Allegheny County Continuum of Care (PA-600)
Monitoring Guide for Sub-recipients

Overview

Allegheny County Department of Human Services (DHS) is the Lead Agency, or Infrastructure Organization (IO), for the Allegheny County Continuum of Care (CoC). This designation has been annually approved by the Homeless Advisory Board (HAB), which serves as the guiding body for the CoC. Within its IO role, DHS is the designated grantee for all HUD CoC grants. DHS formerly accepts the HUD award, enters into contract with HUD and manages the distribution of funding to sub-recipients. As such, DHS conducts the programmatic and fiscal HUD sub-recipient monitoring. DHS monitors sub-recipients to determine compliance with programmatic and fiscal standards, as determined by HUD and the CoC. DHS works with sub-recipients to ensure compliance and presents finding from monitoring reviews to the CoC to inform rankings and the development of future evaluation tools and performance standards.

The CoC and DHS's policy is to contract with high-performing agencies that meet or exceed HUD, CoC and County programmatic and fiscal standards and to work with agencies to ensure their performance meets or exceeds programmatic and fiscal standards.

Programmatic Monitoring Plan

Program monitors, who are specialized staff members from DHS's Bureau of Homeless Services that are trained in HUD, Pennsylvania Homeless Assistant Program (HAP) and CoC requirements, conduct monitoring visits at each sub-recipient's site at least annually, and more often as needed. During the visits, monitors conduct their review in accordance with the Program Monitoring Tool (Appendix A). Sub-

recipients may see the evaluation tool template upon their request at any time. Using the tool, monitors ensure that sub-recipients are compliant with HUD, HAP and Allegheny County contracting requirements. Through the tool, monitors ensure that sub-recipients are:

- Complying with policy and administrative requirements
    - Employee and Client records
        - All staff positions have written job descriptions
        - Staff have appropriate clearances
        - Client records are secure and stored properly
- Maintaining client files to meet requirements
    - Verification of Homelessness upon entrance into program
    - Verification of Chronic Homeless Status
    - Verification of Disability (if applicable)
    - Date of client acceptance, enrollment and residential move-in to program
    - Income Verification
    - Non-Cash Benefits and Medical Insurance
    - Statement of confidentiality
    - Program agreement in compliance with Housing First Policies, HUD regulations and signed by consumer
    - Client driven service plans with action steps, measurable short/long term goals, and goals that incorporate a holistic approach to serving families that support child development and parent-child relationships
- Referring clients to supportive services
    - Permanent Housing options
    - Job training
    - Employment Assistance
    - Education
    - Family Support
    - Healthcare
    - Other specialized services
- Housing clients in facilities that comply with HUD Housing Quality Standards:
    - Room standards (i.e. foundation is not cracked, door locks are in proper working order)
    - Health and Safety (i.e. smoke detectors are present on every floor, exits marked are non-obstructed)
    - Windows (i.e. all bedrooms have at least 1 fully functional window)
    - Kitchen (i.e. kitchen sink has running hot and cold water)
    - Bathroom (i.e. bathroom toilet is in working condition)

Programmatic performance is based on the sub-recipient's compliance with the items detailed in the monitoring tool and with the performance standards. Sub-recipients are engaged throughout the monitoring process, and results are provided in writing at the completion of the visit. The results are additionally shared with the HAB, who take it under consideration when determining rankings for renewals.

Data Monitoring Plan
Data that is entered into the Homeless Management Information System for all DHS, CoC and Homeless Assistance Programs (HAP) are monitored on a rolling basis. The rolling monitoring schedule it determined

by grant cycles, technical assistance needed, and clients served annually. Programs are routinely checked on the standards set by federal, state and local initiatives. Benchmarks and standards align with federal, state and local requirements as well as the Standards of Practice put forth by the local Homeless Services Community of Practices. To comply with data monitoring, all sub-recipients receive an overview of their program data in comparison to the benchmarks, highlights, lowlights, actions to be completed and a copy of their data and data quality reports. This is then recorded and tracked per program. Included in rolling monitoring is ongoing technical assistance to increase program performance and data quality.

The rolling monitoring schedule is as follows:
- Emergency Shelters (single and family)
  o Monthly
- Rapid Rehousing Programs
  o Bi-monthly
- Permanent Supportive Housing Programs
  o Quarterly
- Bridge Housing Programs
  o Quarterly
- Rental Assistance and Prevention Programs
  o Quarterly

In addition to rolling monitoring, the data monitor meets with sub-recipients annually to ensure that they are meeting, and are making a good faith effort to meet, performance standards. During the annual monitoring site visit, an overview of the year's progress, overall performance and data trends are reviewed. The annual data review includes a comparison to the benchmarks as well as yearly highlights and lowlights for each program. This information is reviewed with each sub-recipient to collaborate on a goal plan for the upcoming year and to determine the action steps needed to boost benchmarks and program performance. If there are outstanding data issues they will be addressed during the annual monitoring visit. At the completion of the annual data monitoring season, the data monitor collaborates with the 5-member homeless analytics team to review system performance, system goals, data trends and provide any additional updates to the team.

Monitoring Follow-up

Once the programmatic and data monitoring is completed, the sub-recipient will receive a Monitoring Overview. The Monitoring Overview consists of program successes, data trends, recommendations for program improvement, recommendations for technical assistance and a request for a corrective action plan, if applicable. The overview is intended to provide support for the sub-recipient as well as build accountability for data quality, program improvement and technical assistance to increase benchmarks. If there is no corrective action plan requested, the sub-recipient will receive a monitoring sign off letter to formally complete monitoring. If there is a corrective action plan requested that has not been resolved sufficiently, please see the section on *Monitoring Follow-up for Non-Compliant Plan of Action.*

To prevent sub-recipients from being out of compliance, DHS offers preventive technical assistance tailored to the sub-recipient's needs. Technical assistance can be requested by the sub-recipient but if necessary DHS will require technical assistance if the program is operating at a performance level that borders on non-compliance. Once assistance is provided and if the monitors find that sub-recipients are still not in compliance with standards, despite DHS's preventative technical assistance the sub-recipient

will be flagged as being High-Risk. Please see the section on *Non-Compliant Plan of Action for High-Risk Sub-Recipients.*

Monitoring Follow-up for Non-Compliant Plan of Action

If the program or data monitors are requesting the sub-recipient to submit a corrective action plan for deficiencies noted during monitoring they follow the subsequent procedures for bringing non-compliant sub-recipients into compliance:

1.) Monitors send the monitoring overview to the sub-recipient that notify them of the area(s) of non-compliance, make recommendations for improvement, make recommendations for technical assistance and request a submission of a corrective action plan within 30 days. Monitors are available to consult with the sub-recipient via phone calls, emails, and/or meetings as needed to provide guidance for the corrective action plan.

2.) The sub-recipient drafts a corrective action plan and sends it to the monitor within the 30-day follow-up period. The sub-recipient may also submit other supporting documents as needed. This includes but is not limited to additional back-up documentation, any missing verification for homelessness, disability, chronic homeless status, and any other documentation to support the corrective action plan.

3.) Monitors review the corrective action plan (and additional documentation where applicable) and either approves it or returns the corrective plan to the sub-recipient for revisions. If revisions are needed, the monitors recommend a phone call or meeting to discuss why the plan was not approved and action steps moving forward. If the plan is returned to the sub-recipient, the monitor will provide a new date, within the next 30 days, for submission of changes to the plan. If there are outstanding housing quality standard deficiencies, a re-visit to the unit is required. A re-visit to the sub-recipient may be necessary as part of the corrective action plan or on-going technical assistance.

DHS offers preventive technical assistance tailored to the sub-recipient's needs. If technical assistance is required through the corrective action plan, DHS will provide the assistance needed. Once assistance is provided, the corrective action is put in place and the sub-recipient is re-visited, if the monitors find that sub-recipients are still not in compliance with standards, the sub-recipient will be flagged as being High-Risk. Please see the section on *Non-Compliant Plan of Action for High-Risk Sub-Recipients.*

Non-Compliant Plan of Action for High-Risk Sub-Recipients

If a sub-recipient submits an unsatisfactory corrective action plan, does not follow-up with technical assistance requested or is unable to increase program performance in a satisfactory timeframe, the sub-recipient will be considered "High-Risk**."** To ensure that High-Risk sub-recipients additional oversight, guidance and monitoring the action steps below are followed:

1.) The monitor provides technical assistance and monitored, monthly, to ensure that the corrective action plan is being implemented.
   a. Technical assistance can include but is not limited to, consultation on business process, administration of HMIS, referrals to training opportunities for professional development, and/or reviews of program performance with data analysis.

2.) The sub-recipient is placed on a 90-day probationary period, during which the monitor recommends one on one peer support with a sub-recipient who is compliant with all standards, requirements and is meeting benchmarks.

a. Peer support must be scheduled with BHS, the non-compliant sub-recipient and compliant sub-recipient within 30 days of High-Risk status determination.

3.) After 90 days of High-Risk status, the monitors follow-up with the sub-recipient to ensure that the peer support sessions were successful and that goals have been outlined for their corrective action plan.

4.) After 90 days, if the sub-recipient is still under-performing, DHS informs the Homeless Advisory Board (HAB) of the ongoing performance issue and the HAB recommends a course of action, which may include actions up to and including a vote for reallocation.

Fiscal Monitoring Plan

A full description of the fiscal oversight provided across CoC Program sub-recipients can be found in the *Financial Management Systems Policies and Procedures* document. Regarding monitoring specifically, DHS requires detailed monthly expense documentation. A fiscal monitor, a staff member of DHS' Bureau of Homeless Services trained in HUD fiscal regulations, reviews and approves each invoice for accuracy prior to submission for reimbursement and monitors sub-recipients for compliance with HUD fiscal regulations. Each month, all sub-recipients submit detailed invoices to the fiscal monitor for review of compliance with HUD eligibility rules as detailed in the HEARTH Act along with back-up documentation to support the invoices. Any issues with invoices must be resolved before an invoice is approved for payment.

If sub-recipients have completed one year of billing without deficiency or issue and demonstrate a firm understanding of HUD fiscal regulations, as evidenced by past performance, then they may be moved to graduated status. Only those organizations with exemplary billing accuracy selected for graduated status, which means they submit a monthly detailed invoice, but are not required to submit backup documentation to support the request. They must maintain the back-up documentation internally and make it available for review by the fiscal monitor at any time. At least annually, the fiscal monitor will visit graduate sites and select a random sample of expenses, with a minimum of 3 expenses per month per program, to review along with the back-up (See Appendix B: Fiscal Monitoring Tool). If a sub-recipient does not provide sufficient documentation of expenses during this annual review, graduate status is revoked.

Any fiscal monitoring by the Bureau of Homeless Services within DHS is in addition to regularly scheduled audits conducted by DHS's Office of Administrative and Information Management Services (AIMS)—the Department's designated authority for financial management, budgets, contracts and compliance, human resources, and information systems.

DHS determines performance based on the sub-recipient's fiscal compliance with the items detailed in the monitoring tool. DHS shares the results of reviews with the HAB who take it under consideration when determining rankings for renewals.

Monitoring and the Annual Review and Ranking

As part of the CoC's commitment to data-driven performance and person-centered decision making, the annual review, ranking and reallocation process is centered on a performance based evaluation tool that utilizes data from multiple system sources, including HMIS and Coordinated Entry. While the utilization of these performance standards is important during the annual ranking and reallocation process, the standards are also incorporated into the ongoing oversight of each program throughout the year. The

metrics have been integrated into the monitoring processes, ensuring that each project has multiple points at which performance is reviewed. Additionally, by building the metrics into data and program monitoring, the CoC is afforded the opportunity to identify the need for technical assistance and administer that assistance throughout the year. In addition to the coordination of performance targeting, monitoring results are utilized by the HAB during planning decisions, such as ranking projects for the annual application, determining appropriate reallocation of funds, and revising standards.

Attachment A: Programmatic Monitoring Tool

—begins on next page

Allegheny County Continuum of Care Program Grant Management

Sub-recipient Monitoring Checklist
Monitoring Team Information

Program Monitoring Staff:			Date of Visit:	
Program Data Staff			Date of Visit:	

CoC Program Grantee: Agency and Program Information	
Agency:	
Program Name and Dates:	
Grant Total:	
Contract Number:	
Agency Staff Consulted:	
Housing First? Y/N	

Scattered Site or Facility Based?		Actual Units:		Bed Utilization for current quarter:	
Number of Chronic beds/units?				Contracted Units:	

Program Serves: (highlight)	Individual	Families	Both Individuals and Families	Single Women with Children	Single Males with Children	Couples without Children

CoC Program Grant Funders are used for:	Rental Assistance	Leasing	Operations	Bridge	Emergency Shelter	Case Management	Innovative	Supportive Services

Subpopulation Served:	

Total Points	0	
Total Possible Points:	284	0.00%

Program Monitoring

Question	Yes, No, N/A	Comments	Points	Possible Points
PART 1: ADMINISTRATIVE PERFORMANCE				
1. Do all staff have written job descriptions?				1
2. When was the last time job descriptions were updated? (QA)			QA	QA
3. Are all client files kept and maintained in a locked/secured fashion?				1
4. Staff members have appropriate clearances?				1
5. Staff Members have completed professional training in specialized areas (QA):			QA	QA
Housing First				
Trauma-Informed Care				
Harm Reduction				
Motivational Interviewing				
6. Which staff members have particpated in specialized trainings (QA):			QA	QA
Executive Directors				
Supervisors				
Case Managers				
Overnight Staff				
7. Does you program have written intake procedures?			QA	QA
8. Do you have internal Grievance Procedures?			QA	QA
a. Are they posted?				
8. Who is responsible for submitting Unusual Incident Reports? (QA)			QA	QA
Were staff changed submitted in the UIR?				
9. Do you have a safety Plan?			QA	QA
10. Who is responsible for submitting Involuntary Termination and Appeal Paperwork and providing it to clients? (QA)			QA	QA
11. How many DAL Reports did this program have? (Total Number of DAL/Total Number of People Served)			QA	QA
12. Are services informed by a Harm Reduction philosophy?			QA	QA
13. How many clients were terminated?	# of clients		QA	QA
a. Was termination/appeal paperwork submitted?				1
b. How many appealed?			QA	QA
c. How many were overturned?			QA	QA
14. Does your program follow the housing first model?				1
A. Does the project ensure that participants are not screened out based on the following items?				
Having too little or little income				1
Active or history of substance use				1
Having a criminal record with exceptions for state-mandated restrictions				1
History of victimization (e.g. domestive violence, sexual assault, childhood abuse)				1
None of the above				
B. Does the project ensure that participants are not terminated from the program for the				
Failure to participate in supportive services				1
Failure to make progress on a				1
Loss of income or failure to improve income				1
lease agreement typically found for unassisted person sin the project's				1
None of the above				
C. Does your program require a drug screen? If so, why?				1
D. Does your program require a clean time?				1
TOTAL POINTS FOR PART 1:			0	15

Data Monitoring

Question	Yes, No, N/A	Comments	Points	Possible Points
PART 1: REPORTING				
1. HAP Projects: Are they reviewing their HAP Reports and submitting them within the appropriate timeframe?			QA	QA
2. HUD projects: Are they revieiwng their HUD APR Reports within the 6 weeks allowed in HMIS?			QA	QA
Total Points Part I:				
PART 2: DASHBOARD/REFERRAL				
3. Are program bulletin boards showing a negative unit count? (this may be due to overdue extits)				1
4. What is the median length of time on the Bulletin Board? --Time from Assigned to Enrolled			QA	QA
5. What is the percentage of clients accepted in the program?			QA	QA
6. Do clients have active referrals thorugh the Link (ES)?				1
7. Program is completing Quarterly Update Assessments as Best Practice			QA	QA
8. Have there been consistently late Annual Assessments?				1
Total Points Part 2:			0	3
PART III: PROGRAM PERFORMANCE				
9. Data Timeliness --> How many clients are being enrolled within 0-3 calendar days?				1
Entry				1
Exit				1
10. What is the length of Stay in Program :				1
a. Median				1
b. Average				1
11. What is the average Bed/Unit Utilization?		above 90%		1
12. How many adult leavers/stayers have maintained/increased -- Income				1
13. How many adult leavers/stayers have maintained/increased -- Non-cash Benefits				1
14. How many adult leavers/stayers have maintained/increased -- Health Insurance				1
15. What is the average time from Enrollment to Move-in Date (RRH/PSH)				1
16. What is the average time from Move-in Date to Exit (RRH/PSH)				1
17. Out of the total number of clients who have exited, how many exited to Permanent Housing Destinations?		above 85%		1
18. What percentage of clients were involuntarily terminated?		below 5%		1
Total Points Part III:			0	14
PART IV: BENCHMARKS/DATA QUALITY				
20. Data Quality : Is there any missing data for the following categories				
Personally Indentifiable Information				
a. Name				1
b. Social Security Number				1
c. Date of Birth				1
d. Race				1
e. Ethnicity				1
f. Gender				1
Universal Data Elements				
g. Veteran Status				1
h. Project Entry date				1
i. Relationship to Head of Household				1
j. Client Location				1

Question	Yes, No, N/A	Comments	Points	Possible Points
Client 1:				
1. Is there a completed intake form for the client?				1
entered under the household screen in HMIS?				
2. Is there a copy of ID (State Issued ID, Driver's License, SS card, Birth Certification - children only) (Not required for HUD)				1
3. Does the program require disability verification? (PSH Only)				1
a. If yes, is there documentation of this in the file?				1
4. Is there documentation of homelessness prior to program entry?				1
5. Does the file clearly indicate the clients category of homelessness? (Indentify Category)				1
CHRONIC HOMELESSNESS				
6. Did client receive Chronic Homeless Priority?				1
7. If so, was it calculated correctly?				1
a. If third party certification is not present, is there sufficient self-certification documenting 12 months of homelessness?				
8. Each participant file contains verification of disablity.				1
PROGRAM AGREEMENTS				
9. File contains a Program Agreement that is signed by client and staff.				1
10. Program Agreements contain the following documents signed and dated by both clients and staff:				1
a. Program Guidelines				1
b. Release of Information Form				1
c. Confidentiality Form				1
d. HMIS Privacy Statement				1
e. Mandated Reporter Notification (required for family				1
f. Occupancy Fee/Rent				1
g. Copy of lease				1
h. Violation outline or Contract			QA	QA
i. Program Expectations/Client				1
j. Termination/Appeal Process				1
OCCUPANCY FEES / RENT / INCOME				
11. If client reports income, does the file contain an initial occupancy fee/rental calculation worksheet?				1
12. If client has zero income, a Zero Income Statement is present in file.				1
13. For programs other than RRH, are occupancy fees/rents capped at 30%?				1
14. If a client reports income, is there proof of income in the file?				1
a. (For HAP), is Income within 200%				1
b. Does this match HMIS?				1
15. Did the client maintain or increase income from all sources? (Entry/Annual/Exits only)				1
a. Does this match HMIS?				1
16. Did the client gain or maintain non-cash benefits?				1
a. Does this match HMIS?				1
17. Did the client gain or maintain health insurance?				1
a. Does this match HMIS?				1
18. Did the client gain or maintain employment during the program?				1
a. Does this match HMIS?				1
19. File contains documents demonstrating income recertification at least annually or anytime household income changes.				1
a. Does this match HMIS?				1
20. If client is leaseholder, file includes a copy of the signed lease by client and landlord. Leases should be annually or with moves as needed.				1
GOALS AND PROGRESS				1
21. Does the file contain an Initial Goal Plan (ISP) completed within 30 days of enrollment?				1
22. Service Plans are client driven and signed by client and staff.				1
23. Does the ISP include a "Housing Action Plan" that outlines the clients journey from Street/Shelter to Program Move-in? (QA)			QA	QA
24. Goal plans are reviewed by client and staff at least quarterly? (QA)			QA	QA
25. Progress notes document at least once a month visits between staff and clients?				1
26. Program is making appropriate referrals to outside sources and documenting follow up. Some of those include:	Yes/No Follow up?			1
a.				
b.				
c.				
d.				
BENCHMARKS				
27. (RRH) Clients are coming directly from street or shelters or fleeing DV.				1
28. (RRH) Clients are on a tiered rental payment plan contingent on income				1
29. (RRH) Clients are being reassessed at least every three months.				1
30. (RRH) Client ISP goals address maintaining housing and income.				1
31. (PSH) Are clients moving into permanent housing units between 30 days of program enrollment?				1
TOTAL POINTS FOR CLIENT 1:			0	47

Question	Yes, No, N/A	Comments	Points	Possible Points
PART 2: FILE MONITORING (Per client)				
Client 2:				
1. Is there a completed intake form for the client?				1

Right column (continuation):

k. Disabling Condition				1
Income and Housing Data Quality				
l. Destination				1
m. Income and Sources at Entry				1
n. Income and Sources at Annual Assessment				1
o. Income and Sources at Exit				1
p. Income and sources at Update				1
Chronic Homelessness				
q. Missing time in Insitutition				1
r. Missing time in housing				1
s. Approximate Date Started				1
t. Number of times				1
u. Number of months				1
Total Points Part 4:			0	21

Question	Yes, No, N/A	Comments	Points	Possible Points
Does this intake match what is entered under the household screen				
2. Is there a copy of ID (State Issued ID, Driver's License, SS card, Birth Certification - children only) (Not required for HUD)				1
3. Does the program require disability verification? (PSH Only)				1
a. If yes, is there documentation of this in the file?				1
4. Is there documentation of homelessness prior to program entry?				1
5. Does the file clearly indicate the clients category of homelessness? (Indentify Category)				1
CHRONIC HOMELESSNESS				
6. Did client receive Chronic Homeless Priority?				1
7. If so, was it calculated correctly?				1
a. If third party certification is not present, is there sufficient self-certification documenting 12 months of homelessness?				
8. Each participant file contains verification of disablity.				1
PROGRAM AGREEMENTS				
9. File contains a Program Agreement that is signed by client and staff.				1
10. Program Agreements contain the following documents signed and dated by both clients and staff:				1
a. Program Guidelines				1
b. Release of Information Form				1
c. Confidentiality Form				1
d. HMIS Privacy Statement				1
e. Mandated Reporter Notification (required for family				1
f. Occupancy Fee/Rent				1
g. Copy of lease				1
h. Violation outline or Contract			QA	QA
i. Program Expectations/Client				1
j. Termination/Appeal Process				1
OCCUPANCY FEES / RENT / INCOME				
11. If client reports income, does the file contain an initial occupancy fee/rental calculation worksheet?				1
12. If client has zero income, a Zero Income Statement is present in file.				1
13. For programs other than RRH, are occupancy fees/rents capped at 30%?				1
14. If a client reports income, is there proof of income in the file?				1
a. (For HAP), is Income within 200%				1
b. Does this match HMIS?				1
15. Did the client maintain or increase income from all sources? (Entry/Annual/Exits only)				1
a. Does this match HMIS?				1
16. Did the client gain or maintain non-cash benefits?				1
a. Does this match HMIS?				1
17. Did the client gain or maintain health insurance?				1
a. Does this match HMIS?				1
18. Did the client gain or maintain employment during the program?				1
a. Does this match HMIS?				1
19. File contains documents demonstrating income recertification at least annually or anytime household income changes.				1
a. Does this match HMIS?				1
20. If client is leaseholder, file includes a copy of the signed lease by client and landlord. Leases should be annually or with moves as needed.				1
GOALS AND PROGRESS				1
21. Does the file contain an Initial Goal Plan (ISP) completed within 30 days of enrollment?				1
22. Service Plans are client driven and signed by client and staff.				1
23. Does the ISP include a "Housing Action Plan" that outlines the clients journey from Street/Shelter to Program Move-in? (QA)			QA	QA
24. Goal plans are reviewed by cleint and staff at least quarterly? (QA)			QA	QA
25. Progress notes document at least once a month visits between staff and clients?				1
26. Program is making appropriate referrals to outside sources and documenting follow up. Some of those include:	Yes/No Follow up?			1
a.				
b.				
c.				
d.				
BENCHMARKS				
27. (RRH) Clients are coming directly from street or shelters or fleeing DV.				1
28. (RRH) Clients are on a tiered rental payment plan contingent on income				1
29. (RRH) Clients are being reassessed at least every three months.				1
30. (RRH) Client ISP goals address maintaining housing and income.				1
31. (PSH) Are clients moving into permanent housing units between 30 days of program enrollment?				1
TOTAL POINTS FOR CLIENT 2:			0	47

Question	Yes, No, N/A	Comments	Points	Possible Points
PART 2: FILE MONITORING (Per client)				
Client 3:				
1. Is there a completed intake form for the client?				1
Does this intake match what is entered under the household screen				
2. Is there a copy of ID (State Issued ID, Driver's License, SS card, Birth Certification - children only) (Not required for HUD)				1
3. Does the program require disability verification? (PSH Only)				1
a. If yes, is there documentation of this in the file?				1

Question	Yes, No, N/A	Comments	Points	Possible Points
4. Is there documentation of homelessness prior to program entry?				1
5. Does the file clearly indicate the clients category of homelessness? (Indentify Category)				1
CHRONIC HOMELESSNESS				
6. Did client receive Chronic Homeless Priority?				1
7. If so, was it calculated correctly?				1
a. If third party certification is not present, is there sufficient self-certification documenting				
8. Each participant file contains verification of disablity.				1
PROGRAM AGREEMENTS				
9. File contains a Program Agreement that is signed by client and staff.				1
10. Program Agreements contain the following documents signed and dated by both clients and staff:				1
a. Program Guidelines				1
b. Release of Information Form				1
c. Confidentiality Form				1
d. HMIS Privacy Statement				1
e. Mandated Reporter Notification (required for family				1
f. Occupancy Fee/Rent				1
g. Copy of lease				1
h. Violation outline or Contract			QA	QA
i. Program Expectations/Client				1
j. Termination/Appeal Process				1
OCCUPANCY FEES / RENT / INCOME				
11. If client reports income, does the file contain an initial occupancy fee/rental calculation worksheet?				1
12. If client has zero income, a Zero Income Statement is present in file.				1
13. For programs other than RRH, are occupancy fees/rents capped at 30%?				1
14. If a client reports income, is there proof of income in the file?				1
a. (For HAP), is Income within 200%				1
b. Does this match HMIS?				1
15. Did the client maintain or increase income from all sources? (Entry/Annual/Exits only)				1
a. Does this match HMIS?				1
16. Did the client gain or maintain non-cash benefits?				1
a. Does this match HMIS?				1
17. Did the client gain or maintain health insurance?				1
a. Does this match HMIS?				1
18. Did the client gain or maintain employment during the program?				1
a. Does this match HMIS?				1
19. File contains documents demonstrating income recertification at least annually or anytime household income changes.				1
a. Does this match HMIS?				1
20. If client is leaseholder, file includes a copy of the signed lease by client and landlord. Leases should be annually or with moves as needed.				1
GOALS AND PROGRESS				1
21. Does the file contain an Initial Goal Plan (ISP) completed within 30 days of enrollment?				1
22. Service Plans are client driven and signed by client and staff.				1
23. Does the ISP include a "Housing Action Plan" that outlines the clients journey from Street/Shelter to Program Move-in? (QA)			QA	QA
24. Goal plans are reviewed by cleint and staff at least quarterly? (QA)			QA	QA
25. Progress notes document at least once a month visits between staff and clients?				1
26. Program is making appropriate referrals to outside sources and documenting follow up. Some of those include:	Yes/No Follow up?			1
a.				
b.				
c.				
d.				
BENCHMARKS				
27. (RRH) Clients are coming directly from street or shelters or fleeing DV.				1
28. (RRH) Clients are on a tiered rental payment plan contingent on income				1
29. (RRH) Clients are being reassessed at least every three months.				1
30. (RRH) Client ISP goals address maintaining housing and income.				1
31. (PSH) Are clients moving into permanent housing units between 30 days of program enrollment?				1
TOTAL POINTS FOR CLIENT 3:			0	47

Question	Yes, No, N/A	Comments	Points	Possible Points
PART 2: FILE MONITORING (Per client)				
Client 4:				
1. Is there a completed intake form for the client?				1
Does this intake match what is entered under the household screen				
2. Is there a copy of ID (State Issued ID, Driver's License, SS card, Birth Certification - children only) (Not required for HUD)				1
3. Does the program require disability verification? (PSH Only)				1
a. If yes, is there documentation of this in the file?				1
4. Is there documentation of homelessness prior to program entry?				1
5. Does the file clearly indicate the clients category of homelessness? (Indentify Category)				1
CHRONIC HOMELESSNESS				
6. Did client receive Chronic Homeless Priority?				1
7. If so, was it calculated correctly?				1
a. If third party certification is not present, is there sufficient self-certification documenting 12 months of homelessness?				
8. Each participant file contains verification of disablity.				1

PROGRAM AGREEMENTS				
9. File contains a Program Agreement that is signed by client and staff.				1
10. Program Agreements contain the following documents signed and dated by both clients and staff:				1
a. Program Guidelines				1
b. Release of Information Form				1
c. Confidentiality Form				1
d. HMIS Privacy Statement				1
e. Mandated Reporter Notification (required for family programs)				1
f. Occupancy Fee/Rent				1
g. Copy of lease				1
h. Violation outline or Contract			QA	QA
i. Program Expectations/Client				1
j. Termination/Appeal Process				1
OCCUPANCY FEES / RENT / INCOME				
11. If client reports income, does the file contain an initial occupancy fee/rental calculation worksheet?				1
12. If client has zero income, a Zero Income Statement is present in file.				1
13. For programs other than RRH, are occupancy fees/rents capped at 30%?				1
14. If a client reports income, is there proof of income in the file?				1
a. (For HAP), is Income within 200%				1
b. Does this match HMIS?				1
15. Did the client maintain or increase income from all sources? (Entry/Annual/Exits only)				1
a. Does this match HMIS?				1
16. Did the client gain or maintain non-cash benefits?				1
a. Does this match HMIS?				1
17. Did the client gain or maintain health insurance?				1
a. Does this match HMIS?				1
18. Did the client gain or maintain employment during the program?				1
a. Does this match HMIS?				1
19. File contains documents demonstrating income recertification at least annually or anytime household income changes.				1
a. Does this match HMIS?				1
20. If client is leaseholder, file includes a copy of the signed lease by client and landlord. Leases should be annually or with moves as needed.				1
GOALS AND PROGRESS				1
21. Does the file contain an Initial Goal Plan (ISP) completed within 30 days of enrollment?				1
22. Service Plans are client driven and signed by client and staff.				1
23. Does the ISP include a "Housing Action Plan" that outlines the clients journey from Street/Shelter to Program Move-in? (QA)			QA	QA
24. Goal plans are reviewed by cleint and staff at least quarterly? (QA)			QA	QA
25. Progress notes document at least once a month visits between staff and clients?				1
26. Program is making appropriate referrals to outside sources and documenting follow up. Some of those include:	Yes/No Follow up?			1
a.				
b.				
c.				
d.				
BENCHMARKS				
27. (RRH) Clients are coming directly from street or shelters or fleeing DV.				1
28. (RRH) Clients are on a tiered rental payment plan contingent on income				1
29. (RRH) Clients are being reassessed at least every three months.				1
30. (RRH) Client ISP goals address maintaining housing and income.				1
31. (PSH) Are clients moving into permanent housing units between 30 days of program enrollment?				1
TOTAL POINTS FOR CLIENT 4:			0	47

Habitability Reflection				
Category	Yes, No, N/A	Comments	Points	Possible Points
Total number of units seen:				1
A. General Room Standards				13
B. General Health and Safety				6
C. Facility-based Program only				4
D. Windowns				5
E. Kitchen				7
F. Bathroom				6
G. Miscellaneous				2
Total Possible Points:			0	43

Attachment B: Fiscal Monitoring Tool

ALLEGHENY COUNTY DEPARTMENT OF HUMAN SERVICES
OFFICE OF COMMUNITY SERVICES
BUREAU OF HOMELESS SERVICES
HUD FISCAL MONITORING

Agency Name: _____   Date of Review: _____

Program Name: _____   Project # _____

Project Type: circle   Permanent Housing   Transitional Housing   Rapid Re-housing   S+C

Time Period covered by this review: _____

Name(s) of Provider Agency Personnel involved in the review:

_____   _____
Name   Title

_____   _____
Name   Title

_____   _____
Name   Title

County Staff conducting the fiscal review:

_____   _____
Name   Title

DEPARTMENT OF HUMAN SERVICES
BUREAU OF HOMELESS SERVICES
HUD FISCAL MONITORING

	YES:	NO:	N/A:

1. Do you maintain monthly expense documentation files:

2. Do you continue to maintain accurate daily time/activity sheets:

3. Do you expense payroll according to actual hrs worked during the month:

4. Do you continue to provide ACDHS with copies of all appropriate sub-contracts:
   and/or leases:

5. Do you reference appropriate eligibility sources prior to submitting requests for reimb:

6. Do you continue to expense on a actual cost cash basis:

7. Do you reconcile monthly expensed amounts with actual reimbursements received:

8. Is there a distribution plan for indirect expenses?

9. Is Matching done at 100% (pre-2015) or 125% (2015+)?   100%   125%

10. Cash Match Sources:
    1 _____
    2 _____
    3 _____
    4 _____
    5 _____
    6 _____

11. In-Kind Match Sources
    1 Are services documented in a MOU?
    2 Are hard goods eligible for use as Match?
    3 How is the value of hard goods determined? _____
    4 Are volunteer timesheets available w/
       job description?

12. Random sample of expenses reviewed:

13. Comments:

Attachment C: Sample Monitoring Overview

—begins on next page

Alle-Kiski Area HOPE Center, Inc.
2018 Monitoring Overview

Technical Assistance

- ❑ Fiscal Administrator & Financial Specialist Guidance for RRH Utility Assistance

- ❑ Fiscal guidance on Case Management and Program Capacity

- ❑ DHS will provide updated Termination & Appeals, Incident Report, & Habitability Forms

Trends

- ❑ Excellent Housing First language in Program Documents

- ❑ Unit inspections meet expectations

- ❑ Clear Protocols for Assessments and Case Management

- ❑ Model Best Practice in use of Individual, Family, and Child Service Plans

No Follow-Up Required

2018 Habitability Overview

Successes:

🏠 No issues in units or Emergency Shelter Facility

🏠 Clients expressed satisfaction with their units

No Improvement Opportunities

No Action Plan Required

Safe at Home

No Action Plan Required

Successes

- Clients housed with great efficiency
- Excellent Housing First language in Program Agreement
- RRH Assessment Tools: Income Tracking Sheets, Self Sufficiency Matrix, Stability Guide
- Move in Date is only 19 days!

Improvement Opportunities

- Challenges with Utilization in Ramp-Up of New Programs
- Please update Termination and Appeal Paperwork

Safe at Home

YES/NO Late Annual Assessments? **No**

Entry Timeliness
0%
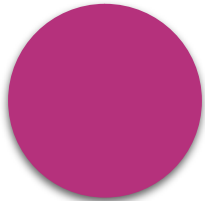
100%

■ 0-3 Days   ■ 4+ days

Exit Timeliness
0%

100%

■ 0-3 Days   ■ 4+ days

LENGTH OF STAY

Average	1.5
Median	1.5
Benchmark	9
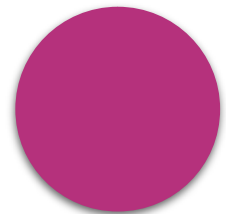
Exits to Permanent Housing

0

■ Clients who exited to PH
■ Clients who didn't exit to PH

100% Number of adults who maintained/increased INCOME.

100% Number of adults who maintained/increased NON-CASH BENEFITS.

100% Number of adults who maintained/increased HEALTH INSURANCE.

19 days   N/A   **EXIT**
                                            Unknown

Data Quality is perfect	Data Quality is perfect	Data Quality is perfect	Data Quality is perfect

Safe at Home

Percentage of Acceptance vs. Denials

Denied

Accepted

N/A

N/A

Days from Assigned to Enrolled

N/A
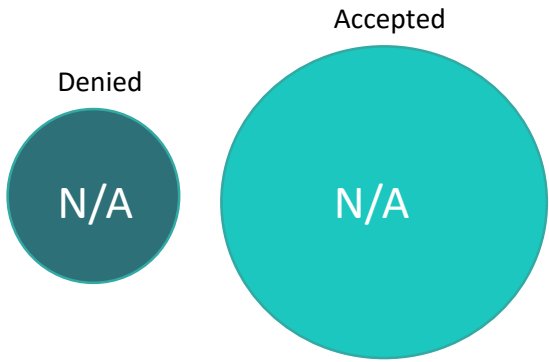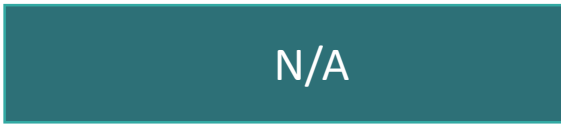
INVOLUNTARY TERMINATIONS:

0

- ■ Number of clients involuntarily terminated
- ■ Total number of clients served

Notes/Questions:

Are you completing Quarterly Update Assessments as Best Practice?

Are you reviewing your HUD/HAP reports before they are due?

Emergency Shelter

No Action Plan Required

Program Highlights

- 100% Utilization
- Case management exceeds expectations
- Model Best Practice in use of Individual, Family, and Child Service Plans
- Zero terminations!
- 86% of clients exited to Permanent Housing!

No Improvement Opportunities

Emergency Shelter

Utilization:

100%

Entry Timeliness
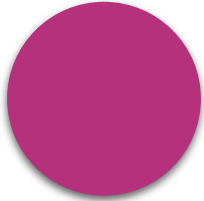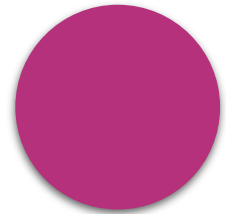
0%

100%

- 0-3 Days
- 4+ days

Exit Timeliness

0%

100%

- 0-3 Days
- 4+ days

LENGTH OF STAY

Average	26.6
Median	27.9
Benchmark	30

Exits to Permanent Housing

86%

14%
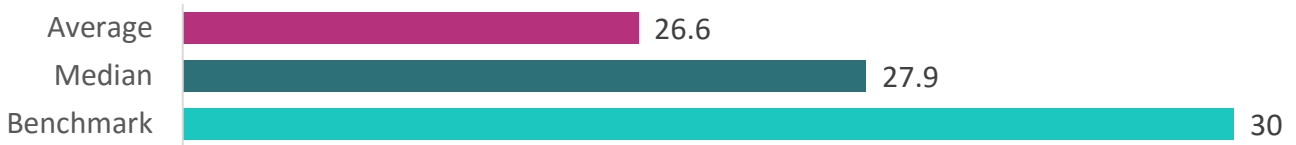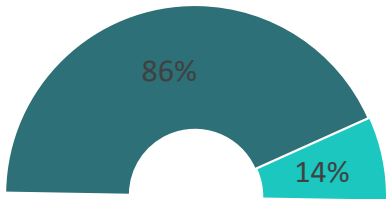
- Clients who exited to PH
- Clients who didn't exit to PH

N/A — Number of adults who maintained/increased INCOME.

N/A — Number of adults who maintained/increased NON-CASH BENEFITS.

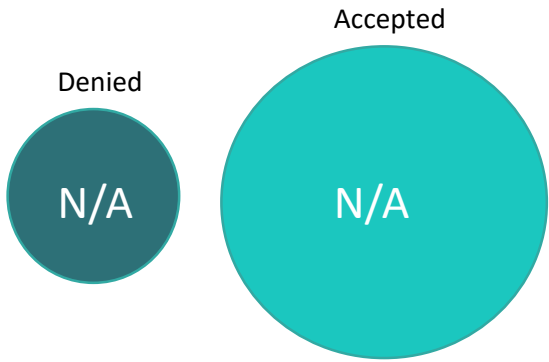N/A — Number of adults who maintained/increased HEALTH INSURANCE.

N/A

N/A

EXIT

N/A

Emergency Shelter

Percentage of Acceptance vs. Denials

Accepted

Denied

N/A

N/A

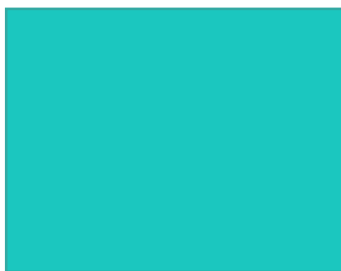## Days from Assigned to Enrolled

0

INVOLUNTARY TERMINATIONS:

■ Number of clients involuntarily terminated
■ Total number of clients served

Notes/Questions:

Are you completing Quarterly Update Assessments as Best Practice?

Are you reviewing your HUD/HAP reports before they are due?