

Program Review & Certification Updates 2023-2024

Virtual Training March 1st, 2023

Housekeeping

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Housekeeping

- Please put all questions in the chat box
- This training is being recorded
- Slides & recording will be posted on the website after the training
 - All materials will also be linked in the chat box and emailed out



Introductions

- Grants & Compliance
 - Cathy Ellerbrock, Grants Administrator
 - Gillian Gunawan, Grants Administrator
 - Tom Lather, Grants Administrator
 - Kirstin Jones, Grants & Compliance Director
- Data & Evaluation
 - Travis Theders, Database Administrator
 - Katie Caputo, Data & Grants Coordinator
- Programs & Planning
 - Natalie Zimmerman, Systems Manager
 - Twila Wellmaker, Youth & Outreach Manager
 - Monisa Mason, HPN Manager
 - Steve Skovensky, Programs & Planning Director
- Housing
 - Emily Juengel, DCA Program Administrator





- In regard to the amount of documents and the timeline:
 - Standards are driven by federal regulation what may seem small and insignificant is rooted in regulation
- In regard to moving toward a digital format:
 - We are happy to look at items online if that's where they are housed. There is no need to print documents if we can easily and efficiently access documents within a portal
- In regard to CSB internal communication:
 - The Housing and Programs & Planning Team is joining Grants
 & Compliance and Data & Evaluation Teams this year
- In regard to noting changes to the Standards:
 - Changes to the Standards are designated by green and red text. Red text denotes that it is not being monitored this year, but will be the following year



- In regard to what documentation should be in client files:
 - Document that outlines the documentation needed in the client file
 - Files should always be audit ready in case a federal, state, or local funder monitors
- In regard to more clearly communicating client files to be reviewed:
 - We can send client names and Client IDs in an encrypted, secure email instead of just IDs
 - We cannot send them sooner than 24 hours in advance we used to randomly pull client files while on site
- In regard to difficulties with Submittable:
 - We will email out a user manual with the presentation
 - Stay after this training to do a Submittable demo
- In regard to walking through a client file or asking questions prior to the PR&C visit:
 - Technical Assistance is always available to ask questions or help with file preparation
 - Reach out to anybody on the Grants and Compliance Team



- In regard to common errors across programs, the 2022 PR&C common areas of concern include:
 - Homeless/formerly homeless board member did not attend a board meeting in over 12 months
 - Data accuracy
 - VAWA and client right notifications at entry and exit
 - Missing annual assessments, annual income verification and rent contribution
 - Missing or incomplete documentation of homelessness at time of program enrollment
 - Discrepancies in lease/occupancy agreements, income/occupancy fee forms, and FMR/RR forms
 - Missing client notice of termination, appeals, and exit reason determination
 - Missing documentation of client engagement
 - Missing referral documentation to RRH
 - PSH occupancy



- Proposed changes to standards
 - G Standards
 - Five day goal to complete HAST & IHSP documents is difficult to meet due to staffing and client needs
 - Recommendation: have other staff trained to complete these documents
 - Updated standards will be reviewed in later slide



- Proposed changes to standards
 - H Standards
 - VAWA transfer explanation
 - Client driven
 - Case Managers should be able to explain the process to clients affected by domestic violence. Important to document effort to inform the client about their rights
 - RRH Annual Assessment
 - This is a federal requirement
 - PPD is working with a Partner on a form that is more appropriate for RRH



- Proposed changes to standards
 - K Standards
 - Reduce the 95% application accuracy/completeness
 - We are not reducing the goal this year since CSB has implemented DCA training and certification requirements
 - Change the AMI to qualify for DCA
 - We have to prioritize households most in need
 - Majority of households served in the system are households below the 35% AMI threshold



- Proposed changes to standards
 - M Standards
 - Printing pages from Clarity to prove homelessness
 - This is not required
 - Keep in mind, we cannot control changes that people make to HMIS data records. We also have to have access to hardcopy client files if funders ask for client files for monitoring purposes
 - Source documentation is difficult with this population
 - Source documentation is a federal requirement for specific programs
 - The standard around 256k encryption
 - This has been removed



Program Review & Certification

MONITORING GUIDE UPDATES

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Monitoring Guide Updates

Monitoring Guide for Subrecipients – updates approved January 2023

- **Administrative Process**
 - CSB may review additional client files at our discretion
 - Partner agencies must upload policies and other requested document updates to Submittable one week prior to the review
- **Data Treatment Guidance**
 - The review timeframe example was updated. A change in the annual review month may extend the timeframe
 - Signed client acknowledgement for electronic data collection/consent forms was removed from the file review Updates
- Fiscal, Personnel, Governance Guidance
 - Enhanced risk includes recurring invoice findings
 - Added documentation of indemnification and proof of insurance
 - Federal-funded payroll is reviewed during monthly invoice monitoring and sampling of non-federal funded programs will be reviewed during PR&C
 - Financial review includes consistency with eligible and ineligible cost matrices



Monitoring Guide Updates

Monitoring Guide for Subrecipients – updates approved January 2023

- Exhibit 1 Selected Data Elements
 - The table was updated with new source documents and review process
 - Notes were added to each data element to show the source documentation that will be reviewed
 - Race data element was removed
 - Project move-in, engagement date, disability type, and interim assessment were added for applicable program types
- Exhibit 2 Determining Findings and Actions
 - Shelter habitability inspection was added

Ask questions - we want the review to be as easy as possible and want to help with any aspect of compliance prior to, during, and after the PR&C



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STANDARDS UPDATES

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A – Organizational Structure, Management, & Personnel



- The individual on the board with relevant, lived homeless experience must review the agency's program description annually not reviewed this year
- Added guidelines for subrecipient or contractor conflict of interest disclosures
- Updated the drug free workplace monitoring method to post the policy at all work sites instead of reviewing signed copies of employee acknowledgements
- Clarified that the disaster recovery and crisis communication plan is updated annually, if necessary
- Included additional examples of board updates regarding the homeless system
- Noted trainings that are optional or provided by CSB and added traumainformed care trainings



D – Fiscal Administration

Updated D1, D2, D4, D5, D6, D7, D8, D9, D10

- Items from the internal control questionnaire will be discussed during the review
- Added timeliness of invoices and documentation requests and ensuring a process to guarantee all program invoices are submitted monthly
- Clarified when federal funded versus non-federal funded program expenses are reviewed
- Clarified equipment purchase approvals
- Clarified federal cash is not held more than 3 working days
- Included the partner and vendor leadership demographic form review
- Added vending and laundry machines to program income guidelines
- Audit guidelines now include follow-up and remedy of findings
- Physical inventory guidelines include the option to have a policy for equipment not purchased with federal funds
- Procurement policy includes recusal of decision-making for conflicts of interest



E – Program Operations

Updated E1, E2, E3, E6, E7, E9, E10, E11, E12, E14

- Housing first and voluntary disability-related services standards and policies were combined. Guidelines include shelter client participation and service restriction requirements
- PSH and RRH eligibility includes homelessness documentation at enrollment
- Outreach program type was added to annual service assessments
- Program discussion includes admissions criteria for DV and Team USHS
- Client survey topics include access to nutritious and dietary appropriate food
- Marketing materials uploaded to Submittable prior to the review
- Cultural competency plan is now tier 1 and monitored by reviewing the plan and discussion of the implementation
- Food provision standard will be monitored in 2023; agencies to explain how clients are provided sufficient and nutritious food



F – Clients Rights



- Client right in self-determination in goals includes no preconditions on housing assistance
- Client rights document to include the Client Rights Officer contact information
- Added guidelines and policy review to confirm that program fees aren't charged for program participation
- Clarification of termination notice requirements for PSH, TH, RRH, and HP
- Clarified that RRH clients who become unhoused while in program must be exited and re-enrolled
- Youth program type age updated to 0-24



G- Services Planning



- (IHSP updated for shelters to complete within 5 business days and all other program types at first appointment with a case manager
- (IHSP guideline clarifies that shelter clients must engage in working on goals.
- Updated referral agency examples
- Clarified youth ages
- Clarification that shelter and TH staff complete or have access to HAST for each client and can be updated as client needs and vulnerability change
- Added Outreach and HP program types to HAST requirement. HP will be reviewed for screening/referrals and assessment/enrollment forms, but not monitored this year
- Severe Service Needs Assessment to be completed as needed by Outreach and RRH if client should be referred to USHS



H – Housing



- Added guideline that CoC programs cannot charge client program fees and that the tenant portion of rent is paid directly to the landlord/lessor
- Clarified that the agency responsible for determining client rent must document, assess, and verify the initial and annual tenant rent calculations
- Added guideline for when tenants are required to pay rent
 - Tenant must pay rent if they have income and a housing voucher or subsidy
- If supportive services are sub-granted or contracted out, the grantee/contractor is responsible for compliance
 - Grantee/contractor is also responsible for gathering all documentation needed for and during the PR&C
- Added 35% AMI threshold for CoC-funded RRH households
- Updated VAWA notification guidelines at termination/exit
 - Even if client voluntarily exits the program, client file should contain notification of VAWA form at exit



J – Facilities

Updated J2, J3, J4, J5, J7, J11, J17

- Added carbon monoxide detector requirement in housing
- Added NARCAN/fentanyl strips requirement for shelters
- Guideline added for bathroom and kitchen cleaning schedules in shelters



K - DCA and M - Data



Direct Client Assistance

Updated K1, K2, K3

- Updated guidelines to include DCA certification and client identification
- Financial assistance monitoring method includes HMIS or case note verification
 that client moved into unit



Data Collection

Updated M3, M5, M15, M20, M21

- Clarified client acknowledgement form refusal inference and removed review of client files for this form
- Removed guideline for intake data being captured directly in HMIS for PSH and RRH
- Removed encryption types
- IT staff to certify restriction of simultaneous workstation log-ons
- IT staff to certify antivirus software on all workstations



M5 - Source Documentation

Demographics

- PSH/RRH ID/Birth Certificate/Social Security Card required.
- Other Projects Data form if above not available

Pregnancy Status & Due Date

For projects that specifically serve pregnant women, proof of eligibility required – doctor note, etc.

Prior Living Situation

- PSH/RRH Case notes. Must make sense based on program eligibility
- Other projects Data form. Must make sense based on program eligibility

Relationship to HoH

o CSB reviews reasonableness based on household composition

Project Start & Exit Dates

- PSH/RRH Case notes or other enrollment/exit documents
- Other projects Data form or above

Project Move-In Date

 PSH/RRH – Lease start date or case notes confirming date if different than lease. HMIS should reflect true Move-In Date



M5 - Source Documentation

Engagement Date

- Outreach only. Reviewed via client data form or case notes
- Exit Destination
 - Reasonableness based on case notes or other exit documentation
- Employment Status
 - Reasonableness based on income types
- Income Amounts & Sources (collected at entry, annual review, and exit)
 - PSH/RRH Third party documentation of income such as pay stubs, SSI/SSDI award letter, sworn income statement when no other documentation is available
 - Other projects Data form or above
- Disabling Condition
 - PSH Certificate of Disability
 - Other projects Data form or above
 - Disability type should have consistency with this field. A "Yes" value for Disabling Condition should result in at least one Disability Type marked as "long-term"
- Annual Review Date
 - o HMIS assessment date must be within allowable timeframe. Very helpful if indicated in case notes



M5 - Data Accuracy Scoring

Each reviewed data field is worth 1 point.

- If HMIS value is able to be confirmed via source documentation, the point is earned
- If no source documentation is available or source documentation does not match the HMIS value, the point is not earned
- Keep in mind not all clients have the same number of possible points. This is dependent on factors such as client age (adult vs child), Relationship to HoH, and whether the client is open or exited from the program at the time of review

Data accuracy percentage is calculated per program by dividing the total earned points by the total possible points (number of fields reviewed)



M5 - Data Accuracy Scoring

Example: A program has 10 clients with a total of 250 data fields being reviewed. There are 16 discrepancies between source documentation and HMIS

The data accuracy score would be (250 - 16)/250 = 234/250 = 94%

Compliance with Standard M5 requires an overall data accuracy of 95% or higher per program, so the program in the example above would be non-compliant



Program Review & Certification

SCHEDULING

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Scheduling for PR&C 2023

- Scheduling is in progress for PR&C 2023, expect an Outlook invite by the end of the week (Friday 3/3/23)
- Partners have the option of being in person or virtual; wherever the Partner prefers
 - For example, file review can be in person and fiscal review can be via Zoom or all could be in person or all virtual



Questions?



2023 PR&C Documentation Resources

Housing Materials

- Direct Client Assistance Resources
- Fair Market Rent and Rent Reasonableness calculator
- Utility Allowances
- Habitability and housing quality standards inspection forms
- Lead-based paint and carbon monoxide resources
- VAWA Resources

Homeless Crisis Response System Policies and Procedures

- Annual PSH Provider Assessment of Services Needs and Utilization
- Outreach business rules

Shelter Materials

Housing Assistance Screening Tool (HAST)





2023 PR&C Documentation Resources

CSB monitoring materials

- Monitoring guide
- PR&C required documentation
- Standards
- Documentation of homelessness and risk of homelessness.
- Board of trustees participation form and resources
- Occupancy fee and RRH annual income calculators
- Individualized Housing Stabilization Plan examples (IHSP)

CoC Interim Rule (<u>24 CFR Part 578</u>) and the ESG Interim Rule (<u>24 CFR Part 576</u>)

