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

|  |  |
| --- | --- |
| **Agency Name:** |  |
| **Program Name:** |  |
| **Grant Identification #** |  |
| **Operating Year:** |  |
| **A number of HUD Slots:** |  |
| **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:** |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 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 been to a new or refresher HMIS training in the past year?   (2 points) |  |  |  | | | | | |
| **CoC Policy Binder** Notes | | | | |
| Agency policy for client privacy in HMIS  (-1 Point) |  |  |  |  |
| Agency has a procedure/policy to assist clients who are hearing impaired or do not speak English as a primary language. (-1 Point) |  |  |  |
| Agency procedure with an organized exit process includes proper communication of the discharge destination in the file.  (-1 point) |  |  |  |
| The agency has a process to ensure that first and last names are correctly spelled and that the DOB is accurate. Describe the process: (is it documented, and are all Staff informed?) (-1 Point) |  |  |  |
| If Yes, are all employees trained to follow policy? (-1 point) |  |  |  |
| Policies/procedures Use of client data generated from HMIS (-1 Point) |  |  |  |
| Policies/procedures Client information storage and disposal. (-1 Point) |  |  |  |
| Client Consent and Release of Information (ROI) |  |  |  |
| Is the agency using the current (6/17/2021) HMIS ROI? (-1 point) |  |  |  |
| Is the agency using the current (6/17/2021) HMIS ROI addendum? (- 1 point) |  |  |  |
| Policy in place for Housing First? Zero Barriers to entry beyond federal mandatory safety regulations.  (-3 points) (of the projects which are eligible for Housing First) |  |  |  |
| A written process is followed for all clients to confirm homelessness. (-3 points) |  |  |  |
| A written process is followed for all clients to confirm disability. (- 3 points) |  |  |  |
| A policy states: Homeless/formerly homeless person on the Board of Directors or involved in other policy-making groups. (-1 Point |  |  |  |
| The program has a formal procedure in place for terminating assistance to participants. (-1 Point) |  |  |  |
| Policy: Participants are not required to participate in inherently religious activities. (-1 Point) |  |  |  |
| The policy states: Participants cannot be denied benefits/services based on their religion. (-1 Point) |  |  |  |
| Policy/Procedure that identifies a staff person is designated as an educational liaison will ensure that children are enrolled in school, connected to Head Start, Part C of the Disabilities Act (-1 Point) |  |  |  |
| A policy that states the age and gender of a child under age 18 is not used as a basis for denying any family’s admission to the program (-1 Point) |  |  |  |
| Sufficient outreach procedures ensure that information about the program can 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) |  |  |  |
| Does evidence support the recipient’s adoption and implementation of procedures to make available information on the existence and locations of facilities and services accessible to persons with a handicap? (-1 Point) |  |  |  |
| Does the recipient have written policies to comply with non-discrimination, Equal Opportunity & Fair Housing regulations in providing services? (-1 Point) |  |  |  |
| The procedure of file review, action plan, and the timeline for correcting file deficiencies (-1 point). |  |  |  |
| **Possible points (+2 -29) Section Point totals\_\_\_\_\_\_\_** | | | |

|  |
| --- |
| Assessment Y N N/A Action Needed |
| |  |  |  |  |  | | --- | --- | --- | --- | --- | | **HMIS Data Intake and Exit** | | | | | | 1. Using the paper HMIS intake data collection forms correctly aligns with the newest intake form. (-1 Point) |  |  |  |  | | 1. Agency is actively monitoring program participation entries of clients. 80% of entries are completed in HMIS within 72 hours. (-5 Points) |  |  |  | | 1. There is congruity between the case record responses based on the applicable homeless definition. (Is the client homeless? Has housing status and prior living situation appropriately been completed?) (-1 Point) |  |  |  | | 1. Income, non-cash benefits, and insurance are updated at least annually and at the exit. (-3 Points) |  |  |  | | 1. 90% of discharge destination data is appropriately being entered into HMIS on the exit screen note section. (2 points) |  |  |  | | 1. HMIS active client list matches the project’s active client list 100% (within 72 hours before the site visit) (2 points) |  |  |  |  | | APR 6a to 6d (1 pt for each 0%) 20b & 21 (1 pt for each if the client doesn’t know & data not collected = 0)  6a DQ Personally Identifiable Information  (6 pts) |  |  |  | |  |  |  | | 1. Name |  |  |  | | 1. Social Security Number |  |  |  | | 1. Date of Birth |  |  |  | | 1. Race |  |  |  | | 1. Ethnicity |  |  |  | | 1. Gender |  |  |  | | 6b DQ Universal Data Elements (5 pts) |  |  |  | | 1. Veteran Status |  |  |  | | 1. Project Start Date |  |  |  | | 1. Relationship to Head of Household |  |  |  | | 1. Client Location |  |  |  | | 1. Disabling Condition |  |  |  | | 6c DQ Income & Housing Data Quality (4 pts) |  |  |  | | 1. Destination |  |  |  | | 1. Income & Sources at the Start |  |  |  | | 1. Income & Sources at Annual Assessment |  |  |  | | 1. Income & Sources at Exit |  |  |  | | 1. 6d DQ Chronic Homelessness (2 points) |  |  |  | | 20b & 21 non-cash income & health insurance (4 pts) |  |  |  | | 1. Non-Cash client doesn’t know = 0 |  |  |  | | 1. Non-Cash data not collected = 0 |  |  |  | | 1. Insurance client doesn’t know = 0 |  |  |  | | 1. Insurance data not collected = 0 |  |  |  | | **Possible points (+25 -10) Section Points totals\_\_\_\_\_\_\_** | | | | |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| |  | | --- | | Assessment Y N N/A Action Needed | |  | | | | | | | | | | | | |
| **Information / Documentation** | | | | | | | | | | | |
| 1. 95% or more utilization rate of in project? (2 points) | | |  | |  |  | | | | |  |
| 1. APR submitted in SAGE within 90 days of the project’s end. (1 point) | | |  | |  |  | | | | |
| 1. Did HUD accept the prior year/ Current year APR with the first submission? (1 point) | | |  | |  |  | | | | |
| 1. 100% of clients have been entered into the program via the prioritization list? (FY21) (1 point) | | |  | |  |  | | | | |
| 1. Do 70% of clients referred from the prioritization list to the project have entry da.es? (1 point) | | |  | |  |  | | | | |
| 1. The average number of days to program entry to housed date (70% of clients are housed)   A.PSH within 45 days  B. RRH within 30 days (2 points) | | |  | |  |  | | | | |
| 1. Is a lead-based paint certificate on file for projects working with families file? (-1 point) | | |  | |  |  | | | | |
| 1. Less than 10% of clients referred from the prioritization list to the project have rejected this project. (1 point) | | |  | |  |  | | | | |
| 1. Less than 10% of this project’s referrals from the prioritization list have rejected the client. (1 point) | | |  | |  |  | | | | |
| 1. **Percentage of housing assessment completed during project year (the number of completed assessments divided by the number of clients equals 95%) (**3 points) | | |  | |  |  | | | | |
| 1. **Percentage of Acuity Index completed during project year (the number of completed Acuity index divided by the number of clients equals 95%) (**3 points) | | |  | |  |  | | | | |
| **Possible points (+16 -1) Section Point totals\_\_\_\_\_\_\_** | | | | | | | | | | |
| Project Outcomes | | | | | | | | | | | |
| Permanent Supportive Housing/ Support Services Only ProgramGoal Project % All CoC % All PSH % TotalPoints | | | | | | | | | | | |
| 1. Participants exit to or remain in permanent Housing (2 points for each % reached or at or above) | 92% |  | |  | | |  | | |  | |
| 1. Participants increase cash income (2 points for each % reached or at or above) | 20% |  | |  | | |  | | |  | |
| 1. Participants increase employment income (2 points for each % reached or at or above) | 20% |  | |  | | |  | | |  | |
| 1. Participants with no income (2 points for each % reached or at or below) | <15% |  | |  | | |  | | |  | |
| 1. Participants have cash income (2 points for each % reached or at or above) | 85% |  | |  | | |  | | |  | |
| 1. Participants have employment income in the program year (2 points for each % reached or at or above) | 20% |  | |  | | |  | | |  | |
| 1. Participants have obtained non-cash benefits (2 points for each % reached or at or above) | 85% |  | |  | | |  | | |  | |
| 1. Participants have health insurance (2 points for each % reached or at or above) | 90% |  | |  | | |  | | |  | |
| Rapid Re-Housing and TH- RRHGoal Project % All CoC % All RRH % TotalPoints | | | | | | | | | | |
| 1. Participants exit to or remain in permanent Housing (2 points for each % reached or at or above) | 92% | |  |  | |  | | |  | |
| 1. Participants increase cash income (2 points for each % reached or at or above) | 20% | |  |  | |  | | |  | |
| 1. Participants increase employment income (2 points for each % reached or at or above) | 20% | |  |  | |  | | |  | |
| 1. Participants with no income (2 points for each % reached or at or below) | <15% | |  |  | |  | | |  | |
| 1. Participants have cash income (2 points for each % reached or at or above) | 85% | |  |  | |  | | |  | |
| 1. Participants have employment income in the program year (2 points for each % reached or at or above) | 20% | |  |  | |  | | |  | |
| 1. Participants have obtained non-cash benefits (2 points for each % reached or at or above) | 85% | |  |  | |  | | |  | |
| 1. Participants have health insurance (2 points for each % reached or at or above) | 90% | |  |  | |  | | |  | |
| Transitional HousingGoal Project % All CoC% All TH % TotalPoints | | | | | | | | | | |
| 1. Participants exit to or remain in permanent Housing (2 points for each % reached or at or above) | 92% | |  |  | |  | | |  | |
| 1. Participants increase cash income (2 points for each % reached or at or above) | 20% | |  |  | |  | | |  | |
| 1. Participants increase employment income (2 points for each % reached or at or above) | 20% | |  |  | |  | | |  | |
| 1. Participants with no income (2 points for each % reached or at or below) | <15% | |  |  | |  | | |  | |
| 1. Participants have cash income (2 points for each % reached or at or above) | 85% | |  |  | |  | | |  | |
| 1. Participants have employment income in the program year (2 points for each % reached or at or above) | 20% | |  |  | |  | | |  | |
| 1. Participants have obtained non-cash benefits (2 points for each % reached or at or above) | 85% | |  |  | |  | | |  | |
| 1. Participants have health insurance (2 points for each % reached or at or above) | 90% | |  |  | |  | | |  | |
| **Possible points +48 Section** | | | | | | | | | **Point totals** | | | | |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **The File Review section continued (total of 10 points)** | | | | | | | | | | | | | | | | |
| **Client folder Check 10% of caseload HMIS Number** | Homeless Doc | Disability Doc (PSH only) | The client’s Name matches the lease | | Household composition | | Annual Assessment Income Certification | | Tenant Rent Calculation | | | | Annual Lease and Inspection | Supportive Housing Assessment | | Acuity index |
|  |  |  |  | |  | |  | |  | | | |  |  | |  |
|  |  |  |  | |  | |  | |  | | | |  |  | |  |
|  |  |  |  | |  | |  | |  | | | |  |  | |  |
|  |  |  |  | |  | |  | |  | | | |  |  | |  |
|  |  |  |  | |  | |  | |  | | | |  |  | |  |
|  |  |  |  | |  | |  | |  | | | |  |  | |  |
|  |  |  |  | |  | |  | |  | | | |  |  | |  |
|  |  |  |  | |  | |  | |  | | | |  |  | |  |
|  |  |  |  | |  | |  | |  | | | |  |  | |  |
|  |  |  |  | |  | |  | |  | | | |  |  | |  |
| Notes about files: | | | | | | | | | | | | | | | | |
| 100% of clients who have been terminated, do a review of these client files show that minimum due process requirements were followed for termination? (-1 Point) | | | | | | Y | | | | N | | | | | N/A | |
|  | | | |  | | | | |  | |
| Possible points (+10 -1) Section Point totals\_\_\_10\_\_\_\_ | | | | | | | | | | | | | | | | |  |  |
|  |  |
| |  | | --- | | Unscored Questions Y N N/A Action Needed | | | | | | | | | | | | | | | | | |
| **Service Plan Questions (Mock Questions for 2023 Monitoring report)** | | | | | | | | | | | | | | | | |
| 1. ***Does the program participant have a Service Plan created or updated within the past 12 months?*** | | | |  | | |  |  | | |  | | | | | |
| 1. ***Does the program participant’s Service Plan contain specific Goals that will assist them with obtaining and maintaining Housing?*** | | | |  | | |  |  | | |
| 1. ***Is there evidence in the program participant’s previous 12 months of case/progress notes that program staff is providing services, making referrals, or having conversations about behaviors or actions that will assist the program participant with achieving their Goals?*** | | | |  | | |  |  | | |
| 1. ***Do the Goals in the program participant’s Service Plan correspond with the information contained in the program participant’s Supportive Housing Assessment?*** | | | |  | | |  |  | | |
| 1. ***Does the program participant’s most recent Acuity Index score correspond with the information in the program participant’s most recent case/progress notes?*** | | | |  | | |  |  | | |
| Possible points (0) Section Point totals\_\_\_\_\_\_\_ | | | | | | | | | | |
| |  | | --- | | Assessment Y N N/A Action Needed | | | | | | | | | | | | | | | | | |
| **Financial Documentation** | | | | | | | | | | | | | | | | |
| 1. The 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 a 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. Does the grantee have written procedures for the maintenance of accounting records for the required 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. The grantee has written policies for procurement. (If the Agency has written policies, obtain a copy for the files; otherwise, describe the agency’s policy (-1 Point ). | | | |  | | |  |  | | |
| 1. Has the grantee developed standards for avoiding conflict of interest in activities funded by federal grant dollars? (-1 Point) | | | |  | | |  |  | | |
| 1. Employees are required to sign a statement indicating that they have read the policy and will comply. (If yes, obtain a copy of the files, otherwise, describe the agency’s policy.) (-1 Point) | | | |  | | |  |  | | |
| A copy of the most recent audited financial statement has been reviewed.  (-1 Point) | | | |  | | |  |  | | |  | | | | | |
| **Possible points - 9** | | | | | | | | | | | | **Point totals 0** | | | | |

**Did the program attend the training? Yes 0 Points\_\_\_\_\_ No -1 points \_\_\_\_\_**

**Was the project prepared for the site visit? Yes 2 - Points\_\_\_\_\_ No 0- points \_\_\_\_\_**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Section Point totals** | | | | | |
| **Section** | Possible Positive Points | Possible Negative Points | Project Positive Points | Project Negative Points | Section Total |
| **HMIS Privacy/Security & CoC Policy Binder** | 2 | 29 | **0** | **0** | **0** |
| **HMIS Data Intake and Exit** | 25 | 10 | **0** | **0** | **0** |
| **Information/Documentation** | 16 | 1 | **0** | **0** | **0** |
| **Project Outcomes** | 48 | 0 | **0** | **0** | **0** |
| **File Review Section** | 10 | 1 | **0** | **0** | **0** |
| **Financial Documentation** | 0 | 9 | **0** | **0** | **0** |
| **Other Scores** | 2 | 1 | **0** | **0** | **0** |
| **Project Totals** | 103 | 51 | **0** | **0** | **0** |

**Notes/Comments:**

\*When calculating the percentage of slots used, we divide the number of households served by the total HUD slots. This measures the total number of households a program serves 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 measures how many HUD slots are utilized on an average night for that program. These numbers may appear significantly different for some programs, particularly if they have higher turnover rates. 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 PIT measures dates.

\*\* The file review section will be scored using a sliding scale rubric.  Points will be awarded according to the overall percentage of required documents that were present in the audited files:

100% of documents present- 10 points

90-99% of documents present – 9 points

80-89% of documents present- 8 Points

70-79% of documents present-7 Points

60-69% of documents present- 6 Points

50-59% of documents present- 5 Points

40-49% of documents present- 4 Points

30-39% of documents present- 3 Points

20-29% of documents present- 2 Points

10-19% of documents present- 1 Point

0-9% of documents present-0 Points

Project Outcomes calculations:

1. APR 5a Number of Stayers plus 23c Exit Destination Permanent Destinations total. This total is divided by the ARP 5a1 total number of people Served.

2. APR Q19a3/19a1 Number of Adults with earned Income (Q19a1 is only used if the project does not have Q19a3)

3. APR Q19a3/19a1 Did not have the income category at the start or Annual Assessment/exit divvied by the number of Head of Households. (Q19a1 is only used if the project does not have Q19a3)

4. APR Q19a3/19a1 Number of Adults with Any Income (Q19a1 is only used if the project does not have Q19a3)

5. APR Q19a3/19a1 Average Change in earned income (Q19a1 is only used if the project does not have Q19a3)

6. ARP 20b 1+Source(s) divvied by the total number of Persons Served (5a 1.) APR 21 1 source of Health Insurance plus More than 1 Source of Health Insurance total number of Persons Served (5a 1.) The larger of the two outcomes will be the number used.

7. APR 22a1 Total number of leavers at designated time frame divvied by the total number of persons served (5a 1.)

Anne’s Check Charles’s Check Heidi’s Check Tim’s Check