

SECTION 8 ADMINISTRATIVE PLAN

APPENDIX C

SHELTER PLUS CARE PROGRAM

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Policies and Procedures Manual

Purpose and Scope

The Shelter Plus Care Program (S+C) is authorized by Title IV, Subtitle F, of the Stewart B. McKinney Homeless Assistance Act. The purpose of the Program is to create a continuum of care by linking rental assistance for permanent housing with supportive services. Eligible participants are homeless individuals who are seriously mentally ill, have chronic problems with drugs and /or alcohol, or have AIDS and related diseases. Rental assistance grants must be matched in the aggregate by supportive services that are equal in value to the amount of rental assistance and are appropriate to the needs of the targeted population. 24 CFR 582.1

Idaho Housing and Finance Association (IHFA) and the Idaho Department of Health and Welfare (IDHW) will work together to implement the Shelter Plus Care Program. IHFA will administer the rental assistance component and IDHW will provide the supportive services.

The S+C Program is not governed by the Section 8 Certificate Program, but when specific policies are not defined for the S+C program please refer to the Section 8 Existing Certificate and Housing Voucher Program Comprehensive Administrative Plan of the Idaho Housing and Finance Association, which will be referred to as the “Section 8 Administrative Plan” throughout this document. The provisions of the S+C program that differ from the Section 8 Certificate program are identified in each area.

Definitions

Acquired Immunodeficiency Syndrome (AIDS) and related diseases means the disease of AIDS or any condition arising from the etiologic agent for AIDS.

Contract Rent The total monthly rent payable to the owner for the contract unit. The contract rent is the sum of the tenant rent plus the rental assistance paid to the owner by IHFA under the Shelter Plus Care Program.

Homeless or homeless individual includes (1) A family or individual who lacks a fixed, regular, and adequate nighttime residence; and (2) A family or individual who has a primary nighttime residence that is--

- a) A supervised publicly or privately operated shelter designed to provide temporary living accommodations (including welfare hotels, congregate shelters and transitional housing for the mentally ill);
- b) An institution that provides a temporary residence for persons intended to be institutionalized; or
- c) A public or private place not designed for, or ordinarily used as, a regular sleeping accommodation for human beings.

The term “homeless” or “homeless individual” does not include any individual imprisoned or otherwise detained pursuant to an Act of the Congress or a State law.

Occupancy Agreement The lease agreement between the tenant and the landlord that includes the specific provisions of the Shelter Plus Care Program.

Person with disabilities means a household composed of one or more persons at least one of whom is an adult who has a disability. A person shall be considered to have a disability if such person has a physical, mental, or emotional impairment that is expected to be of a lengthy continued and indefinite duration; substantially impedes his or her ability to live independently; and is of such a nature that such ability could be improved by more suitable housing conditions.

A person will also be considered to have a disability if he or she has a developmental disability, which is a severe, chronic disability that:

1. Is attributable to a mental or physical impairment or a combination of mental and physical impairments;
2. Is manifested before the person attains age 22;
3. Is likely to continue indefinitely;
4. Results in a substantial functional limitation in three or more of the following areas of major life activity; self-care, receptive and expressive language, learning, mobility, self-direction, capacity for independent living, and economic self-sufficiency;
5. Reflects the person's need for a combination and sequence of special, interdisciplinary, or generic care, treatment, or other services that are of lifelong or extended duration and are individually planned and coordinated.

The term "person with disabilities" also includes two or more persons with disabilities living together, one or more such persons living with another person who is determined to be important to their care or well being.

Participant means an eligible person who has been selected to participate in Shelter Plus Care.

MHRA Contract. The mental health rental assistance contract between IHFA and the owner. IHFA pays rental assistance payments to the owner in accordance with the MHRA Contract.

Rental Assistance. The Shelter Plus Care Rental Assistance Program. Under this program, HUD provides funds to a non-profit agency for rental assistance on behalf of an eligible participant of the Shelter Plus Care Program. The tenancy under the occupancy agreement will be assisted with rental assistance under the Shelter Plus Care program.

Seriously mentally ill means having a severe and persistent mental or emotional impairment that seriously limits a person's ability to live independently.

Supportive Services means assistance that:

1. Addresses the special needs of eligible persons; and
2. Provides appropriate services or assists such persons in obtaining appropriate services, including health care, mental health treatment, alcohol and other substance abuse services, child care services, case management services, counseling supervision, education, job training, and other services essential for achieving and maintaining independent living. Inpatient acute hospital care does not qualify as a supportive service.

Tenant Rent. The portion of the contract rent payable by the tenant, as determined by IHFA in accordance with HUD requirements.

Very low income means an annual income not in excess of 50 percent of the median income for the area, as determined by HUD's annual Income Limits.

Participant Eligibility

1. To be eligible for in the Shelter Plus Care (S+C) program, a person must meet all of the following criteria:
2. Homeless person (and their family, if the family is homeless)
3. Adult person with a serious mental illness and/or:
 - a. Have a chronic problem with alcohol, drugs or both, or
 - b. Have AIDS and related diseases.
4. Very low income
5. Must be willing to participate in appropriate supportive services.

Shelter Plus Care Policies

Program Preference: Seriously Mentally Ill

S+C has established a preference for seriously mentally ill persons and/or chronic problem with alcohol, drugs or both or HIV/AIDS, as a part of the admission procedures for one or more of the statutorily targeted populations. However other eligible disabled homeless persons (who abuse alcohol and substances and persons with AIDS and related diseases but are not seriously mentally ill) must be considered for housing designed for the target population unless IHFA can demonstrate that there is sufficient demand by the target population for the units, and IDHW Mental Health can determine that the other disabled homeless person(s) would not benefit from the primary supportive services provided. (See form SC07)

Participant Records

The Branch offices of IHFA will keep participant records. These records will include the participant's race, ethnicity, gender, veteran status and disability status and any other information requested by HUD. The necessary information shall be collected through the completion and submission of the following S+C forms. (24 CFR 582.300(d)(1))

1. Participant **Information Sheet** (SC05). To be completed when participant enters the S+C Program. Both IHFA and IDHW will be responsible for working together to ensure that the required information is collected to facilitate program reporting requirements. A copy of the completed forms will be kept in the participant file. The information will be compiled at the end of the grant year and submitted to the Special Needs Housing Coordinator in the IHFA Boise Office for the Annual Progress Reports (APR).
2. **Rent Calculation Form** (SC04) This form is used to determine the tenant's rental payment, as well as the rental assistance to be paid by IHFA. This form is to be completed by IHFA Branch Office. Rental payments will be processed manually and must be submitted to the Section 8 Coordinator in IHFA's Boise Office by the 15th and 25th of each month.
3. Participant **Exit or Year End Form** (SC06) This form must also be completed at the time a participant leaves the S+C program. Completed forms shall be sent to the Section 8 Coordinator in the Boise Office along with any forms accounting for the security deposit and refunds from the landlords associated with the security deposit.

Each S+C participant will be required to provide the following certifications or verifications in addition to those required by the Section 8 program as defined by the Section 8 Administrative Plan:

1. Documentation of Homelessness (SC08);
2. Certification of Serious Mental Illness (SC07);
3. Signed S+C Occupancy Agreement;

In addition to the above documents, the following must be kept in the participant's file at the referring Mental Health Agency and made available to IHFA or HUD for review upon request:

1. IDHW assessment, case plan with participant goals.

Participant records are confidential. IHFA and IDHW staff may share information as needed to serve the housing needs of the participants. A release of information is included on the "Participant Referral (SC07)". Any additional information requested from agencies other than IHFA and IDHW will require a written release of information from the participant.

IHFA will perform criminal background checks and may deny admittance or terminate assistance to any person that engages in or has a history of violent criminal activity or current drug-related activity if not enrolled in an approved substance abuse program. Persons listed on the Sexual Offender Registry **must** be denied admittance to the program.

Eligible Activities

***This area differs from Section 8 regulations.**

S+C funds must be used for providing rental assistance for housing occupied by program participants and program administration costs. The housing units may not be currently receiving Federal funding for rental assistance or operating costs under other HUD programs. 24 CFR 582.105(a)

Security Deposits

***This area differs from Section 8 regulations.**

Rental assistance may include security deposits on units in an amount up to, but not to exceed, one month's contract rent. 24 CFR 582.105(a)

Within 21 days after the termination of tenancy or after the participant has moved from the unit the landlord/property manager shall return to IHFA any unused balance of the security deposit paid by IHFA, with an accounting of any amounts deducted from the security deposit.

Vacancies

***This area differs from Section 8 regulations.**

If a unit assisted by the S+C program is vacated before the expiration of the occupancy agreement the assistance for the unit may continue for a maximum of 30 days beyond the last day of the month in which the unit was vacated, unless occupied by another eligible person. **The term "vacate" does not include brief periods of inpatient care, not to exceed 90 consecutive days for each occurrence.** 24 CFR 582.105(d)(1)(2)

Rent Re-determinations

***This area differs from Section 8 regulations.**

As a condition of participation in the S+C program, each participant must agree to supply the information and documentation necessary to verify the participant's income. Participants must provide IHFA information at any time regarding changes in income. The amount of rental assistance must be re-determined at least annually. A participant may request an interim re-determination if there is a change in family composition or a reduction in the resident's income that may result in an adjustment to a participant's rental assistance. Residents who receive an increase in income need not have their rent increased until the next scheduled (annual) re-determination. (Notice CPD-96-03)

Occupancy Agreement

***This area differs from Section 8 regulations.**

Initially, participants must enter into an occupancy agreement for a term of at least one month. The occupancy agreement must be automatically renewable upon expiration, except on prior notice by either tenant or landlord/property manager. 24 CFR 582.315(a) The Occupancy Agreement is provided by IHFA and includes all the mandatory provisions for the S+C program.

***Terms of Agreement**

This area differs from Sections 8 regulations.

In addition to standard lease provisions, the occupancy agreement includes a provision requiring the participant to take part in the supportive services provided through the program as a condition of continued occupancy. 24 CFR 582.315(b). See Forms Section, Occupancy Agreement

Limitations on Assistance

***This area differs from Section 8 regulations.**

Current occupants of the real property are not eligible for assistance under the S+C program. Participants must meet the definition of homeless as set forth in the S+C Definitions section of this manual. (See page 1) 24 CFR 582.115(a)

Nondiscrimination and equal opportunity requirements

***This area differs from Section 8 regulations.**

S+C may establish a preference as part of their admissions procedures for one or more of the statutorily targeted populations, (i.e. seriously medically ill, alcohol or substance abusers, or persons with AIDS and related diseases.) The population with an established preference is persons who are seriously mentally ill. However, other eligible disabled homeless persons must be considered for housing designed for the target population unless IHFA can demonstrate that there is already sufficient demand by the target population for the units. In addition IDHW must demonstrate whether or not other eligible disabled homeless persons would benefit from the primary supportive services provided. (See SC07)

IHFA and IDHW must within the designated population, comply with the requirements for nondiscrimination on the basis of race, color, religion, sex, national origin, age, familial status, disability, gender identity, sexual orientation or marital status.

Housing Inspections

The Branch Offices will inspect the units before any assistance will be provided on behalf of a participant and at least annually to ensure compliance with Housing Quality Standards (HQS) under 24 CFR 982.401. Assistance will not be provided for units that fail to meet the HQS.

Utility Allowances

(This is a change in policy, as per Notice CPD-96-03)

Utility allowances will be used in the calculation of tenant rent payments if utilities are not included in the rent, as per the Section 8 Administrative plan.

Tenant-based rental assistance (TRA)

TRA provides grants for rental assistance that permit participants to choose housing of an appropriate size and location. Participants retain the rental assistance if they move. Participants will be required to live in the area in which the participant enrolls in the S+C program unless adequate arrangements can be made to insure the participant's access to appropriate supportive services elsewhere. 24 CFR 582.100(a)

Termination of assistance to participants

IHFA may terminate assistance to a participant who violates program requirements or conditions of occupancy. IHFA must exercise judgment and examine all extenuating circumstances in determining when violations are serious enough to warrant termination so that the participant's assistance is only terminated in the most severe cases. The participant's IDHW caseworker will be consulted throughout the process. IHFA is not prohibited from resuming assistance to a participant whose assistance has been terminated. In terminating assistance, IHFA recognizes the participant's right to due process of law. The formal process requires that:

1. IDHW will notify the Branch Supervisor of possible adverse action to be taken with a S+C participant.
2. IHFA consult with IDHW, Mental Health caseworker of record to determine if the Department is aware of the situation and can provide insight and if there is a plan to remedy the situation. If the S+C participant is not in compliance with the IDHW treatment plan, IDHW will need to provide documentation to that fact and submit to IHFA for review.
3. The participant is offered a Supervisor's Conference, to be attended by the participant and the mental health caseworker, to ascertain if the situation can be remedied informally.
4. If the situation cannot be remedied at the Supervisor's Conference, or the conference is not attended, the participant will receive written notice that includes a clear statement of the reasons for termination.
 - a. Send the following to the participant and the IDHW Mental Health worker and keep a copy in the participant file:

- i. Notice of Right to Review of Adverse Decision (SC10)
 - ii. Termination of MHRA Contract or Occupancy Agreement (SC11)
- b. Send the following to the landlord:
- i. Notice of Change to Occupancy Agreement (SC12)
5. If the Right to Review of Adverse Decision is returned requesting a review of the decision, the S+C Housing Specialist will schedule a hearing with the Hearing Officer in the Boise Office. A letter will be sent to the participant of the date and time of the Hearing and a copy of the letter to the Mental Health caseworker.
 6. The participant is given the opportunity at the hearing to present written or oral objections before the Hearing Officer, who is a person other than the person (or subordinate of that person) who made or approved the termination decision.
 7. Prompt written notice of the final decision is sent to the participant within 30 days of the hearing.

S+C Advisory Board with Homeless Representatives

The Homeless Coordination Network, which serves as the S+C Advisory Board, shall consist of at least one homeless individual or formerly homeless individual, IHFA staff, IDHW staff, and the seven regional homeless council or coalition representatives. This body shall meet no less than bi-annually to consider and recommend changes to S+C Policy and Procedures Manual and forms. The individuals representing the homeless or formerly homeless population may be participants in the S+C program. This would not constitute a conflict of interest under Section 582.215. 24 CFR 582.300(a)

Other Opportunities for the Participation of Homeless Individuals

To the maximum extent practicable, the program must involve homeless individuals and families through the following opportunities:

1. Employment,
2. Volunteer services,
3. In constructing or rehabilitating housing
4. And in providing supportive services.

Documenting Supportive Services

HUD requires that rental assistance funds must be matched by the value of supportive services. Appropriate supportive services will be provided by the Department of Health and Welfare Regional Mental Health Offices and other service providers as needed.

Monthly reports are required from the Department of Health and Welfare Regional Office and submitted to IHFA's Special Needs Housing Coordinator in the Boise office to track the value of the supportive services to insure that S+C is meeting the matching requirement. See Procedures Section for instructions.

Outreach Activities (IDHW)

Outreach activities are considered to be supportive services and can be included in meeting the matching requirements. Best efforts must be made to ensure that eligible hard-to-reach persons are served by S+C. Outreach will be primarily directed toward eligible persons who are living in an Emergency Shelter or a public or private place not ordinarily used as regular sleeping accommodation for human beings (e.g. persons living in cars, streets, river banks and parks). 24 CFR 582.325

The Department of Health and Welfare will provide outreach for the Shelter Plus Care Program through:

1. Referrals to the Mental Health Center’s Crisis Team from community organizations serving the homeless population;
2. IDHW’s consumer staff aids (consumers who are employed to assist case managers) will visit river banks, parks, bridges, streets and hotels and shelters that provide temporary shelter.

On Going Assessments for Participants (IDHW)

The program will provide an ongoing assessment of housing and supportive services required by participants. Appropriate adjustments will be made as needed to best serve the participants. IDHW will make note of changes made to the participant’s case plan or goals made during the 120 and 240 day reviews, as well as any other time a change occurs. The information will be kept in the participant’s file at the IDHW and be made available to IHFA or HUD for review upon request. 24 CFR 582.300(b)(c)(d)

Procedures

Referral Process

Referrals to the Shelter Plus Care Program are made via the “Participant Referral Form” (SC07) that originates from IDHW. The shaded boxes on the form are exclusively the responsibility of the IDHW Mental Health Unit. IDHW will maintain a log of consumers referred to IHFA.

To facilitate open communication between IHFA and IDHW, both agencies will indicate the name and phone number of the worker assigned to the participant.

The Participant Referral Form (SC07) includes:

1. A **Release of Information** to be signed by the applicant for the Shelter Plus Care Program and an agreement to participate in supportive services. IDHW will collect the applicant’s signature prior to referring them to IHFA.
2. A **Certification of Serious Mental Illness** determining the mental health status of the applicant is the first step in the referral process. This form will be signed by one of IDHW’s Designated Examiners, after it is determined that the applicant is seriously mentally ill and qualifies for supportive services.
3. A **Treatment Plan Certification** to be signed by the IDHW representative stating the existence of a current signed case/treatment plan and the agreement for ongoing assessments of the plan.
4. **Other Eligibility Criteria** and the **Supportive Documentation required** for the rental assistance application (if applicable). This section is to be completed by IDHW. IHFA will need the corresponding documentation to determine the applicant’s eligibility for Shelter Plus Care.
5. The **Sources of Referral** to the Shelter Plus Care Program. This section will be completed by the referring agency. This information is required for HUD reporting.
6. **Certifications of Other Qualifying Disabilities** (if applicable). This section is to insure that other eligible homeless disabled persons are considered in accordance with program requirements. This section only needs to be completed by IDHW if it is determined that the applicant does NOT have a serious mental illness, but may qualify under other disabled populations to be served.
7. **Sufficient Demand Certification** IHFA is responsible for determining whether or not there is sufficient demand for program units from homeless mentally ill.
8. **Benefit from Support Services** IDHW will determine whether or not the applicant will benefit from the primary mental health services required.

If the applicant does not meet the requirements and is not selected to participate in the Shelter Plus Care program, he or she will be referred to the Section 8 Rental Assistance Program.

Documentation to be provided by IDHW at time of Referral to the Shelter Plus Care Program

To facilitate the application process IDHW will provide the following documentation at the time of referral to IHFA:

1. Documentation of Homelessness (SC08)
2. Certification of Serious Mental Illness (SC07)
3. Statement of No Income (SC09) (if applicable)
4. Participant Information Sheet (SC05)

A Copy of IDHW's case plan, including the participant's goals, is to be kept by the referring agency and made available for review if requested. (for HUD monitoring only.)

IDHW will also assist IHFA in obtaining the other needed verifications, such as income, childcare and medical expenses.

IHFA Admission and Application Process

After IHFA receives a completed Participant Referral from IDHW, IHFA staff will arrange an appointment with the IDHW Case Manager and the applicant to complete an application for S+C Rental Assistance. An IDHW Case Manager or other assigned staff may assist the applicant in completing the eligibility process.

As a condition of participation in the S+C program, each participant must agree to supply the information or documentation necessary to verify the participant's income. Participants must notify IHFA's Branch Office of changes in income or other circumstances that may result in changes to a participant's rental payment and are subject to changes in tenant payments as outlined in the Section 8 Administrative Plan.

IHFA will mail all written notices to the applicant/participant, as well as the IDHW Mental Health caseworker. Participant will notify IHFA of any changes in income or other circumstances. IDHW will also notify IHFA of any known changes in the applicant's/participant's income, household composition, mental health case plan or other circumstances deemed appropriate.

Third party verification will be used. When third party verification cannot be obtained, file documentation must be provided as to why another method was used. No hand-carried third party verifications will be accepted.

Eligibility Determination

Eligibility is determined by the IHFA Branch Office after the completion of the application, the submission of the required certifications and documentation. Applicants must meet all the eligibility criteria as outlined in this manual.

Determining Annual Income

Income of participants must be calculated in accordance with 24 CFR 5.609 and 5.611(a) and NOTICE CPD-96-03 in which the family's anticipated annual income from all sources must be considered and as per the Section 8 Administrative Plan.

IHFA must examine a participant's income initially, and at least annually, to determine the amount of rent payable by the participant. Interim adjustments due to income/family composition changes will be made in accordance with the Section 8 Administrative Plan.

Adjustments to Gross Income

The following adjustment will be made to the family's gross annual income to obtain the adjusted monthly income. The monthly adjusted income is determined by taking the annual income less the following deductions divided by 12. (See SC04)

1. Deduct \$400.00 annually for the household whose head or co-head is elderly or disabled. Only one deduction of this type is allowed per household.
2. Deduct \$480.00 for each member of the household (not including the head of household or spouse) who is under 18 years of age or who is 18 years of age or older and is disabled or a full-time student.

3. Deduct the medical expenses of all household members by using the formula below. Medical expenses are expenses that are anticipated to be incurred during the 12 months following certification or re-certification that are not covered by an outside source. The allowable medical deduction is that portion of total medical expenses that are in excess of 3% of the annual income. The deduction is calculated by multiplying the annual income by .03 to determine the 3% threshold and then subtracting the 3% threshold amount from the verified medical expenses. Medical expenses are to be verified by the following documentation:
 - a. Third party verification from a physician, hospital, clinic, dentist and/or pharmacist that includes an estimate of medical cost to be incurred over the next twelve months (but not covered by insurance) and the regular payments expected to be made on outstanding bills.
 - b. Health Insurance premiums can be verified either by the insurance company or the employer through third party verifications. The Social Security Administration can verify insurance premium costs of Medicare paid by the applicant and not reimbursed by a public agency.
 - c. Receipts and statements itemizing anticipated medical expenses may only be allowed for out of pocket non-prescription expenses.
4. Deduct for child care expense, if necessary to enable a household member to be gainfully employed or to further their education. In order for the expense to be allowable the child needing care must be under the age of 13 or disabled. The verification of child care expense must include written third party verification from the source providing the care indicating the amount of payments, hours of care, names of the children, frequency of payment, and whether or not care is necessary for the employment or education of the parent. Verification also includes third party verification of reimbursements from the Idaho Child Care Program (ICCP), if applicable.

Zero Income

Participants who have no income when they enter the Shelter Plus Care Program can self-certify by completing a “Statement of No Income” (SC09). IHFA may verify the information with the mental health worker assigned to the participant. A Statement of Survival for each month and a zero income statement shall be submitted every ninety days. These statements will be reviewed and, if necessary, an explanation, in writing, requested of the ratio of expenses to income and the source of income for the expenses.

Rent Calculations:

The formula to determine the tenant’s payment as well as the amount of rental assistance is **Contract Rent Less Total Tenant Payment equals Rental Assistance**. The Contract Rent is the total monthly rent payable to the owner for the contract unit. The contract rent is the sum of the tenant’s rent plus the rental assistance paid to the owner by IHFA under the Shelter Plus Care Program. The Contract rent shall not exceed the Fair Market Rent (FMR) of the geographic area and is negotiated with the owner and stated in the MHRA contract. (See SC04)

Total Tenant Payment (TTP)

Tenant rent calculations will be made in accordance with section 3(a)(1) of the US Housing Act of 1937 which is the **greater** of:

1. 30 percent of the family’s monthly adjusted income; or
2. 10 percent of the family’s monthly income.

The total tenant rent is calculated as per the formula in the Rent Calculation Section, as well as the Rent Calculation form (SC04).

Rental Assistance Payments

The rental assistance payments are made by IHFA on behalf of the Shelter Plus Care participant directly to the owner/landlord. The amount is determined by the formula identified in “Rent Calculations” of the procedures section and the Rent Calculation form (SC04).

IHFA has developed a manual system to facilitate the payment of monthly rental assistance payments under the Shelter Plus Care Program. During the initial month of admission, and every subsequent month that the participant is on the program, the IHFA S+C Housing Specialist will complete a Funds Draw Request Sheet” and mail or fax to the Section 8 Coordinator in the Boise Office for further processing. The Funds draw request form requires the signature of the S+C Housing Specialist at the Branch Office prior to mailing to the Boise IHFA Office. The Section 8 Coordinator will prepare a voucher to start the payment process that will begin manual monthly payments to the owner/landlord indicated on the “Draw Request Form”. The vouchers are forwarded from the Section 8 Coordinator to the IHFA Accounting office for processing the payments. The individual grant program year starts when IHFA Accounting office makes the first draw request to HUD through the LOCCS system. When a unit is vacated and a security deposit initially paid to the landlord by IHFA is returned, the refunds are sent to the accounting department to deposit into the specific S+C grant in LOCCS. When the Section 8 coordinator processes the next month’s draw the amount is shown on the LOCCS sheet as a deduction from the total of the receipts processed for that grant for the month.

Any changes made to a participant’s portion of the rent or rental assistance payments, should be noted on the draw request form along with the effective date of the action.

Overpayments

IHFA will recapture overpayments to owner/landlords (regardless of the reason for the error) by withholding the overpayment from subsequent rental assistance payments with written notice to the owner. The IHFA Branch office will prepare a revised “Rent Calculation Form (SC04) indicating the reason for the change, the adjusted amount to be paid and the duration of the reduced payment. This shall be kept in the participant file.

If the owner no longer has a rental unit under the Shelter Plus Care Program, he or she will be notified of the amount owed to the program and the re-payment that is to be made. If this remedy proves unsuccessful IHFA will begin collection proceedings.

Rent Reasonableness

Rental assistance will only be provided for a unit for which the rent is determined to be reasonable. It is the responsibility of IHFA to determine whether the rent charged for the unit receiving rental assistance is reasonable in relation to rents being charged for comparable unassisted units by reviewing the “rent comp” books for the area. The rent for a particular unit can be set at a reasonable level, even if the rent exceeds the fair market rent, but must not be in excess of rents currently being charged by the same owner for comparable unassisted units.

Briefing Sessions

Upon the successful completion of the application process and a determination of eligibility, IHFA will schedule an individualized “briefing session” for the participant and their case manager (or other designated person). During the briefing session, IHFA staff will provide guidance in how to locate appropriate housing, furnish referrals to known units for rent and provide a list of potential landlords who currently lease or have expressed an interest in leasing units through IHFA. Each participant will receive a packet of information intended for potential landlords informing them of the S+C rental assistance program.

The briefing session will also include information regarding annual re-determinations, the requirement to participate in supportive services as a condition of continued occupancy, the need to report any changes in income/family composition to IHFA and an explanation of both the Tenant and Landlords duties as per the S+C Occupancy Agreement.

Selection of Housing Units

The program utilizes the tenant-based rental assistance (TRA) component in which participants are permitted to choose housing of an appropriate size in which to reside. The unit selected must meet Section 8 guidelines for Housing Quality Standards (HQS) and allow for the provision of supportive services. IDHW case workers may assist participants in the housing search and selection process.

Execution of the Occupancy Agreement

Once the unit is selected, IHFA Branch Office will physically inspect to determine if the unit meets the required HQS. Assistance will not be provided for units that fail to meet the HQS. Once the unit passes HQS, the occupancy agreement can then be executed. The occupancy agreement will be prepared by IHFA, and must be signed by both the tenant and the landlord before HAP payments may commence.

Execution of the MHRA Contract

Once the unit has passed inspection and the occupancy agreement has been signed, IHFA will execute the Mental Health Rental Assistance (MHRA) Contract. One signed copy will be given to the owner. The MHRA contract must be executed by IHFA before any payments are made to the owner on behalf of the participant.

When Participant Leaves the Program

The S+C Housing Specialist completes the "Participant Exit Form" (SC06) and sends a copy to the Section 8 Coordinator in the Boise Office. They must also document the exit on the tracking form for the end of the year statistical report as required by HUD.

Year End Reports

At the end of each grant program year, the S+C Housing Specialist will complete questions #2 - #14 of the Annual Progress Report (APR) for that grant, compiled from the ongoing tracking sheet and send/fax the completed pages to the Special Needs Housing Coordinator in the Boise Office. The Special Needs Housing Coordinator will then compile the appropriate information from all the branches for the APR as per HUD's regulations. The report is due within 90 days of the end of the program year. The program year begins with IHFA's first draw request of funds from the S+C grant.

Calculating the value of Supportive Services

The value of supportive services will be calculated in the following ways:

1. Salaries paid to staff of IDHW to provide supportive services to S+C participants. This information may be documented on the "Supportive Service Report" (SC02) and submitted to the Special Needs Housing Coordinator on the Boise IHFA office. IHFA staff will document hours spent on the project.
2. The value of supportive services provided by other persons or organizations to S+C participants. IDHW will submit quarterly printouts of the billings by S+C participants and submit as documentation of the required supportive service match to the Special Needs Housing Coordinator in the IHFA Boise Office. Outreach and volunteer services will be documented by utilizing the "Supportive Services Report" (SC02)
3. The value of time and services contributed by volunteers at the rate of \$10.00 per hour, except for donated professional services that may be counted at the customary charge for the service provided. These would be services the professional ordinarily performs in their occupations for payment. This type of service will be documented using the "Supportive Services Report" (SC02)
4. The value of any lease on a building used for the provision of supportive services provided the value included in the match is no more than the prorated share used for the program. The value of the space will be calculated as follows:
 - a. Annual cost of space for the Mental Health Unit divided by Number of Offices =N
 - b. N divided by 2080 hours = Hourly cost per office (H)
 - c. H multiplied by the number of on-site sessions at the Mental Health Unit=Value of Lease for Shelter Plus Care Program match.
 - d. Record amount determined on the Supportive Service Report (SC02)
5. The cost of outreach activities. 24 CFR 582.110(c) See Forms Section, Form SC02

6. Supportive services provided by agencies other than IHFA and IDHW will be asked to submit a statement indicating the cost of their services based on the individual participant's case plan. The documentation should reflect an hourly cost as well as the number of hours of service provided to the participant during the month.

Documentation to IHFA Boise Office from IHFA Branch Office:

Branch Office will send documentation of staff time spent on Shelter Plus Care on the Administrative Costs Sheet to the Boise Payroll Department by the 15th of each month. The totals will be forwarded to the Section 8 Coordinator to prepare the Administrative Costs Draw Request and coordinating LOCCS request voucher for payment. This is forwarded to the accounting department to be processed and drawn from LOCCS.

For each new or ongoing participant during the month, please send a copy of the Funds Draw Request form by the 15th of the month for pro-rated rents or the 25th of the month prior to the requested rent month.

A copy of the Participant Exit Form (SC06) will be sent to the Section 8 Coordinator whenever a participant leaves the program.

The answers to questions #2 – 14 on the Annual Progress Report will be sent at the end of each grant year or when requested by the Homeless Programs Coordinator in the Boise Office.

Report From IDHW

IDHW caseworkers will submit a monthly supportive services report to the Special Needs Housing Coordinator.