## 2023 Program Review and Certification Standards J. Facilities

#### New requirements are in red text and do not apply for the 2023 PR&C review. These requirements will be applicable in 2024. Minor adjustments and clarifications and changes to Tiers are in green text. These changes are applicable for the 2023 PR&C review. Bold are requirements that now apply for the 2023 PR&C review.

Standard J1	Guideline J1	Monitoring Method	Conclusion	Certifying Official*	Tier	Program Type
The proper number of beds or apartment units is provided according to the CSB partnership agreement(s).	<ul> <li>The facility or program has at least the number of beds or units as stated in the CSB partnership agreement(s).</li> <li>Each resident must be afforded adequate space and security for themselves and their belongings and an acceptable place to sleep.</li> <li>CoC-funded PSH and RRH units must have at least a living room, a kitchen area, a bathroom, and one bedroom or living/sleeping room for each two persons (except SROs). Children of the opposite sex, other than very young children, cannot be required to occupy the same bedroom or living / sleeping room. Exterior doors and windows must be lockable.</li> </ul>	<ul> <li><u>Discussion</u>: Staff confirmed that each housing unit has appropriate living/sleeping areas and space and equipment to store, prepare, and serve food, per the guidelines.</li> <li><u>Discussion</u>: For CoC- funded programs, staff confirmed that children of the opposite sex, other than very young children, are not required to occupy the same bedroom or living/ sleeping room.</li> <li><u>Other</u>: CSB monitored beds via QI reports.</li> </ul>	<ul> <li>Compliant with conditions</li> <li>Non- compliant</li> <li>N/A</li> </ul>		1	All programs except CPOA, CARR Team, Outreach, Prevention

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	The bathroom must be	
	contained within the unit,	
	afford privacy, and be for the	
	exclusive use of the	
	occupants (except SROs).	
	Permanent housing units	
	must have suitable space	
	and equipment to store,	
	prepare, and serve food in a	
	sanitary manner, including an	
	oven and stove or range, a	
	refrigerator, and a kitchen	
	sink with hot and cold	
	running water. Hot plates are	
	not acceptable substitutes for	
	stoves or ranges (except	
	SROs). A microwave may be	
	substituted for an oven and	
	stove if the tenant agrees	
	and if microwaves are	
	furnished to both subsidized	
	and unsubsidized tenants in	
	the same premises.	
	For CoC-funded PSH and	
	RRH, if household	
	composition changes, the	
	agency must relocate the	
	household to a more	
	appropriately sized unit with	
	continued access to	
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	appropriate supportive services.			
Discussion and Basis for	Conclusion			

Standard J2	Guideline J2	Monitoring Method	Conclusion	Certifying Official*	Tier	Program Type
The facility must be kept in a safe and sanitary condition and units must meet HUD Housing Quality Standard (HQS) or HUD Habitability Standards, as applicable, and all applicable local codes. Shelters meet the ESG shelter and housing standards in 2 CFR Part 576.403. Programs providing Rental Assistance ensure carbon monoxide alarms or detectors are in units.	<ul> <li>For CoC- and HOME-funded programs, an initial and annual HUD HQS inspection is required. For ESG- and CSB-funded programs, a HUD Habitability initial and annual inspection is required. CSB will not pay rent for units that do not pass inspection.</li> <li>Site-based facilities have a housekeeping and maintenance plan. Evidence that the plan is being implemented can be staff initials when chores or routine maintenance tasks are completed.</li> <li>Shelter ESG standards include minimum standards for emergency shelters,</li> </ul>	<ul> <li><u>Discussion</u>: Staff explained the housekeeping and maintenance plan.</li> <li><u>File Review</u>: CSB reviewed HQS or Habitability Inspection forms as applicable.</li> <li><u>Other</u>: For ESG-funded shelters, CSB completed a habitability inspection.</li> <li><u>Other</u>: For site-based programs CSB reviewed general upkeep, maintenance records, exit signs, and exit passageways.</li> </ul>	<ul> <li>Compliant</li> <li>Compliant with conditions</li> <li>Non-compliant</li> <li>N/A</li> </ul>		1	PSH, TH, RRH, Shelters, and Prevention (only if client moves to a new unit)

structure and materia access, space and se interior air quality, wa supply, sanitary facili thermal environment illumination and elect food preparation, san conditions, and fire s	ecurity, Assistance ater HQS/Habitability ties, inspections include , confirmation of carbon tricity, monoxide alarms or hitary detectors.	
Discussion and Basis for Conclusion		

Standard J3	Guideline J3	Monitoring Method	Conclusion	Certifying Official*	Tier	Program Type
A First Aid kit is accessible to staff and residents and stocked with sufficient supplies to handle multiple incidents. Facility-based programs have NARCAN and fentanyl	<ul> <li>A well-stocked and OSHA compliant first aid kit is kept in a common area where staff and residents can gain quick access in case of an emergency.</li> <li>The kit is stocked with common supplies to handle minor accidents.</li> </ul>	<ul> <li><u>Other</u>: CSB inspected NARCAN and fentanyl strips and First Aid kits to ensure compliance with OSHA requirements.</li> <li><u>Discussion</u>: Staff explained how required supplies and staff</li> </ul>	<ul> <li>Compliant</li> <li>Compliant with conditions</li> <li>Non- compliant</li> </ul>		1	Single-site PSH, TH, Shelters, and any location where on- site services are provided
test strips available and have staff trained to use both. Discussion and Basis fo	NARCAN and fentanyl test strips are kept in an area accessible by the trained personnel.	training are maintained.	□ N/A			

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Standard J4	Guideline J4	Monitoring Method	Conclusion	Certifying Official*	Tier	Program Type
The program complies with all lead-based paint requirements.	<ul> <li>Lead-based paint requirements apply to all units built before 1978 that are OR CAN BE occupied by families with children less than 6 years of age or pregnant women. Even if a unit is not currently occupied by a family, but is large enough or configured such that a child under the age of 6 or a pregnant woman can be living or spending time, then the unit needs to meet lead-based paint requirements. For all practical purposes, the requirements apply to any unit built prior to 1978.</li> <li>A unit inspection and lead- based paint visual assessment conducted by a certified lead-based paint evaluator, acknowledgement that the HUD approved Lead-Based Paint Pamphlet</li> </ul>	<ul> <li><u>File Review</u>: CSB reviewed client files for evidence of the lead- based paint requirements.</li> <li><u>File Review</u>: If any units failed the visual assessment, CSB discussed with staff steps taken.</li> <li><u>Other</u>: Quarterly email to the Ohio Dept. of Health listing active CoC- and HOME-funded unit addresses.</li> <li><u>Other</u>: CSB staff conducted a lead-based paint visual assessment for family shelters, as needed.</li> </ul>	<ul> <li>Compliant</li> <li>Compliant with conditions</li> <li>Non-compliant</li> <li>N/A</li> </ul>	Official*	1	Type PSH, TH, RRH, Shelters, and Prevention
	was received by the client, and acknowledgement that					

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	the warning statement was given to the client must be documented in the client's file.			
	Evidence of the acknowledgements is either included in a statement in the lease (with the household initials) or by giving the household a form where a retained portion confirms they received the information. Lead-based paint disclosures must be included in master leases or a separate document provided to the partner agency.			
	<ul> <li>If applicable, the Lead- Based Paint Poisoning Prevention Act, as amended by the Residential Lead- Based Paint Hazard Reduction Act of 1992 applies.</li> </ul>			
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Standard J5	Guideline J5	Monitoring Method	Conclusion	Certifying Official*	Tier	Program Type
There is reasonable access to a public or private telephone for use by clients and phones are readily accessible for 911 / emergency calls.	<ul> <li>Phones in good working order are available for client use.</li> </ul>	Other: CSB inspected phones for client use.	<ul> <li>Compliant</li> <li>Compliant with conditions</li> <li>Non-compliant</li> <li>N/A</li> </ul>		2	Single-site PSH, TH, Shelters, and any location where on- site services are provided

Standard J6	Guideline J6	Monitoring Method	Conclusion	Certifying Official*	Tier	Program Type
A bed, crib, or cot with clean and appropriate linens and bedding is provided for each client except in extenuating overflow situations.	<ul> <li>Bed, cribs, or cots and clean linen are available and there is a process for ensuring linens are regularly laundered.</li> </ul>	<ul> <li><u>Other</u>: CSB inspected linens and laundry capabilities.</li> <li><u>Other</u>: CSB inspected sleeping facilities.</li> <li><u>Other</u>: For ESG-funded shelters, CSB completed a habitability inspection.</li> </ul>	<ul> <li>Compliant</li> <li>Compliant with conditions</li> <li>Non-compliant</li> <li>N/A</li> </ul>		2	Shelters
Discussion and Basis for	r Conclusion					

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Standard J7	Guideline J7	Monitoring Method	Conclusion	Certifying Official*	Tier	Program Type
Restrooms have an adequate number of showers and toilets for the clients housed in the facility. Restrooms and showers affirm the client's identity. There is warm and cold running water. Facilities are clean and in good working order, and each client has access to sanitary facilities that are in proper operating condition, private, and adequate for personal cleanliness and disposal of human waste. The water is free from contamination.	<ul> <li>The facility has clean restrooms that are in good working order. Restrooms can be dormitory style or individual, depending on the type of housing or shelter.</li> <li>Where possible, restrooms include a single stall option and are labeled as all- gender with a simple sign. Where and when accommodations need to be made for individual clients, they are client-informed and consider best practices.</li> <li>Local building codes provide definition of adequacy.</li> <li>Bathroom cleaning schedule and guidelines are posted and/or available when requested.</li> </ul>	<ul> <li><u>File Review</u>: CSB reviewed inspection forms as applicable.</li> <li><u>Other</u>: CSB reviewed maintenance records, inspections, and any grievances regarding the facility.</li> <li><u>Other</u>: For ESG-funded shelters, CSB completed a habitability inspection.</li> </ul>	<ul> <li>Compliant</li> <li>Compliant with conditions</li> <li>Non-compliant</li> <li>N/A</li> </ul>		2	Single-site PSH, TH, Shelters, and any location where on- site services are provided.

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Image: Construction of the facility has taken services to children ensure:       Image: Children measures to childproof electrical outlets and windows.       File Review: CSB reviewed inspection forms.       Compliant with constructions       2       All programs serving children with reviewed inspection forms.         > There are childproof electrical outlets and windows.       Image: Children are not able to lock taken to prevent children from falling out windows;       Children are not able to lock themselves in any rooms.       Image: Discussion: Agency confirmed that it to the family's unit so that children may nap without disturbance.       Non-       Site services are provided congregate facilities for children from hurns; on ap without disturbance.       N/A       N/A         > Precautions are taken to protect children from injury from fans; and > The facility must permit 24-hour access to the family's unit so that children may nap without disturbance.       Other: For ESG-funded shelters, CSB completed a habitability inspection.       N/A       Image: Children is an are for children to nap without disturbance.       Image: Children is an are for children to nap without disturbance.       Image: Children is an are for children to nap without disturbance.       Image: Children is completed a habitability inspection.       Image: Children is completed a habitability inspection.
Discussion and Basis for Conclusion

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Standard J9	Guideline J9	Monitoring Method	Conclusion	Certifying Official*	Tier	Program Type
In congregate facilities, there are secure designated spaces for storing a client's personal belongings. Agencies must provide reasonable access to clients. In non- congregate facilities, clients, have 24-hour access to their belongings or the space where their belongings are stored.	<ul> <li>The facility provides lockers or storage trunks or makes other accommodations for clients to store belongings.</li> <li>Clients have access to belongings as needed. Access to clients' belongings and storage space should not be denied in non-congregate facilities where there is little danger of theft because personal belongings are not stored in a congregate space.</li> <li>Staff track all reported incidents of lost or stolen property and can demonstrate appropriate and necessary corrective action(s) taken to ensure secure storage of and access to personal belongings.</li> </ul>	Discussion: Staff described the process by which clients have access to their belongings and corrective action for lost/stolen property. Other: Staff showed CSB the secure space for clients' personal belongings. Other: For ESG-funded shelters, CSB completed a habitability inspection.	with conditions Non- compliant		2	Single-site TH, Shelters
Discussion and Basis for	Conclusion					

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Standard J10	Guideline J10	Monitoring Method	Conclusion	Certifying Official*	Tier	Program Type
There is a place for clients who work third shift to sleep during the day when they are not at work.	Agencies must provide a dark, quiet place that is suitable for sleeping and free from disturbance from other shelter residents to clients who work third shift.	Other: If there are clients in the facility who work third shift, CSB inspected their sleeping space, if possible without disturbing sleeping clients.	<ul> <li>Compliant</li> <li>Compliant with conditions</li> <li>Non-compliant</li> <li>N/A</li> </ul>		2	Shelters

Standard J11	Guideline J11	Monitoring Method	Conclusion	Certifying Official*	Tier	Program Type
There is a fire and disaster safety plan. In congregate shelters or single structures, there are records of an annual fire inspection, a posted evacuation plan in symbols that all residents can understand, a fire detection system, regular fire drills, and adequate fire extinguishers.	<ul> <li>The agency has a fire safety plan available for review.</li> <li>The agency has written evidence that it receives a fire inspection each year and can produce the most current inspection report.</li> <li>Evacuation routes are posted and easily understood. There is a second means of exiting the</li> </ul>	<ul> <li><u>Policy Review</u>: CSB reviewed the fire safety policy.</li> <li><u>File Review</u>: CSB reviewed the annual fire inspection.</li> <li><u>Other</u>: CSB saw evidence that safety plans and evacuation routes are posted.</li> </ul>	<ul> <li>Compliant</li> <li>Compliant with conditions</li> <li>Non-compliant</li> <li>N/A</li> </ul>		2	Single-site PSH, TH, Shelters, and any location where on- site services are provided

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	building in the event of an emergency.	<ul> <li>Other: CSB reviewed documentation of employee fire safety</li> </ul>
	The program has documentation that	training.
	employees are trained in fire safety procedures.	Other: For ESG-funded     shelters, CSB     completed a
	Congregate shelters and single structure buildings have a fire detection system and fire extinguishers and independent units have working smoke detectors.	habitability inspection.
	In scattered site units, there are working smoke detectors on each occupied level of the unit and posted evacuation plans. In multiple units with common entrances, there is record of an annual fire inspection.	
	Units are equipped with a working carbon monoxide detector.	
Discussion and Basis for Co	onclusion	

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Standard J12	Guideline J12	Monitoring Method	Conclusion	Certifying Official*	Tier	Program Type
In site-based programs with desk staff, staff is responsible for monitoring the facility entrance and is aware of clients attempting to access the building.	There is a mechanism, such as security cameras, to allow staff to see who requests access to the building.	<ul> <li><u>Other</u>: CSB confirmed security measures at building access points.</li> <li><u>Other</u>: For ESG-funded shelters, CSB completed a habitability inspection.</li> </ul>	<ul> <li>Compliant</li> <li>Compliant with conditions</li> <li>Non-compliant</li> <li>N/A</li> </ul>		2	Single-site PSH, TH, Shelters, and any location where on- site services are provided

Standard J13	Guideline J13	Monitoring Method	Conclusion	Certifying Official*	Tier	Program Type
The agency ensures that information technology is accessible to persons with disabilities, as required by Section 508 of the Rehabilitation Act.	<ul> <li>Section 508 requires that persons with disabilities can use information and data to the same extent as those without disabilities.</li> <li>Information technology includes, but is not limited to, computers, fax machines, copiers, and telephones.</li> </ul>	Discussion: CSB discussed the requirement and how the agency complies with agency staff.	<ul> <li>Compliant</li> <li>Compliant with conditions</li> <li>Non-compliant</li> <li>N/A</li> </ul>		2	All programs
Discussion and Basis for	Conclusion					

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Standard J14	Guideline J14	Monitoring Method	Conclusion	Certifying Official*	Tier	Program Type
The agency and any housing units comply with all applicable building, housing, zoning, environmental, fire, health, safety, and life safety codes, Americans with Disabilities Act policies, Section 504 of the Rehabilitation Act, and fair housing laws. Site- based programs with clients have Building and Occupancy Permits posted.	<ul> <li>The agency has occupancy permits available for review.</li> <li>The agency can document that use of buildings is consistent with zoning.</li> <li>The agency can show proof that building(s) passed the fire safety inspection.</li> <li>The agency can describe plans for accommodating persons with disabilities. Examples include providing qualified sign language interpreters and materials in formats such as Braille, audio, or large type.</li> <li>The agency can state if it has any pending litigation or investigation for civil rights or fair housing complaints.</li> <li>The agency can confirm that all programs comply with the new construction, reasonable accommodation, and</li> </ul>	Self-certification	<ul> <li>Compliant with conditions</li> <li>Non- compliant</li> <li>N/A</li> </ul>		3	PSH, TH, RRH, Shelters, and any location where on- site services are provided

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rehabilitation requirements of Section 504 of the Rehabilitation Act.			
Renabilitation Act.			

Standard J15	Guideline J15	Monitoring Method	Conclusion	Certifying Official*	Tier	Program Type
Shelter and TH clients may use the shelter or TH facility as a legal residence for the purpose of voter registration.	Staff encourages clients to register to vote and provides information to clients on voting rights. This information can be disseminated as part of the intake process.	Self-certification	<ul> <li>Compliant</li> <li>Compliant with conditions</li> <li>Non-compliant</li> </ul>		3	TH, Shelters
	<ul> <li>Voter registration forms are available on-site.</li> </ul>		□ N/A			

Standard J16	Guideline J16	Monitoring Method	Conclusion	Certifying Official*	Tier	Program Type
The agency implements Universal Precautions Procedures as required	<ul> <li>Facilities show compliance with OSHA standards.</li> </ul>	Self-certification	<ul><li>Compliant</li><li>Compliant</li></ul>		3	Site-based PSH, TH,
by Occupational Safety and Health Administration (OSHA),	<ul> <li>The agency has letters, certifications, or other written evidence that it has</li> </ul>		with conditions			and Shelters
is in compliance with applicable standards, and has written plans	consulted with the appropriate certifying agencies regarding the		Non- compliant			
for identification, treatment, and control	referenced topics.		□ N/A			
of medical and health conditions. The agency	<ul> <li>Appropriate agencies include the Ohio</li> </ul>					

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consults with the	Department of Health,			
Columbus Health	Franklin County Department			
Department or other	of Health, Columbus Health			
appropriate entities on	Department, OSHA, and the			
sanitation,	Mid-Ohio Food Collective.			
communicable				
diseases, hazardous	The agency has written			
material storage and	policies and procedures for			
use, and food handling.	detecting, controlling, and			
	reporting communicable			
	diseases according to Ohio			
	Department of Health,			
	Franklin County Public			
	Health, and Columbus			
	Public Health communicable			
	disease reporting			
	requirements located at			
	https://idrsinfo.org/.			
	<u>intepoly / internetolog</u>			
	The agency reports			
	communicable diseases to			
	public health officials and			
	CSB (via a major/unusual			
	incident report) when			
	detected by the end of the			
	next business day. The			
	policy and procedure			
	includes or references			
	procedures concerning			
	universal precautions.			

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The agency documents reports provided to public health officials and CSB when reportable communicable diseases are detected.			
Cleaning supplies and other toxic chemicals are kept in areas not accessible to residents without staff assistance. The facility has spill kits or other appropriate protocol for handling toxic substances, such as drain opener, oven cleaner, or bleach.			

Standard J17	Guideline J17	Monitoring Method	Conclusion	Certifying Official*	Tier	Program Type
Food preparation areas must contain suitable space and equipment to store, prepare, and serve food in a safe and sanitary manner. If the program provides storage for a food pantry, there is evidence that the Mid- Ohio Food Collective has determined that	<ul> <li>Letters, reports, or other documentation from an appropriate review and certifying body are available for review.</li> <li>If the facility is not required to have a food license, the appropriate agency is consulted at least biannually.</li> </ul>	Self-certification For ESG-funded shelters, CSB completed a habitability inspection.	<ul> <li>Compliant</li> <li>Compliant with conditions</li> <li>Non-compliant</li> <li>N/A</li> </ul>		3	PSH, TH, RRH, Shelters that provide on- site meals or food pantries

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adequate provisions have been made for sanitary handling and safe storage of foods.	<ul> <li>Agencies that provide supportive housing for persons with disabilities must provide meals or meal preparation facilities for clients.</li> </ul>			
	<ul> <li>Kitchen cleaning schedule and guidelines are posted and/or available when requested.</li> </ul>			

Standard J18	Guideline J18	Monitoring Method	Conclusion	Certifying Official*	Tier	Program Type
Exits, steps, and walkways are clear of debris, ice, snow, and other hazards. There is a process in place to maintain clear walkways. Steps have treads or similar accommodation to prevent slipping.	<ul> <li>All steps and stairways have handles and treads. All walkways are kept in safe conditions regardless of the season. The facility has a plan for ensuring that debris is regularly removed from walkways.</li> <li>Scattered Site programs use landlords who ensure walkways are kept in safe conditions.</li> <li>The program advocates for clients regarding these issues, as needed.</li> </ul>	Self-certification For ESG-funded shelters, CSB completed a habitability inspection.	<ul> <li>Compliant</li> <li>Compliant with conditions</li> <li>Non-compliant</li> <li>N/A</li> </ul>		3	PSH, TH, RRH, Shelters, and any location where on- site services are provided

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Standard J19	Guideline J19	Monitoring Method	Conclusion	Certifying Official*	Tier	Program Type
Staff has keys to all locks in the facility. In independent units, clients are responsible for locking their unit,	<ul> <li>Residents are not able to lock staff out of the unit, nor are staff able to lock residents in.</li> </ul>	Self-certification	<ul> <li>Compliant</li> <li>Compliant with conditions</li> </ul>		3	Site-based PSH, TH, Shelters
but staff maintains the ability to access the units at all times.	Staff has a plan and procedure that does not violate landlord-tenant law for entering units, as appropriate, in case of emergency.		<ul><li>Non- compliant</li><li>N/A</li></ul>			

Standard J20	Guideline J20	Monitoring Method	Conclusion	Certifying Official*	Tier	Program Type
The agency has done radon testing and made any necessary changes in buildings where clients have access to the basement.	Written evidence of testing results and remediation activities, such as reports or other correspondence, is available for review.	Self-certification	<ul> <li>Compliant</li> <li>Compliant with conditions</li> <li>Non-compliant</li> <li>N/A</li> </ul>		3	Site-based PSH, TH, Shelters

CSB reviews Tier 1 standards annually and Tier 2 standards every 4 years. For years when CSB does not review Tier 2 standards, agency staff certifies compliance with both Tier 2 and Tier 3 standards in the 'Certifying Official' column.