offices, Veterans Benefits Administration offices, U.S. Department of Defense offices) and community partners as the primary resource for contact center support for homeless Veterans.

(2) Orienting VA medical facility Homeless Coordinators on the use of the NCCHV Referral Process tool, operational protocols and how to process NCCHV referrals in the approved NCCHV web application.

(3) Providing funding to the Office of Member Services for management of NCCHV.

(4) Facilitating monthly meetings between the Office of Member Services, the Homeless Programs Office, VISN Homeless Coordinators and VA medical facility Homeless Coordinators to ensure productive intra-agency collaborations.

(5) Communicating with the Office of Member Services, VISN Directors and VA medical facilities in resolving contact management deficiencies.

e. **Veterans Integrated Services Network Director.** The VISN Director is responsible for:

(1) Appointing a VISN Homeless Coordinator to coordinate communications between NCCHV, the Homeless Programs Office and VA medical facility Homeless Coordinators.

(2) Ensuring that all VA medical facilities within the VISN comply with this directive and informing leadership when barriers to compliance are identified.

(3) Reviewing reports regarding timeliness of responses to referrals provided by their VA medical facilities and applying corrective measures to ensure NCCHV referrals received are resolved within 5 business days.

(4) Ensuring VA medical facilities resolve contact management deficiencies in response times and documentation issues with NCCHV referrals within 2 business days of being notified.

f. **Veteran Integrated Services Network Homeless Coordinator.** The VISN Homeless Coordinator is responsible for:

(1) Communicating to VA medical facility Homeless Coordinators their responsibilities as stated in this directive.

(2) Acting as a liaison between VISN and VA medical facility Directors to communicate and resolve VA medical facility performance deficiencies in response times and documentation issues with NCCHV referrals.

(3) Monitoring the use of NCCHV contact and referral applications to support NCCHV and homeless consult reporting at VA medical facilities within the VISN.

g. **VA Medical Facility Director.** The VA medical facility Director is responsible for:

(1) Appointing a VA medical facility Homeless Coordinator to handle referrals from NCCHV.

(2) Overseeing homeless Veteran contact and referral management activities at the VA medical facility.

(3) Informing the VISN Director of performance deficiencies and barriers to compliance reported by the VA medical facility Homeless Coordinator.

(4) Providing the VISN Director with a report of Veterans who were not served within 5 business days of referral. The report must include the reason(s) for the delay for each case and must be submitted within 2 business days of not meeting the expectation.

(5) Ensuring homeless Veterans have access to clinically licensed mental health specialists at the medical facility or access to community mental health services within 5 business days of NCCHV referrals.

h. **VA Medical Facility Homeless Coordinators.** The VA medical facility Homeless Coordinators are responsible for:

(1) Adhering to NCCHV processes stated in this directive and NCCHV procedures located at

[https://vaww.vrm.km.va.gov/system/templates/selfservice/va\\_kanew/help/agent/locale/en-US/portal/55440000001046/content/554400000051595/NCCHV-Landing-Page](https://vaww.vrm.km.va.gov/system/templates/selfservice/va_kanew/help/agent/locale/en-US/portal/55440000001046/content/554400000051595/NCCHV-Landing-Page).

**NOTE:** *This is an internal VA website that is not available to the public.*

(2) Attending VHA Homeless Programs Office monthly meetings.

(3) Reviewing all NCCHV referrals routed to their VA medical facility within 1 business day. The review must include making contact with the referred homeless Veteran or their representative.

(4) Documenting all referral activities in the approved NCCHV web application within 4 hours of executing such actions as well as documenting the final outcome of the referral within 5 business days of receiving the referral. **NOTE:** *If the Veteran is currently enrolled in VHA health care, documentation also must be made in the Veteran's EHR.*

(5) Attempting to make contact by phone or in person with referred Veterans or their representative for no less than 3 times within 3 consecutive days, with at least 4 hours between each contact attempt, prior to closing out the referral.

(6) Connecting homeless Veterans with appropriate resources, programs and services within 5 business days of receiving a NCCHV referral based on the Veteran's acceptance of these resources; reporting performance deficiencies, including the reason for the delay if a Veteran is not served within 5 business days, to the VA medical facility Director.

## 6. TRAINING

There are no formal training requirements associated with this directive.

## 7. RECORDS MANAGEMENT

All records regardless of format (e.g., paper, electronic, electronic systems) created by this directive must be managed as required by the National Archives and Records Administration (NARA) approved records schedules found in VHA Records Control Schedule 10-1. Questions regarding any aspect of records management should be addressed to the appropriate Records Officer.

## 8. REFERENCES

a. 38 U.S.C. § 2031, 7301(b).

b. Office of Member Services Portal, NCCHV Landing Page:  
[https://vaww.vrm.km.va.gov/system/templates/selfservice/va\\_kanew/help/agent/locale/en-US/portal/55440000001046/content/554400000051595/NCCHV-Landing-Page](https://vaww.vrm.km.va.gov/system/templates/selfservice/va_kanew/help/agent/locale/en-US/portal/55440000001046/content/554400000051595/NCCHV-Landing-Page).

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