

Testimony of Kimberly Mitchell  
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Before the House Committee on Veterans' Affairs, Subcommittee on Economic  
Opportunity  
*Housing our Heroes: Addressing the Veteran Homelessness Crisis*

Mr. Chairman, Mr. Ranking Member: Thank you for the opportunity to appear before you today to provide testimony about the housing needs of veterans.

I am Kim Mitchell, President and CEO of Veterans Village of San Diego. We are a not for profit housing provider here in San Diego and we serve more than 2,000 military veterans each year. I also serve on the Board of Directors of the California Association of Veteran Service Agencies, CAVSA, and offer my testimony on behalf of both VVSD and CAVSA today.

I want to begin by acknowledging the many men and women in the audience today who have served our country in uniform. Thank you for your service.

Mr. Chairman, I am reassured by the title of today's hearing: veteran homelessness is a crisis. It is one that touches both rural and urban parts of our country, and one that requires immediate resources and attention if we are ever going to get ahead of it.

Today, in San Diego, we are finally catching our breath. The last two years have been difficult, as a devastating outbreak of hepatitis plagued homeless communities across the region. In response, VVSD and our partners stood up an emergency shelter to provide safe, clean living conditions for an additional 200 veterans that were on the street and susceptible to this potentially deadly virus. We had to act fast, but I believe our response not only helped rebuild livelihoods, it also saved lives.

As the immediate threat from hepatitis subsides, now is a perfect time for reflection. In my mind, the most important question is "what can we do to prevent this from happening again?" Improvements can be made across the board, but because of the work we do at VVSD, I can offer some concrete recommendations about what the VA can do to help.

First, we need to expand the VA's Grant Per Diem program (GPD) by increasing the rates at which providers are reimbursed.

GPD is the first line of defense against veteran homelessness and is widely regarded as a successful, short term program that helps at-risk veterans get back on their feet. The program works, and VVSD and my fellow CAVSA members strongly support the goals and structure of the program as it operates today.

It is worth noting, however, that the significant structural and regulatory changes to GPD three years ago made it more challenging to administer. VVSD and CAVSA commend the VA for improving the effectiveness of this important program, but note that the changes added significant costs to grantees. As such, we ask that Congress or VA increase reimbursement rates by at least 25%. This modest increase will result in community partners like VVSD being more able and willing to expand the number of beds they offer, especially to individuals participating in the “Bridge” and “Clinical” tracks.

Second, we need to better leverage project-based HUD-VASH vouchers by contracting out supportive services to the qualified veteran housing providers that receive these vouchers.

As administrators of HUD-VASH project-based grants, VVSD and CAVSA members bear the burden of the VA failing to maintain its 25:1 ratio of case managers to program participants. In our facilities, we see that VA case management staff often fail to even show up to provide our tenants with the mental health, job training and social services support they need. As a result, we end up funding this support out of our own pockets. As non-profits, this is hard to do. It is also especially frustrating given the fact that Congress has consistently funded these positions! It’s just that the VA can’t seem to get the staff into the field.

There are two solutions to this problem:

- Congress could enact legislation that awards the recipient of a project-based HUD-VASH housing voucher with the commensurate funding to administer the services associated with that voucher. Or;
- The VA and HUD Secretaries—which have virtually unlimited authority to waive law and regulation to improve the administration of HUD-VASH—could issue a directive to accomplish the same goal.

Either way, the routine failure of the VA to provide the casework associated with HUD-VASH is a significant drag on the effectiveness of the program and must be remedied without delay.

Mr. Chairman, Mr. Ranking Member, this concludes my oral remarks. I want to again thank you for shining a light on this important issue, and working to improve the effectiveness of VA's Homeless Housing programs. I am happy to answer any questions the Committee may have.