**Ohio BoSCoC Housing Assessment and Resource Prioritization (HARP) Tool**

**Households with Children**

Refer to the HARP Tool Guidance and HARP Tool e-learning course for detailed guidance about completing HARP Tools.

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| **Head of Household Name** |  | **Head of Household HMIS Unique ID** |  | **Assessment Date** |
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| **Assessment Type** |  | **Assessment Level** |  | **Assessment Location (County)** |
| [ ]  Phone[ ]  Virtual[ ]  In person |  | [ ]  Crisis Needs Assessment[x]  Housing Needs Assessment |  |  |

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| **Meeting Basic Needs** | **Response** | **Score** |
| 1. Is the household able to do the following on most days? For those currently in emergency shelter, please respond based on your experience immediately prior to shelter entry. *(Please check boxes.)*

**No Yes Basic Needs**[ ]  [ ]  Find a safe place to sleep[ ]  [ ]  Access a bathroom when needed[ ]  [ ]  Access a shower when needed[ ]  [ ]  Get food[ ]  [ ]  Get water or other non-alcoholic beverages to stay hydrated[ ]  [ ]  Get clothing or access laundry when needed[ ]  [ ]  Safely store belongings | Yes to all basic needs | 0 |
| No to only 1 basic need | 1 |
| No to 2 or more basic needs | 3 |
| Client doesn’t know | 0 |
| Client prefers not to answer | 0 |
| Maximum Points 3**Meeting Basic Needs Subtotal =** |  |
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| **Housing Stability** | **Response** | **Score** |
| 1. How long has it been since the household lived in stable, permanent housing?*‘Stable, permanent housing’ is defined as a housing unit that the household was able to stay in (either a unit or a unit of a friend or family member) for an unlimited amount of time, where the household had a designated place to sleep, and they contributed something toward household expenses*
 | Less than 6 months | 0 |
| 6 to 8 months | 1 |
| 9 to 12 months | 3 |
| More than 12 months | 5 |
| Client doesn’t know | 0 |
| Client prefers not to answer | 0 |

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| 1. Within the last 5 years, have adults in the household been evicted from a housing unit?
	1. No
	2. Evicted via a verbal or written 3-day notice, or something similar
	3. Evicted via a court-ordered eviction
	4. Both B and C, or multiple evictions or involuntary exits
 | A | 0 |
| B | 1 |
| C | 2 |
| D | 2 |
| Client doesn’t know | 0 |
| Client prefers not to answer | 0 |
| 1. If yes to #3 above, in the last 5 years, how many times have adults in the household been evicted from a housing unit? This includes any type of eviction.
 | NA or none | 0 |
| 1 time | 0 |
| 2 or more times | 1 |
| Client doesn’t know | 0 |
| Client prefers not to answer | 0 |
| 1. Have any adults in the household ever been evicted from a subsidized housing unit where their name was on the lease? This includes any type of eviction.
 | No | 0 |
| Yes | 1 |
| Client doesn’t know | 0 |
| Client prefers not to answer | 0 |
| 1. Have any adults in the household owned a home or had a lease in their name within the last 5 years?
 | No | 2 |
| Yes | 0 |
| Client doesn’t know | 0 |
| Client prefers not to answer | 0 |
| 1. Do any adults in the household believe they have been discriminated against in attempts to access housing based on their identity or background?
 | No | 0 |
| Yes | 1 |
| Client doesn’t know | 0 |
| Client prefers not to answer | 0 |
| Maximum Points 12 **Housing Stability Subtotal =** |  |
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| **Income, Employment, and Education** | **Response** | **Score** |
| 1. In the past three years, have any adults in the household lost housing because they weren’t able to pay rent and/or utilities or contribute to household expenses?
 | No | 0 |
| Yes | 1 |
| Client doesn’t know | 0 |
| Client prefers not to answer | 0 |
| 1. ***From HMIS Program Enrollment***Did any adult household members report any income in their current program enrollment?

**Income Sources**employment, unemployment insurance, VA service-connected/non-service-connected disability compensation, private disability insurance, worker’s comp, TANF, general assistance (GA), retirement income from Social Security, Pension or retirement income from a former job, child support, alimony and other spousal support, other income | Household’s only income comes from listed source | 0 |
| Household’s income includes income from SSI or SSDI | 1 |
| No income | 2 |
| Client doesn’t know | 0 |
| Client prefers not to answer | 0 |

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| 1. Do any adults in the household owe money to a past landlord or utility company?
 | No | 0 |
| Yes | 1 |
| Client doesn’t know | 0 |
| Client prefers not to answer | 0 |
| 1. In the past year, has a credit score caused a landlord to deny any adult household member for rental housing?
 | No | 0 |
| Yes | 1 |
| Client doesn’t know | 0 |
| Client prefers not to answer | 0 |
| 1. Have all adult household members completed high school or obtained a GED?
 | No | 2 |
| Yes | 0 |
| Client doesn’t know | 0 |
| Client prefers not to answer | 0 |
| Maximum Points 7**Income, Employment, and Education Subtotal =** |  |
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| **Experiences of Homelessness** | **Response** | **Score** |
| 1. ***From HMIS Program Enrollment (Prior Living Situation)***

*Data Element: Including this episode, number of times on the streets, in ES, or Safe Haven in the past three years*.Complete for the adult in the household with the highest number of times homeless. | 1 time | 0 |
| 2 times | 3 |
| 3 or more times | 5 |
| Client doesn’t know | 0 |
| Client prefers not to answer | 0 |
| 1. ***From HMIS Program Enrollment (Prior Living Situation)****Data Element: Total number of months homeless on the streets, in ES, or Safe Haven in the past three years (including this episode).* Complete for the adult in the household with the highest number of months homeless.
 | 1 to 2 months | 0 |
| 3 to 6 months | 2 |
| 7 to 12 months | 4 |
| More than 12 months | 5 |
| Client doesn’t know | 0 |
| Client prefers not to answer | 0 |
| 1. Did any adults in the household experience homelessness as a child?
	1. No
	2. Yes, (alone or with family) spent time living with other family members or friends
	3. Yes, (alone or with family) spent time living in an emergency shelter, a hotel/motel, or unsheltered
	4. Had experiences of both B & C
 | A | 0 |
| B | 2 |
| C | 3 |
| D | 4 |
| Client doesn’t know | 0 |
| Client prefers not to answer | 0 |
| Maximum Points 14**Experiences of Homelessness Subtotal =** |  |
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| **Health and Wellbeing** | **Response** | **Score** |
| 1. ***From HMIS Client Profile***Is any household member 60 years of age or older?
 | No | 0 |
| Yes | 1 |
| Client doesn’t know | 0 |
| Client prefers not to answer | 0 |

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| 1. Do any adult household members have a disability or health condition, including a mental illness or substance use disorder, that has contributed to a loss of housing in the past 3 years?
 | No | 0 |
| Yes | 1 |
| Client doesn’t know | 0 |
| Client prefers not to answer | 0 |
| 1. If yes to #17, how many times in the past year has the adult household member(s) been hospitalized because of the health condition or disability, including a mental illness or substance use disorder?
 | NA or None | 0 |
| 1 to 3 times | 1 |
| More than 3 times | 2 |
| Client doesn’t know | 0 |
| Client prefers not to answer | 0 |

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| 1. If yes to #17, does the health condition or disability, including a mental illness or substance use disorder, currently make it hard to maintain housing?
 | NA or No | 0 |
| Yes | 2 |
| Client doesn’t know | 0 |
| Client prefers not to answer | 0 |
| 1. If adult household members have a disability or health condition, including a mental illness or substance use disorder, are they currently receiving services for the disabling or health condition?
 | No | 1 |
| NA or Yes | 0 |
| Client doesn’t know | 0 |
| Client prefers not to answer | 0 |
| Maximum Points 7**Health and Wellbeing Subtotal =** |  |
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| **Interactions with Other Systems and Experiences of Trauma** | **Response** | **Score** |
| 1. Has any adult in the household ever been in jail, arrested, or accused of a crime or criminal activity, even if it wasn’t true?
 | No | 0 |
| Yes | 2 |
| Client doesn’t know | 0 |
| Client prefers not to answer | 0 |
| 1. Has any adult in the household ever been convicted of a crime that makes it difficult to access or maintain housing?
 | No | 0 |
| Yes | 2 |
| Client doesn’t know | 0 |
| Client prefers not to answer | 0 |
| 1. Prior to becoming an adult, did any adults in the household have involvement with the juvenile justice system?
 | No | 0 |
| Yes | 2 |
| Client doesn’t know | 0 |
| Client prefers not to answer | 0 |
| 1. As a child (before age 18), were any adults in the household placed in foster or kinship care or a group home?
 | No | 0 |
| Yes | 1 |
| Client doesn’t know | 0 |
| Client prefers not to answer | 0 |
| 1. Is any adult in the household currently working with the child welfare system?
 | No | 0 |
| Yes | 1 |
| Client doesn’t know | 0 |
| Client prefers not to answer | 0 |

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| 1. ***From HMIS Program Enrollment (Survivor of Domestic Violence)***Did any adult household member report experiencing domestic violence within the past three months?
 | No | 0 |
| Yes | 2 |
| Client doesn’t know | 0 |
| Client prefers not to answer | 0 |
| 1. ***From HMIS Program Enrollment (Survivor of Domestic Violence)***Did any adult household member report that they are currently fleeing domestic violence?
 | No | 0 |
| Yes | 2 |
| Client doesn’t know | 0 |
| Client prefers not to answer | 0 |
| 1. Immediately prior to this episode of homelessness, or since this homelessness episode began, have any adult household members been beaten up, assaulted, threatened or controlled with violence, or made to feel unsafe?
 | No | 0 |
| Yes | 1 |
| Client doesn’t know | 0 |
| Client prefers not to answer | 0 |
| Maximum Points 13**Interactions with Other Systems and Experiences of Trauma Subtotal =** |  |
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| **Household Composition** | **Response** | **Score** |
| 1. How many children are in the household? This could include children who are not currently living with the family but will be re-united at some point in the future.
 | 1 | 0 |
| 2 to 3 | 1 |
| 4 or more | 2 |
| Client doesn’t know | 0 |
| Client prefers not to answer | 0 |
| 1. How many children in the household are under age 11? This could include children who are not currently living with the family but will be re-united at some point in the future.
 | 0 | 0 |
| 1 | 1 |
| 2 | 2 |
| 3 or more | 3 |
| Client doesn’t know | 0 |
| Client prefers not to answer | 0 |
| 1. How many children in the household have a disability? This could include children who are not currently living with the family but will be re-united at some point in the future.
 | 0 | 0 |
| 1 | 2 |
| 2 or more | 4 |
| Client doesn’t know | 0 |
| Client prefers not to answer | 0 |
| Maximum Points 9**Household Composition Subtotal =** |  |
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| Maximum Points 65**Total Score =** |  |