

ROMA

Self-Reliance Achievement Scale (SRAS)



Training Manual

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INTRODUCTION

The ROMA Self-Reliance Achievement Scale (SRAS) is a measurement tool that is designed to track the progress of low-income Minnesotans who receive services from Community Action Agencies. The SRAS measures an individual's movement toward self-reliance and ability to meet his/her family's needs.

- The outcomes being measured by this tool will help document the benefits of services provided by Community Action Agencies to low-income families.
- The Self-Reliance Achievement Scale is not intended to capture all of the services provided by Community Action Agencies.

The purpose of this manual is to define the terms used in the Self-Reliance Achievement Scale and to explain how agency staff are to complete the Scale. This manual includes: the definitions of terms used in the Scale, the process for completing and submitting the Scale, and descriptions of the fifteen domains.

The Self-Reliance Achievement Scale is not a participant needs assessment or a case management tool. Its purpose is to measure an individual's progress across areas, and to determine whether persons served by Community Action are becoming more self-reliant over time.

- The SRAS is not designed to measure the impact on all of a Community Action Agency's participants.
- The SRAS is designed to measure the impact only on those participants with whom:
 - The agency will have at least two contacts,
 - The agency will work with for at least 30 days,
 - Some form of assessment and goal setting will take place, and
 - The agency will serve in at least ONE domain.

In order to effectively measure progress, the SRAS has been designed to be used multiple times with each participant. Over time, the SRAS tracks progress in different areas, called **domains**, documented on the SRAS Observation form. Data used to complete the SRAS will come from participant case files and staff meetings with participants. Successful use of this tool will depend on good documentation and accurate case files. Use of this scaling tool does not preclude or eliminate the need to follow the agency's and/or program's normal data collection requirements.

For accuracy, validity, and reliability of participant information the following **MUST HAPPEN**:

- 1) The Self-Reliance Achievement Scale must be completed during at least two points in time, **at least 30 days apart**.
- 2) In order for this Scale to be useful, it **must always be filled out in its entirety**. (Missing information will invalidate portions of the Scale.) This means that even if the staff member completing the SRAS form is not working directly with an individual on one or more of the domains, they must still complete the information for those domains.
- 3) Fill out **ALL DOMAINS**, their status, date, service activity, and service code(s) **EVERY TIME** the Scale is completed.

DEFINITIONS

Target Population

The target population for the Self-Reliance Achievement Scale is a participant who:

- Your agency will have at least 2 contacts with, and which are a minimum of 30 days apart,
- Your agency will work with for at least 30 days,
- Will work with your staff in some form of assessment and goal setting; and
- Will receive services from your agency in at least one of the Scale's Domains.

The SRAS is generally intended for people who are served in a substantial way by Community Action Agencies, specifically, those who receive coordination of services. If the staff person is working with more than one adult in a household, a Self-Reliance Achievement Scale is to be completed for every adult participant.

Do not complete the Self-Reliance Achievement Scale on participants who only seek crisis or other one-time services. However, if the agency continues to have multiple contacts (over a 30-day period or longer) with the participant, assessment and goal setting is done, and she/he is provided services in at least one of the domains, then the SRAS should be completed, based on the information from the participant's case files and her/his status or situation at the time of first contact with the program.

Observation Dates

The observation date is the date on which a staff person completes the Self-Reliance Achievement Scale across all domains. This date is not necessarily the same date as when the staff person sees or talks to the participant. Observation dates must be at least 30 days apart. Completion of the SRAS is based on staff judgment. Completion does not necessarily occur every month or each time the participant is seen. The initial, or "baseline," observation is completed after the participant assessment is completed in order to report across all domains. It is acceptable for the assessment to take two or three visits. Complete the initial or baseline SRAS status report when the coordination of service assessment is complete and all of the participant's information is available.

Domains

Domains are the major components of the Self-Reliance Achievement Scale and include:

- | | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <ul style="list-style-type: none">• Employment-Related Health Benefits• Hours of Employment• Job Retention and Stability• Household Income Sources• Child Support• Earned Income Tax Credit (EITC)• Adequacy of Income for Food and Shelter• Financial Credit | <ul style="list-style-type: none">• Housing Stability• Housing Affordability• Household Healthcare Insurance Coverage• Child Care• English Proficiency• Education• Transportation• Informal Social Support |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

Status Codes

Within each domain, participants will fit into one of several status categories, or numerical indicators that refer to a participant's level of self-reliance (*see Attachment C: Status Codes List*). Generally speaking, the higher the status category assigned, the greater self-reliance in the participant's situation. Each time staff complete the SRAS, **each domain must be scored using one of the status categories listed**. Look under the domain name for the category descriptions and on pages 7-9 of this manual for more detailed information.

Service Codes

When a staffperson uses an SRAS Observation form to record a participant's status in one or more domains, the "SERVICE" column across from the relevant Domain column is used to record any services provided to a participant. Please refer to *Attachment D (Service Codes List by Domain)* for a list of Service Codes to select from. This list provides 3-digit service codes to describe each type of service that an agency may provide to a participant within each of the domains. Up to three services can be selected within each Domain category and entered into the Service Code columns. (**i.e. Service1, Service2, Service3**).

If no service was provided in a particular domain, simply leave the Service line blank. (This means that it is possible that all Service lines could be blank except for the one or two Domains within which a service has been provided.)

Record a given service in only one domain, even if it applies to more than one domain. The intent of this instruction is to reduce the recording of duplicative services. The exception to this rule is when a staffperson uses the following "general codes" (all of which begin with a zero). These codes are: **Information, Referral, Follow-up, Client Advocacy, and Mentoring** and may be used in more than one domain for one recorded observation because they do not refer to specific services. Information, Referral, Follow-Up, or Client Advocacy activities **need** to be recorded. This is an important indicator of the way in which Community Action Agencies often acts as the 'glue' that holds service coordination together for a participant. (Note: Select "Information" or "Referral" only when it applies to resources **outside of the agency**. When making an internal referral to another part of your agency record the actual Service Code that applies.

COMPLETING THE SELF-RELIANCE ACHIEVEMENT SCALE

Please carefully read the descriptions of the elements of the SRAS on the following pages.

Participant data **MUST** be entered on the Self-Reliance Achievement Scale as instructed so that the information can be entered into a database for analysis.

- The SRAS Intake Form collects a participant’s demographic information.
- The SRAS Observation Form measures progress towards increased self-reliance in 15 areas or “Domains.”
- If the agency is providing service to the participant relevant to one of the scale’s domains, that service should be coded and entered in that domain.

Completing the Agreement to Be Part of a Follow-Up Study Form (Consent Form) - Attachment A

The “Agreement to Be Part of a Follow-Up Study” is a Consent form (*see Attachment A*) that allows for the collection of the information requested on the SRAS Observation form. This Consent form must be completed before the SRAS is completed, and does not need to be renewed annually. (*Note: HIPAA requires that a time frame be specified in the consent form. It is appropriate, however, to say that the consent is valid “for the duration of the research project,” rather than indicating a specific date. In this case, a one-time signature is sufficient.*)

The Participant will print their name and date and provide a signature on the form. The staffperson provides the “Witness Signature” and date. Keep the signed Consent Form in the participant’s file. State law requires that these forms remain on file for 6 years. **Visions will ask you at program entry if you have consent.**

Completing the SRAS Program Entry Page

Consent Form Signed?

Visions will ask you at program entry if you have consent.

Number of adults in household

This refers to the household in which the participant is living. Include the participant in the total number of adults. An adult refers to any person age 18 or older. **If household size changes, you will need to go to the program entry page to change it.**

Number of children in household

This refers to the household in which the participant is living. A child refers to any person age 17 and younger. Include any foster children. **If household size changes, you will need to go to the program entry page to change it.**

Completing the SRAS Observations

- * You may use *Attachment B: SRAS Observation Form* if filling out paper forms prior to entry into Visions.
- * **YOU ARE STILL RESPONSIBLE FOR ENTERING THESE OBSERVATIONS INTO VISIONS.**

Participant Name *(only if using paper form)*

Enter the participant's Last name, First name and Middle Initial

Date of Birth *(only if using paper form)*

Enter the participant's date of birth as you did on the SRAS Intake Form.

Observation Date *(only if using paper form)*

Record the date that the scale is being completed, again using two digits for the month, two digits for the day, and four digits for the year. (For example April 15th 2007 is recorded: 04/15/2007)

Health Related Benefits Status Category

Refer to *Attachment C: SRAS Status Codes List* to select from the categories listed under the first Status Category: Health Related Benefits. Select the most appropriate status, based on staff assessment and/or participant self-reporting.

Select 0 "No employment/no employment-related health benefits" if the individual is not employed.

Select 1 "No employment, receiving COBRA benefits," if the participant is covered under the Consolidated Omnibus Reconciliation Act (COBRA) and is the continuing health insurance benefits through the employer's group after the participant has terminated employment.

Select from 2 through 6 when there is a relevant change in the participant's employment-related health benefits status.

This particular Status Category is not recorded as a Domain because it refers to any health-related benefits that the participant receives as a result of employment. Under this component, only the participant's status is recorded. This component looks different from Domains A through O because Community Action is unlikely to have any effect on whether a participant's employer offers health benefits. Because of this, a service code is not indicated. Participants and their household may have other sources of health benefits. To capture this information, further health care-related information will be collected in Domain J "Household health care insurance coverage".

Domains

Refer to *Attachment C: SRAS Status Code List* to select the status level that best fits the individual at the present time for each Domain (A through O). Record that status (numerical indicator) under the **Status** heading across from the relevant Domain. **A status code must be listed for all 15 Domains every time an Observation form is completed for a participant.**

After recording the status for each Domain category, next determine if a service was provided to the participant for each Domain. Refer to *Attachment D: Service Codes List by Domain* to select an appropriate 3-digit code for each service provided. The Service Code refers to the type of service provided to the participant by the agency. Record under the Service Activity column heading (i.e. SERVICE 1, SERVICE 2, or SERVICE 3). Up to three services may be recorded for each Domain whenever the Scale is completed. If more than three services were provided to a participant within a

Domain, select the top three services and try to choose another domain to record the additional service(s). If no service was provided to a participant within a particular Domain, simply leave the Service Activity column blank.

DOMAIN CLARIFICATIONS

The following table contains further explanation and clarification for each domain. Agency staff should pay special attention to these descriptions when completing the SRAS.

Domain	Clarification
Domain A	<p>Hours of Employment</p> <p>This refers to the participant’s current employment status based on the number of hours worked per week during the past month. Select 0 for anyone who is temporarily laid off. Select 9 as the status for people who are retired or unable to work for any reason.</p>
Domain B	<p>Job Retention and Stability</p> <p>This indicates the participant’s length of time at current job. If the participant works at more than one job, complete for the job of <u>longest</u> duration.</p>
Domain C	<p>Household Income Sources</p> <p>Note the definitions of public cash assistance and earned income listed below the categories. Public cash benefits include: Minnesota Family Investment Program (MFIP), General Assistance (GA), and Supplemental Security Income (SSI). Earned income includes: Employment Income, Unemployment Benefits, Supplemental Security Disability Income (SSDI), Veterans benefits, Retirement benefits, Social Security payments, Earned Income Tax Credit (EITC), and the Working Family Credit.</p>
Domain D	<p>Child Support</p> <p>All categories except 9 - “Not applicable,” refer to any participants that should be (or are) receiving a child support income award that has been ordered by the court. If the person is not entitled to receive any child support income, entering 9 is appropriate.</p>
Domain E	<p>Earned Income Tax Credit (EITC)</p> <p>Community Action staff should screen participants based on their income to determine if they are eligible for the EITC. The eligibility information is available at each agency. If the participant is not eligible, select 9 – “Not applicable”.</p>
Domain F	<p>Adequacy of Income for Food and Shelter</p> <p>This is the individual participant’s own assessment of whether or not her/his current income is adequate to meet food and housing needs during the past month.</p>
Domain G	<p>Financial Credit</p> <p>This domain refers to the participant’s ability to obtain and use credit for purchases. “No credit” means that the participant has never established credit. “Poor credit” means that the participant has a ‘bad’ credit rating and she/he would have difficulty borrowing money from any source, including credit cards.</p>
Domain H	<p>Housing Stability</p> <p>“Homeless” is defined as having no place to live, or she/he is sleeping outdoors, in a vehicle, or any other place not intended for habitation. “Emergency shelter, doubled up or notice of eviction/foreclosure or at risk of loss of housing” includes individuals at risk of losing their housing. “Doubled up” means that the participant is sharing housing without paying rent. “Transitional housing” is defined as stable, but temporary, shelter. Includes temporary foster</p>

care or nursing home residence. “Subsidized rental housing” includes doubling up paying partial rent as well as formal rent subsidy programs. “Market rate housing” means that the household receives no subsidy for its housing costs. Manufactured housing with lot rent is included in this category. A “Not Applicable” category is included for situations where an individual is temporarily not responsible for their housing, such as when incarcerated, in institutional care, or in the military.

Domain I

Housing Affordability

This domain refers to the percentage of income that the participant’s household uses to pay for housing. Income in this instance refers to total household income, not simply the individual participant’s income. Housing costs include only rent or mortgage payments unless utilities and/or insurance are included in the rent/ mortgage payment.

Domain J

Household Health Care Insurance Coverage

This domain describes the type and availability of health care for members of the household. Differentiations in scoring will occur based on whether the insurance is private, public or both, and whether all or just some household members are covered under the insurance. Note the definition of public insurance listed below the categories. Public insurance can include: Medicaid (MA), Minnesota Care (MNCare), or some other type of health care provided by the State or County.

Domain K

Child Care

If a participant needs a particular type of childcare that is not available (such as infant care) and it is not available, select 0-“Not Available.” If a participant does not currently need child care, select 9-“No child care needed.”

Domain L

English Proficiency

“No English skills” means that the participant does not speak English. “Inadequate skills” means that the participant cannot function in an interaction with English-speaking people without an interpreter.

“Limited skills” means that the participant may understand and speak some English but not adequate enough to secure basic needs. “Functional English skills” are defined as an ability to read street signs, complete job applications, and speak in an understandable manner using simple phrases. “Support” refers to the need to have another individual help in translation and/or to strengthen the participant’s understanding of English.

Domain M

Education

This domain refers to the participant’s opinion regarding the adequacy of her/his educational level as it relates to employment. This status is self-reported by the participant.

Domain N

Transportation

This domain is the participant’s self-reported opinion of whether or not her/his transportation is adequate to meet daily needs

Domain O

Informal Social Support

This status is self-reported by the participant and/or observed by staff. Circles of Support Program Allies are recorded as “friends.”

MINNCAP CONTACT FOR SELF-RELIANCE ACHIEVEMENT SCALES

Please direct questions about the SRAS to Mozell Curry at Minnesota Community Action Partnership at:

Mozell Curry
MozellCurry@MinnCAP.org
651-645-7425 x 3
FAX: 651-645-7399
Minnesota Community Action Partnership
100 Empire Drive, Suite 202
St. Paul, MN, 55103

After you have reviewed this Training Manual, you may refer to Attachment E as needed for a brief overview of the instructions described. (*Attachment E: SRAS Instructions Overview*)

Attachment A:

Agreement to be Part of a Follow-Up Study Form

(Consent Form)

- * **English**
- * **Hmong**
- * **Somali**
- * **Spanish**

ROMA Self Reliance Achievement Scale (SRAS)

AGREEMENT TO BE PART OF A FOLLOW-UP STUDY Consent Form

This program helps people meet their own needs and the needs of their families. To learn if our services are helpful, we gather information about each participant's progress. This information will be grouped together with information from other agencies across the state. The Minnesota Community Action Partnership and the Wilder Research Center will help us analyze the information and then will report on it to us. We will use this information to help your local Community Action Agency and our local policymakers to learn about the successes of people who use the services of this program.

We would like your help. We NEVER reveal any information about a specific program participant. We only use the information to see if the program is meeting its goals. You can review your own file at any time.

This signed consent form is valid for the duration of this research project.

Participant Name (printed)

Date

Participant Signature

Witness Signature (staff)

Date

ROMA Self Reliance Achievement Scale (SRAS)

KEV POM ZOO KOOM TES RAU IB QHO KEV TSHAWB KAWM YAV TOM NTEJ Daim Ntawv Tso Cai

Qhov kev pab no pab kom tibneeg pab tau lawv tus kheej thiab lawv tsev neeg tej kev xav yuav xav tau. Peb yuav xyuas saib peb tej kev pab puas pab tau sawvdaws los ntawm kev khaws tej ntaub ntawv hais txog kev loj hlob ntawm txhua tus neeg uas koom tes. Tej ntaub ntawv no yuav muab tso uake nrog tej ntaub ntawv ntawm lwm lub koom haum nyob thoob plaws hauv lub xeev. Lub koom haum Minnesota Community Action Partnership thiab Wilder Research Center yuav pab peb ntsuam xyuas tej ntaub ntawv thiab qhia rau peb paub. Peb yuav siv tej ntaub ntawv no los pab lub koom haum Community Action Agency ntawm cheeb tsam koj nyob thiab muab rau peb cov neeg tsim kev cai hauv cheeb tsam tau kawm txog cov tib neeg uas tau siv qhov kev pab no tias nws ho pab tau lawv li cas.

Peb xav tau koj kev pab. Peb YEEJ TSIS QHIA ib yam dabtsi txog ntawm cov neeg uas koom qhov kev pab no rau lwm tus paub. Peb tsuas siv tej ntaub ntawv no los xyuas saib qhov kev pab puas ncav li tej homphiaj teem tseg xwb. Koj muaj cuab kav saib tau koj tej ntaub ntawv txhua lub sijhawm.

Daim ntawv tso cai no siv tau txog hnuv uas qhov kev tshawb kawm no tag.

Tus neeg koom tes lub npe (printed)

Hnuv tim

Tus neeg koom tes suam npe

Tus neeg ua pov thawj suam npe (staff)

Hnuv tim

ROMA Self Reliance Achievement Scale (SRAS)

Hershiiis Ka Midnokosho Arimo Hore Lo-Darsay

Parnamijkan wuxuu adiga iyo faamaligaaga idinka caawindoonaa sida aad iskufilnaasho ugaarilahaydeen. Si aannu u ogaanno waxqabadka iyo waxtarka barnamijkan, suaalo ayaan weydiin doonnaa ka qaybqaadayaasha barnamijkan. Aragtidaada ayaannu ku dari doonnaa aragtiyo kale oo laga soo ururiyey dadk minessota ku nool ayna soo uruyeen hay`adaha samafalka ee gobolka Minessota..Kadibna labadan hay`adood (the Minnesota Community Action Partnership iyo Wilder\Research Center) ayaa aragtidii iyo jawaabihii la soo ururiyey waxay kusamayn doonaan daraasad iyo baaritaan..Daraasaddaas ayaa loo gudbin doonaa odoyaa sharciga gobolkan u dejiya, si ay u ogaadaan waxtarka iyo faaiidada barnamijyadani ay u leeyiin dadk isticmaala.

Waxaannu jecelnahay inaanu ku caawino, waxa aad noo sheegtayna cidkale ma ogaaneyso ..Jawaabahaaga iyo waxaad noo sheegtay waxay naga caawin doonaan horumarinta barnamijkan uun. Faylkaaga xaq baad u leedahay inaad naga cosato inaad aragtid marka aad doontid.

Halkan noo saxeed si aannu suaalo kuu waydiino xilliga aad barnamijkan aad ka qaybqaadaneyso.

Magacaag

tariikhda

Magacaag

Saxeexaaga

tariikhda

FORMULARIO DE CONSENTIMIENTO PARA PARTICIPAR EN UNA INVESTIGACIÓN

Este programa ayuda a las personas a satisfacer sus necesidades y las necesidades de sus familias. Para aprender si nuestros servicios son de algún beneficio, juntamos información del progreso de cada uno de los participantes. Esta información se recopilara con la información de las otras agencias de todo el estado. Minnesota Community Action Partnership y Wilder Research nos asistirán en analizar la información, y nos reportarán los resultados. Nosotros vamos a usar la información para ayudar a su Community Action Agency y los legisladores locales a aprender sobre los éxitos de la gente que utiliza los servicios de este programa.

Nos gustaría su apoyo. Nosotros NUNCA revelamos ninguna información de ninguno de nuestros participantes. Sólo utilizamos la información para determinar si el programa está logrando sus metas. Usted puede revisar su expediente cuando usted desea.

Este formulario de consentimiento firmado es válido durante el transcurso de este proyecto de encuesta.

Nombre del Participante (escrito)

fecha

Firma del Participante

Firma del Testigo (trabajador/staff)

fecha

Attachment B:

SRAS Observation Form



Minnesota Community Action Partnership
 100 Empire Drive, Suite 202
 Saint Paul, MN 55103
 (651) 645-7425



Minnesota Department of **Human Services**
 Office of Economic Opportunity
 444 Lafayette Road North
 St. Paul, MN 55155

SRAS Observation Form

Participant Name	_____	_____	
	(Last)	(First)	(MI)
Date of Birth	_____		
Observation Date:	_____		

DOMAIN	STATUS	SERVICE 1	SERVICE 2	SERVICE 3
Health Related Benefits				
A. Hours of Employment				
B. Job Retention and Stability				
C. Household Income Sources				
D. Child Support				
E. Earned Income Tax Credit (EITC)				
F. Adequacy of Income for Food and Shelter				
G. Financial Credit				
H. Housing Stability				
I. Housing Affordability				
J. Household Healthcare Insurance Coverage				
K. Child Care				
L. English Proficiency				
M. Education				
N. Transportation				
O. Informal Social Support				
Completed by:				
	(Name)			(Phone)

Attachment C:

SRAS Status Codes List

SRAS Status Codes

<p>Health Related Benefits</p> <p>0-No employment/no employment-related health benefits 1-No employment, receiving COBRA benefits 2-Employment, no health benefits offered 3-Employment, health benefits offered but unaffordable 4-Employment, health benefits offered, not enrolled – covered by other insurance 5-Employment w/health benefits, participant enrolled 6-Employment w/health & dental benefits, participant enrolled 9-No employment, health benefits covered through another household member</p> <p>A. Hours of Employment</p> <p>0-Unemployed 1-Working < 15 hrs/week 2-Working 15 - 19 hrs/week 3-Working 20 - 24 hrs/week 4-Working 25 - 29 hrs/week 5-Working 30 - 34 hrs/week 6-Working 35 - 40 hrs/week 7-Working > 40 hrs/week 9-Unable to work or Retired</p> <p>B. Job Retention and Stability</p> <p>0-Unemployed 1-Worked < 1 month at current job 2-Worked 1 month but < 3 months at current job 3-Worked 3 months but < 6 months at current job 4-Worked 6 months or longer at current job 9-Unable to work or Retired</p> <p>C. Household Income Sources</p> <p>0-No household income 1-Public cash benefits/no earned income for any household member 2*-More than 50% public cash benefits with some earned income 3***-More than 50% earned income with some public cash benefits 4-Earned income/ no public cash benefits for any household member</p> <p><small>* Public cash benefits include MFIP, GA, SSI **Earned Income includes: employment, unemployment benefits, SSDI, veterans benefits, retirement benefits, and social security, EITC, Working Family Credit</small></p> <p>D. Child Support</p> <p>0-Eligible, no income benefit 2-Eligible, partial or irregular benefit 4-Eligible, receives full benefit 9-Not applicable</p> <p>E. Earned Income Tax Credit (EITC)</p> <p>0-Eligible, no benefit 2-Eligible, applied for benefit 4-Eligible, received or receiving benefit 9-Not applicable</p> <p>F. Adequacy of Income for Food and Shelter</p> <p>0-Unable to meet food AND housing expenses during the last month 2-Able to meet food OR housing expenses during the last month 4-Able to meet BOTH food & housing expenses during last month</p>	<p>G. Financial Credit</p> <p>0-No 1-Poor 2-Restoring or beginning to establish 4-Good or restored 9-Not able to determine</p> <p>H. Housing Stability</p> <p>0-Homeless 1-Emergency shelter, doubled up or notice of eviction/foreclosure or at risk of loss of housing 2-Transitional housing (time limited—include temporary foster care, group home or nursing home) 3-Subsidized rental housing 4-Market rate rental housing/manufactured housing with lot rent 6-Home ownership 9- Not Applicable (i.e. temporary institutional care, incarceration, military service)</p> <p>I. Housing Affordability</p> <p>0-Pays > 50% of household income 2-Pays < 50% but ≥ 30% of household income 4-Pays < 30% of household income 9-Not applicable/not paying</p> <p>J. Household Healthcare Insurance Coverage</p> <p>0-No insurance for <i>any</i> household members 1-Public health insurance for <i>some</i> household members 2-Public health insurance for <i>all</i> household members 3-Mix of public and private insurance for <i>some</i> household members 4-Mix of public and private insurance for <i>all</i> household members 5-Private insurance for <i>some</i> household members 6-Private insurance for <i>all</i> household members</p> <p>K. Child Care</p> <p>0-Not available 1-Available but inadequate to meet need 2-Available & adequate with subsidy 4-Available & adequate without subsidy 9-Not needed</p> <p>L. English Proficiency</p> <p>0-No skills/inadequate skills 1-Limited skills 2-Functional skills with some support 4-Functional skills, no support needed</p> <p>M. Education</p> <p>0- Not adequate to meet employment needs 2- Adequate for current employment but not for work advancement 4- Adequate for current employment and advancement 9-Unable to work or Retired</p> <p>N. Transportation</p> <p>0-Not adequate to meet daily needs 2-Adequate to meet some but not all daily needs 4-Adequate to meet daily needs</p> <p>O. Informal Social Support</p> <p>0-No support from family/friends 2-One family member/friend they can turn to in a crisis 4-Two or more family members/friends they can turn to in a crisis</p>
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Attachment D:

Service Codes List (by Domain)

SRAS Service Codes by Domain

Domain	Codes	Description
A	001	Information
A	002	Referral
A	003	Client Advocacy
A	004	Follow Up
A	006	GED training
A	007	ESL / English proficiency training
A	008	Job search activities
A	009	Job placement activities
A	011	Relocation assistance
A	013	Remedial education / Adult Basic Education classes
A	101	High school completion
A	102	Objective assessment
A	103	Vocational exploration
A	104	Basic skills training
A	105	Marketable work habits training
A	106	Resume Assistance
A	107	Voluntary and community service experience
A	108	Work experience / internship, obtaining unpaid position
A	109	Work experience / internship, obtaining paid position
A	110	On-the-job training
A	111	Training for dislocated workers
A	112	Occupational skills training
A	113	Supervisory and leadership skills training
A	114	Job retention services
A	115	Pre-layoff assistance
A	116	Business plan development
A	117	Job Club
A	118	Legal claims against employer, assistance filing for
B	001	Information
B	002	Referral
B	003	Client Advocacy
B	004	Follow-Up
B	005	Mentoring
B	006	GED training
B	007	ESL / English proficiency training
B	008	Job search activities
B	009	Job placement activities
B	011	Relocation assistance
B	013	Remedial education / Adult Basic Education classes
B	101	High school completion
B	102	Objective assessment
B	103	Vocational exploration
B	104	Basic skills training
B	105	Marketable work habits training
B	106	Resume Assistance
B	107	Voluntary and community service experience

Domain	Codes	Description
B	108	Work experience / internship, obtaining unpaid position
B	109	Work experience / internship, obtaining paid position
B	110	On-the-job training
B	111	Training for dislocated workers
B	112	Occupational skills training
B	113	Supervisory and leadership skills training
B	114	Job retention services
B	115	Pre-layoff assistance
B	116	Business plan development
B	117	Job Club
B	118	Legal claims against employer, assistance filing for
C	001	Information
C	002	Referral
C	003	Client Advocacy
C	004	Follow Up
C	015	Applying for public subsidy program, assistance with
C	119	Public assistance, assessing qualification for
C	120	Applications for assistance, completing
C	140	Tax aid / assistance
D	001	Information
D	002	Referral
D	003	Client Advocacy
D	004	Follow Up
D	121	Child support obligation established
D	122	Child support, filing for
D	123	Court costs, financial assistance
E	001	Information
E	002	Referral
E	003	Client Advocacy
E	004	Follow Up
E	015	Applying for public subsidy program, assistance with
E	124	Earned Income Tax Credit (EITC), applying for
F	001	Information
F	002	Referral
F	003	Client Advocacy
F	004	Follow Up
F	010	Budgeting
F	012	Debt Consolidation assistance
F	015	Applying for public subsidy program, assistance with
F	119	Public assistance, assessing qualification for
F	120	Applications for assistance, completing
F	132	Emergency food assistance
F	135	Nutrition assistance program enrollment (WIC, MAC, NAPS)
F	136	Meals on Wheels enrollment

Domain	Codes	Description
F	137	Vouchers for food or clothing, obtaining
F	138	Energy Assistance Program (EAP) enrollment
G	001	Information
G	002	Referral
G	003	Client Advocacy
G	004	Follow Up
G	005	Mentoring
G	010	Budgeting
G	012	Debt Consolidation assistance
G	016	Financial Literacy classes
G	141	Credit applications, assistance completing
G	142	Agency loan program
G	143	Credit report, assistance obtaining
G	144	Credit counseling service
H	001	Information
H	002	Referral
H	003	Client Advocacy
H	004	Follow Up
H	011	Relocation assistance
H	014	Mediation
H	016	Financial Literacy classes
H	145	Housing, Temporary / Emergency shelter
H	147	Tenant classes
H	148	Homebuyer education
H	151	Mortgage, assistance obtaining
H	152	Foreclosure and eviction prevention assistance
H	153	Tenant / landlord issues, legal assistance with
H	154	Housing grant
H	155	Housing loan
H	157	Housing rehabilitation
H	158	Weatherization assistance
I	001	Information
I	002	Referral
I	003	Client Advocacy
I	004	Follow Up
I	005	Mentoring
I	010	Budgeting
I	014	Mediation
I	015	Applying for public subsidy program, assistance with
I	016	Financial Literacy classes
I	146	Rental Assistance
I	148	Homebuyer education
I	149	Down payment / security deposit assistance
I	150	Closing cost assistance
I	154	Housing grant

Domain	Codes	Description
I	155	Housing loan
I	158	Weatherization assistance
I	159	Utility vendor-funded services, obtaining
I	160	Utilities, paying for
I	161	Furniture or appliances, obtaining
J	001	Information
J	002	Referral
J	003	Client Advocacy
J	004	Follow Up
J	010	Budgeting
J	015	Applying for public subsidy program, assistance with
J	162	Insurance applications, completing
J	163	Insurance, provision of items currently not covered
J	164	Health insurance counseling and assistance
K	001	Information
K	002	Referral
K	003	Client Advocacy
K	004	Follow Up
K	015	Applying for public subsidy program, assistance with
K	165	Child care, assessing quality of
K	166	Child care, searching for a provider
K	167	Child care, selecting a provider
K	168	Child care in center
K	169	Child care by relative (licensed)
K	170	Child care by relative (non-licensed)
K	171	Child care by non-relative (licensed)
K	172	Child care by non-relative (non-licensed)
K	173	Child care, drop-in care
K	174	Child care, assistance finding off-hours, infant, etc.
K	175	Child care, temporary or respite
K	176	Child care, transportation to/from
K	177	Child care subsidy
K	178	Child care provider training
K	179	Child care, Head Start wraparound
L	001	Information
L	002	Referral
L	003	Client Advocacy
L	004	Follow Up
L	005	Mentoring
L	007	ESL / English proficiency training
L	180	Translation services
L	182	Job training program
M	001	Information
M	002	Referral

Domain	Codes	Description
M	003	Client Advocacy
M	004	Follow Up
M	005	Mentoring
M	006	GED training
M	013	Remedial education / Adult Basic Education classes
M	015	Applying for public subsidy program, assistance with
M	181	Education / participant support services
M	183	Education / career counseling
M	184	Education / scholarship, financial assistance with
N	001	Information
N	002	Referral
N	003	Client Advocacy
N	004	Follow Up
N	015	Applying for public subsidy program, assistance with
N	185	Transportation, arranging reliable
N	186	Public transportation subsidy
N	187	Ride sharing, arranging for
N	188	Driver's education
N	189	Driver's license, assistance obtaining
N	191	Auto purchase loan
N	192	Auto purchase grant
N	193	Auto repair loan
N	194	Auto repair grant
N	195	Car insurance loan or grant
N	207	Gas voucher
O	001	Information
O	002	Referral
O	003	Client Advocacy
O	004	Follow Up
O	005	Mentoring
O	196	Support, identifying
O	197	Other Support group, participation in
O	198	Personal development
O	199	Building friendships
O	200	Well-being, developing personal routines for
O	203	Counseling
O	204	Head Start Parent group, participation in
O	205	Head Start Policy Council, participation in
O	206	Peer support group, participation in

Attachment E:

SRAS Instructions Overview

SELF-RELIANCE ACHIEVEMENT SCALE (SRAS)

INSTRUCTIONS OVERVIEW

1. When using the SRAS form with a new program participant, complete Central Intake, Consent Form, SRAS Program Entry Page, and the SRAS observations.
2. Retain the consent form in your records.
3. SRAS Observation forms can be completed for all participants who will receive at least 2 contacts from your agency, which are at least 30 days apart. Refer to SRAS Status Codes form and the SRAS Service Codes by Domain form to complete each new SRAS Observation for a participant.
4. **Remember:** “Number of adults in household” and “Number of children in household” are recorded in the SRAS Program Entry page only. If household size changes, you will need to go to the program entry page to change it.