# CHRONIC HOMELESSNESS-VERIFICATION GUIDE



The US Department of Housing and Urban Development (HUD) generally defines a household as "chronically homeless" if the individual or head of household is an adult over age 18 with a disability who lives in a place not meant for human habitation, a safe haven, or in an emergency shelter, and has been homeless for at least 12 months in the past three years. Specific HUD guidance on this definition can be found <u>here</u>.

There are several steps to verifying that an individual or household meets the HUD definition of chronic homelessness. Use the guide below to determine if your client *may* meet the definition to qualify for programs for this population.

### Section 1: Current Living Situation

"Homeless" is defined below as living in a place not meant for human habitation, in an emergency shelter/motel voucher program. Individuals or households in transitional housing<sup>1</sup> are NOT considered chronically homeless but do meet the definition of "homeless" for other HUD and non-HUD programs.

1) Is the individual or head of household *currently* homeless as defined above?  $\Box$  Yes  $\Box$  No

If yes, **GO** to **Section 2**. If no, answer question 2 below.

2) Is the individual or head of household currently living in an institutional setting (for example, foster care home, hospital, criminal justice, behavioral health treatment)? □ Yes □ No

If yes, has the individual or head of household been in the setting less than 90 days and were they homeless prior to entering?  $\Box$  Yes  $\Box$  No

If yes to both questions, **GO** to **Section 2**. If no to either question, answer question 3 below.

3) Is the individual or head of household currently residing in housing financially supported by a rapid re-housing program for formerly homeless individuals? □ Yes □ No

If yes, **GO** to **Section 2**. If no, **STOP**, this individual is not considered chronically homeless by HUD's definition.

<sup>&</sup>lt;sup>1</sup> Note: Veterans served in Veterans Affairs (VA)-funded transitional housing retain their "chronic homelessness" status for purposes of HUD-VA Supportive Housing (VASH) program eligibility.

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### Section 2: Disability Verification

- Does this individual or head of household have a diagnosed and documented health condition expected to be of long, continued, or indefinite duration AND that substantially impedes their ability to live independently AND that is of such a nature that the ability to live independently could be improved by more suitable housing conditions? □ Yes □ No
- 2) Is the individual or head of household able to provide a verification of disability via: (a) Written verification of the disability from a professional licensed by the state to diagnose and treat the disability; OR (b) Written verification from the Social Security Administration; OR (c) Receipt of a disability check, e.g., Social Security Disability Insurance check or Veteran Disability Compensation?
  □ Yes □ No

If yes to both questions, **GO** to **Section 3**. If no to either question, **STOP**, this individual is not considered chronically homeless by HUD's definition.

#### Section 3: Duration of Homelessness

Use the **Housing History Chart** document, if needed, to help answer this question.

- A) Has this individual or head of household been homeless for at least one year continuously; OR
- B) Experienced at least four separate episodes of homelessness over 3 years with a break of at least 7 days between each occasion AND the total amount of time this individual or head of household was homeless in the last three years adds up to at least 12 months? □ Yes □ No

If yes, **GO** to **Section 4** and complete the required HUD documentation steps. If no, **STOP** this individual is not considered chronically homeless by HUD's definition.

#### Section 4: Documenting Chronic Homelessness

HUD requires the following third-party documentation to verify chronic homelessness:

- a. Evidence of current homeless status; AND
- b. Evidence of the duration of homelessness
  - i. Evidence that the current homeless occasion has been continuous, for at least one year; OR
  - ii. Evidence that the household experienced at least four separate homeless occasions over 3 years with a break of at least 7 days between each episode; AND the total amount of time homeless in the last three years is at least 12 months; AND
- c. Evidence of a disability.

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Note: One documented encounter, physical observation of living situation, or HMIS record indicating homelessness within a month is sufficient to verify homelessness for the entire calendar month if there is no other evidence indicating a break in homelessness for that month.

- A. To determine what documentation is needed to verify current homelessness and duration of homelessness review the statements below. Use the type of documentation that is appropriate to verify homelessness for each month needing verification. Multiple types of documentation may be needed. Please use the **HUD Housing History Chart** to help with this process.
  - □ I have access to the Homeless Management Information System (HMIS) and this individual has record(s) of a project entry for emergency shelter/motel voucher program.
    - Print the record of project entry from HMIS. Print out must show individual's name and date(s) of enrollment.
  - $\Box$  I have access to HMIS and this individual has HMIS outreach contacts documented in HMIS.
    - Print the record of outreach contact(s) from HMIS. Print out must show individual's name, date(s) of contact(s) and type of living situation at time of contact.
  - □ I physically observed the place this individual is/was living while acting in my professional capacity or I am using my professional judgement to determine this person is/was homeless at the time of my encounter(s) with them.
    - > Complete **Professional Assessment of Living Situation** on agency letterhead.
  - □ I did not physically observe the place this individual is/was living. I received an oral/written statement from another community member (i.e. a shopkeeper, building owner, or neighborhood resident) who physically observed the place this individual is/was living.
    - > Complete **Summary of Witness Statement** on agency letterhead.
  - □ There is no third-party who can verify this individual's living situation. Please note: no more than 3 out of the 12 months of homelessness required for a person to be considered chronically homelessness can be verified by self-certification; the remainder of the months must be verified through one of the documentation types detailed above.
    - > Complete Self-Certification of Homeless form with client.
- B. To document verification of disability the individual or head of household must have one of the following:
  - □ Written verification of the disability from a professional licensed by the state to diagnose and treat the health condition see the **Verification of Disability** form.
  - □ Written verification from the Social Security Administration
  - □ Written copy of a disability check, e.g., Social Security Disability Insurance check or Veteran Disability Compensation