

**School of Social Work**

**Portland Campus**  
716 Stevens Avenue  
Portland, ME 04103  
(207) 221-4503 T  
(207) 221-4719 F

January 5, 2012

Douglas Gardner, Director  
Department of Health and Human Services  
City of Portland  
389 Congress Street  
Portland, Maine 04101

RE: Final evaluation of the Homelessness Prevention, Rapid Re-housing program

Dear Mr. Gardner,

Attached please find the final evaluation report of the Homelessness Prevention and Rapid Re-housing program known as HPRP, a partnership between the City of Portland, Preble Street and Maine Housing. Data collection and analysis of HPRP has been occurring since December 2009. The data suggests the program has been effective at meeting its goals of preventing homelessness as well as providing rapid housing for people who were homeless. I have summarized some of the highlights of the program here:

The data suggests that the HPRP program has been an important factor in providing temporary, short term support to homeless and at-risk participants resulting in a significant saving of emergency shelter bed nights.

- Through both Prevention and Rapid Re-Housing work, a total of 1306 individuals were stably housed
- For those participants who were previously homeless and in emergency shelters, the program housing placements represented a total of 75,730 bed nights.

The City chose to use HPRP funding to target two specific groups, based on identified community need: Engagement and Stabilization (long term homeless) and Diversion and Prevention (short term homeless or prevention). A summary of the findings of the two programs are as follows:

Engagement and Stabilization

- The total number of individuals served by the Engagement and Stabilization program was 329.

- The average length of time an Engagement and Stabilization participant was enrolled in the program was 4.5 months.
- The average benefit which the Engagement and Stabilization participant received was \$2,398 in rental assistance and \$722 in security deposit assistance.
- The portion of the participants who had under 500 shelter bed nights, 286, in the Engagement and Stabilization program will save a projected 9,353 shelter bed nights through enrollment in this program. The savings occurs because they are not accessing a bed at the shelter after they have been assisted with rent or security deposits through this program. The shelter bed night savings from these participants equates to at least \$205,559 over the grant period and more if extended into future years. This savings does not include the additional savings from other emergency services. Other data suggests these costs savings are at least 1.5 times the actual bed night savings.
- Data on prior high frequency users of shelter nights, those participants who had 500 or more nights in the shelter prior to participation in the Engagement and Stabilization program suggests an even more significant savings in shelter bed nights by transitioning out of homelessness. Additionally, these high frequency users also showed marked increases in their self sufficiency matrix scores.

#### Diversion and Prevention

- A total of 997 individuals, (360 households) were served by this program. Of those, 55 percent were female and 45 percent were male. The average age of the female participant is 34 and the average age for males is 37. Of the participants, 34.2 percent were children with an average age of 12.
- 17.3 percent of the participants reported being victims of domestic violence in the past 12 months. Of those who were victims of domestic violence in the past 12 months, 10 percent were children.
- Individuals reported positive changes in their income after receiving Diversion and Prevention services. The average income at intake was \$1,002.84. The average income at exit was \$1,243.50.
- The average length of time for participants served under this program was 2.0 months with the average rental support of \$1,142.80 and utility assistance of \$334.20.

The following report is the program evaluation in detail. Thank you for the opportunity to work with the HPRP team on this project. The team's dedication and attention to detail was instrumental in maintaining the integrity of the data and in the analysis of the programs findings.

Please feel free to contact me if you have any questions or if you would like me to present these findings to other groups.

Sincerely,



Thomas Chalmers McLaughlin, PhD

Evaluation of the Homelessness Prevention and Rapid Re-Housing Program for Portland

Final Report

Thomas Chalmers McLaughlin

University of New England

January 2012

tmclaughlin@une.edu

### Program overview

The HPRP program was created through the American Recovery and Reinvestment Act of 2009 funding passed by Congress and signed by the President. The intent is to serve persons who are homeless or would be homeless but for this assistance and can remain stably housed after this temporary assistance ends. In Portland, the program has two broad goals 1). Prevent people living in the City of Portland from becoming homeless; and 2) Help people who become homeless to quickly move into permanent housing. To accomplish these goals, services were divided into two different programs as defined by one of the program partners, Maine Housing, which are; Engagement and Stabilization and Diversion and Prevention. The Engagement and Stabilization program is targeted toward those individuals who have been homeless for some time and hopes to rapidly re-housing them into a stable housing situation. Within this vein, the Portland HPRP program also chose to focus on individuals who were chronically homeless and had been staying at the shelter for longer periods of time. The second program, Diversion and Prevention, was targeted toward people who were either very new to homelessness and/or to prevent them from ever becoming homeless.

### Evaluation questions

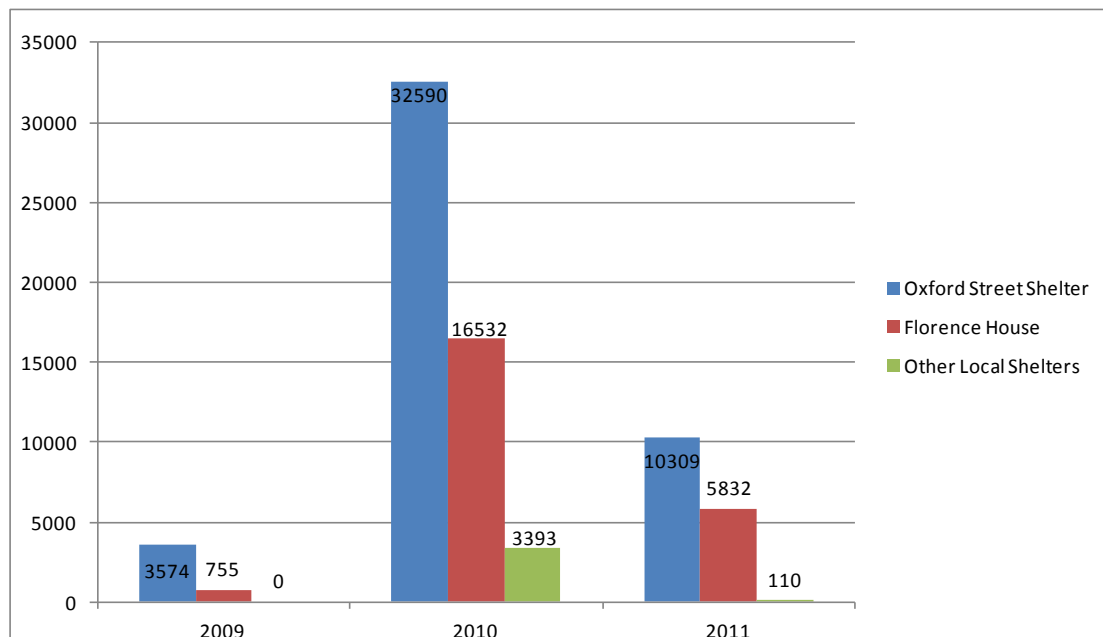
To assess the overall impact of the HPRP program, we elected to explore both the demographics of the population who accessed both programs, and also the types of activities provided by staff that suggested promise in developing best practice models for working with these groups. We also chose to look at the impact of assistance such as case management services, type and length of financial assistance and participants overall ability to transition to a more supportive and stable environment. Additionally, we also wanted to look at changes in participants self sufficiency

matrix scores upon exit from the program. Finally, we also selected to look at the programs overall impact on the shelter usage during the grant period.

### Data collection and analysis

All participants in the program complete screening forms which determine their eligibility for either program as well as the type of assistance for which they are eligible. Additionally, each participant completes, at intake, a self sufficiency matrix which measures six indicators; employment, income, food/nutrition, health care coverage, mobility, and shelter/housing. These indicators are on a scale of 1 to 5 with 1 indicating in crisis and 5 indicating empowered. See appendix 1 for the instrument. While enrolled in the program, additional data is collected including number of case management encounters with the participants, and type and amount of financial assistance. Upon exit from the program, participants also complete a final self sufficiency matrix which is then used for comparison to the intake matrix. Additional analysis was conducted to explore the impact and frequency of case management on matrix scores.

### **Overall program impact-Shelter Bed nights**



Many of the 1,306 clients placed into stable housing were from our Engagement and Stabilization Program and represent some of our most chronically homeless individuals. HPRP was able to quickly move these clients out of the shelter and into stable housing and bridge the rent until long term vouchers became available. This targeted assistance helped prevent many thousands of additional bed nights that would have been used at our local shelters. Here is the shelter night breakdown for those stably housed: Oxford Street Shelter: 46,473; Preble Street Florence House: 23,119; All Other Local Shelters: 3,503 for a total of 73,095 Bed Nights.

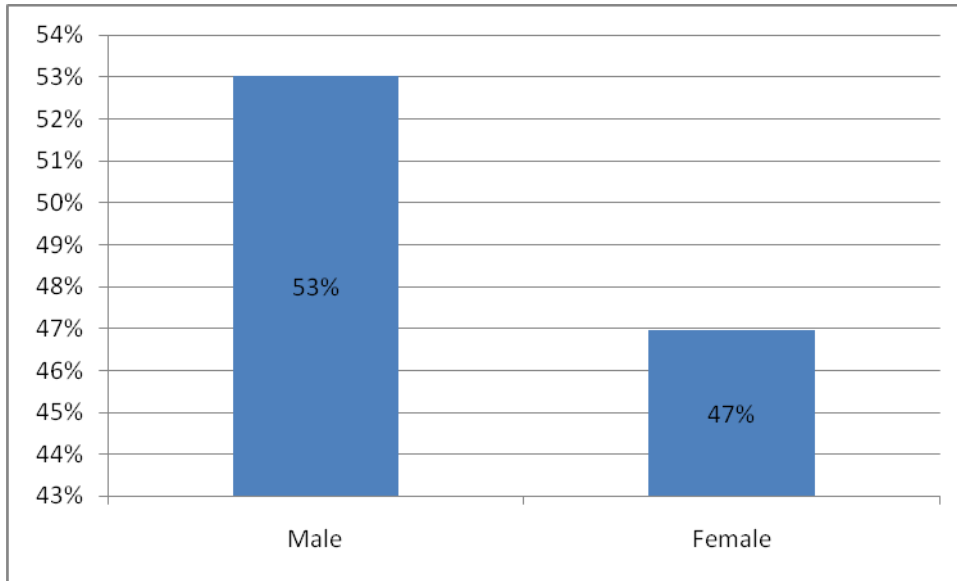
### **Engagement and Stabilization Program**

The Engagement and Stabilization program is designed to work with participants who are longer term or chronically homeless.

These participants may have other confounding issues such as mental illness or co-occurring disorders which impede their ability to find and maintain permanent housing. Participants who qualified for the Engagement and Stabilization Program may also access financial assistance as well as case management to help stabilize them as they move to permanent housing. Engagement is not long term by typical program standards. However, the type of work and level of engagement by case workers with the participants is more significant than the Diversion and Prevention program. The type of case management was explored further in this evaluation. Data from December 2009 through November 30, 2011, suggest 337 individuals have been served by this part of the program.

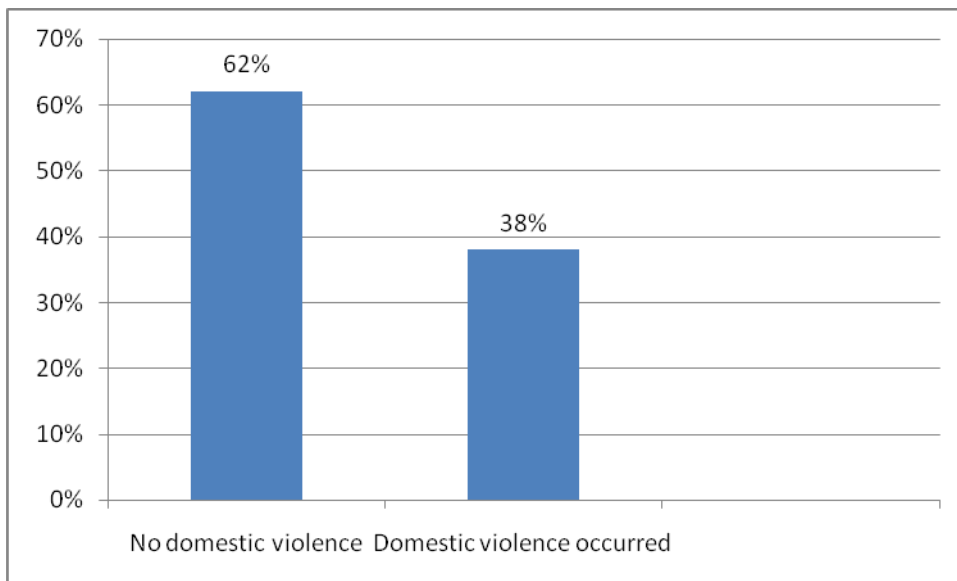
*The average benefit for a recipient of this program was \$2,398 with the average length of time in the program of 4.5 months. This equates to about \$600 a month of assistance.*

Figure 1: Participant demographics



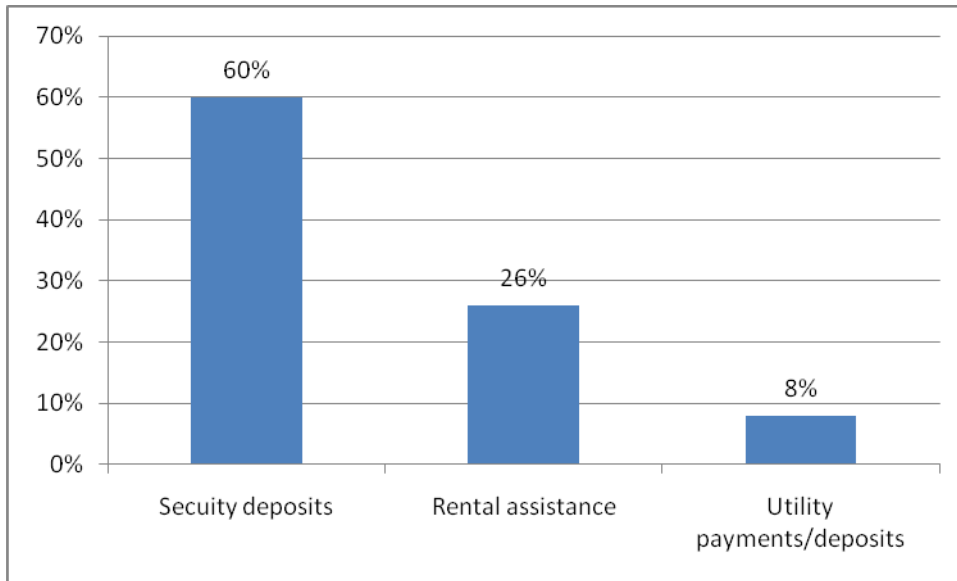
The average age of participants in the program is 39 for females and 42 for males. Of those, 86 percent are Caucasian, 9 percent are African American, 2 percent are Native American and 1 percent are Pacific Islander. Additionally, 6 percent identify themselves as Hispanic or Latino.

Figure 2: Domestic violence



As figure 2 suggests, a majority of the participants reported no domestic violence. Of those who did report domestic violence, 12 percent reported abuse in the last 6-12 months and 88 percent reported domestic violence more than a year ago.

Figure 3: Type of assistance received



The data suggests that the most frequent assistance provided was for security deposits. Sixty percent of households received security deposits with a average deposit of \$722. Rental assistance, which was the second most frequently provided assistance, had a median cost \$1,844 – which was distributed usually over the course of several months. Finally, utility payments averaged \$483 per participant, which many timkes included arrears. A small percentage of those served received moving assistance.



### Length of time in the program

The median length of time in the program for all engagement and stabilization participants was 132 days with a range of 23 days to 527 days.

### Average household benefit

Of those households which were assisted by the Engagement and Stabilization program, the most frequent support was security deposits and rental assistance. The median household benefit for rental assistance is \$1,844 and a security deposit of \$658.

*With nearly 1.2 million dollars in utility, rent and security deposit payments, during the grant period, the HPRP program has also served as an important support mechanism for utility companies and local landlords during these difficult economic times.*

Moreover, the median length of time which these households was supported is 4.5 months. As such, the program is fulfilling its mission of providing temporary, short term assistance to the majority of those who are participating in the program. Moreover, security deposits may serve as a sustainable benefit for individuals as they can transfer those deposits to other housing as their individual and family needs change.

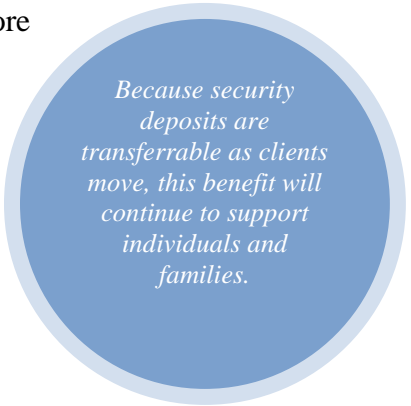
### Shelter Bed nights saved for the those who were stably housed

According to the housing data on the high frequency users, 85 percent, or 286 of the participants served were housed while in the program. Using the City of Portland average shelter stay of 32.67 days per participant, this suggests a shelter bed night savings by participants of 9,343 days over the grant period. At the average daily rate of \$22 per day, this calculates to \$205,559 in cost savings over the grant period through of the enrollment participants in the engagement and stabilization program. This evaluation focused on the cost savings of the emergency shelter bed nights and did not explore other cost savings associated with other aspects of the emergency

assistance system. It is assumed that these cost savings for this population would also be significant.

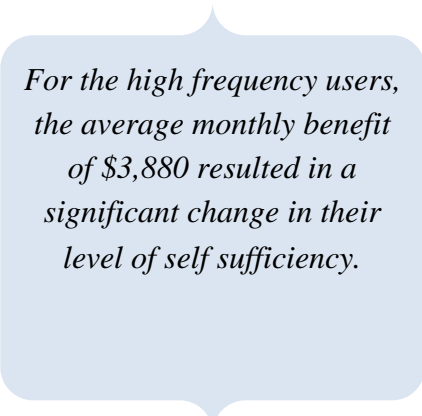
### Participants with 500 or more shelter bed nights prior to admission to the program

As suggested earlier, program administrators and case managers focused on working with participants who were high users of shelter services prior to enrollment in the Engagement and Stabilization program. The program participants chose this focus because of the high number of people who chronically homeless and in the shelter system. These high users of shelter services are defined as those participants who had used the shelter for 500 or more nights prior to enrollment in the Engagement and Stabilization program. Because of the important focus on finding and supporting housing for these most difficult to house participants, we focused our analysis on the impact this program has had on the lives of the high frequency users.



*Because security deposits are transferrable as clients move, this benefit will continue to support individuals and families.*

To assess the impact of this program on this population we selected participants who met the 500 or more days of shelter stays and, who had been enrolled in the Engagement and Stabilization program for more than 7 months. Additionally, we focused the analysis on those individuals who had received both financial assistance and case management services. This method was chosen because initial analysis suggested a significant correlation to the high users of shelter services and case management. Seventy two (72) individuals met this criterion. For these

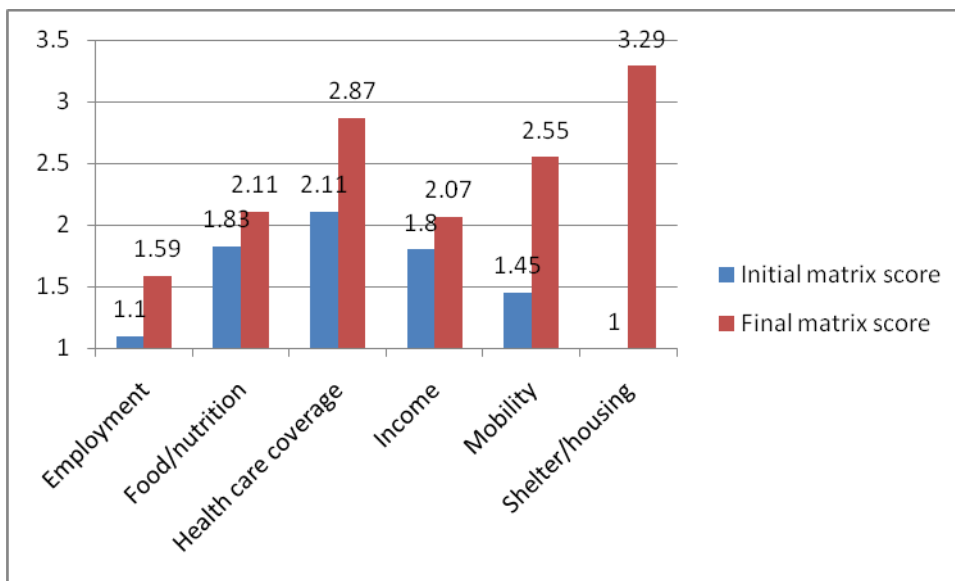


*For the high frequency users, the average monthly benefit of \$3,880 resulted in a significant change in their level of self sufficiency.*

participants, the median benefit was for rental assistance was \$3,880 with an average length of time in the program of 8 months. Given that a majority of these participants were previously housed at the shelter, this equates to a significant savings in shelter bed nights through the transition of these participants to the engagement and stabilization program.

Additionally, the analysis also suggests increases in participant’s ability to be self sufficient with appropriate supports. The data suggests a positive relationship between the number of case management occurrences and the outcomes on the self sufficiency matrix. On the indicators of housing, mobility and income, these high users of shelter services saw increases in matrix scores of nearly 1.4 points.

Figure 4: Changes in self sufficiency matrix scores for all engagement and stabilization participants



Scale 1-in crisis, 2-vulnerable, 3-safe, 4-building capacity, 5-empowered

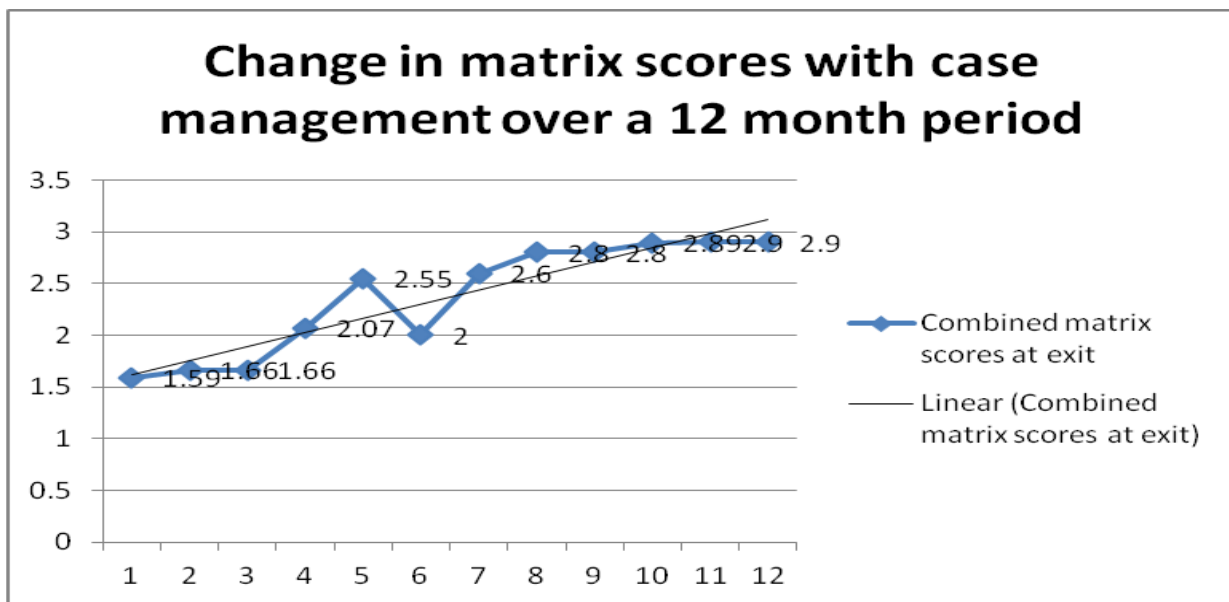
Final exit matrix scores suggest that participants clearly improved on the self sufficiency matrix upon exit from the program. Not surprisingly, participants scored highest in shelter and housing.

Employment and income showed some changes upon exit. This may be due to the nature of the clients who are involved in the program.

Relationship between case management and increased scores on the self sufficiency matrix

The data suggests that the combination of case management and financial support is an important factor in increasing participant scores on the self sufficiency matrix on exit. Those participants who received more than 1 check in by staff, tended to score better upon exit then those who did not have more than one check in. Additionally, those who are in the program longer, tend to have better outcomes then those who are in the program for shorter amounts of time. Further analysis suggests that those who are in the program for 3 months or longer, tended to have higher scores on exit then those clients who were in the program less than 3 months.

Further analysis suggests that the longer the person is in the program, and is receiving case management, the better their scores on the self sufficiency matrix scale at discharge.



As the trend line suggests here, the combined scores on the matrix increase the longer the person is in the program and is receiving case management.

The following is an excerpt from an HPRP

Engagement and Stabilization Program participant:

Ernesto was a chronically homeless individual who spent 10 years living on the street, 1500 of those nights spent at our local Portland shelter. Ernesto had also been struggling with substance abuse and mental health issues. He migrated to the U.S. from Monterrey, Mexico over 30 years ago. After his



family passed away he began working in the fields in Mexico as a migrant worker. Ernesto also has a physical disability with one of his legs being significantly shorter than the other, this disability only allowed Ernesto to work a few years in the fields giving him hardly any chance to receive SSI benefits now in his older age. After much outreach, Ernesto agreed to meet with an HPRP worker to create a plan to locate him safe and affordable housing. Ernesto was immediately put on a waiting list for a long term subsidy (Shelter + Care). HPRP was able to house Ernesto immediately after his name was added to the wait list. Using the housing first model, Ernesto was moved in to an apartment and assigned a specific HPRP case worker to work with him to set up services that he had qualified for and needed for many years but was never able to access them due to his substance abuse issues. With the help of HPRP case workers, Ernesto now has health care benefits through the State of Maine, Food Stamps and has submitted

an SSI application. Ernesto was enrolled in our HPR Program from March 2010 through February 2011. To this day he remains successfully housed and has transitioned to his long term subsidy. In speaking with Ernesto about his experience with HPRP he says “I have come a long way, I remember all those nights I spent alone sleeping under bridges and in parks. I remember how the emotions took over me and my eyes filled with tears, when my caseworker gave me my keys and said this is your new apartment.” Ernesto said it was the first time he had ever had his own apartment, his own place, a place to call home, “where I can leave my stuff and know it will be there when I come home.”

### **Diversion and Prevention Program**

The Diversion and Prevention program is significantly different than the Engagement and Stabilization program. The primary purpose of this program is to assist individuals and households who are at imminent risk of homelessness by providing financial assistance and stabilization services to keep individuals and families stably housed. The program is also designed to provide rapid re-housing and stabilization services to those households experiencing recent homelessness.

### Participant demographics

The data suggests that 997 individuals or 360 households have been served by this program. Of those, 55 percent are female and 45 percent are male. The average age of the female participant is 34 and the average age for males is 37. Of the participants, 34.2 percent are children with an average age of 12. Additionally, 17.3 percent of the participants reported being victims of domestic violence in the past 12 months. Of those who were victims of domestic violence in the past 12 months, 11.5 percent were children.

### Changes in income

Households also reported changes in their income after involvement in the diversion and prevention program. The average income at intake was \$1,002.84-(n=182). The average income at exit was \$1,243.50-(n=108).

### Other benefits participants reported receiving by at intake

Participants in the diversion and prevention program also reported receiving non cash assistance upon entry into the program. Forty one percent reported receiving MaineCare, 32 percent reported receiving SNAP benefits, 5.1 percent reported receiving a section 8 voucher, 5 percent reported receiving WIC and 4 percent reported receiving Medicare.

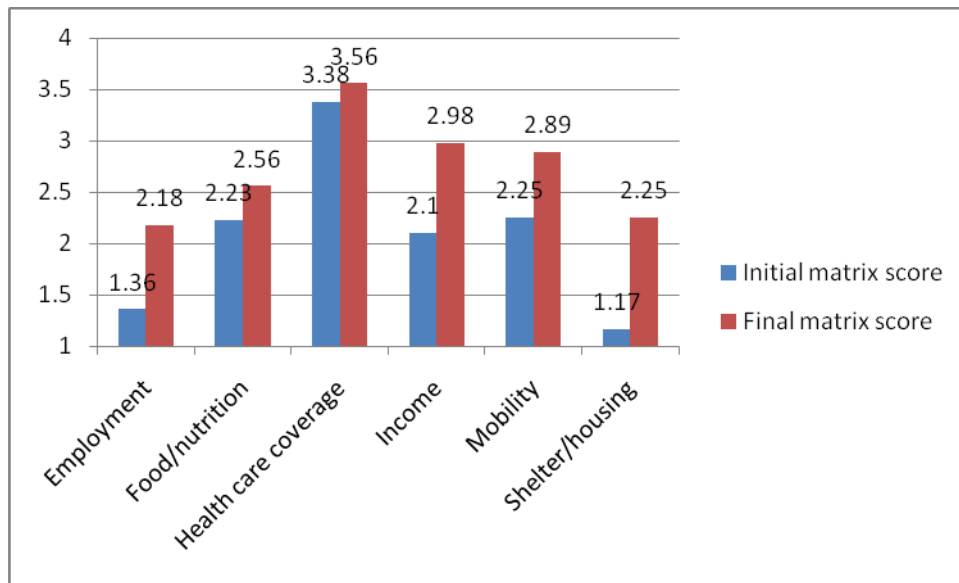
### Type of financial assistance received-per household

Type of assistance	Percent of total	Median support
Motel/hotel voucher	<.01	\$372.12
Moving assistance	5%	\$240.33
Rental assistance	40%	\$1,059.99
Security deposit assistance	45%	\$667.87
Utility deposits	2%	\$300.87
Utility payments	6%	\$460.11

### Average household benefit

The data suggests that the average household benefit for participants served through the Diversion and Prevention program is shorter than the Engagement and Stabilization program. The average length of time for individuals served under this program was 2.0 months with the average rental support of \$1,831 and utility assistance of \$460.

Figure 5: Change in self sufficiency matrix



Scores :1=in crisis; 2=vulnerable;3=safe;4=building capacity;5=empowered

The changes in matrix score suggest that most households showed significant improvement upon exit. Change in housing status was the highest. Changes in other key indicators such as income and food suggest that the program also afforded the ability for families to work on these other important areas.

The following is an excerpt from an HPRP Diversion and Prevention Program participant:

John is a 64 year old gentleman who had worked his entire life and had lived in the same building for 16 years with his partner. John's building was sold and the new owner increased the rent. John was only receiving





\$425 from SSI benefits each month and was no longer able to afford his rent, leaving John and his partner out on the street, with no family or support systems in the community. John and his partner began sleeping in stair wells and outside in parks until someone was kind enough to donate them a tent. For over a hundred nights John and his partner slept in a tent on Commercial Street; they carried drinking water in jugs from a local restaurant nearby and cooked on a fire all while enduring the elements. With winter fast arriving and nowhere else to turn, John came into the HPRP office seeking assistance; he was tired of trying to get by on his own. John and his partner were very skeptical of the “system” and our ability to help them find housing in their current situation, but they agreed to complete the HPRP intake process. After a brief assessment, John and his partner were enrolled in the program. Immediately they were put on a long-term subsidy waiting list. After only a week of being enrolled in the HPRP program their caseworker was able to locate housing in an apartment in the neighboring town, a town which they previously expressed interest in living in. Being able to house John and his partner so rapidly was a great accomplishment, and speaks volumes to how the HPRP program has helped not only John and his partner but hundreds of homeless households, and those in imminent risk of becoming homeless. Now that John and his partner had securing housing they needed to furnish their unit. With a quick trip to the local furniture bank with their case worker John and his partner secured mats, a blanket, plates, cups and one pot. John and his partner were enrolled in the HPRP program for almost one year, and through great case management, they were able increase John’s SSI benefits by \$200 per month; receive full health care coverage through the State; and receive food stamps. The HPRP Program acted as a financial bridge until their long term subsidy came in, which they have successfully transitioned to. During our last interview, we asked John what he remembers most about the impact of the HPRP Program: “the thing I think about the most is that one pot that

we received [*from the furniture bank*] and I remember making tea and then washing it and making our first meal in our new home - we had spaghetti and meatballs. I now have 10 pots in my nice warm and furnished apartment, but you know what? I still have that pot, our first pot! It serves as a reminder of how HPRP has changed our lives.”

### Conclusions

The data suggests that the Diversion and Prevention program clearly has made a difference in meeting the needs of individuals and families. As a program designed to provide temporary support for households at imminent risk of homelessness or who are very recently homeless, those who are the most successful are individuals who have higher initial intake matrix scores. Given the median time a household was enrolled in the program, this limited assistance provided in a structured manner seems to make a clear difference for households. Similar to the Engagement and Stabilization program, the number of check-ins by case workers also continues to suggest higher rates of success for participants. In fact, the more check-ins, the greater likelihood of increased income and higher matrix exit scores.

### Overall HPRP Evaluation

The data clearly suggests that the HPRP program has been successful in two important areas: First, the program was successful in diverting those who qualified for services away from other assistance programs and in helping people remain stably housed. Secondly, for the chronically homeless who qualified, the program provided for a way to transition from the shelter to permanent housing opportunities. Additionally, the indicators of self sufficiency for those who were previously homeless were higher upon exit from the program.

Moreover, the overarching goal of the HPRP program was to establish itself quickly and to begin supporting individuals and families rapidly. Given the nature of how the program developed and the number of individuals served, the funding was instrumental in providing rapid assistance and support. Additionally, as part of the Recovery Act, this program also provided some relief to the shelter system in Portland in general and at a time when shelter bed nights were increasing and space was at a premium.

Another important aspect of the HPRP program was the assistance it provided directly to utilities, small businesses and landlords in Portland. Given the strict inspection standards associated with accessing these funds for housing, this program had an ancillary effect of compelling landlords to improve rental units in order to meet certification for acceptance of HPRP funds for unit rental. Additionally, because a of the significant amount of funding dedicated to security deposits, nearly \$700,000 in funding will be transferable for individuals and families as they move to other housing units over time.

### **Additional resources**

For more information on the HPRP program and the City of Portland activities, please see:

Housing and Urban Development HPRP program overview

<http://www.hudhre.info/hprp/index.cfm?do=viewHPRPIssuances>

City of Portland, HPRP program overview and monthly statistics

<http://www.ci.portland.me.us/hhs/sshprp.asp>

City of Portland, Social Services

<http://www.ci.portland.me.us/hhs/socialservices.asp>

Maine Housing HPRP program overview

<http://www.mainehousing.org/recovery/ARRAHPRP>

Please complete one sheet for each person served, whether they are an individual or a family member

Evaluation Date: \_\_\_\_\_

Do you need an interpreter/language line?  Yes  No Language: \_\_\_\_\_

**Step 1: Housing Status Eligibility Screening**

Client name: First: \_\_\_\_\_ MI: \_\_\_\_\_ Last: \_\_\_\_\_

Social Security Number: \_\_\_\_\_ SSN Type:  Full  Partial  Don't know  Refused

Date of Birth: \_\_\_\_\_ DOB Type:  Full  Approximate or Partial  
mm/dd/yyyy format

Race: (if client identifies with multiple races, please indicate P= Primary S= Secondary)

White  Black/African American  Asian  American Indian or Alaska Native  
 Native Hawaiian or Other Pacific Islander  Don't know  Refused

Ethnicity:  Hispanic/Latino  Other (Non-Hispanic/Latino)  Don't know  Refused

Gender:  Female  Male  TG Male to Female  TG Female to Male  Other  Don't know  Refused

Does client have a disability of long duration:  Yes  No  Don't know  Refused

U.S. Military Veteran/served in armed forces (only 18 and older):  Yes  No  Don't know  Refused

**Questions in this box are only required of adults (18 and over) and unaccompanied youth (17 and under)**

Type of living situation on the night before program entry (i.e. last night):

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> Emergency shelter                           | <input type="checkbox"/> Rental by Client no subsidy    | <input type="checkbox"/> Safe Haven                       |
| <input type="checkbox"/> Transitional housing for homeless           | <input type="checkbox"/> Owned by Client no subsidy     | <input type="checkbox"/> Rental by client w VASH          |
| <input type="checkbox"/> Permanent housing for homeless              | <input type="checkbox"/> Staying / living w family      | <input type="checkbox"/> Rental by client w other subsidy |
| <input type="checkbox"/> Psychiatric Hospital / facilities           | <input type="checkbox"/> Staying / living w friend      | <input type="checkbox"/> Owned by client w subsidy        |
| <input type="checkbox"/> Substance Abuse facility                    | <input type="checkbox"/> Hotel / Motel no ES voucher    | <input type="checkbox"/> Other                            |
| <input type="checkbox"/> Hospital (non-psychiatric)                  | <input type="checkbox"/> Foster care home / group home  | <input type="checkbox"/> Don't know                       |
| <input type="checkbox"/> Jail, Prison or Juvenile Detention facility | <input type="checkbox"/> Place not for human habitation | <input type="checkbox"/> Refused                          |

Length of stay at location selected above:  1 week or less  More than 1 week but less than 1 month  
 1 to 3 months  More than 3 months but less than 1 year  1 year or longer  
 Don't know  Refused

Zip code of last permanent address: \_\_\_\_\_

Zip Code Type:  Full or Partial  Don't know  Refused to answer

County of last permanent address: \_\_\_\_\_

Are you a Domestic Violence survivor?  Yes  No Note: DV Hotline 874-1973

If yes, how long ago?  less than 3 months ago  3 to 6 months ago  6 to 12 months ago  
 more than 1 year ago  Don't Know  Refused

Current Housing Status:

- Literally Homeless (in a place not meant for human habitation; in a shelter; in a hospital but having been in Emergency Shelter or unsheltered prior to the hospital stay; having left Transitional Housing last night or timing out of Transitional Housing; or being a recent DV victim)
- Housed and at imminent risk of losing housing (being evicted from a private unit; being discharged from corrections or a hospital; or in condemned housing with no subsequent housing available and inadequate resources)
- Housed and at risk of losing housing (doubled up; at risk due to high housing costs; experiencing conflict or other conditions that put housing at risk and client has inadequate resources; danger not immediate.)
- Stably Housed (not at risk of losing housing)
- Don't know
- Refused

How Imminent is the Risk of Homelessness?

Less than 7 days  7-14 days  15-30 days  more than a month

**Housing Status Eligibility Determination**

meets housing status criteria for HPRP – recommended for income eligibility screening

not appropriate for HPRP at this time; referred to:  DHHS  GA  Food bank/Soup kitchen  
 Other ( \_\_\_\_\_ )

**Step 2: HPRP Income Eligibility Screening**

**Income received from any source in last 30 days**

- No
- Yes
- Don't know
- Refused

**Source and Amount of Income**

**Receiving income**

**\$ Monthly Amount from Source**

Earned income	<input type="checkbox"/> No <input type="checkbox"/> Yes	_____
Unemployed insurance	<input type="checkbox"/> No <input type="checkbox"/> Yes	_____
Supplemental Security income (SSI)	<input type="checkbox"/> No <input type="checkbox"/> Yes	_____
Social Security disability income (SSDI)	<input type="checkbox"/> No <input type="checkbox"/> Yes	_____
Veterans disability income	<input type="checkbox"/> No <input type="checkbox"/> Yes	_____
Private disability insurance	<input type="checkbox"/> No <input type="checkbox"/> Yes	_____
Workers compensation	<input type="checkbox"/> No <input type="checkbox"/> Yes	_____
Temporary Assistance for Needy Families (TANF)	<input type="checkbox"/> No <input type="checkbox"/> Yes	_____
General Assistance (GA)	<input type="checkbox"/> No <input type="checkbox"/> Yes	_____
Retirement income from Social Security	<input type="checkbox"/> No <input type="checkbox"/> Yes	_____
Veteran's pension	<input type="checkbox"/> No <input type="checkbox"/> Yes	_____
Pension from a former job	<input type="checkbox"/> No <input type="checkbox"/> Yes	_____
Child Support	<input type="checkbox"/> No <input type="checkbox"/> Yes	_____
Alimony or other spousal support	<input type="checkbox"/> No <input type="checkbox"/> Yes	_____
Other source	<input type="checkbox"/> No <input type="checkbox"/> Yes	_____

**Total Monthly Income:** \$ \_\_\_\_\_ x 12 = \$ \_\_\_\_\_  
Estimated AMI

**Non-Cash benefit received from any source in last 30 days**

- No
- Yes
- Don't know
- Refused

**Source of non-cash Benefit**

**Received Benefit**

Supplemental Nutrition Assistance Program (SNAP – Food Stamps)	<input type="checkbox"/> No <input type="checkbox"/> Yes
MEDICAID health insurance (Maine Care)	<input type="checkbox"/> No <input type="checkbox"/> Yes
MEDICARE	<input type="checkbox"/> No <input type="checkbox"/> Yes
State Children's Health Insurance Program (SCHIP)	<input type="checkbox"/> No <input type="checkbox"/> Yes
Special Supplemental Nutrition Program for Women, Infants and Children (WIC)	<input type="checkbox"/> No <input type="checkbox"/> Yes
Veterans Administration (VA) Medical Services	<input type="checkbox"/> No <input type="checkbox"/> Yes
TANF Child Care services	<input type="checkbox"/> No <input type="checkbox"/> Yes
TANF transportation services	<input type="checkbox"/> No <input type="checkbox"/> Yes
Other TANF-funded services	<input type="checkbox"/> No <input type="checkbox"/> Yes
Section 8, public housing, or other rental assistance	<input type="checkbox"/> No <input type="checkbox"/> Yes
Other Source	<input type="checkbox"/> No <input type="checkbox"/> Yes

**Income Eligibility Determination**

\_\_\_\_\_ meets income criteria for HPRP – recommended for full HPRP Assessment  
 \_\_\_\_\_ not appropriate for HPRP at this time; referred to: \_\_\_\_\_ DHHS \_\_\_\_\_ GA \_\_\_\_\_ Food bank/Soup kitchen  
 \_\_\_\_\_ Other ( \_\_\_\_\_ )

CERTIFICATIONS: By signing below I confirm that all information reported on this form is accurate and complete to the best of my knowledge. As the applicant, I also consent to having the above information entered into the statewide Homeless Management Information System (HMIS), and I further consent that information collected about me may be shared among HPRP agencies. I understand and consent that information about me may be used in a non-identifying manner for statewide statistics and research.

Applicant's Signature

Date

Screener's Signature

Date

ServicePoint Client ID #: \_\_\_\_\_ Staff Name: \_\_\_\_\_

Client name: First: \_\_\_\_\_ MI: \_\_\_\_\_ Last: \_\_\_\_\_

Please complete one sheet for each person served, whether they are an individual or a family member

Assessment Date: \_\_\_\_\_

HPRP Program Entry Date: \_\_\_\_\_

\_\_\_\_\_ HPRP **IMMINENT RISK** Full Assessment Prevention If current housing status is housed and at imminent risk of losing housing (being evicted from a private unit; being discharged from corrections or a hospital; or in condemned housing with no subsequent housing available, inadequate resources; or timing out of Transitional Housing)

\_\_\_\_\_ HPRP **HOMELESS** Full Assessment Rapid Re-Housing If current housing status is literally homeless (in a place not meant for human habitation; in a shelter; in a hospital but having been in Emergency Shelter or unsheltered prior to the hospital stay; having left Transitional Housing last night; or being a recent DV victim)

\_\_\_\_\_ **HOMELESS VERIFICATION/CERTIFICATION OBTAINED**

**HPRP FINANCIAL ASSISTANCE**

**SECURITY DEPOSIT** N/A \_\_\_\_\_

Have you found a unit? \_\_\_\_\_ When are you moving in? \_\_\_\_\_  
 How will this assistance prevent you from becoming homeless? \_\_\_\_\_

Amount needed \$ \_\_\_\_\_  
 Amount approved \$ \_\_\_\_\_ Initial \_\_\_\_\_

**RENTAL ASSISTANCE** N/A \_\_\_\_\_

Have you been or are you currently going through?  
 - Eviction \_\_\_\_\_ Yes \_\_\_\_\_ No \_\_\_\_\_ Don't know \_\_\_\_\_ Refused  
 Why are you being evicted? \_\_\_\_\_  
 Type of notice: \_\_\_\_\_ 30 day \_\_\_\_\_ 7 day \_\_\_\_\_ Writ of Possession  
 Date served? \_\_\_\_\_ (if yes, ask for copy of FED)  
 - Foreclosure \_\_\_\_\_ Yes \_\_\_\_\_ No \_\_\_\_\_ Don't know \_\_\_\_\_ Refused (if yes, obtain paperwork confirming)  
 When? \_\_\_\_\_  
 - Natural Disaster \_\_\_\_\_ Yes \_\_\_\_\_ No \_\_\_\_\_ Don't know \_\_\_\_\_ Refused  
 What type? \_\_\_\_\_

Monthly rent \$ \_\_\_\_\_ # months in arrears \_\_\_\_\_ Amount in arrears \$ \_\_\_\_\_  
 Do you currently or have you ever had a housing subsidy? \_\_\_\_\_ Yes \_\_\_\_\_ No \_\_\_\_\_ Don't know \_\_\_\_\_ Refused  
 IF YES, What kind? \_\_\_\_\_ Sec. 8 \_\_\_\_\_ Shelter + Care \_\_\_\_\_ BRAP \_\_\_\_\_ HOPWA \_\_\_\_\_ Other  
 What is your portion of the monthly rental payment? \$ \_\_\_\_\_  
 Do you owe any arrears to a housing agency? \_\_\_\_\_ Yes \_\_\_\_\_ No \_\_\_\_\_ Don't know \_\_\_\_\_ Refused  
 IF YES, which one? \_\_\_\_\_  
 How much? \_\_\_\_\_

Which subsidies have you already applied for?  
 \_\_\_\_\_ Sec. 8 \_\_\_\_\_ Shelter + Care \_\_\_\_\_ BRAP \_\_\_\_\_ HOPWA \_\_\_\_\_ Other \_\_\_\_\_ None  
 When? \_\_\_\_\_  
 Amount needed \$ \_\_\_\_\_ for \_\_\_\_\_ months  
 Amount approved \$ \_\_\_\_\_ for \_\_\_\_\_ months Initial \_\_\_\_\_

**UTILITY DEPOSIT** N/A \_\_\_\_\_

\_\_\_\_\_ Oil, Company Name: \_\_\_\_\_ Amount \$ \_\_\_\_\_  
 \_\_\_\_\_ Gas, Company Name: \_\_\_\_\_ Amount \$ \_\_\_\_\_  
 \_\_\_\_\_ Electric, Company Name: \_\_\_\_\_ Amount \$ \_\_\_\_\_  
 \_\_\_\_\_ Water/Sewer, Company Name: \_\_\_\_\_ Amount \$ \_\_\_\_\_  
 \_\_\_\_\_ Garbage Collection, Company Name: \_\_\_\_\_ Amount \$ \_\_\_\_\_  
 \_\_\_\_\_ Other, Company Name: \_\_\_\_\_ Amount \$ \_\_\_\_\_

Amount needed \$ \_\_\_\_\_  
 Amount approved \$ \_\_\_\_\_ Initial \_\_\_\_\_

ServicePoint Client ID #: \_\_\_\_\_ Staff Name: \_\_\_\_\_

Client name: First: \_\_\_\_\_ MI: \_\_\_\_\_ Last: \_\_\_\_\_

**UTILITY ASSISTANCE (Reminder: Check rent/utility reasonableness for this unit)** N/A \_\_\_\_\_

Have your utilities recently been or about to be shut off? \_\_\_ Yes \_\_\_ No \_\_\_ Don't know \_\_\_ Refused

If yes, which type of utility:

- \_\_\_ Oil, Company Name: \_\_\_\_\_ # months in arrears \_\_\_\_\_ Amount in arrears \$ \_\_\_\_\_
- \_\_\_ Gas, Company Name: \_\_\_\_\_ # months in arrears \_\_\_\_\_ Amount in arrears \$ \_\_\_\_\_
- \_\_\_ Electric, Company Name: \_\_\_\_\_ # months in arrears \_\_\_\_\_ Amount in arrears \$ \_\_\_\_\_
- \_\_\_ Water/Sewer, Company Name: \_\_\_\_\_ # months in arrears \_\_\_\_\_ Amount in arrears \$ \_\_\_\_\_
- \_\_\_ Garbage Collection, Company Name: \_\_\_\_\_ # months in arrears \_\_\_\_\_ Amount in arrears \$ \_\_\_\_\_
- \_\_\_ Other, Company Name: \_\_\_\_\_ # months in arrears \_\_\_\_\_ Amount in arrears \$ \_\_\_\_\_

Amount needed \$ \_\_\_\_\_

Arrearage amount approved \$ \_\_\_\_\_ for (circle all that apply) Jan Feb Mar Apr May Jun Jul Aug Sep Oct Nov Dec \_\_\_\_\_ Initial

Current month approved \$ \_\_\_\_\_ for (circle one) Jan Feb Mar Apr May Jun Jul Aug Sep Oct Nov Dec \_\_\_\_\_ Initial

**MOVING COST ASSISTANCE** N/A \_\_\_\_\_

What type of moving cost do you need assistance with?

- \_\_\_ Moving truck rental, Name of Company \_\_\_\_\_ Amount: \$ \_\_\_\_\_
- \_\_\_ Hiring a moving company, Name of Company \_\_\_\_\_ Amount \$ \_\_\_\_\_
- \_\_\_ Short-term storage, Name of Company \_\_\_\_\_ Amount \$ \_\_\_\_\_

How long? \_\_\_\_\_

Amount needed \$ \_\_\_\_\_

Amount approved \$ \_\_\_\_\_ Initial

**MOTEL & HOTEL VOUCHER** N/A \_\_\_\_\_

What date has been established with the landlord to move into the unit? \_\_\_\_\_

Has the unit met Habitability Standards? \_\_\_\_\_ Is the unit rent reasonable? \_\_\_\_\_

Are family members or friends able to let you stay with them until your move in date? \_\_\_\_\_

If no, why not? \_\_\_\_\_

What shelters have you contacted to stay at until the unit is ready? \_\_\_\_\_

Why can't you stay there? \_\_\_\_\_

What other agencies have you contacted for assistance? \_\_\_\_\_

Amount needed \$ \_\_\_\_\_

Amount approved \$ \_\_\_\_\_ Initial

**Current Unit**

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

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

Phone: \_\_\_\_\_

**Intended Unit**

\_\_\_ Staying in place

\_\_\_ To Be Determined

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

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

Phone: \_\_\_\_\_

CERTIFICATIONS: By signing below I confirm that all information reported on this form is accurate and complete to the best of my knowledge. As the applicant, I also consent to having the above information entered into the statewide Homeless Management Information System (HMIS), and I further consent that information collected about me may be shared among HPRP agencies. I understand and consent that information about me may be used in a non-identifying manner for statewide statistics and research.

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

Screener's Signature \_\_\_\_\_ Date \_\_\_\_\_

Additional Optional HPRP client data

Service Point Client ID#: \_\_\_\_\_ Staff name: \_\_\_\_\_

Client name: First: \_\_\_\_\_ MI: \_\_\_\_\_ Last: \_\_\_\_\_

Please complete one sheet for each person served, whether they are an individual or a family member.

Intake Date: \_\_\_\_\_ Intake Time: \_\_\_\_\_ am/pm Intake Location: \_\_\_\_\_

Contact # \_\_\_\_\_ Address: \_\_\_\_\_

**Emergency Contact:**

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

Alien #: \_\_\_\_\_ Who referred you to the HPRP program? \_\_\_\_\_

**Housing:**

Is this your first time homeless? \_\_\_ Yes \_\_\_ No \_\_\_ Don't know \_\_\_ Refused

Where was the last place you lived for 3 months or more? Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Was your last permanent address a hospital or a correctional facility? \_\_\_ Yes \_\_\_ No \_\_\_ Don't know \_\_\_ Refused

If yes, please check which type? \_\_\_ Hospital/Institution \_\_\_ Correctional Facility

What was the name of the Hospital/Institution or correctional facility? \_\_\_\_\_

How long did you stay in the facility? \_\_\_ Less than 180 days \_\_\_ More than 180 days

Did you leave the hospital or correctional facility within the last 2 weeks?

\_\_\_\_\_ Yes \_\_\_ No \_\_\_ Don't Know \_\_\_ Refused

Date left? \_\_\_\_\_

Do you have a corrections history? \_\_\_ Yes \_\_\_ No \_\_\_ Don't know \_\_\_ Refused

Have your utilities recently been shut off? \_\_\_ Yes \_\_\_ No \_\_\_ Don't know \_\_\_ Refused

If yes, which utilities? \_\_\_ Gas \_\_\_ Oil \_\_\_ Electricity \_\_\_ Water \_\_\_ Sewer

When: \_\_\_\_\_

Name of Companies: \_\_\_\_\_

Are you currently receiving legal assistance? \_\_\_ Yes \_\_\_ No \_\_\_ Don't know \_\_\_ Refused

If yes, what kind and from where: \_\_\_\_\_

**Employment:**

Are you currently employed? \_\_\_ Yes \_\_\_ No \_\_\_ Don't know \_\_\_ Refused

Is your employment: \_\_\_ Permanent \_\_\_ Temporary \_\_\_ Seasonal

How many hours do you work each week? \_\_\_\_\_

Are you currently looking for employment? \_\_\_ Yes \_\_\_ No \_\_\_ Don't know \_\_\_ Refused

**Financial:**

Applying for Unemployment? \_\_\_ Yes \_\_\_ No \_\_\_ Don't know \_\_\_ Refused

Date applied \_\_\_\_\_

Applying for SSI/SSDI? \_\_\_ Yes \_\_\_ No \_\_\_ Don't know \_\_\_ Refused

Date applied \_\_\_\_\_

**Assets:**

Real estate: \_\_\_\_\_ Value\$ \_\_\_\_\_



**Additional Optional HPRP Client Data**

ServicePoint Client ID # \_\_\_\_\_

Staff Name: \_\_\_\_\_

Client Name: First \_\_\_\_\_ MI: \_\_\_\_\_ Last: \_\_\_\_\_

Cash/Bank Accounts: \_\_\_\_\_ Amount\$ \_\_\_\_\_

Retirement (401K, IRA) \_\_\_\_\_ Amount\$ \_\_\_\_\_

Additional Debt/Bills and Information: \_\_\_\_\_

**EDUCATION:**

Highest education completed? \_\_\_\_\_ ASPIRE \_\_\_\_\_ Vocational Rehab \_\_\_\_\_

**VETERAN INFORMATION:**

Are you currently receiving services through the VA? \_\_\_ Yes \_\_\_ No \_\_\_ Don't know \_\_\_ Refused

**HEALTH/MENTAL HEALTH/SUBSTANCE ABUSE:**

Do you have MaineCare? \_\_\_ Yes \_\_\_ No \_\_\_ Don't know \_\_\_ Refused

Do you have any current health needs? \_\_\_ Yes \_\_\_ No \_\_\_ Don't know \_\_\_ Refused

Do you see a Physician regularly? \_\_\_ Yes \_\_\_ No \_\_\_ Don't know \_\_\_ Refused

Are you currently taking any medications? \_\_\_ Yes \_\_\_ No \_\_\_ Don't know \_\_\_ Refused

Please list: \_\_\_\_\_

Have you ever been told you are HIV positive? \_\_\_ Yes \_\_\_ No \_\_\_ Don't know \_\_\_ Refused

Do you have a disabling condition? \_\_\_ Yes \_\_\_ No \_\_\_ Don't know \_\_\_ Refused

Do you have a physical disability? \_\_\_ Yes \_\_\_ No \_\_\_ Don't know \_\_\_ Refused

Do you have a developmental disability? \_\_\_ Yes \_\_\_ No \_\_\_ Don't know \_\_\_ Refused

Do you have any mental health problems? \_\_\_ Yes \_\_\_ No \_\_\_ Don't know \_\_\_ Refused

Is your mental health condition of long duration? \_\_\_ Yes \_\_\_ No \_\_\_ Don't know \_\_\_ Refused

Do you have any substance abuse issues? \_\_\_ Yes \_\_\_ No \_\_\_ Don't know \_\_\_ Refused

Is your substance abuse problem of long duration? \_\_\_ Yes \_\_\_ No \_\_\_ Don't know \_\_\_ Refused

Do you have a case manager? \_\_\_ Yes \_\_\_ No \_\_\_ Don't know \_\_\_ Refused

If yes, who is your worker and what agency do they work for? \_\_\_\_\_

Immediate/3 month Plan (goals): \_\_\_\_\_

Long Term Plan (goals): \_\_\_\_\_

**CERTIFICATIONS:** By signing below I confirm that all information reported on this form is accurate and complete to the best of my knowledge. As the applicant, I also consent to having the above information entered into the statewide Homeless Management Information System (HMIS), and I further consent that information collected about me may be shared among HPRP agencies. I understand and consent that information about me may be used in a non-identifying manner for statewide statistics and research.

\_\_\_\_\_  
Applicant's Signature Date

\_\_\_\_\_  
Screener's Signature Date

## ARIZONA SELF SUFFICIENCY MATRIX

<b>DOMAIN</b>	<b>1 IN CRISIS</b>	<b>2 VULNERABLE</b>	<b>3 SAFE</b>	<b>4 BUILDING CAPACITY</b>	<b>5 EMPOWERED</b>
<b>Employment</b>	No job	Temporary, part-time or seasonal; inadequate pay, no benefits.	Employed full time; inadequate pay; few or no benefits.	Employed full time with adequate pay and benefits	Maintains permanent employment with adequate income and benefits
<b>Shelter</b>	Homeless or threatened with eviction	Transitional, temporary or substandard housing; and/or current rent/mortgage payment is unaffordable (over 30% of income)	In stable housing that is safe by only marginally adequate.	Housing is in safe, adequate subsidized housing.	Household is safe, adequate, unsubsidized housing
<b>Food</b>	No food or means to prepare it. Relies to a significant degree on other sources of free or low-cost food.	Household is on food stamps	Can meet basic food needs, but requires occasional assistance.	Can meet food needs without assistance.	Can choose to purchase any food household items
<b>Health care</b>	No medical coverage with immediate need.	No medical coverage and great difficulty accessing medical care when needed. Some household members may be in poor health	Some members are on MaineCare/Medicare	All members can get health care when needed but may strain budget.	All members are covered by affordable, adequate health insurance
<b>Mobility</b>	No access to transportation, public or private; may have car that is inoperable	Transportation is available, but unreliable, unpredictable, unaffordable; may have car but no insurance, license, etc.	Transportation is available and reliable but limited and/or inconvenient; drivers are licensed and minimally insured	Transportation is generally accessible to meet basic travel needs.	Transportation is readily available and affordable; car is adequately insured
<b>Income</b>	No income.	Inadequate income and/or spontaneous or inappropriate spending.	Can meet basic needs with subsidy; appropriate spending.	Can meet basic needs and manage debt without assistance.	Income is sufficient, well managed; has discretionary income and is able to save.

**City of Portland**



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



**Partners in Ending Homelessness**



