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|  | 560 West Main Street, Rochester, New York 14608Phone: (585)391-5091, Fax: (585)319-5488 | |
| Review Information | |

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| **Agency Name:** |  |
| **Program Name:** |  |
| **Grant Identification #** | NY |
| **Operating Year:** | 2018 **(APR ending in 2018)** |
| **Number of HUD Slots:** |  |
| **Number of Slots used:** |  |
| **Percentage of Slots used:** |  |
| **Number of New Client’s housed over the Year** |  |
| **Average participant VI-SDPAT score housed** |  |
| **Number of Clients Served**  **(this program year)** |  |
| **Program Type:** | Transitional Housing/ Rapid Re-Housing  Rapid Re-Housing  Permanent Supportive Housing  Permanent Supportive Housing (CH)  Transitional Housing |
| **Grant Amount**  **(Please include any amendments from HUD)** | Acquisition/Rehab/Construction\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Rental Assistance \_\_\_\_\_\_\_\_\_\_\_\_\_\_  Leasing \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Support Services \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  HMIS \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Administration \_\_\_\_\_ Operations\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Total \_\_\_\_\_\_\_ |
| **Agency Representative(s) at review** |  |
| **Review Date:** |  |
| **Monitoring team at review:** |  |

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| Assessment Y N N/A Action Needed |
| |  |  |  |  |  | | --- | --- | --- | --- | --- | | **HMIS Privacy/Security:** Notes | | | | | | 1. HMIS Participation Consumer Notice is posted in a conspicuous location.   ( -1 Point) |  |  |  |  | | 1. Has the Program had a new or refresher HMIS training in the past year?   (2 points) |  |  |  | | 1. Agency must have a client policy   (-1 Point) |  |  |  | | 1. If Yes, are all employees trained to follow policy? (-1 Point) |  |  |  | | 1. Agency must have policies/procedures that address: |  |  |  | | 1. Use of client data generated from HMIS (-1 Point) |  |  |  | | 1. Client information storage and disposal. (-1 Point) |  |  |  | | 1. Hard Copy Data Security, Spot Check Demonstrates: |  |  |  | | 1. Client files are locked in a drawer or file cabinet.   (-1 Point) |  |  |  | | 1. Offices are locked when not occupied. (-1 Point) |  |  |  | | 1. Client files are not visible on desks, counters, etc. (-1 Point) |  |  |  | | 1. Client Consent and Release of Information (ROI) |  |  |  | | 1. The Client Consent and Release of Information correctly addresses the agency’s level of sharing. (-1 Point) |  |  |  | | 1. Agency collects Client Consent and Release of Information for all program participants (-1 Point) |  |  |  | | 1. Client Consent and Release of Information conforms with the sample HMIS form. (-1 Point) |  |  |  | | 1. If data sharing takes place: client consent for the sharing of confidential information is collected from applicable clients. (-1 Point) |  |  |  | | 1. From a random sample of ROI’s: paper releases are consistent with the electronic releases in HMIS. 2. (-1 Point) |  |  |  | | 1. Agency has a procedure/policy to assist clients who are hearing impaired or do not speak English as a primary language. (-1 Point) |  |  |  | |

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| Assessment Y N N/A Action Needed |
| |  |  |  |  |  | | --- | --- | --- | --- | --- | | **HMIS Data Intake and Exit** | | | | | | 1. If using paper: the intake data collection forms correctly align with the newest intake form. (-1 Point) |  |  |  |  | | 1. Agency is actively monitoring program participation entries and exits of clients. 80% entries and exits are completed in HMIS within 72 hours. (-5 Points) |  |  |  | | 1. Has the project signed the open data sharing agreement with HMIS? (-1 Point) |  |  |  | | 1. Agency has a process to ensure first and last names are spelled properly, and the DOB is accurate. Describe process: (is it documented and are all staff informed?) (-1 Point) |  |  |  | | 1. There is congruity between the case record responses, based on the applicable homeless definition. (Is client homeless? Has housing status and prior living situation been properly completed?) (-1 Point) |  |  |  | | 1. Disability, income and non-cash benefits are updated at least annually and at exit. (6 Points) |  |  |  | | 1. Agency has an organized exit process that includes: | |  |  |  | | --- | --- | --- | |  |  |  | | |  |  |  | | --- | --- | --- | |  |  |  | | |  |  |  | | --- | --- | --- | |  |  |  | | | 1. Proper procedure to communicate discharge destination in file.   (1 point) |  |  |  | | 1. Evidence exists that discharge destination data is properly being entered into HMIS on exit screen note section. (1 point) |  |  |  | | 1. HMIS active client list matches the project’s active client list 100% (within 72 hours before the site visit) (3points) |  |  |  |  | |

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| Assessment Y N N/A Action Needed |

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| **Information / Documentation** | | | | |
| 1. 92-95% utilization rate of in project? (5 points) |  |  |  |  |
| 1. Under 25% of returns to homeless in 2 years? (5 points) |  |  |  |
| 1. Making a visual inspection of 3 selected housing are the habitability standards being met? (3 points) |  |  |  |
| 1. APR submitted in SAGE within 90 days of project ending? (5 points) |  |  |  |
| 1. APR is accepted by HUD with first submission? (5 points) |  |  |  |
| 1. Since 12/8/2017 100% of clients have been enter into the program via the prioritization list? (3 points) |  |  |  |
| 1. 60% of clients referred from prioritization list to project have entry dates? (3 points) |  |  |  |
| 1. 65% of clients are housed after entering the project?   A.PSH within 45 days  B. RRH within 30 days  After entry into the project (3 points) |  |  |  |
| 1. Projects working with families is there a lead-based paint certificate on file? (-1 point) |  |  |  |
| 1. Policy in place for Housing First? Zero Barriers to entry beyond federal mandatory safety regulations.   (3 points) (of the projects who are eligible for Housing First) |  |  |  |
| 1. There is a written process that is followed for all clients to confirm homelessness? (-3 points) |  |  |  |  |
| 1. There is a written process that is followed for all clients to confirm disability? (- 3 points) |  |  |  |  |
| 1. Less than 10% of clients referred from prioritization list to project have rejected this project? (4 points) |  |  |  |  |
| 1. Less than 10% of this project’s referrals from prioritization list have rejected the client? (4 points) |  |  |  |  |

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| Project Outcomes | | | | |
| Permanent Supportive Housing/ Support Services Only ProgramY N N/A Action Needed | | | | |
| 1. 92% or more of participants exit to or remains in permanent housing?   (3 points) |  |  |  |  |
| 1. 20% or more participants increase cash income? (3 points) |  |  |  |
| 1. Less than 20% exit with no income?   (3 points) |  |  |  |
| 1. 54% or more participants have cash income? (3 points) |  |  |  |
| 1. 20% or more participants have employment income in program year?   (3 points) |  |  |  |
| 1. 64% or more participants have obtained non-cash benefits? (3 points) |  |  |  |
| 1. Few than 20% of exits (clients) from program occur within 365 day of program entry? (3 points) |  |  |  |
| Rapid Re-Houisng | | | | | |
| 1. 92% or more of participants exit to or remains in permanent housing?   (3 points) |  |  |  |  |
| 1. 20% or more participants increase cash income? (3 points) |  |  |  |
| 1. Less than 20% exit with no income?   (3 points) |  |  |  |
| 1. 54% or more participants have cash income? (3 points) |  |  |  |
| 1. 20% or more participants have employment income in program year?   (3 points) |  |  |  |
| 1. 64% or more participants have obtained non-cash benefits? (3 points) |  |  |  |
| 1. Is the total program average length of stay in RRH housing less than 180 days? (3 points) |  |  |  |
| Transitional Housing/ Rapid Re-Houisng | | | | | |
| 1. 92% or more of participants exit to or remains in permanent housing?   (3 points) |  |  |  |  |
| 1. 20% or more participants increase cash income? (3 points) |  |  |  |
| 1. Less than 20% exit with no income?   (3 points) |  |  |  |
| 1. 54% or more participants have cash income? (3 points) |  |  |  |
| 1. 20% or more participants have employment income in program year?   (3 points) |  |  |  |
| 1. 64% or more participants have obtained non-cash benefits? (3 points) |  |  |  |
| 1. Is the total program average length of stay in TH/RRH housing less than 180 days? (3 points) |  |  |  |
| Transitional Housing | | | | | |
| 1. 92% or more of participants exit to or remains in permanent housing?   (3 points) |  |  |  |  |
| 1. 20% or more participants increase cash income? (3 points) |  |  |  |
| 1. Less than 20% exit with no income?   (3 points) |  |  |  |
| 1. 54% or more participants have cash income? (3 points) |  |  |  |
| 1. 20% or more participants have employment income in program year?   (3 points) |  |  |  |
| 1. 64% or more participants have obtained non-cash benefits? (3 points) |  |  |  |
| 1. Is the total program average length of stay in TH housing less than 180 days?   (3 points) |  |  |  |

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| **File Review section**  **(total of 10 points)** | |
| **Issues within HMIS Client HMIS Number (if checked not in HMIS)** | | **Entry date** | | **Housed date** | | **Annual Assessment** | | | **Income** | **Disability Documentation (PSH only)** | | **Non-Cash Benefits** | | **Exit Date** | | **Health Insurance** | |
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| Notes: | | | | | | | | | | | | | | | | | |
| **File Review section continued (total of 10 points)** | | | | | | | | | | | | | | | | | | |
| **Client folder Check 10% of case load HMIS Number** | **Homelessness Documentation** | | **Disability Documentation (PSH only)** | | | | **Client’s Name matches lease** | **Household composition** | | **Annual Assessment** | **Tenant Rent Calculation** | | **Lease and Inspection** | | **Goals/ Service plan** | | **Case notes** | |
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| Notes about files: | | | | | | | | | | | | | | | | | | |

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| **Other Requirements** | | | | |
| 1. Homeless/formerly homeless person on Board of Directors or involved in other policy making group. (-1 Point) |  |  |  |  |
| 1. Program has a formal procedure in place for terminating assistance to participants. (-1 Point) |  |  |  |
| 1. If clients have been terminated, does a review of these client files show that minimum due process requirements were followed for termination? (-1 Point) |  |  |  |
| 1. Participants are not required to participate in inherently religious activities? (-1 Point) |  |  |  |
| 1. Participants cannot be denied benefits/services based on their religion? (-1 Point) |  |  |  |
| 1. A staff person is designated as educational liaison to will ensure that children are enrolled in school, connected to Head Start, Part C of the Disabilities Act (-1 Point) |  |  |  |  |
| 1. The age and gender of a child under age 18 is not used as a basis to for denying any family’s admission to the program (-1 Point) |  |  |  |  |
| 1. Sufficient outreach procedures in place to ensure that information about the program is able to reach persons of any race, color, religion, sex, age, national origin, familial status or handicap who may qualify for admission to the program?   (-1 Point) |  |  |  |  |
| 1. Evidence supports the recipient’s adoption and implementation of procedures to make available information on the existence and locations of facilities and services that are accessible to persons with a handicap? (-1 Point) |  |  |  |  |
| 1. The recipient has written policies to comply with non-discrimination, Equal Opportunity & Fair Housing regulations in the provision of services? (-1 Point) |  |  |  |  |

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| **Financial Documentation** | | | | |
| 1. Grantee has written procedures covering the recording of transactions, an accounting manual and a chart of accounts?   (if yes, attach a copy to this Exhibit, if feasible.) (-1 Point) |  |  |  |  |
| 1. If the grantee has written policy Manual: does it provide guidelines for controlling expenditures, such as purchasing requirements and travel authorizations? (-1 Point)   [24 CFR 576.57 (b); 24 CFR 85.20] |  |  |  |
| 1. Grantee has written procedures regarding the maintenance of accounting records for the required number of years? (-1 Point)   [24 CFR 576.57(b); 24 CFR 85.20] |  |  |  |
| 1. Grantee’s fiscal records and valuables are secured in a limited-access area?   (-1 Point)  [24 CFR 576.57(b); 24 CFR 85.20] |  |  |  |
| 1. Evidence that staff duties are separated so no one individual has complete authority over an entire financial transaction? (-1 Point)   [24 CFR 576.57(b); 24 CFR 85.20] |  |  |  |
| 1. Grantee has written policies for procurement. (If the Agency has written policies, obtain copy for the files; otherwise, describe the Agency’s policy (-1 Point ). |  |  |  |
| 1. Has the grantee developed standards for avoiding conflict of interest in carrying out activities funded by federal grants dollars? (-1 Point) |  |  |  |
| 1. Employees are required to sign a statement indicating that they have read the policy and will comply? (If yes, obtain copy for the files, otherwise, describe the Agency’s policy.) (-1 Point) |  |  |  |
| 1. A copy of most recent audited financial statement has been reviewed.   (-1 Point) |  |  |  |  |

**Did the program attend the training? Yes 0 Points\_\_\_\_\_ No -3 points \_\_\_\_\_**

**Was the Project prepared for site visit? Yes 3 - Points\_\_\_\_\_ No 0- points \_\_\_\_\_**

**-----------------------------------------------------------------------------------------------------------------Notes/Comments:**

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**Points for program\_\_\_\_ (100 available program points)**

\*When calculating the percentage of slots uses, we divide the number of households served by the total number of HUD slots. This provides a measure of the total number of households served by a program across the program year. When calculating the Utilization rate, we first calculate the mean of the four PIT household numbers in the APR. We then divide this number by the total HUD slots to get a percentage. This provides a measure of how many HUD slots are being utilized on the average night for that program. These numbers may appear significantly different for some programs, particularly if they have higher rates of turnover. Programs with high turnover would have a high percentage of slots used but may have low utilization rates if they are not at capacity on the dates the PIT measures.

\*\* Files will be pulled for either 3 clients or 10% of a program’s clients, whichever number is greater. These files will be randomly selected prior to the monitoring visit. Programs will be informed of which files to have prepared 24 hours prior to the visit. Where applicable, files will be compared to HMIS data. If files and HMIS data do not match, programs will not receive points for that item. Points will be awarded such that the percent of items which match HMIS or pass inspection is the percentage of the ten points the program receives.

Eric’s Check  Anne’s Check  Charles’s Check