

2016 Renewal Project Narrative

INSTRUCTIONS (3 points for following application instructions)

Answer the questions below. Submit the 2016 Renewal Project Narrative by email to amber.lewis@iowa.gov by Friday, June 24th, 2016. Please only include this project narrative, not the introductory plan items on pages 1-4 of this document. Please be concise in your responses. Using 12-point font, one-inch margins, and single-spacing, most responses should be no more than 1/2-page.

HMIS Project Applicants, answer Questions 1 and 2, then skip to Question 13 and continue through Question 21. All other Renewal Project Applicants, answer Questions 1 – 20.

Points possible: 100

APPLICANT NAME AND LOCATION

Organization Name: Mason City Housing Authority

Project Name: Supportive Needs Assistance Program (SNAP)

Project Name as it is listed on the Housing Inventory Chart (HIC): MCHA SNAPS 2015
Renewal

Type of Project (PSH, RRH, TH, SSO, HMIS): PSH

Federal DUNS Number: 79130835

Address: 22 N. Georgia, Suite 214, Mason City, IA 50401

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Is your organization registered in the federal System for Award Management (SAM)? Yes

AGENCY AND PROJECT SUMMARY (3 points)

- 1) Provide a brief introduction to your agency. **(1 point)** Mason City Housing Authority provides rental assistance to nearly 600 households in the city limits of Mason City. Our primary objective is to provide decent, safe and affordable housing to low income households and to provide these households with housing choices and the opportunity to move outside areas with a concentration of low income households. The SNAP program assists Mason City Housing Authority in fulfilling its goal.
- 2) Provide a description that addresses the entire scope of the proposed project. **(2 points)** Funding for this program will allow for the continuation of permanent housing with supportive services for 25 households currently receiving benefits. These households

have at least one disabled member and were previously homeless. The disability must consist of a serious mental illness, chronic disability, dually diagnosed with a physical or mental disability caused by HIV/AIDS or related disease. All participating households are required to continue with supportive services for financial, emotional, medical or environmental issues during their participation on the program. Chronically homeless applicants will also be given priority over non-chronically homeless applicants when openings for participation occur. The supportive services also provide assistance to the household in locating suitable housing eligible for the program. On-going services are monitored and the value of the services provided to the family serves as a match of program funds. For many years, the value of services has far exceeded the cost of rental assistance provided to participants. With this process, many partnerships have been established with service agencies during the course of this program and allow for a successful reporting rate.

CONTINUUM OF CARE PARTICIPATION (10 points)

- 3) Annual Performance Report (APR) Submission:
 - a. What is your project's operating year end date? March 31, 2016
 - b. APRs are due to HUD 90 days after the end of a project's operating year. On what date did you submit your most recently completed APR to HUD? This is still pending since the APR is not currently programmed in esnaps by HUD.
 - c. On what date did you forward a copy of your APR to the Iowa Finance Authority? This will be forwarded to Iowa Finance Authority as soon as HUD allows submission.
 - d. Did your project meet the 90 day requirement? We are ready to submit but will be able to comply within 90 days when esnaps is made operational.
 - e. If an extension was granted or if HUD's E-snaps system was unavailable to complete your APR, describe this. For either an extension or E-snaps being unavailable, submit documentation to verify this. We are waiting notification from HUD that esnaps is programmed and available to use. Following this notification, the APR will be submitted within 90 days. **(2 points if within 90 days or an acceptable extension granted or E-snaps unavailable; no points if not)**

- 4) Local Collaboration: How does your local region plan and collaborate together regarding homelessness? If your local region has an organized planning group, what is it called? How does your agency participate? **(3 points)** Quarterly meetings of the Local Homeless Coordinating Board are held and Mason City Housing Authority is a member.

- 5) Has any representative of your program been an active participant in the Iowa Council on Homelessness? *(Note that anyone can participate in council meetings even if not a voting member.)* Briefly describe. **(3 points)** Up until April 1, 2016, we had a Mason City Housing Authority Board member serve on the Board of the Iowa Council on Homelessness. She appears to no longer be serving on the Council and her MCHA Board term expired as of April 1, 2016.

- 6) Has any representative of your program been an active participant in Iowa Council on Homelessness committees and working groups? Briefly explain. **(2 points)** No, occasionally the Director, Cathy Burtness may join in on the conference call meetings of the Council. Prior to April 1, 2016, we did have a Board member that participated on some committees.

BUDGET AND CAPACITY (14 points)

- 7) HUD Grant Monitoring: Check the box to describe any HUD CoC Project monitoring results during the current program year and the previous two program years (select only ONE option): **(2 points)**
- No monitoring visits from HUD **(2 points);**
 - Monitoring visit(s) from HUD with no findings or concerns **(2 points);**
 - Monitoring visit(s) from HUD with fewer than three findings or concerns, all of which have been resolved in the time requested by HUD **(1 point);**
 - Monitoring visit(s) from HUD with more than three findings or concerns, and/or findings or concerns that were not resolved in the time requested by HUD **(no points).**
- 8) Will the amount requested for Administration Costs in the E-snaps Project Application be less than or equal to 7% (or the amount listed on the GIW)? Yes/No (circle) **(1 point for “yes”; no point for “no”)** Yes, our administration expense requests will no be more than 7% of the program budget.
- 9) Is your agency drawing down CoC funds from HUD at least quarterly? Yes/No (circle) **(1 point for “yes”; no point for “no”)** Yes, draws for HAP and admin. funds are made monthly once a release of funds is received. Unfortunately at the beginning of the grant term, release of funds is very delayed and we are not able to request a draw of funds for several months while waiting for the funding appropriation and grant agreement.
- 10) Spending history: Provide your project’s spending history as follows. All information should reflect the most recently-completed operating year for which an APR has been submitted: **(10 points)**
- a. Project operating year end date: March 31, 2015
 - b. Amount of grant: 103,119
 - c. Total funds expended: 101,354
 - d. Funds remaining (unexpended funds): 1,765
 - e. Unexpended funds percentage (d) / (b): 1.7% **(10 points if funds were fully expended (0% unexpended); 9 points if up to 1% of funds are unexpended; 8 points if up to 2% of funds are unexpended; 7 points if up to 3% of funds are unexpended, and so forth down to zero points if 10% or more of funds are unexpended)**

PRIORITIZATION: PROJECT TYPE, CHRONICALLY HOMELESS, LITERALLY HOMELESS, & HOUSING FIRST (34 points)

11) Indicate the project type. Select only **ONE** (this should match your earlier project type indicated). **(9 points)**

- Permanent Supportive Housing **(9 points)**
- Rapid Rehousing **(9 points)**
- Transitional Housing exclusively for DV, youth, or substance abuse **(4 points)**
- Transitional Housing for the general homeless population **(no points)**
- Supportive Services Only **(no points)**

The Iowa Balance of State CoC has adopted HUD CPD 14-012, Notice on Prioritizing Persons Experiencing Chronic Homelessness in PSH:

<https://www.hudexchange.info/resource/3897/notice-cpd-14-012-prioritizing-persons-experiencing-chronic-homelessness-in-psh-and-recordkeeping-requirements/>. For PSH projects, also note that the Iowa Council on Homelessness voted in 2015 to require all PSH projects to prioritize all beds available through turnover to the chronically homeless.

12) Open the 2016 Housing Inventory Chart (HIC) for the Iowa Balance of State; this will be available online here when the competition has opened: **(2 points)**

<http://www.iowafinanceauthority.gov/Home/DocumentSubCategory/107>, in the section for the 2016 Competition. (If your project is not listed in the HIC, explain why not.)

- a. Which row on the HIC lists your project? Row 92
- b. How many total beds are listed for your project (Column AX)? 30
- c. How many total beds are for chronically homeless (dedicated or prioritized) (Column S + V) 30
- d. What is HIC utilization rate (ColumnAY) 100%

13) Answer the following as applicable (answer only (a) OR (b)): **(3 points)**

- a. PSH projects:
 - i. Given the answers to the above question, what is your project's percentage of beds committed to the chronically homeless? **(1 point)** 100%
 - ii. How many beds does your project anticipate being made available through turnover in the upcoming grant year? **(1 point)** 6
 - iii. How many beds made available through turnover is your project committing to chronically homeless in the upcoming grant year (should be 100%)? **(1 point)** 6
- b. For non-PSH projects:
 - i. What specific steps is your agency taking to increase the number of PSH beds for the chronically homeless in your community? **(3 points)**

As a second priority population for CoC programs, HUD encourages communities to serve adults, youth, and families who are unsheltered and those accessing emergency shelter, before serving persons experiencing other forms of homelessness.

- 14) Prioritizing those who are unsheltered or accessing emergency shelter: **(10 points)**
- Based on your most recently submitted program year APR, what is the total number of participants that entered your program? 15 **(1 point)**
 - Based on your most recently submitted program year APR, how many participants entered the program as unsheltered or from an emergency shelter? 14 **(1 point)**
 - Based on your responses above, what is the percentage of participants that entered your program unsheltered or from emergency shelter (b/a)? 93.3% **(8 points for 100%; 7 points for higher than 95%; 6 points for higher than 90%; 5 points for higher than 85%; 4 points for higher than 80%; no points for lower than 80%)**

HUD encourages programs to follow Housing First practices. The U.S. Interagency Council on Homelessness and HUD offer several resources regarding Housing First:

- Housing First/Rapid Rehousing Webinar:*
http://usich.gov/media_center/videos_and_webinars/hud-and-usich-core-principles-of-housing-first-and-rapid-re-housing-webinar.
- Housing First Checklist:*
http://usich.gov/usich_resources/fact_sheets/the_housing_first_checklist_a_practical_tool_for_assessing_housing_first_in.
- HUD's SNAPS In Focus, "Why Housing First:"*
<https://www.hudexchange.info/news/snaps-in-focus-why-housing-first/>.

- 15) (a) Has the project removed the following barriers to accessing housing and services? Check the box next to each item to confirm that your project has removed (or never had) barriers to program access related to each of the following (select all that apply): **(10 points total)**

- Having too little or no income (all projects should check this; the Iowa Council on Homelessness voted in 2015 to prohibit CoC-funded projects from screening applicants out due to too little or no income); **(1 point)**
- Active or history of substance abuse; **(1 point)**
- Having a criminal record with exceptions for state-mandated restrictions; **(1 point)**
- Fleeing domestic violence (e.g., lack of a protective order, period of separation from abuser, or law enforcement involvement). **(1 point)**
- None of the above (click this if all of these barriers still exist). **(no points)**

(b) Does the project ensure that participants are not terminated from the program for the following reasons? Select all that apply. **Please also attach a copy of the project's termination/appeals policy; no points may be awarded in this section if the policy is not included, or if the policy includes contradictory information.**

- Failure to participate in supportive services; **(1 point)**
- Failure to make progress on a service plan; **(1 point)**
- Loss of income or failure to improve income; **(1 point)**
- Being a victim of domestic violence; **(1 point)** or
- Any other activity not covered in a lease agreement typically found in the project's geographic area. **(1 point)**

(c) Verify that the project’s termination policy clearly matches with the responses above. **(1 point for Yes; no point for No)** Yes

PERFORMANCE (36 points)

In July 2014, HUD released “Systems Performance Measures: An introductory guide to understanding system-level performance measurement.” The guide can be found at this link: <https://www.hudexchange.info/resources/documents/System-Performance-Measures-Introductory-Guide.pdf>.

Two measures determined by HUD to be key in permanently exiting homelessness are:

- *The percentage of adults who obtain or increase employment or non-employment cash income over time.*
- *The percentage of participants who obtain or increase non-cash mainstream benefits.*

16) Identify whether the project includes the following activities: **(10 points)**

- Transportation assistance is provided to clients to attend mainstream benefit appointments, employment training, or jobs? **(2 points)**
- Use of a single application form for four or more mainstream programs? **(2 points; all programs should mark yes as Iowa has this available to all)**
- At least annual follow-ups with participants to ensure mainstream benefits are received and renewed? **(2 points)**
- Project participants have access to SSI/SSDI technical assistance provided by the applicant, a subrecipient, or partner agency? **(2 points)**
- The staff person providing the technical assistance completed SOAR training in the past 24 months? **(2 points)**

17) For all supportive services available to participants, indicate who will provide them, how they will be accessed, and how often they will be provided: **(10 points)**

Assessment of Service Needs	Partner ▼	Monthly ▼
Assistance with Moving Costs	Non-Partner ▼	As needed ▼
Case Management	Partner ▼	Monthly ▼

Child Care	Non-Partner ▼	As needed ▼
Education Services	Partner ▼	As needed ▼
Employment Assistance and Job Training	Partner ▼	As needed ▼
Food	Non-Partner ▼	As needed ▼
Housing Search and Counseling Services	Partner ▼	As needed ▼
Legal Services	Non-Partner ▼	As needed ▼
Life Skills Training	Partner ▼	As needed ▼
Mental Health Services	Partner ▼	Monthly ▼
Outpatient Health Services	Non-Partner ▼	As needed ▼
Outreach Services	Partner ▼	As needed ▼
Substance Abuse Treatment Services	Non-Partner ▼	As needed ▼
Transportation	Non-Partner ▼	As needed ▼
Utility Deposits	Applicant ▼	As needed ▼

18) Outcomes and costs per outcome. Complete **ONE** of the following charts as applicable. (16 points; 2 points for each response)

For Permanent Supportive Housing projects:

Services provided by the project, including any unique characteristics of population served.	Total annual cost of providing these services (total project budget).	Amount of annual CoC funds requested for these services.	Describe/define a unit of service. Include whether a unit is an individual or household and indicate a measurable outcome (i.e., one person assessed and provided a supportive housing unit with services).	Number of individuals/ households who exit to or maintain permanent housing through the project (total funding).	Number of individuals/ households who exit to or maintain permanent housing with the CoC funds.	Method used to determine costs described. Include any indirect costs and how those were calculated.	Method used to determine exits to permanent housing.
Rental assistance and security deposit assistance will be provided to eligible applicants that work with a social service organization to assist with obtaining all eligible benefits and prevent recurring homelessness	97116	97116	A unit of service is a participating household. A measurable outcome is when an increase to household income is reported.	Currently we have 30 participating households, which is the most we have been able to subsidize. Ideally we would like to maintain 25.	It is anticipated two will exit with no permanent housing by leaving on their own and three will transfer to permanent Voucher prog.	The average per unit cost of rental assistance is 324 per household. That times 25 households for one year of assistance is \$97,116.	Participating households will be exited to permanent housing when they no longer need case mgmt.. services.
Provide information on how to locate a suitable rental unit and calculate eligible assistance amount	7094	7094					
Participating households receive supportive services by the partnering Agency to obtain local services, case management, mental health counseling, etc.	26055	0					

TOTAL	130265	104210					
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For Rapid Rehousing projects:

Services provided by the project, including any unique characteristics of population served.	Total annual cost of providing these services (total project budget).	Amount of annual CoC funds requested for these services.	Describe/define a unit of service. Include a measurable outcome (i.e., one episode of one month's rent provided)	Number of individuals/families served using all funds who maintain housing for at least three months after exit.	Number of individuals/families served using CoC funds who maintain housing for at least three months after exit.	Method used to determine costs described. Include any indirect costs and how those were calculated.	Method used to verify housing status three months after exit.

For Transitional Housing projects:

Services provided by the project, including any unique characteristics of population served.	Total annual cost of providing these services (total project budget).	Amount of annual CoC funds requested for these services.	Describe/define a unit of service. Include whether a unit is an individual or household and indicate a measurable outcome (i.e., one person assessed and provided a supportive housing unit with services).	Number of individuals/households who exit to or maintain permanent housing through the project (total funding).	Number of individuals/households who exit to or maintain permanent housing with the CoC funds.	Method used to determine costs described. Include any indirect costs and how those were calculated.	Method used to determine exits to permanent housing.

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For Supportive Services Only projects:

Services provided by the project, including any unique characteristics of population served.	Total annual cost of providing these services (total project budget).	Amount of annual CoC funds requested for these services.	Describe/define a unit of service. Include whether a unit is an individual or household and indicate a measurable outcome (i.e., one person assessed and provided a supportive housing unit with services).	Number of individuals/ households who exit to or maintain permanent housing through the project (total funding).	Number of individuals/ households who exit to or maintain permanent housing with the CoC funds.	Method used to determine costs described. Include any indirect costs and how those were calculated.	Method used to determine exits to permanent housing.

HMIS PROJECTS ONLY (70 points; in lieu of Questions 11 – 18 above)

1) HMIS-only questions:

- a. Is the HMIS section of the Governance Charter up-to-date and accurate? **(1 point)**
- b. Are the following plans in place:
 - i. Privacy Plan? **(1 point)**
 - ii. Security Plan? **(1 point)**
 - iii. Data Quality Plan? **(1 point)**
- c. How are these plans reviewed by the CoC and HMIS Lead regularly? **(3 points)**
- d. How much of the total HMIS budget (not including required match) is supported through non-CoC Program cash or in-kind sources? If less than 25%, describe efforts to increase funding from non-HUD sources. **(3 points)**
- e. What was the percentage of null or missing values for the Universal Data Elements for the 2016 Point-in-Time count? If greater than 10%, describe steps to support the CoC in reducing null or missing values. **(3 points)**
- f. Do the existing HMIS Policies and Procedures include adequate procedures to ensure valid program entry and exit dates are recorded in HMIS? **(3 points)**
- g. Were PIT results reported to HUD in HDX by the 2016 deadline? **(3 points)**
- h. Does the HMIS Lead support the CoC in collecting and reporting accurate and quality subpopulation data for the sheltered homeless during the PIT? **(3 points)**
- i. Does the HMIS Lead support methods to reduce double-counting of the unsheltered homeless during the PIT count? **(3 points)**
- j. What is the current overall bed coverage rate for the CoC? Briefly describe steps to support the CoC in increasing the rate. **(5 points)**
- k. How does the HMIS Lead respond to identified HMIS-related CoC project needs? (provide specific examples including how HMIS user satisfaction is evaluated) **(10 points)**
- l. How does the HMIS Lead respond to identified HMIS-related CoC system needs (specific examples)? **(10 points)**
- m. How is the HMIS Lead supporting the move toward measuring CoC system performance (specific examples)? **(10 points)**
- n. How is the HMIS Lead supporting non-HMIS agencies in the CoC with data collection and reporting needs? **(10 points)**

**SECTION XII
TERMINATION, CLAIMS AND COMPLAINTS AND APPEALS**

A. Termination of Tenancy by Participant

1. If a tenant wishes to move, they may do so at any time after the one-year term of the lease. The tenant must submit a 30-day written notice, but not more than a 60 day notice, to the landlord. A signed copy of the notice, must be provided to the HA.
2. If a family desires to be released prematurely from a lease in effect at the time, such tenant shall first request a Mutual Rescission from the HA. If approved, this form must be completed and signed by the landlord and tenant.
3. If a family moves with continued assistance, the term of the lease for the new unit will be another initial one-year lease. The HA may deny permission to move if there is insufficient funding for continued assistance.
4. If the family wishes to terminate assistance voluntarily and remain in the unit, the family, and owner must execute a new lease and the tenant will be required to sign a Withdrawal From Participation form.

B. Termination of Tenancy by Owner

1. Owners have the right to serve eviction notices, for cause, to families violating any lease provisions. A copy of all eviction notices must be received by the HA concurrent with the notification to the family. Correct eviction procedures are outlined in the HAP Contract and must comply with Federal, State and local law. If eviction procedures have been initiated, the tenant will be denied assistance to move unless the eviction is denied by the court system or dropped by the landlord.
2. If the owner does not wish to renew the lease at the end of the initial lease term, a 30-day written notice, but not more than a 60 day notice must be provided to both the participant family and the HA.
3. An owner may provide the participant family with not less than a 30-day written notice and not more than a 60 day notice to move any month after the initial one year lease term with a copy to the HA.
4. An incident(s) of actual or threatened domestic violence, dating violence or stalking will not be considered a "serious or repeated" violation of the lease by the victim or threatened victim of that violence and will not be good cause for terminating the assistance to the victim of that violence.

C. Suspension of Assistance by Housing Authority for Insufficient Funding, for Voucher Program

If funding provided by HUD is insufficient to support continued assistance for all current participants, the following order of suspension of benefits will be utilized:

1. Participants that are over two months in default of a repayment agreement.
2. Non-elderly/non-disabled single households.

Ineligible families suspended will be issued a Voucher of Participation to allow re-admission prior to the Voucher expiration if sufficient funding has resumed.

C.1 Suspension of Assistance by Housing Authority for Insufficient Funding for the Shelter Plus Care Program and TBRA Program

If funding provided is insufficient or has expired to support continued assistance on the Shelter Plus Care Program and/or the Tenant Based Rental Assistance Program and the HA has sufficient funding for the Voucher program, a voucher will be issued to current participants in order to continue rental assistance, provided they are in good standing with program requirements.

D. Housing Assistance Termination (24 CFR 982.552)

Program participants will continue to receive assistance as long as they comply with program obligations. If a participant family fails to abide by program obligations, they may be terminated from the Section 8 Program, which will result in the discontinuation of the housing assistance in the family's current unit and in all future units.

All participants for whom the HA intends to terminate assistance will be provided a written notification informing them of the reason for the termination decision and the right to request an Informal Hearing. (See Section H for further discussion of informal hearings.)

1. The HA may terminate housing assistance for the following reasons:
 - a. If the family violates any family obligations under the program. (24 CFR 982.551)
 - b. False or incorrect information was presented by the tenant family at the time of application or anytime thereafter.
 - c. Eviction of the tenant family from the assisted unit that is awarded to the landlord by the court system.
 - d. If any member of the family commits fraud, bribery or any other corrupt or criminal act in connection with any federal housing program.

¹Near elderly defined as a person over the age of 50

⁶A preponderance of evidence in which the evidence is of greater weight or more convincing than the evidence which is offered in opposition to it, that is evidence as a whole would show the fact sought to be proved is more probable than not. (Black's Law Dictionary)

- e. If the family currently owes rent or other amounts to the HA or to another HA in connection with Section 8 or public housing assistance under the 1937 Act.
- f. If the family breaches a repayment agreement with a HA.
- g. If a family has engaged in or threatened abusive or violent behavior toward HA personnel.
- h. If any family member fails to sign and submit consent forms for obtaining information in accordance with 24 CFR part 5, or the family fails to complete, sign and submit any other requested forms or supply requested information by specified deadlines. Only two requests with deadlines will be sent.
- i. Evidence of citizenship (i.e., the declaration) and eligible immigration status is not submitted by date specified by the HA and eligible immigration status is not verified.
- j. Missing three (3) scheduled recertification or inspection appointments during the annual recertification process without calling ahead to reschedule.
- k. The tenant has failed to meet his/her HQS obligation in cases where they are responsible for tenant-supplied utilities or damages to the unit caused by the family or guests. The tenant-supplied utilities must be in an adult household member's name.
- l. The tenant has failed to promptly notify the HA if any family member no longer resides in the unit.
- m. The family fails to promptly inform the HA of a birth, adoption, or custody of a child and request approval to add any other family member. Unauthorized household members living in the unit have been discovered and had not been reported to the HA. A tenant is allowed a visitor(s) for up to two (2) weeks, any longer than that time period is considered an occupant of the unit.
- n. The family fails to promptly notify the HA of any absence from the unit. Abandonment will be determined by unanswered or returned letters mailed to the unit, disconnected or unanswered phone calls to the unit, visits with the landlord and/or neighbors, no utility consumption, etc.
- o. If any member, guest, or visitor of the family commits drug-related criminal activity, violent criminal activity or is a registered sex offender (24 CFR 982.553) (see definitions in Section II, Part B). The housing authority may waive termination for such drug related activity by a family member, if the family member can demonstrate that he or she:
 - (i) Has an addiction to a controlled substance, has a record of such an impairment, or is regarded as having such an impairment; and
 - (ii) Is recovering, or has recovered from, such addiction and does not currently use or possess controlled substances. As a condition of being allowed to reside in the unit, the HA will require evidence of participation in, or successful completion of, a treatment program from

the family member who has engaged in the illegal possession or use of drugs, or

- (iii) If the criminal activity is directly related to domestic violence, dating violence or stalking engaged in by a member of the assisted household, a guest or another person under the tenants control, and the tenant or an immediate family member is the victim or threatened victim of this criminal activity provided there is not an actual and imminent threat to other tenants or to employees of the HA.
- p. The housing authority determines that there is reasonable cause to believe that the participant abuses alcohol in a way that interferes with the health, safety, or right to peaceful enjoyment of the premises by other residents. The HA may waive this provision if the participant demonstrates to the HA's satisfaction that the participant is no longer engaging in abuse of alcohol and:
- (i) has successfully completed a supervised drug or alcohol rehabilitation program;
 - (ii) has otherwise been rehabilitated successfully; or
 - (iii) is participating in a supervised drug or alcohol rehabilitation program.
- q. The tenant has a total tenant payment equal to or greater than the gross rent for six (6) consecutive months.
- r. In the case of a lawful occupant/participant who engages in criminal acts or threatened acts of violence or stalking to other lawful occupant(s)/participants the assistance to the person performing such acts will be terminated without terminating the assistance of the victim(s). The remaining member(s) of the household must sign a certification indicating the terminated person will not be allowed to reside in the assisted unit.
- s. If a family signed a statement certifying that a person who engaged in domestic violence against the household would not be allowed to reside in the household, breach of this certification may be grounds for termination of assistance. [5.420(b)(4)(iii)(B)]
- t. Failure to participate in case management services for participants of the VASH program and the Shelter Plus Care program.

¹Near elderly defined as a person over the age of 50

⁶ A preponderance of evidence in which the evidence is of greater weight or more convincing than the evidence which is offered in opposition to it, that is evidence as a whole would show the fact sought to be proved is more probable than not. (Black's Law Dictionary)