



Emergency Shelter and Housing Assistance Program (ESHAP) 2025

Navigator Services Process Guide

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Mission and Vision

The mission of MaineHousing is to assist Maine people in obtaining and maintaining quality affordable housing and services suitable to their housing needs.

It is the vision of MaineHousing that all Maine people have the opportunity to live in quality affordable housing.

Emergency Shelter and Housing Assistance Program (ESHAP) 2025 Vision

The vision of the 2025 Emergency Shelter and Housing Assistance Program is to make continuous strides in transforming the current system into a well-coordinated, understandable housing crisis resolution system, which uses a client-centered approach, to assist clients in quickly achieving their housing goals. We envision a system that works collectively with partners, consumers, families and advocates; toward a mutual goal ensuring that individuals and families experiencing homelessness are safely, supportively, and permanently housed so that homelessness becomes a temporary situation with accessible solutions.

Navigator Role

Welcome to your role as a Housing Navigator at a participating Emergency Shelter and Housing Assistance Program (ESHAP) homeless services program. Your work is a crucial element in helping people experiencing homelessness to find a stable, lasting home.

The world of homeless services is complex and constantly changing. There are many programs and resources, each with their own requirements and eligibility requirements. For a person experiencing homelessness, this can be confusing and difficult to navigate. That is where a Housing Navigator is there to help. You are there to help guide your clients through this complex system with the goal of achieving stable housing.

This goal is achieved through your knowledge of the system. Educating yourself on what the resources are in your area is crucial to your success in housing the people you serve. Since an episode of homelessness can have many causes, you must be aware of not only housing resources, but also those that help with mental health, employment, substance use, and a myriad of other factors that can lead to a person experiencing homelessness.

While you may coordinate and work with other agencies that are addressing other aspects of your clients' health and well-being, it is important to remember that your primary focus is always housing—getting your clients housed and helping them stay housed. To that end, it is important that you are familiar with the processes for applying to various housing resources, such as vouchers and subsidized housing. It is also important that you are constantly working to establish and maintain relationships with local landlords. Those relationships, once forged, are a vital element in placing clients in appropriate housing.

Once you have your clients housed, the work is not done. Even once a client has successfully secured housing, there are almost always challenges to remaining housed. Housing Navigators will help their clients to work through the challenges that present themselves within those important first twelve to twenty four months. This time will allow the client time to become more secure in their housing, addressing the things that could cause them to lose their housing, and develop the good habits that will keep them in housing moving forward.

Coordinated Entry

The Coordinated Entry System (CES) is a HUD mandated system that requires all HUD funded homelessness programs to work together to house people. In Maine, any person who enters an ESHAP shelter, or who is entered into ESHAP while in a place not meant for habitation is eligible to access CES. CES will take into account the person's CES assessment, length of time homeless, and other factors to prioritize them for housing resources. A list of the housing resources using CES is included at the end of this guide; CES is working to add new housing resources all the time, so this list will grow over time. This system makes your job and the job of your clients easier. Rather than spending a great deal of time filling out many housing applications that may or may not be available or applicable to your clients, a HUB coordinator will track openings in projects and people who need housing, and match those resources with the people who need them.

Housing First

One thing you will hear often while working with people experiencing homelessness is the phrase “Housing First.” Housing First is something that HUD has clearly stated it wants all of its funded programs to follow to the best of their ability. But what is Housing First?

Simply put, Housing First means that a person experiencing homelessness should be housed as soon as possible and any other issues surrounding their homelessness should not be a reason to delay housing a person. Issues such as employment, mental health, substance use, etc. are all easier to deal with once a person is housed. People can start work on any or all of these issues in shelter, but should not be kept in shelter because of them.

So, how does this work on the ground? It starts from the very first moment a person comes to look for shelter. An intake worker should first have a conversation to see if there is any alternative to the client entering shelter. Many times a small amount of diversion may be able to keep them housed or get them housed with family, friends or other resources. If there isn't another alternative, part of the conversation during intake should be what they want to do for housing. Even before formal entry into Navigator Services and work with a housing Navigator, all staff in a shelter should be focusing on housing and helping the people at shelter work towards housing.

In the course of working with a person experiencing homelessness, every effort should be made to meet the client where they are at in trying to house them; housing options should meet the person's needs in that moment. Once a resource has been secured for housing, it should be used as quickly as possible. Any approach that says issues must be resolved before housing a person are contrary to Housing First and should be reconsidered. By doing this, we work to ensure that instances of homelessness are rare, brief, and one time occurrences.

Maine Homeless Services Hubs

A homeless service hub provides a local foundation for the roll-out and operation of Coordinated Entry (CE), including case conferencing meetings, management of a regional (hub-level) prioritization list, matching individuals & families experiencing homelessness to appropriate housing resources, and improving communication and coordination between providers. Homeless service hubs connect provider networks to the policy, advocacy, and funding work happening at the Statewide Homeless Council and Maine Continuum of Care.

MaineHousing Homeless Academy

MaineHousing utilizes an online Learning Management System (LMS) called Bridge for its Homeless Academy. Bridge allows us to provide online trainings, both for new Navigators, and annual ongoing training for all Navigators across the state.

Initial Online Training

To begin using Bridge, Navigators will need to contact HIacademy@MaineHousing.org. The HMIS Training & Support Specialist will create a Learner Profile and assign appropriate training courses. After the Learner Profile has been created, Navigators will:

- Receive an email regarding account creation
- In the body of the email, click the 'Set a Password' button
- A Bridge webpage will open and you will be prompted to create a password
- Once you have a password, the login screen will appear
- Your User Name will be your email address
- Upon signing in, you will need to review and agree to the 'Terms of Use'
- After agreeing, you will be directed to 'My Learning' where you can access assigned courses
- Another way to access the courses is through a second email, the Course Invitation
- A third email will be received to notify you of the password creation

A Certificate of Achievement will automatically be issued to the Navigator by Bridge once a successful score (80+) is achieved for the course. Each course allows three attempts to pass the course. If a Learner has used all 3 attempts and still has not passed the course, they will need to contact HMIShelpdesk@mainehousing.org to request a Course Reset – in which, additional training may be deemed necessary.

The link to access Bridge is: <https://mainehmis-mainehousing.bridgeapp.com/login>.

Annual Online Trainings

MaineHousing requires all Housing Navigators to complete annual online trainings through the Homeless Academy. These trainings are made available to each agency for a designated one month period during the year. The HMIS Training and Support Specialist will contact your agency with the dates of annual training availability. The following trainings must be completed by all Navigators in order to remain in compliance:

- ESHAP
- STEP
- Data and Security
- RentSmart
- Homeless Verifications
- Fair Housing
- Coordinated Entry

Navigator Process

Shelter Intake

A shelter intake will happen according to the process your organization has in its own policies and procedures. This process may be conducted by a Navigator or by another staff. Either way, the Housing Navigator should ensure that the date of intake is clearly noted in the client file and that a homeless verification is included. Verifications of homelessness need to meet very specific HUD rules. For a guide on what constitutes an acceptable verification, please see **Appendix A- Verifications of Homelessness**.

If you are providing navigation services to a client who is unsheltered, you will not have a shelter intake to rely upon, and you will be responsible for collecting all of the data needed to enter a client into HMIS or your comparable database.

Initial Assessment

Prior to enrollment in ESHAP Navigator Services, all participants must have completed a Maine Coordinated Entry (CE) Assessment. The CE Assessment determines suitability and prioritization for all programs participating in the Maine Coordinated Entry System. If possible, providers should check HMIS to see if the participant has had a CE Assessment completed by any Access Point within the last 6 months. If they have, the participant may be enrolled without further assessment. If they have not, the assessment must be completed by the provider prior to enrollment in Navigator Services. If they have had an assessment and it is more than 6 months old, the provider will make updates or changes to the assessment using an interim review. The provider should also look to ensure that the participant has not been exited from CE. If they have, the provider will complete a new assessment and enter them back into CE.

Entry into ESHAP

Once the assessment is complete, you can determine if the client is eligible for entry into the ESHAP program. If a client is receiving housing navigation or rapid rehousing (RRH) services through another program or agency or their homeless status is not either Category 1 or 4, they are not eligible for ESHAP services. A letter should be provided to the client to inform them of their ineligibility and should also be included in their file. Once a client is determined eligible for ESHAP, they are entered into the ESHAP program in HMIS or comparable database, and a Housing Stability Plan (HSP) is completed with them.

Housing Stability Plans (HSPs)

The key document in providing navigation services to a client is the Housing Stability Plan (HSP). An HSP includes the housing and income goals that will be important to a client gaining and maintaining housing. Those two goals are required on all HSPs. A Navigator should also address other goal areas that may influence the ability of the client to achieve and maintain housing. These can be goals such as education, childcare, health, mental health, substance abuse, or others. While other goals may be included, they should always refer to how those areas will impact the client's housing. Comprehensive case management is not the role of a Navigator; you are focused on housing the client, and everything should be approached through that lens.

You will need to complete an HSP with the client every 90 days and that service needs to be entered into HMIS or a comparable database. Since the HSP is a 90 day document, goals on the HSP should be attainable within those 90 days. Longer term goals should be broken down into segments that are achievable within that time frame.

Once the HSP is in place, you must conduct progress updates at 30 days and 60 days. These updates note any progress the client has made on the goal, and any other pertinent information to getting the client housed. These updates can be included on the HSP itself, or can be done in the form of separate progress or case notes.

Document Readiness

Part of the initial Housing Stability Plan is a checklist of documents that a client may need in order to get certain subsidies. It has been shown that one of the biggest barriers to quickly housing a client is not having the necessary documents ready when a housing resource is offered. Due to this, it is crucial that the Navigator assess what documents the client has upon entry and immediately start work on obtaining any and all documents they are missing. In some cases, a client may need to obtain one or more type of document before being able to obtain another. Example, obtaining a birth certificate before being able to get a photo ID. Some of these documents can take weeks or months to obtain. For those reasons, it is imperative that Navigators begin this work ASAP.

Tenant Education

While you are working to get clients housed, it is important to offer them training on how to be successful once housed. Through the RentSmart curriculum, you can help your clients learn how to be a good tenant. They will learn how to interact appropriately with landlords, what is expected of them as a tenant, as well as how to budget and meet the costs of housing. This education can do a great deal to increase a client's stability in housing and prevent future instances of homelessness.

Mainstream Resources

It is important that every client is connected to all available mainstream resources for which they are eligible or, at the least, a conversation about those resources should take place with the client. At intake, staff should ascertain what resources the client already has, and note that in the intake documentation. If there are resources the client is eligible for but is not receiving, you should work with the client to complete referrals to those resources. Having these resources in place can be a great help in maintaining stability once a client is housed.

Releases of Information

Client confidentiality is protected by state and federal law, so there are strict guidelines around what you can and cannot share about a client. If your agency participates in HMIS, the client must sign an HMIS release upon intake. The client can opt out of allowing their data to be shared amongst HMIS providers, but it is encouraged that they allow the data sharing. Data sharing makes it much easier to coordinate services for them within HMIS.

If you need to communicate about your client in any way outside of HMIS, with any other agency or individual, you will need to have an authorization to release information, or an ROI. An ROI should be specific to the time, person/agency, purpose and scope of the information to be shared. A general ROI that states something to the effect of “We can share any information about you with any of the below agencies for any reason for as long as we choose” is not a valid ROI.

It is important that any evidence of communication between you or your agency and any other person about your client **MUST** be accompanied by a signed ROI in the client’s file. Not doing so is a breach of confidentiality, and could open you and your agency up to legal action.

Rental Assistance

For most clients, some form of rental assistance will be necessary to get them housed. There are many different types of subsidies, each with their own eligibility requirements. This is probably the most confusing part of trying to get housed, and where your expertise as a Navigator will be of the greatest value. You will work the client to fill out and submit applications to various resources, and help them follow up on those applications.

Housing Identification and Search

The most important part of this process is your knowledge of your area. You have to know what resources are out there, especially for project based voucher programs and local Public Housing Authority resources, if any. Since each of those varies by area, you must be the expert. Also keep in mind that subsidized housing is not the only answer. Oftentimes, the best option is for the client to find a family or friend who can help them, or some other community support that is offered.

Another key part to finding housing is creating and maintaining relationships with local landlords. Those relationships will allow you to lease up your clients faster and easier, as well as keep them in housing. Actively seek out landlords in your area and ask if they are willing to lease to people using subsidies. Those who are, keep in touch with them and let them know when you have people looking. Ask if they will reach out when they have vacancies. Remember, large property management agencies aren't the only game in town. Oftentimes, individual landlords are going to be your best bet to partner with.

Finding safe and affordable housing is the goal so it is required that when looking at a potential unit for your client, you assess the habitability and safety of a unit before they agree to rent.

Leasing Up

Once you've found housing for your client, you will need to work with them through the process of leasing up. The process will differ slightly depending on what subsidy, if any, the client has.

For clients with a project based subsidy, the paperwork will usually all be done with the landlord. The lease, subsidy paperwork, etc. will consist of one set of documents your client completes and returns to them.

For a tenant based subsidy, the process will be a little more complex. In that case, you will have paperwork to complete with the landlord, specifically the lease and any accompanying documents the landlord requires. In addition to that, the agency providing the subsidy will have paperwork that needs to be completed as well.

There will likely be a packet of paperwork to request approval for the unit. In the case of an HCV or STEP voucher, this is called the Request for Tenancy Approval (RFTA), or Request for Unit Approval (RFUA). Some documents you will have to bring to the landlord to complete, others you will complete with the tenant. There are also some you will go over and have signed by both parties. It is your job to communicate with the landlord and your client, gather the needed documents and return them to the agency.

Once those documents are in, the agency will schedule an inspection of the unit. If the unit passes, you will need to work with the landlord and client to get the lease signed and get a copy of the lease and final paperwork back to the agency issuing the subsidy.

When a participant obtains housing, the Navigator must attempt to complete a housing quality check to ensure that the participant is moving into safe, habitable housing. If the housing unit is subsidized by any state or federal funding, the Navigator can be assured that the unit is inspected as a part of the leasing process. For other housing situations, such as moving in with family or friends

or market rate rent, the Navigator should tour the unit to ensure it is safe and habitable.

The most important part of this whole process is communication. You will be the person coordinating things between the landlord, your client, and the agency. Make sure you communicate things to each party as the process unfolds. If there is a setback, like a failed inspection, it is important that you communicate that to everyone and let the landlord and client know what the next steps are. Landlords can get impatient when the process drags on, and this is much worse when they aren't being given regular information during the process. Understand that this usually not the landlord being uncooperative. The longer their unit remains vacant, the longer until they get paid.

This is their livelihood so it is understandable that they will want to move forward as soon as possible.

Stabilization Services

When you have successfully housed your client, make sure to take a moment to celebrate this achievement with them! At the same time, recognize that your work and their work is not done. While getting a person into housing is important, keeping them there and ensuring they don't end up homeless in the future is every bit as important. Especially with a Housing First approach, Navigators need to realize that there are going to be many issues the client still needs to work on to be able to keep the housing they've gotten.

ESHAP requires that Navigators continue to work with a client on their Housing Stability Plans for one year following getting housed. HUD requires the program participant to meet with a Navigator not less than once per month to assist the program participant in ensuring long-term housing stability. This is required regardless of the type of housing they obtain. Subsidized or not, living with family or friends, it is your responsibility to continue working with them for a year to ensure they are stable in their housing moving forward. In the case of STEP/TBRA or Home to Stay HCV subsidies, the client is also obligated to continue with services. For other types of housing, the client may refuse navigation services if they choose. In the case of DVRC clients, they are permitted to refuse service regardless of the voucher type. If the client refuses, you need to clearly document that in their client file. Remember, you are always obligated to offer services. The client is not always obligated to accept them.

If a client has opted or is required to continue services, but avoids/refuses contact with you, there are certain steps you should take at that point. Make every attempt to contact the client via phone, text, email, etc. Stop by their apartment and knock on the door. Leave them notes if they do not answer. If after 30 days the client is still refusing contact, leave them a note informing them that they will be exited from ESHAP services. If the client has a STEP or HTS HCV, this note should also inform them that they may lose their voucher if they are exited from ESHAP. At that point, you should also contact the HCV department to let them know the client has not responded. The HCV Occupancy Specialist will lead you through the next steps. For recordkeeping purposes, these attempts to contact a client can be counted as a service to be entered into HMIS or comparable database. The attempts to contact should also be noted in the client file.

Annual Income Verification

One year after enrollment in Navigator Services, the participant must be assessed for continued eligibility. This eligibility is determined by the participant's income. The Navigator will complete an income verification and ensure that the participant is at or below 30% of Area Median Income. Any participant that exceeds this threshold must be discharged.

Warm Hand-offs

In some situations, a client will attain housing that includes services, such as Permanent Supportive Housing (PSH). Often in those cases, continuing navigation services with that client may be redundant. If that is the case with a client, a Navigator may conduct a warm hand-off with the client and the new service provider.

A warm hand-off is not simply an email and a good luck to the client. Warm hand-offs are a process. They should include some meetings prior to transferring services, an exchange of information between you and the new service provider, and ideally a meeting with you, the client, and the new service provider during which you formally transfer the client to the new provider. Once the hand-off has occurred, you should check in with the new provider a couple times to ensure they do not need further information, and that all the details are in place to ensure you client continues to get the services they need.

Ending Services

Eventually, it will come time to end services with a client. This may happen when a client times out of the program, refuses services, transfers services to a new provider, is terminated, or any other number of reasons.

You must clearly document in the client's file when you are ending services, and the reason. In most cases, a simple note in the client file detailing the date and reason for exit is sufficient. If your agency is still using the ESHAP Exit Data form, this will also be sufficient.

However, if the client is being terminated from your services, more will be required. You or your agency will have to write the client a letter detailing the specific reason for termination, and there must be a specific reason to terminate. This letter should also detail who the client can contact if they wish to appeal this decision.

Of course, it is not always possible to sit down and give your client a letter when they are being terminated. All clients should be made aware that if they are terminated, a letter will be available for them, and they can contact your agency to get a copy of it after the fact.

If the client decides to appeal, they must be allowed to present evidence to someone other than the person who made the termination decision or a subordinate of that person. Upon hearing the appeal, the person or group must render a decision and inform the client in writing of their decision. All of these steps should be included in the client's file.

Regardless of why the client has been terminated from services, they must always be afforded the right to an appeal. This is a basic principle of due process, which must always be followed when you are refusing to provide services funded by federal and state monies.

Recordkeeping/Monitoring

While providing services to your clients, it is your responsibility to keep accurate and thorough records of the services you provide. The client file you create will help you to track those services and be able to easily communicate them to partner agencies and entities as needed. Also, it is a record that shows you have provided the services that federal and state funding pays for.

MaineHousing conducts periodic monitoring of your agency's client files, and any file can be selected for a review. This includes clients who were not entered into Navigator Services. Since ESHAP funding is also used to fund shelter operations, any shelter file is subject to review. When a Program Specialist is reviewing a file, if something is not contained in it, it is assumed it did not happen. Accurate and complete records protect your agency from findings, and keeps your funding safe.

To ensure you are up-to-date on what will be looked for in a monitoring review, a copy of the file review sheet that MaineHousing Program Specialists use when reviewing files is included in this guide. Using this sheet and the Documentation Guide on the following page will ensure that your client files have everything they need.

Documentation Guide

This chart will lead you through what need to be included in a client's file in order to be in compliance with ESHAP and ESG regulations.

Event/Scenario	Documentation in file	HMIS/Comp database?
Shelter Intake	-Intake form including date of intake -Homeless verification -Mainstream resources already being received.	YES, entry into shelter.
Initial assessment	-Coordinated Entry Assessment	YES
If Navigator Services Eligible	Initial Housing Stability Plan	YES, entry into Navigator Services.
If Navigator Services Ineligible	Ineligibility Letter	NO
Ongoing services in shelter/unsheltered	Housing Stability Plans every 90 days, updates every 30 days; Releases of information for any communications outside agency	YES, enter HSPs and updates as services in the ESHAP entry.
Mainstream Referrals	Copy of application/referral, case note, or note in HSP updates	NO
Housing Referrals	Copy of application/referral, case note, or note in HSP updates	NO
RentSmart	Certificate or notes showing evidence of class being offered/attended	NO
Housing obtained	Client lease and/or note detailing client destination, subsidy type if necessary, habitability check for non-voucher holders	YES, exit from shelter, Navigator Services entry remains open.
If client refuses stabilization services	Note in file stating client has refused services	YES, exit from shelter and Navigator Services.
Stabilization services	Housing Stability Plans every 90 days, updates every 30 days	YES, enter HSPs and updates as services in the Navigator Services entry.
End of services	Note in file, stating reason for end of service and date	YES, exit from all ESHAP EDA's
If client is terminated	Letter to client explaining reason for termination, options for appeal	NO
If client appeals	Documents from appeal, letter of appeal decision	NO
Releases of Information, including HMIS	HMIS release must be present as well as releases for landlords, providers or other services before contact occurs.	YES, HMIS NO, all others

Annual Income Verification	Copy of income verification, dated at annual	NO
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<p>Lauren Bustard <i>Senior Director of Homeless Initiatives</i> bustard@mainehousing.org (207) 626-4613</p>	<p>Kelly Watson <i>Director of Homeless Initiatives</i> kwatson@mainehousing.org (207) 626-4677</p>
<p>Scott Tibbitts <i>COC Planning and Grants Coordinator</i> stibbitts@mainehousing.org (207) 626-4604</p>	<p>Melissa Lizotte <i>Homeless Partner Support Manager</i> mlizotte@mainehousing.org (207) 501-5843</p>
<p>Tara Hembree <i>Homeless Response System Manager</i> thembree@mainehousing.org (207) 626-4637</p>	<p>Tia Knowlton-Basford <i>Program Support & Monitoring Specialist</i> tkbasford@mainehousing.org (207) 624-5791</p>
<p>Mackenzie O'Ben <i>Program Support & Monitoring Specialist</i> moben@mainehousing.org (207) 624-5707</p>	<p>April Reed <i>HMIS Application Specialist</i> areed@mainehousing.org (207) 626-4694</p>
<p>Sarah Kinsella-Spieldenner <i>HMIS Training & Support Specialist</i> sspieldenner@mainehousing.org (207) 626-4628</p>	<p>Michael Shaughnessy <i>Homeless Program Coordinator</i> mshaughnessy@mainehousing.org (207) 624-5723</p>
<p>Joseph Locke <i>COC Project Coordinator</i> jlocke@mainehousing.org (207) 624-5708</p>	<p>Mat Canwell <i>Fiscal Compliance Specialist</i> mcanwell@mainehousing.org (207) 624-5750</p>
<p>Amy Holland <i>Homeless Response System Coordinator</i> aholland@mainehousing.org (207) 626-4610</p>	<p>Debra Lamarche <i>Fiscal Operations Specialist</i> dlamarche@mainehousing.org (207) 624-5795</p>
<p>Stephanie Bailey <i>Homeless Support Specialist</i> sbailey@mainehousing.org (207) 624-5742</p>	<p>Jennifer Grant <i>Fiscal Operations Specialist</i> jgrant@mainehousing.org (207) 626-4685</p>

Supporting Documents:

All documents associated with ESHAP 2025 can be found at:

<https://mainehousing.org/partners/partner-type/homeless-service-providers/homeless-initiatives>

Appendix A

Homeless Verifications

Homeless Verifications are required to document eligibility for ESHAP enrollment. The expectation is that intake worker will attempt to get the most accurate information about a client's homeless status. A good faith attempt must be made to ensure that the client's homeless status is accurate.

There are three acceptable types of homeless verifications. The first is the preferred method of verification- Third Party Verification. Examples of third party verification include:

- An individual record of a stay in an emergency shelter, a safe haven, or from a street outreach contact.
- A written observation by an outreach or intake worker of encounters with the individual or head of household that includes a description of the conditions where the individual or head of household was living or is currently living;
- A written observation by a community member that has observed where the individual or head of household was living or is currently living; and
- A written referral by another housing or service provider.
- A written notice of eviction, notice to quit, or other evidence of imminent homelessness.

The second acceptable method, if third party verification is not possible, is Intake Worker Observation. This must clearly articulate to the best of their knowledge and based on their professional judgment, that the individual or head of household is homeless at time of entry. It is important to remember that a "Due Diligence" section must be filled out when using intake worker observation as a form of documentation to show that there was an attempt to gain third party documentation.

The final method of homeless verification is self-certification. If you are unable to obtain third party verification and are unable to verify homelessness status through observation, you must document those attempts and have the client sign a certification that they are homeless. You cannot turn anyone away who cannot prove that they are experiencing homelessness.

Category 1- Literally Homeless

If you have a client who is living in a place not meant for habitation, is coming from another emergency shelter, or was in an institution such as a hospital or rehab for less than 90 days, and was literally homeless prior to entry into that institution.

Verifying Category 1-

1. A declaration from a third party outreach worker who has witnessed the client in their homeless situation.
2. A signed letter from the discharging institution confirming the dates of the client's stay, and their homeless situation upon entry into that institution, or discharge paperwork affirming the same.
3. A signed self-declaration by the client or head of household that affirms that they are literally homeless and have nowhere else to stay.

Category 2- Imminently Homeless

People who are not yet homeless, but will become homeless within the next 14 days are eligible for entry into shelter. They are not eligible for entry into ESHAP services until they are in shelter or living in a place not meant for habitation for 14 days.

Verifying Category 2-

1. A copy of the court order requiring the client to vacate their residence within the next 14 days
2. If the individual or family are staying in a hotel or motel for which they are paying themselves, evidence that they lack the funds to remain in that hotel/motel for more than the next 14 days.
3. An oral statement by the individual or head of household that they are required to leave their residence within the next 14 days. The staff verifying homelessness must attempt to contact the owner/renter of the property to verify this. If unable to contact the owner/renter, the staff must document the attempts made to contact and sign a certification to that effect. Head of household must then sign a certification stating they have no subsequent residence and they lack the resources needed to obtain permanent housing.

Category 3- Runaway and Homeless Youth

Youth under the age of 25 who do not qualify as homeless under these definitions, but do qualify as homeless under Runaway and Homeless Youth regulations.

Verifying Category 3-

1. Documentation from DHHS or another agency providing services to the youth attesting to their homeless status.
2. An observation from an outreach worker attesting to their qualification as homeless under RHY regulations.
3. Self-certification signed by client attesting to their qualification as homeless under RHY regulations.

Category 4- Fleeing Domestic Violence

Individuals or households whose homelessness has been caused due to fleeing domestic violence are eligible for assistance. In these cases, third party verification is not needed and should not be sought in order to maintain the safety of the clients.

Verifying Category 4

1. Oral declaration by the individual/head of household. Declaration must contain the following elements:
 - a. The household is in imminent danger and is fleeing for their safety.
 - b. They have not identified a subsequent residence.
 - c. They lack the resources/supports needed to obtain housing.

The oral declaration must be documented in the file, and can be signed by either the head of household or the intake worker.

Appendix B

Housing Stability Plan

Head Of Household: _____ Initial Renewal

Navigator: _____ Agency: _____

Other Household members: _____

Date: _____ **Renewal Due (90 Days):** _____

Housing Goal:

Strengths to achieve goal: _____

Barriers: _____

30 Day Update: _____ **Date:** _____

60 Day Update: _____ **Date:** _____

Goal achieved after 90 days? Y N

Income Goal:

Strengths to achieve goal: _____

Barriers: _____

30 Day Update: _____ **Date:** _____

60 Day Update: _____ **Date:** _____

Goal achieved after 90 days? Y N

Client Signature: _____ Nav Signature: _____

Documents needed for housing

Proof of Identity

- Driver's License
- State issued Photo ID
- Military ID
- Passport
- Birth Certificate

Lack of correct documentation is one of the most common barriers to housing. Waiting until a voucher is available to get these documents is too late. Work on this from day one of a client's shelter stay.

If client has none of the above, the below documents will be needed to obtain a Maine photo ID.

- Social Security Card, OR W-2 with SS # on it.
- Birth Certificate OR naturalization papers
- Proof of Maine residency, which can include:
 - Maine Vehicle Registration or other credential
 - Utility Bill- electric bill, water/sewer bill, cell phone bill, etc.
 - Maine Resident Hunting and/or Fishing License
 - Contract in their name: mortgage agreement, lease, insurance policy, insurance ID card, SR22
 - Tax bill
 - Document issued by a government entity
 - Tax return
 - Paycheck stub W-2
 - Conditional order of restoration

If none of those are available, two affidavits confirming Maine residence can be used.

Photo ID needed for every adult in household; Birth Cert. for all members needed for many programs

Proof of Income: All that apply

- Last 4 paystubs, or bank statements showing wages deposited
- TANF and/or SNAP award letter
- Child Support award letter
- SSI benefit letter
- Any other documentation of income (legal settlement, pension, etc)
- Zero Income certification

Proof of income must be provided for every adult in household

*Many programs will also need proof of disability, refer to individual program guides for specifics

Other Goal:

Strengths to achieve goal: _____

Barriers: _____

30 Day Update:

Date: _____

60 Day Update:

Date: _____

Goal achieved after 90 days? Y N

Other Goal:

Strengths to achieve goal: _____

Barriers: _____

30 Day Update:

Date: _____

60 Day Update:

Date: _____

Goal achieved after 90 days? Y N

Appendix C

Program Participant File Review		Date:				
Name of Program Officer Completing Review:						
Client ID (from HMIS or Comparable Database):				Prior notice:		
Date of NavSEA:						
Date of Entry into Shelter:						
Date of Entry into Navigator Services:						
Date of Exit from Shelter, if applicable:						
Date of Navigator Services Exit, if applicable:						
Manner of Exit from Shelter/Destination (if applicable)- shelter, termination, subsidy, unknown, etc.						
Manner of Exit from Navigator Services/Destination (if applicable)- shelter, termination, subsidy, unknown, etc.						
Homeless Verification 576.2		Yes	No	Finding	Concern	Comments
<i>Under which category does this person/family meet HUDs definition of homelessness for ESHAP services? See below.</i>						(ESHAP does not fund stabilization services for clients under category 2&3)
Category 1. Literally Homeless: Individual or family who lacks a fixed, regular, and adequate nighttime residence, meaning 1) Has a primary nighttime residence that is a public or private place not meant for human habitation, or 2) is living in a shelter or place designated to provide temporary living arrangements (including congregate shelters, transitional housing, and hotels or motels paid for by charitable organizations or the government)		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Which of the Required Documentation is present : 1) Written observation by the outreach worker or 2) Written referral by another housing or service provider or 3) Certification by the individual or head of household seeking assistance stating that (s)he was living on the streets or in a shelter; 4) For individuals exiting an institution one of the forms of evidence above AND ; a. discharge paperwork or written/oral referral or b. written record of intake workers due diligence to obtain evidence AND certification by individual that they exited the institution.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Category 4: Fleeing/Attempting to Flee DV: Any individual or family who: (1) is experiencing trauma or a lack of safety related to, or fleeing or attempting to flee, domestic violence, dating violence, sexual assault, stalking, or other dangerous, traumatic, or life-threatening conditions related to the violence against the individual or a family member in the individual's or family's current housing situation, including where the health and safety of children are jeopardized. o (2) has no other safe residence; and (3) lacks the resources to obtain other safe permanent housing.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Which of the Required Documentation is present: VSP's: An oral statement by the individual or head of household seeking assistance which states; they are fleeing ; they have no subsequent residence; AND they lack resources. Statement must be documented by a self-certification by the intake worker. For non-VSP's- 1) an oral statement by the individual or head of household seeking assistance that they are fleeing. This statement is documented by a self-certification or by the caseworker. Where the safety of the individual or family is not jeopardized the oral statement must be verified; AND certification by the individual or head of household that no subsequent residence has been identified AND self certification or other written documentation that the individual or family lacks the financial support networks to obtain other housing.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

<i>Under which category does this person/family meet HUDs definition of homelessness for Shelter Entry? See below:</i>					
Category 1. Literally Homeless: Individual or family who lacks a fixed, regular, and adequate nighttime residence, meaning 1) Has a primary nighttime residence that is a public or private place not meant for human habitation, or 2) is living in a shelter or place designated to provide temporary living arrangements (including congregate shelters, transitional housing, and hotels or motels paid for by charitable organizations or the government)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Which of the Required Documentation is present : 1) Written observation by the outreach worker or 2) Written referral by another housing or service provider or 3) Certification by the individual or head of household seeking assistance stating that (s)he was living on the streets or in a shelter; 4) For individuals exiting an institution one of the forms of evidence above AND ; a. discharge paperwork or written/oral referral or b. written record of intake workers due diligence to obtain evidence AND certification by individual that they exited the institution.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Category 2: Imminent Risk of Homelessness: Individual or family who will imminently lose their primary nighttime residence, provided that: 1) Residence will be lost within 14 days of the date of application for homeless assistance; 2) No subsequent residence has been identified; and 3) The individual or family lacks the resources or support networks needed to obtain other permanent housing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Which of the Required Documentation is present : 1) A court order resulting from an eviction action notifying the individual or family that they must leave; or 2) For individual and families leaving a hotel or motel—evidence that they lack the financial resources to stay; or 3) A documented and verified oral statement; AND Certification that no subsequent residence has been identified; AND Self-certification or other written documentation that the individual lack the financial resources and support necessary to obtain permanent housing.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Category 3: Homeless under other Federal Statutes: Unaccompanied youth under 25 years of age, or families with children and youth, who do not otherwise qualify as homeless under this definition, but who: 1) Are defined as homeless under the other listed federal statutes; 2) Have not had a lease, ownership interest, or occupancy agreement in permanent housing during the 60 days prior to the homeless assistance application; 3) Have experienced persistent instability as measured by two moves or more during in the preceding 60 days; and 4) Can be expected to continue in such status for an extended period of time due to special needs or barriers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Which of the Required Documentation is present: 1) Certification by the nonprofit or state or local government that the individual or head of household seeking assistance met the criteria of homelessness under another federal statute; AND Certification of no PH in last 60 days; AND Certification by the individual or head of household, and any available supporting documentation, that (s)he has moved two or more times in the past 60 days; AND Documentation of special needs OR 2 or more barriers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Category 4: Fleeing/Attempting to Flee DV: Any individual or family who: (1) is experiencing trauma or a lack of safety related to, or fleeing or attempting to flee, domestic violence, dating violence, sexual assault, stalking, or other dangerous, traumatic, or life-threatening conditions related to the violence against the individual or a family member in the individual's or family's current housing situation, including where the health and safety of children are jeopardized. o (2) has no other safe residence; and (3) lacks the resources to obtain other safe permanent housing.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Which of the Required Documentation is present: VSP's: An oral statement by the individual or head of household seeking assistance which states; they are fleeing ; they have no subsequent residence; AND they lack resources. Statement must be documented by a self-certification by the intake worker. For non-VSP's- 1) an oral statement by the individual or head of household seeking assistance that they are fleeing. This statement is documented by a self-certification or by the caseworker. Where the safety of the individual or family is not jeopardized the oral statement must be verified; AND certification by the individual or head of household that no subsequent residence has been identified AND self certification or other written documentation that the individual or family lacks the financial support networks to obtain other housing.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

General Client File Information	Yes	No	Finding	Concern	Comments
Was a NavSEA administered to the client?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Date:
If client was ineligible, was eligibility reassessed every 90 days?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Was an annual assessment administered?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
If so, is there an income verification present?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Was the Housing Stability Plan completed within 30 days?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Date:
Does the client have an up-to-date Housing Stability Plan?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Most recent update date:
Is the Housing Stability Plan individualized and sufficient for the client's needs?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Was the client referred to an appropriate housing resource?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Were referrals made to mainstream resources?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Did the client receive any type of "Rent Smart" classes or materials?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Is the client still enrolled/receiving ESHAP assistance (any services)? If no, record date of last service in HMIS)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Are there appropriate releases of information in the client file? (HMIS, general releases)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Does the file document that the client has been informed of their rights to fair housing?*	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Grievance policy procedures?*	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Appeal of termination policy procedures?*	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
If the client is no longer enrolled/receiving assistance did the sub-recipient document the date services ended and reason in client file?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
If this client was terminated due to program violations or noncompliance, does the file contain evidence that due process for termination was adequately managed? 576.402	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
1. Written notice to the participant containing a clear statement of the reason for termination;	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. A review of the decision, in which the participant is given the opportunity to present written or oral objections before a person other than the person (or subordinate of the person) who made or approved the termination decisions, AND	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. Prompt written notification to the program participant. NOTE: Termination under housing relocation and stabilization and rental assistance does not bar the recipient or subrecipient from providing further assistance at a later date to the same individual or family.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Habitability Assessment	Yes	No	Finding	Concern	Comments
If the client moved into housing with ANY ESG assistance, is there evidence of a habitability and/or housing quality standards inspection in the client file?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
File Notes					
*If not in file, each document must be posted publicly for anyone to see.					