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### Chapter 1: Background and Overview

#### Background

Supportive housing is long-term, affordable and community-based housing combined with voluntary and flexible supportive services that help people who face complex challenges live with stability, autonomy and dignity. Supportive housing is a proven, cost-effective means of reintegrating chronically homeless and other highly vulnerable families and individuals with disabilities or other long-term physical health issues into the community by addressing their basic needs for housing and providing intensive supports that promote recovery and maximize independence.

A major goal for supportive housing programs is the ability to ensure housing stability for individuals with multiple, chronic, complex needs that are challenging to serve in other housing. Several studies of programs across the country indeed demonstrate the effectiveness of supportive housing for retaining tenants with very high needs, leading to decreased shelter use, reductions in acute care utilization, and improvements in health, behavioral health and other quality of life outcomes. However, while many individuals with severe disabilities may always require supportive housing, some tenants eventually reach a point in their recovery where they may be better served in a less intensive services environment. Once stable, tenants often wish to leave supportive housing in order to have more privacy, reside in a different neighborhood, move closer to family or work/school, or rent a bigger unit. Unfortunately, because most tenants continue to need housing assistance, many choose to remain in supportive housing.

In response to tenant desires and the need to build more supportive housing capacity, several communities are working with local funders and public housing authorities to develop Moving On or Moving Up initiatives that provide tenants who are able and want to move out of supportive housing with a rental subsidy and assistance transitioning to a new apartment. HUD has publicly provided strong support for Moving On but, to date, these initiatives operate on the periphery of supportive housing and only exist on a small scale through scattered pilots.



#### Why Promote Moving On?

The fundamental goal of Moving On is to promote the highest levels of independence and choice for tenants. Moving On is not just a program; it also is a larger movement to promote supportive housing

as a platform for tenant recovery and success; it is about empowering and supporting people with disabilities to willingly take steps forward and providing them with the supports necessary to live in the housing of their choice. For some that may mean moving to other affordable housing; for others it may mean remaining in supportive housing but working toward greater self-sufficiency and self-determination in day-to-day life. This issue is especially critical for supportive housing providers serving [Transition Aged Youth](#) and those exiting the foster care system. While non-time limited, these programs should be focused on offering housing as a foundation for a healthy and successful transition to a more independent adulthood.

While promoting tenant success and mobility, Moving On also increases the capacity of homeless systems and ensures that supportive housing is used to serve the most vulnerable individuals and families experiencing homelessness. In nearly every community with supportive housing, access to units is severely limited with waiting lists that often go out for several months. It is apparent that there are many high-need/high-cost individuals and families experiencing homelessness that could benefit from the intensive services provided in supportive housing than are available units. These shortages call for greater investment in both long-term housing subsidies and the construction or acquisition of more supportive housing units. However, in the context of shrinking housing resources and the urgency of need, communities also need to look at more efficient and cost-effective ways of creating new capacity in supportive housing through turnover in their existing stock. This approach is particularly critical for opening up space in congregate or single-site settings where the fixed costs associated with 24/7 staffing, shared community space, and on-site services (including therapy groups, gyms, and health services) are inefficiently expended on tenants that no longer need or want such services. Even with scattered site programs, finding “friendly” landlords that are willing to house individuals experiencing homelessness or other challenges are limited, so being able to turnover those units and use them to house chronically homeless individuals or families is extremely valuable.

It was only recently with the nation-wide implementation of [Coordinated Entry and Assessment](#) systems in mid-2014 that communities began using more systematic and data-driven processes for effectively targeting supportive housing to the most vulnerable individuals and families experiencing homelessness. A 2012 analysis released by USICH noted that only one-third of the country’s supportive housing units were occupied by persons experiencing chronic homelessness<sup>1</sup>. Prior to this mandate, supportive housing providers generally received referrals from several community organizations, administered their own intake and assessment processes and based priority on a first-come first-serve basis, funding decisions or personal relationships. As a result of this legacy of

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<sup>1</sup> Access analysis here: [http://usich.gov/population/chronic/in\\_focus/](http://usich.gov/population/chronic/in_focus/)

uncoordinated targeting, some supportive housing programs may have a backlog of tenants who are able and want to move on. For such programs, a Moving On initiative may help to free up a substantial number of units during the initial years. A 2007 survey of supportive housing tenants in New York led by the [Supportive Housing Network of New York](#) suggested that 40% of tenants were capable of moving on<sup>2</sup>. While estimates vary, providers note that after this initial wave of move outs, anywhere between 5 to 10 percent of the tenant population in any given year may be ready to move on. This variation depends not only on the needs of the tenant population but also, as we discuss in the next chapter, the degree to which providers embrace an ongoing Moving On strategy and intentionally promote a service culture that maximizes tenant independence.

### How to Use this Toolkit

This toolkit was developed by CSH for use by supportive housing providers, Continuum of Care entities, public housing authorities, local/state government agencies and other organizations interested in developing a Moving On initiative in their community. The goal of the toolkit is to raise awareness about Moving On and to help organizations plan, develop, sustain and evaluate effective Moving On programs. This toolkit outlines the different phases and steps in the Moving On process and contains links to helpful resources, including descriptions of former or existing Moving On projects and practical tools or templates developed by implementing organizations. Many of these tools and tips were developed to fit the unique needs and objectives of certain organizations and may reflect local laws and policies. Organizations should go through their own process to develop policies and corresponding procedures that are appropriate locally and modify these documents as needed.

### [Chapter 2: Guiding Principles of Moving On](#)



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<sup>2</sup> [http://b.3cdn.net/naeh/e9e96a83affb80593a\\_sqm6bpvhk.pdf](http://b.3cdn.net/naeh/e9e96a83affb80593a_sqm6bpvhk.pdf)

### Chapter 2: Guiding Principles of Moving On

Over the past decade, CSH has worked with several communities ó including Detroit, MI, Los Angeles, CA, Seattle, WA, Atlanta, GA, New York, NY, and Chicago, IL ó to plan, implement and evaluate Moving On initiatives. While programs vary based on local needs, resources, capacities and partnerships, all are guided by the following key principles:

- 1) **Voluntary:** A core component of supportive housing is that tenants are bestowed all the rights and responsibilities of tenancy under state and local law, including the right to remain in their apartment as long as they desire and are complying with lease terms. To be clear, Moving On is not about coercing tenants out of their units, limiting the rights of tenancy, or otherwise violating the fundamental principles and values of supportive housing. Consistent with the principle that all services in supportive housing are voluntary, programs must build processes and procedures that ensure that the decision to move on from supportive housing is voluntary and self-initiated. While programs can and should use creative strategies and incentives to encourage individuals and families to consider moving on if they feel ready, no one should feel pressured or coerced to leave their unit.
- 2) **Maximizing Housing Options:** A primary goal of Moving On is to provide people with disabilities the opportunity and support they need to be able to live, work and receive services in the most integrated setting possible in a community of their choice. Policies should further tenants' rights to choose where and with whom to live, as well as whether to engage in services. Tenants should be offered a variety of housing options, to the extent possible, and should not be required to accept an accommodation if the individual chooses not to do so.
- 3) **Promoting Economic Mobility and Self Sufficiency:** Moving On is first and foremost about celebrating growth, recovery and tenant success. As such, Moving On should not be created or operated as just a voucher rental assistance program, but as an opportunity that is approached with holistic, comprehensive pre-transition services in place ó including living-skills training, employment, and community integration supports - as well as strong aftercare supports to ensure a successful transition over the long-term.

### [Chapter 3: Creating a Culture of Moving On](#)

### Chapter 3: Creating a Culture of Moving On

In order to build successful Moving On programs that become an integral and ongoing part of a community's plan to address the needs of its most vulnerable people, we need to look at supportive housing in a new light - not as the end game or final destination for all tenants, but as a foundation for promoting continual growth and recovery. While recognizing that people with histories of trauma must first experience the safety and security of stable housing, which may require significant services and supports for months or even years, providers also need to help tenants understand that they can successfully recover and move on if they choose to do so. A core value of supportive housing is that all tenants have strengths and are entitled to be helped to maximize those strengths. In order to do so, creating a culture that supports, believes in, and reinforces growth is critical.

#### Service Philosophy and Key Components

To actualize such a culture, programs should have a strength-based philosophy. Empowering tenants to grow beyond their current circumstances would be the underpinning of the program. These goals should be reflected in the overall program structure, service planning processes, staff trainings, performance measures and evaluations. All services should be geared toward increasing self-sufficiency, tailored to meet the unique needs and preferences of each individual. Tenant service plans and goals should emphasize not only connection to services and stabilization but activation, economic advancement, recovery and self-direction of care. The language used by staff during client interactions should be strengths-based and recovery-focused, using words that demonstrate the belief that people can recover from mental illness, homelessness, addiction, trauma or other challenges they may be facing. Programs committed to these goals should emphasize the following key service components:

1. **Independent Living-Skills Training:** Program services should contain a strong focus on helping tenants develop the skills needed to live outside of supportive housing. Case managers should focus on coaching tenants to perform the daily tasks essential for such living rather than performing these tasks for them. Critical life skills include the following: household budgeting and financial management; utilizing public transportation; setting healthy boundaries and limits with friends and neighbors; self-advocacy with landlords or other service providers; navigating through the social services system; problem-solving techniques; personal safety; becoming a proactive consumer of health care (understanding medications, questions to ask, and choosing a physician and specialists).

[Central City Concern](#), a nonprofit agency serving individuals and families experiencing homelessness in Portland, provides supportive housing connected to a robust array of employment services including a co-located one-stop job center, transitional jobs, supported employment and in-house employment. Their workforce program served 757 homeless jobseekers in 2014 and over 60 percent found employment. In addition, half of their own employees, or about 750 individuals, self-identify as people in recovery and 25 percent have first-hand experience with Central City Concern's programs.

[Jericho Project](#), a non-profit agency serving individuals and families experiencing homelessness in New York City, employs a team of Career Counselors and Employment Specialists that help place residents into meaningful employment opportunities. Over 80 percent of Jericho's housing residents participate in their Workforce Opportunities Initiative and employed residents have an average wage of more than \$12 per hour.

**2. Wellness/Illness Self-Management:** Services should be recovery-focused, helping tenants with addictions or mental illnesses build knowledge about their illnesses and assumption of primary responsibility for alleviating or managing the symptoms and limitations that result from them. Such self-education and self-management shifts the focal point in disease management from the expert caregiver to the person with the illness. Self-management interventions like [Illness Management and Recovery](#) and [Wellness Recovery Action Planning](#) encourage consumers to take as much responsibility as possible in making decisions about treatment and in carrying out treatment objectives. Building illness self-management skills are critical for sustaining long-term recovery.

**3. Community-Based Services:** Use of community-based services is integral to this culture. Additionally, this is necessary if one is to carry out a satisfactory after-care plan. Programs need to build a broad network and strong relationships with many outside providers. Tenants should be encouraged and coached to use community based services, not just "in-house" programs to meet their service needs. Such self-sufficiency goals should be included in tenant action plans with a focus on helping people stabilize and grow and then transfer skills to outside living.

**4. Employment Supports:** Moving On initiatives should be tied to robust employment and job training supports for tenants who are able and interested in working. Programs need to build strong relationships with local employers and public workforce agencies and should have *dedicated staff* working to support tenants to secure and maintain employment. Particularly for tenants without Supplemental Security Income, Social Security Disability Income, Social Security Retirement Income or other such supports, helping them find and maintain employment are key to a successful transition and the surest defense against future homelessness. Employment is also more than a paycheck; it is a way for individuals to meaningfully engage in their communities and to socially connect through productive activity. It builds a sense of self-direction and belonging that paves the way to long-term recovery and success.

Moving On is not just about finding a new home; it is also about economic mobility.

5. **Peer supports:** A peer support specialist is a person who uses his or her lived experience of recovery (from mental illness, addiction, homelessness or other challenges) plus skills learned in formal training, to deliver services in supportive housing. Peers can offer a culture of “health and ability” as opposed to a culture of “illness and disability.” Peers serve as living proof that people can successfully address and overcome the challenges of their illness or past traumatic experiences to live healthier, more fulfilling lives. Programs should also consider employing Moving On peers – individuals who have successfully moved on from supportive housing – to talk about their experience and engage tenants in the process.
6. **A programmatic reward/incentive structure for Moving on:** Providers can assist in further promoting a culture of independence and self-sufficiency by creating a reward or incentive structure that celebrates Moving On. Programs can host Moving On or Farewell celebrations where tenants get a chance to share their journey with other tenants and say their final goodbyes to neighbors. Moving On alumni could also be invited back to join these celebrations and talk to residents about their experiences. These events are meant to celebrate tenant success and highlight what is possible for other tenants and should not in any way signal that remaining in supportive housing is a negative outcome.

These efforts should be combined with creative economic incentive programs, like Family Self-Sufficiency (FSS) administered through public housing agencies. FSS creates an incentive for public housing residents and Housing Choice Voucher beneficiaries to increase their earnings by removing the negative consequence of losing housing assistance as income increases. As rental contributions increase as a result of increased earnings, the rent increases paid by the tenant are placed into an escrow account held for the participant to receive upon completion of the FSS program. In a similar fashion, providers could create individual “Moving On” accounts that encourage tenants to save money by matching any contributions to the account made by tenants up to a certain amount. These funds could then be made available to tenants when they move on.

Finally, when evaluating program success, organizations should also develop performance measures that reflect the degree to which services move tenants beyond stability and promote increased growth. For example, in addition to housing tenure, programs should track successful exits to other housing and develop benchmarks for optimal (rather than just low) turnover rates. For tenants remaining in supportive housing, programs can track employment rates, asset building activities and the proportion that move from needing intensive services to moderate or light-touch services. These data points can help inform decisions around how to develop and target Moving On efforts.

### [Chapter 4: Outreach, Engagement and Assessment](#)

### Chapter 4: Outreach, Engagement and Assessment

While some tenants may be eager to make the transition, the idea of leaving supportive housing to a new community with less supports may elicit strong fears and anxieties. For many tenants, their time in supportive housing may be the first time in a long time, if not ever in their lives, that they have experienced an extended period of housing stability. In order to motivate tenants and ensure successful transitions, programs need to employ robust outreach strategies to engage and embolden tenants making the transition. Many programs have used standardized assessment tools and processes to ensure tenants receive the support they need to be ready ó emotionally, mentally, financially and functionally - to move on. In creating an assessment process, it is important to keep in mind that the primary focus should be on tenant choice so as not to impede growth or the ability to accurately assess readiness. Those not meeting a particular threshold at the time of assessment should still be assisted in reaching a point of greater stability.

#### Outreach

Because supportive housing is not time-limited, one key to Moving On is the creation of motivation. Given some tenants' anxieties around leaving supportive housing, programs need to invest resources into educating and building awareness around Moving On and using outreach strategies to engage tenants in the opportunity. While programs should carefully assess tenants for "readiness," all tenants should be notified and given the opportunity to apply. Programs can use a variety of strategies to publicize and build interest in Moving On opportunities, including:

- Posting fliers in highly visible locations
- Hosting a community meeting on Moving On
- Conducting one-on-one outreach to tenants
- Using Moving On peers - those that have successfully moved on from supportive housing ó to talk about their experiences and engage tenants



Program staff should be trained in how to discuss the opportunity with tenants, in particular having strengths-based conversations, using motivational interviewing, helping people see their potential and describing program benefits/incentives. While some tenants may clearly show signs of readiness for moving on (low service use, steady income, good living skills), because of past trauma, isolation, hopelessness and disenfranchisement experienced by many prior to living in supportive housing, it may take several attempts and encouraging interactions before they can build the courage to explore this option.

### Screening and Assessment

A primary goal of Moving On is to create a supported pathway to greater growth, economic mobility, community integration and *long-term* success for individuals in supportive housing who are stable and ready to take that next step. In order to ensure successful transitions, and avoid returns to homelessness or housing instability, it is critical that programs carefully assess tenants' readiness for transition and work with tenants to develop an appropriate timeline for moving on. Programs should develop a structured review process for identifying candidates for Moving On and providing them with robust transition supports.

#### Pre-Screening

Some programs may consider developing initial screening criteria to determine eligibility for transition. For example, depending on the kind of housing resources available (public housing units, Housing Choice Vouchers, private affordable housing units, etc.) - programs may need to screen individuals for felony convictions, sex offender status, credit scores, eviction history or other criteria that may bar them from certain housing resources. Some programs set specific screening criteria around housing stability (at least two years in housing), financial stability (no rent arrears in past 24 months) or rental history (in good standing with landlord, no property damage reported or eviction notices in past 24 months). However, in order to open the opportunity to as many people as possible and maximize choice, programs should limit pre-screening criteria and allow flexibility around these criteria on a case by case basis.

#### Assessment

A number of programs have utilized existing assessment tools (like the [VI-SPDAT](#), the [Arizona Self Sufficiency Matrix](#), the [Connecticut Supportive Housing Assessment](#) or other [acuity indices](#)) - to assess readiness and identify candidates for Moving On. Other programs, like those in [New York](#), [Chicago](#), [Detroit](#), [Ohio](#), and [San Diego](#) have used specific Moving On assessment tools that focus on key risk and protective factors for independent living. In addition to evaluating readiness, assessment tools should allow case managers to identify strengths and key areas of support that can then be used to inform pre-transition service planning. Once assessment forms are completed, they should be reviewed through a structured review process. Some programs that involve several coordinating organizations, like the programs in Detroit, MI and Atlanta, GA, involve a multi-agency review committee

that reviews all applications and tenant assessments and collaboratively approves candidates for transition, or a Moving On voucher.

While assessment tools vary, some key areas for assessing tenant capacity include:

- Emotional independence (interest and confidence in moving on)
- Financial Capacity (employment, income, savings, budgeting skills)
- Housing history (housing tenure, rent arrears, past evictions, neighbor/landlord relationships)
- Intensity of service use (need for on-site services)
- Health/behavioral health (substance use, mental health, medication management, treatment engagement, mobility)
- Connection to mainstream resources (rental supports if needed)
- Connection to family or other natural supports
- Community living skills (self-managing behavior; limit setting relating to drugs, etc.)
- Activities of daily living skills (ability to get meals; keep apartment clean; follow lease)
- Housing goals (location, size, affordability, live with family/friends)

While standardized assessments are critical tools to help programs evaluate various dimensions of tenant needs, strengths and functioning, they should not be the only means of assessing tenant readiness for moving on. These quantitative tools should be complimented by more in-depth, qualitative methods (e.g., interviews) for understanding tenants' motivation, confidence and emotional readiness. Also, keeping in mind that this process should promote tenant choice, for those that do not meet identified readiness criteria, these assessments should serve as an opportunity for case managers to continue working with each tenant to develop an individualized action plan to achieve their growth goals.

### [Chapter 5: Preparing Tenants to Move On](#)



### Chapter 5: Preparing Tenants to Move On

Once a tenant has decided to move on from supportive housing, the hard work of preparing him or her for a successful transition should begin immediately. Several key steps and supports in this process are outlined below.

#### Setting Expectations and Addressing Fears

For many tenants of supportive housing, this setting has been the safest environment they have had in a long time. For others, it may represent the only safe and nurturing place they have ever known. Some may have become homeless while previously living in housing. The idea of leaving supportive housing can conjure up many feelings. An important role for program staff includes



helping tenants manage feelings and handle the stress of the transition. Staff need to have frequent and honest conversations with tenants about the realities of living outside of supportive housing and help tenants talk openly about their sadness or grief over leaving staff, friends, or the community to which they have become attached, and their fears or anxiety about moving from a setting that felt safe to an unknown place where everything is new.

The staff must be alert to the process of leaving and anticipate negative feelings such as sadness and anger, as well as uncertainty and indecisiveness in the face of a major life change. Common fears around leaving supportive housing include isolation, losing a job/income supports, loss of support services and community, increased financial responsibility and becoming homeless again. Some tenants that initially express interest in Moving On may consistently waver in their decision and as the time nears, may intentionally or unintentionally sabotage their transition by relapsing into their addiction, failing to pay rent, quitting a job, avoiding the housing search, or otherwise creating obstacles to moving out.

Program staff should be prepared for a variety of emotional responses and bouts of uncertainty and trained to continually reassure, motivate and keep tenants focused on the goal. By prioritizing choice and stressing the voluntary nature of Moving On, tenants should be given the space to consider their decision or take more time if that is truly what they need and want. Some practical strategies or policies that may help staff assist and reassure tenants in the pre-transition process include:

- **Consistent communication:** Program staff should schedule regular and frequent meetings with tenants specifically focused on transition planning, setting expectations and addressing fears.
- **Practice readiness:** Work with the tenants to gradually decrease services and supports or create trial scenarios so that tenants can practice readiness while still in housing (i.e., using community services, handling conflicts with neighbors/landlords independently, creating a budget and managing finances, managing medications, etc.). Because many services in supportive housing are informal and moving, tenants may not clearly grasp how the loss of services would affect their day-to-day living without actually experiencing the loss. Case managers should also work with tenants to set realistic expectations about what life will be like in their new home and neighborhood. If they will be living alone, it is important to talk about the potential for isolation and loneliness and strategies to deal with those feelings. If they are reuniting with family or friends, they should have candid discussions about how any prior tensions will be addressed and how to set appropriate boundaries.
- **Run a Moving On group:** Create a Moving On group that includes tenants interested in or preparing to move on from supportive housing. In New York, one provider developed a Moving-On Bootcamp for program participants, creating an opportunity for movers to prepare together and develop a sense of camaraderie. These groups can be used to educate and build greater awareness about the program, help tenants build community, hone their living skills, and provide a forum for tenants to raise questions, express their fears and find support from their peers. Guest speakers can include former tenants who moved on.
- **Develop Individualized Transition Plans:** Program staff should work with tenants to create a formal and comprehensive transition plan that identifies tenant strengths, living skills and the supports necessary to help them meet transition goals. It is important that this planning process include the perspective of both the resident and case manager. This document should guide the pre-transition planning process and hold both tenants and case managers accountable for their respective roles in the process. See Box 5A (below) for key components of a strong transition plan.

### Box 5a.

#### Characteristics of an Individualized Transition Plan

É PROVIDES AN ASSESSMENT: A thorough assessment will help clarify the tenant's housing preferences including area, size of apartment, proximity to public transportation and other relevant issues. Additionally, it will offer staff a better understanding of a person's housing history and the impact the tenant's special needs may have on maintaining housing. Both the worker and tenant can assess what skills will assist with moving on.

É SETS CLEAR GOALS: A housing plan allows the worker and tenant to have candid dialogues about setting goals and the steps needed to assist the tenant to move on to other housing. They can work as a team to identify and document each of the steps needed to meet the goal of securing housing.

É IDENTIFIES RESOURCES NEEDED: A good housing plan helps both the tenant and worker identify the [resources needed to make the transition](#). This may include, but is not limited to, activities of daily living, budgeting, advocacy, income or entitlements, Section 8 voucher, clean credit report, medication and symptom management and aftercare.

É CLARIFIES ROLE OF TENANT AND WORKER: The housing plan helps establish what tasks will be assigned to the tenant and which will be the responsibility of the worker.

É CREATES A TIME FRAME: A housing plan takes into account the time goals as well. Benchmarks can be set for meeting objectives that will lead to moving on for the tenant and assist the worker in establishing time frames for his/her role in supporting the move.

É MEASURES SUCCESS: By creating benchmarks and documenting steps and objectives, both the worker and the tenant are able to measure success toward moving on.

*Source: Center for Urban Community Services Moving On: Supporting Persons through Transition Training Manual*

- **Right of Return policy:** If possible, some programs may consider allowing tenants a trial period in a less service-intensive form of supported housing where their supportive housing unit is held for them for up to a specified number of days or they can be prioritized for a unit should they decide they cannot move on. Knowing that this safety net exists may help encourage more tenants to explore this option.
- **Set clear expectations for aftercare services:** Programs should provide individualized post-transition supports to ensure that individuals make a successful transition. Workers should make sure tenants understand that services will not stop the minute they leave supportive housing and clearly communicate the kind of supports available to them, at what frequency and for how long. In cases where tenants are moving from supportive housing to a less intensive service environment (e.g., senior living, enhanced resident services, single site to scattered site

transition), tenants should be well-informed about what those services will look like and how to access them.

### Pre-Transition Supports

Pre-transition plans should be individualized to meet the specific needs of each household. Some common resources or supports tenants often need include:

- **Employment supports:** Ensuring that tenants have and can maintain a stable and adequate source of income ó whether through employment, SSI/SSDI, pensions or other sources ó is one of the most critical factors for preparing tenants to make a successful transition. Tenants who are currently employed may need or want support in finding a job with higher wages, working more hours, connecting to a job coach, or accessing public workforce services and job trainings. Those that receive SSI/SSDI who are interested and able to work should be educated about how their earnings may impact their income and Medicaid/Medicare benefits and how to take advantage of federal work incentive programs, like Ticket to Work, that help beneficiaries return to work without immediately losing their benefits.
- **Benefits counseling:** Tenants who receive public benefits ó TANF, SNAP, SSI/SSDI, Social Security, Medicaid/Medicare, public housing assistance ó will need support around how to manage and maintain those benefits and how to access additional supports (emergency cash/utility assistance, child care supports, public transportation programs) when necessary.
- **Activities of daily living skills:** From grocery shopping to medication management to paying rent, many tenants in supportive housing depend on staff to guide them as they manage various activities of daily living. While tenants identified for Moving On should be capable of performing most activities of daily living, many will require coaching and support to master these tasks on their own. Staff can offer to tour the new neighborhood with the tenant ahead of time to learn where to shop, do laundry or pick up medications and help them locate area resources - clinics, hospitals, day programs, clubhouses, schools, AA/NA groups, etc. Tenants may need support in developing some of the following key skills:
  - o Financial management (budgeting, paying rent, creating a bank account)
  - o Housekeeping skills
  - o Grocery shopping and cooking
  - o Health/behavioral health management (scheduling/attending medical appts, finding a primary care doc, medication management, symptom management, relapse prevention)
  - o Accessing public transportation

- Navigating community/public services/schools/child care
  - Safety skills (calling 911, how to operate fire extinguishers, smoke detectors)
  - Personal hygiene
  - Communication and self-advocacy
- **Community living skills:** Tenants that have moved on from supportive housing are often surprised by the isolation and loneliness they feel once they are in their new environment. To preempt this, tenants need to build strong community living skills that will help them be a good neighbor, set clear boundaries with predatory acquaintances or neighbors that may put their tenancy at risk, create new friendships, reunify with family members, participate in community activities, and integrate into another community. Many programs also invite tenants to return to their supportive housing community to attend group dinners or events for a limited time after they have left while they build connections in their new community.
- **Connection to Community Based Services:** Staff should begin linking tenants to services and resources in the community a couple of months prior to the move to ease transition and acclimate tenant to the new area. Ensuring continuity of care throughout the transition, especially for those who are managing health and/or behavioral health issues, is critical. If transfers or connections are needed to a new medical home, mental health provider, addiction services, pharmacy or other health provider, those connections should be made well in advance of the move. In addition, for families with young children, relocating to a new community and being uprooted from their schools, friends and familiar surroundings can be traumatic. Case managers should make every effort to help families find housing located near good schools and safe neighborhoods and assist children, as well as parents, with the transition process.

### Transitional Supports

In addition to these pre-transition services that help tenants build skills and resources, tenants often need support with the various activities and costs related to the process of moving, which include:

- **Identifying housing and rent supports:** Most tenants will need help finding a new home and, when available, connecting to rental supports. (Chapters 6 and 7 in this toolkit provide greater detail on these two topics.)
- **Financial assistance:** There are significant up-front costs related to acquiring and moving in to a new unit that may be prohibitive for a tenant in supportive housing. These costs include security deposits, utility deposits, broker fees, first month rent and moving van rentals. In addition, tenants may need to purchase some furniture or other household items for their new unit.

Supportive housing programs frequently provide tenants with basic household items when needed ó toiletries, person hygiene products, first-aid items, cleaning products/equipment, etc.

Without this support, tenants will need to purchase these goods for themselves. Using grant funds or other sources, most Moving On projects provide tenants with some financial assistance (usually between \$2000 - \$2500, to help defray some of these costs).

### [Chapter 6: Identification of Rental Supports](#)



### **Chapter 6: Identification of Rental Supports**

Affordability is a primary issue preventing current supportive housing tenants who are no longer in need of intensive services from moving on. Many tenants in supportive housing are on fixed incomes (often SSI/SSD) or employed in jobs that are intermittent and pay low wages. Given the extremely low-income nature of supportive housing tenants, Moving On programs should include a commitment of Section 8 vouchers, public housing units, privately owned affordable units, or other deeply subsidized housing options. Fundamentally, taking Moving On initiatives to scale will require coordination with mainstream affordable housing sources, including both tenant-based and project-based strategies. A few strategies that communities can use to secure rental supports for Moving On are outlined below.

#### **Collaborating with Public Housing Authorities (PHA)**

Under [PIH Notice 2013-15](#) (HA), PHAs may create set-asides of units and/or vouchers for either people exiting homelessness or people referred by providers as being ready to move on from supportive housing. Through this mechanism, CoCs and supportive housing providers are partnering with local PHAs to make public housing units or tenant-based Housing Choice Vouchers (HCV, or Section 8) available through the use of preferences in their local administrative plans for people who have achieved stability in supportive housing and no longer require the same level of support. Examples of communities that have successfully negotiated such agreements with their local PHAs include Chicago, Detroit, New York, Seattle, San Francisco and Los Angeles. Box 6a below includes a description of some of these initiatives with links to sample administrative plan approaches and plan language for Moving On programs administered by PHAs.

This strategy may be particularly useful in communities in which PHAs and their governing boards may be reluctant to dedicate housing opportunities or provide waiting list preferences for people who are currently experiencing homelessness, because they lack experience serving this population or have not established partnerships with service providers to meet the needs of people as they exit homelessness. These PHAs may be more comfortable providing housing opportunities for people who are ready to move on after achieving stability in supportive housing and are likely to need less intensive ongoing supportive services.

- The **Chicago Housing Authority** launched “Moving On,” a pilot program for persons living in PSH who no longer need intensive services and want to move to other affordable housing in the community. Applicants with stable housing histories can move on to other housing using a Housing Choice Voucher. When program participants move out of supportive housing, the units they vacate must be targeted to a priority population identified through Chicago’s Central Referral System. For more information about the program, [see this profile](#). Click [here](#) for a link to CHA’s administrative plan language used for the Moving On program.
- The **Housing Authority of the City of Los Angeles (HACLA)** has created a “Moving On” preference by including an admission preference in the Housing Choice Voucher program for formerly homeless Shelter Plus Care (S+C) residents who have stabilized their lives in that program and no longer require the supportive housing environment in order to maintain their housing. Transfer to the voucher program enables people who previously experienced homelessness to exercise tenant mobility and move on with their lives, and this frees up their supportive housing unit for a new person experiencing chronic homelessness who needs it. Click [here](#) for a link to HACLA’s administrative plan language for the Moving On program.
- The **New York City Department of Housing Preservation and Development (HPD)** committed 125 Housing Choice Vouchers to a new Moving On initiative headed by CSH. Moving on candidates will be identified and supported by five participating supportive housing providers in the city. The NYC Human Resources Administration (HRA) has agreed to provide “one shot deal” funding that can be used to cover moving-related costs such as security deposits or utility arrears. The NYC Department of Homeless Services has committed to helping the sub-grantees refill vacated units quickly and to administer the one-shot funding from HRA.
- The **Michigan State Housing Development Authority (MSHDA)** is partnering with the Michigan Department of Community Health and the Detroit Continuum of Care (CoC) on a Moving Up (Moving On) model that preferences individuals and families transitioning from supportive housing for Housing Choice Vouchers (HCV). The Authority initially allocated 100 vouchers to this initiative. Referral agencies for these HCVs will be CoC providers that are recipients or sub-recipients of funding under the CoC Program (formerly called Shelter + Care and the Supportive Housing Program). As the pilot moves forward, MSHDA will select additional sites across the state and may allocate additional vouchers towards this program as needed. Click [here](#) for a link to MSHDA’s administrative plan language for the Moving On program.

### Collaborating with Affordable Housing Owners

HUD funds a variety of deeply subsidized units through the Multi-family division, which can be owned and operated by either PHAs or private owners. These include primarily the Project Based Section 8 (general population), Section 202 (elderly), and Section 811 (persons with disabilities) programs. Such units frequently offer some level of services and are experienced in dealing with special needs tenants. [Multifamily Notice H 2013-21](#) clarified that Multifamily owners can create set asides of units for either people exiting homelessness or people referred by providers as being ready to move on from supportive housing. HUD has created a [toolkit to guide Multi-family owners](#).

As vouchers and public housing units are usually a scarce resource, programs should also look to the largest current production program for new affordable units - Low Income Housing Tax Credits (LIHTC) to create Moving On units. LIHTC developments typically have to meet stringent quality and location requirements to obtain competitive funding, so they may be appealing from a tenant choice perspective. Prioritization of LIHTC resources is accomplished through the state [Qualified Allocation plan](#), which accepts public comment on a regular basis. Developers could be incentivized to include a Moving On preference in their existing projects in order to compete for future credits. For example, the Center for Urban Community Services collaborated with the New York State Housing Finance Agency (HFA) in 2009 to create the "Next Step Housing" Initiative - a three year Moving On pilot program to help formerly homeless and low-income individuals living in supportive housing move into other housing. The program used local tax incentives to recruit housing developers that agreed to reserve a percentage of affordable units for Next Step Housing participants in HFA-financed "80/20" apartment projects - buildings where 80 percent of the units are market rate and 20 percent are reserved for low-income households (created using the [4% tax credit and bonds](#)). Limited aftercare services were provided by supportive housing providers.

Some LIHTC developments offer services that are relevant to Moving On residents needing ongoing supports, such as health screenings or employment services, which are funded out of the development's cash flow, private philanthropy, or other sources. The Virginia Housing Development Authority (VHDA) allows developers to build a stabilization reserve into their projects. While not wanting to make LIHTC responsible for ongoing costs of services, VHDA saw a need among the residents moving into LIHTC buildings for short-term stabilization services.

One of the challenges with using LIHTC as a platform for Moving On units is that residents would likely need to transition from a rent that is limited to 30% of their income, and may fluctuate as their income fluctuates, to a rent that is fixed and may be more than 30% of their income. Most Moving On programs to date have used vouchers, which offer a fluctuating rent standard. While vouchers could also be used in a LIHTC context, since LIHTC owners are required to accept vouchers, they are a very limited commodity and should arguably be reserved for those with the greatest needs.

Developers and housing finance agencies are experimenting, financing more deeply affordable units in LIHTC developments by leveraging state and local resources or cross-subsidizing with market rate units<sup>1</sup>. If these strategies were adopted more widely, we could see units affordable to 30% AMI or even 20% AMI without vouchers. In many places, SSI/SSDI and other public benefit-derived incomes are equal to 20% AMI, and such incomes are stable, so it would be possible to adapt Moving On programs to a fixed rent standard.

LIHTC developers also may be able to use a new federal resource, such as the [National Housing Trust Fund](#) (NHTF), to provide deeper affordability in their developments. The NHTF was enacted as part of the Housing and Economic Recovery Act of 2008 and is a capital subsidy that must be used to create housing affordable to extremely low income households<sup>2</sup>. Up to one third of the funding can be used to provide operating assistance, though funds may not be used for services. [HUD's guidance](#) directs states to prioritize awards to developments that provide the most leverage and house special populations. Prioritization of NHTF resources is accomplished through the allocation plan process as part of a state's consolidated plan.

### State and Local Subsidies

In addition to federal housing finance programs, some communities have creatively engaged other systems to support rental subsidies for individuals moving on from supportive housing. For example, the Ohio Department of Rehabilitation and Correction partnered with CSH to design a reentry supportive housing pilot, [Returning Home Ohio](#) (RHO), that provided pre-release coordination and post-release supportive housing to individuals with a disability who were homeless at the time of arrest and/or at risk of homelessness upon release. CSH partnered with the Ohio Housing Finance Agency to develop a new rental subsidy program - Home for Good - designed for successful graduates of the RHO program who need a longer-term rental subsidy than that provided by RHO in order to maintain housing stability. This subsidy pool is funded through the Ohio Department of Corrections and is administered by a supportive housing provider, Emerald Development and Economic Network, Inc. (EDEN). Tenants are required to pay 30% of their income toward rent. For those who need new housing, EDEN assists tenants in locating a unit and pays landlords directly. The subsidy is "permanent" as long as the funding source is available.

### [Chapter 7: Identifying Housing](#)

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<sup>1</sup> See the following documents to read about innovative examples of cross-subsidization strategies to increase affordability for very low-income households: [http://nlihc.org/sites/default/files/Alignment\\_Report\\_1214\\_1.pdf](http://nlihc.org/sites/default/files/Alignment_Report_1214_1.pdf); <http://www.tacinc.org/media/51527/Creating%20New%20Integrated%20PSH%20Opportunities%20For%20ELI%20Households.pdf>

<sup>2</sup> Defined as households making the greater of 30% of AMI or the poverty level

### Chapter 7: Identifying Housing

In addition to affordability, the availability of attractive, safe, and convenient housing options are critical for drawing individuals to move on from supportive housing. Unfortunately, lack of affordable housing is a consistent challenge cited by many Moving On programs, especially in communities with tight rental markets. In the first New York Moving On initiative, 443 individuals who received vouchers were unable to move on in large part because of a shortage of affordable housing and landlord reluctance to rent<sup>1</sup>.

Motivating tenants to move out of single-site projects may be particularly challenging. Not only are tenants wary of giving up the convenience of on-site case management services, but these properties are usually well-maintained, include several building amenities (e.g. gyms, classes, computer access, 24/7 front door staff, on-site health clinics, laundry facilities, etc.) and are centrally located near many local amenities (public transportation, grocery stores, food pantries, health and social services).

Providing housing choice is critical to the success of Moving On programs so organizations need to be prepared to invest significant effort and resources to expand the housing options available to tenants.

#### Identifying and Supporting Needs and Preferences

Most tenants will need support in locating, securing and moving in to a new unit. This may include assistance with the housing search process, transportation/accompaniment to view housing units, preparing for/attending housing interviews, completing housing-related paperwork (income verification, housing applications, lease signings) and the physical moving process. During the initial assessment process, staff should work with tenants to identify his/her needs and preferences for housing and what kind of supports will be needed throughout the search process. Some important areas to assess in terms of housing needs and preferences include:

- Rent amount
- Housing size (studio, 1 bedroom, 2 bedrooms, Single Room Occupancy)
- Housing type (individual unit, group housing, sober housing, congregate housing, senior housing)
- Location and proximity to services/social networks (grocery stores, mental health services, schools/child care, public transportation, parks, laundromat, jobs, family/friends)
- Whether they want to live with roommates or reunite or form a family

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<sup>1</sup> See this resource for more information on the New York Moving on Program and outcomes  
<http://www.csh.org/wp-content/uploads/2014/09/Moving-On-from-PSH.pdf>

- Building amenities (washer/dryer, 24 hour front desk, community space, group activities, gyms)
- Any special housing accessibility needs (ramps, shower bars, first floor units, etc.)
- Crime rate in the community and sense of safety

While it will be very difficult to satisfy all needs and preferences, programs should make every effort to maximize choice in housing options and help tenants find housing that they will be happy with over the long term. Given that one of the strongest predictors of post-transition housing stability is a tenant's satisfaction with their new home and neighborhood, it is important that tenants do not feel pressured or forced to accept housing that they do not like or don't meet critical needs. This is a major life transition for tenants so it is important that they feel ownership over the process and its outcome while at the same time being realistic as to what is available to them.

### **Strategies to Expand Housing Options**

#### Landlord Outreach and Incentives

Property damage, non-payment of rent, criminal activity, frequent police calls and evictions are all costly for landlords. As a result, landlords typically screen applicants carefully in order to minimize their risk. In communities with low vacancy rates, landlords can afford to be as selective as they wish. Many individuals in supportive housing face multiple barriers to housing - very low incomes, felony convictions, past evictions and poor credit - which is why Moving On programs need to incorporate a robust housing advocacy plan as part of their program to successfully house tenants. Landlord outreach and incentives can be helpful whether the landlord in question is a PHA, [mission driven owner](#), or market rate owner, and whether the subsidy is tenant or project-based.

Investing in housing locator services or focusing on developing relationships with mission-driven landlords can be essential in tight markets or if the provider does not have experience finding private rental apartments.

Programs can employ a number of strategies for engaging and broadening their network of friendly, socially-conscious landlords that are willing to rent their units to high-risk tenants. For example, the Moving On program in Los Angeles hosted a Landlord Roundtable, where they invited and aggressively recruited several local landlords to attend a lunch to discuss the initiative, highlighted the many benefits of renting to their tenants (e.g., case management services, crisis intervention, pre-screening of tenants, tenant education/preparation for independent living, reducing search costs, etc.) and asked for their partnership. HUD has produced [resources and materials](#) that can help programs cultivate relationships with landlords.

In addition to landlord outreach, programs in particularly tight housing markets may want to consider raising funds to offer modest financial incentives to persuade landlords. While we are not aware of any Moving On initiatives that have incorporated these incentives, other housing programs serving homeless individuals have tried this with some success. A landlord incentive program in [Colorado](#) offered participating landlords reimbursement for short-term vacancies and minor unit repairs when they rent their home or apartment to a low-income renter with a housing voucher. Similarly in New York, a [veteran](#) housing program offered landlords a bonus of \$1000 for each one year lease signed with a homeless veteran as well as a "Rental Guarantee Fund" of up to \$3,000 per year to cover potential damage to the apartment or rental arrears, if needed.

### **Alternative Paths to Moving On**

#### Transition in Place

Transitioning out of supportive housing does not always mean that individuals need to move to a new unit. Some programs that operate scattered-site supportive housing use a "Transition-in-Place" approach to Moving On where households remain in their units while the services "move on." Typically in these situations, a tenant's current housing subsidy, which may be funded through the CoC program, Shelter Plus Care (S+C) program, or the Supportive Housing Program (SHP), is replaced with a Housing Choice Voucher or some other type of rental assistance. This approach opens up supportive housing service capacity so that programs can serve new chronically homeless tenants that move in to other scattered-site units. Some examples of communities using this approach include the [Detroit Moving Up initiative](#) and [First Place for Youth](#) in San Francisco.

While tenant contribution is calculated much the same under the CoC Program, S+C Program, SHP, and the HCV program, there are some circumstances that may result in a person formerly served under one of these programs being required to pay more under the voucher program depending on PHA payment standards around fair market rent. PHAs and CoCs should consider this issue carefully when determining which individuals and families are best suited to remain stably housed after moving on. PHAs also have the discretion to set minimum rents, which may cause supportive housing residents with no income to pay a higher rent in the public housing or voucher programs. However, residents must be exempted from minimum rents under circumstances of hardship, defined at 24 C.F.R. § 5.630(b).

#### Family Reunification

In addition to moving into one's own unit, another common and important pathway to moving on from supportive housing is through family reunification. Many individuals that move into supportive

housing have been estranged from family members (children, parents, siblings, spouses/partners) due to past abuse, lifestyle choices, substance use issues or other life circumstances and seek to reunite. In some cases, parents in families involved with the child welfare system have been involuntarily separated from their children and look to supportive housing as a platform to work toward reunification. In such cases, programs work together with the tenant and his/her family members to develop a housing and transition plan that involves moving (back) into the residence of the family members.

### [Chapter 8: Aftercare Services](#)



### Chapter 8: Aftercare Services

In order to ensure a successful transition from supportive housing, programs should provide services and supports to tenants for a limited amount of time as needed after the move to help them adjust to their new environment and responsibilities. As we noted earlier, this is a significant life transition for most tenants and can be an exciting, yet highly stressful, especially during those first few months post-transition. Despite all the work put into preparing tenants, most will likely be surprised by the diminishing support and other changes they experience initially after the move. Tenants could also be adjusting to several adjustments in community resources, local supports, and medical and behavioral health care providers. Case managers need to be alert to the process of termination, anticipate negative feelings and be prepared to help tenants manage their emotions and fears to avoid falling into crisis (e.g., relapse, decompensation, depression, etc.).

To mitigate these risks, programs should work with tenants to develop a formal aftercare plan before he/she moves out of supportive housing. The plan helps with transitioning the supportive housing case manager as a primary support to a secondary support and then a termination of the helping relationship. In essence, the worker's role is to terminate with the tenant in a way that does not undermine his/her residential stability and successfully integrates the tenant into the new community with appropriate community-based supports as needed.

Effective aftercare services are usually provided for three to six months, depending on the needs of tenants and the capacity of programs to provide services. Some individuals may need more frequent, longer support and others will need minimal supports so plans should be individualized to meet the needs of the specific person transitioning. Plans can be informal, where the worker visits the tenant in his/her new apartment periodically, or more formal with scheduled meeting dates and time frames assigned.

Some **key areas of aftercare support** for tenants during the first few months after the transition include:

**Practicing and mastering Activities of Daily Living (ADL):** Tenants who relied on case managers to assist with many of their ADLs may need significant support initially during an adjustment period. While staff should work with tenants to practice these skills before the move, it is important to ensure that tenants are able to perform them independently in their new setting and provide any additional support as necessary. In addition to ADLs (cooking, shopping, cleaning, accessing public transportation), staff should closely monitor tenants' abilities to perform critical activities that impact their health and safety - correctly dosing/taking medications, attending health appointments, understand safety and emergency protocols (fire evacuation procedures, how to call for help,

accessing/operating fire extinguishers) and managing mental health symptoms or relapse triggers. Some individuals may need assistance in connecting with services like Meals on Wheels or payee services to manage some of their ADLs.

**Budgeting and managing finances:** One of the primary reasons that some individuals lose their housing after moving on from supportive housing is non-payment of rent, resulting from an inability to manage their finances. While staff should work with tenants to develop a budget prior to the transition, there are often unforeseen costs realized after moving out and maintaining a budget may be more difficult than anticipated for some tenants. New landlords may not grant the same kind of leniency and flexibility that tenants have become accustomed to around late rent payments so tenants may need some support in adapting to these new standards. When choosing a new apartment, it is critical to ensure that tenants are not facing excessive rent burdens (keeping rents to no more than 30% of total income) and that tenants have some minimal level of savings or a reliable flow of income such that a single crisis will not result in a return to homelessness. Program staff should monitor tenants' ability to maintain their budgets and avoid arrears in rent, utilities or other debts and provide support during their first few months in their new home.

**Settling in and connecting to their new home and neighborhood:** Tenants may need support acclimating to their new home and connecting to their neighborhood. This may include assistance with:

- Furnishing their home and purchasing household supplies
- Meeting neighbors, connecting to groups (AA/NA or other support groups) and other natural supports
- Gaining familiarity with the new neighborhood and accessing community resources (grocery store, laundry, pharmacy, banks, schools, health clinics, hospitals, parks, schools, etc.)
- Accessing transportation (purchasing a car or accessing public transportation)
- Setting up utilities (gas, electricity, phone, internet, cable, etc.)
- Reviewing the basic obligations of tenancy (e.g. paying rent on time, not disrupting neighbors, maintaining a safe and healthy home, managing guests, and refraining from dangerous or criminal activity)

**Connection to services and providers:** Ensuring continuity of care for individuals throughout the transition is critical. Program staff should begin connecting individuals to new providers well in advance of the move but may want to wait until after the tenant has settled into their new home before the final warm hand-off. Workers should observe tenants' ability to independently manage their new provider relationships and maintain care engagement and provide any coaching or supports as necessary.

**Providing support for landlords:** In addition to assisting tenants, program staff should also offer support for new landlords. Case managers should provide landlords with contact information in case of any emergencies and be available to respond to crises on the property (for a limited amount of time). In case any issues arise around rent payments, property damage, neighbor relations, noise, illegal activity on premises or other lease violations during the first few months, case managers should be available to mediate conversations between the tenant and their new landlord to help maintain housing.

**Keeping connected:** Aftercare should also include opportunities for tenants to reconnect with their former community and friends for those that wish to maintain these connections. Programs can encourage former tenants to attend lunches or other community events. Some programs, like Jericho in New York, have formed a Moving On alumni group that gathers periodically and is invited to speak with current tenants about their experiences and encourage them.

### Strategies and Approaches to Aftercare services

Aftercare or follow-up services in Moving On efforts across the country vary in length, intensity and breadth. Some programs provide clear parameters on the type of care that will be provided to movers while others keep a more informal “open door” policy allowing former tenants to reach out when necessary. In the Detroit Moving on initiative, services were minimal due to limited resources and case managers were required to do one check-in per quarter with clients for 6 to 12 months after the move. On the other hand, the Jericho project in New York supports a robust aftercare program which consists of counselors providing help with budgeting and connections with community resources and participant tracking for up to two years. They also support an alumni network for graduates of their program and host events to keep them connected.

While some programs can only afford to provide informal or minimal supports, in order to ensure successful tenant outcomes, programs should ideally have dedicated resources and staff to provide services that move tenants through the transition ó from initial engagement to preparation to transition to aftercare. Most Moving On programs to date have had some source of private or foundation funding to support these services but, as grants, these sources are usually limited in scope and duration.

Ideally, as Moving On programs expand, these activities will be supported through more sustainable and mainstream sources of funding (e.g. CoC funding, Medicaid, human services funding, etc.). For example, the Atlanta Moving On project utilizes certified peer support specialists to deliver Medicaid billable follow-up services to movers, giving them the capacity to provide robust aftercare services

tailored to the specific needs of individuals. In addition, for tenants that may need ongoing support for an extended period of time, programs should consider connecting movers to service-enriched

housing programs that employ [resident service coordinators](#), which can offer light-touch case management and referral services as the need arises.

### [Chapter 9: Oversight, Governance and Evaluation](#)



### **Chapter 9: Oversight, Governance and Evaluation**

While Moving On initiatives vary in size and scope, nearly all programs involve multiple collaborating organizations, including supportive housing providers, local/state housing agencies, CoCs, human service agencies, and private foundations. Programs should develop some kind of management or governance structure in order to ensure that 1) programs are operating successfully and meeting specified goals, 2) partnering agencies are communicating effectively, 3) decisions are being made efficiently and collaboratively, and 4) all players (organizations or individuals) are held accountable for fulfilling their identified roles and responsibilities in the initiative. In addition, as a critical project management tool, programs should include a well-defined performance measurement and impact evaluation component that drive a continual quality improvement process.

#### **Program Management/Governance**

The structure and intensity of program management will vary depending on the size and scope of the initiative. In some cases, a single supportive housing provider ó like the Jericho Project in New York or First Place for Youth in San Francisco ó may create a Moving On component within their program. In such cases where there may be a few partnering agencies but programs are relatively self-contained, project oversight may simply involve someone in a high-level management position overseeing staff and operations, monitoring performance, managing resources and reporting outcomes to funders.

Projects that involve multiple collaborating agencies - like the initiatives in Detroit, Los Angeles, New York and Chicago ó may require more complex or formal governance structures to oversee the initiative. For example, in Chicago, the initiative formed several work groups that were tasked to review policies and procedures, collect data, track outcomes and monitor and oversee operations. In Detroit and New York, programs developed an inter-agency ötaskforceö (NY) or öreview boardö (MI) comprised of key representatives from all partnering agencies. These governance committees are responsible for monitoring program operations, troubleshooting barriers to implementation, managing and acquiring resources (e.g., vouchers), facilitating inter-agency coordination and tracking performance. In Detroit, the review board also reviews all tenant applications for Moving Up and provide the final approval for a voucher. Collaborating agencies also developed and signed Memorandums of Understanding in order to formalize partnerships and hold agencies accountable for their respective roles in the initiative.

### Program Evaluation and Performance Tracking

In order to build an effective program and ensure its sustainability, Moving On programs need to develop systems, processes and resources for collecting data, tracking outcomes and measuring impact. These data should be used to help programs assess whether they are meeting targeted outcomes, understand what is working and what is not, take corrective actions when necessary to improve performance, and demonstrate impact to key stakeholders. To track performance as close to “real-time” as possible, programs should consider developing and maintaining a bi-weekly or monthly dashboard that tracks program outcomes.

Table 9.1 lists some examples of possible data elements and indicators that programs can track - at the tenant and program level - to monitor processes and outcomes. Data sources for these indicators might include administrative data (e.g., public housing data, HMIS), program data (intake/assessments, program budgets, case management documentation), pre/post transition tenant surveys, and other data collection tools.

Data Elements	Key Questions	Indicators
Tenant Characteristics	What is the demographic profile of movers?	<ul style="list-style-type: none"> <li>- Race, Gender, Age</li> <li>- Household size</li> <li>- Health/behavioral health diagnoses</li> </ul>
Tenant engagement and targeting	Is the program effectively targeting the right tenants?	<ul style="list-style-type: none"> <li>- Total # of applications</li> <li>- # eligible/# screened</li> <li>- % tenants accepted</li> <li>- % with 2+ years stable housing</li> <li>- % with any prior rent arrears in past 2 years</li> <li>- % with a felony history</li> <li>- Self- sufficiency matrix scores</li> </ul>
Barriers to Mobility	Is the program successful in connecting interested tenants to new housing	<ul style="list-style-type: none"> <li>- # moved/# accepted</li> <li>- # connected to a voucher</li> <li>- Reasons for non-placement</li> </ul>
Housing/Retention	<p>How successful were movers in retaining housing after leaving supportive housing?</p> <p>Where are tenants moving to?</p> <p>Is the program promoting housing choice?</p>	<ul style="list-style-type: none"> <li>- % stably housed at 6, 12,18 and 24 months post-transition</li> <li>- % moved to               <ul style="list-style-type: none"> <li>o Own apt/home (subsidized)</li> <li>o Own apt/home (unsubsidized)</li> <li>o Family/friends</li> </ul> </li> <li>- % tenants report having a good choice of housing options</li> </ul>

Data Elements	Key Questions	Indicators
Tenant Quality of Life	<ul style="list-style-type: none"> <li>- Were tenants satisfied with their new housing</li> <li>- Were tenants able to gain/maintain employment?</li> <li>- Did tenants feel connected to their community and neighbors?</li> </ul>	<ul style="list-style-type: none"> <li>- % tenants satisfied with new housing/neighborhood</li> <li>- % employed or stable income source at 6, 12, 18 months post-transition</li> <li>- % report feeling connected to new community</li> </ul>
Service Quality	<ul style="list-style-type: none"> <li>- How satisfied were tenants with pre-transition, transition and post-transition services?</li> </ul>	<ul style="list-style-type: none"> <li>- % tenants satisfied with services</li> <li>- # contacts and hours of services provided</li> </ul>
Program Impact on community efforts to end homelessness	<ul style="list-style-type: none"> <li>- Is the program increasing supportive housing capacity in the community</li> <li>- Was the Moving On initiative effective at targeting PSH vacancies to more vulnerable households?</li> <li>- How efficiently did programs fill vacancies</li> </ul>	<ul style="list-style-type: none"> <li>- # of SH units created from tenants moving on</li> <li>- #/% of vacancies filled with chronically homeless individuals</li> <li>- Average # days to lease up vacant units</li> </ul>
Cost Effectiveness	<ul style="list-style-type: none"> <li>- Is the program cost effective?</li> </ul>	<ul style="list-style-type: none"> <li>- Program costs vs estimated savings</li> </ul>

Aside from these quantitative measures, programs should conduct periodic interviews with key partners and participants (tenants, case managers, supervisors, program administrators, etc.) to gather information on how well the program is being implemented and to highlight key challenges, successes and lessons learned that can be used to inform the continual quality improvement process.

In addition to program performance tracking, there is a great need to support more rigorous independent research on Moving On initiatives to gain a clearer understanding of best practices, cost-effectiveness and impact on long-term tenant and system-level outcomes. While a few Moving On programs that have tracked and documented their outcomes demonstrate promising results with respect to post-transition housing stability and tenant engagement<sup>1</sup>, very little formal research has been published on this topic<sup>2</sup>. Just recently, [CSH released an evaluation report of the Moving On program in Los Angeles conducted by Harder and Co.](#), which documents promising results around post-transition housing stability and highlights best practices and key lessons learned from the program. In addition, an independent evaluation of the New York Moving On initiative is currently underway and has the potential to meaningfully inform the field and future efforts to successfully replicate these efforts elsewhere.

<sup>1</sup> See these resources for outcomes documented in Moving On programs in Chicago and New York:

<http://www.csh.org/wp-content/uploads/2014/09/Moving-On-from-PSH.pdf>;

[http://b.3cdn.net/naeh/e9e96a83affb80593a\\_sqm6bpvhk.pdf](http://b.3cdn.net/naeh/e9e96a83affb80593a_sqm6bpvhk.pdf);

<sup>2</sup> See this link for a study of a Moving On project in Seattle:

[http://www.kingcounty.gov/~media/health/MHSA/documents/LTE\\_REPORT\\_9\\_29\\_11.ashx?la=en](http://www.kingcounty.gov/~media/health/MHSA/documents/LTE_REPORT_9_29_11.ashx?la=en)

## [Chapter 10: Moving On Costs and Funding Strategies](#)



### **Chapter 10: Moving On Costs and Funding Strategies**

From housing vouchers to transitional services to tenant and landlord incentives, Moving On programs can require a substantial investment in resources and personnel depending on the scope of the program. However, with the total cost (service and housing) of supportive housing ranging between \$18,000 and \$30,000 per year per tenant, the potential cost savings achieved by freeing up just a handful of units are significant and well worth the investment. This chapter discusses some of the costs (non-voucher related) associated with launching and maintaining a Moving On program and offers possible funding strategies.

#### **Service Costs and Provider Incentives**

Depending on the scope of the program, launching a Moving On program may require significant staff resources that exceed the existing service capacity of most supportive housing providers. For that reason, many Moving On programs involve some start-up funding for providers to support services, including outreach, assessment, preparation, transition services and aftercare. Seed funding may be especially critical during the first few years of operation when there may be a backlog of tenants living in supportive housing willing and able to move on. Once this pent-up demand is fulfilled, ongoing year-to-year Move-On rates should stabilize to around 5 to 10 percent of the tenant population, requiring less staff resources.

To cover some of these costs, many Moving On programs offer service grants to providers secured through private foundations or public agencies (e.g., department of homeless services, department of human services). Agencies can use these starter grants to build their initial capacity and an infrastructure to operate a Moving On program (staffing, staff training, housing locator services, administration, data tracking tools, client assistance funds, partnerships, etc.). As move outs decrease and stabilize over time, agencies can build off the existing infrastructure to continue these efforts with less investment. Some programs have been able to sustain programs using peer support specialists (including Moving On alumni) or even volunteers to support some of the ongoing services.

The Los Angeles Moving On program partnered with the Hilton Foundation to award \$125,000 in grant funding to three providers participating in the Moving On initiative. For each tenant that was moved on from supportive housing, grantees received \$1500 per tenant to cover services. Similarly, in the first New York Moving On initiative, funded through the Robert Wood Johnson Foundation, providers received a \$2,000 bonus for every supportive housing tenant they moved on. The current New York Moving On program is partnering with the Robin Hood Foundation to provide a one-time grant of \$75,000 to participating providers to transition 25 tenants out of supportive housing. This

grant is meant to cover both service costs as well as tenant moving costs. In the Ohio Unified Supportive Housing System Moving Up pilot, providers were given a housing incentive of \$675 for each tenant successfully transitioned who maintained housing for at least 90 days. While grant funding for services is helpful, there are examples of successful Moving On initiatives ó like those in Atlanta and Detroit ó that do not include any services funding.

### **Tenant incentives**

In addition to service costs, many programs provide tenant stipends to help cover the costs associated with moving (moving truck, purchasing furniture, appliances, utility deposits, security deposit). Given that most supportive housing tenants do not have substantial savings and often cannot afford the up-front costs of moving, these stipends are a critical tool for motivating tenants. Tenant stipends typically range anywhere between \$1,000 and \$2500. These stipends are usually covered through grants from private foundations or public agencies. In cases where grants were not available, programs have turned to churches or other faith-based organizations to donate furniture, appliances and other items to defray moving costs.

### **Landlord incentives**

In communities with particularly tight housing markets, programs should consider incorporating landlord incentives to help tenants secure affordable housing. These stipends may be coupled with service agreements or MOUs between providers and landlords that outline a commitment of limited aftercare services, crisis intervention supports or rent guarantees for tenants they accept into housing. While we are not aware of any Moving On initiatives that have attempted this strategy, other housing programs using this approach have offered incentives ranging anywhere between \$1000 to \$2000.

#### *Los Angeles “Pay It Forward” Fund*

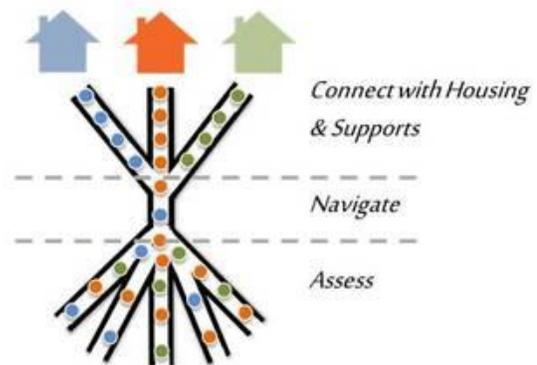
*The Los Angeles Moving On program created the “Pay it Forward” fund to create a sustainable pool to cover security deposits for tenants moving on from supportive housing. Tenants apply for funds to cover the security deposit for a new unit. For two years after the move occurs, the program provides financial literacy training and periodic check-ins. For those that can afford it, participants are asked to make voluntary contributions to the fund to help future Moving On tenants.*

## [Chapter 11: Backfilling Units](#)

### Chapter 11: Backfilling Units

One of the primary objectives of Moving On programs is to increase a community's supportive housing capacity and ensure that these resources are targeted to the most vulnerable individuals and families experiencing homelessness who need long-term intensive services and deep housing subsidies. HUD has published detailed [guidance to CoCs](#) around how to prioritize supportive housing for individuals and families experiencing chronic homelessness and those with the most severe service needs (high utilization of crisis services or significant health or behavioral health issues). Moving On programs should establish structured policies and procedures aligned with these guidelines to backfill vacated units.

Many communities now have well-established [Coordinated Entry Systems](#) (CES) for managing homeless assistance resources. All CES are required to utilize a standardized assessment tool to identify the most vulnerable people experiencing homelessness and establish a system for prioritizing households for housing and homeless assistance. Moving On programs should be closely coordinated with these local efforts by backfilling supportive housing vacancies with referrals from CES. For example, the Los Angeles Moving On program works with the County's CES to backfill units with the most vulnerable chronically homeless individuals identified through the standardized assessment process and prioritized for supportive housing.



Communities with less developed CES should coordinate with centralized referral systems (i.e., city/county homeless service departments) or other networks to establish a formal procedure for backfilling units with chronically homeless or other highly vulnerable individuals and families in need of supportive housing. In such cases, to ensure that vacated units are appropriately targeted to individuals that need long-term, intensive supports, programs should consider utilizing a standardized assessment tool ó like the VI-SPDAT or other evidence-informed vulnerability indices - to prioritize tenants for available housing slots.

In addition to a backfill policy, programs should develop clear protocols with coordinating agencies to ensure an efficient backfill process that minimizes the time a unit remains empty (ideally less than fourteen days). For example, organizations should notify the CES or referring agencies of vacancies

when a resident has signed a lease and has an established move out date, rather than waiting until after the move out has already occurred. Housing interviews, voucher applications, documentation gathering and moving can take several days/weeks. So to the extent possible, the tenant search process and move-in preparation should begin well in advance of the unit being vacated.

### [Appendix: Project Profiles](#)





## CSH Moving On Toolkit

### Appendix: Project Profiles (Access Profile by Clicking on Name of Jurisdiction)

[Atlanta](#)

[Boston](#)

[Chicago](#)

[Detroit](#)

[Hartford-Connecticut](#)

[Los Angeles](#)

[Ohio](#)

[New York City](#)

[San Diego](#)

[San Francisco](#)