



Housing Needs Assessment

The Housing Needs Assessment (HNA) is the tool used by Santa Cruz County Housing for Health Partnership (H4HP) to understand participant needs, resources, and goals and to support participants with accessing housing and other resources. Information collected during this assessment helps develop a Housing Action Plan (HAP) with action steps for participants and Housing Connectors. Some portions of the HNA help establish priority and matching information for limited housing and services resources available through the H4HP System. Information collected also helps determine the likelihood of a participant getting matched to a specific H4HP resource.

Assessment Date:	
Participant Name:	
HMIS ID:	
Connector Name:	

Section 1: Household Composition

I'd like to start off our conversation by learning more about you/your household. This helps us understand who you would like to live with and needs your household may have. The information helps us understand the kind of housing resources that would work for you and that you may qualify for.

Example conversation prompts:

- Do you have a partner, other adults or children that live with you now?
- Do you have partner, other adults or children that you would like to live with? (what needs to occur, such as foster care reunification, for that to happen?)
- Are you pregnant? Is anyone in your household pregnant?
- If under 25, have you or other members of the household spent any time in foster care?
- Do you have any pets or service animals? How long have you had them?
- Are you currently fleeing, or would like to leave, a partner violence or other violent or unsafe situation? Are you afraid to return to the place you are living?

Notes:

Required responses (for scoring or matching):

1. Total # of members in the household currently (including the participant) (if different than expected, edit household in HMIS):
2. Total # of children in the household currently (if different than expected, edit household in HMIS):
3. Total # of members in household desired (including the participant): *Complete Household Comments section if the number of desired members is different than the current household size.*
4. Household comments: (space to describe difference between 1 and 2 if applicable)
5. Age of participant (head of household):
 18 - 24 25-64 65+
6. Are there any children under the age of 5 currently in your household?
 Yes No Client doesn't know Client prefers not to answer Data not collected
7. Are other adult members of your household currently age 18-24?
 Yes No Client doesn't know Client refused Data not collected

8. Are other adult members of your household currently age 25-64?
 Yes No Client doesn't know Client prefers not to answer Data not collected
9. Are other adult members of your household currently 65 or older?
 Yes No Client doesn't know Client prefers not to answer Data not collected
10. Are you or any other members of your household currently pregnant:
 Yes No Client doesn't know Client prefers not to answer Data not collected
11. Due date (if applicable):
12. Fleeing intimate partner violence or other unsafe or violent situation:
 Yes No Client doesn't know Client prefers not to answer Data not collected

Housing Action Plan Priority

Check here if anything related to the household composition is a high priority for us to work on together to help you get a permanent place to live.

Section 2: Housing History

We're about to talk a little about your housing history. When searching for housing, it's helpful to be able to describe your housing experience to potential property agents – places you've recently lived, any potential negative experiences you may have had like evictions. We'll collect this information about all members of your household. This kind of information helps make a case for why you may be a good tenant or housemate.

Example prompts:

- Have you currently or previously had housing in Santa Cruz County?
 - Are you looking for housing in Santa Cruz County? Have you had or do you have a voucher (like a Section 8) you are trying to use?
- Have you had housing outside of Santa Cruz County?
 - If yes, provide details (when, where, for how long).
- When is the last time you were in housing? What contributed to you losing your housing? How long have you been without housing? Is this your first time without housing or have you been in this situation before?
- Tell me about the last apartment or house you lived in. Were you on the lease there? Have you been on a lease before?
- Do you have a former property agent or other person who could give you a positive housing reference? (Who is that?)
- Do you need assistance with learning about tenant rights, leases, property agent relationships?

Notes:

Required responses (for scoring or matching):

Last permanent address:

Prior Street Address: _____

Prior City: _____ Prior State: _____ ZIP Code of Last Address: _____

13. Any adult household member's most recent housing was in Santa Cruz County:

Yes No Client doesn't know Client prefers not to answer Data not collected

14. Last time any adult member of your household had a lease or owned a home in their name:

select one adult with most housing history

Never or more than 5 years ago Within last 1-5 years Within last year Currently
 Client doesn't know Client prefers not to answer Data not collected

15. Number of formal evictions in the last five years (e.g., law enforcement notice taped to front door, or might show in credit report, court records, or tenant screening databases).

select one adult with highest amount of rental evictions:

- Two or more rental evictions One rental eviction No rental evictions
 Client doesn't know Client prefers not to answer Data not collected

16. The participant/ household has a former property agent or other person that can provide a positive housing reference:

- Yes No Client doesn't know Client prefers not to answer Data not collected

17. Total months homeless in the last three years, either on your own or with your family:

- 1 month 2 months 3 months 4 months 5 months 6 months
 7 months 8 months 9 months 10 months 11 months 12 months
 Client doesn't know Client prefers not to answer Data not collected

Housing Action Plan Priority

Check here if anything related to housing history is a priority for us to work on together to help you get a permanent place to live.

Section 3: Income, Employment and Training, Benefits, Health Insurance and Credit

I'd like to talk now about your household income and other benefits you may be receiving. This is helpful for us to understand so that we can determine what kind of housing you may be able to afford or the kind of housing subsidy you may be eligible for.

Example prompts:

- Do you or any household member have regular income that would let you pay for housing? Have you had an income in the past?
- Do you or any household member have a job? If yes, how much does it pay? If no, are you looking for work or interested in looking? If so, what type of work? Are you interested in job training or going back to school?*
- Do you or any household member have any other kinds of income like social security, disability, VA benefits, alimony, or child support?
- If zero income, ask how they pay for things day to day.
- Do you receive CalFresh/food stamps, WIC, or CalWorks?*
- Do you have health insurance? If so, what kind?
- When applying for housing, landlords often look at your credit history – do you or any household member have any outstanding debts or poor credit?

(note if they may be eligible for income, benefits, or health insurance and do not receive them)

Notes:

Required responses (for scoring or matching):

18. Income status of participant/ household.

consider the household as a unit. If at least one person has a fixed income and is interested in increasing, this is true for the household:

- Zero income
- Participant/ Household has only fixed income and not able to/interested in increasing
- Participant/ Household has only fixed income and interested in increasing total household income
- Some or all earned/variable income and participant/ household is not able to/interested in increasing total household income
- Some or all earned/variable income and participant/ household is interested in increasing total household income
- Client doesn't know
- Client prefers not to answer
- Data not Collected

19. Participant/ household has problematic outstanding debt, financial, or credit issues that might show up on credit report:

- Yes
- No
- Client doesn't know
- Client prefers not to answer
- Data not collected

Housing Action Plan Priority

Check here if anything related to income, employment and training, benefits, health insurance and credit is a priority for us to work on together to help you get a permanent place to live.*

**Note: if participant/ household may be eligible for any income, non-cash or health benefits, training or other assistance they do not currently have this should be a priority for the Housing Action Plan.*

Section 4: Social and Community Support

Let's talk about your social and community network now – the people you know like friends, family, supporters, etc. This will help us explore options that might help to find you a place to live immediately. Affordable housing in Santa Cruz is extremely limited and for some people, living with family, friends, or supporters is a good option for at least some period of time.

Example prompts:

- Tell me a bit about your family – do you have relatives that live in the area?
- Do you have close friends, family, supporters you would like to reconnect with? Where do they live? When was the last time you were in touch with them?
- Are there any friends, family, or supporters that could help you/your household with housing, like providing a place to live, be a roommate, help cover housing costs?
- If we could provide you some short-term assistance such as a contribution toward rent, groceries, utilities, covering travel expenses to reconnect with others, or a rental deposit, do you think you could live with any of these people for a while?

Notes:

Required responses (for scoring or matching):

20. Has relationships with others that support the participant/ household and that they feel connected to (e.g., family, friends, other communities of support):

Yes No Client doesn't know Client prefers not to answer Data not collected

Housing Action Plan Priority

Check here if anything related to social and community supports is a priority for us to work on together to help you get a permanent place to live.

Section 5: Legal and Documentation Issues

If you're willing, I would like to talk with you about any potential involvement you and other members of your household may have had in the past with law enforcement – this could include the police, any involvement with the juvenile justice system, and/or immigration and customs enforcement. Some housing has restrictions based on these circumstances and understanding whether anything like this has happened helps us to support you in how you would approach your housing search and application.

I'd also like to ask you about important identification documents as many landlords and housing programs will ask for certain types of documentation when submitting applications for housing. These may include things like a driver's license, social security card, birth certificates, or other forms of legal documentation for other members of your household.

Example prompts:

- Have you or any household member ever been arrested? When and how many times?
- Are you or any household member currently on probation or parole? Where and what are the conditions?
- Have you or any household member ever been detained due to immigration status or lack of documentation?
- Do you or any household member have a criminal record for felony-level activities like arson, drug dealing, manufacturing, assault?
- Are you or any household member a 290 (sex offender) registrant?
- Are there other legal matters you or any household member may have on your record that we should be aware of or work on resolving like outstanding warrants, expungements, debts?
- Do you have personal identification documents like a driver's license, social security card, birth certificate needed for all household to secure housing? Which ones?
- Do you need support recovering or accessing these documents? Which ones?

Notes:

Required responses (for scoring or matching):

21. Number of times in the past five years the participant or any members of your household have been arrested or picked up by police (more than a warning or citation).

select one adult with highest number of arrests:

- 5 or more 1 – 4 None Client doesn't know Client prefers not to answer
 Data not collected

22. Participant/ household needs help to get copies of critical documents:

- Yes, needs help with all documents (has no documents)
- Yes, needs one or two key documents
- No, has key documents
- Client doesn't know Client prefers not to answer Data not collected

Housing Action Plan Priority

Check here if anything related to legal issues or getting documents is a priority for us to work on together to help you get a permanent place to live.

Section 6: Health

Now I'd like to talk with you about your health. Understanding your health needs will help me to connect you with resources that may be able to support you, your health, and your housing search and may relate to eligibility for some housing.

Example prompts:

- How are you feeling today?
- Do you or other household member have health conditions that impact your ability to work or keep housing without support like a physical or developmental disability or a chronic health condition like asthma, HIV-AIDS, mental health, substance abuse disorders?
- Has the impact of a health condition been the reason you/your household may have lost housing in the past? Do you need assistance with getting reasonable accommodation for your disability in the housing application or housing search process?
- Have you or your household used emergency or inpatient care recently?
- Do you or other household members need assistance from others to help manage your daily activities like skilled nursing to support bathing or eating? Do you have or would you require a live-in aid to help you keep housing?
- Do you or any household member have any mobility, hearing, or visual impairments?

Notes:

Required responses (for scoring or matching):

23. Number of health conditions the participant or other household members have that they believe impact their ability to secure housing.

select the total number of disabling conditions for all household members combined:

Three or more Two One None Client doesn't know

Client prefers not to answer Data not collected

24. The participant or other household members need in-home services to help with activities of daily living (e.g., bathing, feeding, cleaning, etc.):

Yes No Client doesn't know Client prefers not to answer Data not collected

25. The participant or other household members have a condition that requires housing for those with mobility, hearing, or visual impairment:

Yes No Client doesn't know Client prefers not to answer Data not collected

Housing Action Plan Priority

Check here if anything related to health portion is a high priority for us to work on together to help you get a permanent place to live.

Section 7: Housing Preferences

I would like to shift the conversation to think about a place you would like to live.

Example prompts:

- If you could have your choice, what kind of place would that be – A 2-bedroom, a 1-bedroom, studio, shared housing with others, etc. (prompt with examples that would likely fit the household size, needs, etc. based on conversation thus far).
- What type of living situation would you be willing to consider while working toward your first choice?
- What about location – if you could live anywhere in Santa Cruz or even outside of the County, where would you consider living?
- If the participant/ household has a pet: You mentioned having a pet. Would you only accept shelter or housing that allowed your pet to live with you?

Notes:

Required responses (for scoring or matching):

26. Types of housing participant/ household would be willing to accept:

- My own apartment
 Shared Housing/ Single Room Occupancy (SRO)
 Either of the above
 Client doesn't know Client prefers not to answer Data not collected

27. Places the participant would be willing to live:

28. Participant/ household has a pet and is only willing to accept housing/shelter where pets are accepted:

- Yes No Client doesn't know Client prefers not to answer Data not collected

Section 8: Additional Eligibility Questions

I'd now like to follow up with a few additional eligibility questions.

Note: Many of these questions may have been answered in previous sections. Connector should only ask if not previously identified.

Notes:

29. Are you or any other members of your household CalWorks eligible and willing to enroll or already enrolled?

Yes No Client doesn't know Client prefers not to answer Data not collected

30. Are you or any other members of your household disabled with no disability insurance (SSI, SSDI or VA disability)?

Yes No Client doesn't know Client prefers not to answer Data not collected

31. Are you or any other members of your household TAY (aged 18-24) who are current or former foster youth?

Yes No Client doesn't know Client prefers not to answer Data not collected

32. Are you or any other members of your household child-welfare involved?

Yes No Client doesn't know Client prefers not to answer Data not collected

33. Is your household ineligible to receive a housing voucher because of any of the following reasons?

- A household member is required to register as a lifetime sex offender
- A household member has a felony for the manufacture of methamphetamine on the premises of federally assisted housing
- A household member has been evicted from federally assisted housing for drug-related criminal activity in the last three years
- No household member has documents to prove legal residency in the US (At least one member must have documents to prove legal residency to be eligible)

Yes No Client doesn't know Client prefers not to answer Data not collected

Connector Observations

34. From your interactions and observations, do you believe any of the following to be true:

Participant/ household may have other health conditions (mental health, physical health, substance use issue, etc.) that could impact their ability to find or maintain housing and employment but were not discussed

Yes No

Participant/ household may be particularly vulnerable or at high risk of suffering severe consequences from an illness or other health issue if they remain unsheltered

Yes No

Participant/ household may be particularly vulnerable to or at high risk of violence or being taking advantage of if they remain unsheltered

Yes No

If any are checked, please note the circumstances:

35. **ADMINISTRATIVE DATA.** Based on analysis of available administrative data what is the health and safety risk level for this participant?

PLEASE DO NOT COMPLETE