

Lancaster Continuum of Care



# Homelessness Prevention and Rapid Re-Housing Program (HPRP) Guidelines

City of Lancaster  
Housing & Neighborhood Revitalization Department  
44933 Fern Avenue  
Lancaster, California 93534

## **HOMELESSNESS PREVENTION AND RAPID RE-HOUSING PROGRAM**

On February 17, 2009, President Obama signed the American Recovery and Reinvestment Act of 2009, which includes \$1.5 billion for a Homelessness Prevention Fund. Funding for this program, called the Homelessness Prevention and Rapid Re-Housing Program (HPRP), is being distributed based on the formula used for the Emergency Shelter Grants (ESG) program.

The Prevention and Rapid Re-Housing Program (“HPRP”) is designed to serve persons who are homeless or will be homeless but for the HPRP assistance. The intent of the City of Lancaster’s Homelessness Prevention and Rapid Re-housing Program (“Program”) is to provide housing stabilization by providing temporary financial assistance and/or services to individuals and families as a bridge to gain long-term stability.

The purpose of the grant is to provide prevention assistance to individuals and families who would otherwise become homeless and to provide assistance to rapidly re-house persons who are homeless and those at risk of becoming homeless. The funding is designed to serve as a short-term means for those in imminent danger of becoming homeless and for those individuals and families living in a shelter, on the street or in transitional housing. All funding will benefit individuals and families whose incomes are equal to or less than 50% of the area median income and who lack the financial resources and support networks needed to obtain immediate housing or remain in their existing housing.

The model that the City of Lancaster will use for organizing and delivering housing assistance will be based on the “Centralized, Single Function”. The Access Center will serve as the initial in-take and assessment. Individuals and families will transition from temporary residency while the City of Lancaster provides housing search and placement services. The Access Center will monitor and perform follow-up of the individuals and families in permanent housing to assure success of long-term stability.

The assistance that may be provided to those who are homeless or will be homeless but for the HPRP funds will be for payment of turning on utilities, moving costs, security deposits, storage fees, rent subsidies, and any other services permitted by HPRP. Rental assistance may be for a minimum of three to six months or at a maximum of twelve to fifteen months. All assistance to the individuals and families will be issued to a third party, such as utility companies, moving businesses, storage facilities, and landlords.

Eligible recipients will meet the following requirements:

- An income of 50% or less of the Los Angeles County Area Median Income
- No other housing options
- No financial resources or support networks to obtain or remain in housing
- A historical tie to the City of Lancaster
- No criminal history

Eligible activities are:

- Short and medium term rental assistance
- Security deposits
- Utility deposits
- Moving assistance
- Motel/hotel vouchers

Risk factors leading to eligible recipients participating will include:

- History of homelessness in the last twelve months
- Being a young (less than twenty five years old) head of household with children
- Leaving foster care without housing supports
- Pending foreclosure without resources sufficient to find new housing
- Recent major traumatic life event
- Sudden and significant loss of income
- Discharge from a hospital and/or mental institution in which the person has resided for more than 180 days
- Residing in housing that is condemned for being substandard

Housing Relocation and Stabilization Services

- Outreach and engagement
- Case management
- Legal services
- Housing search and placement
- Credit repair

Data Collection and Evaluation

- Costs related to data collection on HPRP clients in HMIS or comparable database, as appropriated
- Costs associated with participating in HUD's evaluation of HPRP

Administrative Costs

- Costs related to accounting of funds, audit, preparation of HUD reports, grant administration, and staff training on HPRP

Funding of the City's Homeless Prevention & Rapid Re-Housing Program comes from the U.S. Department of Housing and Urban Development's Emergency Shelter Grant (ESG) Homeless Prevention & Rapid Re-Housing Program pursuant to Title XII of the American Recovery and Reinvestment Act of 2009. \$564,646 is expected in revenues and will be used in eligible expenditures for the program.

The Program is intended to assist “Level 1” “No barriers/temporary crises”, however, it may include level 2, 3, or 4. These are individuals and families who have a good rental history, no evictions, no criminal history, and no active chemical dependency or abuse issues. These are individuals and/or families who are experiencing temporary financial or personal crises who generally have sufficient income to maintain housing but for the crises. This program is to assist individuals and families encountering housing crises due primarily to the current national economic crises.

The Program is intended for individuals or families who become homeless after experiencing a personal crisis. These will be individuals or families who typically do not have a support network on which to rely and, therefore, have difficulty maintaining housing through the crisis. Common causes include job loss, foreclosure, a healthcare emergency, divorce, domestic abuse, fire or a natural disaster. These individuals are referred to as “situational” or “temporarily” homeless, which generally means that their state of being without a home is temporary and can be resolved as a specific situation.

The City will provide housing search assistance and the Access Center will provide follow-up services to clients. The success of a housing search program depends not only on its ability to place clients in appropriate housing, but also on its ability to provide clients with adequate support so they can maintain that housing.

The City will provide participants with tools and guidance on how to be good tenants before they are placed in permanent housing, your organization can greatly increase the likelihood that your clients will retain their housing for the long term.

## **THE CLIENT INTAKE PROCESS**

Each community uses its own unique approach to delivering services to homeless families and individuals. Homeless service systems vary in how people enter the system, move through it, and access services. At the system level, the approach to client entry will fall into one of three categories: a single point of entry, streamlined entry (i.e. a limited number of entry points), or an "open door" approach (i.e. clients can enter the system through any agency). At the agency level, the approach to client intake will vary depending on how clients enter the system. If a community has an "open door" policy, client intake may be done by several different agencies. In contrast, if there is a single point of entry or streamlined entry, client intake may be done by one central agency or just a handful of agencies, which then refer clients to the programs and services most suited to the client's needs.

The City's approach to the Program is "single point of entry." All potential clients will start the "Intake Process" at the Access Center. The Access Center will be responsible for client intake which will significantly reduce the burden placed on clients and create a more open, communicative relationship between agencies serving the same clientele.

The Access Center uses an open door model and provides services to anyone who walks in off the street. Ensuring that our clients are "housing-ready" (i.e. have the ability to pay for and maintain housing) is critical to maintaining your organization's reputation. As a result, The City will have to have a thorough understanding of a client's history and barriers to determine whether he/she can be placed in private market housing or needs to be referred to a different type of program.

## **HOUSING SEARCH CASE MANAGEMENT SERVICES**

Once a client has been deemed "housing ready," a case manager and City staff may conduct a housing assessment to gather information from clients about their past and current living situations. Understanding the problems a client has experienced in the past is essential to getting and keeping clients housed in the future. Once the case manager and City staff understands the issues that led to a client's homelessness, he or she should work with the client to develop a plan to address those issues. City staff providing housing search assistance will often need to help clients with issues related to budgeting and planning, repairing credit or rental histories, and understanding the rules and responsibilities related to renting an apartment.

## **HOUSING ASSESSMENT**

Housing Assessment is designed to collect information from clients regarding their past and current living situations in order to identify and address barriers to housing stability. Understanding a client's housing history is essential to the short-and long-term success of the housing search and placement process.

In the short-term, successful placements may depend on positive references from previous landlords as well as the client's ability to address housing history problems. For example, few

landlords will rent to an individual with prior evictions unless a client can prove that he/she has addressed the problems that led to the evictions. In some instances, it may simply be a matter of teaching a client about his or her rights and responsibilities as a tenant. In other instances, it may involve helping a client develop a plan to pay-off debt and repair his or her credit history. In other words, a housing advocate must understand a client's history in order to prevent history from repeating itself. The Housing Assessment provides the basis for gathering the information a housing advocate needs to assist a client. Based on the information gathered during intake and assessment, a housing advocate should then work closely with a client to develop a service plan that addresses the client's barriers.

As most housing advocates know, however, getting clients into housing is only half of the battle. The long-term success of housing placement depends on placing clients in appropriate housing and providing them with adequate support so that they can maintain their housing. As a result, the Housing Assessment also allows housing advocates to gather information on client needs and preferences in order to make the most appropriate placements possible.

The Housing Assessment is not designed to be a comprehensive intake form; for example, it does not include questions related to health, mental health, or substance abuse. It is assumed that clients will have gone through an extensive intake and assessment process, and will only be referred to a housing search program if deemed "housing ready" (i.e., ready for private-market housing). It is possible that much of this information will have been collected as part of the original intake process. However, some case managers -particularly those from the health and social services fields -are less familiar with housing issues and what it takes to be "housing ready." This means that although clients being referred to a housing search program may not have serious substance abuse or mental health problems, housing advocates will likely have to address other types of issues, such as developing a household budget, repairing credit and rental histories, and teaching clients about their rights and responsibilities as a tenant. As a result, housing advocates can use this form to guide their discussion with clients to ensure that they fully understand a client's barriers and need for services.

**HOMELESS SOLUTIONS INTAKE FORM**

**PLEASE PRINT. ALL INFORMATION WILL BE KEPT CONFIDENTIAL**

HSAC# \_\_\_\_\_ Referred by: \_\_\_\_\_  New  Update Date: \_\_\_\_\_

Name: \_\_\_\_\_  Male  Female Social Security #: \_\_\_\_\_

Address: \_\_\_\_\_

Automobile: Year: \_\_\_\_\_ Make: \_\_\_\_\_ Model: \_\_\_\_\_ License #: \_\_\_\_\_

Telephone: \_\_\_\_-\_\_\_\_-\_\_\_\_\_ CDL or ID #: \_\_\_\_\_ Last Grade Completed: \_\_\_\_\_

Date of Birth: \_\_\_\_-\_\_\_\_-\_\_\_\_ Age: \_\_\_\_\_ State of Birth: \_\_\_\_\_

Ethnicity: Hispanic or Latino  Yes / No

Race:  American Indian or Alaskan Native  Asian  African American  Caucasian

Native Hawaiian or Pacific Islander

Marital Status:  Single  Co-Habit  Married  Divorced  Widowed  Separated

Emergency contact (please give name, relationship, and telephone #): \_\_\_\_\_

**Please list the following information for other members of your household, including children, spouse, etc.**

Name	Relationship	Age	Custody

Are you currently on Parole or Probation?  Yes / No  Have you been on Parole or Probation in the past?

Yes / No  Parole Officer's Name: \_\_\_\_\_ CDC#: \_\_\_\_\_

Parole release date: \_\_\_\_\_

Arrest/Legal History: \_\_\_\_\_

Do you have any current legal issues or concerns?  Yes / No  If yes, please explain briefly: \_\_\_\_\_

Have you or anyone in your household served in the military?  Yes / No  If yes, date entered: \_\_\_\_\_

Date discharged: \_\_\_\_\_

What is your monthly income? \$\_\_\_\_\_ How much cash in pocket or on hand do you have? \$\_\_\_\_\_

Source of income:\_\_\_\_\_

If you are on SSI or SSD, what is your disability?\_\_\_\_\_

Are you homeless or near being homeless?  Yes / No  If homeless, how long have you been homeless?\_\_\_\_\_

Where did you stay last night?\_\_\_\_\_

What is your current living situation?  Non-housing (park, street, car, bus station, etc.)  Emergency Shelter

Hospital  Transitional Housing  Psychiatric Facility  Substance Abuse Treatment Facility

Jail/Prison Released Date:\_\_\_\_\_  Domestic Violence Shelter

Living with Friends or Relatives  Rental Housing

What has led to your current living situation (Be specific):\_\_\_\_\_

Proof of Residency in the Antelope Valley:  DL/ I.D.  Eviction Notice  Agency Referral  Utility Bill

Other\_\_\_\_\_

If in the Antelope Valley less than 45 days, list the last city and state in which you received services:\_\_\_\_\_

Have you or anyone in your household/family currently or in the past been treated for a mental illness?  Yes / No

If yes, please explain:\_\_\_\_\_

Are you or is anyone in your household/family currently taking medication/s for a mental illness?  Yes / No

If yes, please list the name of the person and the name of the medication:\_\_\_\_\_

Are you currently experiencing any of the following:

Trouble Sleeping  Anxiety which Hinders Functioning  Feelings of Hopelessness  Lack of Appetite

Lethargy  Hearing voices that others do not seem to hear  Seeing things that others do not seem to see

Memory Problems  Feelings that you are being followed or watched  Problems in Communicating with

others  Other:\_\_\_\_\_

Do you currently feel like hurting yourself or someone else?  Yes / No  If yes, please explain:\_\_\_\_\_

Do you or a family member have a developmental disability?  Yes / No  If yes, please explain:\_\_\_\_\_

Please list and explain any on-going or current medical conditions or concerns: \_\_\_\_\_  
\_\_\_\_\_

Are you or anyone in your house taking any form of medication other than for a mental illness?  Yes / No

If yes, please list the medication, reason and dosage: \_\_\_\_\_  
\_\_\_\_\_

When was your last use of alcohol or drugs (If not applicable go on to the next section)? \_\_\_\_\_

What did you consume? \_\_\_\_\_ How often? \_\_\_\_\_

Have you ever spent time in a drug or alcohol rehabilitation center?  Yes / No

If yes, please explain: \_\_\_\_\_  
\_\_\_\_\_

Have you or anyone in your household in the past or is currently a victim of domestic violence or elderly abuse? ?

Yes / No  If yes, please explain: \_\_\_\_\_  
\_\_\_\_\_

Are you interested in any of the following services?

- Educational or GED Services  Employment Information/Training  Domestic Violence Services   
Health Van Services  Substance Abuse Counseling/Information  Mental Health Services  Social  
Security/General Relief  Housing  Transportation

Circle one: Local or Out of State If out of state, what is the destination? \_\_\_\_\_

What agency/s have you worked with in the past:  Department of Mental Health  Domestic Violence

Council  Employment Development Department  DPSS What Program? \_\_\_\_\_

Grace Resource Center  Independent Living Center  Lancaster Community Shelter  Mental Health

Association  Salvation Army  S.A.V.E.S  Social Security  St. Vincent de Paul  Tarzana Treatment

Center  Veteran's Administration  Other: \_\_\_\_\_

You must supply two forms of identification. One must be a picture ID and the other a social security card. Please be advised that for certain agency referrals you may be requested to supply a birth certificate.

ID provided:  Driver's License  Birth Certificate  Social Security Card  California ID (if no DL)

I hereby give permission for myself, my child, and/or any minors under my legal care, to receive services including assessment, examinations, referrals, and to obtain or release any information as deemed necessary by the Homeless Solutions Access Center for my progress and/or matters of safety in the program during my initial visit, and all subsequent visits to the Homeless Solutions Access Center.

This program is funded through a HUD grant and is subject to audit by the Los Angeles Homeless Services Authority for quality control purposes only. Case managers within Homeless Solutions Access Center may also have access to this file in order to provide further services for the client in the event his/her case manager is not available. Files will not be otherwise used for commercial purposes in order to maintain the confidentiality of the client.

In order to ensure confidentiality of information including test results, I understand and agree that the Homeless Solutions Access Center requires picture identification verifying my name and my Social Security number. If I am unable to present identification, I understand services WILL NOT be denied. However, if my identity cannot be verified using these means of identification, I will not be able to obtain charted information including test results at a later date. To obtain copies of my chart or specific test results, **I understand I must present a picture I.D.** I certify that the information in this record is true and correct. Any information that I provide to case managers, physicians, nurses, and other agency personnel during my visit may become part of my chart as deemed necessary for my case management. I also understand that this information is confidential and will only be released to another individual or institution with my consent complete with my signature, or a court order. This information is required for statistical reasons only and no one will be denied services based on his/her answers.

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Guardian's name if applicable – printed)

\_\_\_\_\_  
(Signature of Guardian)

\_\_\_\_\_  
(Date)

CONSENT TO RELEASE/SHARE INFORMATION

I, \_\_\_\_\_; hereby authorize staff and/or volunteer staff of the following agencies:

\_\_\_\_\_ Agency's Council for Emergency Services

\_\_\_\_\_ Valley Oasis (AVDVC)

\_\_\_\_\_ Grace Resource Center

\_\_\_\_\_ Lancaster Community Shelter

\_\_\_\_\_ Los Angeles Co. Dept. of Military and Veteran's Affairs

\_\_\_\_\_ Los Angeles Homeless Services Authority/HUD/HMIS (Homeless Management Information Services)

\_\_\_\_\_ LAC Dept. of Public Social Services

\_\_\_\_\_ National Mental Health Association

\_\_\_\_\_ Salvation Army

\_\_\_\_\_ Social Security Administration (Non-Medical Related Information)

\_\_\_\_\_ South AV Emergency Services (S.A.V.E.S.)

\_\_\_\_\_ Tarzana Treatment Center (Non-Medical Related Information)

\_\_\_\_\_ Parole/Probation: County \_\_\_\_\_ State: \_\_\_\_\_

\_\_\_\_\_ Contact Number: \_\_\_\_\_

\_\_\_\_\_ One Stop Career Center

\_\_\_\_\_ Travel Verification Contact (include telephone #) \_\_\_\_\_

\_\_\_\_\_ Emergency Contact (include telephone#): \_\_\_\_\_

\_\_\_\_\_ Healthy Homes/Antelope Valley Hospital

\_\_\_\_\_ Saint Josephs Manor

\_\_\_\_\_ AV Partners for Health

\_\_\_\_\_ Other: \_\_\_\_\_

To release, receive, and share information regarding services I have received, including my drug and alcohol history and/or treatment, or my physical, financial and/or mental condition with **Homeless Solutions Access Center- 45134 N. Sierra Highway, Lancaster, CA 93534**, for the express purpose of coordination and providing services to meet my current or future needs. This release is limited to the information specified below:

\_\_\_ Case Management and Advocacy

\_\_\_ Domestic Violence information

\_\_\_ Drug or Alcohol related information

\_\_\_ Intake/Discharge information

I understand that I may revoke this authorization at any time except to the extent that action has been taken. Unless earlier revoked, this consent will terminate on: \_\_\_\_\_

_____ Signature: Client	_____ Date	_____ HSAC#
_____ Access Center Representative	_____ Date	_____ Conservator (if Applicable)

I hereby revoke my consent to release information to the above parties.

_____ Signature: Client	_____ Date	_____ Conservator (if Applicable)
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**Copy of release accepted by client?  Yes/No**



**Chronically Homeless Person Criteria:**

HUD defines a chronically homeless person as “an unaccompanied homeless individual with a disabling condition who has either been continuously homeless for a year or more OR has had at least four (4) episodes of homelessness in the past three (3) years.” To be considered chronically homeless a person must have been on the streets or in an emergency shelter (i.e. not transitional housing) during these stays.

Client is Chronically Homeless:  Yes  No

- RESOURCES PROVIDED:**  Pocket Resource Guide  Available Housing List  
 Meals List  Employment Opportunities List  Section-8 Contact Numbers  
 Telephone Use  Showers  Mail Services  Bus Tickets  Transportation

ADDITIONAL SERVICES PROVIDED: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

RED FLAGS OR CONCERNS: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

ADDITIONAL CONCERNS TO DISCUSS WITH CLIENT: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Staff Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**INDIVIDUAL SERVICE PLAN**

**Date:** \_\_\_\_\_ **Client HSAC#** \_\_\_\_\_ **Client Name:** \_\_\_\_\_

**Goal 1)** \_\_\_\_\_

**Goal to be Achieved by:** \_\_\_\_\_

**Goal Achieved:** Yes  /  No If No: **Goal Revised:** Yes  /  No **State Goal Revisions:** \_\_\_\_\_

**Date Revision of Goal to be Accomplished by:** \_\_\_\_\_

**Goal Not Accomplished:**  Client Refuses to Comply  Client Unable to Comply

**Please State Reason for Noncompliance:** \_\_\_\_\_

**Goal 2)** \_\_\_\_\_

**Goal to be Achieved by:** \_\_\_\_\_

**Goal Achieved:** Yes  /  No If No: **Goal Revised:** Yes  /  No **State Goal Revisions:** \_\_\_\_\_

**Date Revision of Goal to be Accomplished by:** \_\_\_\_\_

**Goal Not Accomplished:**  Client Refuses to Comply  Client Unable to Comply

**Please State Reason for Noncompliance:** \_\_\_\_\_

**Client Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Staff Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Copy provided to client:**  Yes/  No

**Statement of Homelessness**

I hereby certify that \_\_\_\_\_ is homeless and living in one of the following situations:

(Circle One)

- 1. Living on the street in a car, or in any place not meant for human habitation.
- 2. Living in an emergency shelter. Referral Provided By: \_\_\_\_\_, Date \_\_\_\_/\_\_\_\_/\_\_\_\_  
Name: \_\_\_\_\_ Contact Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_
- 3. Living in transitional housing. Referral Provided By: \_\_\_\_\_, Date \_\_\_\_/\_\_\_\_/\_\_\_\_  
Name: \_\_\_\_\_ Contact Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_
- 4. I am currently being evicted from a dwelling, hospital or other institution. Further I must leave in one week, and lack resources and a support network. No subsequent residence has been identified.

Eviction Notice, Notice to Vacate, or letter of “Unlawful Detainer”, Statement of Eviction by Family Member or Friend (must supply name, contact number and reason for being evicted)

Provided Date \_\_\_\_/\_\_\_\_/\_\_\_\_

What efforts have been made to obtain housing by the client: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Why, without HSAC assistance would you be living on the street or in emergency shelter: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

- 5. If coming from an institution: referral provided with verification that person has been residing in the institution for less than 31 days and has supplied a letter of the client’s previous living situation. Referral Provided By: \_\_\_\_\_, Date \_\_\_\_/\_\_\_\_/\_\_\_\_ Name: \_\_\_\_\_  
Contact Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

- 6. If longer than 31 days the institution has supplied: Letter stating the client was discharged a maximum of one week before receiving homeless assistance. Client must also supply documentation of income and:

What efforts have been made to obtain housing by the client: \_\_\_\_\_  
\_\_\_\_\_

Why, without HSAC assistance would you be living on the street or in emergency shelter:\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

The letter must be signed and dated. Received date:\_\_\_\_\_

\*If no third party verification of homelessness is available (eviction notice, statement from the evicting entity, or referral from an agency) what steps were taken by the case-manager to verify homelessness for this individual?  Agency contacted:\_\_\_\_\_

Telephone #\_\_\_\_\_ Individual Contact Name:\_\_\_\_\_

Date Contacted:\_\_\_\_\_

Client was assisted by this agency (give approximate dates, reason for services, and reason client no longer receives assistance by the agency):\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Other contacts made to verify homelessness:\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Cause of homelessness:\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Client currently resides:\_\_\_\_\_

\_\_\_\_\_

Client Name:\_\_\_\_\_ Date:\_\_\_\_\_

Client Signature:\_\_\_\_\_

Staff Signature:\_\_\_\_\_

**SATISFACTION SURVEY**

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Did you receive assistance that you needed?  Yes  No If no, please explain: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

How can we improve assistance? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Were you treated with courtesy while receiving services?  Yes  No If no, please explain:

\_\_\_\_\_  
\_\_\_\_\_

What areas of the program do you think are especially helpful? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

What areas of the program do you think need improvement? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Overall Satisfaction with the Program:  Highly Satisfied  Satisfied

Not Sufficient Time In Program to Comment  Not Satisfied  Highly Unsatisfied

Comments: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Client Signature: \_\_\_\_\_

**INTERAGENCY SHARING FORM**

**Standard Client Authorization**

Name of Agency: \_\_\_\_\_

Client's Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Social Security Number (optional): \_\_\_\_\_

The Homelessness Prevention and Rapid Re-Housing Program is a shared homeless and housing management information system. The HPRP is administered by the City of Lancaster to help improve homeless and housing services. The City of Lancaster does this by allowing authorized personnel at City of Lancaster and Access Center to share client information needed for service delivery, to use an online directory of community services, and to track demographic trends and service patterns. The City of Lancaster and Access Center operates over the Internet and uses many security protections to help ensure the confidentiality of your records.

I understand that all information gathered about me is personal and private and that I do not have to participate in the HPRP. I have had an opportunity to ask questions about the HPRP and to review the basic identifying information this release authorizes the City of Lancaster and Access Center to share. I also understand that information about non-confidential services provided to me by the City of Lancaster and the Access Center may be shared with other Agencies. Unless I make a formal request to the City of Lancaster and/or the Access Center that I no longer want to participate in the HPRP, this release will remain in force for 3 years from today and will expire on (d/m/y).

I authorize \_\_\_\_\_ as a City of Lancaster and Access Center staff member, to share my basic identifying information and non-confidential service information with other Clearinghouse Member Agencies. I authorize that a copy of this original will serve as an original for the purposes stated above.

Client's Authorizing Signature: \_\_\_\_\_ Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Based on the above information, I authorize basic identifying information and non-confidential service transactions of my dependent(s) to be shared with the other Agencies.

Legal Guardians Authorized Signature:

Legal Guardian's Printed Name:

\_\_\_\_\_

\_\_\_\_\_

The original copy of this Client Authorization for Release form should be kept on file at the Agency. Upon a form's expiration date, the file should be kept for five years.

Name of Dependents that the Legal Guardian Authorizes to Participate in the HPRP:

Name: \_\_\_\_\_ DOB: \_\_\_\_\_

Name: \_\_\_\_\_ DOB: \_\_\_\_\_

Name: \_\_\_\_\_ DOB: \_\_\_\_\_

Name: \_\_\_\_\_ DOB: \_\_\_\_\_

Agencies Representative's Signature \_\_\_\_\_ Date: \_\_\_\_\_

Agencies Representative's Printed Name: \_\_\_\_\_ Date: \_\_\_\_\_

Description for Informed Decision:  Verbal  
 Interpreter  
 Written

Basic Identifying information this release authorizes to be exchanged among HPRP Member

Agencies:

- Date and Time of the Intake into the Clearinghouse System
- Permission for Information Release
- First Name
- Middle Name
- Last Name
- Alias
- Social Security #
- Driver's License/ID
- US Citizen Status
- Immigration Status
- Registered to Vote
- Address
- Home Telephone
- Work Telephone

- Emergency Contact & Telephone #
- Date of Birth
- City and State of Birth
- Marital Status
- Primary Language
- Sex
- Race

Other Notes and Comments (CANNOT include information such as TB diagnosis, drug and alcohol information, mental health information, etc.)

This release also authorizes Clearinghouse Member Agencies to share relevant, non-confidential information about services provided with other Clearinghouse Agencies, such as:

- Shelter stays
- Food
- Clothing
- Transportation
- Employment
- Housing
- Child Care
- TB Clearance Status
- Utility Assistance

Authorizing Person's Initial's: \_\_\_\_\_ Date: \_\_\_\_\_

## BARRIERS TO HOUSING STABILITY ASSESSMENT

### TENANT SCREENING BARRIERS *(prior to entering program or since last assessment)*

**TENANT SCREENING BARRIERS** *(Check one)*

- Barriers *(complete below)*
                 
  No Barriers *(skip to next section)*
                 
  Barriers not assessed *(skip to next section)*

**1A. RENTAL HISTORY/ISSUES**

**Number of evictions or unlawful detainers** *(Check one)*

- |                                   |                                  |                                     |                                     |  |                          |
|-----------------------------------|----------------------------------|-------------------------------------|-------------------------------------|--|--------------------------|
| <input type="checkbox"/>          | <input type="checkbox"/>         | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>                   | <input type="checkbox"/> |
| 0 evictions<br>unlawful detainers | 1 eviction<br>unlawful detainers | 2-3 evictions<br>unlawful detainers | 4-9 evictions<br>unlawful detainers | 10 or more evictions<br>unlawful detainers | Not assessed             |

**Number of eviction notices for unpaid rent or other lease non-compliance** *(Check one)*

- |                          |                          |                          |                          |                               |                          |
|--------------------------|--------------------------|--------------------------|--------------------------|-------------------------------|--------------------------|
| <input type="checkbox"/>      | <input type="checkbox"/> |
| 0 eviction notices       | 1 eviction notice        | 2-3 eviction notices     | 4-5 eviction notices     | 5 or more eviction<br>notices | Not assessed             |

**Poor reference from current/prior landlords** *(Check one)*

- Yes
                 
  No
                 
  Not assessed

**Lack of rental history** *(Check one)*

- Yes
                 
  No
                 
  Not assessed

**1B. CREDIT HISTORY/ISSUES**

**Unpaid utility bills** *(Check one)*

- |                          |                          |                             |                             |                                   |                          |
|--------------------------|--------------------------|-----------------------------|-----------------------------|-----------------------------------|--------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>    | <input type="checkbox"/>    | <input type="checkbox"/>          | <input type="checkbox"/> |
| No unpaid utility bills  | 1 unpaid<br>utility bill | 2-3 unpaid<br>utility bills | 4-5 unpaid<br>utility bills | 5 or more unpaid<br>utility bills | Not assessed             |

**Lack of credit history**

- Yes
                 
  No
                 
  Not assessed

**1C. CRIMINAL HISTORY**

**One or more misdemeanors**

- Yes
                 
  No
                 
  Not assessed

**Critical felony (sex crime, arson, drugs, violence)**

- Yes
                 
  No
                 
  Not assessed

**Other felony**

- Yes
                 
  No
                 
  Not assessed

**ASSESSMENT 1: ABILITY TO OBTAIN/MAINTAIN HOUSING IN THE COMMUNITY**

**Impact of tenant screening barriers on housing** *(Check one)*

- No Effect
                 
  Minimal Effect
                 
  Moderate Effect
                 
  Major Effect
                 
  Not Assessed

**2. PERSONAL BARRIERS (prior to entering program or since last assessment)**

**PERSONAL BARRIERS (Check one)**

- Barriers (complete below)       No Barriers (skip to next section)       Barriers not assessed (skip to next section)

**2A. CHEMICAL HEALTH**

**Chemical use has resulted in housing loss**

- Yes       No       Not assessed

**Chemical use currently affects ability to obtain/maintain housing**

- Yes       No       Not assessed

**2B. MENTAL HEALTH**

**Mental health has resulted in housing loss**

- Yes       No       Not assessed

**Mental health currently affects ability to obtain/maintain housing**

- Yes       No       Not assessed

**2C. DOMESTIC VIOLENCE/ABUSE**

**Domestic violence/abuse resulted In housing loss**

- Yes       No       Not assessed

**Domestic violence/abuse currently affects ability to obtain/maintain housing**

- Yes       No       Not assessed

**ASSESSMENT 2: ABILITY TO OBTAIN/MAINTAIN HOUSING IN YOUR COMMUNITY**

**Impact of client's personal barriers on housing (Check one)**

- No Effect       Minimal Effect       Moderate Effect       Major Effect       Not assessed

**3. INCOME BARRIERS (prior to entering program or since last assessment)**

**INCOME BARRIERS (Check one)**

- Barriers (complete below)       No Barriers (skip to next section)       Barriers not assessed (skip to next section)

**3A. INCOME**

**Needs/needed temporary financial assistance to obtain/maintain housing**

- Yes       No       Not assessed

**If housed: percent of income spent on housing (rent and utilities)**

- 35% or less     36% to 50 %     51% to 65%     66% to 80%     > 80%     Not assessed

**3B. If not housed: amount able to spend on housing-\$ (check one)**

- 0       1-100       101-151       151-201       201-250       251-300       301-350  
 351-400     401-500     501-600     601-700     701-800     801 or more     Not assessed

**3C. OTHER INCOME - RELATED**

**Lacks ongoing, permanent housing subsidy (e.g. Section 8)**

- Yes       No       Not assessed

**Lacks steady, full time employment**

- Yes       No       Not assessed

**Lacks high school diploma or GED**

- Yes       No       Not assessed

**Job barrier: limited English proficiency**

- Yes       No       Not assessed

**Job barrier: lack of reliable transportation**

- Yes       No       Not assessed

**Job barrier: lack of reliable/affordable child care**

- Yes       No       Not assessed

**ASSESSMENT 3: ABILITY TO OBTAIN/MAINTAIN HOUSING IN YOUR COMMUNITY**

**Impact of client's personal barriers on housing (Check one)**

- No Effect       Minimal Effect     Moderate Effect     Major Effect     Not Assessed

**OVERALL BARRIER ASSESSMENT**

**OVERALL BARRIER LEVEL (Optional)**

- Level 1: Zero to minimal barriers - able to obtain/maintain housing with no or minimal support
- Level 2: Moderate barriers - able to obtain/maintain housing with moderate one-time or brief transitional support
- Level 3: Serious barriers - able to maintain housing with significant, intensive transitional supports
- Level 4: Long-term barriers - able to obtain/maintain housing with significant, intensive transitional or ongoing supports
- Level 5: Severe barriers - able to obtain/maintain housing with significant, intensive and ongoing supports

<b>SERVICES RECEIVED BY FAMILY (only complete at 6 month, 12 month and exit assessment):</b>	
<i>Services provided by FHC Long- Term program for this family: (Check all that apply)</i>	<i>Community based resources/services used by this family: (Check all that apply)</i>
<input type="checkbox"/> Housing search and/or placement assistance	<input type="checkbox"/> Mental health <i>and/or</i> substance abuse treatment
<input type="checkbox"/> Case management (assessment, goal setting, etc.)	<input type="checkbox"/> Physical health
<input type="checkbox"/> Budgeting assistance/instruction	<input type="checkbox"/> Basic needs (food, clothing, furniture, etc.)
<input type="checkbox"/> Housekeeping assistance/instruction	<input type="checkbox"/> Emergency financial needs (e.g. rent, utilities, other)
<input type="checkbox"/> Mediation with landlord to address lease compliance concern	<input type="checkbox"/> Daycare
<input type="checkbox"/> Help with developing other life skills (e.g. time management, stress management)	<input type="checkbox"/> Transportation
<input type="checkbox"/> Access to FHC direct client assistance for emergency financial need (e.g. rent, utilities, other)	<input type="checkbox"/> Legal assistance
<input type="checkbox"/> Help with transportation (bus tickets, ride to appointment, etc.)	<input type="checkbox"/> Landlord mediation assistance to obtain or maintain housing
<input type="checkbox"/> Help with finding/keeping employment	<input type="checkbox"/> Employment
<input type="checkbox"/> Help with educational goal attainment, goal setting	<input type="checkbox"/> Education/training/GED
<input type="checkbox"/> Assistance accessing one or more of the following community Resources/services (through information, referral and/or advocacy):	<input type="checkbox"/> Other (specify):
<input type="checkbox"/> Mental health <i>and/or</i> substance abuse treatment	<input type="checkbox"/> Other (specify):
<input type="checkbox"/> Physical health	<input type="checkbox"/> Other (specify):
<input type="checkbox"/> Basic needs (food, clothing, furniture, etc.)	<input type="checkbox"/> Other (specify):
<input type="checkbox"/> Emergency financial needs (e.g. rent, utilities, other)	
<input type="checkbox"/> Daycare	
<input type="checkbox"/> Transportation	
<input type="checkbox"/> Legal assistance	
<input type="checkbox"/> Landlord mediation assistance to obtain or maintain housing	
<input type="checkbox"/> Employment	
<input type="checkbox"/> Education/training/GED	
<input type="checkbox"/> Other (specify):	<b>FHC CASE MANAGEMENT SERVICES</b>
<input type="checkbox"/> Other (specify):	<i>Case management assistance since last assessment:</i>
<input type="checkbox"/> Other FHC Services (specify):	Number of home/office visits with family:
<input type="checkbox"/> Other FHC Services (specify):	Average duration of visit (in minutes):

## Participant Eligibility Worksheet

Project Name: \_\_\_\_\_

Participant Name: \_\_\_\_\_ Date of Intake: \_\_\_\_\_

Type of Homeless Documentation (Check the appropriate type of documentation used to verify homelessness and attach it to this worksheet. Maintain these forms in each participant file.)

Homeless Status	Type of Documentation	Documentation Attached
Persons living on the street.	A signed and dated general certification from an outreach worker verifying that the services are going to homeless persons and indicates where the persons served reside.	
Persons coming from living on the street (and into a place meant for human habitation)	Staff should provide written information obtained from third party regarding the participant's whereabouts , and then sign and date the statement.	
Persons coming from an emergency shelter for homeless persons	Written referral from the agency.	
Persons coming from transitional housing for homeless persons	Written verifications to include program residency and homeless status prior to program .	
Persons being evicted from a private dwelling	Documentation of income, efforts to obtain housing, why participant would be on the street , and either documentation of formal eviction proceedings or statement from family evicting participant.	
Persons from a short-term stay in an institution who previously resided on the street or in an emergency shelter	Written verification from the institution's staff that the participant has been residing in the institution for less than 31 days; and information on the previous living situation.	
Persons being discharged from a longer stay in an institution	Written verification from the institution discharge within one week of receiving homeless assistance AND documentation of income, efforts to obtain housing, and why person would be homeless without assistance.	
Persons fleeing domestic violence	Written, signed, and dated from the participant.	

## PARTICIPANT ELIGIBILITY GUIDE

Who is your organization serving?	Then you need to...	This means...
Persons living on the street	Certify that the persons served reside on the street.	For projects providing services--such as outreach, food, health care, clothing,--to persons who reside on the streets (but not in shelters or service worker needs to sign and date a general certification that: 1) verifies that the services are going to homeless persons, and 2) indicate where the persons served reside.
Persons coming from living on the street (and into a place meant for human habitation)	Obtain information to indicate that the participant is coming from the street.	<p>You must verify that an individual is coming from the street through:</p> <ul style="list-style-type: none"> <li>• Organizations or outreach workers who have assisted him/her in the past.</li> <li>• Determining where the resident receives assistance checks, if applicable, and/or</li> <li>• Other information regarding the participant's recent past activities.</li> </ul> <p>Document your verification efforts! Your staff should prepare a statement , that is then signed and dated.</p> <p>As a last resort, if you are unable to verify in this manner that the person is coming from living on the streets, the participant or staff member may prepare a short written statement about the participant's previous living place and have the participant sign the statement and date it.</p>
Persons coming from an emergency shelter	Verify from the emergency shelter staff that the participant has been residing at the emergency shelter.	You need to obtain from the referring agency a written, signed, and dated verification that the individual has been a resident of the emergency shelter.
Persons coming from transitional housing for homeless persons	Verify with transitional housing staff that: <ul style="list-style-type: none"> <li>• the participant has been residing at the transitional housing; and</li> <li>• the participant was living on the streets or in an emergency shelter prior to living in the transitional housing.</li> </ul>	<p>You must obtain from the referring agency two written, signed, and dated verifications:</p> <ol style="list-style-type: none"> <li>1) a signed statement from the transitional housing staff indicating that the individual had been a resident there; and</li> <li>2) the referring agency's written, signed, and dated verification as to the individual's homeless status when he/she entered their program.</li> </ol> <p>If the referring agency did not verify the individual's homeless status upon entry into their program, you will need to verify that status yourself. That is, in addition to the written, signed, and dated verification from the referring agency that the individual has been residing in the transitional housing and document the status upon entry into transitional housing and document that status according to the instructions here. (For example, if the person was living on the streets before moving</p>

		into the transitional housing, you will need to obtain the documentation required.)
Persons being evicted from a private dwelling	Have evidence of the eviction proceedings.	<p>You need to obtain two types of information:</p> <p>1) Documentation of:</p> <ul style="list-style-type: none"> <li>• the income of the participant;</li> <li>• what efforts were made to obtain housing; and</li> <li>• why without the homeless assistance , the participant would be living on the street or in an emergency shelter.</li> </ul> <p>2) Documentation on one of the following:</p> <ul style="list-style-type: none"> <li>• For formal eviction proceedings, evidence that he participant was being evicted within the week before receiving homeless assistance;</li> <li>• Where a participant’s family is evicting, a signed and dated statement from a family member describing the reasons for eviction;</li> <li>• Where there is no formal eviction process,(in these cases, persons are considered evicted when they are forced out of the dwelling unit by circumstances beyond their control), two things are needed: <ul style="list-style-type: none"> <li>-a signed and dated statement from the participant describing the situation; and</li> <li>-documentation and verification (through written, signed, and dated statements) of efforts to confirm that these circumstances are true.</li> </ul> </li> </ul>
Persons from a short –term stay (up to 30 consecutive days) in an institution who previously resided on the street or in an emergency shelter	Verify from the institution staff that the participant has been residing at the institution and was homeless before entering the institution.	<p>You must obtain:</p> <p>1) written verification from the institution’s staff that the participant has been residing in the institution for less than 31 days, and</p> <p>2) information on the previous living situation. Preferably, this will be the institution’s written, signed, and dated verification on the individual’s homeless status when he/she entered the institution for less than 31 days; and</p> <p>2) information on the previous living situation. Preferably, this will be the institution’s written, signed, and dated verification on the individual’s homeless status upon entry into the institution, you will need to verify that yourself , according to the instructions above (i.e., if the person was living on the streets before moving into the institution, you will need to obtain the documentation required under the “Persons coming from living on the street”)</p>

Persons being discharged from a longer stay in an institution	Verify from the institution staff that the participant has been residing at the institution and will be homeless if not provided with assistance.	You need to obtain signed and dated: 1) evidence from the institution's staff that the participant was being discharged within the week before receiving homeless assistance; and 2) documentation of the following -the income of the participant -what efforts were made to obtain housing; and -why, without the homeless assistance, the participant would be living on the street or in an emergency shelter.
Person's fleeing domestic violence	Verify that the participant is fleeing a domestic violence situation.	You must obtain written, signed, and dated verification from the participant that he/she is fleeing a domestic violence situation.  If the participant is unable to prepare the verification, you may prepare a written statement about the participant's previous living situation and have the participant sign and date it.

**NOTE:**

Documentation of homelessness is required for each resident in your program, and must be written, signed, dated, and placed in the participant's file. Simply knowing that each individual you serve is homeless is not enough.

## MUTUAL EXPECTATIONS AGREEMENT

This guide is intended to provide clients with an overview of the housing search process and lay out the expectations of both the client and the City of Lancaster.

- 1 You will meet with housing staff approximately once a week for 30 minutes or for another mutually agreed upon time.
- 2 Both you and housing staff will create a strategy to help locate permanent housing, which takes into account all of the housing resources has available. During each appointment, you will work together to set individual goals.
- 3 You will be expected to make phone calls to housing authorities, landlords, and property owners and to complete rental applications.
- 4 You will be required to complete and follow a budget and savings plan in order to receive the City of Lancaster's services.
- 5 The City of Lancaster will keep a file for you, which includes copies of applications and other housing search-related material.
- 6 The City of Lancaster will provide you with stamps and envelopes, as well as access to a copy machine, fax machine, and telephone for all housing-search related business.

### Mutual Expectations

1. All services provided by City of Lancaster are free of charge.
2. You and housing staff should treat each other with respect.
3. Both parties are expected to be prompt to meetings and prepared for the time together.
4. Both parties should call ahead if the meeting needs to be rescheduled.

Client Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Housing Advocate Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## **TENANT HOUSING SERVICES CONTRACT**

This contract enables Housing staff to negotiate portions of the service plan that relate to getting and keeping decent housing. It allows Housing staff to address problems that may have caused clients to lose their housing in the past, and it also allows them to be proactive about preventing housing loss in the future. Case managers should review each statement (as applicable) with clients and have them initial the statement as proof of their consent. The client should then sign and date the contract.

### **I PROMISE TO WORK WITH HOUSING STAFF TO GET AND KEEP HOUSING. I AGREE TO THE FOLLOWING:**

I will follow my restitution plan to repay \$ each month to \_\_\_\_\_. This will help me obtain better housing. (If restitution plan includes repayment of several debts, list each one separately on the back of this contract.)

I will fill out a sample rental application with complete information. Landlords will not look at incomplete applications.

I will practice a landlord interview so I know what to ask and what to say about my situation. This will help me show the landlord that I will be a good tenant.

I will call at least \_ landlords to ask about their housing and if they will look at applications from people in my situation. I will set up appointments to look at apartments that sound good for me.

I will dress well for my appointment, make arrangements for childcare, and take my sample rental application and money for application fees. This will help me make a good impression.

I will not allow \_\_\_\_\_ to move into my apartment, even for a few days. This person can cause me to lose my housing. If \_\_\_\_\_ tries to move in with me, I will tell my case manager. My case manager might ask the landlord to file a trespass order or send a lease violation letter to me, or might ask me to get an order for protection.

I will let my case manager inspect my apartment so he/she can see what help I might need to keep my housing.

I will save \$ from my weekly/bi-monthly/monthly paycheck to make sure I have enough

money for rent. I will put my rent money in a safe place: \_\_\_\_\_ (where?).

\_\_ I will also save \$ from each paycheck/benefits check for emergencies, so that I may not use rent money.

\_\_ I will pay my rent by the first of the month. I will not give my rent money to \_\_\_\_\_ or use my rent money for anything other than rent.

\_\_ If I have an emergency, I will talk to my case manager and my landlord before the first of the month to make plans for paying the rent so that I can keep my housing.

\_\_ If I get a written lease violation notice from my landlord, I will tell my case manager about it right away so we can plan what to do to help me keep my housing.

\_\_ I will talk with about my lease and make a list of the things that can get me evicted. I will keep that list (where?) \_\_\_\_\_

\_\_ I agree to have my rent vendor-paid (paid to my landlord directly from my benefits provider) so I can get/keep my housing.

\_\_ If I want repairs made to my apartment, I will ask the landlord in writing. If the landlord does not respond, I will not withhold my rent unless I have talked to a tenant advocate or lawyer about how to do this legally. If I withhold rent illegally, I can be evicted.

Other: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Tenant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Case Manager Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## INDIVIDUAL SERVICE PLAN

A service plan should be developed with clients soon after intake to identify the steps that must be taken to move them towards the goal of independent living. Make sure that the service plan addresses any specific issues that come out of the intake process and the discussion about available mainstream resources. The plan should include goals, strategies/steps for achieving each goal, target completion dates, and dates goals are achieved. While the plan should be developed with client input, many of the goals can be pre-established by your program (see examples provided below). Collaborate with any other agencies with whom your client may be working to ensure that the goals and strategies laid out for the client are consistent with the goals and strategies of any other program in which he/she may be participating.

### **Part 1: Health & Wellness**

1. Maintain Sobriety: \_\_\_\_\_

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2. Mental Health: \_\_\_\_\_

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3. Family Reunification: \_\_\_\_\_

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Client's Strengths: \_\_\_\_\_

---

---

Client's Weaknesses: \_\_\_\_\_

---

---

Progress Summary: \_\_\_\_\_

---

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**Part 2: Employment and Financial Stability**

1. Obtain Employment Permit: \_\_\_\_\_

\_\_\_\_\_

2. Maintain Employment for a Minimum of 6 months: \_\_\_\_\_

\_\_\_\_\_

3. Repair Credit History: \_\_\_\_\_

\_\_\_\_\_

4. Financial Stability: \_\_\_\_\_

\_\_\_\_\_

Client's Strengths: \_\_\_\_\_

\_\_\_\_\_

Client's Weaknesses: \_\_\_\_\_

\_\_\_\_\_

Progress Summary: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Part 3: Housing Stability**

1. Rebuild Housing History: \_\_\_\_\_

\_\_\_\_\_

2. Permanent Housing: \_\_\_\_\_

\_\_\_\_\_

Client's Strengths: \_\_\_\_\_

\_\_\_\_\_

Client's Weaknesses: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Progress Summary: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Case Manager Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Director Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Client's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

## MONTHLY BUDGET WORKSHEET

INCOME				EXPENSES			
Income Sources	Amount	Frequency	Monthly Income	Expenses	Amount	Frequency	Monthly Expenditures
Earned Income			\$0	Rent			\$0
Housing Subsidy			\$0	Groceries			\$0
Child Support			\$0	Clothing			\$0
TANF			\$0	Childcare			\$0
SSI			\$0	Car Payment			\$0
SSDI			\$0	Car Insurance			\$0
Other:			\$0	Car Maintenance & Fees			\$0
Other:			\$0	Gasoline			\$0
Other:			\$0	Public Transportation			\$0
				Medical/Prescriptions			\$0
<b>TOTAL</b>			<b>\$0</b>	Dental			\$0
				Vision			\$0
				Telephone-Landline			\$0
				Telephone-Cell			\$0
				Utilities			\$0
				Cable			\$0
				Laundry & Drycleaning			\$0
				Toiletries			\$0
				Credit Card Payment			\$0
<b>BUDGET ANALYSIS</b>				Student Loan Payment			\$0
				Entertainment/Recreation			\$0
<b>Total Monthly Income</b>			<b>\$0</b>	Tuition Fees			\$0
				Pocket Money			\$0
<b>Total Monthly Expenditures</b>			<b>\$0</b>	Savings			\$0
				Other:			\$0
<b>Monthly Variance</b>			<b>\$0</b>	Other:			\$0
				<b>TOTAL</b>			<b>\$0</b>

## CONDUCTING THE HOUSING SEARCH

Conducting the actual housing search can be very time-intensive. Some of your clients will need more assistance than others, so it may be wise to triage clients according to their needs. For example, individuals with the most severe barriers may need help through the entire process, including locating vacant units, scheduling appointments, viewing apartments, and negotiating with landlords.

In contrast, other clients may be able to and/or may desire to conduct the housing search independently. Additionally, some agencies may simply not have the staff or resources needed to provide clients with as much assistance as they may otherwise need. The Resources page provides a list of tools that will help clients with their housing search.

The tools provided below are designed to help clients with their housing search, particularly those who are searching on their own.

- Housing Preferences Worksheet

Before your clients begin their housing search, they should carefully think through which features of an apartment, building, and neighborhood are most important to them. The Housing Preferences Worksheet provides a list of features and asks clients to decide which features they must have, which they would prefer, and which they can live without. Once they have made these decisions, they will be able to conduct a more targeted housing search

- Sample Rental Application

Clients need to be able to act quickly when they see an apartment that they like -which means filling out an application on the spot. To ensure that your clients are prepared, have them fill out a sample rental application prior to beginning their housing search. This will ensure that they have all of the information they need at their fingertips, including, as applicable, contact information for previous landlords and employers, checking and savings account information, contact information for references, etc. It will also give them time to think about how to answer difficult questions related to prior evictions, a criminal history, or a poor credit history. The link above will bring you to a website that provides attorney approved rental applications tailored for each state (available for a nominal fee), although there are also a number of free sample applications available on the internet -just search for "sample rental application."

- Client Telephone Guide: Calling about an Apartment

This Client Telephone Guide is designed to help clients when making calls to prospective landlords. It provides tips to prepare the client for the call as well as a script to use during the call. The script includes a number of questions to help clients determine whether a given apartment would be appropriate for him or her. Some of the questions address the landlord's screening policies (i.e., whether they are willing to rent to individuals with credit problems, a criminal history, prior evictions, etc.), which are particularly important to ask since most

landlords charge an application fee. If the client can determine a landlord's "tolerance level" in advance, he or she can decide whether it would be worth paying the fee and applying for the apartment.

- Tips for Finding an Apartment

This article, entitled IIQW -To Find an Apartment, guides individuals through the apartment search process. It provides links to online tools for evaluating neighborhoods (including neighborhood profiles, school reports, and neighborhood crime statistics), guidance to help individuals determine the amount of money needed to rent an apartment, and tips on the most common ways to identify available apartments.

- Apartment Comparison Checklist

Viewing apartments can be a daunting task -there are so many things to remember! Clients can use this Apartment Comparison Checklist to compare different apartments, especially if they are viewing a number of units in one day. The checklist will also remind the client to ask the landlord specific questions about the terms and conditions of the lease.

- What Does My Lease Say?

What Does My Lease Say? is a tool that provides clients with a way to summarize, in their own words, the terms of their lease. Many housing advocates have found this to be a particularly important exercise for clients. They have found that a number of problems can be prevented simply by making sure clients understand the rules.

- Move-in Inspection Checklist

Many low-income individuals must accept housing with some deficiencies. As a result, they are sometimes more vulnerable to losing their security deposits, making it more difficult to accumulate a security deposit for the next apartment. To help prevent this problem, clients can use this Move-in Inspection Checklist to conduct a move-in inspection. It allows tenants to document problems to prevent being charged for pre-existing damage.

## Housing Preferences Worksheet

Before your clients begin their housing search, they should carefully think through the features of an apartment, building, and neighborhood that are most important to them. Have your client's use this worksheet to help them determine the features they must have, those they would prefer, and those they can live without. Once they have made these decisions, they will be able to conduct a more targeted housing search.

APARTMENT	I MUST HAVE	I WOULD PREFER	I COULD DO WITHOUT
ONE BEDROOM AS OPPOSED TO AN EFFICIENCY			
MORE THAN ONE BEDROOM			
FURNISHED UNIT			
WASHER AND DRYER IN UNIT			
DISHWASHER			
AIR CONDITIONING			
UTILITIES INCLUDED			
CLOSETS AND STORAGE			
ONE LEVEL (NO STAIRS)			
PRIVATE APARTMENT (VERSUS RENTING ROOM IN SHARED HOUSE)			
PRIVATE BATHROOM			
OTHER:			
OTHER:			

BUILDING	I MUST HAVE	I WOULD PREFER	I COULD DO WITHOUT
SPECIFIC TYPE OF BUILDING (SINGLE FAMILY, DUPLEX, MULTI-FAMILY)			
SECURED ENTRANCE			
ON-SITE LAUNDRY FACILITIES			
YARD/PLAYGROUND			
OFF-STREET PARKING			
HANDICAP ACCESSIBILITY			
ELEVATOR			
PETS ALLOWED			
STORAGE SPACE			
QUIET STREET			
OTHER:			
OTHER:			

NEIGHBORHOOD	I MUST HAVE	I WOULD PREFER	I COULD DO WITHOUT
NEAR PUBLIC TRANSPORTATION			
NEAR MAJOR ROADS/HIGHWAYS			
NEAR SCHOOLS/DAYCARE			
NEAR WORK			
NEAR HEALTH CARE AND SUPPORTIVE SERVICES			
NEAR PARKS/PLAY AREAS/PUBLIC LIBRARY			
NEAR FAMILY/FRIENDS			
NEAR GROCEY STORE & SHOPPING			
NEAR RELIGIOUS & RECREATION FACILITIES			
SAFE			
CHILDREN CAN PLAY OUTSIDE			
OTHER:			
OTHER:			

## **Client Telephone Guide-Calling about an Apartment**

Give this telephone guide to clients to aid them in making calls to prospective landlords. Advise them to review the guide before they start making calls. Also, suggest that they be prepared to answer questions about their circumstances and explain what changes they have made to prevent similar problems from happening again. Remind them to record all of their answers so that they are prepared when they start talking to landlords.

Depending on the vacancy rate in your community, it is likely that your clients will have to contact a number of landlords to find an apartment. Explain that it is important for them to come across as responsible and organized when dealing with landlords, and that this worksheet will help them keep track of who they have talked to, when, and what follow-up actions are required. Remind them how important it is to show up on time to view an apartment, and that they must call and reschedule if they cannot keep an appointment. Also, remind clients that they should confirm whether the landlord will call them back with a decision or if they should call the landlord.

If you find that a number of your clients do not have a reliable number at which they can be reached (e.g., if they are staying at a shelter), consider setting up a voicemail system that your clients can access remotely.

This worksheet is designed to help you determine whether an apartment would be appropriate for you and, if applicable, your family. The questions about screening are important because many landlords charge an application fee to screen for criminal history, credit history, and rental history. If you know in advance the "tolerance level" of the landlord (that is, whether the landlord will rent to people in your situation), you can decide if it would be worth paying the fee and applying for the apartment.

### **Tips to Help You with the Call**

- If possible, call from a quiet place so you can hear the landlord. It is also better if the landlord does not hear a lot of noise (like people yelling) in the background.
- Make sure to review the list of questions below so you are prepared when you call the landlord.
- Know when you can move.
- Write down the name of the person you talked to, his or her phone number, and the date you made the call in case you need to call back to ask more questions or to reschedule an appointment.
- Since you may have to contact several landlords to find an apartment, use the "Housing Search Tracking Worksheet" to help you remember when you have scheduled an appointment to look at an apartment, where you have submitted applications, and when and with whom you need to follow up about an apartment

## Telephone Script

“Hello, my name is \_\_\_\_\_ I'm looking for a (1,2,3...) bedroom apartment for (this month, next month, two months from now). Do you have any available units?”

*If the landlord does not have any available units: "Do you have any other properties with a vacancy?"*

*If the landlord does have a vacancy, ask the following questions. Be sure to write down the answers. If the landlord has two or more apartments, write down the answers for each unit.*

	APARTMENT 1	APARTMENT 2
<b>WHAT IS THE ADDRESS OF THE PROPERTY?</b>		
<b>WHAT DATE IS THE UNIT AVAILABLE?</b>		
<b>DO YOU CHARGE AN APPLICATION FEE? IF YES, HOW MUCH?</b>		
<b>WHAT IS THE MONTHLY RENT?</b>		
<b>HOW MUCH IS THE SECURITY DEPOSIT?</b>		
<b>WHAT UTILITIES WILL I PAY?</b>		
<b>DO YOU KNOW APPROXIMATELY HOW MUCH THOSE UTILITIES FOR THAT UNIT COST PER MONTH?</b>		
<b>HOW MANY PEOPLE CAN OCCUPY THE UNIT?</b>		
<b>WHAT IS THE MINIMUM LEASE YOU REQUIRE (HOW MANY MONTHS)?</b>		
<b>DO YOU REQUIRE A CERTAIN INCOME TO RENT THE UNIT?</b>		
<b>ARE THERE LAUNDRY FACILITIES ON-SITE? IF NO, IS THERE A LAUNDROMAT NEARBY?</b>		
<b>IS THE APARTMNET NEAR A TRAIN/BUS STATION? WHICH ONE?</b>		

<b>IF YOU HAVE SECTION 8 OR ANOTHER RENT SUBSIDY: Do you accept Section * or other rent subsidies?</b>		
<b>IF YOU HAVE CREDIT PROBLEMS: Do you work with people who have had credit problems in the past?</b>		
<b>IF YOU HAVE BEEN EVICTED: Do you work with people who have evictions that can be explained?</b>		
<b>IF YOU HAVE A CRIMINAL HISTORY: Do you work with people who have a criminal history who have worked hard to change their lives?</b>		
<b>IF YOU HAVE A DISABILITY: Can you accommodate people with disabilities?</b>		
<b>IF YOU HAVE PETS: What are your rules on pets?</b>		

The landlord may ask you to explain the circumstances if you have bad credit, a criminal history, or prior evictions. They may want to know dates, places, and if you owe any money. The best response is to be truthful, take responsibility for your mistakes, and talk about what you are doing to make sure it never happens again. You may want to write some notes about your circumstances below to make sure you are prepared to answer the landlord's questions.

Here are things that might show a landlord how you are improving your life:

- employed for months/years
- going to school (Or job training)
- working with a credit counselor
- paying off money you owe
- established a savings account
- taking classes on budgeting your money
- completed treatment and sober
- working with a social worker
- ended a bad relationship
- taking classes about being a better tenant

If the landlord is willing to work with people in your situation:

Is it possible to set up an appointment to see the apartment? When?

Can you give me directions from *[where you're located]*?

Can I get your name again in case I need to call you back?

What is the best number and time to reach you?

**\*BE SURE TO THANK HIM/HER BEFORE YOU HANG UP**

Note the apartment address and day and time of appointment.

Did you fill out an application? *If yes, when will the landlord be contacting you?*

Did you get the apartment? *If yes, when is the move-in date? If no, what was the reason provided?*

**Apartment Comparison Checklist**

Clients may want to use this checklist to compare different apartments, especially if they are viewing a number of units in one day. Depending on the client's situation, he or she may not have a lot of options, especially if the vacancy rate in the community is very low. Nonetheless, encourage clients to view at least a couple of different units, particularly if there are children in the household. Moving frequently can be very disruptive to children, especially if the children have to enroll in a new school, so it's important that the client find a unit (and neighborhood) that will work for them in the long term.

Use this checklist to compare different apartments. As you are viewing an apartment, turn appliances on and off to ensure that they are in good, working condition, test the water pressure in the kitchen and bathroom, check the locks on the windows and doors, etc. Do not be afraid to ask the landlord any questions you may have, particularly about the terms and conditions of the lease. Note that you may have already asked the landlord about the terms and conditions when you first called about the unit, but ask again to verify the information you received. You may also want to ask the landlord what type of routine maintenance is done on the apartment and how repair issues are handled. Finally, talk to current tenants to find out how they like living in the building. Do they feel safe and secure? What is the noise level? Is the landlord responsive about repairs? Moving can be expensive and disruptive, so it is important to find a unit that meets your needs.

	APARTMENT 1	APARTMENT 2	APARTMENT 3
ADDRESS OF UNIT			
DATE AVAILABLE			
APPLICATION FEE			
SECURITY/DAMAGE DEPOSIT			
PET RULES/DEPOSIT			
RENT AMOUNT			

RENT DUE DATE			
LENGTH OF LEASE			
PENALTY FOR BREAKING LEASE			
UTILITIES INCLUDED			
NUMBER OF BEDROOMS			
LOCATION IN BUILDING (BASEMENT, GROUND LEVEL, UPPER LEVEL)			
FURNISHED			
DINE-IN KITCHEN			
SEPARATE DINING AREA			
AIR CONDITIONING			
HARDWOOD FLOORS			
CARPET			
PAINT/WALL CONDITION			
CLOSET SPACE/STORAGE			
WINDOWS/NATURAL LIGHT			
WINDOW COVERINGS			
AMPLE OUTLETS IN EACH ROOM			
WATER PRESSURE			
HANDICAP ACCESSIBLE			
KITCHEN	APARTMENT 1	APARTMENT 2	APARTMENT 3
AGE/CONDITION OF REFRIGERATOR			
AGE/CONDITION OF STOVE/OVEN			

DISHWASHER?			
GARBAGE DISPOSAL?			
MICROWAVE?			
CUPBOARD SPACE/STORAGE			
COUNTER SPACE			
COMMUNITY	APARTMENT 1	APARTMENT 2	APARTMENT 3
LAUNDRY FACILITIES			
ELEVATOR			
SECURED ENTRANCE			
ADEQUATE OUTSIDE LIGHTING			
PARKING AVAILABLE			
NOISE LEVEL			
ON-SITE PLAYGROUND OR PROXIMITY TO PARK			
PROXIMITY TO PUBLIC TRANSPORTATION			
PROXIMITY TO WORK/SCHOOL			
PROXIMITY TO GROCERY STORE, BANK, POST OFFICE, ETC.			
GENERAL NOTES	APARTMENT 1	APARTMENT 2	APARTMENT 3

## Move-In Inspection Form

This is a checklist clients can use to conduct a move-in inspection. It could be used by a more assertive client to negotiate repairs, but it is also a way for tenants to document problems to prevent being charged for pre-existing damage. Though units with health and safety problems are unacceptable, many low income individuals must accept housing with some deficiencies (e.g., scuffed floors, torn carpet). As a result, they are more vulnerable to losing a damage deposit, making it more difficult to accumulate the damage deposit for the next apartment.

This worksheet is designed to help you inspect your apartment when you move in. Examine everything on this list and write down ALL the problems you see. This is important for two reasons. First, the list can help you get your damage deposit back when you move out because it shows that you were not responsible for the problems on the list. Second, you and your landlord can talk about what problems should be fixed and when.

Ask your landlord to inspect the unit with you and initial the items he/she agrees to repair. Be sure that you both sign and date the form. If your landlord cannot conduct the inspection with you, send a completed copy to him/her and ask that he/she sign it and return it to you. You may also want to provide a copy to your case manager. Remember to keep a copy of this form so that you have proof of any pre-existing damage when you are ready to move out.

Move-in inspection for: \_\_\_\_\_ (Address of apartment)

IS THERE ADEQUATE LIGHTING IN THE KITCHEN?			
IS THERE AN ELECTRICAL OUTLET IN THE KITCHEN THAT WORKS?			
IS THERE A SINK WITH HOT AND COLD RUNNING WATER			
DOES THE WATER DRAIN QUICKLY?			
IS THE STOVE IN GOOD WORKING CONDITION? <i>(Do the burners work? Does the oven work? If it's a gas stove, do you smell gas when the stove is turned off? Are there any broken or missing parts?)</i>			
IF THERE IS A DISHWASHER, IS IT IN GOOD WORKING CONDITION?			

IF THERE IS A GARBAGE DISPOSAL, DOES IT WORK?			
IS THE TOILET IN ADEQUATE CONDITION? <i>Flush the toilet, does it empty and refill? Does the water continue running after the bowl is full? Does it look like there has been a leak around the toilet? Where is the shut-off valve; does it work?</i>			
IS THERE A SINK WITH HOT AND COLD RUNNING WATER? DOES IT DRAIN QUICKLY?			
IS THERE A TUB WITH HOT AND COLD RUNNING WATER? DOES THE WATER DRAIN QUICKLY?			
IS THERE A TUB WITH HOT AND COLD RUNNING WATER? DOES THE WATER DRAIN QUICKLY?			
IS THERE VENTILATION FROM A FAN OR WINDOW IN THE BATHROOM?			
IF THERE IS AIR CONDITIONING, DOES IT WORK?			
DOES THE FURNACE WORK? <i>IF it's cold enough outside for the furnace to be turned on, is there enough heat? Is the apartment hotter or cooler than the thermostat setting?</i>			
DO ALL WINDOWS OPEN AND CLOSE? ANY BROKEN?			
DO THEY HAVE WORKING LOCKS?			
ARE ANY OF THE STORM WINDOWS OR SCREENS BROKEN OR MISSING?			
DO ALL WINDOWS HAVE CURTAINS, BLINDS, SHADES OR OTHER COVERINGS?			
IS THERE A DEADBOLT LOCK ON THE FRONT/BACK OF APARTMENT?			
DO YOU SEE ANY WATER STAIN ON THE WALL OR CEILING? IF SO, HAS THE LEAK BEEN FIXED?			
IF THERE ARE HARDWOOD FLOORS, DO YOU SEE ANY DEEP SCRATCHES, BURNS, STAINS, BLACK MARKS, OR LACES WHERE THE WOOD IS WORN DOWN?			

IF THERE IS CARPETING, DO YOU SEE ANY STAINS, BURNS, OR TEARS?			
ARE THERE ANY HOLES OR CRACKS IN THE CEILING/WALLS?			
ARE THERE PLACES WHERE THE PAINT IS PEELING OR FLAKING? <i>If so, find out if the unit was built before 1978. (If so, and if children will be living in the unit, repair of the paint is very important because it can cause lead poisoning.)</i>			
DOES THE UNIT HAVE A WORKING SMOKE DETECTOR? (Ask how you can test it.)			
DO YOU SEE ANY EXPOSED WIRING, MISSING SWITCHES OR OUTLET COVERS, BROKEN OR MISSING CEILING LIGHTS?			
IS THERE EVIDENCE OF ANY BUGS OR RODENTS BEING PRESENT?			
IS THERE A FIRE EXIT THAT IS EASILY ACCESSIBLE?			
IS THERE ADEQUATE LIGHTING IN THE STAIRWELLS AND HALLWAYS? ARE THEY FREE OF JUNK, GRAFFITI AND HAZARDS?			
ARE MAILBOXES LOCKED AND IN GOOD CONDITION?			
ARE THERE PROBLEMS WITH THE YARD, BROKEN FENCE, TRASH, ETC.			

We agree that the information above accurately represents the condition of the unit when the tenant moved in. The landlord agrees to make the repairs initialed on this form. The landlord and tenant each received a copy of this form.

TENANT SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

LANDLORD SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

## **LANDLORD OUTREACH AND RECRUITMENT**

Establishing positive relationships with landlords in your community is perhaps the single most important factor when it comes to developing a successful housing search assistance program. Property damage, nonpayment of rent, criminal activity, frequent police calls, and evictions are all very costly for landlords. As a result, landlords typically screen applicants carefully to minimize their risk. In communities with low vacancy rates, they can often afford to be as selective as they wish. As a provider working with persons who are either homeless or at risk of homelessness, however, your clients will often be the ones landlords are trying to screen out.

Individuals that possess multiple barriers typically have a very difficult time finding housing, which is why the assistance of a housing advocate or case manager is so crucial. Many communities have found that when an agency is willing to act as an intermediary, providing support to the tenant and conflict resolution assistance, landlords are much more willing to accept high-risk tenants. However, to ensure that landlords will continue to work with your clients, it is essential that you respond quickly to landlord requests for help and follow through with the services you have promised.

Establishing good relationships with landlords can have many benefits. Landlords may hold apartments for your clients, waive application fees, or agree to lock-in rent payments for good tenants. Positive relationships with landlords can literally be the key that makes or breaks your program. The Resources page provides a list of tools that will help you reach out to and cultivate relationships with landlords.

### **Landlord Outreach and Recruitment Resource**

The documents provided below can assist in reaching out to and cultivating relationships with landlords. Keep in mind that the documents are samples, and will need to be tailored to reflect your organization's needs and services.

This page provides suggestions for recruiting and cultivating relationships with landlords. The suggestions are based on the experiences of organizations around the country that have been providing housing search assistance for hard-to-place individuals. The page offers ideas on how to identify landlords for your program, what types of landlords to target, what types of assurances landlords are looking for, and how to stay in their "good graces."

The Landlord Benefits checklist outlines the benefits landlords receive from working with a housing search program. (The checklist provides examples and would have to be tailored according to the services your program provides.) The checklist could be used as a marketing tool to advertise your program to potential landlords. Housing staff could also use the information as talking points when calling or meeting with prospective partners. The Landlord marketing letter can be used separately or with the Landlord Benefits Checklist to advertise your program to landlords in your community.

Using this form will allow your agency to collect information about landlords in your community

as well as the type of housing that is available. It is important to note, however, that many communities either have or are in the process of creating a housing inventory database. If you live in one of these communities, there are probably forms and procedures in place for collecting information and populating the database.

The Landlord-Tenant-Case Manager Communication Agreement can be used to promote open communication between the landlord, tenant, and case manager/housing advocate and to address problems before they become irreparable.

### **Tips for Working with Landlords**

This page provides tips on recruiting and cultivating relationships with landlords. These suggestions are based on the experiences of organizations around the country that have been providing housing search assistance for hard-to-place individuals.

Establishing a Landlord Advisory Group not only will this be an excellent way to get to know some of the landlords in your community, but it will also be a way for you to introduce them to your program. Use the group to discuss landlords' fears about accepting your clients, and what it would take to get them to change their minds. Ask them for suggestions concerning the best way to recruit landlords. As they become more familiar with your organization, may also be willing to help promote your program, introduce you to other landlords, and/or serve as references.

Many communities have a landlord organization or rental housing association to help keep landlords informed of their rights and responsibilities. Contact your local organization and ask if you can attend a meeting and make a short presentation on your program. Be sure to bring some brochures or other marketing materials to leave behind. You may also want to bring one of your former clients (i.e., one of your "success stories") so that he or she can explain the impact that the program has had on his/her life.

Targeting "medium-sized" landlords may offer the greatest chance at success. Landlords with few units (1-4 units) may be more risk adverse than landlords with more units, particularly if they live in the building themselves. Additionally, they will not have as much difficulty addressing turnover and quickly filling vacancies because they only have a few units. In contrast, large property management firms have so many units that they can more easily absorb the cost of vacancies. Large property management firms also typically have strict screening policies, and the individuals that work in the rental office have less autonomy to make decisions on a case-by-case basis. This does not mean, of course, that you should not work with landlords of small buildings or large property management firms, especially if they express an interest in working with your program. However, recruiting landlords and building relationships takes time and energy, and some housing search agencies have found that the biggest return on the investment comes from independent landlords of medium-sized buildings. Contact your local Chamber of Commerce or landlord organization to see if they can help identify landlords according to the number of units owned/managed.

The long-term success of your organization will be dependent on your ability to maintain a good reputation. One problem tenant or one instance where you do not follow up as promised will probably discourage a landlord from working with your program again. As a result, it is critical

that your agency properly screens clients. Make sure that your clients are, in fact, "housing ready" and have the ability to maintain their housing. Clients with severe barriers (i.e., alcohol or substance abuse problem, severe debt, no employment/income) may need to be referred to transitional housing in preparation for permanent housing.

Housing staff's role, is to "sell" your program and your clients to landlords. Emphasize the benefits landlords receive from partnering with you. (See the Landlord Benefits Checklist for ideas.) If landlords are concerned about the risks involved with renting to your clients, remind them that they take a risk with any tenant, but that your program mediates those risks. Explain what services are connected to the participant and that staff will be available if any problems do arise. Finally, appeal to the human/emotional side of landlords. Explain that although your clients have had some problems in their past, they are working hard to improve their circumstances. Landlords may be able to relate to your clients more easily than you realize. Remember, most people know someone -whether it be a relative, friend, or coworker who has struggled with alcohol or drugs, mental illness, a sudden health crisis, an unexpected layoff, or domestic abuse. These are the same issues with which your clients struggle. Remind landlords that they have the opportunity to improve the quality of life for others.

Be as clear and upfront as possible with landlords regarding whom you are housing, but emphasize that your clients are working hard to change their lives and that your program supports their growth and development. Never hide the facts, if the landlord finds out you may irreparably damage your organization's reputation. Additionally, encourage your clients to think about why they had the problems they did and what they are doing differently to prevent the problems from happening again. Some landlords have said that they are more willing to give someone a second chance if the person takes responsibility for his or her actions and can demonstrate that he or she has changed.

Even among clients deemed "housing ready," you will have a range of individuals with a spectrum of needs and situations. Consider placing your higher-risk clients with landlords with fewer units. One problem situation can be enough to deter a landlord from working with your program again, and you do not want to damage relationships with your largest customers (i.e., landlords with the most units).

Remember that landlords are your customers too. If a problem arises between your client and his/her landlord, it is important that you remain neutral and work to resolve the problem efficiently and effectively. If landlords view you as a tenant advocate, as opposed to an intermediary, they may be less willing to work with you. On the other hand, it's okay to have expectations of landlords. Your clients have the right to expect services equal to those provided to other residents (i.e., routine maintenance, prompt repairs, courteous service), and it's important to ensure landlords follow through on their responsibilities.

Relationships take time to build. Continue to nurture relationships regardless of whether a landlord initially expresses interest or not. It's possible that a landlord will "come around" over time, after they get to know your organization and your housing advocates on a personal basis. In addition, word gets around, so developing successful relationships with some landlords may actually help you expand your network and build relationships with other landlords. Consider using participating landlords as references. And remember, housing markets naturally fluctuate,

and landlords may change their mind if they have units sitting vacant for very long. Housing advocates from one organization indicated that, once vacancy rates in their community began to rise, they had landlords calling them!

### **Landlords Benefits Checklist**

The checklist is a tool to advertise your program to potential landlords. The benefits listed are just examples of services provided by housing search agencies based on interviews with providers around the country. Be sure to modify the list so that it represents your program accurately.

As part of your marketing materials, it is important that the piece looks professional and catches people's attention. You may want to customize the checklist by including your organization's name and logo. Similarly, you could use graphics, photos (e.g., a photo of one of your program participants talking to one of your participating landlords), and/or colored paper to give it more of a polished look. This checklist could be mailed out to landlords in your community along with other program materials (e.g., a program brochure, newsletter, or annual report). Or, your housing advocates can use it as a "leave behind" piece when they meet with prospective landlords. Finally, send copies over to your local landlord organization to distribute at their next meeting. Even better, see if you can do a short presentation at their next meeting!

Landlords gain several benefits from participating in our HPRP program. Consider the following advantages:

- **Eliminate advertising costs.** Working with our program gives you access to a pool of ready-to-rent tenants. Just call us up when you have a vacant unit, and we'll immediately match you up with a client that is looking for housing.
- **"Smart" renters.** Our clients have attended training on such topics as personal budgeting, understanding rental agreements, housekeeping and general apartment maintenance, being a good neighbor, etc.
- **Damage/security deposits.** Our organization aims to help individuals get back up on their feet. We have found that many low-income clients can afford the monthly rent, but have difficulty saving enough money for their security deposit. As a result, we help clients put together this one-time payment.
- **Clients have access to time-limited subsidies.** Again, our organization aims to help individuals get back up on their feet. As a result, eligible clients receive a subsidy to help them cover the first three months of their rent. This allows clients some time to stabilize and build an emergency fund for the future.

- **Guaranteed rent payments.** Our clients are pre-screened and have a stable source of income. However, should one of our clients run into a problem, we have a pool of funds set aside to help get clients through those rough spots. We will also co-sign leases in some situations to virtually eliminate any risk to landlords.
- **Clients are attached to needed services.** Some of our clients have special needs, but we work with our clients on an ongoing basis to make sure they have the support they need to succeed. We work with clients to correct past mistakes and prevent future problems, and through our network of partners, clients have access to an array of supportive services.
- **Problem prevention through regular home visits.** Our case managers conduct regular home visits to ensure that clients are stabilized in their new environments, that their jobs are going well, and that they are getting the support they need. Regular follow up with clients allows us to identify and address problems early before they become irreparable.
- **Neutral party to mediate problems.** Despite the best efforts, problems are sometimes inevitable. However, when problems arise, it can be reassuring to know that there is someone to call. We care as much about our relationship with our landlords as we do our clients. We need everyone to make our program work. The job of a case manager is to be a neutral party, ensuring that everyone is treated fairly and that problems are resolved quickly and impartially. This includes help evicting a client (and covering eviction costs) when warranted.
- **Satisfaction from helping others.** Everyone deserves a safe and affordable place to live. Some people make mistakes, but everyone deserves a second chance. By helping house our clients, you are playing an integral role not only in helping individuals take charge of their lives, but also in making your community a better place to live.

## Landlord Information

Whether responding to an ad in the paper or contacting prospective landlords through cold calls, this tool will help you compile more complete information about the landlords in your community as well as the type of housing that is available. (You can then input the information into an excel spreadsheet for easy viewing and sharing.) Having an organized process for collecting information will also prevent landlords from getting multiple calls from your organization for the same information. Finally, if your community ever hopes to build a housing inventory database, you will already have collected some of the data needed to populate it.

As an alternative to having your staff fill out this form when talking to landlords, you could send it to prospective landlords along with the landlord marketing letter and landlord benefits checklist and ask that they complete it and return it to you. If you have the funds, you could include a self-addressed, stamped envelope to encourage landlords to respond.

Also, this form includes an area to record vacancy information. Because vacancy information is not static, your organization will have to develop a protocol for periodically updating the information. For example, some landlords may be willing to call your organization when they have vacancies. Otherwise, you may want to assign a staff person to call each landlord in your database on a monthly basis to get vacancy updates.

### 1. Landlord Contact Information:

NAME \_\_\_\_\_  
ADDRESS \_\_\_\_\_  
PHONE NUMBER (day) \_\_\_\_\_ (evening) \_\_\_\_\_  
FAX \_\_\_\_\_ EMAIL \_\_\_\_\_

### 2. Who should contact the Landlord? (Case Manager or Client):

NAME \_\_\_\_\_ PHONE NUMBER \_\_\_\_\_  
NAME \_\_\_\_\_ PHONE NUMBER \_\_\_\_\_  
NAME \_\_\_\_\_ PHONENUMBER \_\_\_\_\_

### 3. Apartment Location:

ADDRESS \_\_\_\_\_ APT# \_\_\_\_\_  
CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIPCODE \_\_\_\_\_

4. Building Type:

1-4 UNITS \_\_ 5-20 UNITS \_\_ 21-40 UNITS \_\_ 40+UNITS \_\_

5. Type of Housing:

Elderly \_\_\_\_ Family \_\_\_\_ Disabled \_\_\_\_ Other \_\_\_\_

6. Vacancies as of \_\_\_\_ / \_\_\_\_ /2009:

7. Is/are the units painted with lead-paint free?

Yes \_\_ No \_\_ I don't Know \_\_

8. Upfront costs:

Application Fee \$ \_\_\_\_ First Month \$ \_\_\_\_ Last Month \$ \_\_\_\_

Security Deposit \$ \_\_\_\_ Realtor Fee \$ \_\_\_\_

9. Are utilities included?

Yes \_\_ No \_\_ Partial (Please List) \_\_\_\_\_

10. Public Transportation:

Train \_\_ Bus \_\_ Car only \_\_\_\_\_

11. Parking:

Street \_\_ Off-Street \_\_ Private \_\_ Private/Pay \_\_ None \_\_

12. Amenities:

Air Conditioning \_\_ Handicap Accessible \_\_ Refrigerator \_\_ Dishwasher \_\_ Yard \_\_

Storage Space \_\_ Pets Allowed \_\_ Dine-In Kitchen \_\_ Laundry Room Hook-up \_\_

13. Does the owner have other properties in the area?

Yes\_\_ No\_\_ If yes, where? \_\_\_\_\_

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14. Amenities.

Bedroom Size	# of Units Available	Monthly Rent	Date(s) Available

Comments: \_\_\_\_\_

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**LANDLORD-TENANT-CASE MANAGER COMMUNICATION AGREEMENT**

This communication agreement should be filled out and signed by the tenant and then provided to the landlord to promote open communication between the landlord, tenant, and case manger. The form can easily be modified, but includes those issues most frequently cited by landlords as "red flags." The important thing is to identify and address problems before they become irreparable. Note that before this agreement is used, you may want to have your client sign an information release authorization form.

Dear [NAME OF LANDLORD]:

My goal is to pay my rent on time, follow the provisions of my lease, keep my apartment in good condition, and get along with my neighbors. I am working with a program that will help me do this, but I need your help. I am asking you to inform both my case manager and me if any of the following occur. You can fill out the form and send it to the addresses below or contact us by telephone. We appreciate your cooperation.

Landlord has not received full rent by the 3<sup>rd</sup> day of the month.

Landlord has received a complaint that there is too much noise from the tenant's apartment.

Landlord has significant concerns about the condition of the tenant's unit. (Examples: Landlord has seen damage or received complaints about bad smells that could be related to garbage.)

Landlord thinks someone is living in the tenant's unit who is not named on the lease.

Landlord thinks someone in the tenant's unit may be doing something illegal.

The behavior of someone living in or visiting the tenant's unit is causing other tenants to complain.

Landlord has seen something that is a violation of the lease.

Describe: \_\_\_\_\_

Other: \_\_\_\_\_

Please contact me in writing at the following address: \_\_\_\_\_

Or, call me at: \_\_\_\_\_

Please also contact my Case Manager at: \_\_\_\_\_

Or, call: \_\_\_\_\_

Thank You for your Cooperation!

Tenant Signature: \_\_\_\_\_ Date \_\_\_\_\_

Case Manager Signature: \_\_\_\_\_ Date \_\_\_\_\_

## CLIENT RETENTION AND STABILIZATION

The success of a housing search program depends not only on its ability to place clients in appropriate housing, but also on its ability to provide clients with adequate support so they can maintain that housing. As a result, this section of the Toolkit is designed to aid housing advocates in helping clients retain housing for the long term.

The purpose of a retention interview is twofold: (1) it allows case managers the opportunity to conduct an in-depth review of a client's situation, thereby alerting them to potential problems before the problems become irreparable; and (2) it allows organizations to collect retention data needed to evaluate program performance and report to funders.

Many of the same activities that are critical to successful housing placement also serve a vital role in enhancing long-term housing stability.

There are a number of different models for providing housing search assistance. In some communities, case managers may be responsible for providing housing search assistance and follow-up services to clients. Other communities may have specially designated housing staff to provide these services. In communities that have specially designated housing search staff, it is important to determine the respective duties of case managers and housing advocates - particularly post-placement -to ensure that client stabilization services do not fall through the cracks. In many instances, it will likely be the housing advocate's responsibility to provide retention and stabilization services, particularly for clients that have spent little time in the system. However, in situations where the client has been part of the homeless service system for a period of time (e.g., participating in a transitional housing program) and has been working with a specific case manager to address barriers and access needed services, it may be important to include that case manager in the provision of follow-up services.

By providing participants with tools and guidance on how to be good tenants before they are placed in permanent housing, the City can greatly increase the likelihood that your clients will retain their housing for the long term. Learning how to budget, understanding a rental agreement, and maintaining an apartment are crucial skills for successful independent living. A tenant education program also provides a jumping off point for offering individualized services to clients, such as working with clients to create a monthly budget.

Check in with clients on a regular basis to ensure that they are following their service plans. Remember, the Individual Service Plan addresses issues that came out of the intake process, including previous barriers to finding and keeping housing. The goal of these discussions is to help clients prevent similar problems from recurring in the future. So, if clients are not meeting their goals or target completion dates, discuss ways that they might modify their strategies for achieving these goals. In these discussions with clients, be on the alert for any "red flags" that might indicate serious or imminent threats to housing stability. Collaborate with other agencies that your clients may be working with to ensure that they are receiving all the services and benefits to which they are entitled and which might enhance their housing stability.

The City will establish a solid reputation with landlords in our community; they will know that they can call you if problems arise. By making the effort to contact the City worth their while, landlords may be more willing to work with tenants and less likely to simply evict. The City shall check in with the Landlords to make sure everything is going well with new tenants and to see if they have any questions or concerns. Remember to complete a Landlord-Tenant-Case Manager Communication Agreement, which should help promote open communication and early identification of problems.

Once placed in permanent housing, some clients will want to move on and will choose not to participate in any ongoing programs the City provides. As long as they are not encountering problems, this is fine. However, many of their clients may be more likely to succeed if follow-up services are available to them for at least six months following placement. When it comes to follow-up services, housing advocates have found that there is no "one size fits all" approach. Some clients may need a weekly telephone call to discuss progress on their Individual Service Plan or troubleshoot issues as they arise, while other clients may want to participate in workshops or a support group. As a result, it is important to be able to offer your clients a range of services and to be aware of individual needs and preferences.

The City will provide ongoing financial counseling to assist clients who repeatedly spend beyond what they have allocated in their monthly budget. Some clients may need additional financial counseling to revise their monthly budget once they have applied it to the real world or if changes occur in their financial situation (e.g. a change in salary, a rent increase, or a loss of financial benefits). Additionally, since a majority of your clients will not have financial cushions to help in emergencies, they may need to request Emergency Assistance (EA) funds from your organization from time to time. Most organizations that provide EA funds have found it useful to make financial counseling a condition for receiving the assistance (see below).

The City will work with furniture banks in our community to help your clients find new or used furniture. In addition, the City will contact the National Furniture Bank Association (NFBA), which operates a national clearinghouse of furniture resources. This assistance will be critical to helping your clients stay within their budgets.

## Marketing, Outreach, and Engagement Strategies

### Element's Associated with Good Targeting

- Agencies sharing information through a single data system or tracking clients across systems
- Programs have a “feedback loop” to inform program redesign or enhancements

### Using Foreclosure Data to Reduce Evictions

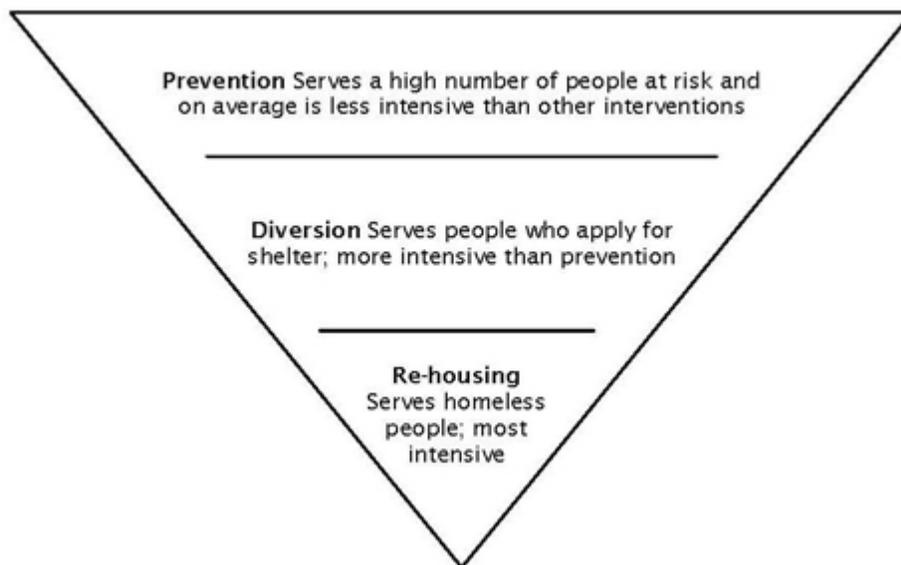
- Use public records (i.e., County Tax Assessor) to identify multi-family buildings in foreclosure
- Target neighborhoods with highest foreclosure rates
- Outreach to tenants in those buildings
- Offer relocations assistance and housing stabilization services
- Presentations to service providers and community institutions that serve similar target populations
  - Churches
  - Schools
  - Soup kitchens
  - Foster care prevention programs
  - Head start programs
  - Subsidized child care programs
  - Shelters
  - Access Center
- Locating or co-locating staff (e.g., Legal Aid attorneys or housing counselors) in high-risk neighborhoods where target populations and in offices or centers where target population(s) tend to frequent (e.g., community health centers, unemployment offices, One Stops, etc.)
  - Given the overlap of housing problems and child welfare and foster care involvement, integrate screening for housing issues into these mainstream systems  
Same with school personnel

- Same with healthcare personnel (e.g., community health centers)
- Court-assisted mail outreach: Eviction court clerk provides weekly printouts of eviction cases on the court docket for the following week to community-based prevention staff (e.g., attorneys from Legal Aid, public interest law firms), who use the contact information on the court documents to send postcards to the tenants to remind them of the court date and to explain mediation services available to them at the hearing.
- Target neighborhoods, streets, blocks, even buildings with highest contributions of residents to shelter system:
  - Door knock
  - Hand out fliers at community events (e.g., neighborhood fairs, etc.)
  - Post fliers in public places, such as Laundromats, libraries, telephone booths, grocery and liquor stores
  - Host neighborhood block parties and back-to-school bashes
- Mailers and/or door knocking to tenants in foreclosed-upon buildings
- Implement a Community Fair
- Screening and Assessment:
  - Due to the very flexible nature of cash assistance allowed under HPRP regulations (i.e., anywhere from 1-18 month grants), programs will need to be able to differentially assess for household need and risk.
  - Good screening and assessment will be critical to identifying households at risk. Such screening will identify key risk factors that increase the likelihood of someone becoming homeless in the absence of assistance.
- Key Partnerships
  - Partnerships will be critical to effectively utilizing HPRP resources. Partners should be involved in four activities:
    - Developing the plan
    - Prevention Outreach—helping identify people who could be at risk of homelessness
    - Carrying out prevention, diversion, and re-housing activities
    - Providing support to families after they receive assistance to improve stability, well-being, and self sufficiency

- Key partners include organizations, agencies, and members of the public who fund programs or interact regularly with people in crisis, poverty, or at risk of homelessness. These may include the following:
- Head Start and Early Head Start Agencies, TANF Agencies
- WIC Agencies
- Hospitals and Health Clinics
- Mental Health Agencies
- Public Housing Agencies
- Property Mangers/Landlords
- Utility Companies
- Police
- Food Banks
- Substance Abuse Treatment Programs
- Child Welfare Agencies
- Jails, Prisons, and Probation Offices
- Courts
- Culturally Specific Organizations
- Shelters and Homeless Assistance Providers
- Churches and other Faith-Based Organizations
- Domestic Violence Programs
- Veterans Services Organizations
- Public Housing Tenant Associations
- Legal Aid Agencies
- School Homeless Liaisons
- Community Resource Centers
- Family Support Centers
- Businesses
- Workforce Centers
- Unemployment Offices
- Community Action Agencies
- Help Lines

## Overview

An effective prevention and re-housing system has three layers: prevention, shelter diversion, and Rapid Re-housing. Homelessness prevention serves a large number of people who are at risk of homelessness and is the least expensive intervention on a per-client basis. If prevention fails to identify somebody at risk of homelessness or fails to prevent a person's homelessness, that person may contact and enter the shelter system. Diversion is essentially an eleventh hour effort to prevent homelessness by assisting people who apply for shelter by identifying other safe housing options and resources, even if they are temporary. If prevention and diversion fail, and people become homeless, then Rapid Re-housing minimizes their stay in homelessness by quickly helping them move into permanent housing. On average, the interventions should get progressively more intensive, although the level of assistance for an individual household will depend greatly on the specific circumstances of that household.



Though prevention, diversion, and re-housing target distinct populations, many of the activities are similar, it is entirely possible, and in some cases preferable, to have a single program or provider perform two or three of those functions.

## Prevention

Effective prevention programs typically assess immediate housing needs, explore housing options and resources, provide flexible financial assistance, and, when appropriate, offer voluntary case management services focused on housing stabilization. Mandating case management usually offers no added benefit. In cases where the current housing situation cannot be stabilized, housing location and short-term rental assistance may be necessary to help find a

new housing unit. (Activities—Housing Location, Flexible Financial Assistance, Rental Assistance, and Case Management—are described below).

Prevention assistance must be carefully targeted to have a meaningful impact on homelessness, as most people who have a housing crisis do not become homeless. At a minimum, prevention resources should be targeted to people who have extremely low incomes (below 30 percent of area median income), who have a demonstrated housing crisis (e.g. request to vacate doubled up situation), and who lack protective factors, such as friends or family members who can help them. If possible, Homeless Management Information System (HMIS) data or other data about homelessness in the community should be assessed to identify additional factors that would help target resources to those most at risk of homelessness. In the absence of local data, programs should use risk factors described later in this document.

### **Diversion**

Diversion programs attempt to prevent homelessness for people who are applying for shelter. Diversion programs try to help people return to the housing they just left or move in with friends or family using financial incentives or mediation. If that situation cannot be made permanent, then the diversion program will work to immediately locate other housing. Targeting is clearer with diversion programs because people applying for shelter are at high risk. As with prevention programs, diversion programs typically involve one-time financial assistance and the offer of brief case management. When that is not sufficient, then housing location and short-term rental assistance may be necessary.

### **Rapid Re-housing**

Re-housing programs work with people who are already homeless to help them quickly move into rental housing. Rapid Re-housing programs tend to be short-term (1 - 12 months) and involve housing location, financial assistance, and an offer of case management. Short-term rental assistance is provided when necessary. When serving people with significant disabilities or with very limited income capacity, Rapid Re-housing programs must coordinate with other community resources to ensure that participants are linked to ongoing assistance, such as housing vouchers, intensive case management, or assertive community treatment.

### **Prevention, Diversion, and Re-housing Functions**

**Housing Location** - Housing locators identify affordable housing and encourage landlords to rent to people who are homeless or at risk of homelessness. They also help negotiate reasonable rents and lease terms and work to address credit issues with a potential tenant. Housing locators are generally available to the landlord and tenant in case there are problems.

**Flexible Financial Assistance** - This activity includes assistance for first and last months' rent, deposits, utilities, rental assistance for a final month at a location, moving cost assistance, or other activities that will directly help a person stay in his or her current housing situation or quickly move to a new location. Disbursements should be requested by a staff person or case manager working with the household and based on whether funding will help overcome an immediate barrier to entering or maintaining housing. Grants will average approximately \$1,500, but depend greatly on the circumstances and the community.

**Short/Medium-Term Rental Assistance** - Rental assistance is provided for 1-18 months depending on the needs of the household. Rental assistance may be deep (tenant contributes no more than 30 percent of income for rent) or shallow (subsidy pays for a smaller portion of the rent). Rental assistance should target people who will likely not be able to move quickly into permanent housing without it.

**Case Management** - Case Managers (sometimes referred to as service coordinators) work with people to ensure that their housing situation is stable and that they access the benefits and services they need. Case managers also help mediate disputes between tenants and landlords. Case managers should refer participants to other community providers that can better address other service or self-sufficiency needs.

To be most effective, communities should offer all three types of services (prevention, diversion, and re-housing). Having only a diversion or re-housing program will encourage people in crisis to enter the shelter system to get assistance, which could unnecessarily overwhelm the shelter system. Lacking a re-housing program will likely result in people staying in a shelter longer than necessary, which is costly and results have poor outcomes.

Integrate and coordinate programs whenever possible. For example, the same housing locators and case managers can serve people through the prevention, diversion, or re-housing programs. In some smaller communities, a single program could provide eviction prevention, diversion, and re-housing interventions. In most communities, a single program could provide flexible financial assistance and rental assistance for people in all three types of programs.

A community should also consider other resources available to them to supplement their prevention and re-housing efforts. For example, States are receiving additional funding for Temporary Assistance to Needy Families (TANF) that can be used to provide short-term rent assistance and other help that effectively prevents or ends homelessness.

**GOAL OF THE CITY OF LANCASTER'S  
HOMELESSNESS PREVENTION AND RAPID RE-HOUSING PROGRAM**

**Goal of the Plan**

- Help people who become homeless to quickly move into permanent housing.

Most people who become homeless can exit homelessness quickly with assistance. The plan should address how people will be assessed within a few days of entering shelter for their strengths, resources, and barriers to exiting homelessness, focusing on credit problems, prior evictions, income, and any other factors that are immediate obstacles to renting an apartment or returning to family/friends. The housing search process should begin as soon as possible.

**Goal Measures**

- Number and percentage of households who are assessed for their barriers to housing within 7 days of shelter entry
- Average length of time people are homeless (for all homeless people in the system and for just those served by a re-housing program)
- Percentage of households who receive re-housing services who do not become homeless again within 12 months
- Overall number of people in shelter
- Number of landlords and the number of units of housing that participate in the re-housing program

**Funding Allocation Template and Sample Activities**

The City of Lancaster has prepared a template for allocating funds among different activities and more specific sample activity charts and budgets for 4 hypothetical grantees. The template and charts are intended as a guide. A grantee should also consider other resources that may be available, community needs, and local housing and staffing costs.

**Sample Activities Chart for a State Receiving \$10 million**

Activity	Amount	Detail
Housing Location	\$1,000,000	\$750,000 8 Housing Location Staff and support
		\$100,000 Marketing to property owners
		\$150,000 Developing and maintaining a housing resource database
Flexible Financial Assistance	\$4,000,000	Average grant of \$1,000 will serve approximately 4,000 households
Short-Term or Medium-Term Rental Assistance	\$3,100,000	Average assistance of \$500 per month for 3-6 months will serve approximately 1,500 households
Case Management and Housing Stabilization	\$1,000,000	11 caseworkers will serve approximately 1,300 households
Outreach	\$200,000	
Data Collection and Management	\$200,000	
Administrative Costs	\$500,000	

## Notes

This chart is intended as a guide. Other considerations include the existing infrastructure, community needs, and local costs of housing and labor. The spending plan is for 24 months. The City of Lancaster is required to spend 60 percent of resources within 24 months and 100 percent within 36 months.

Flexible Financial Assistance: Average grants are approximately \$1,500. Grants related to homelessness prevention may be lower, while those related to diversion and re-housing may be higher.

Caseworkers: A typical client to caseworker ratio for prevention and re-housing programs is 30 to 1, and clients are typically served for approximately 6 months, although it can range from 3 to 18 months.

Rental Assistance: Typical rental assistance will involve 3-6 months of assistance at approximately \$500 to \$1,000 per month, although rental assistance may be needed for longer.

Housing Resource Database: A centralized database of affordable and available rental units.

## Targeting Criteria for Homelessness Prevention

This tool describes a sample eligible population for homelessness prevention and provides an example of a high-risk group that should be targeted for prevention assistance. If possible, the highest risk profile described below should be informed or replaced by data from a Homeless

Management Information System (HMIS), surveys of homeless people, or other local information. In general, the opinions of providers and advocates are an unreliable source of information about risk of homelessness.

### **Eligible Population**

Households (including unaccompanied adults or youth, adult couples, single adults with children, and couples with children) with all of the following characteristics:

- Have an income below 30 percent of area median income
- Have a housing crisis, including an eviction action, severe overcrowding, or documentation that they will no longer be able to stay at their current location
- Lack other resources or support networks to obtain stable housing

### **Highest Risk Population**

Households (including unaccompanied adults or youth, adult couples, single adults with children, and couples with children) with all of the following characteristics:

- Meets the criteria for eligible population above
- Has income below 15 percent of area median income
- Has one or more of the following characteristics
- Is a family with children and doubled up
- Has experienced 2 or more moves in the past year
- Has a young child (under age 2)
- Is under age 24 and was in foster care at some point
- Has a prior episode of homelessness
- Has an eviction from public or assisted housing
- Has experienced domestic violence in the past 30 days
- Has missed 2 or more appointments with a caseworker
- Has a severe and persistent mental illness
- Is being evicted from public or assisted housing