



National Veterans'
Technical Assistance Center

Case Management Skills: Homeless Veterans' Reintegration Program (HVRP)

Community of Practice (CoP)

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Reminder

HVRP best practices will be shared during this session. NVTAC encourages all grantees to utilize best practices that may improve their service delivery. Before implementing a practice discussed during this session, please review your award statement of work and contact your Grant Officer's Technical Representative (GOTR) to discuss if it is an allowable cost or activity or if it requires an amendment to your approved plan.

Poll: Does your organization have a standardized case management process?

Poll: Does your organization train staff on case management skills?

HVRP Case Management Activities

Required HVRP Case Management Activities

- Assessment and Intake
- Developing an Individualized Employment Plan (IEP)
- Job Search
- Job Placement and Retention
- Follow-Up and Monitoring
- Documentation and Reporting

Motivational Interviewing (MI)

MI

- MI is a collaborative conversation that focuses on increasing the participant's motivation to change.
- The case manager guides and focuses the conversation using active listening and other techniques, but the client drives the process.
- Focus is on where the person is in terms of the four stages of change: pre-contemplation, contemplation, preparation, and action.

Stages of Change (1 of 2)

- Pre-contemplation
 - Not considering change or seeing it as an option
 - Employment not considered/thought about
 - MI Skill: Encourage and explore
- Contemplation
 - Thinking about making a change but not sure about doing so
 - Seeing employment as a possible goal
 - MI Skill: Active listening and asking

Stages of Change (2 of 2)

- Preparation
 - Has defined intention to change and plans to do so
 - Wants to become employed and has established goals with a defined plan
 - MI Skill: Guide and ask, move to action
- Action
 - Commits to making change (time and energy)
 - Follows plan to gain employment
 - MI Skill: Inform, clarify direction

Advocacy

Advocacy

- Advocacy is an essential aspect of case management.
- Advocacy may involve
 - Mediating for the veteran with professional or personal connections
 - Navigating needed social service systems with the veteran, ensuring they receive needed services and support.
 - With the permission of the veteran, talking over possible challenges and accessibility needs with community support, their employer, and other entities.

Understanding the Veteran Population

**Interactive Activity: Close your eyes
and picture a veteran.**

Who did you see?

What is a Veteran? (1 of 5)

- Veterans are as diverse a population as any other
 - Age
 - Combat and peacetime veterans
 - Gender
 - LGBTQI+ status
 - Branch and component
 - Educational background
- For many, the word “veteran” is more than a title; it is part of their identity – or it could represent everything they want to escape.
- Are you a veteran, **OR** have you or someone in your family served in the military?

What is a Veteran? (2 of 5)

- Age
 - Current veterans have served in wartime campaigns and during times of peace going back to World War II (WWII).
 - Approximately 119,550 Americans who served in WWII are alive as of the end of fiscal year (FY) 2023.
 - An estimated 131 pass away daily.
 - Demographics as of the end of FY23:
 - 18,250,044 projected veterans in the United States
 - 46 percent are age 65 or older

(Source: [U.S. Department of Veterans Affairs \(VA\) FY23 Q4 Pocket Card](#))

What is a Veteran? (3 of 5)

- Gender
 - Of the over 18 million projected veterans living in the United States:
 - 2,066,691 are female (11.32 percent)
- LGBTQI+
 - Veterans that served during “Don’t Ask, Don’t Tell”
 - Introduced in 1994
 - Repealed in full on September 20, 2011
 - 17 years of service members who were unable to unite their military identities with their gender/sexual identities

(Source: [VA FY23 Q4 Pocket Card](#))

What is a Veteran? (4 of 5)

- Branch
 - Army
 - Marines
 - Navy
 - Air Force
 - Space Force
 - Coast Guard
- Component
 - Active
 - National Guard/Reserve

What is a Veteran? (5 of 5)

- Rank
 - Enlisted
 - Lower-enlisted
 - Noncommissioned Officer (NCO)
 - Senior NCO
 - Commissioned Officers
- Educational Background
- Combat versus peacetime

(Source: historymint.com, [History, Military Ranks Explained](#))

ARMY													
no insignia													
Private E-1 (PV1)	Private E-2 (PV2)	Private First Class (PFC)	Specialist (SPC)	Sergeant (SGT)	Staff Sergeant (SSG)	Sergeant First Class (SFC)	Master Sergeant (MSG)	First Sergeant (1stSg)	Sergeant Major (SGM)	Command Sergeant Major (CSM)	Sergeant Major of the Army (SMA)		
MARINES													
no insignia													
Private (PVt)	Private First Class (PFC)	Lance Corporal (LCpl)	Corporal (Cpl)	Sergeant (Sgt)	Staff Sergeant (SSgt)	Gunnery Sergeant (GySgt)	Master Sergeant (MSgt)	First Sergeant (1stSgt)	Master Gunnery Sergeant (MGySgt)	Sergeant Major (SgtMaj)	Sergeant Major of the Marine Corps (SgtMajMC)		
AIR FORCE													
no insignia													
Airman Basic (AB)	Airman (Airmn)	Airman First Class (A1C)	Senior Airman (SrA)	Staff Sergeant (SSgt)	Technical Sergeant (TSgt)	Master Sergeant (MSgt)	First Sergeant (E-7)	Senior Master Sergeant (SMSgt)	First Sergeant (E-8)	Chief Master Sergeant (CMSgt)	First Chief Master Sergeant (E-9)	Command Chief Master Sergeant (CCM)	Chief Master Sergeant of the Air Force (CMSAF)
NAVY													
no insignia													
Seaman Recruit (SR)	Seaman Apprentice (SA)	Seaman (SN)	Petty Officer Third Class (PO3)	Petty Officer Second Class (PO2)	Petty Officer First Class (PO1)	Chief Petty Officer (CPO)	Senior Chief Petty Officer (SCPO)	Master Chief Petty Officer (MCPO)	Force or Fleet Command Master Chief Petty Officer (FORMC) (FLTMC)	Master Chief Petty Officer of the Navy (MCPON)			
COAST GUARD													
Seaman Recruit (SR)	Seaman Apprentice (SA)	Seaman (SN)	Petty Officer Third Class (PO3)	Petty Officer Second Class (PO2)	Petty Officer First Class (PO1)	Chief Petty Officer (CPO)	Senior Chief Petty Officer (SCPO)	Master Chief Petty Officer (MCPO)	Command Master Chief (CMC)	Master Chief Petty Officer of the Coast Guard (MCPON-CG)			

Discussion Question: Is being a “veteran” an identity or a title?

Defining Trauma and How it Impacts Veterans

Discussion Question: What are the sources of trauma in military personnel?

Defining Trauma

- Trauma is a deeply distressing or disturbing acute experience or exposure to increased levels of stress that can have lifelong impacts on the individual
 - Combat stress
 - Military sexual trauma
 - Non-Combat stressors
 - Law enforcement
 - Medical field
 - Loss of close friends or teammates
- Post-traumatic Stress Disorder (PTSD) is a common (and commonly misunderstood) result of lived trauma.

PTSD Basics (1 of 2)

- PTSD
 - Upsetting thoughts and memories can be normal, and often people can feel better after a few weeks or months.
 - If thoughts and memories persist, this is symptomatic of PTSD.
 - Symptoms can come and go over time
 - What to look for in veterans:
 - Triggering situations, such as fireworks or anniversaries
 - Avoiding thoughts about the event
 - Reliving acute events
 - Hyperarousal or hypervigilance

(Source: [VA: PTSD Basics](#))

PTSD Basics (2 of 2)

- Reliance on substances
 - Alcohol
 - Controlled substances
- Increased difficulty with everyday tasks
 - Crowd avoidance
 - Isolating
 - Difficulty with keeping and maintaining employment
 - Difficulty with maintaining personal relationships

(Source: [VA: PTSD Basics](#))

Who Is Subject to PTSD?

- ANYONE!
- Veterans
 - Combat experience can have long-lasting effects long after the combat experience has ended.
- Very young trauma victims
- Children and teens
- Military/non-military sexual trauma survivors

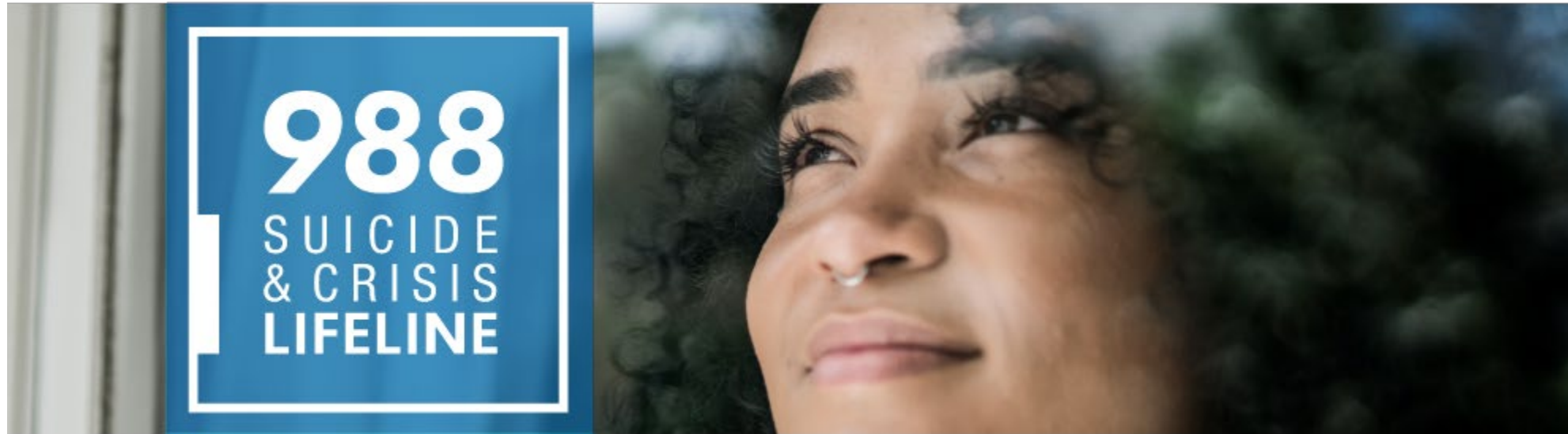
(Source: [VA: What is PTSD?](#))

PTSD Resources

- [VA PTSD Program Directory](#)
- [VA Mobile Apps](#)
- [MyHealth-eVet PTSD Screening](#)
- [Make the Connection PTSD](#)
- [Veterans Self-Check Quiz](#)

Discussion Question: How do we help someone in immediate crisis?

Suicide Prevention



(Source: [Substance Abuse and Mental Health Services Administration, 988 Suicide & Crisis Lifeline](#))

Crisis Intervention

Crisis Intervention

- The development of crisis response strategies is needed before a crisis arises so that HVRP staff are ready and prepared to help.
- Crisis intervention techniques
 - Practice active listening
 - Help the veteran identify calming strategies
 - Create a safety plan with the veteran
 - Introduce problem-solving techniques
 - Identifying social supports
 - Encourage mental health counseling/treatment

How to Approach Individuals Using Case Management Skills

Tailoring Case Management to Specific Veteran Needs (1 of 2)

- Veterans encounter a set of unique challenges when transitioning from military service to civilian life.
 - These challenges may include
 - Adapting to a different work environment
 - Addressing physical and mental health issues, such as PTSD
 - Dealing with potential homelessness and substance abuse

Tailoring Case Management to Specific Veteran Needs (2 of 2)

- These challenges may include (continued)
 - Navigating the complexities of U.S. Department of Veteran Affairs (VA) services.
 - These hurdles can be daunting, making it essential to provide targeted support and case management to ensure veterans' successful reintegration into civilian society and improve their overall well-being

Housing First Approach

- Case management for homeless veterans prioritizes
 - Securing stable housing as the first step in their reintegration process.
 - Recognizing that without a safe and stable living environment, addressing other issues becomes more challenging.
- Coordinated entry systems
 - These systems ensure that homeless veterans have streamlined access to housing and support services, making it easier for them to find appropriate shelter and assistance.

Integrated Treatment Models

- Integrated treatment models involve coordinating mental health services, substance abuse treatment, and other necessary support to address the complex needs of individuals.
 - Coordinated care teams
 - Dual diagnosis treatment
 - Trauma-informed care
 - Wrap-around services
 - Incarceration reentry programs
 - Maternal-child health integration

Harm Reduction Strategies (1 of 2)



- Harm reduction strategies in case management involve
 - An approach that prioritizes minimizing the negative consequences associated with risky behaviors rather than focusing solely on abstinence.
 - In a clinical context, this method acknowledges the individual's current circumstances and aims to reduce the harm associated with substance use.

Harm Reduction Strategies (2 of 2)

- Harm reduction in case management may include
 - Providing access to clean needles
 - Overdose prevention education
 - Safer use practices
- This approach recognizes that individuals may not be ready or able to cease substance use immediately, and it focuses on pragmatic steps to enhance safety and well-being.

Self-Care

Self-Care

- Self-care is crucial for case managers working with veterans to maintain their well-being, resilience, and effectiveness.
- Prioritizing self-care is not selfish; it is a necessary aspect of maintaining the resilience and empathy required to effectively support challenging veterans.
 - Regularly reassess and adjust your self-care practices based on your evolving needs and the demands of your role.

Self-Care Strategies

- Establish boundaries
- Supervision and peer support
- Reflective practices
- Self-compassion
- Regular breaks
- Physical well-being
- Mindfulness and relaxation
- Continuous professional development
- Hobbies and interest
- Celebrate success
- Regular check-ins

Discussion Questions

What case management skills have been successful for your program?

What questions do you have regarding case management skills?

Resources

- [NVTAC Website](#)
- [NVTI Microlearning](#)
- [Self-care video](#)

Thank you!

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