

**Disaster Housing Assistance Program  
Frequently Asked Questions, Set 2  
January 3, 2008**

	<b>Topic</b>	<b>Question</b>	<b>Answer</b>
<b>2-1</b>	Case Management	Will HUD issue guidance regarding the DHAP case management requirement?	HUD issued draft case management guidelines in September. The original draft guidelines have undergone minor revisions, and are now in final form as a HUD notice (PIH Notice 2008-01). Revisions were made to the minimum standard for non-compliance with the case management requirement and other elements addressed in the non-compliance section (pages 5-6 of the notice). The final notice is posted at HUD's web page and will be distributed to DHAP grantees.
<b>2-2</b>	Case Management	HUD is asking DHAP grantees to provide case management services to all DHAP families. How should DHAP grantees determine which family members are served?	<p>Each head of household receiving DHAP rental assistance is required to participate in case management services. DHAP grantees must provide case management services to each head of household that chooses to receive DHAP rental assistance.</p> <p>In addition, all family members listed under an active DHAP lease, or lease addendum, are eligible for case management services. However, in cases where this is not well defined, e.g., family members are not listed on the lease or in the Disaster Information System (DIS), the DHAP grantee has the authority to determine which additional family members are eligible for case management services.</p> <p>The total number of family members that receive case management services does not have any bearing on the type and size of unit or subsidy provided to the family. It also has no bearing on eligibility determinations for subsidized housing programs that the DHAP grantee or its partners might operate.</p>

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<b>2-3</b>	Case Management	If the head of household is elderly, disabled or already employed are they exempt from participating in case management services?	No. All heads of household receiving DHAP assistance are required to participate in case management services. Case managers should work with each head of household to establish an Individual Development Plan (IDP) tailored to their individual needs. The final goal for all families is to secure permanent housing that is appropriate for their household circumstances.
<b>2-4</b>	Case Management	What action should the PHA take if households do not cooperate with case management services? For example, several households have not returned multiple phone calls from our PHA. What does HUD/FEMA consider reasonable attempts at outreach before we start the termination process?	<p>Compliance with the case management requirement applies only to the DHAP head of household. The PHA must have each DHAP head of household sign a certification of their family obligations that includes participation in case management services. The head of household must also sign the IDP and be given a copy of this document. The IDP must contain language stipulating that failure to comply with the objectives of the IDP could result in termination from the DHAP program.</p> <p>An IDP is required because it is the foundation for providing services to families. It itemizes goals that participants have set for themselves with their case manager and guides case managers in identifying specific services that will assist individuals to achieve these goals.</p> <p>Non-compliance with the case management requirement by the head of household is determined by the PHA and defined generally by HUD as:</p>

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			<p><i>Failure to establish and actively comply with the IDP based on documentation from an authorized case manager.</i></p> <p>Under this definition, HUD requires PHAs to adopt the following minimum standard for non-compliance:</p> <p><i>A head of household has missed three (3) consecutive contact attempts (e.g., scheduled meetings, home visits, phone calls and letters) by the case manager regarding case management services. This includes attempts to conduct a needs assessment, sign an ROI, establish an IDP or provide services to a family across an IDP. Attempts to contact the family must include at least one (1) home visit, and at least one (1) certified mailing. However, meetings missed because of a legitimate family emergency should not be counted.</i></p> <p>The term “minimum standard for non-compliance” means that a client may not be terminated for non-compliance less severe than described in this notice; it does <u>not</u> mean that a client must be terminated if non-compliance as described above occurs. As described elsewhere in this notice, that decision must be made on a case-by-case basis.</p> <p>After the IDP is established, active compliance should be determined by the case manager on the basis of a head of household’s effort to make progress across goals in the IDP. For example, a head of household might fail at meeting all goals in their IDP, but could be</p>

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			<p>defined as actively complying with the IDP so long as a case manager determines that they made sufficient effort, given their household circumstances, to achieve these goals. Under no circumstances should a household be terminated for non-compliance on the basis of missing one interim goal in their IDP. Failure to comply with the IDP should be based on a pattern of behavior.</p> <p>Case managers should explain the consequences of non-compliance to each head of household, and make every effort to bring the head of household into compliance. As part of this, case managers should be given the authority to renegotiate the IDP with a head of household to bring them into active compliance with the case management requirement if they feel that it is warranted given household circumstances. During this process the head of household should be provided with notification that their case is being reviewed for non-compliance by their case manager. This notification should detail the reasons the case is being reviewed for non-compliance, and request that the head of household contact the case manager to discuss the matter and work with them to take corrective actions.</p> <p>If the head of household continues to be non-compliant, case managers should inform the PHA that the head of household is non-compliant and provide supporting documentation. Case managers can only make recommendations to the PHA on cases that should be considered for non-compliance with the case management requirement.</p>

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			<p>PHAs must establish local policies for non-compliance with the case management requirement that include HUD's definition and minimum standards for non-compliance. PHAs may set a higher threshold for non-compliance based on local and family circumstances. These policies must be shared with participating DHAP heads of household and available for review by HUD.</p> <p>The PHA will make all final decisions on head of household non-compliance with the case management requirement and provide the head of household with the following:</p> <ul style="list-style-type: none"> <li>• Written notice containing a clear statement of the reasons for termination;</li> <li>• A review of the decision, in which the head of household is given an opportunity to present written or oral objections before a person other than the case manager that referred them for non-compliance. This hearing process should be consistent with the procedures and regulations provided in Notice PIH-2007-26 on the DHAP program.</li> <li>• Provide prompt written notice of the final decision to the head of household.</li> </ul>
<b>2-5</b>	Case Management	HUD requires that the maximum average caseload ratio of case managers to households not	HUD recognizes that a 1:50 ratio of case managers to households could result in a ratio of case managers to individuals that exceeds 1:50. In situations where large households create large caseloads of

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		<p>exceed 1:50. What recommendations can HUD provide to DHAP grantees in managing these large caseloads?</p>	<p>individuals for case managers to assist, HUD recommends that DHAP grantees do the following: 1) implement a service connector model, and 2) strategically assign cases through caseload triage.</p> <p>Under a service connector model, DHAP case managers would work closely with service partners to provide case management and other services to clients. The role of the DHAP case manager in the service connector model is to connect and coordinate services for clients across case management partners, with most of the actual case management and services provided by outside parties. This is especially important across the hardest to serve cases that require more attention, and would also likely involve specialized case management for substance abuse, mental illness, domestic violence or other issues, which the DHAP case manager may not be qualified to provide. The goal of the service connector model is to reduce the workload for a case manager for any one client, in order to increase the amount of time available across all clients.</p> <p>While the service connector model spreads case management and service provision across a network of partners, managed by the case manager, caseload triage strategically assigns cases to a case manager based on level of need. Under this framework, individuals with the greatest level of need and highest frequency of contact are evenly spread across case managers. In this way, no one case manager gets too high a percentage of hard to serve individuals, allowing them to better manage larger caseloads.</p>

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<b>2-6</b>	Case Management	As a small agency, we have no one in house that can do the case management work and the funds are not sufficient to hire a case manager. How does HUD suggest we manage this program?	Most PHAs will have very small DHAP caseloads, and given this scale, the amount of funding provided for case management may not be sufficient to support a contractor or PHA staff dedicated to the provision of these services. In these situations, the PHA can meet the case management requirement by partnering with organizations already serving the families. The case management funding attached to the family under DHAP, even if the amount is small, should cover the extra costs associated with data entry in the DHAP Case Management Reporting System for services that are provided through existing case management programs.
<b>2-7</b>	Case Management	Can PHA staff funded under the Resident Opportunities and Self Sufficiency Program (ROSS) provide case management services to DHAP families?	ROSS services can only be provided to residents of Public Housing. However, staff funded to provide case management or other services under these programs can be used to provide case management services to DHAP families so long as the time allocations for a staff person matches the amount of salary provided under each funding stream.  For example, a ROSS staff person funded at 100% under these funding streams could have their time and salary allocation switched to 75% ROSS and 25% DHAP. The ratio of one program to the other would depend on the workload for each program, with time allocation matching the funding allocation. The total amount of time and salary should not exceed 100% FTE for any one staff person.
<b>2-8</b>	Case Management	Can Housing Choice Voucher Family Self-Sufficiency (HCV/FSS) program coordinators	Funding awarded to PHAs under the annual HCV/FSS NOFA is appropriated specifically to pay the salaries of HCV/FSS program coordinators and cannot be used for any other purpose.



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			<p>at the TAAG website. This is the same web page that case managers will access to report data in the system. Access to the system was originally granted through four separate web pages based on the location of the DHAP grantee. HUD consolidated these web portals into one access point for all DHAP grantees to make the process more user friendly.</p> <p>Before beginning the online registration process, all DHAP grantees must identify a DHAP Case Management point of contact for HUD and the TAAG system. This must be a housing agency staff person or a contracted DHAP project manager, not a staff person from a case management provider. Once this staff person is identified the following steps should be followed:</p> <p>Step 1:           The DHAP Case Management Point of Contact (POC) goes to the TAAG web site and registers.</p> <p>Step 2:           The system automatically generates an email that is sent to the system TA Provider assigned to the DHAP grantee and provided by HUD's contractor PRS Associates, LLC. The TA Provider approves the Case Management POC and the system sends the Case Management POC an email confirming this approval.</p> <p>Step 3:           After the DHAP Case Management POC is approved, individual case management staff can register with the system at the TAAG web page. The case management</p>

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			<p>staff person completes the online registration form, choosing their own user name and password. An email is automatically sent by the system to the DHAP Case Management POC for approval. The DHAP Case Management POC approves each case management staff person by clicking on a link in the email sent to them by the system. They will be prompted to select a level of access for each case management staff person from a predefined list. A final email will be automatically sent to the system and the case management staff person indicating that their system access was approved by the DHAP Case Management POC.</p> <p>Step 4: DHAP Case Management POCs and case management staff can begin using the system.</p>
<b>2-12</b>	Case Management	Will HUD provide technical assistance on this system over the life of the DHAP?	Yes. A technical assistance (TA) provider from PRS Associates, LLC, a HUD contractor, is assigned to each DHAP grantee. TA providers will assist DHAP grantees with software questions and reporting issues. TA providers will also review data quality and may follow-up with DHAP grantees regarding their case management program, irregularities in DHAP reports, or implementation challenges.

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			<p>DHAP grantees are assigned to one of four TA providers by state. TA provider assignments for DHAP grantees across the following housing agencies and states are:</p> <ol style="list-style-type: none"> <li>(1) Harris County Housing Authority (TX): Vanessa Patterson (239-242-0665 / DHAPvpatterson@aol.com)</li> <li>(2) Houston Housing Authority (TX): Vanessa Patterson (239-242-0665 / DHAPvpatterson@aol.com)</li> <li>(3) Rest of Texas and Arkansas (AR and TX): Teri Pannia (713-729-6213 / DHAPPannia@aol.com)</li> <li>(4) Louisiana and Mississippi (LA and MS): Lillie Bender (228-365-0126/ DHAPbender@aol.com)</li> <li>(5) Georgia and Tennessee (GA and TN): Vanessa Patterson (239-242-0665 / DHAPvpatterson@aol.com)</li> <li>(6) All other states: Jesse Jones (301-384-7958 / DHAPjjones@aol.com)</li> </ol>
<b>2-13</b>	Case Management	Who does a DHAP grantee contact if they have questions about case management guidelines or the case management reporting system?	<p>DHAP grantees should contact their assigned TA provider with questions related to TAAG, the DHAP Case Management Reporting System. They can also contact Tony Hebert, HUD's point of contact for DHAP Case Management Services, regarding case management policies and processes. Mr. Hebert can be reached at (202) 402-7387 / <a href="mailto:tony.x.hebert@hud.gov">tony.x.hebert@hud.gov</a>. If you are unable to reach Mr. Hebert, contact Shauna Sorrells at (202) 402-2769 / <a href="mailto:shauna.m.sorrells@hud.gov">shauna.m.sorrells@hud.gov</a>.</p>