
Chapter 5

OCCUPANCY GUIDELINES

INTRODUCTION

The Occupancy Guidelines are established by IHA to ensure that units are occupied by families of the appropriate size. This policy maintains the maximum usefulness of the units, while preserving them from excessive wear and tear or underutilization. This Chapter explains the Occupancy Guidelines used to determine minimum and maximum unit sizes for various sized families when they are selected from the waiting list, or when a family's size changes, or when a family requests an exception to the occupancy guidelines.

A. DETERMINING UNIT SIZE

IHA does not determine who shares a bedroom/sleeping room, but there must be at least two persons or "two heartbeats" per bedroom. IHA's Occupancy Guideline standards for determining unit size shall be applied in a manner consistent with Fair Housing guidelines.

For occupancy standards, an adult is a person 18 years or older, or an emancipated minor.

All guidelines in this section relate to the number of bedrooms in the unit. Dwelling units will be assigned using the following guidelines:

One bedroom will generally be assigned for every two family members. Consideration will also be given for medical reasons and the presence of a live-in aide.

Live-in attendants will generally be provided a separate bedroom. No additional bedrooms are provided for the attendant's family.

Space will not be provided for a family member who will be absent most of the time, such as a member who is away in the military/school.

The living room will not be used as a bedroom.

IHA Policy

The IHA will assign one bedroom for each two persons within the household, known as "Two Heartbeats per Room".

GUIDELINES FOR DETERMINING BEDROOM SIZE

Bedroom Size	Persons in Household: (Minimum #)	Persons in Household: (Maximum #)
0 Bedroom	1	2
1 Bedroom	1	2
2 Bedrooms	2	4
3 Bedrooms	3	6
4 Bedrooms	4	8
5 Bedrooms	5	10

B. EXCEPTIONS TO “TWO HEARTBEATS PER ROOM” OCCUPANCY STANDARDS

IHA will grant exceptions from the guidelines in cases where it is the family’s request or the IHA determines the exceptions are justified by the relationship, age, sex, health or disability of family members, or other individual circumstances, and there is a vacant unit available. If an applicant requests to be listed on a smaller or larger bedroom size waiting list, the following guidelines will apply:

In all cases, where the family requests an exception to the general occupancy standards, IHA will evaluate the relationship and ages of all family members and the overall size of the unit. If a family request a larger unit because of the children’s sex below the age of 5, the IHA would consider it, if there were no eligible families on the waiting list or residing in the complex needing that size unit.

The family may request to be placed on a larger bedroom size waiting list than indicated by the IHA’s occupancy guidelines. The request must explain the need or justification for a larger bedroom size, and must be verified by IHA before the family is placed on the larger bedroom size list. IHA will consider these requests:

Person with Disability

IHA will grant an exception upon request as a reasonable accommodation for persons with disabilities if the need is appropriately verified.

Other Circumstances

Circumstances may dictate a larger size than the occupancy standards permit when:

Persons cannot share a bedroom because of a need for medical equipment due to its size and/or function. Requests for a larger bedroom due to medical equipment must be verified by a medical professional and will be processed similar to a reasonable accommodation.

Requests based on health-related reasons must be verified by a doctor, medical professional, or qualified professional.

IHA may house families in larger size units if there is not a need for the larger unit required by families currently in occupancy or from the waiting list. The smaller family is then required and agrees that they will move to another available unit after a 30-day notice has been given, should a family then qualify for the appropriately sized unit.

Larger units than required may be offered in order to improve the marketing of a development suffering a high vacancy or criminal activity rate.

All members of the family residing in the unit must be approved by IHA. The family must obtain approval of any additional family member before the person occupies the unit except for additions by birth, adoption, or court-awarded custody, in which case the family must inform IHA within ten (10) business days.

Live-in Aides

One reason IHA allows an additional bedroom is related to live-in aides. Although a health care provider must document the need for a live-in aide (which would result in the issuance of an additional bedroom size, the live-in aide must be identified by the family and approved by the IHA first. No additional bedroom will be allocated for the live-in aide's family.

The definition of a live-in aide is recorded in HUD policy which states that a live-in aide is a person who resides with one or more elderly persons, near-elderly persons or persons with disabilities and who is: (1) determined to be essential to the care and well-being of the persons; (2) is not obligated for the support of the persons; and (3) would not be living in the unit except to provide the necessary supportive services. It should be noted that the definition applies to a specific person. In accordance with this definition, a live-in aide is not a member of the assisted family and is not entitled to the unit as the remaining member of the tenant family.

The IHA must approve the person identified as the live-in aide. The IHA will disapprove such a person if s/he has: (1) committed fraud, bribery or any other corrupt or criminal act in connection with any federal housing program; (2) committed drug-related criminal activity or violent criminal activity; or (3) currently owes rent or other amounts to the IHA or to another PHA in connection with Section 8 or public housing assistance under the 1937 Act, or (4) been terminated by any PHA or on the banned list. Additionally, the IHA must establish standards to determine the number of bedrooms needed for families of different sizes and compositions. Consequently, IHA may not approve an unidentified live-in aide, nor a larger unit than the family qualifies for under the IHA's standards for an unidentified live-in aide.

Occasional, intermittent, multiple or rotating care givers typically do not reside in the unit and would not qualify as live-in aides. Therefore, an additional bedroom should not be approved for a live-in aide under these circumstances.

Other Reasonable Accommodation Issues. A family may always request a reasonable accommodation to permit program participation by individuals with disabilities. A family's composition or circumstances may warrant the provision of an additional bedroom to permit disability-related overnight care and allow the family equal use and enjoyment of the unit. The IHA must consider requests for an exception to the established subsidy standards on a case-by-case basis and provide an exception, where necessary, as a reasonable accommodation. The IHA shall document the justification for all granted exceptions.

Medical Equipment. Although IHA may approve an additional bedroom for medical equipment if the need is documented by a health care provider, the actual equipment in the extra bedroom should be verified by the IHA during the annual inspection of the unit. If the extra bedroom is not being used for the intended purpose, the IHA must reduce the bedroom standard. However, the IHA may take further action, if it believes any lease or family obligations were violated.

C. ACCESSIBLE UNITS

IHA has a limited number of units designated for persons with mobility impairments. These units meet the needs of persons requiring the use of wheelchairs and persons requiring other modifications. (504 accessible or visual/hearing impaired)

Preference for occupancy of these units will be given to families with disabled family members who require the modifications or facilities provided in the units.

No non-mobility-impaired families will be offered these units until all eligible mobility-impaired tenants and then applicants have been considered.

Accessible units will be offered and accepted by non-mobility impaired applicants only with the understanding that such applicants/tenants must accept a transfer to a non-accessible unit at a later date if a person with a mobility impairment requiring the unit applies for the accessible unit

and is determined eligible.

D. FAMILY MOVES

When a change in the circumstances of a tenant family requires another unit size, the family's move depends upon the availability of a suitable size and type of unit. If the unit is not available at the time it is requested, the family will be placed on the Transfer List.

The unit considerations in this section should be used as a guide to determine whether and when the bedroom size should be changed. If an unusual situation occurs, which is not currently covered in this policy, the case should be reviewed by the supervisor who will make determination after review of the situation, the individual circumstances, and the verification provided.

Transfers will be considered first, before referral of applicants from the Waiting List. However, due consideration shall be given to the number of vacant units prior to any transfer. If for any reason, the number of vacancies is significant to the extent that transfers would place IHA in a position of operational instability, restrictions such as a three to one (3:1) ratio of new move-ins from the Wait List to the number of transfers from within will be imposed in order to maintain the financial stability of the program and operations. The 3:1 ratio shall be maintained at either a site level or at a programmatic level, depending on the distribution of the vacancies and whether such vacancies are confined to a greater degree programmatically or within a specific site. The nature of transfers will also be considered even under these restrictions, as it is recognized that certain life-endangering conditions as may be cause for transfer cannot be restricted by operational objectives.

If it is found that the unit size is no longer appropriate to the family's needs, the IHA shall send the family written notice to transfer to the correct size unit in accordance with the Subsidy Standards. In the case of an involuntary transfer, the resident shall be given 3 days in which to move upon receipt of the transfer notice. If the tenant refuses to transfer the IHA may choose to terminate the lease.

If a resident makes a written request for special unit features because of a documented disability or handicap, the IHA will either modify the resident's unit, if financially feasible, or transfers the resident to another unit with the requested features.

Before a family can transfer a pre-move out inspection will be conducted on the current unit. If the inspection reveals excessive damage to the unit, beyond normal wear and tear or a housekeeping problem is present, the resident will be denied the transfer.

See chapters on Reexaminations and Transfers for changes in unit size for existing residents.