MASSACHUSETTS HPRP-FUNDED PREVENTION PROGRAM

The Commonwealth of Massachusetts grant from HUD's Homelessness Prevention and Rapid Rehousing Program (HPRP), administered by the state Department of Housing and Community Development (DHCD), has provided 1,764 persons (950 families) with rental arrearages or ongoing rental assistance and case management. Households can access services through one of 20 subgrantees funded by DHCD to provide homelessness prevention or shelter diversion. Average length of stay in program was 173 days, with a median 181 days.

Community Description

The Commonwealth of Massachusetts had a population of 6,253,462 as of 2010; of this, approximately 10.5 percent of people (658,391) had incomes below the federal poverty level. ⁹¹ Based on the 2011 point-in-time counts for all areas of Massachusetts, 11,589 individuals were in emergency shelter, 4,372 were in transitional housing, and 703 were unsheltered, totaling 16,664 individuals. Of these, 1,268 identified as veterans, and 68 were unaccompanied youth under the age of 18. ⁹² HUD's 2011 Housing Inventory Chart reported the state as having 25,787 year-round beds across 20 continuums of care (CoC) homeless service systems. This included 12,545 family beds and 13,242 individual beds. Of these, 14,567 were emergency, safe haven, and transitional housing beds; 1,059 were HPRP-rapid re-housing beds; and 10,161 were permanent supportive housing beds. ⁹³

In 2007, Massachusetts reinstated the Interagency Council on Housing and Homelessness (ICHH) through executive order, as part of a new statewide housing-first approach to ending homelessness. ICHH established 10 Regional Networks to End Homelessness. The administration and legislature appropriated \$8.25 million for this initiative, which ICHH was able to combine with \$1.3 million of private funding. These resources have allowed every community across the state to become part of a collaborative effort to end homelessness by assisting families to find housing as opposed to shelter.

DESIGN AND SETUP OF HPRP PREVENTION

The Commonwealth of Massachusetts received an allocation of \$18,443,744 for HPRP, administered through DCHD. Within the Department, DCHD designated the Bureau of Rental Assistance to administer its HPRP program because of the focus on housing. Twenty Massachusetts entitlement communities also received HPRP allocations, totaling \$44,558,792 of HPRP funds across the state. Policy-level discussion and regional public meetings around the allocation of state and local entitlement funds occurred prior to the development of an Request for Responses (RFR) for the DHCD award. Ultimately, local entitlements administered HPRP separately from the state and the program designs differed dramatically from grantee to grantee

Before receiving HPRP funds, DHCD had developed a "four-door architecture" to serve families through the state-funded Emergency Assistance (EA) program. This approach used regional field offices as the access point for services. The architecture included homelessness, homeless diversion, emergency shelter, rapid re-housing, and stabilization. There was not a comparable systematic approach for addressing individual homelessness.

 $^{^{91}}$ Data on poverty were obtained from the U.S. Census Bureau, American Community Survey (2006–10).

⁹² http://www.hudhre.info/CoC Reports/2011 ma pops sub.pdf.

⁹³ http://www.ct.gov/ecd/lib/ecd/esgwebmaterials/2011 ct 505 bed inventory.pdf.

Of state HPRP funds, DHCD decided to focus on families and on rapid re-housing, designating 70 percent of the award to families and 70 percent to rapid re-housing. DHCD's reasoning was that this targeting would allow the state to target its resources toward families with fewer options for preventing homelessness and given the state's entitlement communities emphasis on prevention. DCHD built upon the four-door architecture and designed HPRP with five separate "components," each specific in target population. These components included eviction prevention for families in subsidized housing, eviction prevention for individuals, shelter diversion for EA-eligible families, rapid re-housing for families in the EA system, and rapid re-housing for individuals.

DHCD's Bureau of Rental Assistance maintained two full-time-equivalent contract managers for HPRP. Two additional staff members worked on HPRP nearly full-time to start the program, and one worked part-time in the second year. In addition, the program received support from existing DHCD staff, including management, accounting, and IT staff.

IMPLEMENTATION

DHCD ultimately selected 20 subgrantee organizations across the state. They in turn funded six subgrantees to provide family prevention, nine to provide individual prevention, and eight to provide family diversion. Many subgrantees received funding for multiple components.

The subgrantees were a mix of nonprofit providers, community action agencies, housing authorities, and local governments. The subgrantees did not have specific roles or functions beyond the particular geographic area and program component for which they received funding. Several subgrantees contracted with other providers in their communities to serve specific roles and functions.

Outreach

There was no formal statewide outreach plan. Subgrantees found that word of mouth was the best marketing strategy. The Springfield Housing Authority (SHA), one subgrantee interviewed for this case study, provided outreach and training on the availability of HPRP to current residents in the early phases of the program. They struggled to change perception of the SHA from being "the landlord" to being a resource for residents. SHA also provided individualized outreach to each of their property managers to inform them about the program and its objectives.

Point of Entry

The point of entry and the referral structure varied across subgrantees based on resources and relationships in each community. The point of entry also varied by program component. Many subgrantees were already providing individuals receiving prevention with housing education or homeless services and therefore already had access to the target population. For most individual prevention programs, the point of entry to HPRP was through the subgrantee directly. For family prevention, the local housing authority was the primary point of entry because a family had to be residing in subsidized housing. For shelter diversion, the local Emergency Assistance office was often the first point of entry, since applicants had to be determined EA eligible to receive family diversion funds. The EA office then referred to specific subgrantees for additional screening and assessment.

Intake: Eligibility and Assessment

DHCD allowed subgrantees to develop on their own screening and assessment forms.

- 1. *Screening*. Applicants were screened for eligibility based on a brief phone assessment examining their current housing situation, income, and current employment or employment opportunities. The grantee established the minimal eligibility requirements, but some subgrantees established additional requirements.
 - To be eligible for individual prevention, applicants must have been facing an eviction or imminent loss of housing resulting from a significant reduction in income or an increase in necessary expenses that prevented payment of current housing costs. Individuals must also demonstrate that they have either secured adequate income or reduced expenses so a one-time disbursement will be sufficient to prevent homelessness. Those qualifying for HPRP funding had to be income eligible (up to 50 percent of area median income) and have a 14-day eviction notice.
 - To be eligible for family prevention, families had to be currently residing in subsidized housing (through public housing, Housing Choice vouchers, or other HUD subsidies), be income eligible (up to 50 percent of area median income), and have a 14-day eviction notice.
 - Eligibility for shelter diversion was based on the state's EA criteria, which established imminent risk of becoming homeless. DCHD is responsible for determining EA eligibility, based on Massachusetts legislative language, which included presence of a dependent child under age 21, U.S. citizenship or eligible noncitizen status, gross monthly income within EA guidelines, assets less than \$2,500, and being either literally homeless or at imminent risk of homelessness. If an applicant was doubled-up with another household or in substandard housing, a Department of Children and Families staff member visited the residence to verify risk of homelessness.
- 2. Assessment. Once applicants passed the screening phase, subgrantees conducted a detailed assessment to determine fit for the program and develop the participant's case plan. The focus of the assessment phase was on sustainability because eligibility was determined during screening. Subgrantees estimated in interviews that approximately 95 percent of applicants who made it to the assessment phase received funding. The goal of the assessment was to understand the barriers keeping the individual or family from maintaining stable housing. Case managers used the information gathered during the assessment to determine the housing case plan, amount of financial assistance, and necessary referrals. The state asked each subgrantee to define the methodology for determining the amount and length of assistance in their contract. This methodology varied dramatically between subgrantees.

"But For" and Sustainability Rules

DHCD, through HPRP, focused on helping people at imminent risk of homelessness, but the department also wanted to ensure it were assisting those who could sustain housing after HPRP ended. The focus and decision making about sustainability was different for each component, primarily due to differences in assistance offered. Individual and family prevention mainly provided arrears, so participants had to demonstrate more immediate potential for sustainability. Shelter diversion, in contrast, provided up to 12 months of rental assistance.

In individual prevention, the "but for" rules focused on basic eligibility and availability of other housing options—the applicant would be homeless "but for" HPRP assistance. Sustainability focused on assessing whether the applicant's crisis resulted from a recent drop in income or increase in expenses and whether the individual would have adequate income to cover expenses in the future. Subgrantees also assessed whether the amount of HPRP assistance available was sufficient to address the applicant's crisis and whether other barriers may have interfered with ability to sustain housing.

In family prevention, "but for" focused on whether the family had received eviction notices for nonpayment, whereas sustainability focused on whether the financial assistance available was sufficient to remedy their crisis.

The "but for" in shelter diversion was based on a family's eligibility for EA. The focus on financial sustainability was less of an issue with shelter diversion because assistance was long-term, but subgrantees assessed nonfinancial barriers to housing that could have necessitated referring a family to more supportive housing options.

Prevention Activities

Subgrantees determined the extent and type of financial assistance provided to each household. Typical assistance and services varied by program component. Participants served with diversion typically moved into new housing units and received ongoing rental assistance, whereas participants served with prevention typically remained in their existing housing and received only arrears. Participants in the shelter diversion program typically received more case management than the prevention participants, as they typically had greater barriers to housing and were receiving ongoing financial assistance.

Financial Assistance. Most participants received some type of rental assistance, either in rental arrears (for prevention) or current rental payments (for diversion). DHCD asked subgrantees to determine an overall cap per person.

Individual prevention was typically rental arrears. A few individuals received moving costs or first and last month's rent. Interviewed subgrantees reported that typical financial assistance for individual prevention was approximately \$1,000 in rental arrearages. The family prevention subgrantee interviewed provided approximately \$350 in rental arrearages per family.

Families enrolled in shelter diversion most commonly received long-term rental assistance. Subgrantees typically provided ongoing rental assistance on a 12-month cycle, because a 12-month lease was expected by most Massachusetts landlords. Interviewed subgrantees indicated that many families in shelter diversion still could not afford their rent when HPRP assistance was discontinued and were subsequently enrolled in other state-funded rental assistance programs.

Utility assistance varied across subgrantee agencies. Although few subgrantees reported providing utility arrearages with HPRP funds, they could provide financial assistance for utilities through other resources and through negotiating with utility companies to forgive a portion of tenants' arrearages and to set up payment plan.

Case Management. Massachusetts's program included a strong case management component. DHCD and subgrantees were acutely aware that difficulty maintaining housing was rarely an isolated issue. Subgrantees worked with each participant to identify barriers to housing and create a case plan to address these barriers. Subgrantees collaborated with various service providers in their community in order to maximize the effectiveness of participant referrals.

The family diversion population typically received more case management than the prevention population, as families often required more extensive case management. However, participants receiving prevention also received ongoing case management, financial education, and referrals to other services. One individual prevention subgrantee estimated that they worked with participants between two weeks and two months, depending upon need. Most subgrantees pursued monthly meetings with their participants. Some subgrantees relied heavily on monthly phone calls, after the initial in-person meeting, as they did not want to require participants to travel to their office. Others met with participants regularly in person.

DATA AND MONITORING

DHCD allowed subgrantees a good deal of freedom in developing HPPR programs targeted to their individual communities. This worked well for subgrantees able to implement and manage the administratively burdensome program. DHCD set a goal of four monitoring visits per year per subgrantee; visits included two formal reviews consisting of full file reviews and homeless management information system (HMIS) monitoring, and two informal discussions about program progress and barriers to implementation. Subgrantees were required to oversee their subcontracted agencies.

All subgrantees entered standard HUD and DCHD data elements into HMIS. Both the grantee and the subgrantees interviewed reported difficulties with HMIS and data input. This was largely because DHCD changed HMIS software in the middle of HPRP and because more than eight different HMIS systems were used across the Commonwealth. This created a challenge for subgrantees, as it required data reentry, and subgrantees had to gain familiarity with a new system or export data from their HMIS to DHCD. Because of the significant HMIS challenges, the grantee was not able to use HMIS data for program management or monitoring beyond submitting the required HUD reports. DHCD is currently expanding use of HMIS to all its homeless and housing programs.

PLANS FOR THE FUTURE

Although HPRP was seen as temporary way to address service gaps within in a larger, comprehensive homeless service system, designing and implementing the program allowed DCHD staff (and subgrantees) to learn valuable lessons about defining services and target populations for prevention and shelter diversion. These lessons have proved invaluable in the design of subsequent prevention and diversion programming. DHCD has prioritized expanding homelessness prevention as part of its housing and homelessness system redesign. Several programs, current and planned, addressing homelessness prevention in Massachusetts:

 HomeBASE serves families at risk of losing their housing to prevent their entering a homeless emergency shelter. HomeBASE can help pay rent or other housing costs for up to 3 years with participants required to pay 35 percent of income for rent and utilities. The program also has flexible funds of up to \$4,000 per household that can be used for a variety of prevention

- activities, including rent and utility arrearages, childcare, moving costs, and incentives to family or to provide housing for participants. To be eligible for HomeBASE, participants must meet EA eligibility. Approximately 400 households served under HPRP received continued rental subsidies through HomeBASE after their HPRP assistance ended.
- Massachusetts launched a redesigned version of Residential Assistance for Families in Transition (RAFT) in FY 2013, funding it at \$8.76 million for RAFT.
- DHCD's 2012 RFR for Emergency Solutions Grant funding designated \$1,704,652 for homelessness prevention services geared toward at-risk families.⁹⁴ Massachusetts will fund a single organization or a collaboration of organizations within a CoC's jurisdiction. In response to requests from providers, DHCD agreed to also allow CoCs to use up to 20 percent of the requested funds to serve eligible individuals.
- DHCD also set aside up to \$210,000 for eligible tenancy preservation programs to expand the
 program to families at risk of becoming homeless, beyond the current target population of
 individuals with disabilities living in subsidized housing. Participants may receive up to \$4,000 in
 a 24-month period, provided the household or housing unit receives no publicly funded rental
 assistance and the household is not moving to housing expected to have publicly funded rental
 assistance. Expenses can include rent or utility assistance, security deposit, first and last month's
 rent, mediation programs or legal services to resolve landlord/tenant disputes, and housing
 stabilization services.

⁹⁴ Commonwealth of Massachusetts RFR for the Emergency Solutions Grant Program, April 9, 2012. http://www.mass.gov/hed/docs/dhcd/hs/esg/esg-request-for-response.pdf

Exhibit E.14: Commonwealth of Massachusetts Prevention Overview, Homelessness Prevention and Rapid Re-housing Program

	Persons		Households	
	#	%	#	%
Total served Year 1 ^a	1,764	100	950	100
Persons in families	1,210	69	_	_
Adults without children	552	31	_	_
Total served Year 2 ^a	3,066	100	2,100	100
Persons in families	1,601	52	_	_
Adults without children	1,269	41	_	_
HPRP services				
Rental assistance	_	_	1,059	50
Case management	_	_	1,952	93
Security/utility deposits	_	_	172	8
Outreach and engagement	_	_	274	13
Utility payments	_	_	102	5
Housing search/placement	_	_	283	13
Legal services	_	_	112	10
Credit repair	_	_	110	5
Motel and hotel vouchers	_	_	2	<1
Moving cost assistance	_	_	6	<1
Destination ^b				
Total leavers	3,406	100	_	_
Homeless	60	2	_	_
Institutional setting	2	<1	_	_
Permanent housing with subsidy	1,604	47	_	_
Permanent housing without subsidy	1,164	34	_	_
Family or friends	284	8	_	_

Source: Massachusetts Department of Housing and Community Development, Annual Performance Report Data, 2009 program start through September 30, 2011.

[—] not applicable

^aTotal served numbers may not add to 100 percent because the "children only" and "unknown" categories are not included in this table. Numbers may add to greater than 100 percent due to data reporting errors.

^b Destination numbers may not add to total leavers because the "other," "hotel/motel," "unknown," and "deceased" categories are not included in this table.

[&]quot;Homeless" includes the following destinations: emergency shelter, TH for homeless persons, staying with friends (temporary tenure), staying with family (temporary tenure), place not meant for human habitation, safe haven, and hotel or motel paid by client.

[&]quot;Institutional setting" includes foster care, psychiatric facility, substance abuse or detox facility, hospital (non-psychiatric), and jail or prison.

[&]quot;Permanent housing" with subsidy includes housing owned by client with ongoing subsidy, rental by client with VASH subsidy, rental by client with other ongoing subsidy, and Permanent Supportive Housing for Homeless Persons.

[&]quot;Permanent housing" without subsidy includes housing owned by client without ongoing subsidy and rental by client with no ongoing subsidy.

[&]quot;Family or friends" includes living with family, permanent tenure or living with friends, permanent tenure.