



AAC HOUSING SEARCH & ADVOCACY REFERRAL FORM

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AAC Housing Search & Advocacy Referral Form

This document will guide you through the process of submitting a referral for the AAC Housing Search & Advocacy Program

1. Survey Link to Refer Clients/Patients
2. Referral Information Sheet
3. Referral Form Must Provide Values/Required Fields
4. Referral Form Save & Return Option
5. Referral Partially Completed Notification
6. Referral Completed Message
7. Referral Submission Confirmation
8. Referral Update Information
9. Contact Information (e.g., training, form not working, referral questions, waitlist removal etc)



Survey link to refer clients:

You may open the survey in your web browser by clicking the link below:

[AAC Housing Search Advocacy Referral Form](#)

If the link above does not work, try copying the link below into your web browser:

<https://tfisecure.org/surveys/?s=HMCPYWFRR3>

Referral Information Sheet

- Click the submit button to continue to referral form
- Do Not click the “Submit” button if you are not referring a client – just close the information page
- Clients may be eligible for other Fenway Health/AAC Programs such as RAP. Click the link below for more information: <https://aac.org/about-us/housing/>

AAC Housing Search & Advocacy Referral Form

Please read the following information before submitting a referral.

The Housing Search and Advocacy (HS&A) team believes that everyone deserves a place to call home. Many of our clients experience barriers accessing and retaining affordable housing. Using the Housing First model, the HS&A program helps connect people living with HIV/AIDS or at high-risk to a range of housing services and options, including transitional and permanent affordable housing, supportive congregate and scattered site housing, and rental and utility assistance. Advocates and housing specialists work with clients for 12-18 months to help them obtain safe, stable, and affordable housing that best meets their needs and goals.

Referrals are accepted on a rolling basis. All referrals should be submitted via REDCap and completed in full including all necessary documentation attached.

Fenway Health/AAC - Housing Search & Advocacy Eligibility Criteria:

- Residents of MA and
- Living with HIV or
- People Who Inject Drugs (PWID)
- Low-income: 500% of Federal Poverty Level (FPL)

Eligibility Verifications Required with Referral:

- Proof of Residency (License, Utility Bill, Mail)
- Release of Information

Optional Verifications:

- Proof of Income
- HIV Diagnosis (if applicable)
- Homeless Verification (if applicable)

HS&A prioritizes Clients based on the following factors:

1. HUD Defined Homeless: living in a shelter, sleeping outside or any other place not meant for human habitation
2. Fleeing or experiencing domestic violence
3. Eviction with a notice to quit
4. Rent Burdened: an individual is paying more than 60% of their gross income to rent
5. Clients with vouchers (Example: Mobile, TBRA)

In the interest of not duplicating services, Clients who are receiving assistance and engaged with housing search and advocacy services from other agencies may not be eligible for Fenway Health/AAC HS&A program.

Clients may still be eligible for other Fenway Health/AAC programs such as RAP. For more information please visit our webpage at <https://aac.org/about-us/housing/>

Click the submit button to continue to the referral form. If you do not wish to continue at this time, please DO NOT click submit, just close this page.

Submit

Referral Form – Must Provide/Required Fields

- All required fields must be completed so your client can be on the waitlist
- If the question has a “must provide value” you cannot continue to the next question or submit referral if no information is provided

F E N W A Y  H E A L T H

Resize font: 

AAC Housing Search Advocacy Referral Form

Please complete the form below to refer patients/clients to the AAC/Fenway Health HS&A Program.

Please be aware that until all required fields are completed on the referral, your client will not be on the waitlist to receive housing search assistance.

If you choose to stop your referral for now and return at a later time to complete it, please bookmark this page to return to the survey, OR you can provide your email after you click the "Save & Return Later" button at the bottom of this page to receive the link via email. If you do not receive the email soon afterward, please check your junk email folder. Please do not start a new referral form to avoid duplicates or inaccurate data.

To receive confirmation of your referral submission and the Waitlist Policy Information, please enter your email address once you have completed the referral.

DEMOGRAPHICS

We ask these questions to ensure that confidentiality is maintained.

Date of referral:

 Today M-D-Y

* must provide value

Client's First Name:

* must provide value

Client's Last Name:

* must provide value

Client's DOB:

 Today M-D-Y

* must provide value

Client's Phone Number:

* must provide value

F E N W A Y  H E A L T H

fenwayhealth.org



Referral Form – Save & Return Option

- You can stop the referral and return to complete it later, but please make sure to do the following:

- Bookmark the page to return or
- Provide an email after you click the “save & return later” button

F E N W A Y  H E A L T H

Resize font:


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DEMOGRAPHICS

We ask these questions to ensure that confidentiality is maintained.

Date of referral: <small>* must provide value</small>	<input type="text"/>  Today M-D-Y
Client's First Name: <small>* must provide value</small>	<input type="text"/>
Client's Last Name: <small>* must provide value</small>	<input type="text"/>
Client's DOB: <small>* must provide value</small>	<input type="text"/>  Today M-D-Y
Client's Phone Number: <small>* must provide value</small>	<input type="text"/>

F E N W A Y  H E A L T H

fenwayhealth.org



Referral Form – Save & Return Option

- Bookmark the page to return or provide an email after you click the “save & return later” button

- Enter email address to receive survey link to continue later

- Continue referral or bookmark the page

REFERRING CASE MANAGER / AGENCY

Name of Case Manager/Point of Contact:
* must provide value

Referring Agency:
* must provide value

Case Manager/Point of Contact Phone Number:
* must provide value

Case Manager/Point of Contact Email Address:
* must provide value

Additional notes on client's situation that will assist in the housing search process:
Expand

Your survey responses were saved!
You have chosen to stop the survey for now and return at a later time to complete it. To return to this survey, you will need the survey link to this survey.

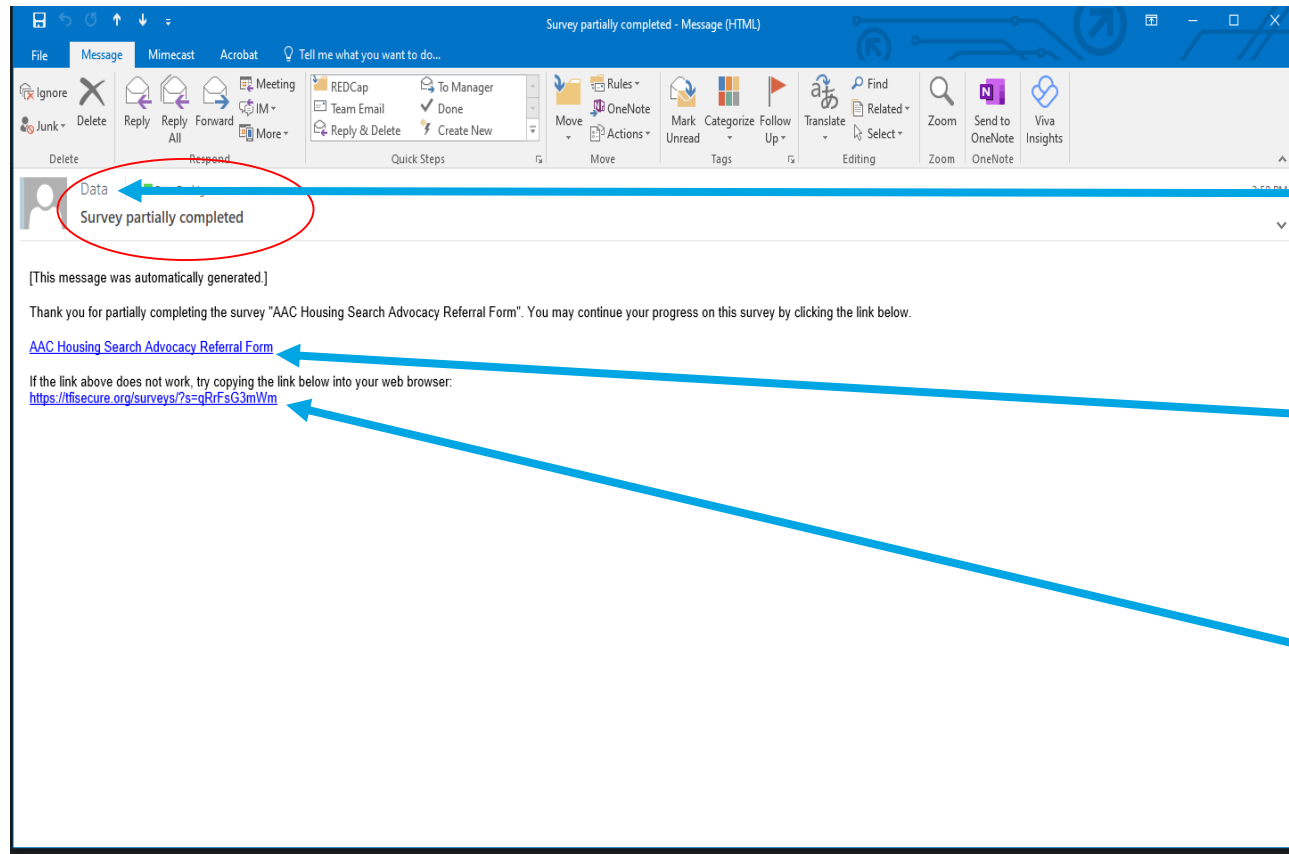
Survey link for returning
You may bookmark this page to return to the survey, OR you can have the survey link emailed to you by providing your email address below. If you do not receive the email soon afterward, please check your Junk Email folder.

* Your email address will not be stored

Or if you wish, you may continue with this survey again now.

Referral Partially Completed

You will receive this email if you entered an email to return to complete referral at a later time



The email will come from data and the subject will read **“Survey partially completed”**

Click here to complete referral

If the above link does not work, copy this link on your browser

Referral Completed

The page below is displayed as soon as you submit a completed referral. You will then receive an email confirmation message of the referral submission including the attachments for the HS&A Waitlist Policy and referral completed, but you must provide an email.

The screenshot shows a web page with a 'Close survey' button at the top left. Below it is the heading 'AAC Housing Search & Advocacy Referral Form Received!' followed by a thank you message. A green box contains the prompt 'Enter your email to receive confirmation message?' with a sub-message explaining that a confirmation email is supposed to be sent but cannot be sent automatically if the email address is not on file. This section includes an 'Enter email address' input field and a 'Send confirmation email' button. At the bottom, there is a 'Download your survey response (PDF):' section with a 'Download' button. Blue arrows point from external text to the 'Send confirmation email' button and the 'Download' button.

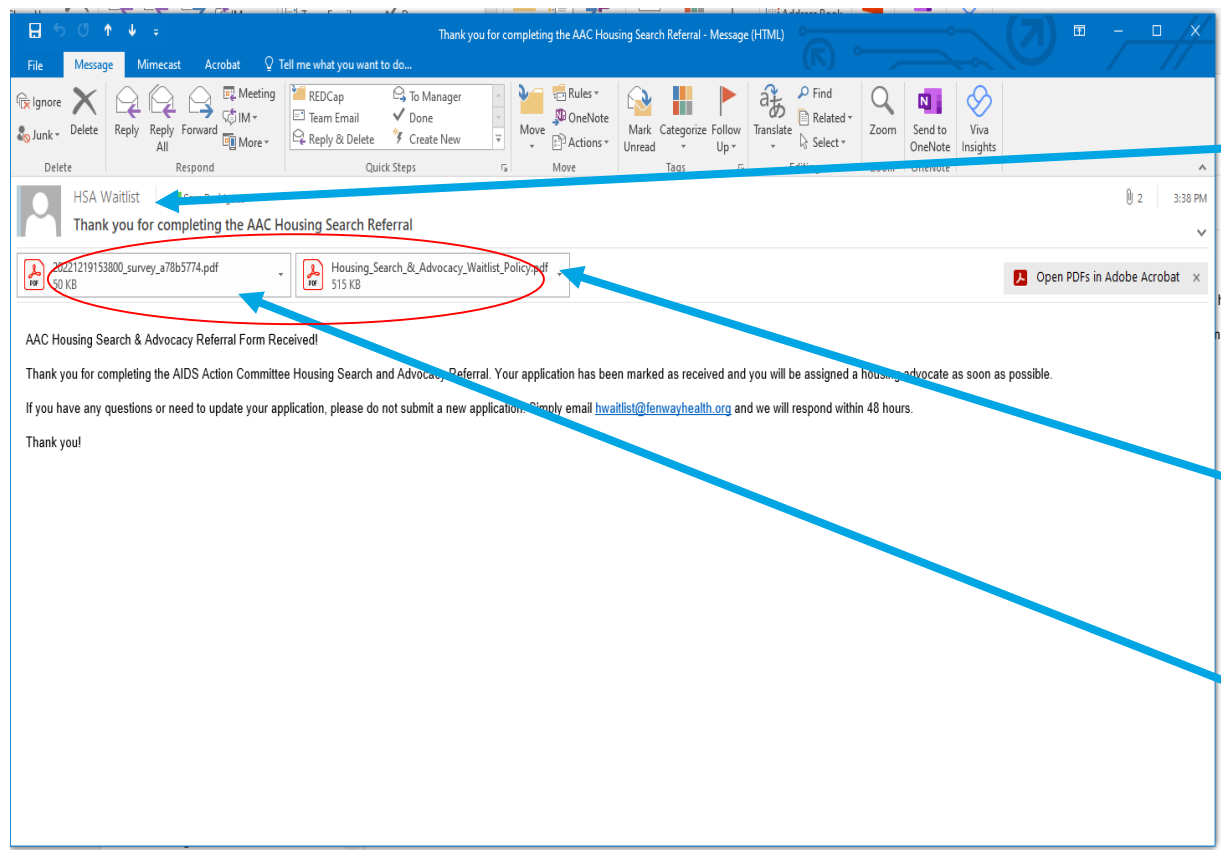
Enter your email here to receive confirmation of your referral submission

Download completed referral if an email was not provided

Referral Submission Confirmation

You will receive this email notification once the referral is completed and submitted

Notification is sent only if you entered your email



This email will come from **“HSA Waitlist”** and the subject will indicate that the form has been completed

Housing Search & Advocacy Waitlist Policy

Completed referral



Need to Update Referral?

If you need to update a submitted referral, please **do not** submit or start a new referral, simply send the information to the email below:

hwaitlist@fenwayhealth.org



Questions

For questions regarding REDCap (e.g., training, form is not displaying correctly or not working, accidentally closed a form without entering email or bookmarking the page etc.) please contact **Sara Rodriguez** at srodriguez@fenwayhealth.org

For questions regarding referrals (e.g., form submission, updates, waitlist removal etc.) please contact us at hwaitlist@fenwayhealth.org