Department of Veterans Affairs

VA HOMELESS PROVIDERS GRANT AND PER DIEM PROGRAM

MEDICAL CENTER DIRECTOR REVIEW SHEET

THIS INSPECTION IS FOR: ○ INITIAL INSPECTION ◉ RE-INSPECTION | PROJECT # 03-140-IL

PROVIDER'S NAME:	SITE ADDRESS:	DATE OF INSPECTION:
Transitional Living Services, Inc.	10513 IL Rte. 47 Hebron, IL 60034	1/13/2012

LIST MULTIPLE SITES FOR THE SAME PROJECT HERE:

VA MEDICAL CENTER AND STATION NUMBER:	NAME OF VA LIAISON COMPLETING REPORT:
James A. Lovell Federal Health Care Center - 556	Jennifer King, LCSW

INSPECTION TEAM MEMBERS

SERVICE / VISN CNHC	NAME	TITLE
FACILITIES MANAGEMENT	Nancy Brann	Safety and Fire Protection
CLINICAL REVIEW	Jeff Willgale	Social Worker
SECURITY/ LAW ENFORCEMENT	Roger Bussell	Physical Safety Specialist
NUTRITION AND FOOD SERVICES	Lenore Frydrychowicz	Registered Dietician
OTHER Clinical Review	Rani Kappen	Performance Improvement Coordinat
OTHER		
OTHER		

MEDICAL CENTER DIRECTOR - REVIEW & RECOMMENDATION

I HAVE REVIEWED THE INSPECTION PACKAGE REGARDING THE ABOVE NAMED PROVIDER AND IT IS COMPLETE BASED ON THE INFORMATION CONTAINED IN THIS INSPECTION PACKAGE. ANY INSPECTION DEFICIENCIES NOTED WILL BE CORRECTED WITHIN TIMEFRAMES ESTABLISHED AND APPROPRIATE FOLLOW-UP WILL BE CONDUCTED.

◉ I APPROVE ○ I DISAPPROVE PLACEMENT OF VETERANS AT THIS PROVIDER'S FACILITY.

I APPOINT THE FOLLOWING INDIVIDUAL AS LIAISON FOR THIS PROJECT

Jennifer King, LCSW

◉ INITIAL APPOINTMENT ○ RE-APPOINTMENT

VAMC DIRECTOR		SIGNATURE	DATE 5/10/12

Patrick L. Sullivan

VA FORM JAN 2008 10-0361c

INSPECTION PACKAGE ASSEMBLY CHECKLIST

REVISED 04/06/05

ALL ITEMS MUST BE INCLUDED BEFORE SENDING TO PER DIEM FIELD OFFICE FOR REVIEW

	ITEM	WHO IS RESPONSIBLE
☒	GRANT AND PER DIEM INSPECTION CHECKLIST - SIGNED WITH APPROPRIATE REPORTS ATTACHED	DIRECTOR, LIAISON & TEAM MEMBERS
☒	LIAISON DESIGNATION / RE-DESIGNATION	VAMC DIRECTOR
☒	SIGNED AND DATED MEMORANDUM OF AGREEMENT	LIAISON & PROVIDER
☒	PROVIDERS REPORT OF MEETING GOALS AND OBJECTIVES	PROVIDER
☐	CERTIFICATE OF OCCUPANCY OR A LETTER STATING WHY THE GOVERNING ENTITY (CITY, COUNTY, STATE) DOES NOT REQUIRE ONE. (INITIAL INSPECTIONS ONLY).	PROVIDER

VA LIAISON - INSPECTION OVERVIEW & RECOMMENDATION SUMMARY

	TO THE BEST OF YOUR KNOWLEDGE DOES THE AWARDEE & PROGRAM MEET THE FOLLOWING CRITERIA?	YES	NO	N/A
1	IS A PUBLIC OR NONPROFIT PRIVATE ENTITY	◉	○	○
2	HAS DEMONSTRATED ADEQUATE STAFFING AND FISCAL SUPPORT TO CARRY OUT THIS PROJECT	◉	○	○
3	HAS AGREED TO, AND HAS DEMONSTRATED THE CAPACITY TO, MEET THE APPLICABLE CRITERIA AND REQUIREMENTS OF THE GRANT AND OR PER DIEM AWARD	◉	○	○
4	SERVES A MINIMUM OF 75% VETERANS IN THE PROJECT AS COMMITTED IN THE ORIGINAL AWARD APPLICATION	◉	○	○
5	SERVES THE HOMELESS POPULATION AS DEFINED IN THE REGULATIONS	◉	○	○
6	MEETS ALL APPLICABLE STATE AND LOCAL LICENSING AND OTHER REQUIREMENTS FOR THE OPERATION OF THE PROJECT IN THE JURISDICTION WHERE THE PROJECT IS LOCATED	◉	○	○
7	BASED ON THE RESULTS OF THE ATTACHED INSPECTION DOCUMENTS THIS PROJECT IS RECOMMENDED FOR THE PLACEMENT OF VETERANS.	◉	○	○
	ALL APPROPRIATE CHECKLIST SECTIONS HAVE BEEN COMPLETED AND ARE ATTACHED. THE FACILITY IS APPROVED FOR PLACEMENT OF VETERANS.	◉	○	

LCSW GPD LIAISON SIGNATURE	4/27/12 DATE

VA LIAISON INSPECTION OVERVIEW	PROJECT NUMBER03-140-IL
	INSPECTION DEFICIENCIES & CORRECTIVE ACTIONS

ANY CHECKLIST ITEMS WHERE "NO" IS INDICATED MUST BE CORRECTED AND APPROPRIATE FOLLOW-UP INSPECTIONS CONDUCTED.

DEFICIENCIENCIES AND CORRECTIVE ACTIONS REQUIRED	SUSPENSE DATE FOR CORRECTION & FOLLOW-UP
TLS had no addiction counselor for several months prior to the inspection. As of 1/13/12, they have hired a counselor who will complete training and begin serving clients.	Corrected 1/13/12

ADDITIONAL COMMENTS:

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DUPLICATE PAGE

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FACILITIES MANAGEMENT	PROJECT NUMBER 03-140-IL
APPROPRIATE DISCIPLINE(S) SHOULD COMPLETE THIS SECTION ATTACHING THEIR RESPECTIVE REPORT FORMAT(S)	SITE ADDRESS: 10513 IL Rte. 47 Hebron, IL 60034

GRANT COMPLIANCE CAPITAL GRANT PROJECTS (INITIAL INSPECTION ONLY)

THE AWARDEE HAS		YES	NO	N/A
8	ACQUIRED, RENOVATED, OR NEWLY CONSTRUCTED THE SITE AS OUTLINED IN THE GRANT APPLICATION	○	○	●
9	PURCHASED AND INSTALLED EQUIPMENT AS OUTLINED IN THE ORIGINAL GRANT APPLICATION, (E.G., STOVES, REFRIGERATORS, WASHING MACHINES, ETC.)	○	○	●

OPERATING STANDARDS ALL GRANT & PER DIEM PROVIDERS (ALL INSPECTIONS)

THE AWARDEE FACILITY		YES	NO	N/A
10	IS IN COMPLIANCE WITH THE NFPA LIFE SAFETY CODE (SEE ATTACHED REPORT)	●	○	○
11	IS STRUCTURALLY SOUND SO AS NOT TO POSE ANY THREAT TO THE HEALTH AND SAFETY OF THE OCCUPANTS AND SO AS TO PROTECT THEM FROM THE ELEMENTS	●	○	○
12	HAS ENTRIES AND EXIT LOCATIONS THAT ARE CAPABLE OF BEING UTILIZED WITHOUT UNAUTHORIZED USE OF OTHER PRIVATE PROPERTIES AND PROVIDE ALTERNATE MEANS OF EGRESS IN CASE OF FIRE	●	○	○
13	IS COMPLIANT WITH THE AMERICAN WITH DISABILITIES ACT, REFERRED TO AS ARCHITECTURAL BARRIERS ACT COMPLIANT	●	○	○
14	PROVIDES EACH RESIDENT APPROPRIATE SPACE AND SECURITY FOR THEMSELVES AND THEIR BELONGINGS	●	○	○
15	PROVIDES EACH RESIDENT AN ACCEPTABLE PLACE TO SLEEP THAT IS IN COMPLIANCE WITH APPROPRIATE CODES AND REGULATIONS	●	○	○
16	PROVIDES EVERY ROOM OR SPACE WITH NATURAL OR MECHANICAL VENTILATION	●	○	○
17	IS FREE OF POLLUTANTS IN THE AIR AT LEVELS THAT THREATEN THE HEALTH OF RESIDENTS	●	○	○
18	PROVIDES A WATER SUPPLY THAT IS FREE FROM CONTAMINATION	●	○	○
19	PROVIDES SUFFICIENT SANITARY FACILITIES TO RESIDENTS THAT ARE IN PROPER OPERATIONAL CONDITION, MAY BE USED IN PRIVACY, AND ARE ADEQUATE FOR PERSONAL CLEANLINESS AND THE DISPOSAL OF HUMAN WASTE	●	○	○
20	PROVIDES ADEQUATE HEATING AND OR COOLING PLANTS THAT ARE IN PROPER OPERATING CONDITION	●	○	○
21	PROVIDES ADEQUATE NATURAL OR ARTIFICIAL ILLUMINATION TO PERMIT NORMAL INDOOR ACTIVITIES AND TO SUPPORT THE HEALTH AND SAFETY OF RESIDENT	●	○	○

22	PROVIDES SUFFICIENT ELECTRICAL SOURCES TO PERMIT USE OF ESSENTIAL ELECTRICAL APPLIANCE WHILE ASSURING SAFETY FROM FIRE	◉	○	○
23	PROVIDES THAT HOUSING AND EQUIPMENT ARE MAINTAINED IN A SANITARY MANNER	◉	○	○
ALL APPROPRIATE CHECKLIST ITEMS HAVE BEEN ADDRESSED AND FACILITY IS APPROVED FOR PLACEMENT OF VETERANS:		◉	○	

Nancy Brown	30 APR 2012
FACILITIES MANAGEMENT INSPECTION TEAM MEMBER *SIGNATURE*	DATE

FACILITIES MANAGMENT	PROJECT NUMBER03-140-IL
	INSPECTION DEFICIENCIES & CORRECTIVE ACTIONS

ANY CHECKLIST ITEMS WHERE "NO" IS INDICATED MUST BE CORRECTED AND APPROPRIATE FOLLOW-UP INSPECTIONS CONDUCTED.

DEFICIENCIENCIES AND CORRECTIVE ACTIONS REQUIRED	SUSPENSE DATE FOR CORRECTION & FOLLOW-UP
1. Re-mount fire extinguisher to be hung near the door (Room #1)	1. Corrected 2/9/12
2. Microwave needs to be placed on a stable piece of furniture (not a milk crate (Room #1)	2. Corrected 2/9/12
3. Remove flammable material from the room. (Room #1)	3. Corrected 2/9/12
4. Repair hole in wall (Room #9)	4. Corrected 2/9/12
5. Ensure that all fire extinguishers have been inspected and have a new annual tag on them (Rooms #16,17,18)	5. Corrected 2/9/12
6. Repair shower wall (Room #18)	6. Corrected 4/27/12
7. Spackle and paint ceiling (Kitchen)	7. Corrected 2/28/12
8. Replace burned-out light bulbs (2nd floor deck)	8. Corrected 2/9/12
9. Move cabinet so it is not blocking the water flow of the sprinkler head (meeting room)	9. Corrected 2/9/12

ADDITIONAL COMMENTS:

Recommend that staff check to see what extension cords are being used for and remind residents that all cooking equipment needs to be plugged directly into the wall and not into a surge protector or extension cord.

Recommend that staff have an electrician come out to survey all rooms to see if additional drops/outlets could be added to each room.

I feel that the staff is doing an excellent job regarding life safety.

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NUTRITION AND FOOD SERVICES	PROJECT NUMBER 03-140-IL
APPROPRIATE DISCIPLINE(S) SHOULD COMPLETE THIS SECTION ATTACHING THEIR RESPECTIVE REPORT FORMAT(S)	SITE ADDRESS: 10513 IL Rte. 47 Hebron, IL 60034

OPERATING STANDARDS ALL GRANT & PER DIEM PROVIDERS (ALL INSPECTIONS)

	THE AWARDEE	YES	NO	N/A
24	PROVIDES THAT MEALS OR MEAL PREPARATION FACILITIES ARE PROVIDED FOR RESIDENTS	◉	○	○
25	ENSURES THAT ALL FOOD PREPARATION AREAS CONTAIN SUITABLE SPACE AND EQUIPMENT TO STORE, PREPARE, AND SERVE FOOD IN A SANITARY MANNER	◉	○	○
26	ENSURES THAT RESIDENTS WITH DISABILITIES ARE PROVIDED MEALS OR MEAL PREPARATION FACILITIES ARE AVAILABLE TO MEET THEIR NEEDS	◉	○	○
	ALL APPROPRIATE CHECKLIST ITEMS HAVE BEEN ADDRESSED AND FACILITY IS APPROVED FOR PLACEMENT OF VETERANS:	◉	○	

Lenore E Frydrychaz MS/RD/LDN

NUTRITION AND FOOD SERVICES INSPECTION TEAM MEMBER *SIGNATURE*

3/7/12

DATE

NUTRITION AND FOOD SERVICES	PROJECT NUMBER03-140-IL
	INSPECTION DEFICIENCIES & CORRECTIVE ACTIONS

ANY CHECKLIST ITEMS WHERE "NO" IS INDICATED MUST BE CORRECTED AND APPROPRIATE FOLLOW-UP INSPECTIONS CONDUCTED.

DEFICIENCIENCIES AND CORRECTIVE ACTIONS REQUIRED	SUSPENSE DATE FOR CORRECTION & FOLLOW-UP
Community freezer #2 needs to be cleaned.	Corrected 2/9/12
Resident freezer needs to be cleaned.	Corrected 2/9/12
Individual coffee packet stored in same area as deodorant and shaving cream; use a separate shelf to store food items above other items.	Corrected 2/9/12
Refrigerator for Room #18 is 44-45 degrees: too warm, and not safe.	Corrected 2/9/12
Hood over stove in kitchen needs cleaning on top of and under the hood.	Corrected 3/6/12
The toaster in the kitchen needs cleaning.	Corrected 2/9/12

ADDITIONAL COMMENTS:

TLS staff may want to consider providing resident rooms with refrigerator thermometers. (This was also completed 2/9/12).

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CLINICAL REVIEW

PROJECT NUMBER 03-140-IL

(THE CLINICAL REVIEW MAY INVOLVE NURSING, SOCIAL WORK, MENTAL HEALTH & BEHAVIORAL SCIENCES ALONE OR IN ANY COMBINATION AS THE AWARDEES APPLICATION DICTATES. APPROPRIATE DISCIPLINE(S) SHOULD COMPLETE THIS SECTION ATTACHING THEIR RESPECTIVE REPORT FORMAT(S).

SITE ADDRESS: 10513 IL Rte 47
Hebron, IL 60034

OPERATING STANDARDS ALL GRANT & PER DIEM PROVIDERS (ALL INSPECTIONS)

	THE AWARDEE	YES	NO	N/A
27	ENSURES RESIDENTIAL SUPERVISION WITH SUFFICIENT KNOWLEDGE FOR THE POSITION 24 HRS PER DAY, 7 DAYS PER WEEK; IF THIS SUPERVISION IS PROVIDED BY A VOLUNTEER OR SENIOR RESIDENT, A PAID STAFF MEMBER IS ON CALL FOR EMERGENCIES 24 HRS PER DAY, 7 DAYS PER WEEK	◉	○	○
28	ENSURES RESIDENTS ARE PROVIDED A CLEAN AND SOBER ENVIRONMENT (FREE FROM ILLICIT DRUGS)	◉	○	○
29	ENSURES THAT PARTICIPANTS IN NEED OF MEDICAL OR SOCIAL DETOX CONDUCTED AT THE SAME SITE ARE CLEARLY SEPARATED FROM THE GENERAL RESIDENT POPULATION	○	○	◉
30	ENSURES AN ONGOING ASSESSMENT OF THE SUPPORTIVE SERVICES NEEDED BY THE RESIDENTS AND THE AVAILABILITY OF SUCH SERVICES	◉	○	○
31	ENSURES AN ASSESSMENT REPORT ADDRESSING THEIR ABILITY TO MEET THE GOALS, OBJECTIVES, MEASURES, AND SPECIAL NEEDS AS SET FORTH IN THEIR APPLICATION IS COMPLETED BY THE PROVIDER AND SUBMITTED WITH THE ANNUAL GPD INSPECTION	◉	○	○
32	ENSURES NO VETERAN REMAINS IN TRANSITIONAL HOUSING LONGER THAN 24 MONTHS WITHOUT A DOCUMENTED CLINICAL WAIVER.	◉	○	○
33	ENSURES THAT THE CONSULTATION AND PARTICIPATION OF NOT LESS THAN ONE HOMELESS VETERAN OR FORMERLY HOMELESS VETERAN ON THE BOARD OF DIRECTORS OR THE EQUIVALENT POLICY MAKING ENTITY (MAY BE WAIVED - SEE REGULATIONS)	◉	○	○
34	ATTEMPTS TO INVOLVE HOMELESS VETERANS AND FAMILIES THOUGH EMPLOYMENT, VOLUNTEER SERVICES, OR OTHERWISE, IN CONSTRUCTION, REHABILITATION, MAINTAINING, AND OPERATION THE PROGRAM	◉	○	○
35	ENSURES THE RECORDS KEPT ON HOMELESS VETERANS ARE KEPT CONFIDENTIAL, (IF FAMILY VIOLENCE PREVENTION OR TREATMENT SERVICES ARE PROVIDED SEE REGULATIONS PERTAINING TO CONFIDENTIALLY OF RECORDS)	◉	○	○
36	ENSURES THAT ALL HOUSING AND SERVICES PROVIDED PARTICIPANTS ARE OF AN ACCEPTABLE QUALITY	◉	○	○
37	ENSURES SUSTAINED EFFORTS ARE MADE THAT ELIGIBLE HARD-TO-REACH PERSONS ARE SERVED IN THE FACILITY. THIS OUTREACH SHOULD BE PRIMARILY TOWARD PERSONS WHO MEET THE DEFINITION OF HOMELESSNESS IN THE REGULATION	◉	○	○
	ALL APPROPRIATE CHECKLIST ITEMS HAVE BEEN ADDRESSED AND FACILITY IS APPROVED FOR PLACEMENT OF VETERANS:	◉	○	

Jeffrey J. Williams

CLINICAL INSPECTION TEAM MEMBER *SIGNATURE*

2/1/2012
DATE

VA FORM JAN 2008 10-0361c

CLINICAL REVIEW	PROJECT NUMBER03-140-IL
	INSPECTION DEFICIENCIES & CORRECTIVE ACTIONS

ANY CHECKLIST ITEMS WHERE "NO" IS INDICATED MUST BE CORRECTED AND APPROPRIATE FOLLOW-UP INSPECTIONS CONDUCTED.

DEFICIENCIENCIES AND CORRECTIVE ACTIONS REQUIRED	SUSPENSE DATE FOR CORRECTION & FOLLOW-UP
TLS Annual Report needs to be completed and submitted.	Completed 3/1/12

ADDITIONAL COMMENTS:

There was a great presence of case notes in the charts in relation to the residents' ongoing assessment of needs and services, although there was some lack of consistency with the different providers.

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SERVICE CENTER REQUIREMENTS

PROJECT NUMBER 03-140-IL

TO BE COMPLETED BY VA LIAISON
OR CLINICAL REVIEW TEAM MEMBER

SITE ADDRESS 10513 IL Rte 47
Hebron, IL 60034

THE AWARDEE

		YES	NO	N/A
38	PROVIDES SERVICES TO HOMELESS VETERANS FOR A MINIMUM OF 40 HOURS OVER A MINIMUM OF FIVE DAYS PER WEEK, AS WELL AS IN AN AS NEEDED, UNSCHEDULED BASIS. MOBILE SERVICE CENTERS MAY COUNT TRAVEL TIME IN THE 40-HOUR REQUIREMENT	○	○	◉
39	HOURS OF OPERATION AND EMERGENCY CONTACTS ARE CLEARLY POSTED. MOBILE SERVICE CENTERS HAVE PROVIDED A REASONABLE TENTATIVE SCHEDULE OF SITE VISITS AND ACTIVITIES, (SEE REGULATIONS FOR SCHEDULE SPECIFICS)	○	○	◉
40	SPACE IS MADE AVAILABLE FOR USE BY VA STAFF AND OTHER APPROPRIATE AGENCIES AND ORGANIZATIONS THAT ASSIST HOMELESS VETERANS	○	○	◉
41	SERVICE CENTER IS EQUIPPED TO PROVIDE, OR ASSIST IN PROVIDING, HEATH CARE, MENTAL HEALTH SERVICE, HYGIENE FACILITIES, BENEFITS AND EMPLOYMENT COUNSELING, MEALS AND TRANSPORTATION ASSISTANCE	○	○	◉
42	PROVIDES OTHER SERVICES AS VA DETERMINES NECESSARY BASE ON THE NEED FOR SERVICES OTHERWISE NOT AVAILABLE IN THE GEOGRAPHIC AREA	○	○	◉
	ALL APPROPRIATE CHECKLIST ITEMS HAVE BEEN ADDRESSED AND FACILITY IS APPROVED FOR PLACEMENT OF VETERANS.	◉	○	

[signature] LCSW

LIAISON OR CLINICAL INSPECTION TEAM MEMBER *SIGNATURE*

4/27/12

DATE

VA FORM JAN 2008 10-0361c

PERFORMANCE REVIEW REMARKS

EVALUATION PERIOD 1/1/2011-12/31/2011

PROJECT NUMBER 03-140-IL

INCREASED SKILL AND / OR INCOME

OBJECTIVES / EXPECTED RESULTS	DATA SOURCE	DATA COLLECTED BY	NO. IN SAMPLE SIZE	ACTUAL RESULTS	ANALYSIS	ACTION PLAN
50% of residents will live independently in 12 months from entering program with 100% living independently in 24 months.	Case files	TLS staff	17	53%	Meets objective	Continue to monitor

OBJECTIVES / EXPECTED RESULTS	DATA SOURCE	DATA COLLECTED BY	NO. IN SAMPLE SIZE	ACTUAL RESULTS	ANALYSIS	ACTION PLAN
100% of residents will develop with case manager an individual care program within the first 30 days of enrollment.	Case files	TLS staff	17	100%	Meets objective	Continue to monitor

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PERFORMANCE REVIEW REMARKS

EVALUATION PERIOD 1/1/2011-12/31/2011

03-140-IL

IMPROVED SELF DETERMINATION

OBJECTIVES / EXPECTED RESULTS	DATA SOURCE	DATA COLLECTED BY	NO. IN SAMPLE SIZE	ACTUAL RESULTS	ANALYSIS	ACTION PLAN
75% of residents will successfully complete financial counseling	Case files	TLS staff	17	75%	Meets objective	Continue to monitor

OBJECTIVES / EXPECTED RESULTS	DATA SOURCE	DATA COLLECTED BY	NO. IN SAMPLE SIZE	ACTUAL RESULTS	ANALYSIS	ACTION PLAN
90% of residents will attend self-enhancement groups held on site.	Case files	TLS staff	17	100%	Meets objective	Continue to monitor

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PERFORMANCE REVIEW REMARKS

EVALUATION PERIOD 1/1/2011-12/31/2011

03-140-IL

IMPROVED SELF DETERMINATION

OBJECTIVES / EXPECTED RESULTS	DATA SOURCE	DATA COLLECTED BY	NO. IN SAMPLE SIZE	ACTUAL RESULTS	ANALYSIS	ACTION PLAN

OBJECTIVES / EXPECTED RESULTS	DATA SOURCE	DATA COLLECTED BY	NO. IN SAMPLE SIZE	ACTUAL RESULTS	ANALYSIS	ACTION PLAN

VA FORM JAN 2008 **10-0361c**

PERFORMANCE REVIEW REMARKS

EVALUATION PERIOD 1/1/2011-12/31/2011

03-140-IL

IMPROVED SELF DETERMINATION

OBJECTIVES / EXPECTED RESULTS	DATA SOURCE	DATA COLLECTED BY	NO. IN SAMPLE SIZE	ACTUAL RESULTS	ANALYSIS	ACTION PLAN
90% of residents who have substance abuse problems will attend treatment consistent with case plan.	Case files	TLS Staff	17	100%	Meets objective	Continue to monitor

OBJECTIVES / EXPECTED RESULTS	DATA SOURCE	DATA COLLECTED BY	NO. IN SAMPLE SIZE	ACTUAL RESULTS	ANALYSIS	ACTION PLAN
33% of residents without a high school diploma will complete a pre GED program.	Case files	TLS staff	17	No resident in need of a GED program	All residents have high school diploma or GED at time of admission	Continue to monitor

VA FORM JAN 2008 **10-0361c**

PERFORMANCE REVIEW REMARKS

EVALUATION PERIOD 1/1/2011-12/31/2011

03-140-IL

IMPROVED SELF DETERMINATION

OBJECTIVES / EXPECTED RESULTS	DATA SOURCE	DATA COLLECTED BY	NO. IN SAMPLE SIZE	ACTUAL RESULTS	ANALYSIS	ACTION PLAN
90% of residents who are unemployed will be referred to IDES for resume development and job linkage.	Case files	TLS staff	17	100%	Meets objective	Continue to monitor

OBJECTIVES / EXPECTED RESULTS	DATA SOURCE	DATA COLLECTED BY	NO. IN SAMPLE SIZE	ACTUAL RESULTS	ANALYSIS	ACTION PLAN
100% of residents who are eligible for VA Compensation, SSI or SSDI, Section 8 housing and/ or VAC compensation will make application.	Case files	TLS staff	17	100%	Meets objective	Continue to monitor

VA FORM JAN 2008 10-0361c

PERFORMANCE REVIEW REMARKS

EVALUATION PERIOD 1/1/2011-12/31/2011

03-140-IL

IMPROVED SELF DETERMINATION

OBJECTIVES / EXPECTED RESULTS	DATA SOURCE	DATA COLLECTED BY	NO. IN SAMPLE SIZE	ACTUAL RESULTS	ANALYSIS	ACTION PLAN
75% of residents who are computer illiterate will attend computer classes at McHenry Community College.	Case files	TLS staff	17	No residents were computer illiterate	Meets objective	Continue to monitor

OBJECTIVES / EXPECTED RESULTS	DATA SOURCE	DATA COLLECTED BY	NO. IN SAMPLE SIZE	ACTUAL RESULTS	ANALYSIS	ACTION PLAN
100% of residents with identified personal hygiene issues will participate in individual counseling with their case manager.	Case files	TLS staff	17	100%	Meets objective	Continue to monitor

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PERFORMANCE REVIEW REMARKS

EVALUATION PERIOD 1/1/2011-12/31/2011

03-140-IL

IMPROVED SELF DETERMINATION

OBJECTIVES / EXPECTED RESULTS	DATA SOURCE	DATA COLLECTED BY	NO. IN SAMPLE SIZE	ACTUAL RESULTS	ANALYSIS	ACTION PLAN
50% of those residents who participate in job training will have a job within 6 months of completing their training.	Case files	TLS staff	17	100%	Meets objective	Continue to monitor

OBJECTIVES / EXPECTED RESULTS	DATA SOURCE	DATA COLLECTED BY	NO. IN SAMPLE SIZE	ACTUAL RESULTS	ANALYSIS	ACTION PLAN
75% of residents will obtain a job within 18 months	Case files	TLS staff	17	94%	Meets objective	Continue to monitor

VA FORM JAN 2008 10-0361c

PERFORMANCE REVIEW REMARKS

EVALUATION PERIOD 1/1/2011-12/31/2011

03-140-IL

IMPROVED SELF DETERMINATION

OBJECTIVES / EXPECTED RESULTS	DATA SOURCE	DATA COLLECTED BY	NO. IN SAMPLE SIZE	ACTUAL RESULTS	ANALYSIS	ACTION PLAN
50% of those residents who secure employment will continue to be employed 6 months after commencing the program.	Case files	TLS staff	17	59%	Meets objective	Continue to monitor

OBJECTIVES / EXPECTED RESULTS	DATA SOURCE	DATA COLLECTED BY	NO. IN SAMPLE SIZE	ACTUAL RESULTS	ANALYSIS	ACTION PLAN
75% of the residents will be able to improve personal finances within 6 months of commencing the program	Case files	TLS staff	17	88%	Meets objective	Continue to monitor

VA FORM JAN 2008 10-0361c

PERFORMANCE REVIEW REMARKS

EVALUATION PERIOD 1/1/2011-12/31/2011

03-140-IL

IMPROVED SELF DETERMINATION

OBJECTIVES / EXPECTED RESULTS	DATA SOURCE	DATA COLLECTED BY	NO. IN SAMPLE SIZE	ACTUAL RESULTS	ANALYSIS	ACTION PLAN
75% of residents will be able to save 15% of their income within 3 months of obtaining a job.	Case files	TLS staff	17	88%	Meets objective	Continue to monitor

OBJECTIVES / EXPECTED RESULTS	DATA SOURCE	DATA COLLECTED BY	NO. IN SAMPLE SIZE	ACTUAL RESULTS	ANALYSIS	ACTION PLAN
50% of residents who enter GED program will pass test within 6 months.	Case files	TLS staff	17	0	All residents had their high school diploma or GED at time of admission to the program	Continue to monitor

VA FORM JAN 2008 10-0361c

PERFORMANCE REVIEW REMARKS

EVALUATION PERIOD 1/1/2011-12/31/2011

03-140-IL

IMPROVED SELF DETERMINATION

OBJECTIVES / EXPECTED RESULTS	DATA SOURCE	DATA COLLECTED BY	NO. IN SAMPLE SIZE	ACTUAL RESULTS	ANALYSIS	ACTION PLAN
95% of residents will meet with case manager to develop case plan.	Case files	TLS staff	17	100%	Meets objective	Continue to monitor

OBJECTIVES / EXPECTED RESULTS	DATA SOURCE	DATA COLLECTED BY	NO. IN SAMPLE SIZE	ACTUAL RESULTS	ANALYSIS	ACTION PLAN
50& of residents actively participate in case plan by making & keeping appointments and making recommendations to case managers regarding their own case plan as monitored and recorded by staff.	Case files	TLS staff	17	100%	Meets objective	Continue to monitor

VA FORM JAN 2008 10-0361c

PERFORMANCE REVIEW REMARKS

EVALUATION PERIOD 1/1/2011-12/31/2011

03-140-IL

IMPROVED SELF DETERMINATION

OBJECTIVES / EXPECTED RESULTS	DATA SOURCE	DATA COLLECTED BY	NO. IN SAMPLE SIZE	ACTUAL RESULTS	ANALYSIS	ACTION PLAN
25% of residents demonstrate leadership skills by encouraging other residents participating in groups and individual treatment as recorded by staff.	Case files	TLS staff	17	100%	Meets objective	Continue to monitor

OBJECTIVES / EXPECTED RESULTS	DATA SOURCE	DATA COLLECTED BY	NO. IN SAMPLE SIZE	ACTUAL RESULTS	ANALYSIS	ACTION PLAN
40% of residents will plan for their future by pursuing a job, job training, finding a job, participating in substance abuse treatment and/or mental health treatment as recorded by staff.	Case files	TLS staff	17	100%	Meets objective	Continue to monitor

VA FORM JAN 2008 10-0361c

PERFORMANCE REVIEW REMARKS

EVALUATION PERIOD 1/1/2011-12/31/2011

03-140-IL

IMPROVED SELF DETERMINATION

OBJECTIVES / EXPECTED RESULTS	DATA SOURCE	DATA COLLECTED BY	NO. IN SAMPLE SIZE	ACTUAL RESULTS	ANALYSIS	ACTION PLAN
30% of residents participate in social activities outside of New Horizon such as family activities, attend veterans organization meetings or activities or church attendance.	Case files	TLS staff	17	100%	Meets objective	Continue to monitor

OBJECTIVES / EXPECTED RESULTS	DATA SOURCE	DATA COLLECTED BY	NO. IN SAMPLE SIZE	ACTUAL RESULTS	ANALYSIS	ACTION PLAN

VA FORM JAN 2008 10-0361c

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REVIEW OF NEPEC DATA

PROJECT NUMBER03-140-IL

WE HAVE REVIEWED THE NEPEC DATA AS IT PERTAINS TO THIS PROGRAM.

DATE OF DISCUSSION 02/9/2012

INDICATE ANY NOTES OR PLANNED IMPROVEMENTS BASED UPON THESE DISCUSSIONS.

The NEPEC Annual Report for FY 2011 was reviewed with Betty Nissen, Sandra Rodgers, and Judy Peterson of New Horizons. The data reviewed demonstrated that Transitional Living Services (TLS) was consistent in most areas with other VISN 12 G&PD programs. During the meeting, unplanned discharges and ways of mitigating these were discussed as they relate to the NEPEC outcome data. Also discussed were extensions in the program and barriers to residents locating independent housing within 24 months, although the NEPEC data revealed that TLS does not have more extensions than other comparable programs.

VA FORM JAN 2008 10-0361c

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ANNUAL REVIEW OF SERVICES

PROJECT NUMBER03-140-IL

AS PART OF OUR ONGOING COMMITMENT TO EXCELLENCE IN SERVICE TO HOMELESS VETERANS, WE CONFIRM THAT WE ARE PROVIDING ALL THOSE SERVICES WHICH ARE DESCRIBED IN OUR ORIGINAL GRANT APPLICATION AND/OR IN SUBSEQUENTLY APPROVED CHANGES OF SCOPE BY THE GRANT/PER DIEM OFFICE. ◉ YES ○ NO

IF NO, DESCRIBE WHICH SERVICES ARE NOT PRESENTLY BEING PROVIDED & YOUR AGENCIES PLAN TO ENSURE THEIR PROVISION.

SIGNATURE OF GPD PROVIDER	DATE	SIGNATURE OF GPD LIAISON	DATE
	5/3/12	King LCSW	4/27/12

VA FORM JAN 2008 10-0361c

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2012 Illinois Registration Identification Card
Jesse White, Illinois Secretary of State

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A127942 2EEI25225 R 0512

Vehicle Year 2007	Vehicle Make DODGE		VIN 2D4GP44L57R355626	
Weight or CC's	Body Style VAN		Application Type PASSENGER	
Axles	Leased/Rental	Unit Number	File Number	County MC HENRY 056
Driver's License Number(s) or FEIN(s)			Expiration Date MAY 31, 2012	
			Plate Number A127942	
Renewal Fee Due 99.00				

TRANSITIONAL LIVING SERVICES

10513 IL RT 47
HEBRON IL 60034-9410

Registration ID: 5883 1331 PIN: 6444

INSURANCE IDENTIFICATION CARD

STATE IL

COMPANY NUMBER

COMPANY
Philadelphia Insurance Cos.

POLICY NUMBER
PHPK752097

EFFECTIVE DATE
08/23/11

EXPIRATION DATE
08/23/12

YEAR
2007

MAKE/MODEL
Dodge Grand

VEHICLE IDENTIFICATION NUMBER
2D4GP44L57R355626

AGENCY/COMPANY ISSUING CARD
Frisch & Barrett Insurance
Charles Barrett
847-639-2134

INSURED
Transitional Living Services
10513 Route #47
Hebron IL 60034

COVERAGE MEETS MINIMUM LIABILITY INSURANCE PRESCRIBED BY LAW

2013 Illinois Registration Identification Card

Jesse White, Illinois Secretary of State

WOEI12/16/11:02:6927: 10.00 CK01

20135CV 3XEI26927 R 1213

Vehicle Year 2005	Vehicle Make DODGE		VIN 1D4GP24R55B352925	
Weight or CC's	Body Style VAN		Application Type CHARITABLE VEHICLE	
Axles	Leased/Rental	Unit Number	File Number	County 056 MC HENRY
Driver's License Number(s) or FEIN(s)			Expiration Date DECEMBER 31, 2013	
			Plate Number 20135CV	
Renewal Fee Due 10.00				

TRANSITIONAL LIVING SERVICES

10513 IL ROUTE 47
HEBRON IL 60034-9410

Securemark Decal Corp.

This Identification Card must be carried at all times in those vehicles designed to carry more than 10 persons, or to pull or carry property, freight, or cargo; those that are designed or used for living quarters, and school buses (625 ILCS 5/3-416). **If you travel outside Illinois**, you may be required to exhibit this vehicle registration identification card as proof of ownership.

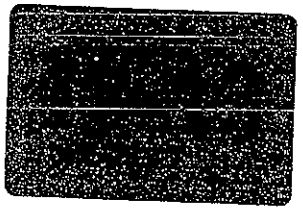
STICKER INSTRUCTIONS

PLACE THIS VALIDATED DECAL ON YOUR REAR LICENSE PLATE

1. Clean the license plate by removing all dirt, wax and tar.
2. Wipe dry.
3. Place renewal sticker on top of last year's sticker. Press firmly.

CAUTION: After sticker has been applied, it cannot be removed without destroying it.

Year 2013



Peel Here

INSURANCE IDENTIFICATION CARD

COMPANY NUMBER

STATE IL

COMPANY Philadelphia Insurance Cos.

POLICY NUMBER PHPK752097

EFFECTIVE DATE 08/23/11

EXPIRATION DATE 08/23/12

YEAR 2005

MAKE/MODEL Dodge Grand

VEHICLE IDENTIFICATION NUMBER 1D4GP24R55B352925

AGENCY/COMPANY ISSUING CARD
Frisch & Barrett Insurance
Charles Barrett
847-639-2134

INSURED
Transitional Living Services
10513 Route #47
Hebron IL 60034

COVERAGE MEETS MINIMUM LIABILITY INSURANCE PRESCRIBED BY LAW

VING SERVICES

9410

2013 Illinois Registration Identification Card
Jesse White, Illinois Secretary of State

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20135CV 3XEI26927 R 1213

Vehicle Year 2005	Vehicle Make DODGE		VIN 1D4GP24R55B352925
Weight or CC's	Body Style VAN		Application Type CHARITABLE VEHICLE
Axles	Leased/Rental	Unit Number	File Number / County 056 MC HENRY
Driver's License Number(s) or FEIN(s)			Expiration Date DECEMBER 31, 2013
			Plate Number 20135CV
Renewal Fee Due 10.00			

Memorandum of Agreement

Contracts are not an appropriate agreement through which to pay per diem as Federal and VA Acquisition Regulations govern contracts. Grants and per diem do not fall under these regulations. This MOA is an example as each medical center may use its own MOA format. This example format is good for housing or services. Simply add, remove, or combine the sections as needed. This will be determined by your VAMC business practices. (NOTE: If the business practice of the VAMC is to make the MOA for a period of more than a year be sure to note it on the document).

MEMORANDUM OF AGREEMENT

For Project Number ___03-140-IL_____

SECTION I - PARTIES

This Memorandum of Agreement is hereby made by and between
A. The U.S. Department of Veterans Affairs (hereinafter called VA)
and

B. Transitional Living Services (hereinafter called the Recipient)

SECTION II BACKGROUND

The Recipient, a homeless supportive housing provider has been selected for per diem payments pursuant to the regulations implementing the VA Homeless Veterans Providers Grant and Per Diem Program. This Program is authorized by Public Law 107-95 Section 5. The Recipient will receive per diem payments as an entity eligible to receive a grant under the program (PDO).

SECTION III - PAYMENT OF PER DIEM

A. COVERED VETERAN: VA will pay the Recipient per diem payments on behalf of a homeless veteran: 1.) who VA refers to the Recipient; or 2.) for whom VA authorizes the provision of supportive housing or supportive services. [See 38 C.F.R. § 61.33.]

B. AMOUNT OF PER DIEM [For supportive housing providers]:

1) VA will pay the Recipient up to 100 percent of the allowable cost (per OMB Circular A-122, A-87) of housing minus other sources of payments to the Recipient for furnishing the housing to a covered veteran up to a maximum of the per diem rate paid under the VA State Home Domiciliary rate as set forth in 38 U.S.C. 1741. The per diem rate is the rate determined by utilizing the formula provided in the Recipient's Funds Assurance Letter and verified by the GPD Program Office.

2) At the end of each month, VA will determine the total number of covered veterans for the Recipient and number of days each was provided housing. For each of these covered veterans, VA will pay the recipient the per diem established in paragraph 1 multiplied by the number of days the Recipient furnished housing to the veteran.

C. LIMITATIONS:

1) Per Diem payments will not be paid for both supportive housing and supportive services provided to the same veteran by the same per diem recipient.

2) Based on the business practices of the VA Medical Center this MOA expires on 03/31/2013. Payments are subject to the availability of VA appropriations. Payments are subject to the re-authorization of VA's Homeless Providers Grant and Per Diem program.

SECTION IV - CONDITIONS ON THE RECIPIENT'S RECEIPT OF PAYMENTS

Continued receipt of per diem payments is contingent upon the Recipient's compliance with all applicable requirements of the Homeless Providers Grant and Per Diem Program contained in 38 CFR § 61.0 through 61.82.

Transitional Living Services
Name of Per Diem Recipient Organization

ALAN BELCHER EXECUTIVE Director 5/3/12
Name of Responsible Officer (Please type or print) | Title | Signature | Date

Capt. James A. Lovell Federal Health Care Center
Name of VA Medical Center

PATRICK SULLIVAN DIRECTOR 5/14/12
Name of Responsible Officer (Please print or type) | Title | Signature | Date

Transitional Living Services

Annual Report

January 1, 2011 through December 31, 2011

The goals are increased residential stability (P. 17-18)

Desired %	Task being Measured	Actual %
100%	Residents will have a signed Rules and Regulations sheet on file in New Horizon's office	100%
100%	Job type team work will be required by 100% of residents participating in group work details with a minimum of 5 hours per week	100%
50%	Residents will live independently in 12 months from entering program with 100% living independently in 24 months	53%
100%	Residents will develop with case manager an individual care program within the first thirty days of enrollment	100%

As part of each resident's initial meeting with their case manager, they receive a copy of the Rules and Regulations and are asked to read and review it carefully. Once read, they review it with their case manager so that any and all questions or clarifications are addressed prior to signing. A copy of this document may be found in each individual file under "Contract." Additionally, within the first thirty days, each resident meets with their case manager to establish a case plan. This plan is developed with both the resident and their case manager's input with a copy files in the resident's file marked "Case Plan." The case plan identifies the goals and objectives that the resident works toward achieving. Progress toward each goal and objective is reviewed as part of the resident's weekly case management session with their case manager.

On a quarterly basis, the case plan is reviewed and any necessary changes are made at that time. On a weekly basis, every resident is required to collaborate with others in the therapeutic community to assist in maintaining the facility with daily chores. It is required that all completed chores are signed off by staff as well as the resident in order to ensure work was completed with quality effort.

The economy has lengthened the stay of TLS residents at the New Horizons facility. Uneasiness of economic security has contributed to uncertainty in the job market, so residents are cautious in their decision to move too quickly from the program. Stability of housing coupled with an onsite food pantry reduces the burden of satisfying basic needs and allows the residents to focus on employment stability. TLS is very proud of the successful and strategic elements of the program which directly affect the resident goal to re-establish independence.

The goals are increased skill level and/or income of participants. (19-26)

Desired Goal %	Task being Measured	Actual %
75%	Residents will complete financial counseling	75%
90%	Residents will attend self-enhancement groups held onsite	100%
90%	Residents who have substance abuse problems will attend treatment consistent with case plan	100%
33%	Residents without a high school diploma will complete a pre GED program	0%
90%	Residents who are unemployed will be referred to IDES for resume development and job linkage	100%
100%	Residents who are eligible for VA compensation, SSI or SSDI, Section 8 Housing and/or VAC compensation will make application	100%
75%	Residents who are computer illiterate will attend basic computer classes at MCC	0%
100%	Residents with identified personal hygiene issues will participate in individual counseling with their case manager	100%
50%	At least 50% of those residents who participate in job training will have a job within 6 months of completing their training	100%
75%	At least 75% of residents will obtain a job within 18 months	94%
50%	At least 50% of those residents who secure employment will continue to be employed 6 months after commencing the program	59%
75%	At least 75% of the residents will be able to improve personal finances within 6 months of commencing the program	88%
75%	At least 75% of the residents will be able to save 15% of their income within 3 months of obtaining a job	88%
50%	At least 50% of students who enter into a GED program will pass the test within 6 months	0%

As a result of the agency maintaining a number of case managers, the agency has continued to improve the attention that each resident receives in order to address their individual needs. Each case manager monitors and addresses financial issues on an individual basis during their weekly case management appointments. The goal is obtained by each resident working with their case manager to develop a budget to address current and past due bills. The concept of assessing living expenses and allocation of income to afford those expenses is inherent in this concept. TLS requires each resident to put thirty percent of their income, from all sources into a saving account and leave that money untouched while in the program. If there is an assessed need for credit counseling due to overwhelming debt, TLS

refers the resident to the local Veterans Assistance Commission (VAC) for a referral to Consumer Credit Counseling. TLS residents are fortunate to have the VAC pay for any fees associated with going to the CCCS.

TLS maintains a weekly mandatory Community Meeting as part of compliance to the program. The group meeting provides residents with an outlet to address issues within the community, express concerns and learn coping mechanisms to adapt to the changes in their life. Additionally, all residents who are determined to have a history with substance abuse are required to attend the onsite weekly relapse prevention group as well as individual sessions with the addictions counselor. Residents in recovery are required to attend a minimum of three outside AA or NA meetings and provide weekly documentation of these meetings, as is outlined in their individual case plans. TLS continues to require residents to attend a support group of their choosing on the weekend.

This past year, TLS did not have any residents that did not have their GED. All residents must have monthly contact with IDES and provide a referral documenting compliance with their expectations in order to remain compliant with TLS and the VAC. A VAC staff conducts an onsite visit to TLS once or twice a month to meet with residents and assist them with any claims they may be entitled to file for. For new incoming residents, their case managers assist them with applying or Section 8 housing and documentation of this may be found in their case file under "Housing."

TLS does not provide onsite computer classes due to the poor internet access available in our rural location. However, residents interested in improving their computer skills are encouraged and do attend computer classes and tutorials at IDES or MCC with transportation provided. The "Personal Care Group" is not being addressed in a group format due to the sensitive nature of this issue. It is addressed on an individual basis during case management appointments. Within an 18 month period of entering the program, 94% of the residents have obtained a job. In the cases where initial employment is on a temporary basis, the majority of those positions develop into either permanent or permanent temporary positions. TLS attributes that success to a very aggressive employment compliance program which requires active job seeking strategies coupled with a weekly requirement of maintaining a job log as proof of active job seeking. We also feel that the transportation provided by TLS to and from work eliminates an obstacle to maintaining employment continuity.

<u>The goal is greater self-determination of participants (P27-29)</u>

Desired Goal %	Task being Measured	Actual %
95%	Residents meet with case manager to make a case plan	100%
50%	Residents actively participate in case plan by making appointments, keeping appointments, making recommendations to case manager regarding their own case plan as monitored and recorded by staff	100%
25%	Residents demonstrate leadership skills by encouraging other residents participating in groups and individual treatment as recorded by staff	100%

40%	Residents will plan for their future by pursuing a job, job training, finding a job, participating in substance abuse treatment and/or mental health treatment as recorded by staff	100%
30%	Residents participate in social and leisure activities outside New Horizons such as participants in family activities, attend veterans' organizations meetings/activities, attend church as reported and recorded by staff	100%

Case plans are developed within the first thirty days coupled with an ongoing three month review after that. In between the 90-day review period, residents are meeting with their case manager on a weekly basis to review and stay on target with the goals and objectives they developed with their case managers and agreed to in the case plan. Residents make appointments with their case managers at the beginning of the week instead of a set schedule every week. It has been determined that the flexibility of signing up for a convenient time provides more on time attendance as the resident can schedule around other responsibilities of the program, work schedules, etc. This planning and scheduling element lends itself well to teaching important life skills as they move toward independence.

As outlined in the resident's case plan, they attend relapse prevention group if it applies, where they work on encouraging other residents and developing their leadership skills. In addition to attending IDES and MCC, TLS also has an employment specialist on staff that is available to assist residents in resume building, interviewing skills and job placement. Residents are encourage to attend outside social activities which are provided throughout the year in addition to holiday events, and invitations from local schools to honor the veteran residents with breakfast. On a more regular basis, many of our residents request overnight or weekend passes to spend time with family and friends.