

MEDICAL-LEGAL PARTNERSHIPS FOR VETERANS:

LEVERAGING LEGAL SERVICES

ON THE HOMELESS PATIENT

ALIGNED CARE TEAM

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This brief is possible with support from the Bob Woodruff Foundation.

Medical-legal partnerships (MLPs) embed civil legal aid attorneys into the health care setting to address the unmet legal needs that can affect Veterans' health and wellbeing, such as an impending eviction, issues with accessing VA benefits, and family related issues like child support. Currently, one-quarter (25.9 percent) of VA health care systems that have an H-PACT, also have an on-site VA MLP. Aligning the goals and services of H-PACTs and VA MLPs can have a tremendous impact on improving the overall healthcare of homeless and at-risk Veterans.

Introduction

In 2019, it was estimated that on a single night around 37,000 Veterans were experiencing homelessness.¹ Veterans are at an increased risk of housing instability and poverty, as well as the physical and mental health conditions associated with not having a stable place to call home.² Chronic health conditions such as post-traumatic stress disorder, depression, traumatic brain injury, and substance use disorder derived from years of service as well as other complex factors contribute to the cyclical nature of Veteran homelessness.³ A recent study found that Veterans who had experienced homelessness were 7.8 times more likely to have attempted suicide than Veterans who had never been homeless.⁴ Moreover, Veterans who face these challenges may have difficulty accessing primary health care and coordinated social services, and they may instead rely on periodic, fragmented care in urgent care and emergency department settings.⁵



For the past decade, the U.S. Department of Veterans Affairs (VA) has been working to end Veteran homelessness with many positive gains. The Veterans Health Administration (VHA) has worked closely with local, state, and federal governments to develop and implement a variety of programs that can help reduce Veteran homelessness, such as the Veterans Justice Outreach Program (VJO), Supportive Services for Veteran Families Program (SSVF), the Housing and Urban Development/Veterans Affairs Supportive Housing voucher program (HUD-VASH), and many more.⁶ These programs have been able to identify and target different facets of Veteran homelessness, and through strategic implementation and collaborative partnerships, the VA has seen a decline in the number of Veterans experiencing homelessness overall.⁷ A specialized program that supports this population of Veterans is the Homeless Patient Aligned Care Team (H-PACT). This clinical intervention team, highlighted in this brief, began as a pilot project to bring Veterans experiencing and at-risk of homelessness into a coordinated care setting with the services necessary to get them the quality health care and housing that they need.⁸

Despite gains made by VHA's programs for Veterans experiencing homelessness, there is still work to be done to eliminate homelessness and to fill the gaps in unmet needs among these Veterans by addressing powerful social determinants like the law.

The VHA's 2018-2024 strategic plan calls for continued support of integrated services that assist with housing, employment, primary care, and mental health care needs⁹—including implementation of the 2018 MISSION Act¹⁰—and includes assisting Veterans with access to legal services among the strategies to improve Veteran health outcomes. Notably, the use of legal services to remove barriers to health and wellbeing is a strategy that is increasingly being embraced by Veterans Health Administration facilities through the adoption of medical-legal partnerships (MLPs).

MLPs embed lawyers specializing in civil law into the health care setting to address unmet legal needs, including those problems that routinely rank highest in the annual Community Homelessness Assessment, Local Education and Networking Groups (CHALENG) survey of homeless Veterans experiencing and at-risk of homelessness.¹¹

This brief aims to highlight the potential for partnership between the legal community and H-PACTs at VA Medical Centers (VAMCs), and to profile MLPs that are successfully tackling the unmet legal needs of Veterans experiencing and at-risk of homelessness through this approach.

Homeless Patient Aligned Care Teams (H-PACT)

The Homeless Patient Aligned Care Team (H-PACT) is a medical home treatment model being implemented at over 50 VA medical centers nationwide. The goal of the H-PACT is to provide the collaborative care necessary to tackle the physical, mental, and social determinants of health which can lead to homelessness. H-PACT clinics bring together primary care medical staff, social workers, mental health and substance use counselors, nurses, and homeless program staff into a co-located, comprehensive care team. Eligible Veterans can access these services, which require no appointments, and include access to various resources, including medical care, housing placement support, substance use and mental health treatment, and VA benefits counseling.¹² These clinics often serve as a 'first step' for Veterans experiencing homelessness to get connected to supportive services and on the path to stable housing.

The H-PACT model, which was born out of the National Center for Veteran Homelessness and started as a pilot program of 32 sites in 2010, has demonstrated many measurable wins, including reduction of emergency department use and hospitalizations, success with moving H-PACT patients into regular primary care settings, and improvement of chronic disease management.¹³

CORE ELEMENTS OF AN H-PACT³⁰

1. Reduce barriers to receiving care:

- Open-access, walk-in care and flexible scheduling

2. Wrap around services:

- Co-location of mental health, homeless programs, and primary care
- Most sites provide food, clothing, hygiene products, and shower and laundry facilities

3. Intensive care management:

- Coordination with community agencies

4. Evidence-based, culturally-sensitive care:

- H-PACT staff receives ongoing homeless care skill development

5. Accountability:

- Real-time data
- Technical assistance and personalized feedback

To learn more about the H-PACT model, see the [VA's Homeless Patient Aligned Care Teams website](#).

Medical-Legal Partnerships (MLPs)

Medical-legal partnerships (MLPs) embed lawyers specializing in civil law into the health care setting to address unmet legal needs that can affect Veterans' health and wellbeing, such as an impending eviction, issues with accessing VA benefits, and family related issues like child support. MLP lawyers also consult with clinicians on legal issues that might affect a Veterans' health care, and provide training to health care staff on how to identify social needs with legal underpinnings. Under the VHA Directive 2011-034, VA medical centers were encouraged to provide physical space for local legal service providers to assist Veterans. To date, nearly 30 VA medical centers have established formal agreements with civil legal aid organizations, law schools, and private law firms doing pro bono work to form MLPs. Additionally, over 130 legal clinics are offered throughout VHA facilities.¹⁴

In addition to the CHALENG survey findings¹⁵, there has been research to support the need for legal service integration with a Veteran's overall health care treatment. A recent study found that legal problems significantly increased the odds of a Veteran's suicidal ideation and suicide attempt. Veterans who reported legal problems had 1.9 times greater odds of having suicidal ideation and 1.6 greater odds of suicide attempt, than Veterans who were not experiencing legal issues.¹⁶ Another study examining the outcomes of Veterans who accessed legal services through MLPs at four VA facilities found that those who accessed MLP services were able to secure housing and income, and showed significant improvements in their mental health. Legal problems took at average of 5.4 hours to resolve, and most were resolved out of court.¹⁷

To learn more about medical-legal partnerships for Veterans, download the [VA Medical-Legal Partnership Readiness Guide](#), and check out the National Center for Medical-Legal Partnership's [resources for Veterans](#).

CORE ELEMENTS OF A MEDICAL-LEGAL PARTNERSHIP³¹



Medical-legal partnership is a highly flexible approach that integrates civil legal services into a health care setting, and adapts to the needs of a specific population. Typically MLPs:

1. Have a “lawyer in residence,” who works on-site at the health care organization.
2. Have a formal agreement between the participating health and legal organizations outlining responsibilities and services.
3. Define a target population to receive services.
4. Screen patients for health-harming legal needs to find those patients who might not otherwise have their health-harming legal needs identified or addressed.
5. Have dedicated legal staffing to provide MLP services on site at the health care organization.
6. Train health care providers and staff on common social determinants of health and how legal expertise and services can help mitigate the negative impact of those issues on health and health care.
7. Share information about patients between health and legal staff to solve health harming legal problems or address social determinants.
8. Designate financial resources to support the implementation of medical-legal partnership activities.

Addressing the Legal Needs of Veterans with Housing Insecurity

The annual CHALENG survey data consistently uncovers legal problems among the top unmet needs ranked by Veterans experiencing the threat of homelessness. The most recent survey shows that five of the top ten highest unmet needs for Veterans experiencing homelessness, required legal assistance. These needs include legal assistance for child support issues, preventing eviction and foreclosure, restoring a driver's license, outstanding warrants and fines, and assistance with discharge upgrades.¹⁸

VA MLPs are designed to help address these unmet needs by meeting Veterans experiencing and at-risk of homelessness where it is convenient for them, and in partnership with their care team and other VA housing programs. MLP lawyers are co-located at the VA medical center to help untangle legal issues that can prevent Veterans from pursuing a healthier life. In addition to assisting with direct housing issues such as impeding evictions, many VA MLPs help Veterans with discharge status upgrades as a means to pursuing VA benefits, access to health care, and other supportive programs. MLPs can also assist with stabilizing income through measures like adjusting child support agreements and resolving traffic ticket infractions, so that Veterans are able to afford housing. This intervention can open the door to a variety of clinical, legal, and supportive services that can dramatically help a Veteran experiencing homelessness move toward housing stability.

Lawyers can assist in a variety of other ways to help address the various social determinants of health needs for Veterans experiencing homelessness. The I-HELP™ framework (see Table 1 on page 5) outlines common types of legal assistance that lawyers can provide to Veterans, and the impact that those services have on steadying Veterans' housing situations. This framework can be used as a tool for educating VA clinicians and administrators about MLP services.

TABLE 1. HOW LEGAL SERVICES HELP ADDRESS THE SOCIAL DETERMINANTS OF HEALTH OF VETERANS

This chart is modified from *Framing Legal Care as Health Care*³², a messaging guide created by Kate Marple at the National Center for Medical-Legal Partnership.

Common Social Determinant of Health	How Legal Services Can Help Veterans	Impact of Legal Services on Health / Health Care
<p>INCOME Resources to meet daily basic needs</p> 	<ul style="list-style-type: none"> • Appeal benefits denials (e.g. food stamps, social security, and disability benefits) • Address consumer issues (debt, bankruptcy, student loans, credit history) • Resolve overpayment of benefits 	<ol style="list-style-type: none"> 1. Increasing a Veteran’s income means they make fewer trade-offs between affording basic needs, such as food or housing, and health care, including medications. 2. Financial stability ensures that Veterans have a place to live and can focus on their health.
<p>HOUSING & UTILITIES A healthy physical environment</p> 	<ul style="list-style-type: none"> • Secure housing subsidies • Improve substandard conditions • Prevent evictions or foreclosures • Protect against utility shut-off 	<ol style="list-style-type: none"> 1. A stable, decent, affordable home helps Veterans avoid costly emergency room visits related to homelessness. 2. Consistent housing, heat and electricity help Veterans follow their medical treatment plans.
<p>EDUCATION & EMPLOYMENT Quality educational and job opportunities</p> 	<ul style="list-style-type: none"> • Prevent and remedy employment discrimination • Enforce workplace rights • Secure service-connected education benefits • Secure unemployment compensation or unpaid wages 	<ol style="list-style-type: none"> 1. A quality education is one of the greatest predictors of a person’s adult health. 2. Consistent employment helps provide money for food and safe housing, which also helps avoid costly emergency health care services.
<p>LEGAL STATUS Access to jobs and VA benefits</p> 	<ul style="list-style-type: none"> • Secure discharge status upgrades and record corrections for eligible Veterans • Secure VA benefits for eligible Veterans • Secure proper identification • Clear problems with driving records 	<ol style="list-style-type: none"> 1. Helping a Veteran change their discharge status or correct their records helps make access to VA benefits possible, including health care. 2. Securing proper identification and records is essential to helping Veterans secure stable employment.
<p>PERSONAL & FAMILY STABILITY Safe homes and social support</p> 	<ul style="list-style-type: none"> • Address family issues (e.g. divorce, child custody, guardianship, and visitation) • Help modify child support agreements to be consistent with income and resources • Assist with advance planning (e.g. wills and power of attorney) 	<ol style="list-style-type: none"> 1. Stable family relationships significantly reduce stress and allow for better decision-making, including decisions related to health care. 2. A modified child support agreement stabilizes a Veteran’s income and prevents arrests from unpaid child support, which reduces criminal convictions, incarcerations, and criminal records.

Potential for Collaboration: H-PACTs and MLPs

Having MLP services co-located at sites with H-PACT clinics affords Veterans a powerful additional resource in the path to stable housing. MLP services are also a means toward addressing the many unmet legal needs identified in the CHALENG survey. H-PACTs offer a multidisciplinary team to coordinate homeless Veterans' primary health care needs with social workers, mental health services, VA homeless programs, and community-based resources, making it a prime model for integrating the legal intervention. VA MLPs provide H-PACT staff the ability to refer Veterans in need to a trusted legal professional who is versed in the specific legal issues facing the local Veteran population. Embracing the H-PACT elements of access and co-location of wrap around services, the VA MLP attorney connects with Veterans in the same facility where they receive their health care and other supportive services. Additionally, the ensuing professional relationships that form across disciplines fosters a collaborative approach. In addition to training VA medical center staff to identify Veterans' legal needs, many VA MLP attorneys also provide consultation with staff. They may participate in regular team meetings to better coordinate services for Veterans. Some VA MLPs offer legal services outreach to the community through events like "stand downs", where VA staff and volunteers provide food, clothing, health screenings, and referrals to other supportive services to Veterans experiencing and at-risk of homelessness. These events typically last between one and three days, and are an excellent opportunity for Veterans to engage with MLP staff and gain a better understanding of services that MLP attorneys can provide.¹⁹

Similar to the H-PACT model, MLP is a flexible intervention that can be tailored to the specific needs of the VA medical center and its Veteran patients. Some VA MLPs may elect to assist Veterans with a variety of general legal needs across the VAMC. Other VA MLPs choose to use their limited legal staffing and screening resources to partner with a specific department or clinical champion within the facility that has a high need. For example, the MLP might specialize in serving H-PACT patients with difficulty accessing VA benefits.

Two MLPs featured as case studies in this brief (see pages 9 - 12) have found significant success partnering with an H-PACT. Their stories and lessons learned illustrate the potential for partnership, and underscore that H-PACTs offer:

- A multidisciplinary team for the MLP attorney to partner with;
- A patient population that is likely to have one or more unmet legal needs; and
- An opportunity to address the physical, mental, and social health factors of homelessness in a coordinated fashion.

As of December 2019, 14 VA Health Care System (HCS) sites have both an H-PACT and an MLP, and 36 HCS sites have both an H-PACT and legal clinic.²⁰ At some of these sites there has already been an overlap of VA MLPs and H-PACTs working together, to varying degrees. Sites that offer both clinical and legal services to Veterans experiencing homelessness make for an ideal opportunity for partnership in order to better address the needs of Veterans experiencing and at-risk of homelessness.

TABLE 2. VA HEALTH CARE SYSTEMS (HCS) WITH H-PACTS AND MLPS

(1V01) (402) Togus, ME HCS	(M)	(3V12) (537) Chicago, IL HCS	(L)	(5V21) (662) San Francisco, CA HCS	(L)(C)
(1V01) (523) Boston, MA HCS	(L)	(3V15) (657) St. Louis, MO HCS	(L)	(5V22) (600) Long Beach, CA HCS	(M)(L)
(1V01) (608) Manchester, NH HCS	(L)	(3V23) (618) Minneapolis, MN HCS	(L)(C)	(5V22) (605) Loma Linda, CA HCS	
(1V01) (631) Central Western Massachusetts HCS	(M)	(3V23) (636) Omaha, NE HCS	(C)	(5V22) (644) Phoenix, AZ HCS	(L)(C)
(1V01) (650) Providence, RI HCS	(L)	(4V16) (580) Houston, TX HCS	(L)	(5V22) (649) Northern Arizona HCS	
(1V01) (689) Connecticut HCS	(M)(L)(C)	(4V16) (629) New Orleans, LA HCS	(M)(C)	(5V22) (664) San Diego, CA HCS	(L)
(1V02) (526) Bronx, NY HCS	(M)(L)	(4V16) (667) Shreveport, LA HCS	(L)	(5V22) (678) Southern Arizona HCS	
(1V02) (528) Western New York HCS	(L)	(4V17) (671) San Antonio, TX HCS	(L)	(5V22) (691) Greater Los Angeles, CA HCS	(M)(L)(C)
(1V02) (561) New Jersey HCS	(L)	(4V19) (635) Oklahoma City, OK HCS	(M)		
(1V02) (620) Hudson Valley, NY HCS	(L)	(4V19) (660) Salt Lake City, UT HCS	(L)		
(1V02) (630) New York Harbor HCS	(M)(L)	(5V20) (648) Portland, OR HCS	(C)		
(1V02) (632) Northport, NY HCS	(M)(L)	(5V20) (663) Puget Sound, WA HCS	(C)		
(1V04) (642) Philadelphia, PA HCS	(L)	(5V21) (459) Honolulu, HI HCS	(L)		
(1V04) (646) Pittsburgh, PA HCS		(5V21) (593) Las Vegas, NV HCS	(L)(C)		
(1V05) (512) Baltimore, MD HCS	(L)	(5V21) (612A4) N. California HCS	(L)		
(1V05) (581) Huntington, WV HCS	(C)				
(1V06) (558) Durham, NC HCS					
(1V06) (590) Hampton, VA HCS					
(2V07) (508) Atlanta, GA HCS	(L)				
(2V07) (509) Augusta, GA HCS					
(2V07) (521) Birmingham, AL HCS	(L)				
(2V07) (534) Charleston, SC HCS	(L)				
(2V08) (516) Bay Pines, FL HCS	(M)(L)				
(2V08) (546) Miami, FL HCS	(M)				
(2V08) (673) Tampa, FL HCS	(M)(L)				
(2V08) (675) Orlando, FL HCS	(L)				
(2V09) (596) Lexington, KY HCS					
(3V10) (539) Cincinnati, OH HCS	(L)				
(3V10) (541) Cleveland, OH HCS	(C)				
(3V10) (553) Detroit, MI HCS	(C)				
(3V10) (757) Columbus, OH HCS	(L)				

A list of VA medical-legal partnerships and legal clinics, and the legal organizations that staff them can be found on the VA's [website](#).

KEY
 Health Care System (HCS) with H-PACT that have:
 VA MLP: (M)
 Legal Clinic: (L)
 Community Resource Referral Center: (C)

TOTALS (DEC. 2019)

HCS WITH H-PACT	54	HCS WITH H-PACT & A COMMUNITY RESOURCE & REFERRAL CENTER (CRRC)	13
HCS WITH H-PACT THAT HAVE		HCS WITH H-PACT & CRRC THAT HAVE	
VA MLP	14 (25.9%)	VA MLP	4
LEGAL CLINIC	36 (57.4%)	LEGAL CLINIC	7
BOTH A VA MLP & LEGAL CLINIC	9 (16.7%)	BOTH A VA MLP & LEGAL CLINIC	3

MLPs & H-PACTs: A Unique Opportunity to Address the Needs of Veterans Experiencing Homelessness

VA MLP attorneys have a unique opportunity to resolve some of the most pressing unmet needs of Veterans experiencing homelessness by reaching them at a critical point of entry in the VA health care system, through the H-PACT model. Additionally, the complement of housing programs at the VA provides powerful opportunities for VA MLPs to collaborate with clinical and social service professionals alike.

As demonstrated in the case studies on pages 9 -12, collaborations between H-PACT and VA MLPs have several advantages for effectively improving physical, mental, social, and legal outcomes for Veterans experiencing and at-risk of homelessness, ultimately facilitating an otherwise complex journey towards health and housing stability. The co-location of MLPs at sites with H-PACTs is especially beneficial for clinicians and attorneys to foster an environment of well-coordinated, patient-centered, whole person care for Veterans experiencing homelessness. This also allows for a collaborative relationship among program staff, where the goals of the MLP and H-PACT can be aligned. Having an attorney present on-site translates to increased access to legal services for Veterans who experience transportation or communication barriers, or other challenges associated with homelessness. Currently there are no funding mechanisms active within the VA to support the large demand for legal services. MLPs are often constrained by staffing resources and should work with the H-PACT and other VA partners to pinpoint a feasible, yet impactful scope of services.

The VA closely tracks the state of homelessness among Veterans. More information, including descriptions of VA Programs for Veterans experiencing homelessness can be found on [their website](#).

ADDITIONAL RESOURCES

- 1. VA-MLP Readiness Guide: Building and Strengthening Medical-Legal Partnerships for Veterans**
National Center for Medical-Legal Partnership
June 2019
medical-legalpartnership.org/mlp-resources/va-mlp-readiness-guide
- 2. Brief: Medical-Legal Partnerships Serving Veterans: History, Growth & Progress**
National Center for Medical-Legal Partnership
May 2019
medical-legalpartnership.org/mlp-resources/veterans-mlp-history
- 3. Webpage: Homeless Patient Aligned Care Teams**
U.S. Department of Veterans Affairs
February 2019
va.gov/homeless/h_pact.asp
- 4. Webpage: Homeless Veterans**
U.S. Department of Veterans Affairs
January 2020
va.gov/HOMELESS/index.asp
- 5. Fact Sheet: VA Programs for Homeless Veterans**
U.S. Department of Veterans Affairs
January 2018
va.gov/HOMELESS/docs/Homeless-Programs-General-Fact-Sheet-JAN-2018.pdf
- 6. Spreadsheet: Legal Services in VA Facilities**
U.S. Department of Veterans Affairs
January 2020
www.va.gov/ogc/docs/LegalServices.pdf
- 7. Article: Intersections between Mental Health and Law among Veterans**
Tsai, J, & Seamone, E. (Springer, Cham)
2019
link.springer.com/book/10.1007/978-3-030-31664-8
- 8. Webpage: VA National Center on Homlessness Among Veterans**
U.S. Department of Veterans Affairs
January 2020
va.gov/HOMELESS/nchav/index.asp

ERRERA COMMUNITY CARE CENTER & THE CONNECTICUT VETERANS LEGAL CENTER

“A Building with a Thousand Doors”: Fighting Veteran Homelessness with On-Site Lawyers

In 2009, the Connecticut Veterans Legal Center (CVLC)²¹ partnered with the Errera Community Care Center (Errera)²² to form a VA medical-legal partnership (MLP). CVLC attorneys work in partnership with Errera’s staff and other co-located housing programs to provide comprehensive services to Veterans experiencing, or who are at risk of, homelessness. Veterans facing legal issues impacting their housing, income, or healthcare, can be connected to an on-site attorney with special expertise in these areas of the law. Over the last decade the Errera-CVLC partnership has grown and thrived. There are currently 13 CVLC employees and over 200 pro bono partners staffing the MLP, which has served almost 4,000 Veterans to date.²³

CVLC attorneys have been particularly involved in improving access to health care for Veterans through discharge upgrades and re-characterizations, and appealing unjust benefit denials for Veterans. Often Veterans are unfairly denied VA benefits because of a dishonorable discharge status resulting from service-related conditions, such as PTSD. For a Veteran, this can translate to the loss of lifetime medical care, and the inability to access benefits for disability, housing, education, and more.

Since 2015, the CVLC MLP has had an 83 percent success rate (closed cases) in discharge upgrade and VA benefits denial cases, with 77 percent resulting in improved income or employability. CVLC attorneys have also been successful in improving housing conditions for Errera’s Veterans. During FY 2016-17, 96 percent of CVLC housing cases resulted in increased housing stability for Veterans, benefiting both Veterans and members of the Veterans’ households.²⁴ Their efforts in essence directly support the VA Homelessness program model of bringing Veterans experiencing and at-risk of homelessness into medical care with the necessary supports needed to stabilize their health and housing.

When it comes to meeting vulnerable Veterans’ needs, the Errera-CVLC partnership ensures that Veterans receive all of the help they need when and where they need it. Cindy Johnson, the Deputy Director of CVLC, describes Errera as,

“A building with a thousand doors, and every door leads to every other program.”

A key factor to Errera’s success is the co-location of a variety of VA housing services and its designation as a Community Resource Referral Center (CRRC).²⁵ At Errera’s CRRC, Veterans experiencing homelessness have access to showers, laundry services, housing and community supports, among other things—all in a safe environment. The co-location of VA housing programs (HUD-VASH, CRRC, HCHV, GPD), medical (H-PACT), and mental health care (MHICM, CTI, PRRC, SADP, CWT/SE), and on-site MLP attorneys, creates a collaborative environment amongst providers at Errera, who can easily refer Veterans to needed services.

Because it can be difficult to maintain contact with Veterans for whom transportation and communication might be a challenge, the Errera-CVLC team strives to be as physically available to its Veterans as possible. While patients have the option to schedule appointments with Errera providers, attending a designated appointment time can often be a challenge. As David Rosenthal, Errera’s H-PACT Medical Director states, “The whole point of H-PACT was to create a different kind of access for primary care for patients who experience homelessness... the idea of open access or hybrid open access.”

RESOURCES

1. Errera Community Care Center: erreraacc.com
2. Connecticut Veterans Legal Center: ctveteranslegal.org
3. Connecticut Veterans Legal Center MLP Introduction Slides
4. Connecticut Errera Community Care Center VA MLP Leadership Meeting Slides
5. Connecticut Veterans Legal Center Legal Problems Screening Form
6. Connecticut Veterans Legal Center Veterans Discharge Upgrade Manual (2011). *The most recent version of CVLC’s Veterans Discharge Upgrade Manual is pending publication at the time of this issue brief.*
7. Connecticut Veterans Legal Center 10-Year Annual Report (2009-2019).
8. Tsai, J., et al. *Medical-Legal Partnerships at Veterans Affairs Medical Centers Improved Housing And Psychosocial Outcomes For Vets.* (2017) Health Affairs.

Errera’s MLP mirrors the H-PACT model that it partners with by providing full-time, Monday thru Friday availability of an MLP attorney. Having a lawyer present throughout the week allows greater flexibility for patients to engage with legal services. Cindy Johnson reflects on this aspect of their MLP by commenting, “I will always believe the thing that makes the biggest difference in an MLP model is the fact that we are in the building all the time. I can check in on my clients and they stop in and they see me and we can chat in the hallways ...We are able to reach so many more people, just because we are always available on site.”

Having a myriad of services aimed at rehabilitating Veterans under one roof with the MLP is not only convenient for Veterans experiencing and at-risk of homelessness, it also allows for active engagement amongst legal and clinical providers. In line with the VA’s strategy to end Veteran homelessness, Errera recognizes the importance of addressing the whole person—through clinical care as well as legal and social interventions—with the resources and collaboration of a caring interdisciplinary team. The interventions necessary to fight Veteran homelessness are often more successful when providers work together.

“From a MLP lawyer’s perspective, I feel we have a better chance of success because we have the support of the Veteran’s clinician and work together as a team. A typical housing case is a good example. One financial emergency can cause a late or missed rent payment, or some people have a tough time sticking with a budget for an extended period of time. But if they can go to their clinician, or their caseworker, or us, when they have a problem, before it escalates, it’s that much more likely that we can help resolve the Veteran’s problem before the court system is involved. We are more successful as lawyers and better able to achieve positive legal outcomes because we get to work within a system that supports our clients on multiple levels.”

**Cindy Johnson, JD, Deputy Director
Connecticut Veterans Legal Center**

There has also been empirical research that demonstrates the success of CVLC’s work at the Errera Community Care Center. In 2016, researcher Jack Tsai, PhD, from Yale University’s School of Medicine, conducted a study of Veterans who received MLP services at Errera in addition to three other VA sites and found

that clients had measurable improvements in mental health, housing, and income.²⁶

CVLC is working to disseminate its successes at Errera to other organizations looking to tackle Veteran homelessness through legal services. CVLC has recently partnered with the Bob Woodruff Foundation and the Legal Services Clinic of Harvard Law School to create a comprehensive Discharge Upgrade Practice Manual and a searchable, online Department of Defense interface (see [here](#).)

TAKEAWAYS

01

The **co-location** of the MLP with VA housing programs in a CRRC that includes an H-PACT Primary Care and mental health resources, allows for “one stop” care for Veterans who may have a number of urgent needs and difficulty accessing services. It also allows for greater collaboration among multidisciplinary professionals all striving towards the same goal.

02

Full-time availability of an MLP attorney enables Veterans with transportation and communication barriers to have more convenient access to legal services—mirroring the H-PACT open access model. As Cindy Johnson puts it, “people’s lives aren’t in crisis by appointment”. Errera’s patients have benefited from not just having an on-site attorney, but having one present all throughout the week. Full-time availability of the attorney also means that clinical providers and support staff can rely on their presence as well.

03

Having **lawyers engage with a variety of professionals**, from medical professionals to mental health workers, and social work staff, means that there are more open doors for Veterans with complex problems to be linked to solutions, including legal help. Errera’s MLP collaborates through referrals with Homeless program and H-PACT staff, as well as other programs, to better reach Veterans in need. With a cadre of interventions available, Veterans with complex issues are also more likely to be successful in their rehabilitation.

WEST LOS ANGELES VA MEDICAL CENTER & INNER CITY LAW CENTER

A Team-Based Approach to Assisting Veterans Struggling with Psychosocial Disorders and Homelessness

In 2013, the West Los Angeles VA Medical Center (West LA)²⁷ established a medical-legal partnership (MLP) with Inner City Law Center (ICLC).²⁸ The decision was made early on to integrate the MLP with the Homeless Patient Aligned Care Team (H-PACT) pilot at West LA VAMC. At the time, the West LA H-PACT was primarily focused on targeting care to Veterans experiencing homelessness who had complex medical issues coming through the emergency department. An attorney and Equal Justice Works Fellow²⁹ from Inner City Law Center staffed the MLP in its early stages, laying the groundwork for a new partnership that West LA H-PACT team members and Veterans alike came to rely on. The idea was for the MLP to support the H-PACT’s mission of addressing the most urgent needs preventing Veterans experiencing homelessness from rehabilitation—specifically unmet legal needs associated with chronic homelessness, such as income stabilization, benefit denial appeals, housing issues, and low-level criminal issues.

Today, the MLP at the West LA H-PACT is thriving and continues to be staffed by another Equal Justice Works fellow who provides legal services to Veterans, consults with clinical staff, and participates in weekly H-PACT team meetings. The West LA H-PACT has since expanded its scope from complex cases in the emergency department to all Veterans who qualify for care. The model enables Veterans experiencing homelessness to get all of the clinical care, legal services, and other supportive services and benefits that they need—such as SSVF programs and HUD-VASH—all in an integrated, collaborative fashion.

“H-PACTs are the perfect entry point for new medical-legal partnerships. These teams are already collaborating across an array of disciplines in order to best serve their patients; they are designed to incorporate new perspectives into their regular workflow. Plus, there is enormous impact in making an attorney available to a population which, by definition, has a large number of unmet legal needs related to housing and financial stability.”

**Abbey Lent, JD, MLP Attorney
Inner City Law Center**

RESOURCES

1. **Memorandum of Understanding:** Inner City Law Center and the Homeless Patient Aligned Care Team of the Department of Veterans Affairs Greater Los Angeles Healthcare System.
2. West Los Angeles VA Hospital [Medical-Legal Partnership Intake Form](#).
3. [West LA VA MLP Outcome Graphs](#), Abbey Lent

Given the strong link between homelessness and psychosocial disorders, the work of the West LA H-PACT includes a major mental health component, with both a psychiatrist and psychologist staffing the H-PACT, in addition to a social worker and primary care doctor. In order to be referred to the MLP, West LA patients must be homeless or low-income and have a mental health diagnosis. The H-PACT’s particular focus has in turn influenced the shaping of the MLP’s services; the MLP has elected to specialize in benefits claims relating to psychological disabilities, among other legal issues affecting Veterans struggling with homelessness and mental health diagnoses (see the Memorandum of Understanding outlining this MLP’s scope of work [here](#)). While many other VA MLPs report needing to address discharge upgrade issues as a step toward securing VA benefits, most patients coming through the West LA H-PACT are fortunately already VA-eligible.

H-PACT team members who treat Veterans help to identify patients whose circumstances might improve with legal assistance. After being referred to the MLP attorney, patients are further screened through an [intake form](#) to identify their exact legal needs. If the patient has a legal need outside of the MLP attorney’s scope, that patient is then referred out to another attorney who can assist. The integration of an MLP attorney within H-PACTs can function in a variety of transformative ways to better address the needs of Veterans experiencing homelessness. As Dr. Andrew Shaner, an H-PACT psychiatrist at West LA, puts it, “I view the project as this really brilliant idea ... we can make a dramatic difference very quickly taking somebody from zero income to several thousand dollars a month, and the ability to get them their own apartment pretty quick”.

One of these ‘dramatic differences’ was made in the life of an Iraq Combat Veteran experiencing homelessness and combat-related trauma. This trauma led to disruptions to his cognitive and

communicative abilities, as well as prevented him from achieving a stable income. Prior to being referred to the MLP lawyer by his H-PACT psychiatrist, this Veteran had applied for VA benefits for his mental health conditions multiple times and been denied. His transience due to experiencing homeless, and the debilitating symptoms of post-traumatic stress made it impossible for him to navigate the bureaucracy of the VA's benefits system on his own. Even after being referred to the MLP, maintaining the ongoing contact necessary to carry out the legal intervention did not come easily. Abbey Lent, his MLP lawyer, explains, "I worked with him closely a number of times and lost track of him several times. I had to come back to [his psychiatrist] to find him again to put together his application...His psychiatrist and I worked together to track him down and help him develop a plan to keep up with his appointments and to stay in touch with both of us." As a result of this persistence and collaboration, almost a year later, full VA unemployment benefits were finally granted, providing him with financial stability that helped to improve his housing situation.

West LA H-PACT members and ICLC's MLP attorney emphasize the difficult, yet worthwhile challenges associated with treating the physical, mental, and social health needs of Veterans as a multidisciplinary team. For example, Veterans experiencing homelessness may be difficult to physically reach for follow up. Their cases are often complex and Veterans may require several sessions with a provider to even disclose trauma, legal needs, and/or be diagnosed with a mental illness. Clinical providers might therefore be delayed in referring a Veteran to appropriate legal services in a timely manner. Having an attorney embedded in the organization, strategizing with providers to ensure the best care and untangle these needs can be a huge help. Psychiatrist Andrew Shaner said, "I would say that the attorneys should be fully embedded in the interprofessional culture of the organization, because they are busy trying to solve unusually complicated problems that require input from all directions, and there are opportunities for new ways to do things."

It's noteworthy that the West LA VA's H-PACT model has been so widely embraced in the LA community, with its high homelessness rate and the success of the model, that it has quadrupled in size since its inception and the start of its MLP.

As previously mentioned, the West LA H-PACT has also expanded its scope from targeting only Veterans experiencing homelessness with complex medical issues and high ER utilization to all Veterans experiencing homelessness in the region who qualify for care. Due to the immense and quick growth of the West LA H-PACT, the MLP does not currently have enough resources to reach all Veterans within the VAMC who may need some type of legal assistance. However, the specialized focus of the MLP and H-PACT partnership on a subset of

Veterans with benefits issues enables the attorney to have a manageable caseload, and to make an impact relative to their goals without being overwhelmed. Currently, the MLP is funded by the Equal Justice Works fellowship. There is not currently a formal line of funding enabling the VA to support this work, though the implementation of the MISSION Act and other legislation may make funding legal services for the many Veterans who need them—including West LA Veterans not currently served by the MLP—possible in the future.

TAKEAWAYS

01

Aligning the goals of the MLP with the goals of the H-PACT is key toward making an impact. The ICLC staff worked with West LA VAMC to deliberately tailor legal services that would advance the H-PACT's goal of disentangling the complexities of mental health and homelessness, and to enable access to health care and housing. The MLP is better integrated and the collaboration is effective because the work of the team is aligned.

02

MLP and H-PACT partnerships should **take into account the complexity of the mental health needs of many Veterans experiencing homelessness**, and the communication barriers that can ensue. Veterans experiencing homelessness may be difficult to physically reach for ongoing casework due to transience or lack of a phone or e-mail. They may also experience psychological and legal needs that may take several sessions with H-PACT staff to reveal themselves. For example, it may take several sessions of treatment before a patient discloses military sexual trauma to their provider. Patience, persistence, and continued outreach might be necessary.

03

When resources are scarce compared to the need, an MLP can manage its caseload by strategically defining its services and target population. Without additional funding, the West LA MLP can only support one attorney at this time, though admittedly would like to be able to serve more Veterans with a wider scope of legal needs. In the meantime, targeting its services to the H-PACT's patients with homelessness and psychological needs helps to carve out a manageable caseload for the attorney while making the MLP's scope of services clear for staff.

Endnotes

- 1 [Point-in-Time \(PIT\) Count](#). Washington, DC: U.S. Department of Veterans Affairs, Nov 2019.
- 2 [Homeless Veterans: Homeless Patient Aligned Care Teams](#). Washington, DC: U.S. Department of Affairs. Feb 2019.
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- 6 [Fact Sheet: VA Programs for Homeless Veterans](#). Washington, DC: U.S. Department of Veterans Affairs; Jan 2018.
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- 8 [Homeless Veterans: Homeless Patient Aligned Care Teams](#). Washington, DC: U.S. Department of Affairs. Feb 2019.
- 9 [Department of Veterans Affairs FY 2018-2024 Strategic Plan](#). Washington, DC: U.S. Department of Veterans Affairs, May 2019.
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- 12 [Homeless Veterans: Homeless Patient Aligned Care Teams](#). Washington, DC: U.S. Department of Affairs. Feb 2019.
- 13 [VA Homelessness: Homeless Patient Aligned Care Teams](#). Washington, DC: Agency for Healthcare Research and Quality. Oct 2018.
- 14 [VA Medical-Legal Partnership Readiness Guide: Building and Strengthening Medical-Legal Partnerships for Veterans](#). Washington, DC: National Center for Medical-Legal Partnership. June 2019.
- 15 [Fact Sheet: Community Homelessness Assessment, Local Education and Networking Groups \(CHALENG\)](#). Washington, DC: U.S. Department of Affairs. Feb 2019.
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- 18 [Fact Sheet: Community Homelessness Assessment, Local Education and Networking Groups \(CHALENG\)](#). Washington, DC: U.S. Department of Affairs. Feb 2019.
- 19 [Homeless Veterans: Upcoming Events](#). U.S. Department of Veterans Affairs. Washington, DC. Feb 2020.
- 20 Legal clinics offer periodic legal assistance to VA facilities and do not necessarily have a formal partnership in place. For example, a local civil legal aid office may have an attorney offer free services to Veterans at a VA medical center once a month. They might provide counseling or informational presentations on specific topics of interest like on bankruptcy or driver's license reinstatement.
- 21 [Connecticut Veterans Legal Center](#). West Haven, CT. ctveteranslegal.org.
- 22 [Errera Community Care Center](#). West Haven, CT. errerracc.com.

- 23 Connecticut Veterans Legal Center 10-Year Annual Report (2009-2019). ctveteranslegal.org/wp-content/uploads/2020/02/CVLC-10-Year-Report_Print-Ready_102819_FINAL.pdf
- 24 Connecticut Veterans Legal Center 10-Year Annual Report (2009-2019). ctveteranslegal.org/wp-content/uploads/2020/02/CVLC-10-Year-Report_Print-Ready_102819_FINAL.pdf
- 25 Community Resource Referral Centers (CRRCs): CRRCs work in collaboration with community, state, and federal partners to facilitate Veteran access to case management, VA and non-VA benefits, vocational services and housing. These sites serve as a “one-stop” environment for homeless and at-risk Veterans and are a valuable avenue for VA MLPs to collaborate with. Learn more about CRRCs [here](#).
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- 28 Inner City Law Center. Los Angeles, CA. innercitylaw.org.
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MISSION

Recognizing the enormous potential for legal services to help health care providers respond to the social needs and deficiencies they see every day in their clinics, the National Center for Medical-Legal Partnership's mission is to foster a system in which all health organizations can leverage these services. Over the last decade, the National Center's work has helped cultivate programs that do just that at nearly 450 hospitals and health centers across the U.S.

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