

# EXPANDING VA-HOUSED LEGAL CLINICS TO SERVE VETERANS

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For many Veterans, legal assistance can help address critical needs in areas such as health care, housing, and income supports. Research has shown that having access to legal resources can improve psycho-social outcomes and determinants of well-being among Veterans,<sup>1</sup> while having legal problems increases the odds of negative outcomes, such as Veteran suicidal ideation and suicide attempt.<sup>2</sup> Although the U.S. Department of Veterans Affairs (VA) cannot directly provide civil legal assistance to Veterans, under Directive 2011-034 VHA (Veterans Health Administration) facilities are encouraged to make physical space available for legal services providers to assist the Veteran population.<sup>3</sup> As a result, there are currently 143 free legal clinics and 28 medical-legal partnerships<sup>4</sup> across the U.S. providing civil legal assistance to vulnerable Veterans.<sup>5</sup>

Legal help provided through programs like VA-housed legal clinics is vital. Among Veterans at risk for housing instability, civil legal matters such as family law issues, eviction and utility shut-offs, and problems with accessing disability benefits, routinely rise to the top of self-reported unmet needs.<sup>6</sup> Unfortunately, there are insufficient affordable resources to address these needs.<sup>7</sup> Because there is no overarching right to legal assistance for civil legal matters in the U.S.,<sup>8</sup> Veterans must acquire their own paid legal counsel or pro bono services in order to resolve problems that can pose substantial barriers to physical, mental, and social health.

VA-housed legal clinics make free legal assistance conveniently available where many Veterans seek health care and other social supports. Were it not for the presence of these services at VHAs, many Veterans might oth-

erwise be unaware of their availability or face difficulties with accessing them (e.g., due to transportation limitations). Legal clinics have demonstrated an ability to help Veterans reduce their legal problems: A recent study followed Veterans seeking legal services at two VA-housed legal clinics and found that after two months, Veterans' average number of legal needs decreased from 6.0 to 4.4.<sup>9</sup>

The legal clinic model is the one most commonly used in VHA facilities, with five times as many in operation across the VHA as there are medical-legal partnerships.<sup>10</sup> Though impactful in reducing legal needs, limited resources, infrequent presence at the VHA facility, and lack of integration with the VA health care team can pose challenges for a legal clinic's ability to fully meet demand for its services.<sup>11</sup> Because Veterans with limited income and housing instability often present with multiple legal needs, they can require more intensive legal interventions and greater resources than VA-housed legal clinics can furnish.<sup>12</sup> Additionally, a high prevalence of chronic medical and psycho-social conditions among the Veteran population can complicate the ability of legal professionals to address complex issues in isolation, without the support of a multi-disciplinary, team-based approach that also incorporates health and social services professionals. Indeed, one study that followed Veterans who received services at two VA-housed legal clinics found that although most were satisfied with their initial services, a majority of Veterans (69 percent) did not receive additional help with their legal matters from the clinic or through a referral after their first meeting at the clinic.<sup>13</sup>

In a 2018 national survey by Timko, et al. of 95 VA-housed legal clinics in 36 states (70 percent of all VA legal clinics), just 39 percent of clinics said that they had the capacity to serve all or most Veterans seeking their services. The most common reasons cited were lack of funding, followed by limited staff time and lack of staff knowledge. Other barriers to meeting demand included issues such as the health care clinic and law school legal partner having different goals, and limited legal clinic operating hours. Additionally, most VA-housed legal clinics reported a lack of regular interaction with VA health care providers. A majority of clinics also reported not having adequate resources to address the needs of clients with mental health and substance use disorders, though a number of clinics actually expressed a desire to train legal staff on advising clients to use VA healthcare and access mental health and substance use disorder services.<sup>14</sup>

## WHAT IS A LEGAL CLINIC?

Legal assistance providers from civil legal aid organizations, private law firms, and law schools provide free services in VHA health care facilities on a periodic basis—typically visiting these sites once a month. The legal clinic may offer a broad range of services for low-income Veterans or focus on a specific topic, such as obtaining VA benefits and military discharge upgrades, or resolving family law and consumer issues.

## WHAT IS A MEDICAL-LEGAL PARTNERSHIP?

Medical-legal partnerships (MLPs) build on the legal clinic model by facilitating a formal relationship between a legal services partner and VHA facility. Legal professionals work alongside the health care team to address problems, and are available on a more continuous basis. MLPs have eight core elements that distinguish them, including dedicated legal resources, on-site staffing, funding, processes for screening legal needs, training of health care staff in legal concepts, a memorandum of understanding between partners, information sharing, and a defined population for their services.



This national survey of VA-housed legal clinics is the first of its kind to explore the barriers and opportunities facing these programs, and to use the core components of the more closely integrated and intensive medical-legal partnership model to analyze their operational elements.<sup>15</sup> Interestingly, nearly 30 percent of VA-housed legal clinics reported wanting to expand their partnership with VA healthcare staff. Other desired elements, like additional staffing, time, and training of legal staff in VA healthcare concepts reflect an interest in adopting features of the medical-legal partnership model in order to serve Veterans in a more comprehensive and multi-disciplinary approach.<sup>16</sup>

In the face of the COVID-19 pandemic, programs like VA-housed legal clinics and medical-legal partnerships are needed more than ever. Increasing health, social, and economic needs among Veterans have translated to mounting legal needs, yet social distancing and mitigation efforts have kept legal professionals from being able to maintain the same physical presence and accessibility in VHA facilities. In the early stages of the pandemic, many legal clinics were simply cancelled. Anecdotally, a pivot to providing legal services remotely via phone hotlines and video conferencing technology has been critical to continuing services, but for some legal services providers it has made reaching Veterans who do not have consistent access to technology more difficult. VA medical-legal part-

nerships have reportedly relied on their strong relationships VA healthcare staff to maintain valuable referral pathways and to reach new and existing Veteran clients — underscoring the importance of these relationships.<sup>17</sup>

The existing network of over 140 VA-housed legal clinics represent an opportunity to reach more Veterans in need of legal services at the point of care. Legal clinics seeking to expand their services can reach more Veterans with a more intensive, comprehensive approach by working to fully adopt key elements of the medical-legal partnership model — particularly as this model has been shown to be effective in significantly reducing complex legal needs, while improving psychosocial outcomes like housing and income.<sup>18</sup>

The case study discussed below from Veteran Health Indiana and Indiana Legal Services, Inc. is a prime example of how to strategically expand legal clinic services to serve more Veterans in a targeted manner with the full partnership of VA healthcare staff. This partnership opened doors to greater mission alignment, commitment resolve complex medical-legal issues, new funding opportunities, and a unique training program. Though time and resource intensive, incremental opportunities to build on legal clinic infrastructure by adopting additional medical-legal partnership core elements may afford clinics the ability to increase their impact.

## KEY RESOURCES FOR VA LEGAL CLINICS LOOKING TO EXPAND

**1** A list of legal clinics and medical-legal partnerships located in VA facilities

**2** [VA Medical-Legal Partnership Readiness Guide:](#) A how-to guide for building and strengthening VA medical-legal partnerships

**3** [Veteran's resources](#) from the National Center for Medical-Legal Partnership, including additional issue briefs a part of the Medical-Legal Partnership Veterans Series

**4** Timko C, Taylor E, Nash A, Blonigen D, Smelson D, Tsai J, Finlay A. [National Survey of Legal Clinics Housed by the Department of Veterans Affairs to Inform Partnerships with Health and Community Services.](#) *Journal of Health Care for the Poor and Underserved.* 2020 August;1440-1456.

## CORE ELEMENTS OF A MEDICAL-LEGAL PARTNERSHIPS THAT LEGAL CLINICS CAN ADOPT<sup>19</sup>



### DEVELOP A FORMAL AGREEMENT

Aligning missions and goals among the legal service provider and the VA partner is the first step in establishing a successful partnership. A memorandum of understanding (MOU) outlines roles and services of the partners involved. Though most legal clinics have an MOU or other formal agreement, virtually all MLPs have an agreement and often use these documents to detail additional goals such as staff training, provider collaboration, and MLP committees or participation in clinical staff team meetings.

ing and referral tools can be administered by the health care team and may consist of a broad set of social needs questions or be adapted to specific patient populations.



### DEDICATED LEGAL STAFFING

Unlike legal clinics which tend to have staff that devote a portion of their time to the clinic, MLPs have dedicated legal staffing for their programs and typically commit a full attorney or more to provide services.



### DEFINE A TARGET CLIENT POPULATION

Identifying a specific patient population to serve allows partnerships to target their resources and legal staff, and to define their intervention(s). Most MLPs target low-income Veteran patients, who are experiencing a variety of social and environmental barriers to health care. Several MLPs work closely with specific health care providers to focus on legal problems associated with particular conditions such as Veterans who are facing mental health and substance use disorder, or on gender or age-specific issues (e.g., women Veterans or geriatric Veterans).



### TRAIN MEMBERS OF THE HEALTH CARE TEAM TO IDENTIFY LEGAL NEEDS

MLP attorneys develop and host trainings for health care staff on spotting various social needs patients that may have legal underpinnings. These trainings may be offered routinely or on special topics (e.g., legal issues that may arise due to the pandemic, such as eviction and unemployment). Conversely, health care staff may also train MLP lawyers in relevant health care concepts.



### HAVE A “LAWYER IN RESIDENCE”

A key feature of the MLP model is having an onsite attorney available for several days a week at the VA facility. The consistent presence of an attorney allows for greater partnerships between health care staff and legal service providers to develop, strengthening the overall capacity of the legal clinic.



### INFORMATION SHARING BETWEEN HEALTH CARE AND LEGAL STAFF

MLPs rely on information gathered from screening tools to be relayed from the health care team to the MLP legal services provider. Many MLPs utilize referral forms to streamline this information and others have been able to negotiate data sharing agreements that allow for comprehensive health and legal information to be shared across organizations.



### DESIGN A PROCESS FOR SCREENING PATIENTS’ LEGAL NEEDS AND REFERRAL

Many MLPs develop their own legal screening tools based on frameworks like I-HELP<sup>TM20</sup>, which assists VA staff with identifying patients’ unmet civil legal needs. Screen-



### SECURE FUNDING

Dedicated funding is part of the MLP model. Funding streams that may not be initially apparent can be secured through multi-disciplinary partnerships and allow for increased operating hours, additional resources to address Veterans’ emerging legal needs, and the capacity to continue operating amidst uncertain times.

## Expanding a VA Legal Clinic: Guardianship and Eviction Programs for Veterans

### VETERAN HEALTH INDIANA & INDIANA LEGAL SERVICES

Since 2018, Veterans seeking services at Veteran Health Indiana in Indianapolis, IN have benefited from a monthly on-site legal clinic supported by the Military Assistance Project (MAP) at Indiana Legal Services, Inc. (ILS)<sup>21</sup>. ILS attorney Polli Pollem assists low-income Veterans with civil legal issues relating to homelessness, mental health, and substance use disorder such as assisting with landlord-tenant issues and discharge upgrades. Social workers and the Veterans Justice Outreach Program specialist (VJO) at Veteran Health Indiana serve as liaisons between Veterans and attorneys, identifying potential civil legal needs and providing Veteran referrals for legal services.

Though the once-a-month free clinic provided access to critical civil legal services Veterans may not otherwise have received, staff recognized that there were legal issues facing patients in their care that would require greater legal resources and partnership. After exploring ways to address issues related to guardianship for many years, Veteran Health Indiana was made aware of a grant available through the Indiana State Department of Veteran Affairs, aimed to address homelessness and legal issues. Through established partnerships with Indiana Legal Services, Veteran Health Indiana was able to expand legal services offered to include guardianship and eviction assistance, despite new barriers from the COVID-19 pandemic.

In late Spring of 2020, at a time when much of the country was in lockdown and the economic, social and health impacts of the pandemic were mounting, the ILS MAP got to work hiring a new attorney and expanding its Veterans Eviction Avoidance Project (VEAP) at Veteran Health Indiana and to neighboring counties, including the Northern Indiana Health Care System. Remote legal services took the place of in-person monthly legal clinics, and regular webinars were offered to VA social workers and other staff to keep them abreast of legal and policy issues, like eviction moratoriums.

Staff at Veteran Health Indiana and ILS did not allow the challenges of the pandemic to prevent them from launching a new program to address a critical problem among their Veteran population that they have been attempting to address for years — guardianship. The Guardianship Assistance Project (GAP) was launched in June 2020 to assist in connecting potential legal guardians with appropriate legal counsel (read more about the program [here](#)).

Veterans who have a supportive person identified to be his or her guardian act in a Veteran's best interest to aid in decision-making and with managing a Veteran's medical and/or personal affairs. Staff working with the project have seen several instances of the value that guardianship legal services have on a Veteran's overall health.

**“There are times that Veterans may not realize that they lack decision-making capacity, but ultimately because they do, they may not be paying their bills, or they may be living in a home environment that is unsanitary or potentially dangerous to them. By us being able to help them access a guardian, we can help ensure their safety going forward with their cognitive impairment.”**

HEATHER MOSS-BAKER, LCSW, MEDICAL FOSTER HOME & COMMUNITY RESIDENTIAL CARE COORDINATOR, VETERAN HEALTH INDIANA

Without the supports of a living facility with an appropriate level of care, the inpatient hospital setting can become a challenging place for cognitively impaired Veterans. Cognitive impairment raise the risks of long-term hospitalizations and further declines in mental and physical health.<sup>22</sup> A guardian can help with making health care decisions and securing a safe transition out of the hospital to an appropriate level of care. For that reason, the GAP agreed to prioritize Veterans in the inpatient setting, though it assists Veterans in the outpatient setting as well.

The referral process for the GAP requires coordination among VA staff and Indiana Legal Services. Social workers at Veteran Health Indiana play a critical role in this process. Referrals to GAP for inpatient Veterans are driven by the Veteran's medical team. If a Veteran's medical team indicates that the Veteran lacks decision-making capacity, a trained social worker will take the next steps in making the determination of whether or not a Veteran has a healthcare power of attorney. After a determination is made that a Veteran is in need of guardianship and will require legal assistance, the social worker refers the Veteran to the Indiana Legal Services team (see the GAP referral form [here](#)). Potential guardians and Veterans who are referred to the Guardianship Assistance Project will receive assistance gathering the necessary information to file a petition for guardianship with the Court, help with initial reporting to the Court, representation at guardianship determination hearings, and guidance for the guardian on managing responsibilities.

Issues related to guardianship had been previously identified by VA staff during process improvement discussions and within the preventative ethics committee. In 2019, an alignment of the right partners and funding came together to build on the success of the community legal partnership with Indiana Legal Services.

*“ I think one of the things that we do well in the VA that is demonstrated by this project alone is that [we] were all kind of working on guardianship in different ways. When we put all of our powers and our thinking together, it propelled this issue forward... I think that is something of a benefit working as a VA as there are so many resources and people there to help our veterans navigate those resources, which can sometimes be the hardest part. ”*

KARI EVANS, LCSW, SOCIAL WORK PROGRAM  
COORDINATOR, CONTINUUM OF CARE SERVICES,  
VETERAN HEALTH INDIANA

From the start of the legal clinic in 2018 to the launch of GAP and the expansion of the Eviction Assistance Program in 2020, Judi Green, a Veterans Justice Outreach (VJO) specialist with Veteran Health Indiana, has been instrumental in the legal clinic's growth. VJO specialists help justice-involved Veterans access VA health and social services, including legal services through non-VA legal service providers.<sup>23</sup> Because of their training as social workers and their relationships with the local legal community and VA staff, VJO specialists often see strategic opportunities for addressing Veterans' civil legal issues. More recently, the task of connecting justice-involved Veterans with civil legal needs to the right legal resources has become a VA initiative under the VHA Directive 2011-034.<sup>24</sup> Green attends the legal clinics regularly, working to connect Veterans not only with ILS, but also other non-legal services at the clinic. Veterans who don't meet certain income requirements — but still may not be able to afford legal advice — will often be referred to other important community partners, such as the Indianapolis Bar Association, which has a Virtual Ask-A-Lawyer program (find more information on this program [here](#)).

*“ I think the established relationship that Judi was able to foster through her work as a VJO was instrumental in our partnership with ILS. Having a legal aid organization available, who is willing to tackle guardianship with us, which can be a really complex thing to navigate, is critical. We have great partners who joined us in our mission, and we have been able to build from that, thanks to Judi's relationship through her work as VJO. ”*

KARI EVANS, LCSW, LCSW, SOCIAL WORK PROGRAM  
COORDINATOR, CONTINUUM OF CARE SERVICES VETERAN  
HEALTH INDIANA



Though Indiana Legal Services has been serving the Veteran community for many years, it has only been in the last couple of years that this formal partnership was put into action. The process of developing a memorandum of understanding (MOU) for the legal clinic and GAP was a key step in formalizing the partnership. The MOU served as a driving force in identifying and agreeing upon the scope, duration, and specifics of the legal support to be provided at Veteran Health Indiana. The VJO connected ILS and Veteran Health Indiana with the Office of General Counsel (OGC) in the Midwest District to assist with this process. Kyle Mardis, the OGC attorney who facilitated the drafting of the MOU, describes the “biggest hurdles” as defining the services needed and the relationship between the entities, as well as keeping in mind the regulatory requirements within the VA that regular health care entities are not necessarily subject to (see the MOUs for the legal clinic [here](#) and the GAP [here](#)). In his primary role as a legal advisor to the VAMC and its staff, he also advises social workers about the GAP when possible.

Funding from the Indiana Department of Veterans Affairs allowed ILS to hire a full-time attorney to provide legal services and form an education committee that partners with Veteran Health Indiana to facilitate regular training for VAMC staff, including kickoff training for social workers on how to access legal guardianship services through GAP. By providing CEUs for these trainings, staff are incentivized to learn more about identifying and addressing legal issues among Veterans — and are provided with an opportunity that isn’t typically offered to social workers in their clinical training. These trainings also provide staff an opportunity to educate family members and others who were interested in becoming a guardian for Veterans (see an overview of the GAP training [here](#)).

Regular communication across VA departments and organizations and accessible information has also been important for the success of the legal clinic and GAP. The VA intranet and Veteran Health Indiana websites have been important vehicles to share information about the legal clinics with staff and Veterans alike.

“*In Indianapolis, we have been fortunate to have the cooperation of internal partners like our medical media department — they were instrumental in creating ways for our staff and Veterans to obtain information on civil legal services. Creating intranet and internet websites, social media posts, posters, fliers and through the weekly newsletter, we were able to increase awareness of the monthly legal clinic. I send out email notifications regarding any updates to our staff and add this information on our Social Work Service page which allows internal staff to obtain up to date information. Creating these points of access for this information is a critical part of getting the word out about available civil legal services.*”

JUDI GREEN, LCSW, VJO SPECIALIST,  
VETERAN HEALTH INDIANA

Well-established professional relationships between the VA and other community providers, continuous education and training, and systems put in place to deliver remote services has set the stage for a sustainable legal clinic that can withstand challenging times, including the COVID-19 pandemic. The process of standing up the GAP and other services offered through the legal clinic at Veteran Health Indiana is noteworthy in normal times, but especially during the initial months of the pandemic. Partnerships such as the one between ILS and Veteran Health Indiana ordinarily tout the ability to be on site at the VA and face-to-face with clients and providers as being key to their success — it is said to be a way to increase visibility, awareness, and use of the intervention. However, when the COVID-19 pandemic hit, the VA could no longer allow community service providers inside of its facilities and many legal services providers went remote with the bulk of their clients. Thankfully, the GAP was designed to be able to successfully deliver services to Veterans and receive referrals

from VA staff virtually via online platforms and through hotlines. Amidst the pandemic, Indiana Legal Services has remained in close contact with the VJO specialist as a critical liaison to the VA. ILS has also provided webinars and other helpful resources regarding COVID-19-related legal issues that can be passed along to Veterans and VA staff.

*“The key to a successful legal clinic and legal projects designed to solve specific issues within the VA is a tenacious champion within the VA. Indiana Legal Services sought to set up legal clinics with the VA for quite some time, but it was impossible to do without someone within the VA advocating for the service. Once a Veteran Justice Outreach Coordinator came along who could see the benefit that legal services have on a Veterans’ health outcomes, everything fell into place. Together, we have developed a robust legal services program within the VA that solves some very difficult issues. And our success has given us the opportunity to expand these services to other VA facilities in Indiana. Looking forward, we expect to further this partnership, which, in the end, will help our veterans live fuller and healthier lives.”*

POLLI POLLEM, CAPT, AFNG, RETIRED,  
MILITARY ASSISTANCE PROJECT DIRECTOR,  
INDIANA LEGAL SERVICES, INC.

As long as there are important legal issues among Veterans that are not being met, the teams at Veteran Health Indiana and Indiana Legal Services are committed to continuing to grow and improve the partnerships. Two new clinics in Northern Indiana Health Care System, Fort Wayne and Marion, IN VA sites are being planned. The Veterans Eviction Avoidance Project

has expanded its geographic base to cover all 92 counties in Indiana. For the Veteran Health Indiana Guardianship Assistance Project, the teams believe that there is still more work to be done — they are looking to partner with other Veterans service organizations, such as the American Legion, to develop a volunteer pool of guardians to support “unbefriended Veterans” who lack decision-making capacity and do not have a potential surrogate decision maker available to them. Privacy barriers in Indiana have prevented them from moving forward, but they hope to work with the National Social Work Program office to explore this issue further.

*“Indiana Legal Services is proud of the work we have done through our Military Assistance Project under the leadership of Polli Pollem. We are happy to partner with the VA and Veteran Health Indiana on these initiatives. As a result of these initiatives’ success, we are exploring funding opportunities to ensure the long-term sustainability and success of these projects.”*

RAKUYA K. TRICE, JD, DEPUTY DIRECTOR AND DIRECTOR  
OF MEDICAL-LEGAL PARTNERSHIPS, INDIANA LEGAL  
SERVICES, INC.



## Key Takeaways

01

**Mission alignment and funding** from the Indiana Department of Veterans Affairs allowed the monthly legal clinic at Veteran Health Indiana to expand and provide targeted legal services for key medical-legal issues identified by VA and ILS staff.

02

**Having a champion in the VA is key.** The VJO specialist works as a liaison between VA staff, legal resources, and other organizations serving Veterans in the community, and saw strategic opportunities to help expand the legal clinic.

Their work with justice-involved Veterans and hands-on involvement at the legal clinic facilitates an environment where the VJO specialist can fast-track the connection between a Veteran's civil legal needs and their care, avoiding any additional "red tape" at the VA.

03

**Collaboration across departments in the VA, including clinicians, social work staff, and the Office of General Counsel, as well as outside of the VA like the Indianapolis Bar Association** and other community orga-

nizations supports an environment for multidisciplinary care for Veterans. These established partnerships also helped facilitate the launch of a successful new program and continued partnership in the legal clinic through the delivery of remote legal services, amidst the pandemic.

04

**Continuous training and education, including the creation of an education committee, CEU curriculum, and quarterly meetings** allow for VA staff to stay abreast of the legal clinic referral processes and changing needs

amongst Veteran patients. These trainings provide a unique opportunity for social works to learn more about the legal issues their Veterans face and be equipped with the tools necessary to assist them.

## RESOURCES

[Memorandum of Understanding](#): Department of Veterans Affairs, Richard L. Roudebush VA Medical Center, Indianapolis, IN and Indiana Legal Services, Inc.

[Memorandum of Understanding establishing the Guardianship Assistance Project](#): Department of Veterans Affairs, Richard L. Roudebush VA Medical Center, Indianapolis, IN and Indiana Legal Services, Inc.

VA Guardianship Assistance Project [Guidelines](#)

VA Guardianship Assistance Project [Brochure](#)

VA Guardianship Assistance Project Continuing Education Units (CEU) [Training Slides](#)

A Guardianship Assistance Project [Referral Form](#)

Veteran Health Indiana and Indiana Legal Services, Inc. Veteran Legal Clinic [Flyer](#)

Indiana Legal Services, Inc. Virtual Weekly Legal Clinic [Flyer](#)

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## MISSION

The National Center for Medical-Legal Partnership leads education, research, and technical assistance efforts to help every health organization in the United States leverage legal services as a standard part of the way they respond to social needs. Our 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 350 hospitals and health centers across the U.S.

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