**Attachment 4:** Permanent Supportive Housing (PSH) Self-Assessment

0930-XXXX

Expiration Date XX/XX/XXXX

Public Burden Statement: An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.  The OMB control number for this project is 0930-XXXX.  Public reporting burden for this collection of information is estimated to average XX hours per respondent, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.  Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to SAMHSA Reports Clearance Officer, 1 Choke Cherry Road, Room 7-1044, Rockville, Maryland, 20857.

**Substance Abuse and Mental Health Services Administration (SAMHSA)**

**National Evaluation of SAMHSA’s Homeless Programs**

**PSH Self-Assessment**

**Instructions**

The cross-program evaluation team is interested in learning more about the permanent supportive housing (PSH) model being implemented by your SSH/GBHI/CABHI project, as indicated by your project during the grantee Project Director interview. We are seeking to understand the extent to which identified grantees with services in supportive housing (SSH) are implementing the components of the permanent supportive housing (PSH) model, such as: client/consumer choice of housing; functional separation of housing and supportive services; decency, safety and affordability of housing; housing integration; rights of tenancy; access to housing; flexibility of services; your project’s services philosophy and, as applicable, implementation of a behavioral health team.

Please complete the following questions in the context of your SSH/GBHI/CABHI project and participants. Each SSH/GBHI/CABHI grantee project should have one key respondent; typically the grantee Project Director or his/her appropriate designee (e.g., local site evaluator, program manager, lead housing project staff member). If needed, the key respondent may ask questions of staff familiar with the characteristics and implementation of your project’s permanent supportive housing models.

There are two sections – the Grantee Project and Permanent Supportive Housing Site section. The questions in the Grantee Project section should be answered from the perspective of your CABHI/GBHI/SSH grantee project and answers should reflect how things are done across all permanent supportive housing sites. These questions will only be answered once. The questions in the Permanent Supportive Housing Site section should be answered from the perspective of each permanent supportive housing site used in your grantee project. This section will be repeated for up to three permanent supportive housing sites. If your project includes more than three permanent supportive housing sites, please select the three sites used by the most clients in the past year.

**Respondent Information**

|  |  |
| --- | --- |
| **Name/Title of Key Respondent:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_****Primary Role in SAMHSA Grantee Project:** *(check all that apply)*[ ] Project Director[ ] Project Coordinator[ ] Program Manager[ ] Local Evaluator[ ] Housing Provider[ ] Mental Health Counselor/Treatment Provider/Supervisor[ ] Substance Abuse Counselor/Treatment Provider/Supervisor[ ] Integrated Treatment (Mental Health & Substance Abuse) Counselor[ ] Trauma Specialist[ ] Case Manager[ ] Benefits Specialist[ ] Peer Specialist/Consumer[ ] Housing Specialist [ ] Vocational Specialist[ ] Educational Specialist[ ] Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | **Respondent Agency/Organization:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_****Agency’s Primary Role in SAMHSA Grantee Project:** *(check all that apply)*[ ] Grantee agency[ ] Administrative/Project Coordination/Oversight[ ] Research/Evaluation [ ] Substance abuse treatment provider[ ] Mental health treatment provider[ ] Integrated treatment (Mental Health & Substance Abuse) provider[ ] Shelter[ ] Housing provider [ ] Case management provider[ ] Medical (primary/specialized) care provider[ ] Benefits assistance provider[ ] Education provider[ ] Employment or job training provider[ ] Veterans Administration (VA) services provider[ ] Justice/criminal justice services provider[ ] Child and family services provider[ ] Other:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

**Permanent Supportive Housing (PSH) Self-Assessment**

**Grantee Project Section**

The following questions should be answered from the perspective of your CABHI/GBHI/SSH grantee project and answers should reflect how things are done across all permanent supportive housing sites.

| **Dimension** | **Measure *(not visible to respondents)*** | **Question**  | **Response: DK (don’t know) and NA (not applicable)** |
| --- | --- | --- | --- |
| **Fidelity 1: Choice of Housing**(think of all of your types of PSH when answering these questions) | Extent to which project participants choose among types of housing (e.g., clean and sober cooperative living, housing first, non-model permanent housing) | Do project participants have a choice among various housing options/models (e.g., clean and sober cooperative living, housing first, non-model permanent housing)? |  Project participants choose the type of housing they prefer from a range of housing models/options.  Project participants have a restricted choice of housing models/options (e.g., participants have only 2-3 options).  Project participants are not given a choice of housing models/options and assigned to one type of housing models/options. DK NA |
|   | Extent to which project participants have choice of unit within the housing model. For example, within apartment building, project participants are offered a choice of units.  | Do project participants have a choice of unit within the housing model? For example, within a housing-first project, project participants are offered a choice of units. |  Project participants choose from 10 or more units. Project participants choose from 4-9 units. Project participants choose from 2-3 units.  Project participants assigned to one unit only DK NA |
|   | Extent to which project participants have choice of the neighborhood where their housing is located. | Do project participants have a choice of the neighborhood where their apartment is located? |  Yes No DK NA |
|   | Extent to which project participants can wait for the unit of their choice without losing their place on eligibility lists.  | Can project participants wait for the unit of their choice without losing their place on eligibility lists or housing/voucher? |  Project participants can wait for the unit of their choice without risking discharge from the project or losing priority for services or units.  Project participants can wait for the unit of their choice, but they are allowed a set number of choices or a certain period of time before they lose priority on the list for units (e.g., 3 choices and then go to the bottom of the list).  Project participants must accept the unit offered; no waiting for units is allowed. Prospective project participants who refuse the unit offered are not discharged from the project but go to the end of the waiting list.  Project participants must accept the unit offered or be discharged from the project. DK NA  |
|   | Extent to which project participants control the composition of their household.  | Can project participants control the composition of their households? |  Project participants choose the members of their household or can choose to live alone. Project participants have limited choice of the members of their household.  Project participants must accept a predetermined household not of their choosing or only have the option to live alone. DK NA |
|  | Extent to which project participants have to share an apartment, bedroom, and other living areas with other project participants. | Please indicate the percentage of project participants that fit the following categories. (total adds up to 100%) | \_\_\_\_ % of project participants living in their own independent apartment.\_\_\_\_ % of project participants living in their own bedroom in an apartment with other project participants and share living areas such as bathroom, kitchen, dining room, and/or living room with other project participants.\_\_\_\_ % of project participants that share a bedroom with other project participants. DK NA |
| **Fidelity 2: Functional Separation of Housing & Services** | Extent to which social and clinical service providers are based off site (not at the housing units).  | Which of the following best describes where the social and clinical service providers are located? |  Social and clinical service providers are located off site.  Social and clinical service providers are located off site but may regularly offer some services on site.  Social and clinical service providers are located onsite in an office that is separate from housing management.  Social and clinical service providers are located onsite in an office that is not separate from housing management. (providers shared space with management office) DK NA |
|   | Extent to which service providers do not have any responsibility for housing management functions.  | Are service providers responsible for housing management functions? |  Service providers have no authority to collect rents, enforce lease requirements, initiate evictions, etc.  Housing management and service provision staff have overlapping roles.  Service staff have housing management role including collecting rent, enforcing lease requirements, handles evictions, etc.  DK NA |
|   | Extent to which housing management providers do not have any authority or formal role in providing social services.  | Do housing management providers have any authority or formal role in providing social services? |  Housing management staff has no authority or role in providing social services.  Housing management and services staff have some overlapping roles.  The same staff performs both housing management and service roles.  DK NA |
|   | Extent to which social and clinical service providers are mobile and can deliver services to locations of participants’ choice. (HF-ACT) | Is the project capable of delivering services at locations of participants' choosing? |  The project cannot deliver any services at locations of participants’ choosing.  The project can deliver some services at locations of participants’ choosing.  The project can deliver all services to locations of participants’ choosing. DK NA |
|   | Extent to which the project offers participants who have lost their housing access to a new housing unit. (HF-ACT; FSP) | Which statement best describes how the project responds when participants lose their housing? |  Project does not offer participants a new housing unit nor assists with finding housing outside the project. Project does not offer participants a new unit, but assists them to find their housing outside the project.  Project offers participants a new unit, but only if they meet readiness requirements, complete a period of time in more supervised housing, or the project has set limits on the number of relocations.  Project offers participants a new unit without requiring them to demonstrate housing readiness and has no set limits on the number of possible relocations. DK NA |
|   | Extent to which project participants continue receiving services even if they lose housing. (HF-ACT) | Which of the following best describes project actions regarding services when participants lose their housing? |  Participants are discharged from project services  Participants are discharged from services, but there are explicit criteria outlining options for re-enrollment.  Participants continue to receive project services but may be discharged if they do not meet certain criteria.  Participants continue to receive project services even if they lose housing DK NA. |
| **Fidelity 4: Housing Integration** | Extent to which project participants are living in a housing unit that is integrated at the building level. | Please indicate the percentage of project participants in each of the following four categories (total adds up to 100%).  | \_\_\_\_ % project participants living in a building where 0-25% of all units are occupied by people meeting special needs eligibility criteria. \_\_\_\_ % project participants living in a building where 26-50% of all units are occupied by people meeting special needs eligibility criteria. \_\_\_\_ % project participants living in a building where 51-75% of all units are occupied by people meeting special needs eligibility criteria. \_\_\_\_ % project participants living in a building where 76-100% of all units are occupied by people meeting special needs eligibility criteria.  DK NA |
|   | Extent to which project participants are living in clustered site housing  | Please indicate the percentage of project participants who live in clustered site housing. For example, one large building with 8 or more project participants and all these participants meet disability-related eligibility criteria. (check one only) |  0-14% 15-29% 30-44% 45-59% 60-84% 85-100% |
|   | Extent to which project participants live in private market housing units, in units owned by non-profit housing development agencies, in units owned by local public housing authority and in units owned by mental/behavioral health agencies (HF-ACT) | Please indicate the percentage of project participants in each of the following four categories (total adds up to 100%) | \_\_\_\_% Live in private market housing. \_\_\_\_% Live in housing owned by non-profit housing development agencies offering rental units to people with special needs or meeting disability-related eligibility criteria. \_\_\_\_ % Live in housing units owned by local public housing authorities. \_\_\_\_ % Live in housing units owned by mental health or behavioral health services agencies.\_\_\_\_ % Live in other setting (Specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_) DK NA |
|   | Extent to which project participants' housing units are scattered in different neighborhoods in the city or area. (HF-ACT) | Please indicate the number of different neighborhoods in which your project participants are located. (check one only) |  All project participants live in one neighborhood All project participants live in 2 – 4 neighborhoods All project participants live in 5 – 10 neighborhoods All project participants live in 11 – 15 neighborhoods All project participants live in 16 or more neighborhoods  DK NA |
| **Fidelity 7: Flexible, Voluntary, Services**  | Extent to which project participants choose the type of services they want at project entry.  | Project participants are the primary authors of their service plans at project entry? |  Yes  No  DK NA |
|   | Extent to which project participants have the opportunity to modify service selection.  | Project participants are offered the opportunity to modify their service plans, i.e., modify their selection of services, on an ongoing basis?  |  Yes  No DK NA  |
|   | Extent to which project participants choose the type, sequence, and intensity of services on an ongoing basis. | Which of the following best describes the choice that project participants have on an ongoing basis? |  Project participants may choose from an array of services, including the option of no services.  Project participants may choose from an array of services, but choosing no services is not an option.  Project participants must participate in services that staff identify.  Project participants must participate in a standard service package.  DK NA |
|   | Extent to which services can be changed to meet project participants’ changing needs and preferences.  | Which of the following best describes the array of services (service mix) that could be changed to meet project participants' changing needs and preferences? |  Service mix is highly flexible and can adapt type, location, intensity and frequency based on project participants’ changing needs and preferences.  Service mix is predictable, but significant variations can occur at project participant request.  Service mix can be adapted in minor ways.  Service mix cannot be adapted to meet project participants’ changing needs and preferences.  DK NA |
|   | Extent to which services are consumer driven.  | Which of the following best describes project participants' involvement in the design and provision of services? |  Significant consumer control of services exists in design and provision.  Some consumer input into design and provision of services (e.g., consumer advisory board).  Project is staff-controlled without meaningful consumer input.  DK NA |
|   | Extent to which services are provided with optimum caseload sizes.  | The average caseload of the project's case managers providing support services is? |  Caseload is no more than 15 project participants to each FTE staff member.  Caseload is 16–25 project participants to each FTE staff member.  Caseload is 26–35 project participants to each FTE staff member.  Caseload is 36 or more project participants to each FTE staff member.  DK NA |
|   | Participant/staff ratio for MDs and nurse practitioners | The participant/staff ratio that the project typically maintains with its prescribing MDs and nurse practitioners is? |  No prescribing MDs and/or nurse practitioners is available within the project 150 or more participants per 1 FTE staff 100-149 participants per 1 FTE staff 76-99 participants per 1 FTE staff 75 or fewer participants per 1 FTE staff DK NA |
|   | Policy on intensity of participant/staff contact | Is there a policy regarding the minimum number of face-to-face contacts the participants are required to have with staff in a month? |  No minimum requirement 1 2-3 4-5 6-10 11-14 15+ DK NA |
|   | Actual intensity of participant/staff contact | The average number of face-to-face contacts participants actually have had with staff in a month is? |  < 1 1 2-3 4-5 6-10 11-14 15+ DK NA |
|   | Extent to which project staff meet frequently to plan and review services for each project participant. (HF-ACT) | Project staff meet to plan and review services for participants on the following schedule? |  Project staff meet less than one day a month Project staff meet 1 day per month Project staff meet 1 day per week Project staff meet 2-3 days per week Project staff meet at least 4 days per week DK NA |
|  | Opportunities for participant input into project operations and policy | *Please indicate if the following types of opportunities are available for participant input into project operations and policy (choose all that apply)* |   |
|   |   | Project has a formal grievance process for participants to express concerns or dissatisfaction |  Yes  No  DK NA |
|   |   | Project routinely offers opportunities for participant feedback (e.g., in a community meeting) |  Yes  No  DK NA |
|   |   | Project routinely includes participants on planning / implementation committees |  Yes  No DK NA |
|   |   | Project employs persons with experiences of substance abuse and/or mental health issues in regular staff positions |  Yes  No  DK NA |
|   |  | Project employs persons with experiences of substance abuse and/or mental health issues as peer specialists |  Yes  No  DK NA |
|   |   | Project includes participants on governing body |  Yes  No DK NA  |
|   | Extent to which services are provided 24 hours a day, 7 days a week.  | Services are provided 24 hours a day, 7 days a week? |  Services are available 24/7.  Services are available on flexible schedules, but not 24/7.  Services are available 8 a.m. to 5 p.m., Monday- Friday, with some weekend availability (e.g., 4-12 hours scheduled on weekends).  Services are available from 8 a.m. to 5 p.m., Monday through Friday.  DK NA |
|   | Behavioral health services are team based.  | Are behavioral health services team based? |  Yes-All behavioral health services are provided through a team, including psychiatric services, within the project. **[Continue the ACT team module]** Yes-All behavioral health services except psychiatric services are provided through a team within the project. **[Continue the ACT team module]** No-Individual service providers are primarily responsible for behavioral health services, but specialists are routinely consulted. **[Skip the ACT team module]** No-The primary responsibility for behavioral health services falls to one provider. **[Skip the ACT team module]** DK NA |

**ACT team module (applies to projects with behavioral health teams only)**

The following questions should be answered from the perspective of your CABHI/GBHI/SSH grantee project and answers should reflect how the project is run across all permanent supportive housing sites.

| **Dimension** | **Measure *(not visible to respondents)*** | **Question**  | **Response: DK (don’t know) and NA (not applicable)** |
| --- | --- | --- | --- |
| **ACT team module (applies to projects with behavioral health teams only)** | Extent to which project staff function as a multidisciplinary team; clinicians know and work with all project participants. (HF-ACT) | The percentage of participants who have had face-to-face contact with at least 3 different staff members in the last 4 weeks is? |  Less than 20% 20-49% 50-79% 80% or more DK NA |
|   | Extent to which project uses its daily organizational project meeting for service functions. (HF-ACT) | *Please indicate if the project uses its organizational project (or team) meetings to meet the following functions. (choose all that apply)* |  |
|   |   | Conduct a brief, but clinically-relevant review of any participants with whom they had contact in the past 24 hours |  Yes  No  DK NA |
|   |   | Conduct a review of the long-term goals of all participants on a regularly scheduled basis |  Yes  No  DK NA |
|   |   | Develop a staff schedule based on participant schedules and emerging needs |  Yes  No  DK NA |
|   |   | Discuss need for proactive contacts to prevent future crises |  Yes  No  DK NA |
|   |   | Review previous staff assignments for follow through |  Yes  No  DK NA |

**Service Philosophy Module (In addition to the PSH fidelity assessment)**

The following questions should be answered from the perspective of your CABHI/GBHI/SSH grantee project and answers should reflect how the project is run across all permanent supportive housing sites.

| **Dimension** | **Measure *(not visible to respondents)*** | **Question**  | **Response: DK (don’t know) and NA (not applicable)** |
| --- | --- | --- | --- |
| **Service Philosophy Module**  | Extent to which project participants with psychiatric disabilities are not required to take medication or participate in psychiatric treatment. (HF-ACT; FSP) | Which of the following best describes the requirement of project participants with psychiatric disabilities in taking medication or participating in psychiatric treatment?  |  All participants with psychiatric disabilities are required to take medication and/or participate in psychiatric treatment.  Most participants with psychiatric disabilities are required to take medication and/or participate in psychiatric treatment but exceptions are made.  Participants with psychiatric disabilities who have not achieved symptom stability are required to take medication and/or participate in mental health treatment.  Participants with psychiatric disabilities are not required to take medication and/or participate in treatment. DK NA |
|   | Extent to which participants with substance use disorders are not required to participate in treatment. (HF-ACT; FSP) | Which of the following best describes the requirement of project participants with substance use disorders in participating in substance use treatment? |  All participants with substance use disorders, regardless of current use or abstinence, are required to participate in substance use treatment.  Participants with substance use disorders who have not achieved a specified period of abstinence must participate in substance use treatment.  Participants who are currently using substances must participate in substance use treatment.  Participants with substance use disorders are not required to participate in substance use treatment. DK NA |
|   | Extent to which project utilizes a harm reduction approach to substance use. (HF-ACT; FSP) | Does the project utilize a harm reduction approach to substance use? |  Participants are required to abstain from alcohol and/or drugs at all times.  Participants are required to abstain from alcohol and/or drugs while they are in their residence.  Participants are not required to abstain from alcohol and/or drugs, but staff work with participants to achieve abstinence.  Participants are not required to abstain from alcohol and/or drugs and staff work with participants to reduce the negative consequences of use and/or utilize appropriate stage matched interventions. DK NA |
|   | Project strategies to engage participants who are difficult to engage in services (FSP) | *Are the following project actions used regarding participants who are difficult to engage in services? (Chose all that apply)* |   |
|   |   | Project pursues discharge after a certain number of attempts |  Yes Sometimes No  DK NA |
|   |   | Project withdraws contact for a period of time (e.g., 2 months), then attempts re-engagement |  Yes Sometimes No  DK NA |
|   |   | Project uses therapeutic limit-setting as necessary |  Yes Sometimes No  DK NA |
|   |   | Project uses motivational intervention to build rapport as necessary (e.g., taking the participant out for lunch without pressure to engage in treatment) |  Yes Sometimes No  DK NA |
|   | Project strategies to promote adherence to a treatment plan (FSP) | *Are the following activities used to promote adherence to a treatment plan? (choose all that apply)* |   |
|   |   | Requiring urine-screening |  Yes Sometimes No DK NA  |
|   |   | Paying participants to take medication |  Yes Sometimes No  DK NA |
|   |   | Requiring daily visits with staff |  Yes Sometimes No  DK NA |
|   |   | Withholding of participants' income/allowance |  Yes Sometimes No  DK NA |
|   |   | Withholding of participant services |  Yes Sometimes No  DK NA |
|   |   | Withholding of participant's housing |  Yes Sometimes No  DK NA |
|   |   | Engaging in quid pro quo |  Yes Sometimes No  DK NA |
|   | Components included in treatment plan and follow-up (FSP) | *Are the following components included in a participant's treatment plan and follow-up? (choose all that apply)* |   |
|   |   | Goals that are chosen by staff or automatically set by the project |  Yes Sometimes No  DK NA |
|   |   | Goals that are chosen by staff with input from the participant |  Yes Sometimes No  DK NA |
|   |   | Goals that are chosen by the participant with input from staff |  Yes Sometimes No  DK NA |
|   |   | Participant strengths |  Yes Sometimes No  DK NA |
|   |   | Barriers to achieving goals |  Yes Sometimes No  DK NA |
|   |   | Participant and project actions taken to support goals |  Yes Sometimes No  DK NA |
|   | Life areas included in specific intervention (FSP) | *Are the following life areas systematically addressed with specific interventions? (choose all that apply)* |   |
|   |   | Interventions that target mental health and substance use symptoms |  Yes Sometimes No  DK NA |
|   |   | Interventions that target housing support |  Yes Sometimes No  DK NA |
|   |   | Interventions that target employment and education |  Yes Sometimes No  DK NA |
|   |   | Interventions that target financial needs |  Yes Sometimes No  DK NA |
|   |   | Interventions that target community integration, social support, spirituality, recreation |  Yes Sometimes No  DK NA |
|   | Adjustment or titration of services with the intention of fostering independence and self-determination (FSP) | Which of the following statements best describes the extent to which the project adjusts or titrates services with the intention of fostering independence and self-determination? |  Project does not adjust or titrate services Project adjusts or titrates services in a non-systematic manner Project adjusts or titrates services systematically or according to a protocol Project employs data in order to adjust or titrate services (e.g., a measurement tool is used to determine stage of recovery) DK NA |

**Permanent Supportive Housing (PSH) Self-Assessment**

**Permanent Supportive Housing Site Section**

The following questions should be answered from the perspective of each permanent supportive housing site used in your grantee project. This section will be repeated for up to three permanent supportive housing sites. If your project includes more than three permanent supportive housing sites, please select the three sites used by the most clients in the past year.

**Permanent Supportive Housing Site Information** (report up to 3 sites):

Site 1 Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Site 2 Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Site 2 Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Permanent Supportive Housing (PSH) Self-Assessment**

The following questions should be answered from the perspective of each permanent supportive housing site used in your grantee project. This section will be repeated for up to three permanent supportive housing sites. If your project includes more than three permanent supportive housing sites, please select the three sites used by the most clients in the past year.

| **Permanent Supportive Housing Site: [*NAME*]** |
| --- |
| **Dimension** | **Measure *(not visible to respondents)*** | **Question**  | **Response: DK (don’t know) and NA (not applicable)** |
| **Fidelity 3: Decent, Safe, & Affordable Housing** | Extent to which project participants pay a reasonable amount of their income for housing.  | On average, how much of their income do project participants pay for their housing? |  Project participants pay 30% or less of their income for housing costs.  Project participants pay 31-40% of their income for housing costs.  Project participants pay 41-50% of their income for housing costs.  Project participants pay more than 50% of their income for housing costs. DK NA  |
|   | Whether housing meets HUD’s Housing Quality Standards (HQS). | What percentage of housing units in this program meet HUD's Housing Quality Standards (HQS)? |  76%-100% of units meet HQS.  50%-75% of units meet HQS.  less than 50% of units meet HQS. Housing does not meet HQS standards DK NA |
| **Fidelity 5: Rights of Tenancy** | Extent to which project participants have legal rights to the housing unit.  | Do project participants have full legal rights to tenancy according to local landlord/project participant laws? |  Yes  No  DK NA |
|   | Extent to which tenancy (i.e., stay in permanent housing) is contingent on compliance with program provisions. (FSP)  | Are project participants required to maintain sobriety or abstinence from alcohol and/or drugs in order to stay in permanent housing? |  Yes, this requirement is included in the lease or occupancy agreement  Yes, but requirement is not included in the lease or occupancy agreement No  DK NA |
|   |   | Are project participants required to comply with medication in order to stay in permanent housing? |  Yes, this requirement is included in the lease or occupancy agreement  Yes, but requirement is not included in the lease or occupancy agreement No  DK NA |
|   |   | Are project participants required to demonstrate psychiatric symptom stability in order to stay in permanent housing? |  Yes, this requirement is included in the lease or occupancy agreement  Yes, but requirement is not included in the lease or occupancy agreement No  DK NA |
|   |   | Are project participants required to comply with treatment plan and/or participate in formal treatment activities (e.g., attend groups, see a psychiatrist etc.) in order to stay in permanent housing? |  Yes, this requirement is included in the lease or occupancy agreement  Yes, but requirement is not included in the lease or occupancy agreement No  DK NA |
|   |   | Are project participants required to agree to face-to-face visits with staff in order to stay in permanent housing? |  Yes, this requirement is included in the lease or occupancy agreement  Yes, but requirement is not included in the lease or occupancy agreement No  DK NA |
|   |   | Are project participants required to meet responsibilities of a standard lease in order to stay in permanent housing? |  Yes, this requirement is included in the lease or occupancy agreement  Yes, but requirement is not included in the lease or occupancy agreement No  DK NA |
|  | Extent to which tenancy is contingent on compliance with program provisions.  | Is ongoing tenancy/voucher issuance contingent on compliance with program provisions? |  No-not contingent in any way on compliance with program or treatment participation (e.g., sobriety or medication compliance).  No-Program rules require participating in ongoing services, but failure to comply with this requirement does not lead to eviction/evoked voucher.  Yes- is revoked based on noncompliance with program or failure to participate in treatment (e.g., not maintaining sobriety or keeping to a required medical regime). DK NA  |
|   | Extent to which housing tenure is assumed to be permanent with no actual or expected time limits, other than those defined under a standard lease or occupancy agreement. (HF-ACT) | Is housing tenure permanent with no actual or expected time limits, other than those defined under a standard lease or occupancy/voucher agreement? |  No-There are rigid time limits on the length of stay in housing such that participants are expected to move by a certain date or the housing is considered emergency, short-term, or transitional.  No-There are standardized time limits on housing tenure, such that participants are expected to move when standardized criteria are met.  Somewhat-There are individualized time limits on housing tenure, such that participants can stay as long as necessary, but are expected to move when certain criteria are met.  Yes-There are no expected time limits on housing tenure, although the lease agreement may need to be renewed periodically. DK NA |
| **Fidelity 6: Access to Housing**  | Extent to which project participants are required to demonstrate housing readiness to gain access to units.  | Project participants are required to demonstrate housing readiness to gain access to units? |  No-Project participants have access to housing with no requirements to demonstrate readiness (other than provisions in a standard lease).  Minimal-Project participants have access to housing with minimal readiness requirements, such as engagement with case management.  Yes-Project participant access to housing is determined by successfully completing a period of time in a program (e.g., transitional housing).  Yes-To qualify for housing, project participants must meet requirements such as sobriety, medication compliance, or willingness to comply with program rules.  DK NA |
|   | Extent to which project participants with obstacles to housing stability have priority.  | *Priority consideration for housing access is given to potential project participants with the following characteristics. Check all that apply.* |   |
|   |   | Participants who demonstrate a high level of housing instability/chronic homelessness |  Yes  No  DK NA |
|   |   | Participants who have a criminal justice record, including currently on probation/parole/court mandate  |  Yes  No  DK NA |
|   |   | Participants who are actively using substances, including alcohol and illicit drugs |  Yes  No  DK NA |
|   |   | Participants who do not engage in any mental health or substance treatment services |  Yes  No  DK NA |
|   |   | Participants who demonstrate instability of mental health symptoms |  Yes  No  DK NA |
|   | Extent to which project participants control staff entry into the unit.  | Project participants have control of staff entry into their units? |  Yes-Service staff may not enter the unit unless project participants invite them.  Sometimes-Service staff may enter the unit uninvited only under specific circumstances agreed on in advance.  Sometimes-Service staff may enter the unit uninvited only in a crisis.  No-Service staff has free access to housing units, including making unannounced visits. DK NA  |
|   | Length of time between enrollment and move into permanent housing (FSP). | Participants move from project enrollment into permanent housing in the following time period? |  Within 2 weeks Within 1 month Within 3 months Within 6 months Within 1 year More than 1 year DK NA |
|   | Program requirements in order to access permanent housing (FSP) | Project participants are required to complete a period of time in transitional housing, outpatient, inpatient or residential treatment to gain access to permanent housing? |  Yes  No DK NA  |
|   |   | Project participants are required to attain sobriety or abstinence from alcohol and/or drugs to gain access to permanent housing? |  Yes  No  DK NA |
|   |   | Project participants are required to comply with medication to gain access to permanent housing? |  Yes  No  DK NA |
|   |   | Project participants are required to achieve psychiatric symptom stability to gain access to permanent housing? |  Yes  No  DK NA |
|   |   | Project participants are required to show willingness to comply with a treatment plan that addresses sobriety, abstinence, and/or medication compliance to gain access to permanent housing? |  Yes  No DK NA  |
|   |   | Project participants are required to agree to face-to-face visits with staff to gain access to permanent housing? |  Yes  No  DK NA |
|   |   | Project participants are required to meet responsibilities of a standard lease to gain access to permanent housing? |  Yes  No  DK NA |

**The PSH Self-Assessment is complete. Thank you for your participation!**