

Please answer these questions concerning the services that may be provided under the VOUCHER ARRANGEMENT program - office which distributes vouchers

SERVICE	m. Do your clients need the services below, as part of this program?		n. Is this service provided at this address?		o. Is this service available to your homeless clients at another location?			p. Is it available to them when needed, at the other location, AND is it adequate for their needs?	
	IF YES, ANSWER Items n, o, p and q				IF YES, ANSWER p				
	☐ Yes	☐ No	☐ Yes	☐ No	☐ Yes	☐ No	☐ DK	☐ Yes	☐ No
a. OUTREACH	☐ Yes	☐ No	☐ Yes	☐ No	☐ Yes	☐ No	☐ DK	☐ Yes	☐ No
b. CASE MANAGEMENT	☐ Yes	☐ No	☐ Yes	☐ No	☐ Yes	☐ No	☐ DK	☐ Yes	☐ No
c. LIFE SKILLS ---									
(1) Money management	☐ Yes	☐ No	☐ Yes	☐ No	☐ Yes	☐ No	☐ DK	☐ Yes	☐ No
(2) Transportation usage	☐ Yes	☐ No	☐ Yes	☐ No	☐ Yes	☐ No	☐ DK	☐ Yes	☐ No
(3) Household management	☐ Yes	☐ No	☐ Yes	☐ No	☐ Yes	☐ No	☐ DK	☐ Yes	☐ No
(4) Other life skills	☐ Yes	☐ No	☐ Yes	☐ No	☐ Yes	☐ No	☐ DK	☐ Yes	☐ No
d. EDUCATION ---									
(1) General Equivalency Diploma	☐ Yes	☐ No	☐ Yes	☐ No	☐ Yes	☐ No	☐ DK	☐ Yes	☐ No
(2) English as a Second Language	☐ Yes	☐ No	☐ Yes	☐ No	☐ Yes	☐ No	☐ DK	☐ Yes	☐ No
(3) Early childhood education (Head Start)	☐ Yes	☐ No	☐ Yes	☐ No	☐ Yes	☐ No	☐ DK	☐ Yes	☐ No
(4) Basic Literacy	☐ Yes	☐ No	☐ Yes	☐ No	☐ Yes	☐ No	☐ DK	☐ Yes	☐ No
(5) After school tutoring	☐ Yes	☐ No	☐ Yes	☐ No	☐ Yes	☐ No	☐ DK	☐ Yes	☐ No
(6) Access and transportation	☐ Yes	☐ No	☐ Yes	☐ No	☐ Yes	☐ No	☐ DK	☐ Yes	☐ No
e. EMPLOYMENT/VOCATIONAL ---									
(1) Pre-vocational training	☐ Yes	☐ No	☐ Yes	☐ No	☐ Yes	☐ No	☐ DK	☐ Yes	☐ No
(2) Transitional employment/paid internship	☐ Yes	☐ No	☐ Yes	☐ No	☐ Yes	☐ No	☐ DK	☐ Yes	☐ No
(3) Training for specific jobs	☐ Yes	☐ No	☐ Yes	☐ No	☐ Yes	☐ No	☐ DK	☐ Yes	☐ No
(4) Vocational rehabilitation	☐ Yes	☐ No	☐ Yes	☐ No	☐ Yes	☐ No	☐ DK	☐ Yes	☐ No
(5) Vocational counseling	☐ Yes	☐ No	☐ Yes	☐ No	☐ Yes	☐ No	☐ DK	☐ Yes	☐ No
(6) Job placement	☐ Yes	☐ No	☐ Yes	☐ No	☐ Yes	☐ No	☐ DK	☐ Yes	☐ No
(7) Sheltered workshop	☐ Yes	☐ No	☐ Yes	☐ No	☐ Yes	☐ No	☐ DK	☐ Yes	☐ No
f. SUBSTANCE ABUSE ---									
(1) Detoxification	☐ Yes	☐ No	☐ Yes	☐ No	☐ Yes	☐ No	☐ DK	☐ Yes	☐ No
(2) Alcoholics or Narcotics Anonymous	☐ Yes	☐ No	☐ Yes	☐ No	☐ Yes	☐ No	☐ DK	☐ Yes	☐ No
(3) Individual/group substance abuse counseling	☐ Yes	☐ No	☐ Yes	☐ No	☐ Yes	☐ No	☐ DK	☐ Yes	☐ No
g. MENTAL HEALTH ---									
(1) Crisis intervention	☐ Yes	☐ No	☐ Yes	☐ No	☐ Yes	☐ No	☐ DK	☐ Yes	☐ No
(2) Medication monitoring	☐ Yes	☐ No	☐ Yes	☐ No	☐ Yes	☐ No	☐ DK	☐ Yes	☐ No
(3) Psychosocial rehabilitation	☐ Yes	☐ No	☐ Yes	☐ No	☐ Yes	☐ No	☐ DK	☐ Yes	☐ No
(4) Individual/group psychological counseling	☐ Yes	☐ No	☐ Yes	☐ No	☐ Yes	☐ No	☐ DK	☐ Yes	☐ No
(5) Psychiatric treatment	☐ Yes	☐ No	☐ Yes	☐ No	☐ Yes	☐ No	☐ DK	☐ Yes	☐ No
(6) Peer group/self help	☐ Yes	☐ No	☐ Yes	☐ No	☐ Yes	☐ No	☐ DK	☐ Yes	☐ No
h. PHYSICAL HEALTH ---									
(1) Primary care	☐ Yes	☐ No	☐ Yes	☐ No	☐ Yes	☐ No	☐ DK	☐ Yes	☐ No
(2) Physical rehabilitative care/physical therapy	☐ Yes	☐ No	☐ Yes	☐ No	☐ Yes	☐ No	☐ DK	☐ Yes	☐ No
(3) Prenatal care	☐ Yes	☐ No	☐ Yes	☐ No	☐ Yes	☐ No	☐ DK	☐ Yes	☐ No
(4) Medical screening	☐ Yes	☐ No	☐ Yes	☐ No	☐ Yes	☐ No	☐ DK	☐ Yes	☐ No
i. HIV/AIDS SERVICES	☐ Yes	☐ No	☐ Yes	☐ No	☐ Yes	☐ No	☐ DK	☐ Yes	☐ No
j. FAMILY AND CHILDREN'S SERVICES ---									
(1) Day/Evening care	☐ Yes	☐ No	☐ Yes	☐ No	☐ Yes	☐ No	☐ DK	☐ Yes	☐ No
(2) Immunization and screening	☐ Yes	☐ No	☐ Yes	☐ No	☐ Yes	☐ No	☐ DK	☐ Yes	☐ No
(3) Parenting training	☐ Yes	☐ No	☐ Yes	☐ No	☐ Yes	☐ No	☐ DK	☐ Yes	☐ No
(4) Parents Anonymous	☐ Yes	☐ No	☐ Yes	☐ No	☐ Yes	☐ No	☐ DK	☐ Yes	☐ No
k. SPECIAL SERVICES FOR HOMELESS VETERANS AND THEIR FAMILIES	☐ Yes	☐ No	☐ Yes	☐ No	☐ Yes	☐ No	☐ DK	☐ Yes	☐ No
l. OTHER SERVICES									
(1) Housing location assistance	☐ Yes	☐ No	☐ Yes	☐ No	☐ Yes	☐ No	☐ DK	☐ Yes	☐ No
(2) Housing counseling and short-term rental assistance	☐ Yes	☐ No	☐ Yes	☐ No	☐ Yes	☐ No	☐ DK	☐ Yes	☐ No
(3) Followup support services	☐ Yes	☐ No	☐ Yes	☐ No	☐ Yes	☐ No	☐ DK	☐ Yes	☐ No
(4) Enrollment in entitlement program	☐ Yes	☐ No	☐ Yes	☐ No	☐ Yes	☐ No	☐ DK	☐ Yes	☐ No
(5) Legal assistance	☐ Yes	☐ No	☐ Yes	☐ No	☐ Yes	☐ No	☐ DK	☐ Yes	☐ No
(6) Any other - SPECIFY _____	☐ Yes	☐ No	☐ Yes	☐ No	☐ Yes	☐ No	☐ DK	☐ Yes	☐ No
10q. Do you operate another program at this location?	☐ Yes - LOOK AT CHART ON PAGE 1 ^B AND GO TO THE PAGES FOR THE NEXT PROGRAM ☐ No - SKIP TO QUESTION 20 ON PAGE 34								