

THE HOUSING PLAN is an individual level intervention that permits a person living with HIV to evaluate their overall life conditions and priorities with respect to finances, housing, and health care. The key characteristics of the Housing Plan are: the identification of needs through a self-assessment tool; the listening skills, patience, and cultural sensitivity of the staff; the formulation of a client plan that contains both short- and long-term goals; and a schedule for the achievement of desired outcomes.

CURRENT ACTIVITY SETTING

*University Medical Practice Association,
Housing Intake Assessment*

- ✓ Directly links the client to medical care
- ✓ Gets the client in a conversation about starting medical care
- Brings the agency closer to where HIV+ people are so that the conversation can begin

I. DESCRIPTION

OBJECTIVES

- ▶▶ To identify what the needs and difficulties of the clients are with regard to housing, finances, medical and mental health, and substance use
- ▶▶ To formulate a plan that will address the client’s needs, both short- and long-term
- ▶▶ To help clients put HIV into perspective as a part of their life and to help widen their focus on current life needs

POPULATION SERVED

- ▶▶ HIV+ individuals with incomes at 50% of median income or less
- ▶▶ Caucasian, African American, Hispanic, Native American, and Asian men and women ages 25 to 44

ACTIVITY DESCRIPTION

The Housing Plan is a screening tool that engages low income HIV+ individuals living in rural areas in formulating a comprehensive plan to address their housing, financial, physical, and mental-health care needs. Additionally, the agency is able to use The Housing Plan to track changes in clients’ housing and health conditions.



QUICK NOTES:

“If you want to engage the client in the process, you’ve got to be human and fully present—not like paperwork that’s walking around.”

— CASE MANAGER

Training and Implementation

- ▶▶ The agency hosts a statewide training for housing case managers on using a set of new housing-assistance forms, including The Housing Plan.
- ▶▶ Each case manager receives templates of the new forms to take back to their agencies.
- ▶▶ The agency also provides on-the-job training and technical assistance for managing the forms.

Housing Plan Scenario

- ▶▶ An HIV+ client identifies a need, or is identified as having a need, for housing assistance.
- ▶▶ The housing case manager invites the client for an hour-long intake meeting. In the first ten minutes, the case manager focuses on building a relationship with the client, emphasizing that any information the client shares is confidential including disclosure of HIV status.
- ▶▶ The case manager asks the client to talk about what is going on in his/her life.
- ▶▶ As the client begins to talk about home life, finances, HIV infection, personal relationships, and changes in employment, the case manager listens attentively.
- ▶▶ S/he then asks if the client is seeing a doctor or is keeping up with medical appointments. When needed, the case manager will make an appointment for the client to see a medical professional.
- ▶▶ After this initial conversation, the case manager opens the client’s file and suggests they complete the necessary paperwork together.
- ▶▶ First, they complete the intake assessment form to document the client’s demographic information and clinical indicators, including CD₄ count and viral load.
- ▶▶ The case manager then introduces The Housing Plan with a one-page “assessment for assistance” form. S/he explains that The Housing Plan forms ask the client to describe their full life situation. This portion of the meeting takes about 45 minutes.
- ▶▶ The case manager reads the questions to the client and writes down the responses. The assessment form opens with questions that include: What situation or event has led you to needing short-term assistance? When did this need begin?
- ▶▶ It also asks the client to think about steps to take toward securing stable housing and how to manage their housing independently.
- ▶▶ As the client answers the questions, the housing case manager helps the client commit to reachable goals whose outcomes can be measured. Some of the key questions are:
 - How long do you need housing assistance and why do you need it now as opposed to last month or the month before?
 - What are you doing to increase your income, reduce your housing expenses, or improve your situation, so you will not need this assistance?
- ▶▶ These questions often lead clients into conversations about health care. The case manager may respond by making referrals to resources in the community.
- ▶▶ When the plan is complete, the case manager asks the client to read it, make any desired changes, and sign it. The forms then go into the client’s file, and the case manager supervisor receives copies.
- ▶▶ The case manager and client then complete other forms (applications for benefits, release of liability and obligation, income verification, etc.).
- ▶▶ When the client file contains all the necessary paperwork, the case manager submits it to the supervisor, who makes housing-assistance determinations.
- ▶▶ To arrive at an appropriate determination, the supervisor considers these key questions: Has the case manager helped to motivate the client? Is the client truly engaged? Are there habits the client could change to help with housing and health? The supervisor also consults the housing plan and assessment forms for background on the client’s situation.
- ▶▶ In addition, the supervisor may ask follow-up questions of the case manager or ask him/her to seek additional information from the client so that The Housing Plan is more complete.
- ▶▶ When the supervisor has arrived at a decision, s/he tells the case manager what type of housing assistance the client will receive.
- ▶▶ The case manager informs the client of the decision over the phone or via letter.

Housing Plan Follow-Up

- ▶ The case manager has contact with the client on a quarterly basis, either in person or over the phone, to help the client progress in their action steps and to take care of other needs, such as health care difficulties.
- ▶ If the client returns for additional housing assistance, the case manager and client will review the housing plan to measure the client's progress against the action steps in the plan.
- ▶ The client revises or updates The Housing Plan annually or whenever there's a change in the type of housing needed or other life changes that affect the plan (e.g., beginning substance use treatment or moving from short- to long-term housing).
- ▶ Each year, the plan is reviewed, and approval for further assistance is determined. The supervisor reviews the new housing plan, compares it to former plans, and makes an assessment of the client's progress.
- ▶ When a client's housing assistance approaches its end, and the client is exiting the program, the case manager will place a reminder phone call to invite the client to come in for an exit interview.
- ▶ At the exit interview, the case manager and client complete a "termination of assistance" form, which asks the client what they will do when the assistance ends. This form and the client's housing plan are then kept on file.
- ▶ The case manager will follow up quarterly with the client to keep abreast of the client's progress, assess medical and psychosocial needs, and inquire about the client's housing situation to ensure that it remains stable.

PROMOTION OF ACTIVITY

- ▶ Professional information networking between housing case managers, medical case managers, and service providers
- ▶ Brochures and information available at case management services and medical clinics
- ▶ Word of mouth

II. LOGISTICS

STAFF REQUIRED

- ▶ Housing case manager to update clients on housing awards, and maintain client files and database
- ▶ Case manager supervisor or program coordinator to review and approve awards and to analyze and report on statistics

TRAINING & SKILLS

- ▶ It is important that the housing case manager demonstrate a genuine interest in their clients.
- ▶ The staff must have knowledge of the range of psychosocial and health care needs of HIV+ individuals.
- ▶ The case management staff must understand the vocabulary of the housing profession and participate in housing assistance training.
- ▶ Good interviewing skills are important, as are active listening skills, patience, and cultural sensitivity.

PLACE OF ACTIVITY

The activity takes place in the client's home, a clinic, or at any of the agency's case management sites. The room must be private and have seating for the client and case manager.

FREQUENCY OF ACTIVITY

The renewal process and The Housing Plan development occur annually or when there is a change in the life situation of a client that affects their housing.

OUTSIDE CONSULTANTS

None

SUPPORT SERVICES

- ▶▶ Transportation to meetings with housing case manager
- ▶▶ Translation of the housing plan into any language spoken by the client community

CONDITIONS NECESSARY FOR IMPLEMENTATION

- ▶▶ The client must be a willing participant.
- ▶▶ Clients need to get past embarrassment or the idea that they should leave this type of assistance “for people who really need it.”

III. STRENGTHS AND DIFFICULTIES

STRENGTHS

- ▶▶ The Housing Plan encourages clients to “think and do” as a way of bringing about changes in their lives and helping to stabilize both their housing and health.
- ▶▶ The activity helps clients identify gaps and needs in their lives, look for solutions, and take action.
- ▶▶ Clients receive the same message from everyone in their health care network, which facilitates a non-fragmented care strategy and builds teamwork among the network’s staff members.

WEAKNESSES

Some clients just “go through the motions” without making changes in their lives.

DIFFICULTIES FOR CLIENTS

- ▶▶ Some clients have a “fear of change.”
- ▶▶ It can be painful for clients to admit in this detailed and signed housing plan that they have done something to “hit bottom.” The Housing Plan as a tool tells the client that they “need help.”

DIFFICULTIES FOR STAFF

- ▶▶ There is an inconsistent level of commitment by housing case managers to spending time on the housing plan.
- ▶▶ Staff often has a heavy caseload; it can be difficult to arrange travel and time to meet the most remote clients.

OBSTACLES FOR IMPLEMENTATION

None

ACTIVITY NOT SUITED FOR

N/A

IV. OUTCOMES

EVALUATION

- ▶ Client Quality of Life Surveys
- ▶ Client reports and feedback

EVIDENCE OF SUCCESS

- ▶ Client Quality of Life Surveys show that 91% of clients report they “are better able to manage their lives because of the assistance.”
- ▶ In client reports, 70% of clients note experiencing “less stress.” The number of people who “lost sleep because of bills” decreased by 50%.
- ▶ Clients report that developing the plan helps to put HIV in perspective. It’s not just because they’re HIV+ that they need assistance; it’s because of their overall life situation and environment.
- ▶ After participating in the activity, 92% say that management of their health care has improved.
- ▶ More clients request transportation to medical appointments (among other services), which shows that clients’ basic needs are getting met so that they can take care of the next level of their needs.
- ▶ Clients who missed a medical or other appointment because they lacked transportation decreased by 46% after the implementation of the new housing plan process.
- ▶ More clients need only short-term, as opposed to long-term, housing assistance.
- ▶ Seventy to 80% of the clients fulfill the action steps of their housing plan.
- ▶ Client feedback indicates that the completion of a housing plan helps them seriously think about their housing, psychosocial conditions, and life situations and take some form of action.

UNANTICIPATED BENEFITS

- ▶ Because the activity helps staff members to stay aware of a “reality of life” that they might not otherwise be connected to, it keeps staff grounded.
- ▶ It gives staff an appreciation for other people’s circumstances.
- ▶ The development of a housing plan establishes a relationship between people who take care of clients and the experts in the discipline. The activity builds a strong team among case managers.

“CONNECTING TO CARE” ELEMENTS OF ACTIVITY

- ▶ The plan allows clients the opportunity to seriously think about their housing, psychosocial conditions and life situations, and take some form of action.
- ▶ The plan identifies service gaps that are more prevalent in rural settings.
- ▶ The process makes clients feel they are not alone.
- ▶ It puts focus on things other than being HIV+.
- ▶ It’s as simple as someone taking the time to sit down and talk with a client. It forces people to slow down and communicate.

KEEP IN MIND...

We have to be sensitive that a client who comes to us has “hit the bottom” when they request this type of service.

