Written Standards and Policies and Procedures for ESG and CoC Funded Programs August 2022\*

**Commonwealth of Massachusetts Executive Office of Housing and Livable Communities, Division of Housing Stabilization (\*Updated June ‘23)**

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INTRODUCTION

The Executive Office of Housing and Livable Communities (EOHLC), the ESG recipient for the Commonwealth of Massachusetts, along with the Massachusetts Balance of State CoC, have developed the following written standards, which are applicable to all rapid re-housing projects that receive Continuum of Care (CoC) or Emergency Solutions Grant (ESG) funds, as well as other EOHLC ESG-funded programs. These written standards are intended to set basic, minimum requirements. Providers are permitted to build upon these expectations and establish more specific standards applicable to their own projects, so long as those standards are informed by equity and maintain a Housing First philosophy. Projects remain bound by the terms of the programs under which they are funded and nothing in these standards should be construed to relieve projects of this responsibility. In addition, all rapid re-housing projects must comply with the applicable Notice of Funding Availability (NOFA) under which the project was originally awarded.

The goal of these standards is to synthesize key regulatory elements with the processes and priorities of EOHLC and to ensure that rapid re-housing and homelessness prevention projects are administered fairly and methodically. Note that rapid re-housing programs are subject to differing requirements, depending upon the funding source of the program, and this document points out the details of these programmatic differences. EOHLC will continue to build upon and refine this document through regular, publicly released updates.

The additional funding award provided through ESG-CV, as well as [HUD waivers](https://files.hudexchange.info/resources/documents/COVID-19-Homeless-System-Response-ESG-CV-Notice-CPD-22-06-Quick-Reference-Guide.pdf) granted to address the challenges of COVID-19, add some additional nuances to activities, program operation, and documentation. These differences are called out in the document when pertinent.

For more information on the ESG-CV waivers and flexibilities, see  [ESG-CV Notice CPD-22-06](https://files.hudexchange.info/resources/documents/COVID-19-Homeless-System-Response-ESG-CV-Notices-CPD-22-06-and-CPD-21-08-Summary.pdf). If you have additional questions about the applicability of the waivers or flexibilities for ESG-CV please contact your designated contact at EOHLC.

### STATE CONTACTS

|  |  |  |
| --- | --- | --- |
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#### EXTERNAL COMMUNICATIONS

It is important to Map out communication channels with external parties. Much of the routine communications has been mapped out in the processes above, but situations arise that require communication that are not delineated above.

|  |  |  |  |
| --- | --- | --- | --- |
| External Party | Reason for Communication | Primary Communicator | Back-up / Communicator |
| Subrecipient / Provider | PVs or Contracts | ESG Contract Manager | Director of Individual Homelessness |
| HUD | Reporting, Grants | ESG Contract Manager | Director of Individual Homelessness |
| State Agency Partner | All | ESG Contract Manager | Director of Individual Homelessness |

\*Communications may be delegated by the Primary Communicator in specific situations.

# PREFACE: GLOSSARY OF TERMS USED IN THIS DOCUMENT

**Coordinated Entry**

Coordinated entry is a process developed to ensure that all people experiencing a housing crisis have fair and equal access and are quickly identified, assessed for, referred, and connected to housing and assistance based on their strengths and needs.

**ESG-CV**

Emergency Solutions Grants Program (ESG) under the Coronavirus Aid, Relief, and Economic Security Act (CARES Act). Funds must be used to prevent, prepare for, and respond to coronavirus, among individuals and families who are homeless or receiving homeless assistance and to support additional homeless assistance and homelessness prevention activities to mitigate the impacts created by coronavirus. All requirements at 24 CFR Part 576 will apply to the use of these funds, unless otherwise provided by the alternative requirements and flexibilities established under the CARES Act.

**Family**

Family is any self-identified family unit regardless of marital status, actual or perceived sexual orientation, or gender identity, any group of persons presenting for assistance together with or without children and irrespective of age, relationship, or whether or not a member of the household has a disability. A child who is temporarily away from the home because of placement in foster care is considered a member of the family. Section 576.102(b) of the ESG interim rule prohibits ESG-funded programs from denying a family admission to an ESG-funded program or ESG-funded services based on the age of a child under the age of 18 if the program provides services to families with children. Similar requirements for CoC programs can be found in Section 578.93(e) of the CoC Program Interim Rule.

**Homelessness Prevention**

Homelessness Prevention refers to activities designed to keep households that are at-risk of losing their housing from becoming homeless. Homelessness prevention services include

housing relocation and stabilization services and/or short- and/or medium-term rental assistance as necessary to prevent the individual or family from moving to an emergency

shelter, a place not meant for human habitation, or another place described in “category one” (literally homeless) of the homeless definition. It is most efficiently implemented when

targeted to those at greatest risk of losing housing. Refer to the Documentation and Recordkeeping section of this document for the at-risk definition, and documentation requirements.

**Household Types**

HUD categorizes households into three separate groups regardless of marital status, actual or perceived sexual orientation, or gender identity and irrespective of age or relationship.

1. Household without Children
2. Household with Adults and Children
3. Household with ONLY Children

**Housing First**

Housing First emerged as an alternative to the linear approach in which people experiencing homelessness were required to first participate in and graduate from short-term residential and treatment programs before obtaining permanent housing. In the linear approach, permanent housing was offered only after a person experiencing homelessness could demonstrate that they were “ready” for housing. By contrast, Housing First is premised on the following principles:

* Homelessness is first and foremost a housing crisis and can be addressed through the provision of safe and affordable housing.
* All people experiencing homelessness, regardless of their housing history and duration of homelessness, can achieve housing stability in permanent housing. Some may need very little support for a brief period of time, while others may need more intensive and long-term supports.
* Everyone is “housing ready”, regardless of drug or alcohol use, compliance in behavioral health treatment, or criminal history. Homelessness programs and housing providers must be “consumer ready.”
* Many people experience improvements in quality of life as a result of obtaining housing.
* People experiencing homelessness have the right to self-determination and should be treated with dignity and respect.
* The exact configuration of housing and services depends upon the needs and preferences of the individual household.

**Permanent Housing**

Permanent housing is community-based housing without a designated length of stay and can include permanent supportive housing and rapid re-housing.

**Progressive Engagement**

Progressive Engagement is a service approach to helping households end their homelessness as rapidly as possible, despite barriers, with minimal financial and support resources. More supports are offered to those households who struggle to stabilize and cannot maintain their housing without assistance.

**Racial Equity**

Racial equity is the condition that would be achieved if racial identity no longer statistically predicted outcomes for individuals. At a systems level, achieving equity means eliminating policies, practices, attitudes, and cultural messages that reinforce differential outcomes by race. In the homelessness arena, equity would mean that the race and ethnicities of people experiencing homelessness roughly reflected local demographics. National data tells us the significant inequities exist as Black, Indigenous and People of Color are far overrepresented in the homelessness system. CoCs and provider organizations are encouraged to review data regularly to understand and address inequities in representation, access to services and housing outcomes.

**Rapid Re-Housing**

Rapid Re-Housing is a short-term intervention to help individuals and families exit homelessness as quickly as possible, move into permanent housing, and achieve stability in housing. Refer to the Documentation and Recordkeeping section of this document for detailed rapid re-housing program eligibility. To be defined as rapid re-housing, a project must be comprised of the following three core components: housing identification assistance, financial assistance, and case management and supportive services. High quality rapid re-housing programs help increase the number of people communities can serve by reducing the length of shelter stays, which frees up crisis beds for others in need, reduces the negative impacts of long-term homelessness, and connects people to other community assistance to improve overall well-being and increase self-sufficiency.

**Rent Reasonableness and Fair Market Rent (FMR)**

Rental assistance cannot be provided for a housing unit unless total rent for the unit is at or under the fair market rent (FMR) established by HUD, as provided under 24 CFR 982.503. The total rent for the unit must also comply with HUD’s standard of rent reasonableness, as established under 24 CFR 982.507. These rent restrictions are intended to ensure that program participants can remain in their housing after their assistance ends. In many areas, the easiest way to determine rent reasonableness is to use a housing database search engine that will compare units and rents against one another. Other local resources may also be used to obtain information, such as market surveys, classified ads, and information from real estate agents. When comparing rent reasonableness, the proposed unit must be compared to three other units. Rent reasonableness and FMR requirements do not apply when a program participant receives only financial assistance or services under Housing Stabilization and Relocation Services. This includes rental application fees, security deposits, an initial payment of last month’s rent, utility payments/deposits, moving costs, housing search and placement, housing stability case management, landlord‐tenant mediation, legal services, credit repair.

Note that this guidance only applies to ESG homelessness prevention and rapid re-housing. For CoC rapid re-housing, rent reasonableness applies, but FMR does not. Please consult the following [HUD Exchange resource](https://www.hudexchange.info/resource/4424/coc-rent-reasonableness-and-fair-market-rent/) for more information.

**Recipient**

EOHLC, the ESG recipient for the Commonwealth of Massachusetts.

**Provider/ Subrecipient**

A local government or private nonprofit organization to which the recipient, EOHLC, awards ESG grant funds**. For the purposes of this document, the term provider refers to any agency administering rapid re-housing or homelessness prevention, regardless of funding source.**

**Sub-provider**

For the purposes of this manual and guidance, when providers enter into formal partnerships with another agency to provide some or all of the services identified in the project application, the partner agency is referred to as a Sub-provider. For sub-provider relationships, all required processes, policies and documentation outlined here are still required. Because the provider is responsible for ensuring adherence to program rules, providers are encouraged to clearly outline responsibilities via MOU or other written documentation for all partnerships.

Sub-provider partnerships must be reviewed and approved by EOHLC.

**Trauma Informed Care**

A trauma-informed approach begins with understanding the physical, social, and emotional impact of trauma on the individual, as well as on the professionals who partner with them. It incorporates three elements: 1. Realizing the prevalence of trauma. 2. Recognizing how trauma affects all individuals involved with the program, organization, or system, including its own workforce. 3. Responding by putting this knowledge into practice. Because homelessness and the threat of becoming homeless can be a crisis of major significance, stabilizing a person in housing requires case managers who understand the impact of trauma and stress on participants’ emotional, behavioral, and cognitive capacity. Until the housing crisis is resolved and the participant’s stress is decreased, case managers should support the household in setting short-term, achievable, and appropriate goals instead of focusing on longer-term goals. While many of these symptoms of stress will subside once the crisis is resolved, the case manager must be skilled at assessing participants’ various and changing levels of ability to carry out goals and action steps. The case manager should focus on the essential steps required to end the housing crisis.

**Victim Service Provider**

A victim service provider is a private nonprofit organization whose primary mission is to provide direct services to victims of domestic violence, dating violence, sexual assault, or stalking. This term includes permanent housing providers—including rapid re-housing, as well as other domestic violence programs and related advocacy and supportive services programs.

# EOHLC PROGRAM BACKGROUND, PURPOSE AND PHILOSOPHY

The US Department of Housing and Urban Development (HUD), via its Emergency Solutions Grant Rules and Regulations (ESG) and the Homeless Emergency Assistance and Rapid Transition to Housing (HEARTH) Continuum of Care Program Interim Rules, requires that Continuum of Care (CoC) establish and consistently follow written standards for providing CoC and ESG assistance. The Commonwealth of Massachusetts, through the Department of Housing and Community Development, has developed these Program Standards to help fulfill these requirements and to support HUD’s goal of reducing and ending homelessness across the United States. In addition to meeting federal requirements, these standards will also help ensure more consistent use of best practices and help to standardize program design and implementation of our rapid re-housing projects across the statewide homeless response system. This manual is intended to provide both written standards and further clarify policies and procedures that inform service expectations for EOHLC providers.

**Note:** COVID-19 has amplified the historic and current racial biases and discrimination embedded in our systems, processes, and practices. The disparities in deaths among Black, Indigenous and People of Color have been staggering. EOHLC is committed to using the resources available through ESG-CV to address these disparities and to promote equity in access and outcomes in housing and homelessness programs.

# PROGRAM ELIGIBILITY (SEE RECORDKEEPING SECTION FOR NECESSARY DOCUMENTATION PROCEDURES)

It is the responsibility of the provider to confirm and document eligibility for ESG and CoC programs prior to providing services. The recordkeeping section of this manual further outlines documentation expectations.

|  |  |  |
| --- | --- | --- |
| **Component** | **Serving** | |
| Literally Homeless Individuals and Families | Homeless Individuals and Families at Risk of Homelessness |
| **Street Outreach** | X |  |
| **Emergency Shelter** | X |  |
| **Rapid Rehousing** | X |  |
| **Homeless Prevention** |  | X |
| **Permanent Supportive Housing** | X | X |
| **TH-RRH Component Projects** | X |  |
| **Transitional Housing** | X |  |

**Street Outreach**

To receive ESG funded emergency shelter services, participants must meet paragraph 1 of the of the [HUD definition for homelessness.](https://files.hudexchange.info/resources/documents/HomelessDefinition_RecordkeepingRequirementsandCriteria.pdf)

**Emergency Shelter**

To receive ESG funded emergency shelter services, participants must meet paragraph 1 of the of the [HUD definition for homelessness.](https://files.hudexchange.info/resources/documents/HomelessDefinition_RecordkeepingRequirementsandCriteria.pdf)

**Rapid Re-housing**

To receive ESG or CoC funded rapid re-housing services, participants must meet paragraph 1 of the [HUD definition for homelessness.](https://files.hudexchange.info/resources/documents/HomelessDefinition_RecordkeepingRequirementsandCriteria.pdf)

**Homelessness Prevention**

To receive ESG funded homelessness prevention services, participants must meet the criteria under the “at risk of homelessness” definition, or meet the criteria in paragraph (2), (3), or (4) of the “homeless” definition in 24 CFR §576.2 **and** have an annual income below 30 percent of median family income for the area, as determined by HUD and found [here](https://www.hudexchange.info/programs/home/home-income-limits/). Costs of homelessness prevention are only eligible to the extent that the assistance is necessary to help the program participant regain stability in the program participant's current permanent housing or move into other permanent housing and achieve stability in that housing.

**ESG-CV Changes to Homelessness Prevention Eligibility**

Clients with an annual income at or below 50 percent of median family income for the area, as determined by HUD, qualify for assistance under “at risk of homelessness” and paragraphs (2), (3), or (4) of the “homeless” definition in 24 CFR 576.2 if being served with ESG-CV or ESG used to prevent, prepare for or respond to COVID-19. Note that changes in income eligibility determination is prospective, not retrospective. This means that income should be assessed at the time of program entry moving forward, rather than looking at past income or earnings.

# ACCESS TO SERVICES

It is required that ESG and CoC-funded programs or projects within the Continuum of Care's area use that system’s coordinated entry process and structure. EOHLC and the provider must work with the Continuum of Care to ensure the screening, assessment and referral of program participants are consistent with the written standards established by the EOHLC and the requirements outlined by the U.S. Department of Housing and Urban Development via Notice [CPD-17-01](https://www.hud.gov/sites/documents/17-01CPDN.PDF). A victim service provider (VSP) may choose not to use the Continuum of Care's coordinated entry system so long as the established alternative process meets HUD's requirements. Services and housing options should be made available in a way that ensures equitable access by all eligible participants. Providers should actively market available resources to populations least likely to access services and in a way that ensures the information is accessible to all people in the geographic area. When bringing clients into the housing programs, the immediate services delivery should follow a Housing First philosophy. Eliminating or limiting barriers to program entry will help the provider serve the clients with the highest housing needs. In situations where the local coordinated entry system is not functioning, or there is not clearly defined processes and structures, subrecipients are expected to follow the prioritization guidance included in Notice [CPD-16-11](https://www.hud.gov/sites/documents/16-11CPDN.PDF) to ensure effective targeting of rapid re-housing and prevention resources.

**Prioritization**

Coordinated Entry assists the CoC in matching participants to appropriate resources based on individual needs and preferences. Priority for housing opportunities are determined through the use of the Coordinated Entry Quick Screen, Coordinated Entry Assessment, and Housing Preference Form built into the CoC’s HMIS, VESTA. The system prioritizes by screening for basic eligibility and housing preferences, and then prioritizes participants for housing openings based on their vulnerability score and the region of their choice. Referrals for permanent supportive housing, transitional housing, and rapid rehousing are governed by the outcome of this assessment which provides a vulnerability score based on the answers to a series of standardized questions.

1. CE Quick Screen only refers homeless households who are the most vulnerable and the least likely to self-resolve into the CES. By not requiring all interested parties to complete a full CE Assessment, this step saves staff and participant’s time.
2. Participants with the highest CE Assessment scores are deemed to be the most vulnerable and will be prioritized for all Permanent Supportive Housing opportunities. This approach ensures an appropriate match between the most intensive services and the people least likely to succeed with a less intensive intervention.
3. Participants with mid-range CE Assessment scores will be prioritized for CoC and ESG-funded Rapid Re-Housing projects that provide moderate to intensive services and/or a longer enrollment period.
4. Participants may be eligible to receive Emergency Solutions Grant (ESG)-funded “Light Touch” Rapid Re-Housing resources based on their need for short-term housing resources as indicated in their CE Assessment and prioritized based on having secured housing. If there are not enough ESG resources to accommodate all eligible applicants, the remaining resources are targeted to those with the highest CE score.
5. If two or more homeless households within the same geographic area are identically prioritized for the next available unit, the CoC selects the household with the greatest length of time homeless in the determination of which household receives a referral to the next available unit. The CoC’s selection would also be based on the household who is document ready and respond first.

This comprehensive approach to the targeting of housing resources is designed to reduce the average length of episodes of homelessness and result in better housing outcomes for all. Participants targeted for Permanent Supportive Housing based on their CE score may be offered a less service intensive housing resource (e.g., transitional housing or Rapid Rehousing) if deemed appropriate to address concerns over the excessive length of the waitlist for Permanent Supportive Housing.

**ESG-CV Changes to Emergency Shelter Access to Services**

Shelters funded by ESG-CV may not turn away eligible program participants and must establish referral pathways to other shelter or housing if the shelter is at maximum capacity. Shelters must establish referral pathways to isolation and quarantine if a client is in need of such services.

**What populations need to be prioritized for permanent housing due to COVID-19?**

During this public health crisis, people at high risk of developing severe COVID-19 symptoms (those 65+ and people of all ages with underlying medical conditions, per the CDC) are at higher risk of death than most others living in congregate settings or unsheltered. Rehousing this high-risk population will limit the spread and impact of COVID-19, so prioritization policies should support swift assessment and rehousing for anyone meeting ANY of the risk factors indicated by the CDC. CoCs should continue working with local health partners, including public health authorities, and monitoring CDC guidance to maintain an updated understanding of who is most vulnerable to severe illness or death from COVID-19 and adjust prioritization criteria as appropriate.

**Use of Coordinated Entry for Homelessness Prevention Services**

The coordinated entry process may include separate access point(s) for homelessness prevention so that people at risk of homelessness can receive urgent services when and where they are needed. Written policies and procedures must describe the process by which persons will be prioritized for referrals to homelessness prevention services.

# HOMELESS MANAGEMENT INFORMATION SYSTEM (HMIS)

HUD uses information gathered from CoC’s, ESG Recipients, and HMIS Lead Agencies to make funding decisions, set performance goals for projects assisting the homeless or those at risk of becoming homeless, and to report to Congress on the progress of ending homelessness.

A Homeless Management Information System (HMIS) is a local information technology system used to collect client-level data and data on the provision of housing and services to homeless individuals and families and persons at risk of homelessness. HUD does not prescribe which system to use, but through guidance documents such as the [HMIS Data and Technical Standards](https://www.hudexchange.info/programs/hmis/hmis-data-and-technical-standards/%20), it spells out what a system must be capable of doing to be considered an HMIS or a comparable database. Each CoC is responsible for selecting an HMIS software solution that complies with HUD's data collection, management, and reporting standards.

Recipients and providers of ESG or CoC funding are required to collect and record all HUD required data elements into the CoC designated HMIS. Per HUD regulations, domestic violence and victim service providers (VSP) or legal services providers (LSP) must use a HMIS comparable database. Providers using a comparable database are responsible for ensuring that their chosen HMIS is able to produce the required HUD reports (CAPER or APR) and csv data files for submission to HUD.

For ESG providers, compliance with HMIS standards will be documented through timely and accurate submission of quarterly and annual reports to EOHLC.

**Please also refer to your local CoC HMIS Policies and Procedures to make sure your project is in compliance with system security, training, licensing, data quality and any other required elements for participating in HMIS.** Costs for participating in the local HMIS are eligible grant expenditures if included in the project budget.

**Annual Performance Reports (CoC Only)**

CoC programs are required to submit Annual Performance Reports (APR) to HUD at the end of each operating year. APRs combine financial and client-level (HMIS) data to demonstrate the outcomes and success of each project. Reports are due within 90 days after the end of the operating year in a format and program designated by HUD.

**Caper Reporting (ESG Only)**

The Consolidated Annual Performance and Evaluation Report (CAPER) is filed annually with HUD by EOHLC using data submitted by ESG providers. The CAPER reports program outcomes to HUD for both expenditures and clients served.

|  |  |
| --- | --- |
| **Required Quarterly** | **Required Annually** |
| CAPER report | CAPER report |
| Actual outcomes for the reporting period (submitted on the projected outcomes table included in your contract.) | CAPER data (actual .CSV files to be uploaded into Sage.) |

Please note: The process for running and submitting a CAPER report may change based on HUD reporting requirements and the HMIS vendor utilized by the provider. Questions about the CAPER report should be submitted to EOHLC or to your HMIS lead agency.

**CAPER Reporting Due Dates**

Quarterly reports are due on the 10th of the month following each quarter. Annual reports are due on the 10th of the month following the contract expiration date. All reports should start on April 1st and end on the last day of the reporting period.

|  |  |
| --- | --- |
| Quarter 1 | July 10th |
| Quarter 2 | October 10th |
| Quarter 3 | January 10th |
| Quarter 4 & final contract period | April 10th |

**ESG-CV CAPER Reporting**

For projects utilizing ESG CV funds, HUD requires reporting results on a quarterly basis, but also cumulatively for the grant term. Data is submitted to EOHLC directly from the HMIS Lead Agencies or each VSP/LSP using a comparable database. Financial reporting to EOHLC is required quarterly from providers for each project.

**Program Outcomes/System Performance Measures (RRH Only)**

Each CoC is responsible for submitting System Performance Measures (SPM) data to HUD annually. At this time, all RRH projects within a CoC contribute to the overall outcomes for the CoC as a whole. While HUD has not set specific SPM goals for RRH projects, the two primary areas that will improve the CoC SPMs are:

* reducing the length of time between when a client enters the RRH program and when they are able to move to a RRH unit, and
* providing sufficient stabilization services to households so they do not return to homelessness once the assistance ends.

# ORGANIZATIONAL POLICIES AND OTHER HUD REQUIREMENTS

In addition to program specific documentation Agency Recordkeeping and Reporting Requirements, providers must implement appropriate recordkeeping and reporting procedures to document that ESG funds are used in accordance with the requirements. These records must allow EOHLC and HUD to determine whether ESG requirements are being met. For a full list of required policies and documentation refer to Appendix B.

**Period of Record Retention**

Records related to each fiscal year of funds must be retained for six years. Documentation of each program participant's qualification as a family or individual at risk of homelessness or as a homeless family or individual as well as other program participant records must generally be retained for six years after the expenditure of all funds from the grant under which the program participant was served.

Where the ESG funds that are used for the renovation of an emergency shelter exceed 75 percent of the value of the building before renovation, records must be retained until 10 years after the date that ESG funds are first obligated for the renovation.

Where the ESG funds that are used to convert a building into an emergency shelter exceed 75 percent of the value of the building after conversion, records must be retained until 10 years after the date that ESG funds are first obligated for the conversion.

**Provider Monitoring**

Monitoring should be viewed, not as an annual or periodic exercise, but as an ongoing process involving continuous communication and evaluation. Such a process involves frequent telephone/email contacts, written communications, analysis of reports and audits, and periodic meetings. It is the responsibility of EOHLC or HUD reviewers to keep fully informed concerning participant compliance with program requirements and the extent to which technical assistance is needed.

The goal of monitoring is to determine compliance, prevent/identify deficiencies and design corrective actions to improve or reinforce program participant performance. Monitoring also provides opportunities to identify program participant accomplishments as well as successful management/ implementation/evaluation techniques that might be replicated by other program participants.

Using a risk analysis tool, EOHLC determines which providers need to be monitored and what type of monitoring is necessary. The risk analysis relies on information related to provider past performance, staffing changes, or reported concerns from technical assistance communications. Other date related to expenditures and CAPER outcomes are also utilized to inform the risk analysis process.

EOHLC performs three types of formal monitoring (desk review, on-site review, combination) depending on the level of risk identified for the provider each year. In addition, reviews are conducted with each invoice submission by the provider. Providers are encouraged to reach out to EOHLC at any time for program clarification or interpretation. It is not necessary to wait for a program monitoring to address issues of concern. For more information on monitoring, see [Monitoring Section](#_Project_Monitoring) of this document.

**Lead-Based Paint Requirements [24 CFR 35.700-730 (PBRA); 24 CFR 35.1000-1020 (Supportive Services);24 CFR 35.1200-1225 (TBRA); 24 CFR 576.403(a).**

All HUD-funded programs with housing units occupied by participants are required to incorporate lead-based paint remediation and disclosure requirements. Generally, these provisions require the provider to screen for, disclose the existence of, and take reasonable precautions regarding the presence of lead-based paint in leased or assisted units constructed prior to 1978.

CoC-funded units are required to incorporate HUD regulations in 24 CFR part 35, subparts A, B, K, and R. ESG-funded projects are required to incorporate the Lead-Based Paint Poisoning Prevention Act (42 USC 4821-4846), the Residential Lead-Based Paint Hazard Reduction Act of 1992 (42 USC 4851-4846), and 24 CFR part 35, subparts A, B, H, J, K, M, and R in the unit.

**Habitability Standards (Emergency Shelter) [24 CFR 576.403(b)] (ESG Rapid Re-Housing and Homeless Prevention) [24 CFR 576.403(c); 24 CFR 576.500(j)**

The Emergency Solutions Grants (ESG) Program interim rule, at 24 CFR 576.403, establishes minimum standards for safety, sanitation, and privacy in emergency shelters funded with ESG, and minimum habitability standards for permanent housing funded under the Rapid Re-housing and Homelessness Prevention components of ESG.

**Note:** The same standards apply regardless of the amount of ESG funds involved. Providers should use the [ESG Minimum Habitability Standards for Emergency Shelters and Permanent Housing Checklist.](https://view.officeapps.live.com/op/view.aspx?src=https%3A%2F%2Ffiles.hudexchange.info%2Fresources%2Fdocuments%2FESG-Emergency-Shelter-and-Permanent-Housing-Standards-Checklists.docx&wdOrigin=BROWSELINK)

Emergency Shelter [24 CFR 576.403(b)]

Any emergency shelter that receives ESG funds for shelter operations (including maintenance or minor or routine repairs) must meet the minimum safety, sanitation, and privacy standards as indicated in 24 CFR 576.403(b). Documentation of compliance with the minimum standards for emergency shelter activities must be maintained.

**Note:** If ESG-CV funds are used for renovation or shelter operations, the building must meet the meet the minimum safety, sanitation, and privacy standards as indicated in 24 CFR 576.403(b). Habitability and environmental reviews are not required for temporary emergency shelters.

ESG Rapid Re-Housing and Homeless Prevention [24 CFR 576.403(c); 24 CFR 576.500(j)

Housing for all ESG program participants receiving rental assistance must meet HUD minimum habitability standards for permanent housing. Providers must document compliance with this standard by signing and completing a Habitability Standards Checklist before the participant signs the lease and before the provider provides any ESG rental assistance or services specific to the unit. In addition, subrecipients must inspect all units at least annually to ensure that the units continue to meet habitability standards.

If an eligible household needs homelessness prevention assistance to remain in its **existing unit,** the assistance can only be provided if that unit meets the minimum standards.

If an eligible household needs homelessness prevention or rapid re-housing assistance to move to a **new unit**, the assistance can only be provided if the new unit meets the minimum standards. The unit the household is leaving does not need to be inspected.

**Federal Fair Housing Act and Affirmative Outreach Disabilities Act**

Title VIII of the Civil Rights Act of 1968 (Fair Housing Act), as amended, prohibits discrimination in the sale, rental, and financing of dwellings, as well as in other housing related transactions based on race, color, national origin, religion, sex, familial status (including children under the age of 18 living with parents or legal custodians, pregnant women, and people securing custody of children under the age of 18), and disability. Agencies must comply with all applicable fair housing and civil rights requirements in 24 CFR 5.105(a). For additional information, please see the HUD page on the [Fair Housing Act.](https://www.hud.gov/fairhousing)

Agencies must make known that ESG rental assistance and services are available to all on a nondiscriminatory basis and ensure that all citizens have equal access to information about ESG and equal access to the financial assistance and services provided under this program.

Each provider must take reasonable steps to ensure meaningful access to programs to persons with limited English proficiency (LEP), pursuant to Title VI of the Civil Rights Act of 1964. This may mean providing language assistance or ensuring that program information is available in the appropriate languages for the geographic area served by the jurisdiction and that limited English proficient persons have meaningful access to ESG assistance.

To assist the agencies, HUD published the “Final Guidance to Federal Financial Assistance Recipients Regarding Title VI Prohibition Against National Origin Discrimination Affecting Limited English Proficient Persons” (72 42 Federal Register 2732; January 22, 2007). This document can be accessed at the following website: <https://www.nhlp.org/files/Limited%20English%20Proficiency%20Outline%20%20(2--6.17.09).pdf>.

In addition, all notices and communications shall be provided in a manner that is effective for persons with hearing, visual, and other communication-related disabilities consistent with section 504 of the Rehabilitation Act of 1973 and implementing regulations at 24 CFR 8.6.

If the procedures that the provider intends to use to make known the availability of the rental assistance and services are unlikely to reach persons of any particular race, color, religion, sex, age, national origin, familial status, or disability who may qualify for such rental assistance and services, the provider must establish additional procedures that will ensure that such persons are made aware of the rental assistance and services.

In addition to the policies outlined above subrecipients must also comply with the following other federal requirements:

* Uniform Administrative Requirements
* Equal Employment Opportunity Programs
* Minority Business Enterprises
* Nondiscrimination in Federally Assisted Programs
* Age Discrimination
* Women’s Business Enterprise
* Drug Free Workplace Act
* Debarred Suspended
* Section 504 of the Rehabilitation Act
* Americans with Debarred, Suspended, Ineligible Contractors
* Section 6002 of the Solid Waste
* Disposal Act, as amended by the Resource Conservation and Recovery Act

**Environmental Review**

Per 24 CFR 576.407(d), HUD-assisted projects are required to comply with the National Environmental Policy Act (NEPA) by conducting an environmental review to determine the potential environmental impacts of a project or, if applicable, by documenting its categorical exclusion or exemption from this requirement.

Environmental reviews will be conducted by the ESG Program Coordinator, or other staff designated by the Federal Grants Manager. Environmental reviews will be completed upon the issuance of new contracts for projects established through an ESG procurement cycle or every five years, whichever comes first. The environmental review form can be located at [https://www.hudexchange.info/resource/3141/part-58-environmental-review-exempt-or-censt-format/.](https://www.hudexchange.info/resource/3141/part-58-environmental-review-exempt-or-censt-format/.%20)

For more information on ESG Environmental Reviews.

* [Levels of Environmental Review of ESG Components](https://files.hudexchange.info/resources/documents/Levels-of-Environmental-Review-for-ESG-Components-Matrix.pdf)
* [CoC and ESG Environmental Review Overview](https://www.hudexchange.info/homelessness-assistance/coc-esg-virtual-binders/coc-esg-environmental-review/coc-and-esg-environmental-review-overview/)

**Violence Against Women Act (VAWA)**

On November 16, 2016, HUD published the Violence Against Women Act (VAWA) final rule regarding housing protections for victims of domestic violence, dating violence, sexual assault, or stalking. This final rule prohibits an applicant for assistance or tenant assisted with ESG from being denied assistance under, denied admission to, terminated from participation in, or evicted from housing on the basis or as a direct result of the fact that the applicant or tenant is or has been a victim of domestic violence, dating violence, sexual assault or stalking, so long as the applicant otherwise qualifies for admission, assistance, participation or occupation [(24 CFR 5.2005 (b)(1)](https://www.law.cornell.edu/cfr/text/24/5.2005)).

In addition, the VAWA Final Rule requires that each housing provider produce a detailed emergency transfer plan, which ensures that a tenant receiving rental assistance through or residing in a unit subsidized under an ESG housing program who is a victim of domestic violence, dating violence, sexual assault, or stalking qualifies for an emergency transfer within the criteria stated in [24 CFR 5.2005 (e)(2).](https://www.law.cornell.edu/cfr/text/24/5.2005)

All EOHLC ESG housing providers must maintain records on emergency transfers requested under 24 CFR 5.2005(e). Documentation of emergency transfer requests can be completed using the optional [HUD Form 5383](https://view.officeapps.live.com/op/view.aspx?src=https%3A%2F%2Fwww.hud.gov%2Fsites%2Fdocuments%2F5383.DOCX&wdOrigin=BROWSELINK). MSHDA ESG housing providers are responsible to track data on the outcomes of each request and must be able to provide to MSHDA ESG program staff upon request.

All EOHLC ESG rental assistance activities must provide applicants and participants the ESG [Notice of Occupancy Rights Under the Violence Against Women Act (VAWA) Form](https://view.officeapps.live.com/op/view.aspx?src=https%3A%2F%2Fwww.hud.gov%2Fsites%2Fdocuments%2F5380.DOCX&wdOrigin=BROWSELINK). This MSHDA form satisfies VAWA Final Rule requirements.

Rental assistance programs must provide copies of the HUD Forms to the property owner or manager at the time of lease-up.

Additional Resources on VAWA:

* [Violence Against Women Act (VAWA) Resources.](https://masshousing.com/programs-outreach/community-services/knowledge-capacity-building/vawa)
* [Violence Against Women Act (VAWA) Massachusetts State Law and Housing: An Overview for Housing Providers](https://masshousing.com/-/media/Files/Community-Services/VAWA/MH_VAWA-Handbook.ashx)

**Involuntary Family Separation 24 CFR 576.102 4(b)**

Prohibition against involuntary family separation. The age, of a child under age 18 must not be used as a basis for denying any family's admission to an emergency shelter that uses ESG funding or services and provides shelter to families with children under age 18.

EMERGENCY SHELTER

# EMERGENCY SHELTER CASE MANAGEMENT AND SERVICE DELIVERY

Emergency shelter means any appropriate facility that has the primary use of providing temporary shelter for the homeless in general or for specific populations of the homeless and the use of which does not require occupants to sign leases or occupancy agreements. ESG funds may be used for the costs of operating an emergency shelter and providing essential services to sheltered homeless people (24 CFR Part 576.102).

Note: The purpose of ESG-CV funds is to prevent, prepare for, and respond to COVID-19 in order to prevent and mitigate the spread of COVID-19 among people experiencing homelessness and the staff that provide services to these individuals. This requires that existing shelters implement public health protocols such as enforcing social distancing, establishing an isolation space (especially for residents suspected of having COVID-19, those with confirmed cases, and high-risk residents such as elderly people and people with pre-existing health conditions), using personal protective equipment (PPE), and cleaning/disinfecting shared and living spaces. In many communities where existing shelter is not available or where current shelters are not able to implement these safety protocols, additional space may need to be identified to allow people to have shelter while staying as healthy as possible. This may be space within an existing shelter (e.g., an office not being used) that could be temporarily converted into a quarantine space for someone who has tested positive or is awaiting test results, or it could be an entirely separate building. Eligible shelter spaces may include public spaces, pop up or modular structures in compliance with U.S. Department of Housing and Urban Development (HUD) guidance.

**Trauma-Informed Care**

Case managers should use a trauma-informed and strengths-based approach. Because homelessness and the threat of becoming homeless can be a crisis of major significance, stabilizing a person in housing requires case managers who understand the impact of trauma and stress on participants’ emotional, behavioral, and cognitive capacity. Until the housing crisis is resolved and the participant’s stress is decreased, case managers should support the household in setting short-term, achievable, and appropriate goals instead of focusing on longer-term goals. While many of these symptoms of stress will subside once the crisis is resolved, the case manager must be skilled at assessing participants’ various and changing levels of ability to carry out goals and action steps. The case manager should focus on the essential steps required to end the housing crisis.

**Housing-Focused**

To effectively assist participant households in achieving housing stability, recipients and sub-recipients must provide ongoing housing-focused case management services. The primary objective of housing-focused case management is to extend support to participants, through an individualized case management relationship, that will ultimately translate to increased housing stability. Housing-focused case management delivery should include regular consultations with participants in individualized meetings, dedicated to assessing and reassessing needs, educating participants on program and community resource opportunities, developing housing stability plans, scheduling appointments, and providing necessary follow up to ensure housing stability plans are progressing on schedule and needs are adequately being addressed.

Meetings should occur in a participant’s home and/or in a location of the participant’s choosing whenever possible. Structurally, housing-focused case management is central to the provider’s array of supportive services. Case managers should help to develop a plan to assist the participant retain permanent housing after the assistance ends, taking into account all relevant considerations, such as the participant’s current or expected income and expenses, other public or private assistance for which the participant will be eligible and likely to receive, and the relative affordability of available housing in the area.

**Evolving Focus**

Initially, case management should be primarily focused on assisting a participant in obtaining and moving into a new housing unit or maintaining stability in their current housing. Case managers should help participants resolve or mitigate tenant barriers like rental and utility arrears or multiple evictions; obtain necessary identification if needed; and prepare participants for successful tenancy by reviewing lease provisions. Case management may then shift to home-based and help participants stabilize in housing. Based upon their needs and requests, it should help participants identify and access supports, including family and friend networks, mainstream and community services, and employment and income.

# ALLOWABLE ACTIVITIES FOR EMERGENCY SHELTER

The chart below outlines the allowable activities for ESG funded programs.

|  |  |
| --- | --- |
| **Emergency Shelter** | **Additional ESG-CV Eligible Activities for Emergency shelter** |
| **Essential Services**   * Case management * Child Care * Education Services * Employment Assistance and Job Training * Outpatient Health Services * Legal Services * Life Skills Training * Mental Health Services * Substance Abuse Treatment Services * Transportation * Services for Special Populations | **Essential Services**   * Personal Protective Equipment (PPE) Purchase of PPE (e.g., masks, hand sanitizer, etc.) for program participants as an essential service under emergency shelter |
| **Shelter Operations**   * Maintenance * Rent * Security * Fuel * Equipment * Insurance * Utilities * Food * Furnishings * Supplies necessary for shelter operation * Hotel/Motel Voucher |  |
| **Renovation, rehabilitation, or conversion**   * Labor * Materials * Tools * Other costs for renovation (including rehab or conversion) | **Renovation, rehabilitation, or conversion**   * Emergency shelter renovation, rehabilitation, or conversion are eligible expenses for Emergency Shelters and Temporary Shelters. |
| **Assistance Required Under the Uniform Relocation and Real Property Acquisition Act of 1970 (URA)**   * Relocation Payments * Other Assistance to displaced persons |  |

See Regulations at 24 CFR 576.102 for additional details on allowable expenditures.

**Minimum Period of Use**

ESG and ESG-CV funds can be used for the renovation, rehabilitation or conversion of buildings to provide emergency shelter. The Minimum Period of Use may be 3 or 10 years, depending on the cost and type of renovation (major rehabilitation, conversion, or other renovation). (See 576.102(c)).

|  |  |  |
| --- | --- | --- |
| Activity | Use Requirement | Building Valuation |
| Major Rehabilitation | 10 years\* | If rehabilitation costs exceed 75% of the value of the building **before rehab** |
| Conversion | 10 years\* | If rehabilitation costs exceed 75% of the value of the building **after rehab** |
| Other Renovation | 3 years | If rehabilitation costs are 75% or less of the value of the building **before rehab** |

\*Recorded deed or use restriction required.

**Eligible Expenses under ESG-CV**

Emergency shelter activities funded with ESG-CV should be in alignment with recommended

guidance to effectively manage infectious disease within the shelter during coronavirus. ESG-CV funding for emergency shelter to respond to COVID-19 may include providing cleaning supplies; personal protective equipment for staff and program participants; portable hygiene services; volunteer incentives; hazard pay; furnishings such as room dividers and cots; and costs associated with providing transportation for program participants to travel to and from medical care, and other needed services.

**Temporary Emergency Shelter**

ESG-CV funds may be used to pay for temporary emergency shelters for individuals and families experiencing homelessness. Eligible costs include leasing, operations, services, property acquisition and renovation.

Temporary Emergency Shelter is defined as a structure or any portion of a structure, which is

used for a limited period of time because of a crisis, such as a natural disaster or public health

emergency, to provide shelter for individuals and families displaced from their normal place of

residence or sheltered or unsheltered locations.

Temporary Emergency Shelters are exempt from: Minimum standards for emergency shelters at 24 CFR 403(b) – (lead-based paint requirements still apply)

* Environmental review
* Minimum period of use requirement (24 CFR 576.102(a)(xi)(4)(c))

Grantees must retain documentation that the shelter met the definition of temporary

emergency shelter.

Acquisition and renovation costs are subject to Disposition requirements outlined in 2 CFR 200.311 – Real Property which requires repayment to HUD. Grantees who are considering acquisition and renovation costs should work closely with EOHLC staff to ensure adherence to requirements.

|  |  |  |
| --- | --- | --- |
| Emergency Shelter  Activity | ***Temporary*** Emergency Shelter | ***Permanent*** Emergency Shelter |
| Renovations | Allowable, repayment required | Allowable, minimum period of use required |
| Acquisition | Allowable, repayment required | Not allowable |

Program participants cannot be required to sign leases or occupancy agreements, receive treatment, or perform any other prerequisite activities as a condition for staying in any shelter or receiving services.

Grantees must document that the structure/portion of the structure met the definition of Temporary Emergency Shelter.

**Hazard Pay**

ESG-CV funds may be used to pay hazard pay for grantee staff who work directly to prevent, prepare for, and respond to coronavirus among households who are homeless or at-risk of homelessness.

Examples of staff working directly in support of coronavirus response include: ∙

* Street outreach teams
* Emergency Shelter staff
* Staff providing essential services (e.g., outpatient health or mental health, housing navigators)
* Staff in proximity to persons with coronavirus or working in locations with a high likelihood of contracting coronavirus

Hazard pay may be billed under Homelessness Prevention, Rapid Re-Housing, Emergency Shelter, and Street Outreach program components. While grantees have the authority to establish their own hazard pay amounts and their cap, all grantees should ensure the following criteria are met:

* They are provided under the organization’s established written compensation policies
* The costs are equity allocated to all related activities including Federal awards; and,
* Grantees must maintain records that include job descriptions, policies and procedures or other program records that detail positions receiving hazard pay.

**Volunteer Incentives**

ESG-CV may be used to provide reasonable incentives (e.g., cash or gift cards) to volunteers who help to provide necessary street outreach, emergency shelter, essential services, and housing relocation and stabilization services during the coronavirus outbreak.

Volunteer incentives may be billed under Homelessness Prevention, Rapid Re-Housing, Emergency Shelter, or Street Outreach. Program records should document those costs are reasonable.

Refer to the [Waivers and Alternative Requirements for the Emergency Solutions Grants (ESG)Program Under the CARES Act](https://www.hud.gov/sites/dfiles/OCHCO/documents/20-08cpdn.pdf) for further details.

# DOCUMENTATION AND RECORDKEEPING REQUIREMENTS

Providers must establish and follow written intake procedures to ensure compliance with relevant homeless definition and recordkeeping requirements. Providers may be subject to program monitoring and must make documentation available as requested to ensure eligibility for program participation is clearly demonstrated. For additional details and required supporting documentation on all the of the requirements outlined in this section, please refer to Appendix A.

**Homelessness**

The provider must maintain and follow written intake procedures to ensure compliance with the homeless definition in 24 CFR §576.2 and 24 CFR §578.3. The procedures must require documentation at intake of the evidence relied upon to establish and verify homeless status.

# EMERGENCY SHELTER PROGRAM TERMINATION AND OPPORTUNITY FOR APPEAL

Each provider must have a termination policy in place. EOHLC fully endorses the use of a Housing First approach and encourages providers to target assistance to households in most need. As such, dismissal or termination policies should avoid unnecessarily terminating assistance due to program violations, except in extreme cases. Providers should not terminate assistance due to program rule infractions if such termination can be avoided. Such instances provide an opportunity for further proactive, progressive engagement and service delivery. For example, terminating assistance solely because a household is using substances, refuses treatment or is not fully implementing their housing plan would not be consistent with a Housing First approach. Providers must exercise judgment and examine all extenuating circumstances in determining when violations warrant termination so that a program participant's assistance is terminated only in the most severe cases. Termination does not bar the provider from providing further assistance later to the same family or individual.

It is important that providers effectively communicate termination and grievance procedures to participants and ensure that the procedures are fully understood. All subrecipients must include termination policies and procedures in their agency regulations and manuals. Documentation of termination of assistance must comply with the requirements in 24 CFR 576.402.

To ensure effective communication for emergency shelter agencies and participants, EOHLC requires the following actions prior to program termination:

* At least one meeting (can occur virtually or via phone) with the participating household discussing program violations
* A written plan for rectifying program violations including action steps for both agency staff and program participants

**Grievance Policy**

All participating provider agencies must have a client grievance policy in place, a copy of which should be made available to clients. This policy should be available to address grievances involving a provider’s internal policies, services or activities. In the event a grievance is received regarding a provider’s internal policies, services or activities, the grievance will be referred to the appropriate agency for resolution under the provider’s internal grievance policy. Each provider must make a good faith effort to resolve client grievances as best they can in the moment. Complaints that should be addressed directly by the provider staff member or supervisor include complaints about agency conditions, how the client was treated by provider staff, and violations of confidentiality agreements. If the client feels the complaint was not adequately addressed, the client should then follow the provider’s internal grievance procedure.

All projects must comply with the Fair Housing Act (including Equal Access and Family Separation), the Equal Access to Housing in HUD Programs Regardless of Sexual Orientation or Gender Identity regulations, and the Americans with Disabilities Act regulations. All providers should establish organizational policies to ensure that all federal laws are followed in the administration of homelessness prevention and rapid re-housing services. Refer to the section entitled Organizational Policies and Other HUD Requirements for further details.

Rapid rehousing and prevention

# HOUSING PLACEMENT AND LANDLORD ENGAGEMENT

This section provides guidance and best practices for housing placement and landlord engagement and mediation. These activities are essential parts of a successful homelessness prevention or rapid re-housing program.

**Housing Placement**

Regardless of program structure, program staff are expected to be an active partner in housing search, providing the level of support necessary to help participant households obtain housing. For households experiencing homelessness, the process of locating housing should be supported by staff unless the program participant does not want support. Providers can determine how best to align staffing to meet local needs so long as they include housing placement activities in their program implementation and budget. Utilizing grant funds for broker fees is one way to expand services to clients without increasing staff numbers. Programs are encouraged to establish a housing navigator role that can help support efficient and effective housing placement.

Program staff should discuss tenants’ housing needs, location preferences and other details upon program entry. Staff should consider tenant screening barriers, which reduce a person’s ability to obtain housing because of landlord criteria and screening. Examples may be poor credit, a history of evictions, household size and criminal history. In addition, housing retention barriers, which reduce a household’s ability toretain housing must also be considered. Examples of retention barriers include paying the rent in full and on time, caring for the unit, following the lease and interacting with the landlord. Housing placement staff can assist participants by educating them on landlord tenant law and discussing quiet enjoyment. Identifying needs and addressing potential barriers are the best way to ensure a successful housing placement.

**Landlord Engagement**

**I**n order to successfully place program participants in housing, programs are encouraged to do assertive landlord engagement. Where possible, a coordinated landlord engagement strategy across the CoC or community is encouraged to reduce duplication and increase the speed at which program participants can be placed in housing. However, landlord engagement does not stop at placement. Services need to be responsive not only to tenants but also to address landlord concerns if they arise. Ensuring open communication and helping to mediate is essential to maintain landlord relationships. In situations where the tenant is facing a threat of eviction, whether this be for homelessness prevention participants or those placed in housing through rapid re-housing, the agency should intervene to create a landlord mediation plan/stabilization plan to prevent eviction.

**ESG-CV Flexibilities:** **Using ESG-CV to Provide Landlord Incentives**

ESG-CV funds may be used to pay for landlord incentives that are reasonable and necessary to obtain housing for individuals and families at-risk of or experiencing homelessness. Programs are strongly encouraged to utilize landlord incentives to help support landlord engagement efforts. This can include lease-up incentives up to 3 times the rent charged for the unit within the following categories:

* Signing bonuses equal to up to 2 months of rent
* Cost to repair damages incurred by the participant not covered by the security deposit or that are incurred while the program participant is still residing in the unit
* Costs of extra cleaning or maintenance of a program participant’s unit or appliances

Landlord incentives can be budgeted only under RRH and HP components. Expenditures must be linked to assistance provided per household, and the funds can be used with other funding (e.g., CoC, CDBG-CV) so long as there isn’t a duplication of benefits and all applicable ESG requirements are met. Refer to the [Waivers and Alternative Requirements for the Emergency Solutions Grants (ESG)Program Under the CARES Act](https://www.hud.gov/sites/dfiles/OCHCO/documents/20-08cpdn.pdf) for further details.

# RRH AND PREVENTION CASE MANAGEMENT AND SERVICE DELIVERY

Supportive Services are an essential element of a successful rapid re-housing and/or homelessness prevention program. The goal of services is to help households stabilize and, provide tenancy supports and connect them to services to ensure long-term housing stability. As much as possible, programs should determine how to seek and integrate feedback from program participants and others with lived experience into the program model. Specifically, programs should aim to incorporate the following service elements and best practices.

**Trauma-Informed Care**

Case managers should use a trauma-informed and strengths-based approach. Because homelessness and the threat of becoming homeless can be a crisis of major significance, stabilizing a person in housing requires case managers who understand the impact of trauma and stress on participants’ emotional, behavioral, and cognitive capacity. Until the housing crisis is resolved and the participant’s stress is decreased, case managers should support the household in setting short-term, achievable, and appropriate goals instead of focusing on longer-term goals. While many of these symptoms of stress will subside once the crisis is resolved, the case manager must be skilled at assessing participants’ various and changing levels of ability to carry out goals and action steps. The case manager should focus on the essential steps required to end the housing crisis.

**Housing-Focused**

To effectively assist participant households in achieving housing stability, recipients and sub-recipients must provide ongoing housing-focused case management services. The primary objective of housing-focused case management is to extend support to participants, through an individualized case management relationship, that will ultimately translate to increased housing stability. Housing-focused case management delivery should include regular consultations with participants in individualized meetings, dedicated to assessing and reassessing needs, educating participants on program and community resource opportunities, developing housing stability plans, scheduling appointments, and providing necessary follow up to ensure housing stability plans are progressing on schedule and needs are adequately being addressed.

Meetings should occur in a participant’s home and/or in a location of the participant’s choosing whenever possible. Structurally, housing-focused case management is central to the provider’s array of supportive services. Case managers should help to develop a plan to assist the participant retain permanent housing after the assistance ends, taking into account all relevant considerations, such as the participant’s current or expected income and expenses, other public or private assistance for which the participant will be eligible and likely to receive, and the relative affordability of available housing in the area.

**Progressive Engagement**

To best meet the needs and build on the strengths of each household, serve as many households as possible, and achieve strong housing outcomes, it is recommended that programs also use a progressive engagement approach when offering services or financial assistance. Progressive Engagement is an approach to helping households end their homelessness as rapidly as possible, despite barriers, with minimal financial and support resources. In this approach, participants are initially offered “light-touch” assistance, including help creating a reasonable housing placement/stabilization plan, housing information and search assistance, and limited financial assistance. More supports are offered to those households who struggle to stabilize and cannot maintain their housing without assistance.

Programs should initially provide a basic amount of financial assistance that is just enough to help a household obtain or maintain, and eventually sustain housing on its own.

The program will periodically assess if the household is on the path to self-sufficiency or needs more assistance. If the household needs more assistance than what was initially provided, the program can extend financial assistance as needed and provide proactive case management to help the household stabilize in housing until they are no longer at risk of becoming homeless.

When using a progressive approach to providing rental assistance, the program periodically assesses the household’s progress toward assuming full rental payments. This assessment should determine whether financial assistance should be increased, extended, or tapered off. If assistance has been extended to the maximum amount and the program has provided as many services and linkages to the household as possible, and the household still does not seem on a path to housing stability, it may be appropriate to help the household get a more permanent subsidy such as a Housing Choice voucher or a permanent supportive housing placement, if they are eligible.

Providing services and financial assistance in a progressive way allows the program to be flexible enough to adjust to each household’s unique strengths, needs, and resources, especially as their financial circumstances or service needs change.

**Client-Driven and Flexible**

Case management should be client-driven. Case managers should actively engage participants in voluntary case management and service participation by creating an environment in which the participant is driving the case planning and goal-setting based on what they want from the program and services, rather than on what the case manager decides they need to do to be successful. Case managers should use a strengths-based approach to empower clients, identifying inherent strengths of a person or family instead of diagnoses or deficits, then building on those strengths to empower the household to succeed. Case management should be flexible in intensity – offering only essential assistance until or unless the participant demonstrates the need for or requests additional help.

**Evolving Focus**

Initially, case management should be primarily focused on assisting a participant in obtaining and moving into a new housing unit or maintaining stability in their current housing. Case managers should help participants resolve or mitigate tenant barriers like rental and utility arrears or multiple evictions; obtain necessary identification if needed; and prepare participants for successful tenancy by reviewing lease provisions. Case management may then shift to home-based and help participants stabilize in housing. Based upon their needs and requests, it should help participants identify and access supports, including family and friend networks, mainstream and community services, and employment and income.

Case managers should be available to help resolve issues or conflicts that may lead to tenancy problems while also helping participants develop skills they will use to retain housing once they are no longer in the program.

Recipients and sub-recipients must have clear safety procedures for home visits that staff are trained on and that are posted and clearly visible in office space and shared with program participants at intake and shared with participants and staff whenever changes are made. Rapid re-housing or homelessness prevention assistance should end and the case should be closed when the participant is no longer going to be imminently homeless. In some instances, case management may continue after financial assistance ends if appropriate or requested by the household. Being mindful of regulatory time limits for service and rental assistance, the expectation is that a provider will assist someone reaching their maximum time of assistance to identify other resources to maintain stability or find alternative housing.

# ALLOWABLE ACTIVITIES FOR RAPID RE-HOUSING AND PREVENTION

The chart below outlines the allowable activities for CoC and ESG funded programs. Providers are encouraged to familiarize themselves with the differences between CoC and ESG-funded rapid rehousing projects.

|  |  |  |
| --- | --- | --- |
| **COC-RRH** | **ESG-RRH and Homelessness Prevention** | **Additional ESG-CV Eligible Activities for RRH and HP** |
| **Rental Assistance**  • Short-term rental assistance (up to 3 months)  • Medium-term rental assistance (4-24 months) | **Rental Assistance**  • Short-term rental assistance (up to 3 months)  • Medium-term rental assistance (4-24 months)  • Rental arrears (one-time payment of up to 6 months of rent in arrears, including any late fees on those arrears) |  |
| **Financial Assistance**  • Security deposits (up to 1 month)  • First and last month’s rent  • Property damage   * VAWA emergency transfer plan costs | **Financial Assistance**  • Security deposits (up to 1 month)  • Last month’s rent (up to 1 month)  • Rental application fees  • Utility deposits and payments (up to 24 months, including up to 6 months of arrears)  • Moving costs   * VAWA emergency transfer plan costs These costs are not subject to the 24-month limit on rental assistance. | **Financial Assistance**   * Landlord Incentives (not to exceed 3 months of unit rent) * Volunteer Incentives |
| **Supportive Services**  • Annual assessment of service needs  • Assistance with moving costs  • Case management  • Childcare  • Education services  • Employment assistance and job training  • Food  • Housing search and counseling services  • Legal services  • Life skills training  • Mental health services  • Outpatient health services  • Outreach services  • Substance abuse treatment services  • Transportation  • Utility deposits | **Supportive Services**  • Housing search and placement  • Housing stability case management  • Mediation  • Legal services  • Credit repair | **Supportive Services**   * Hazard Pay for staff working directly with clients or in high-risk environments. * Training for staff on infectious disease prevention and mitigation. |

See Regulations at 24 CFR 576, subpart B (ESG) or 578, subpart D (CoC) for additional details on allowable expenditures.

**Time Limits for Assistance**

|  |  |  |
| --- | --- | --- |
| **Assistance type** | **CoC** | **ESG** |
| **Moving Costs** | 1 time assistance per Household | 3 Month Limit on Storage Fees |
| **Security Deposits** | Not to exceed 1 month rent based on MA state law | Not to exceed 1 month rent based on MA state law |
| **Rental Arrears** | Not Allowable | 1 time payment of up to 6 months (does not count toward the rental assistance limit) |
| **Utility Deposits** | 1 time fee | 1 time fee |
| **Rental Assistance** | Not to exceed 24 months per Household | Including Utility Payments, not to exceed 24 months in 3 years. |
| **Housing Stabilization Case Management/Supportive Services** | Up to 6 months after rental assistance ends | 30 days prior to move in + up to 24 months in 3 years |

For additional information about the differences between ESG and CoC rapid rehousing programs, please refer to the following comparison [document](https://files.hudexchange.info/resources/documents/Rapid_Re-Housing_ESG_vs_CoC.pdf) created by HUD.

# DOCUMENTATION AND RECORDKEEPING REQUIREMENTS

Providers must establish and follow written intake procedures to ensure compliance with relevant homeless definition and recordkeeping requirements. Providers may be subject to program monitoring and must make documentation available as requested to ensure eligibility for program participation is clearly demonstrated. For additional details and required supporting documentation on all the of the requirements outlined in this section, please refer to Appendix A.

**Homelessness or At-Risk Status**

The provider must maintain and follow written intake procedures to ensure compliance with the homeless definition in 24 CFR §576.2 and CFR §578.3 . The procedures must require documentation at intake of the evidence relied upon to establish and verify homeless status.

**Income**

All programs should review income at intake to evaluate a client’s resources and determine the level of assistance that will be the most helpful.

When providing Homelessness Prevention assistance, at initial entry to the program a household must have income below 30 percent of median family income for the area to be eligible for assistance. Income is also reviewed at time of program re-evaluation for both homelessness prevention and ESG rapid re-housing.

When determining the annual income of an individual or family, the provider must use the standard for calculating annual income under 24 CFR 5.609.

An income calculator can be found here: <https://www.hudexchange.info/incomecalculator/>

**ESG-CV – Homelessness Prevention**

Clients with an annual income at or below 50 percent of median family income for the area, as determined by HUD, qualify for assistance under “at risk of homelessness” and paragraphs (2), (3), or (4) of the “homeless” definition in 576.2 if being served with ESG-CV or ESG used to prevent, prepare for or respond to COVID-19. Note that changes in income eligibility determination is prospective, not retrospective.

**Inspections**

**CoC Rapid Re-Housing**

Housing for which rental assistance payments are made with CoC program funds, must meet the applicable housing quality standards (HQS) under 24 CFR 982.401. Before any assistance will be provided on behalf of a program participant, the provider, must physically inspect each unit to assure that the unit meets HQS. Assistance will not be provided for units that fail to meet HQS, unless the owner corrects any deficiencies within 30 days from the date of the initial inspection and the provider verifies that all deficiencies have been corrected. Recipients or Providers must inspect all units at least annually during the grant period to ensure that the units continue to meet HQS.

**ESG Rapid Re-Housing and Homelessness Prevention**

The provider cannot use ESG funds to help a program participant remain or move into housing that does not meet minimum habitability standards (see Appendix A). Best practice is to inspect units annually for clients receiving medium term rental assistance.

**Occupancy Standards**

**Rapid Re-Housing and Homelessness Prevention**

ESG and CoC rapid re-housing programs should defer to the guidelines in the CoC regulations regarding occupancy standards. As outlined in 578.75 (c) The dwelling unit must have at least one bedroom or living/sleeping room for each two persons. Children of opposite sex, other than very young children, may not be required to occupy the same bedroom or living/sleeping room. If household composition changes during the term of assistance, subrecipients and/or sub-providers may relocate the household to a more appropriately sized unit. The household must still have access to appropriate supportive services.

**Fair Market Rent and Rent Reasonableness**

**CoC Rapid Re-Housing**

Rental assistance can only be provided to units where the rent meets HUD’s rent reasonableness standards.

**ESG Rapid Re-Housing and Homelessness Prevention**

Housing units where participants receive ESG rental assistance must meet BOTH rent reasonableness standards AND HUD’s published Fair Market Rent (FMR) standards.

FMRs established by HUD may be found at: <http://www.huduser.org/portal/datasets/fmr.html>

Note: Exceptions to rent reasonableness and FMR for ESG include assistance with last month’s rent and/or assistance with rental arrears in absence of first month’s rent and short- or medium-term rental assistance.

**ESG-CV Rapid Re-Housing and Homelessness Prevention**

For rental assistance provided with ESG CV funds (either rapid re-housing or homelessness prevention) HUD has waived the FMR requirement if units meet rent reasonableness standards. Waiving this requirement is intended to allow recipients to help program participants move quickly into housing or retain their existing housing, which is especially critical at reducing the spread of and responding to coronavirus.

**Re-evaluation Requirements**

**CoC Rapid Re-Housing**

Each provider of assistance under this part must conduct an ongoing assessment of the supportive services needed by the participants enrolled in the project, the availability of such services, and the coordination of services needed to ensure long-term housing stability and must adjust, as appropriate. The assessment is recommended to be completed regularly, but at a minimum, must be done annually.

**ESG Rapid Re-Housing and Homelessness Prevention**

ESG sub-recipients must re-evaluate the program participant’s eligibility and the types and amounts of assistance the program participant needs not less than once every three months for program participants receiving homelessness prevention assistance, and not less than once annually for program participants receiving rapid re-housing assistance.

At a minimum, each reevaluation of eligibility must establish that the program participant does not have an annual income that exceeds 30 percent of median family income for the area, as determined by HUD, and that the program participant lacks the resources and support networks necessary to retain housing without ESG assistance.

**Re-evaluation Waiver for ESG Homelessness Prevention**

The required frequency of re-evaluations for all homelessness prevention assistance under section 576.401(b) is waived until April 1, 2022 so long as the provider conducts the required re-evaluations not less than once every 6 months.

# RAPID RE-HOUSING AND HOMELESSNESS PREVENTION PROGRAM TERMINATION AND OPPORTUNITY FOR APPEAL

Each provider must have a termination policy in place. EOHLC fully endorses the use of a Housing First approach and encourages providers to target assistance to households in most need. As such, dismissal or termination policies should avoid unnecessarily terminating assistance due to program violations, except in extreme cases. Providers should not terminate assistance due to program rule infractions if such termination can be avoided. Such instances provide an opportunity for further proactive, progressive engagement and service delivery. For example, terminating assistance solely because a household is using substances, refuses treatment or is not fully implementing their housing plan would not be consistent with a Housing First approach. Providers must exercise judgment and examine all extenuating circumstances in determining when violations warrant termination so that a program participant's assistance is terminated only in the most severe cases. Termination does not bar the provider from providing further assistance later to the same family or individual.

It is important that providers effectively communicate termination and grievance procedures to participants and ensure that the procedures are fully understood. All subrecipients must include termination policies and procedures in their agency regulations and manuals. Documentation of termination of assistance must comply with the requirements in 24 CFR 576.402. CoC rapid re-housing programs must ensure their termination policy follows the regulations at 24 CFR 578.91.

To ensure effective communication for homelessness prevention and rapid re-housing agencies and participants, EOHLC requires the following actions prior to program termination:

● At least one meeting (can occur virtually or via phone) with the participating household discussing program violations

● A written plan for rectifying program violations including action steps for both agency staff and program participants

If termination is due to an inability to contact the client, a letter to client and landlord notifying the intent to terminate rental assistance must be sent and documented in the file. In all situations, case notes should demonstrate documented efforts made to contact and connect with client.

**Grievance Policy**

All participating provider agencies must have a client grievance policy in place, a copy of which should be made available to clients. This policy should be available to address grievances involving a provider’s internal policies, services or activities. In the event a grievance is received regarding a provider’s internal policies, services or activities, the grievance will be referred to the appropriate agency for resolution under the provider’s internal grievance policy. Each provider must make a good faith effort to resolve client grievances as best they can in the moment. Complaints that should be addressed directly by the provider staff member or supervisor include complaints about agency conditions, how the client was treated by provider staff, and violations of confidentiality agreements. If the client feels the complaint was not adequately addressed, the client should then follow the provider’s internal grievance procedure.

All projects must comply with the Fair Housing Act (including Equal Access and Family Separation), the Equal Access to Housing in HUD Programs Regardless of Sexual Orientation or Gender Identity regulations, and the Americans with Disabilities Act regulations. All providers should establish organizational policies to ensure that all federal laws are followed in the administration of homelessness prevention and rapid re-housing services. Refer to the section entitled Organizational Policies and Other HUD Requirements for further details.

# APPENDIX A DOCUMENTATION REFERENCE CHART

**STREET OUTREACH, EMERGECY SHELTER RAPID REHOUSING, and PERMANENT SUPPORTIVE HOUSING (ESG and CoC)**

|  |  |
| --- | --- |
| **Homeless Status Eligibility Criteria** | **Required Documentation** |
| Sleeping in a place not meant for human habitation (i.e., car, park, abandoned building, bus station, airport, etc.)  **Note that the documentation is ordered in order of preference. Whenever possible, third party documentation should be obtained.** | * A written statement from a housing or service provider documenting the participants living conditions; * A written statement from an outreach worker observing the participants living conditions; * A self-certification from the participant documenting their living conditions. The self-certification must include a statement from the subrecipients intake worker documenting their attempt to obtain third party verification. |
| In an emergency shelter, i.e., congregate shelters, transitional housing, hotels/motels paid for by charitable organizations or government programs | * HMIS bed stay documentation * A written statement from the emergency shelter provider documenting the participant’s stay. |
| Exiting an institution where the participant resided for 90 days or less and resided in an emergency shelter or place not meant for habitation immediately before entering the institution | Written verification from the institution documenting exit date and length of time in the institution AND one of the following:   * A written statement from an outreach worker documenting the participants living conditions prior to entering the institution; * A written statement from a housing or service provider documenting the participants living conditions prior to entering the institution; * A self-certification from the participant documenting their living conditions prior to entering the institution. The self-certification must include a statement from the subrecipients intake worker documenting their attempt to obtain third party verification. |

**HOMELESSNESS PREVENTION (ESG ONLY)**

|  |  |
| --- | --- |
| **Income/Resources Eligibility Criteria** | **Required Documentation** |
| Annual household income below 30% of area medium income (AMI) based on HUD HOME income limits. Income limits can be found at:  [https://www.hudexchange.info/programs/home/home-income-limits/](https://www.hudexchange.info/programs/home/home-income-limits/%20) | Income documentation must be collected at intake and updated at each required quarterly re-certification (completed at minimum every three months), as long as the household is enrolled in an ESG Homelessness Prevention project. Income documents for each period (intake, re-certification 1, 2, etc.) should be clearly documented as such.  Providers should utilize the CPD Income Eligibility Calculator found at: <https://www.hudexchange.info/incomecalculator/>. If the CPD Income Eligibility Calculator is unavailable at the time of intake or re-certification, the case record must contain an annual income evaluation form which captures each participant’s source of income, the frequency of that income, and the calculation method used to determine the estimated annual amount. Annual income must be calculated from current (at minimum the most recent 30-day period) and complete income information, for each member of the household. A full list of HUD income inclusions and exclusions can be found at: <https://www.hud.gov/sites/documents/DOC_35699.PDF>  Income documentation may include, but is not limited to: wage stubs, unemployment comp. statement, public benefits statement, bank statement(s), a letter from employer documenting approximate hours worked and compensation, and/or a self-certification from the household member documenting the income.  Additional clarification regarding income documentation can be found in the Interim Rule (§576.500(e)) and in the HUD webinar titled At Risk Status and Income: Recordkeeping Requirements Webinar for ESG Grantees. Slides and a recording of the webinar can be found at: <https://www.hudexchange.info/trainings/courses/at-risk-status-and-income-recordkeeping-requirements-webinar-for-esg-grantees1/> |
| Insufficient resources or support networks | At minimum, documentation of insufficient resources or support networks must be documented on a EOHLC-approved form which clearly states that the household does not have sufficient resources or support networks; e.g., family, friends, faith-based or other social networks immediately available to prevent eviction and maintain housing stability, and that ‘but for’ ESG services the household would become literally homeless according to HUD’s definition. EOHLC expects that case records will also include case notes and additional evidence documenting insufficient resources and support networks as applicable to each participant’s circumstances.  HUD provides the following examples of source documentation for insufficient resources:   * notice of termination from employment * unemployment compensation statement * bank statement(s) * health-care bill showing arrears * utility bill showing arrears |
| **HUD regulations require households meet one of the following conditions to be eligible for ESG homelessness prevention services in addition to meeting the above income and resources criteria.** | |
| **Homeless/Housing Status Eligibility Criteria** | **Required Documentation** |
| Moved because of economic reasons two or more times during the 60 days immediately preceding the application for ESG homelessness prevention assistance | Evidence of moving includes, but is not limited to:   * moving receipts * change of address documentation (utility bills, bank statements, pay stubs, etc.) * eviction notice * leasing documents   In instances where the above documentation is unavailable, HUD allows for a written statement from the relevant third party to suffice. This may include a current or former employer, owner, primary lease holder, public administrator, and hotel or motel manager. If verbal verification is provided, intake staff are expected to document the conversation on the provider’s letterhead. |
| Living in the home of another because of economic hardship | Sufficient documentation may take different forms depending on each household’s situation. However, EOHLC expects subrecipients to gather evidence to document that a participant who lives in the home of another is living there due to economic hardship and that without ESG services, the household would have to leave the housing situation and become literally homeless according to HUD’s definition. Sufficient documentation may include, but is not limited to:   * documentation of past eviction * bank statements * documentation of loss of employment * expense receipts * verification from owner or primary leaseholder   Supporting documentation should be supplemented with descriptive case notes explaining the circumstances which led the household to live in the home of another.  A solitary letter from the owner or primary leasehold stating that the dependent household must leave the unit will not suffice. |
| Written notification that their right to occupy their unit will be terminated within 21 days of their application for assistance | A court ordered Execution Notice which requires the household to vacate the premises within 21 days of their application for ESG assistance. |
| Lives in a hotel or motel not paid by a charitable organization or by Federal, State, or local government programs for low-income individuals | * Hotel or motel receipts * Bank statements documenting hotel or motel charges * Letter from hotel or motel manager documenting length and cost of stay |
| Lives in an SRO or efficiency apartment with more than two persons OR lives in a housing unit where more than 1.5 persons reside per room | For eligibility purposes, 1.5 persons residing per room includes all rooms in the housing unit, including bedrooms, living rooms, dining rooms, kitchens, finished recreation rooms, enclosed porches suitable for year-round use, and lodger’s rooms. A partially divided room is a separate room only if there is a partition from floor to ceiling, but not if the partition consists solely of shelves or cabinets. Rooms that are excluded from this definition are strip or pullman kitchens, bathrooms, open porches, balconies, halls or foyers, half-rooms, utility rooms, unfinished attics or basements, or other unfinished space used for storage.   * Lease listing the number of persons residing in the unit and the number of rooms or size of the unit. * Third party verification from the landlord documenting the size of the unit and the number of people residing in that unit. * A written statement from caseworker or intake staff documenting that a home visit was conducted and that the unit is an SRO or efficiency apartment in which more than two persons reside. |
| Exiting a publicly funded institution, or system of care (such as a health-care facility, a mental health facility, foster care or youth facility, or correction program or institution) | HUD does not prescribe a minimum length of time during which a person or household must reside in a publicly funded institution or system of care in order to meet this criterion. However, EOHLC expects that households will have resided in a publicly funded institution or system of care for such a period of time such that they have lost the ability to return to their previous housing situation OR that they have met the definition for *at risk of homelessness* prior to entering the publicly funded institution or system of care.  Adequate documentation may include:   * Discharge papers or other evidence documenting the time period the person or household was in a publicly funded institution or system of care * Letter from institution or system of care, including letters written by case workers and other direct care staff working within those institutions or systems of care * Notice of eviction which occurred during the period the participant was residing in a publicly funded institution or system of care |
| Has a summary process notice | At a minimum, a Summons and Complaint served by a sheriff or constable is required. Households in between the Summons and Complaint and Execution notice periods meet this criterion provided they have insufficient resources and support networks and would become literally homeless without ESG assistance.  Households who have agreed in court to a payment plan and are able to meet the stipulations of that payment plan are not considered to be lacking sufficient financial resources to prevent homelessness. |
| Notification that primary nighttime residence will be lost within 14 days | A court ordered Execution notice requiring the tenant to vacate the unit within 14 days of their application for assistance. |
| Fleeing or attempting to flee domestic violence or other instances of violence in the home, and/or life-threatening conditions as permitted by HUD, and/or have left and are fearful of returning to their home | Documentation may include, but is not limited to:   * A police report * Third party verification from a domestic violence provider * Lapsed or current restraining orders * Affidavits from restraining orders * Medical records (if DV was referenced or treated) * Written statement from social worker or mental health counselor * Psychiatrist letter   In the instance where third party documentation is unavailable, subrecipients may accept a self-certification from the head of the household. The self-certification should clearly state that the household is fleeing, or attempting to flee domestic violence or other life-threatening violence and is unsafe remaining in or returning to their home. |

**RECORDKEEPING REQUIREMENTS FOR ALL ELIGIBLE HOUSEHOLDS**

Case records for households receiving emergency shelter, homelessness prevention or rapid re-housing services must contain the following documentation.

|  |  |
| --- | --- |
| **Recordkeeping Requirement** | **Required Documentation** |
| Services received | Subrecipients or sub-providers must document the types of essential services and financial assistance provided to each household in a case record designated to that household. The case record should clearly list, in chronological order, the types of services provided (including financial assistance) and corresponding dates of services.  Subrecipients or sub-providers are expected to clearly document the need for each type of service provided. Documentation may take various forms depending on the participating household’s situation, but may include any form of documentation included in this policies and procedures manual.  Subrecipients or sub-providers choose to cap or restrict services to eligible participants, they must establish written policies outlining such restrictions and procedures for applying them fairly to eligible households. EOHLC must approve ESG standards.  Rather than establishing rigid formulas for financial assistance, it is encouraged to work with each eligible participant to determine what services are necessary to resolve their immediate housing crisis. It is also expected that services, including financial assistance, be provided on an as-needed, case by case basis. |
| Verification of participant sustainability | ESG subrecipients must document that households receiving services can reasonably be expected to maintain the housing assisted through ESG immediately following their exit from the ESG project. Housing sustainability need not be documented upon entry into an ESG project, but should be discussed in the participant’s housing stabilization planning and case management sessions. A plan for sustainability should be documented as part of the participant’s housing stabilization plan upon exit. |
| Legal lease hold (HP, PH, PSH, and RRH) | A legally binding, written lease for the unit assisted is required. The lease must be between the owner or owner’s representative and the household and is required prior authorizing any payment for rental assistance, excluding ESG rental arrears, to the property owner (including first month’s rent or security deposit payments).  The lease MUST include the following items:   * Tenant name * Address of unit * Term of tenancy * Move in date * Rent amount * Responsibility for utilities * The lease must be signed and dated by all appropriate parties   -----------------ESG Only----------------------------  Only when the assistance is solely for rental arrears\* may a verbal agreement be accepted in place of a written lease and **only if** the verbal agreement gives the household an enforceable leasehold interest under state law and the agreement and rent owed are sufficiently documented by the property owner’s financial records, rent ledgers, or cancelled checks. The verbal agreement must be documented by the provider on the organization or property owner’s official letterhead detailing the address of the unit, rent amount, and term of occupancy.  *\*A one-time payment of up to 6 months of rental arrears is an eligible cost under ESG RRH. However, this service should only be provided if the participant would not be able to secure housing without it.* |
| Property ownership  (ESG Only) | Proof of ownership of the unit must be obtained prior to making any financial payments to the property owner unless the property is owned by a local housing authority.  Documentation of ownership may include a copy of a deed, water bill, mortgage payment, or tax bill. |
| Rental assistance agreement (HP, PSH, PH and RRH) | A rental assistance agreement between the property owner/landlord and provider must be in place prior to executing any service under the rental assistance component (including ESG rental arrears). The agreement must set forth the terms under which assistance will be provided.  The agreement must also provide that, during the period indicated, the property owner must give the provider a copy of any notice given to the household to vacate the unit used under state or local law to commence an eviction action against the household, including a 14-day notice to quit. |
| Shelter and Housing Standards | Housing and Lead Based Paint\* standards apply for all households receiving services, including ESG rental arrears or legal assistance only.  \*Lead Based Paint visual assessments must be completed on all units receiving assistance if constructed before 1978 AND have a child under 6 or a pregnant woman. Documentation of the visual inspection completed by qualified staff must be kept in the case record. All staff members responsible for completing visual assessments must be properly credentialed. HUD offers an online visual assessment training to be completed by staff members conducting inspections. The certification of completion by staff members should be kept with the grant administrative records. The training can be found at: <https://apps.hud.gov/offices/lead/training/visualassessment/h00101.htm>  ESG  The Emergency Solutions Grants (ESG) Program interim rule, at 24 CFR 576.403, establishes minimum standards for safety, sanitation, and privacy in emergency shelters funded with ESG.  Completion of a shelter standards inspection checklist or a copy of an inspection report completed by a HUD-certified inspector must be kept on file for any emergency shelter that receives ESG funds for renovation or shelter operations. The completed inspection must, at minimum, document compliance with the following habitability standards:   * Structure and materials * Access * Space and security * Interior air quality free of pollutants * Contamination free water supply * Necessary heating and cooling facilities * Adequate and safe illumination and electricity * Adequate space for safe food preparation when such space is provided * Unit must be maintained in overall sanitary condition * Fire safety   + Second means of egress   + Smoke detectors on each level (when applicable smoke detectors must be designed to alert hearing impaired tenants)   + Public areas of the facility must be equipped with smoke detectors   Completion of a housing standards inspection checklist or a copy of an inspection report completed by a HUD-certified inspector must be in the case record for all households receiving **any type** of ESG service. The completed inspection must, at minimum, document compliance with the following habitability standards:   * Structural soundness * Adequate space & security * Interior air quality free of pollutants * Contamination free water supply * Sufficient and private sanitary facilities in proper operating condition * Necessary heating and cooling facilities * Adequate and safe illumination and electricity * Adequate space for safe food preparation when such space is provided * Unit must be maintained in overall sanitary condition * Fire safety   + Second means of egress   + Smoke detectors on each level (when applicable smoke detectors must be designed to alert hearing impaired tenants)   + Public areas of the facility must be equipped with smoke detectors   CoC  Completion of a housing quality standards inspection checklist must be in the case record for all households receiving tenant based rental assistance. The completed inspection must, at minimum, document compliance with the following standards:  The HQS consist of:  (A) Performance requirements; and  (B) Acceptability criteria or HUD approved variations in the acceptability criteria.  (ii) This section states performance and acceptability criteria for these key aspects of housing quality:  (A) Sanitary facilities;  (B) Food preparation and refuse disposal;  (C) Space and security;  (D) Thermal environment;  (E) Illumination and electricity;  (F) Structure and materials;  (G) Interior air quality;  (H) Water supply;  (I) Lead-based paint;  (J) Access;  (K) Site and neighborhood;  (L) Sanitary condition; and  (M) Smoke detectors. |
| FMR & rent reasonableness (HP, PH, PSH, and RRH) | Rent reasonableness compliance must be recorded on a form showing both the calculation used to determine gross rent and listing comparable units used to determine rent reasonableness, documented in each case record.  Fair Market Rent compliance may be documented using screenshots or other printable material from HUD resources.  Fair Market Rents established by HUD may be found at:  <http://www.huduser.org/portal/datasets/fmr.html> |
| Housing search and placement costs (Broker Fees) | Real estate broker fees must be documented in the applicable client files detailing not only the amounts paid, but also how the assistance was necessary to assist a program participant to obtain suitable permanent housing.  Providers that choose to utilize a for profit company as a vendor (e.g. realtors) must follow the provider's procurement procedures. |
| Determination of Ineligibility | For each individual and family determined ineligible to receive Emergency Solutions Grant (ESG) assistance, the record must include documentation of the reason for that determination. |
| Emergency Shelter Facilities | If ESG funds are used to renovate, rehabilitate, or convert buildings to be used as emergency shelter for homeless families and individuals records must include documentation of the value of the building before the rehabilitation of an existing emergency shelter or after the conversion of a building into an emergency shelter and copies of the recorded deed or use restrictions.   * Where the ESG funds that are used for the renovation of an emergency shelter exceed 75 percent of the value of the building before renovation, records must be retained until 10 years after the date that ESG funds are first obligated for the renovation. * Where the ESG funds that are used to convert a building into an emergency shelter exceed 75 percent of the value of the building after conversion, records must be retained until 10 years after the date that ESG funds are first obligated for the conversion. |

# FUNDING PROCESS AND REQUIREMENTS

## GRANT AWARDS

The amount of ESG allocation received from the U.S. Department of Housing and Urban Development (HUD) varies each year and is awarded to the State via an annual Award Notice

## GRANT AGREEMENTS GENERAL TIMELINE

Initial notification of pending grant agreements are generated electronically by HUD and are sent to the Federal Grants Manager. In many cases, there are issues and conditions from HUD that must be resolved prior to the grant agreement being sent by HUD to EOHLC. The initial electronic notification will include those issues and conditions.

## RECEIVING & PROCESSING THE GRANT AGREEMENT

HUD will notify EOHLC that the grant agreement is prepared for signature by EOHLC. Typically, the notice is issued to the Director of Policy or to the Federal Grants Manager; the person who receives the notice will coordinate with the Undersecretary’s office to complete the signature process with HUD.

Once complete, the Director of Policy or Federal Grants Manager will scan and send a copy of the document to the ESG Contract Manager.

The ESG Contract Manager will coordinate with the Budget Analyst on an appropriate timeline for issuing contracts to vendors based on when funds will be loaded into IDIS. This process typically takes 2-3 weeks, during which time contracts may be generated and submitted for internal review.

## PREPARING CONTRACTS & AMENDMENTS

All communication on initial contracts and contract amendments should be discussed with the assigned contracts manager.

# PAYMENT REQUESTS / INVOICE

## PROCESSING PAYMENT REQUESTS

1. Payment requests and corresponding supporting documentation (MER, personnel summary reports, rent rolls, etc) for all programs are due to the Program Coordinator no later than the close of business on the 20th of each month, unless a modified submission date has been agreed upon.
2. Once received, within two business days, the Program Coordinator will review the packet for:
   1. Assuring completeness of the payment voucher
   2. Assuring that the payment requests are consistent with the contract
   3. Date stamping and logging the request
   4. Consistency between the supporting documentation in the packet with the payment voucher.
   5. The payment request is appropriately signed
   6. There are adequate funds remaining on the contracted amount within each line item to cover the payment requested.
3. If there are issues with the packet:
   1. The Program Coordinator will email the sub-recipient and request corrections be made and the revised payment request be re-submitted within two days and will follow up with the sub-recipient by phone and email (cc’ing the Federal Grants Manager as necessary) every three days until the revised packet has been received.
   2. On the 1st of the following month, the Program Coordinator will generate a list of sub-recipients that have failed to submit a complete packet for processing, including any status updates from the sub-recipient. The list of outstanding ESG packets will be given to the Federal Grants Manager by the end of the business day.
   3. The Federal Grants Manager will contact the Executive Director of the agency with incorrect or missing payment request via phone and e-mail on the2nd of each month alerting them to the situation and asking them to assure that the repaired request is submitted to the Program Coordinator within the next three days.
   4. On the 5th of each month, the Program Coordinator will alert the Federal Grants Manager of any PVs that are still incomplete or missing.
   5. The Federal Grants Manager will send, via US mail, a written letter explaining that the payment request is significantly late and the project is in jeopardy of being in noncompliance.
4. If there are no issues with the packet:
   1. The Program Coordinator will prepare the PRC and, where relevant LOCCS forms, including assigning a unique PRC number.
   2. The Program Coordinator will prepare the packet for accounting
   3. The Program Coordinator will then send the packet to the Director of Finance and log it on the unit spreadsheet.
   4. The Director of Finance will review and approve the packet and send it to accounting.

## RECEIVING REQUESTS IN A TIMELY WAY

Payment vouchers and corresponding supporting documentation (MER, personnel summary reports, requisition forms rent roles, invoices, etc) for all Federal Grants are due to the Program Coordinator responsible for monitoring the project, no later than the close of business on the 20th of each month.

The Program Coordinator will contact the subrecipient of any project with missing payment vouchers via phone or an e-mail on the 21st of each month and follow up as needed. Subrecipients will be instructed to submit their paperwork within 48 hours.

The Program Coordinator will notify the Federal Grants Manager of any missing payment vouchers by the close of business on the 25th of each month.

The Federal Grants Manager will contact the Executive Director of the agency with missing payment vouchers via phone and e-mail on the 25th of each month alerting them to the situation and asking them to assure that the voucher is submitted to the Program Coordinator within the next three days.

On the 29th of each month, the Program Coordinator will alert the Federal Grants Manager of any payment vouchers that have still not been submitted. The Federal Grants Manager will send, via US mail, a written letter explaining that the payment voucher is significantly late and the project is in jeopardy of being in noncompliance.

# FEDERAL CASH DRAW PROCESSING

**Control Objective:** To ensure that cash draws are for legitimate service related expenses; for the correct vendor, for proper service activities, and the correct amount.

**Risk Assessment**: There is the risk that payments and related cash draws might not be service/program related and the authorization control violated.

**Procedures to mitigate risks**

The following procedures are in place to ensure cash draw procedure control.

**Cash Draw Processing CoC**

1. Once the payment voucher and corresponding paperwork meet expectations as outlined in #5 (Processing of Payment Requests) above, the Program Coordinator will:
   1. Initial and date the Request
   2. Assign a unique number to the request
   3. Enter the numbers from the payment request onto the tracking spreadsheet
   4. Forward the payment voucher packet on to the Director of Finance.
      1. At least initially, and at other times as needed, the Program Coordinator will, instead, forward the packets onto the Federal Grants Manager who after reviewing, will forward it onto the Director of Finance
2. The Director of Finance will review the packet, sign and date it and return it to the Program Coordinator.
3. Within 1 business day of receipt of the returned packet from the Director of Finance, the Program Coordinator will:
   1. Pull together the packet for Accounting
   2. Log and submit the payment voucher packet to accounting.
4. Accounting will:
5. Send payment to the subrecipient
6. Draw down

**Cash Draw Processing ESG**

1. Once the payment voucher and corresponding paperwork meet expectations as outlined in #5 (Processing of Payment Vouchers) above, Federal Program Coordinator will:
   1. Initial and date the purchase voucher
   2. Enter the numbers from the payment voucher onto the tracking spreadsheet
   3. Forward the payment voucher packet on to the Director of Finance.
2. The Director of Finance will review the packet, sign and date it and return it to Feral Program Coordinator.
3. Federal Program Coordinator forward package to the Financial Analyst
4. Financial Analyst reconciles current expenditures in MMARS to grant expenditure spreadsheet aligning to corresponding activity code(s).
5. Federal Grants Analyst
   1. Inputs expenditures/activities into HUD IDIS system to obtain HUD voucher # and authorization.
   2. Attach the HUD voucher form to the vendor invoice packet
   3. Log and submit the payment voucher packet to accounting.
6. Accounting will:
7. Send payment to the subrecipient
8. Draw down

# PROJECT MONITORING

## PURPOSE

This document is intended to outline the Department of Housing and Community Development’s policy on programmatic monitoring of subrecipients receiving ESG and/or ESG-CV funding.

## POLICY STATEMENT

EOHLC is responsible for ensuring compliance with all regulatory and statutory requirements relative to ESG and ESG-CV funding. Therefore, it is incumbent upon EOHLC staff to ensure Emergency Solutions Grant funds or those specifically delineated as match are spent on time and in compliance with all regulatory, statutory, and mandates outlined in the subrecipient agreements. EOHLC staff also ensure adherence to the Continuum of Care’s written standards.

Programmatic monitoring is an essential part of ensuring the effectiveness of programs funded to meet the basic needs of those at risk of or experiencing homelessness and ensuring the policies and procedures outlined by EOHLC are being adhered to. EOHLC has developed the following policy and procedures to ensure that subrecipient monitoring is an effective ongoing process.

The risk assessment tool is a comprehensive tool that reviews the past programmatic and financial performance of subrecipients. Completed risk assessments target attention to program activities and participants that represent the greatest risk of poor programmatic performance and/or susceptibility to fraud, waste, and mismanagement. Once the level of risk is determined for each subrecipient, the appropriate monitoring level is determined. To ensure compliance, all subrecipients will receive annual risk assessments prior to any program expenditure. In addition, programs scoring for “high” risk will receive, at minimum, annual desk audits and a site visit every 24 months. A “medium” score will, at minimum, receive a site or desk review every 24 months. And those with a “low” risk score will be reviewed as needed. EOHLC may elect, at any time, to complete chart reviews to assess the quality of services offered to program participants or address regulatory concerns.

EOHLC will issue a formal finding letter within 60 days following any desk or site monitoring. As appropriate, EOHLC will create a corrective action plan for areas of concern. Failure to submit an acceptable plan of correction within the timeline outlined in the finding letter can result in additional action ranging from placing a hold on reimbursement requests to reallocation of funds awarded to the organization. These decisions will be made as a team, as needed, within EOHLC based on the seriousness of the original findings and the responsiveness of the subrecipient.

Programmatic and fiscal monitoring for homeless service organizations includes the the following but is not limited to:

* Review of Policies and Procedures that outline client service provision
* File review of randomly selected client files, including review and comparison of information provided in the HMIS record with paper files
* For site-based projects, a physical inspection of the facility
* Staff Interviews
* Cost supporting documentation
* Accounting of Policies and Procedures

This monitoring policy may evolve overtime as appropriate and as funding and capacity needs change.

## DEFINITION OF TERMS

**Grantee:** EOHLC for ESG(CV).

**Subrecipient:** Subrecipients are entities that are provided ESG and CDBG funds by a grantee for their use in carrying out agreed-upon, eligible activities.

**Program Monitoring:** is the primary tool EOHLC uses to ensure subrecipient programs are being operated in accordance with Federal, State, and City laws/ordinances, and contractual obligations.

**Risk Assessment:** An annual assessment of risk for each subrecipient to determine the level of monitoring to be conducted.

**Desk Monitoring:** a monitoring review conducted without a visit to the subrecipient location.

**Monitoring Letter:** written correspondence sent to the subrecipient within 60 days after the completion of a monitoring visit outlining the results of the monitoring visit.

**Monitoring Finding**: is a deficiency in program performance based on material noncompliance with a statutory, regulatory, or program requirement for which sanctions or other corrective actions are authorized.

**Monitoring Concern:** is a deficiency in program performance not based on a statutory, regulatory, or other program requirement. Monitoring Concerns that are not addressed can become a Monitoring Finding.

**Programmatic Monitoring:** is a process that helps improve subrecipient program performance and achieve results. Its goal is to improve current and future program outcomes, and impact.

**Financial Monitoring:** is a process that helps improve subrecipient financial performance and achieve results. Its goal is ensure financial compliance.

**Site Visit:** a visit to the subrecipient program site to observe facilities, interact with staff and program participants, ensure program is in operation during contractual terms, inspect for health, safety, and sanitary conditions.

**Homeless Management Information System (HMIS):** a local information technology system used to collect client-level data and data on the provision of housing and services to homeless individuals and families and persons at risk of homelessness.

## PROCEDURES

**Risk Assessment:** Assigned contract managers will complete the risk assessment tool on the ESG Monitoring Toolkit file for each subrecipient to determine the level of oversight necessary to ensure successful operation of the program.

The Risk Assessment is to determine the monitoring level (High/Medium/Low) for each sub-recipient. Subrecipients will be assigned for monitoring based on their overall ranking and the division’s resources.

Selection for programmatic monitoring is not based solely on scores and ranking outlined in the Risk Assessment. Staff may select an agency with a lower risk for monitoring because of unique circumstances or a specific risk factor that may reveal a need for a program or project monitoring. The following chart, based on risk assessment, will be utilized in determining frequency and type of monitoring a subrecipient will receive throughout their contract:

|  |  |
| --- | --- |
| Subrecipient Risk Level | Minimum Required Monitoring |
| High Risk | On site visits every 24 months, and file reviews annually |
| Medium Risk | On site visit or desk review every 24 months |
| Low Risk | As needed |

**Program Monitoring:** Once a subrecipient has been identified for an on-site program monitoring, a monitoring date is established with the subrecipient. Email correspondence is sent to the organization confirming the meeting date, purpose, as well as advising of specific documents, processes and areas subject to review. The EOHLC staff conducting the program monitoring shall inform the subrecipient of any program Findings or Concerns within sixty (60) days after the conclusion of the monitoring visit.

**Desk Monitoring:** Desk Monitoring is performed on each contract award to ensure the standards and requirements are met according to the subrecipient agreement, department policy, and regulatory requirements. Desk monitoring may include: reviewing the accuracy of reimbursement submissions, outcome and output reports, running Homeless Management Information System (HMIS) reports to review program performance, HMIS chart reviews, issuing deficiency letters, email notifications, and other documentation relative to the subrecipient operations.

## ACCESS TO RECORDS

Subrecipients must comply with the requirements for access to records which establish that HUD, the HUD Office of the Inspector General, and the Comptroller General of the United 139 States, or any of their authorized representatives, and EOHLC, must have the right of access to all documents, papers, or other records kept by the subrecipient relevant to the ESG award. This also includes access to subrecipients’ staff for the purpose of interview and discussion of documents. These rights last as long as the records are retained.

# APPENDIX A ORGANIZATIONAL POLICY REQUIRMENT SUMMARY AND CHECKLIST

Providers are required to keep records of the following:

**Client Level Documentation:**

* Program participant records that include the following:
  + Documentation of homelessness or at risk of homelessness status
  + Compliance with regulations related to providing program services in accordance with program components and eligible activities, determining eligibility and

amount and type of assistance, and using appropriate assistance and service (see 24 CFR 576.101, 24 CFR 576.106, 24 CFR 576.401(a) and (b), and 24 CFR 576.401 (d) and (e)).

* Initial consultation form and case notes
* Intake and certification form
* Follow-up case manager/client meetings and at least monthly case notes
* Documented individualized housing and service plan, including a path to

permanent housing stability

* Documentation of services and assistance provided to the program participant,

including, as applicable, leases and rental assistance agreement, the security deposit, rental assistance, and utility payments made on behalf of the program participant. Documentation should include dates of occupancy by program, type of assistance, payee name, client name, check number, and amount paid using ESG funds

* The monthly allowance for utilities (excluding telephone) used to determine

compliance with the rent restriction

* Compliance with the housing standards in 24 CFR 576.403, including

inspection reports

* Types of services provided under ESG, including rental assistance, housing

stabilization, and relocation services,

* Determinations of ineligibility or termination of assistance (if applicable)
* For each individual and family determined ineligible to receive ESG assistance,

the client file must include documentation of the reason for that determination (note that documentation of termination of assistance must comply with the requirements

in 24 CFR 576.402.)

* Documentation of the HMIS client ID number or a documented reason why the number is not available

**Providers are Required to Establish Organization-Level Policies and Documentation for the Following:**

* Compliance with the requirements of 24 CFR 576.400 for consulting with the

Continuum of Care and coordinating and integrating ESG assistance with programs

targeted toward persons experiencing homelessness and mainstream service and

assistance programs

* Participation in HMIS or a comparable database
* Compliance with organizational conflicts-of-interest requirements in 24 CFR

576.404(a), a copy of the personal conflicts of interest policy or codes of conduct

developed and implemented to comply with the requirements in 24 CFR 576.404(b),

and records supporting exceptions to the personal conflicts of interest

* Compliance with the homeless participation requirements under 24 CFR 576.405
* Compliance with faith-based activities requirements under 25 CFR 576.407
* Compliance with the nondiscrimination and equal opportunity requirements under 24

CFR 576.407(a)

* Compliance with the uniform administrative requirements in 24 CFR part 84
* Compliance with the environmental review requirements, including flood insurance

requirements

* Certifications and disclosure forms required under the lobbying and disclosure

requirements in 24 CFR part 87

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* Compliance with the displacement, relocation, and acquisition requirements in 24 CFR

576.408

* Documentation of how ESG funds were spent on allowable costs in accordance with

the requirements for eligible activities

* Receipt and use of program income
* Procurement contracts and documentation of compliance with the procurement

Requirements

* Written confidentiality procedures to ensure:
  + All personally identifying information of any individual or family who applies for and/or receives ESG assistance will be kept secure and confidential.
  + The address or location of any domestic violence, dating violence, sexual assault, or stalking shelter project assisted under ESG will not be made public, except with written authorization of the person responsible for the operation of the shelter.
  + The address or location of any housing of a program participant will not be made public, except as provided under a pre-existing privacy policy of the provider and consistent with state and local laws regarding privacy and obligations of confidentiality.
* Period of Record Retention 24 CFR 576.500(y) and 24 CFR 578.103(c)
* Provider Monitoring
* Lead-Based Paint Requirements [24 CFR 35.700-730 (PBRA); 24 CFR 35.1000-1020 (Supportive Services);24 CFR 35.1200-1225 (TBRA); 24 CFR 576.403(a).
* All HUD-funded programs with housing units occupied by participants are required to incorporate lead-based paint remediation and disclosure requirements. Generally, these provisions require the provider to screen for, disclose the existence of, and take reasonable precautions regarding the presence of lead-based paint in leased or assisted units constructed prior to 1978.
* CoC-funded units are required to incorporate HUD regulations in 24 CFR part 35, subparts A, B, K, and R. ESG-funded projects are required to incorporate the Lead-Based Paint Poisoning Prevention Act (42 USC 4821-4846), the Residential Lead-Based Paint Hazard Reduction Act of 1992 (42 USC 4851-4846), and 24 CFR part 35, subparts A, B, H, J, K, M, and R in the unit.
* Habitability Standards (ESG Rapid Re-Housing Only) [24 CFR 576.403(c); 24 CFR 576.500(j)
* Federal Fair Housing Act and Affirmative Outreach Disabilities Policies

# APPENDIX B FILLABLE FORMS LIST

The following example forms have been provided by EOHLC for the purpose of assisting with documentation and compliance.

Form 1: Homeless Certification

Form 2: Zero Income

Form 3: Verification of Earnings

Form 4: Income Asset Expense Declaration

Form 5: Request for Lease Approval

Form 6: HQS Inspection

Form 7: Inspection Deficiencies Notice

Form 8: Delayed Exterior Repair

Form 9: Owner Certification Lead Paint

Form 10: Disclosure of Information on Lead-Based Paint

Form 11: Calculation Worksheet

Form 12: Re-certification Form

Form 13: Missing Documentation

Form 14: HUD Habitability Inspection