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Executive Summary

Project Action was a Homelessness Prevention and Rapid Rehousing (HPRP) program that was provided in Tucson and Pima County, Arizona from 2009-2012 through grants from the U.S. Department of Housing and Urban Development Department. The purpose of this descriptive evaluation study is to provide a substantial account of how case management functioned as a programmatic element in Project Action.

The study used data from case notes, client surveys, and a focus group with case managers to describe the case management model and services, and to identify how these services functioned as intervention elements to assist clients.

The study findings suggest conclusions that include the following.

• Importance of Case Management. Case Management was a strong component of Project Action. The program paired emergency financial assistance together with case management, and both were important. The rent/utility assistance relieved the anxiety of homelessness, enabling participants to focus on steps they needed to take to improve their situation.

• Case Management Model. Project Action offered medium-intensity case management, requiring clients to have at least once-a-month contact with their case manager. The model offered a combination of program-driven requirements and client-centered tailoring.

• Intervention Elements. This study identified five intervention elements that functioned during Project Action case management and helped clients to improve their stability: a) emotional support; b) financial education and counseling; c) information and referral; d) job search assistance; and e) a case plan, together with motivation and encouragement.

• Dignity and independence. Several clients said that the program helped them the most by assisting them to regain their confidence and get back in charge of their lives. It is important that human service case management is designed to recognize participants’ dignity and self-determination as much as possible.

• Service Partnerships. Case management can be especially effective when there are formal service partnerships to help strengthen clients’ self-sufficiency. These partnerships can enable two or more agencies to jointly assist clients.

• Subsidized Housing. Some clients had chronically insufficient income and needed additional supports such as subsidized housing that were not always available.

• Program Design and Culture. Project Action case managers felt that that team cohesion strengthened the staff’s ability to assist clients. The program encouraged a team approach through its organizational culture and through a program design that encouraged staff to work collaboratively to assist clients.
I. Introduction

Study Purpose

Project Action is a Homelessness Prevention and Rapid Rehousing (HPRP) program that was provided in Tucson and Pima County, Arizona from 2009-2012 through grants from the U.S. Department of Housing and Urban Development (HUD). HUD HPRP programs awarded funds from the American Reinvestment and Recovery Act to local jurisdictions to provide emergency rent and utility assistance to prevent homelessness and to re-house people who had become homeless. HPRP programs were also required to provide case management. This local evaluation study has a descriptive purpose: to provide a substantial account of how case management functioned as a programmatic element in Project Action.

The study was based on two evaluation questions:
1. What kinds of case management services were provided to Project Action clients?
2. In what way did these services function as interventions to assist clients to strengthen their self-sufficiency and housing stability?

Program Description

Collaboration

Project Action was designed as a collaboration. First, the program was a collaboration between the City of Tucson and Pima County in order to provide one HPRP program for the Tucson/Pima County area. Second, the City of Tucson and Pima County used a competitive bid process to contract for direct services with three experienced service providers. Staff from these three providers functioned as a program design and delivery team, together with the City and County program coordinators. The providers hired or assigned their most experienced case managers for Project Action due to the need and expected complexity of client cases. The program also had subcontracts with Southern Arizona Legal Aid for housing-related legal services, and with Money Management International to provide free financial education classes for clients.

Eligibility and Services

Project Action’s eligibility and services were based on HUD rules for HPRP programs, plus some additional local criteria. The program could provide emergency rent/utility assistance for people who earned 50% or less of the area median income, and were at imminent risk of becoming homeless (prevention), or who were already homeless and needed housing (re-housing).
Project Action screened applicants for basic eligibility criteria, and also to determine if they had experienced a sudden and significant change such as job loss or illness that had caused their need for emergency assistance. Applicants with longer-term housing instability and chronic difficulties and that were too complex for HPRP services were assisted to find agencies with services that could better meet their needs. In the case of applicants who were not yet homeless, staff asked for evidence that the applicant had no other resources and would likely become homeless “but for” the Project Action assistance. Applicants also had to be willing to participate in case management. Specific application procedures were developed by the Project Action program staff.

Project Action services included emergency rent and utility payments, payment of back rent, housing search assistance, move-in deposits, moving assistance, and case management. Assistance payments were made to vendors, not to clients.

_Screening, Intake, and Approval_
Prospective clients made initial contact with Project Action through a web site and used either email or telephone voice mail to seek services. An Intake Specialist conducted an initial telephone screening to assess eligibility. Those who appeared to be eligible were scheduled for an Intake Appointment with a Resource Specialist (case manager). At the Intake appointment, the Resource Specialist conducted a thorough eligibility assessment, including a review of corroborating documents that were required by HUD.

If the client met eligibility criteria, the Resource Specialist would forward the information to a Contract Specialist. This person was responsible for making sure that all requirements were met, and if so, would approve the client for services. The Contract Specialist also arranged for housing inspections and emergency assistance payments to landlords and utility companies. Clients were approved for three months at a time for rent/utility assistance, or re-housing assistance, including move-in deposits and assistance with moving. The client could be re-certified for continued services at three-month intervals if the client still needed assistance and was participating in case management.

Clients received services for lengths of time that varied widely, depending on their ability to find a job or solve other problems that had led them to being homeless or at risk of homelessness. Most clients were in the program for a period of two to eight months; the median length of time in the program was four months. Providers offered Project Action services at locations in Tucson that were accessible by bus, and one Project Action Resource Specialist traveled to rural areas of Pima County to ensure service access in non-urban locations.
Case Management

Case Management is a term that means many things to many people. Some service providers use this term to mean basic information and referral services; other providers may use the term for work performed by licensed clinicians. The case management model used by an agency may depend on the agency culture, types of services, service philosophy, and length of client enrollment.

The National Association of Social Workers provides standards for case management in the social work profession, including the following definition of case management.

Social work case management is a method of providing services whereby a professional social worker assesses the needs of the client and the client’s family, when appropriate, and arranges, coordinates, monitors, evaluates, and advocates for a package of multiple services to meet the specific client’s complex needs. A professional social worker is the primary provider of social work case management. Distinct from other forms of case management, social work case management addresses both the individual client’s biopsychosocial status as well as the state of the social system in which case management operates. Social work case management is both micro and macro in nature: intervention occurs at both the client and system levels. It requires the social worker to develop and maintain a therapeutic relationship with the client, which may include linking the client with systems that provide him or her with needed services, resources, and opportunities. Services provided under the rubric of social work case management practice may be located in a single agency or may be spread across numerous agencies or organizations.

HUD published guidance for HPRP programs in a technical assistance document about providing case management. “Within HPRP, case management focuses on housing stability and placement, with an emphasis on the arrangement, coordination, monitoring, and delivery of services related to housing needs and improving housing stability. Due to the time-limited nature of HPRP services (short or middle term assistance), case management in this context focuses on needs that can be addressed within a set time frame and with available resources.” (HUD Homelessness Resource Exchange, p. 1). HUD defined short-term assistance as one to three months and medium-term assistance as four to 18 months. Most Project Action clients received services for a period of two to eight months.

Project Action Case Management

There are various models for case management (National Center on Family Homelessness, 2011). In Project Action, the role of case management was to assist clients to improve their housing stability, and this required a combination of clients’ readiness to address their situation, along with tools and motivation provided by the Resource Specialists. The Project Action model was based on HUD guidance for HPRP, and an expectation of regular contact with clients over a period of a few months. Clients were told that they were required to have contact with their
Resource Specialist at least once each month. Project Action staff members met regularly as a team and were able to plan and refine the case management model, developing a common set of Project Action standards, procedures, forms, and documentation to be used across all three contracted providers. The staff team also defined case loads, and regularly reviewed specific cases. The staff understood that the program would first ensure housing stability through emergency rent and utility assistance, and then use various tools and motivation to assist clients to plan other steps to improve their situation. In this report, the case management tools and motivation are termed “intervention elements.”

II. Methods

A Project Action local evaluator used three data sources to gain an understanding of case management as a programmatic element, and how it functioned as an intervention.

1. Case notes recorded by Resource Specialists
2. A focus group with Resource Specialists
3. Data from a client feedback survey

Case Notes

Project Action Resource Specialists kept case files on all clients, both hard copy and electronic. The Resource Specialists used the local Homelessness Information Management System (HMIS)\(^1\) software to record electronic case notes on interactions with clients. The evaluator obtained an HMIS report for the time period of December 1, 2009 through June 30, 2011 that included case notes for all clients who had been served during that period. The evaluator removed case notes for clients enrolled in the Veterans Affairs Supportive Housing (VASH) program who had only received Project Action move-in assistance, because these clients received case management through VASH, not Project Action. The resulting list provided 1,774 case notes representing 235 households. The case notes were listed by date, client and household identification numbers, and the Resource Specialist who recorded the case notes. The report did not include client names.

The evaluator reviewed the case notes and listed the main kinds of issues that clients were dealing with. Because job loss or job-hour reduction was an important topic, the evaluator coded the case notes as to whether the household included an adult who was engaged in a job search.

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\(^1\) HMIS is a homelessness information system required by HUD to be used for all HUD-funded homelessness programs around the U.S.
This review gave the evaluator insight into the kinds of:
- client situations and triggering events that caused clients to need assistance;
- goals that clients worked on in their case plans;
- barriers that client experienced, and case management responses.

Focus Group with Resource Specialists
A focus group was conducted in September 2011 with five Project Action Resource Specialists in order to determine how they provided case management and how case management functioned as an intervention. Four of these staff had worked as Resource Specialists from the program’s inception and had helped design program forms and procedures. Focus group questions were based on information that had been gained from the case notes. A transcript was prepared from an audio recording, and the evaluator analyzed the resulting data.

Client Survey Data
Resource Specialists administered a Client Survey to each participant in an in-person meeting when the client was at a midpoint in the program or getting ready to exit. The Client Survey asked questions about satisfaction with services that clients had received from Resource Specialists. The questionnaire also asked clients if they:
- had learned new information from the financial education class that was required by Project Action;
- had used what they had learned from the financial class in their daily life;
- felt that their situation had become more stable as a result of Project Action.
The questionnaire included an open-ended question that asked, “Other than financial assistance, in what ways has Project Action helped you?” Data were analyzed from 217 Client Surveys collected from March 2010 through March 2012 and will be presented in this report.

III. Results
This section will present findings that include:
A. Kinds of circumstances causing imminent homelessness
B. A summary of case management activities and intervention elements
C. A description of the Project Action case management model
D. A discussion of five key intervention elements
E. Other findings about Project Action case management
F. Limitations of the data
A. Kinds of Circumstances Causing Imminent Homelessness

The review of case notes showed that people sought assistance from Project Action for many reasons. Many had chronically low incomes and had gotten behind on rent. Project Action screening procedures asked about sudden and significant changes that had caused a need for assistance, and applicants often had a triggering event that caused their homelessness or threat of eviction. The most common presenting problems are listed below (not ranked by frequency or importance). Many clients experienced some of these difficulties in combination:

- Job loss or loss of hours;
- Injury, illness, or chronic medical conditions that prevented people from working or working full time;
- Mental health problems that interfered with working;
- A child with a medical or behavioral health condition that required a parent to care for the child, thus being unable to work or work full time;
- Inability to work due to a disability, but disability benefits were denied or stalled due to slow application or appeal processes;
- Pregnancy, new baby, or new guardianship causing increased costs, inability to work full time, or need for a larger apartment;
- Lack of affordable child care, preventing a parent from working or maintaining consistent job attendance;
- Departure of spouse, partner, roommate or other family member who was helping to pay rent and/or helping with child care;
- Large medical bills, other expenses, loans, or fines that caused a household to be unable to pay rent;
- Individuals who had to abandon an apartment due to an abusive partner or spouse;
- People in training programs or college, and unable to work full time.

B. Summary of Case Management Activities and Intervention Elements

The Project Action case management and service delivery process took place in four stages: 1) Intake; 2) Approval and initiation of services; 3) Ongoing case management; and 4) Exit. Project Action wanted Resource Specialists to have average case loads of about 35 clients to ensure that they had time to work effectively with clients at all stages of the process. The Resource Specialist who focused on rural areas of Pima County had a lower case load of 25 clients because of additional travel time required to meet with clients in outlying areas.

During each stage the Resource Specialists’ responsibilities fell into two main categories:

a. Carry out required HPRP administrative functions and maintain accurate client records.

b. Develop rapport with clients, offer information and guidance, provide emotional support, assist clients to connect with mainstream benefits, and help clients to follow their case plans.
The tables below summarize the case management procedures that took place at each stage, and list the activities that functioned as intervention elements. The intervention elements will be discussed further starting on p. 13. In the tables, “RS” refers to Resource Specialist.

1. **INTAKE**

<table>
<thead>
<tr>
<th>CASE MANAGEMENT ACTIVITY</th>
<th>INTERVENTION ELEMENTS</th>
</tr>
</thead>
<tbody>
<tr>
<td><em>Gather client information and documents</em></td>
<td>▪ Clients had a listening ear, someone to talk to.</td>
</tr>
<tr>
<td></td>
<td>▪ RS’s acquired information about the client’s situation so as to know how to tailor assistance.</td>
</tr>
<tr>
<td></td>
<td>▪ Clients and RS’s begin to build trust and rapport.</td>
</tr>
<tr>
<td></td>
<td>▪ Clients experienced support, encouragement and hope.</td>
</tr>
<tr>
<td><em>Provide information and referrals</em></td>
<td>Clients received:</td>
</tr>
<tr>
<td></td>
<td>▪ Accurate information about resources and benefits;</td>
</tr>
<tr>
<td></td>
<td>▪ Navigation advice, e.g., transportation, access to Internet, application processes;</td>
</tr>
<tr>
<td></td>
<td>▪ Encouragement and assistance to gain access to benefits, resources, or health/mental health care.</td>
</tr>
<tr>
<td><em>Develop a budget with the client</em></td>
<td>Clients were able to:</td>
</tr>
<tr>
<td></td>
<td>▪ Recognize where the money goes; gain ideas for changes in spending habits;</td>
</tr>
<tr>
<td></td>
<td>▪ Gain greater clarity on maximum rent and utilities that they could afford.</td>
</tr>
<tr>
<td><em>Develop a case plan with the client</em></td>
<td>Clients were able to:</td>
</tr>
<tr>
<td></td>
<td>▪ Sort out priorities from among multiple stressful things that they were dealing with;</td>
</tr>
<tr>
<td></td>
<td>▪ Identify concrete goals and steps to get back in charge of their situation;</td>
</tr>
<tr>
<td></td>
<td>▪ Plan for assistance, time in program, and plan for exit.</td>
</tr>
<tr>
<td><em>Review Program Requirements, approval process, and next steps</em></td>
<td>▪ Clients received information about the process, including program requirements, what to expect, and what to do.</td>
</tr>
<tr>
<td></td>
<td>▪ The process was designed to create expectations of mutuality, not dependency.</td>
</tr>
<tr>
<td><em>Client records</em></td>
<td>▪ Responsible stewardship of client information and documents.</td>
</tr>
</tbody>
</table>
2. APPROVAL AND INITIATION OF SERVICES

<table>
<thead>
<tr>
<th>CASE MANAGEMENT ACTIVITY</th>
<th>INTERVENTION ELEMENTS</th>
</tr>
</thead>
</table>
| **Communication, Coordination, and Advocacy**   | ▪ Clients kept informed and involved in the process.  
▪ RS’s advocated for the client when necessary.                                                                                                           |
| **Emergency Housing Assistance**                | ▪ Clients in crisis were assisted quickly to avoid homelessness, or to be re-housed.  
▪ Clients were able to focus on other needs and steps after their housing emergency was addressed.                                                          |
| **Housing Search**                              | ▪ Clients assisted to access Internet resources and use housing search web sites.  
▪ Clients with housing barriers such as prison records or poor credit history received guidance and advocacy, including leads on landlords who might accept them.  
▪ Clients received coaching about rent and utility costs as a part of overall household budget.  
▪ Clients empowered through information about landlord-tenant law and fair housing rules. |

3. ONGOING CASE MANAGEMENT

<table>
<thead>
<tr>
<th>CASE MANAGEMENT ACTIVITY</th>
<th>INTERVENTION ELEMENTS</th>
</tr>
</thead>
</table>
| **Monthly contact**                             | ▪ RS were able to have up-to-date information about client’s situation as it evolved, and continued tailoring information, referrals, and support.  
▪ Clients received ongoing support.  
▪ Increased rapport fostered further trust and more information-sharing. |
| **Financial Education and Budget Counseling**   | ▪ Clients who attended the required financial education class learned information and practical tips on budgeting, shopping, credit, and other topics.  
▪ Clients also got coaching from RS’s about budgeting and credit problems.                                                                                   |
| **Job Leads**                                   | ▪ RS’s provided concrete, up-to-date job leads.  
▪ Job-search tips and coaching helped clients be more effective in applications and interviews.  
▪ Encouragement and coaching helped clients stay hopeful and motivated.                                                                                       |
| **Case Plan Review; Three-month re-certification meetings** | ▪ Clients received continued emotional support and encouragement.  
▪ Clients could discuss concerns and progress on case plan; RS could remind clients of what they had planned to do.                                                |
Clients received additional referrals and system navigation advice, including information and encouragement about education programs, or getting necessary health care.

- In some cases, the RS would need to remind clients of program requirements that were a condition of continuing to receive rent/utility assistance.
- Formal 3-month certification review was a useful way for clients to update their case plan and renew their motivation to follow the plan.
- Re-certification provided an opportunity to discuss increased stability and to plan for exit.
- Clients recognized that they were taking charge of getting back on their feet.

4. **EXIT**

<table>
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<tr>
<th>CASE MANAGEMENT ACTIVITY</th>
<th>INTERVENTION ELEMENTS</th>
</tr>
</thead>
</table>
| **Planning for exit**    | ▪ Clear information about program rules assisted client expectations.  
                            ▪ Clients’ self-sufficiency was fostered through engaging them in planning for exit.  
                            ▪ RS’s were flexible about working with clients who had phone or transportation problems who might initially appear to not be working on their case plan.  
                            ▪ Clients experienced consequences for not following through. In some cases, it was necessary for Resource Specialists to send a letter to clients that they had repeatedly failed to keep in touch or to fulfill program requirements, and that assistance would be terminated. If the client did not respond, the client was exited from the program. |
| **Exit meeting**         | ▪ Information and navigation tips about other community resources assisted clients’ plans for future stability.  
                            ▪ Reflecting on client’s experience and future plans assisted client to recognize accomplishments, or acknowledge steps they still want to take.  
                            ▪ Clients received written information about the end of services. |
C. Project Action Case Management Model

*Service Intensity*

Case management models can vary according to the intensity of support that is provided. A study conducted by Health Care for the Homeless Clinicians’ Network and the National Center on Family Homelessness posed the question, what services and supports do homeless families need? Based on survey data and focus groups from ten service sites, the researchers found that service needs fell into a continuum, with about 10% of homeless families needing minimal assistance, 80% needing medium levels of assistance that might vary over time, and 10% needing high-intensity support (Bassuk, Volk, & Oliver, 2011).

Like many of the programs reviewed for the family homelessness study, Project Action provided a medium-intensity case management, requiring a minimum of once-a-month contact between the Resource Specialist and client. Most of the Resource Specialists had an average case load of 35 in order to accommodate new and ongoing cases. This case load reflected the frequency of client contact, and the length of time that clients were expected to be in the program. In comparison, at agencies where Project Action staff were employed, other agency staff had caseloads based on differing expectations for how they worked with clients. For example, case managers at the Southern Arizona AIDS Foundation (SAAF) had clients who were enrolled with the agency for many years, and ranged from having very low to high needs. The SAAF case managers averaged 55-65 clients, and were required to have at least twice-a-year contact with clients, except for higher-need clients who were seen more often. Case managers at Primavera Foundation who worked with transitional housing clients were required to meet with clients at least once a week, and thus had caseloads that ranged from 20 to 28.

*Program- and Client-Centered*

Project Action case management used a combination of program-driven and client-centered interactions.

**Program-driven.** Project Action used specific eligibility rules, and applicants had to prove that they were eligible by providing HUD-required documents at program entry and every three months. They were also required to participate in case management, attend a financial education class, and provide additional documents each month.

**Client-centered.** The Resource Specialists listened to clients and assisted clients to identify their own priorities for getting back on their feet. The resulting case plan was based on clients’ assessment of their own needs and priorities along with guidance from their Resource Specialist. Information and referrals were also tailored to each client. In some situations, the clients’ priorities were over-ridden by program goals. For example, in a few cases, clients were facing eviction because they were in post-secondary education or training programs, and not earning
enough to pay rent. Their priority was to finish school while Project Action paid their rent. However, the Resource Specialist informed them that they needed to make employment and housing stability their first priority.

Resource Specialists

The Project Action program design team wanted to make sure that a wide range of people in need could be served by the program, not just those who were already engaged in the human service system. They intentionally used the term “Resource Specialist” because some program applicants might be unfamiliar with the term “Case Manager” or have negative connotations for this term. However, program documents used the term “case management” and “case plan” when discussing program requirements.

The Project Action Resource Specialists met regularly and felt a strong team camaraderie in their work. The program gave them the flexibility to draw on their own expertise as they worked with clients, but clear procedures and a team culture fostered consistency in program delivery.

D. Key Intervention Elements

This section provides more information about intervention elements that were listed earlier in the case management summary tables. The intervention elements have been grouped into five kinds of support that were the most important, based on information from a focus group with Resource Specialists, and comments from 178 clients who answered an open-ended question on the Project Acton Client Survey. The Client Survey question asked, “Other than financial assistance, what Project Action assistance has helped you the most?”

1. Someone to talk to; emotional support

It is important to recognize that people who are about to be evicted or who are already homeless are very stressed or traumatized. The most commonly-mentioned way that survey respondents said that Project Action helped them was through emotional support. “They offered a listening ear and support when we were scared and didn’t know what was going to happen to our family and they supported us.”

When asked in a focus group if emotional support was an important element of case management, Resource Specialists said it was extremely important. “Oh yes, it’s everything.” The Resource Specialists said that empathetic listening helped to build trust, which in turn enabled clients to feel they could share more about their situation. The Resource Specialists were then able to recognize additional supports or community resources to recommend. The Resource
Specialists also said that when clients could describe their situation and express how they were feeling, they felt some relief and were able to deal with things better. However, the Resource Specialists were careful to note that they were not clinicians and had to recognize when a client’s emotional problems were substantial enough to require a referred for behavioral health support.

2. Financial education; budget counseling

The next most-often cited way that clients felt that Project Action helped them was through budget counseling and financial education classes. The Resource Specialists helped clients fill out a budget form that listed expenses in categories. Clients were required to bring a bank statement at intake, allowing them to list actual expenditures in the budget. This helped give clients perspective on where the money was going and how they might save on non-essential costs. One client said the program helped her to know “How to maintain my money and how to not just spend money on fast food, but to use my money wisely.”

Project Action required clients to attend a free two-hour financial education class, and the program contracted with Money Management International to increase the number of classes and locations in the community. The Resource Specialists reported that clients often needed to be pushed to go to the class, but when they attended, they found it valuable. One client wrote, “How to manage my money and lower my bills. Credit class has helped me a lot.” Another stated, “I was able to learn a lot about my medical debt from my child and was given assistance with making payment arrangements.” Of 156 clients who answered survey questions about the financial education classes, 95% said they learned “some” or “a lot” of new information from the class. A more modest number said they had been able to apply what they learned in their daily life, with 71% saying they had done this “most of the time” or “always,” 27% saying they had done this “a few times” and three respondents saying “never.”

3. Information and referral

HUD required that HPRP programs assist clients to connect with mainstream benefits programs. Clients cited this kind of assistance as another important way that Project Action helped them. They also needed specific information about how to get community resources such as food boxes or diapers. In their focus group, the Resource Specialists explained that they told clients that they could apply for benefits such as disability and AHCCCS (Arizona Medicaid), and provided information on how to apply. They also provided tips and encouragement when clients encountered difficulties with application processes. The Resource Specialist noted that clients often lacked information about community resources, or had been given misinformation from
someone else. “It surprises me that they don’t know they can apply for food stamps, or even unemployment. Because sometimes their employer will tell them, well, you are not eligible.”

4. Job search assistance

Approximately two-thirds of Project Action clients were engaged in a job search, based on the case notes sample of 235 households reviewed for this study. Thus, the Resource Specialists frequently offered support and guidance for clients’ job-seeking efforts. Client survey respondents mentioned job search assistance as one of the most-often cited ways that Project Action had helped them. The Resource Specialists received emailed job leads each day from the Pima County One Stop Career Center and forwarded them to clients who might be a good fit for the job. The Resource Specialists also passed along job application tips that were provided by the One Stop Center. If clients did not have email, the Resource Specialists printed the job announcements and mailed them. The Resource Specialists said that one of the most helpful things they did was provide clients with concrete job leads, and they knew of cases where clients had gotten a job due to a lead from a Resource Specialist. One Resource Specialist suggested that it would have been even more helpful if Project Action had a formal cooperative agreement with an employment program where the Resource Specialists could refer clients to a specific job developer who could assist them with barriers, hiring strategies, and further job leads.

5. Case plan, motivation, and encouragement

Many of the interventions listed above were used in combination to develop a case plan, e.g., listening, rapport, referrals, budget advice, job leads, etc. The case plan itself was also an intervention element. The client and Resource Specialist sorted out priorities and filled out a case plan form that listed the most pressing issues for the client to address. The case plan also included specific, immediate steps for clients to take. The client received a copy of the written plan. Some clients felt overwhelmed by multiple problems, and it helped to have a plan with a defined set of key goals. Clear program rules and required monthly communication provided structure for clients. Ongoing case management provided an opportunity for the Resource Specialists to review the case plan, listen to client concerns, get updated information, provide support, give information and referrals, and develop revised plans for increased client stability. Some clients did not keep in touch or regularly follow their case plan, and Resource Specialists made efforts to leave messages that reiterated requirements, warned about loss of assistance, and in some cases informed clients about termination of services.

Although Client Survey respondents did not cite the case plan per se as a helpful element, many
clients stated that Project Action helped them the most by “just things to get done that I need.” Many also said that the program supported them to stay motivated as they navigated job searches or other challenging tasks. “Support while I was stressing for a job. Encouragement to not give up.”

E. Other Findings About Project Action Case Management

Housing security enabled clients to work on their case plans. Project Action provided rent and utility assistance coupled with case management. Clients said that protecting them from homelessness gave them the security to focus on taking necessary steps to improve their stability. “To continue to provide a roof over my family’s head, while I was able to continue to catch up on financial struggle.” “Knowing that there was stability allowed me to focus on how to make it on our own, so when program ends, we are ready.” These comments highlight the importance of pairing both housing assistance and case management.

Clients felt they were back in charge of their life. When Client Survey respondents were asked how Project Action had helped them the most, many respondents gave answers about Project Action services, and these were summarized above, but some gave answers that described results. A number of respondents said that they were most helped by being able to get back on their feet, and feel improved confidence. “Stability and knowledge that I can do this thing on my own, that I’m able to take care for my family, with hard work and persistence.” “Has helped me be more independent.” These comments suggest that it was very important to clients to regain a feeling that they were back in charge of their lives, and not dependent on emergency aid. Clients also said that the program helped them regain stability and an ability to plan for the future.

Perceptions of improved stability. The Client Survey included a question that asked respondents if their situation had improved: “As a result of Project Action assistance, do you feel that your situation has become more stable?” Of 179 who answered this question, over half (53%) felt that their situation had become “very much more stable,” and another one-third (32%) felt they were “somewhat more stable.” Fifteen percent felt that they were “a little bit more stable,” and one person felt he/she was not at all stable. Thus, approximately 85% of the Client Survey respondents felt that their self-sufficiency had improved to some extent.

In their focus group, the Resource Specialists said there were varying ways that clients received benefit from the program, due to the fact that clients and their situations were so diverse. Many had been helped, and some participants regularly stopped by to give the Resource Specialists an update. Others contacted the Resource Specialists even after exit to tell them how they were doing. But the Resource Specialists also noted that it was difficult for some clients to improve
their situations. Some participants had a hard time adopting new behaviors, and others faced substantial intrinsic challenges such as a low education level or a chronic illness that continued to threaten their long-term housing stability. The Resource Specialists tried to help many of these clients find appropriate subsidized housing programs, but found that this was an area where there were substantial service gaps in the community.

Importance of team cohesion. The Resource Specialists said that the quality of their work was strengthened by strong team cohesion within Project Action. The staff and supervisors had spent several weeks developing all program forms and procedures before initiation of services. After the program began, the staff met regularly to review progress, consult on cases, and make necessary changes. The direct-service staff readily consulted with each other and shared an easy camaraderie. Although staff members were employed by different agencies, they identified as working for one program and shared an in-depth understanding about Project Action operations. “I think what is great about this program and working in the three agencies is that we know each other well, and we know we can rely on each other for information…. So that’s what makes us strong, and that’s what helps us to assist our clients in the best ways, and it’s why we feel so comfortable and confident that we are doing our best to help our clients.”

F. Limitations of the Data

Some of the limitations of this study include:

- Case notes were regularly recorded for many of the clients, but were incomplete for some. Case notes were also necessarily brief and did not always include all details about the case or case management.
- Client Surveys were completed at an in-person case management meeting, ideally at the end of the client’s time in Project Action. Sometimes Resource Specialists offered the survey at a mid-point meeting because they knew there might not be an opportunity for an in-person meeting at exit. Thus, clients completed surveys after varying durations of program exposure.
- Client Surveys were anonymous. Clients were given a private area to complete their surveys, and were told to put their completed survey in an envelope that would be given to the evaluator. However, clients might still have felt uncomfortable expressing negative views about the program.
- When the Resource Specialist was not able to make contact or arrange an in-person meeting at exit, it was not possible to get a Client Survey. Thus, Client Survey information does not reflect the views of clients who did not maintain contact with the program or who did not have an in-person exit meeting.
- A focus group with Resource Specialists included all the Resource Specialists who worked for the program at that time. The focus group did not capture the views of three other
Resource Specialists who had been previously employed by Project Action. Focus group participants were told that their answers would be kept confidential, but it is possible that the Resource Specialists could have felt uncomfortable expressing a view that they felt was not shared by the others.

IV. Conclusions

This study has provided a description of case management and how certain case management activities functioned as intervention elements. These findings suggest conclusions that include the following.

- **Importance of Case Management.** Case Management was a strong component of Project Action. The program paired emergency financial assistance together with case management, and clients said it was important to have both components. The rent/utility assistance relieved the anxiety of homelessness, and enabled participants to focus on steps they needed to take to improve their situation. Both clients and Resource Specialists felt that a majority of clients had improved stability following their participation in Project Action.

- **Case Management Model.** Project Action’s case management was medium-intensity, requiring a minimum of once-a-month contact between clients and Resource Specialists. The model offered a combination of program-driven requirements and client-centered tailoring. It is important that case management can be matched to clients’ needs and that clients can have sufficient contact with case managers to receive the necessary support and guidance.

- **Intervention Elements.** This study has identified five intervention elements that functioned during Project Action case management and helped clients to improve their stability.
  - Emotional support
  - Financial education and budget counseling
  - Information and referral
  - Job search assistance
  - A case plan that provided structure, highlighted priorities and offered motivation and encouragement.

The intervention elements show that it is important for case management to provide personal support as well as concrete referrals, job leads, and navigation tips.

- **Dignity and independence.** Several clients commented that the program helped them the most by assisting them to regain their confidence and get back in charge of their lives. It is important that human service case management is designed to foster participants’ dignity and self-determination as much as possible.

- **Service Partnerships.** Case management can be especially effective when there are formal service partnerships that can further assist clients to improve their self-sufficiency. This can
include job developers, behavioral health agencies, housing providers, and others. These kinds of partnerships give case managers a tool that is stronger than simply writing a referral. Instead, case managers can connect a client with a particular staff member at another provider, and the partnering agencies can thus assist clients jointly.

- **Subsidized Housing.** Some clients had chronically insufficient income due to disabilities or other challenges, and were unlikely to make large gains in their self-sufficiency. These clients needed additional supports such as subsidized housing that were in insufficient supply in Tucson and Pima County.

- **Program Design and Culture.** The program’s Resource Specialists felt that that team cohesion strengthened the staff’s ability to assist clients. Project Action encouraged a team approach through its organizational culture, by allowing direct-service staff to design operational procedures, and through a program design where Resource Specialists and Contract Specialists worked collaboratively to assist clients.
References


