PROJECT MONITORING POLICY AND PROCEDURE

Lakeland, Winter Haven/Polk County
Continuum of Care
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Lead Agency
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Purpose

This procedure implements policy for project monitoring contained in HUD 24 CFR Part 578, Homeless Emergency Assistance and Rapid Transition to Housing: Continuum of Care Program, Interim Rule and other HUD documents for the Lakeland/Winter Haven/Polk County Continuum of Care. It is applicable to all Continuum of Care (CoC) grant recipients and to Emergency Solutions Grant (ESG) Subrecipients. The goal is to define a process which will enable CoC program recipients and subrecipients to maintain compliance with HUD requirements.

Definitions

Collaborative Applicant:	An eligible applicant that has been designated by the Continuum of Care to apply for a grant for Continuum of Care planning funds on behalf of the Continuum.
Lead Agency:	Agency that is designated to carry out the activities of the CoC or grant including fiscal and compliance activities. Regular administrative tasks may include, but are not limited to: management of the annual HUD application, coordination of other funding opportunities, project and system monitoring, meeting management, etc. The Lead Agency for the Lakeland/Winter Haven/ Polk County Continuum of Care is the Homeless Coalition of Polk County.
Project Monitoring:	The collection and analysis of information about a project undertaken while the project is ongoing. The goal of project monitoring is to improve performance.
Recipient:	An applicant that signs a grant agreement with the U.S. Department of Housing and Urban Development (HUD), as defined in Section 424 of the McKinney-Vento Act.
Subrecipient:	A private nonprofit organization, State or local government, or instrumentality of a State or local government that receives a sub grant from the recipient to operate a project. The definition of "subrecipient" is consistent with the definition of "project sponsor" found in Section 401 of the McKinney-Vento Act.

Policy

The Homeless Coalition of Polk County as the Lead Agency will establish and maintain standard procedures for ensuring that CoC and ESG funds are used in accordance with federal requirements and will establish and maintain sufficient records to enable the U.S. Department of Housing and Urban Development (HUD) to determine whether the recipient and its subrecipients are meeting the requirements of 24 CFR Part 578.

To support this role and responsibility, CoC Program monitoring activities will include financial and program compliance outlined in 24 CFR Part 578 identified in this policy and the supporting CoC FL-503 Project Monitoring Checklist found at Appendix A.

The monitoring planning year will be from October 1 through September 30.

Monitoring Process Oversight

The Capacity Building Committee will oversee the project monitoring process. The committee will evaluate the monitoring process to determine its effectiveness in enabling CoC program recipients and subrecipients maintain compliance with HUD requirements. It will review all monitoring reports and approve corrective actions as required.

Performing Monitoring

Under the supervision of the Lead Agency Executive Director and with the assistance and guidance of the Capacity Building Committee, the CoC planning staff will monitor and evaluate the performance of CoC and ESG funded projects, their compliance with funding requirements, and progress on agency plans to correct cited deficiencies.

Monitoring Scheduling

All CoC projects will have annual monitoring visits, but in no case will a project go more than two years without a monitoring visit. All ESG projects must have a monitoring visit during the grant term.

The order for monitoring CoC projects is determined by a risk assessment based upon weighted risk factors. The total possible score is 95 points. The projects will be monitored in order from highest to lowest risk according to the risk assessment.

An Annual Monitoring Schedule of all on-site monitoring visits during the monitoring planning year will be developed by the CoC planning staff and approved by the Executive Director. A copy of the approved Annual Monitoring Schedule will be provided to each agency with a project on the schedule.

The Lead Agency will contact the agency with a scheduled on-site visit to coordinate the visit at least two weeks before the site visit. The CoC planning staff will perform the monitoring visit.

If an agency has more than one project to be monitored on the Annual Monitoring Schedule, every effort will be made to avoid multiple requests for the same information.

Procedures

Risk Assessment

Each project will be evaluated annually to determine the risk inherent to the program. The recipients will be ranked from the highest score to the lowest score. Programs will be evaluated according to the following risk assessment:

- Has not been monitored in over one year (40 points)
- Staff turnover (5 points)
- Project Performance (25 points)
- Previous monitoring findings (10 points)

- Staff Responsiveness-- Have there been previous compliance or performance concerns including failure to meet schedules, submit timely reports and/or clear monitoring/audit findings? (15 points)

Monitoring Process

Planning

Early in September a risk assessment and prioritization of all agencies with HUD funded projects is completed for the next monitoring planning year. Within three weeks of the completion of the risk analysis a letter informing of intent to monitor is provided to the Executive Director and Program Manager of each agency to be monitored during the year.

Data Collection

Data is collected to answer each item in the CoC FL-503 Project Monitoring Checklist. Sources of information include documents requested from the project agency, HMIS project reports, lead agency records, and on-site data collection. The Lead Agency will ensure that the same documents have not been requested previously.

Prior to on-site data collection certain HMIS reports will be generated and various documents will be requested from the recipient or subrecipient.

Agency Document Request

Documents to be requested from the recipient or subrecipient include:

- HUD grant agreement for the project being monitored, including any amendments;
- HUD project application (renewal or new, as appropriate) for the contract year being monitored;
- Most recent Annual Performance Report (APR) submitted to HUD;
- List of all participants served in past 12 months, including admission date and discharge date, if applicable (Initials or unique identifier only);
- List of all applicants declined for admission in the past 12 months (Initials or unique identifier only;)
- Most recent complete audit for the grantee being monitored;
- Screen shots of last two eLOCCS vouchers;
- List of all staff billed to CoC or ESG contract, including name, title and % FTE billed to the contract;
- Name and title of person(s) ensuring client children are enrolled in school;
- Any HUD audit finding in the last 12 months;
- Percentage of CoC or ESG funds spent in the last full operating year;
- Written policies and procedures for the management of the CoC or ESG program including:
    - Confidentiality policy;
    - Conflict of Interest policy;
    - Eligibility and intake requirements for the program being monitored;
    - Intake policy for the program being monitored (including all documents provided to participants and all documents participants must sign) – PSH only;
    - Non-discrimination policy;
    - Agency Code of Conduct;

- Release of information forms provided to and completed by program participants;
- Process for terminating client participation in the program;
- Ongoing assessment of supportive services needs and updating the Supportive Service Plan annually;
- Protection of personal data;
- If not contracted to serve chronically homeless, policy and procedures for ensuring that turnover beds are being prioritized for the chronically homeless.
- Policy or procedures to ensure all clients are referred through Coordinated Entry.

Documents from the data request are used to answer the following Monitoring Checklist items:

B (2) If not contracted to serve chronically homeless, are there policies/procedures in place to ensure that turnover beds are being prioritized for the chronically homeless?

B (3) Does the grantee have procedures for the termination of client participation and due process?

B (4) Does the grantee conduct on-going assessments of the participants' supportive services needs and update the supportive service plan annually?

D (1) Does the agency have an annual independent audit? If so, obtain a copy of the auditor's report.

E (3) Does the agency have in place policies and procedures to protect hard copies (paper) with personal identifying information?

F (1) Is the grantee serving the target population stated in the Project Application (per the APR)?

F (3) Does the program have a designated staff person to ensure that children are enrolled in school and connected to appropriate services? (Name the individual in the comment box)

F (4) Were there any findings/concerns at a HUD monitoring visit within the past year?

F (6) Was the APR submitted on time? (within 90 days of program end).

F (7) Is the core data on the submitted APR accurate compared to data listed in the APR pulled from HMIS (Is the number of persons served w/in 1 person and is the outcome data all within 5%)?

F (10) What percentage of CoC funds did the program spend in their last full operating year?

Lead Agency Records

HMIS reports are used to answer the following Monitoring Checklist items:

B (1) If contracted to serve chronically homeless, is the grantee serving the number of chronically homeless stated in Project Application? (While on-site verify documentation of chronic homelessness is in client file)

C (1) Percentage of program participants remaining in permanent housing for more than 6 months (or exiting to permanent housing for TH);

C (2) Percentage of program participants receiving earned income;

C (3) Percentage of program participants receiving income from any source;

C (4) Of the clients leaving the program what percentage are exiting to permanent housing?

C (5) Data Report Card Grade;

C (6) The number of participants being served (compare to application on eSnaps);

C (7) Has the mean time homeless for clients entering the program decreased compared to the previous year?

HCPC records are used to answer the following Monitoring Checklist items:

E (1) The agency has a signed HMIS Participation Agreement.

F (5) Did the program resolve all concerns from the previous year's CoC monitoring visit?

F (9) Is there documentation that all clients were assessed through coordinated entry.

On-Site Data Collection

On-site data collection always begins with an entry meeting with the agency's Executive Director and HMIS Agency Administrator or Program Manager. The purpose of the entrance meeting is to discuss the objectives of the monitoring visit, the authority to do project monitoring, the files and records to be examined on-site, and to answer any questions the agency has about project monitoring. The on-site monitoring visit will take place immediately following the entry meeting.

Monitoring staff will randomly select 2 case files of clients currently in the program or recently discharged and use these files to answer the following CoC FL-503 Project Monitoring Checklist items:

A (1) File includes documentation that units passed housing quality standards inspection prior to initial client move-in.

A (2) For leasing funds, are the rent amounts within the current Fair Market Rent as established by HUD for the area? Note: Fair Market Rent includes utilities.

A (3) For projects using rental assistance, do the rent amounts meet rent reasonableness criteria (HUD form in file)?

A (4) Are the rents being charged accurately calculated (< 30% of income) and re-examined annually or when there is a change income with supporting documentation found in the client files?

A (5) For CoC funded RRH, security deposit does not exceed two months' rent. In addition to the security deposit the agency may also pay the final months' rent in advance with documentation on file.

A (6) Does the file include documentation that unit has passed annual housing quality standards inspections, including an inspection within the last 12 months?

B (5) Do the reviewed client files adequately document that the individuals or families were homeless prior to entry?

B (6) For PSH projects only, do the client files reviewed adequately document the homeless individuals' disabilities?

B (7) Do participant files contain documentation of household income?

B (8) Do participant files contain documentation of supportive services provided?

B (9) Are clients entering the program routinely screened for mainstream resource eligibility?

B (10) Are SOAR-trained case managers available to clients entering the program?

B (11) What is the Bed utilization rate/persons served (compare project application to APR)?

D (2) Were ALL grant funds expended for activities identified and approved in CoC application?

D (3) Is there adequate source documentation to support ALL expended grant funds (invoices, contracts, purchase orders, time sheets, etc.)?

D (4) Does the recipient track match at least quarterly and maintain source documentation?

D (5 Does the recipient draw funds from eLOCCS at least quarterly?

E (2) The agency has a signed authorization for release of information form that it uses for any client for which the agency uses HMIS for data sharing.

E (4) The agency enters Client Basic Demographic Data into the HMIS system within 72 hours of intake.

F (2) For TH projects only, do the entry-exit dates shown in the participant files indicate that the participants did not exceed the 24-month limitation of stay?

F (8) Is there documentation that all clients are entered into HMIS?

If issues are identified in the sample files, the monitors may either sample other files or review all files depending on the severity of the issue.

The final step in the on-site visit is an exit interview to explain preliminary results of the monitoring visit.

Reporting Results

Following the site visit, the CoC planning staff will provide the agency a copy of the monitoring form reflecting any notes taken during the visit. If deficiencies were cited, the agency will receive a Notice of Monitoring Deficiencies from the CoC planning staff citing deficiencies and requesting:

1. An explanation for each cited deficiency; and
2. The agency plan for correcting cited deficiencies within 30 days.

If no deficiencies are cited the agency will receive a letter summarizing the monitoring visit and informing the agency that there were no deficiencies.

Role of the Capacity Building Committee

Regular Meetings to Assess Project Performance

The Capacity Building Committee will meet at least quarterly to receive feedback from the CoC planning staff on status reports, APRs, audits and monitoring reports, and the results of site visits in order to determine whether projects are meeting performance goals and other expectations.

Notice to Poor Performers

In the event that a project (1) is not meeting performance goals; (2) did not provide a sufficient explanation for deficiencies identified during a site visit; or (3) did not follow the plan approved by the CoC planning staff for correcting such a deficiency, the committee will re-evaluate concerns about the

project's performance and, at its discretion, instruct the CoC planning staff to send a letter to the agency requesting other or additional corrective measures.

Assistance to Poor Performers

The Lead Agency, through the CoC planning staff and Capacity Building Committee, will provide reasonable assistance to underperforming recipients by, among other things:

1. Directing them to better performing providers for guidance on techniques to improve performance;
2. Directing them to research, webinars, websites, and other resources that could provide useful information and instruction; and
3. In cases where poor performance in a particular area is common among CoC providers, sponsoring or helping to arrange relevant training sessions for them.

Action in the Case of Persistent Poor Performance

If an agency fails to correct deficiencies cited in a monitoring report within 180 days of receiving a Notice of Monitoring Deficiencies from the CoC, the Capacity Building Committee may recommend to the Lead Agency Executive Director that the project funds be reallocated in accordance with the Reallocation Policy and Procedure.

Appendix A: CoC FL-503 Project Monitoring Checklist

Agency: _____ Project Name: _____

Name of Agency Director: _____ Nome of Program Manager: _____

Grant Number: _____Grant Start Date _____ Grant End Date _____

Monitoring End Date _____ Name of Person Monitoring: _____

A. Housing	Yes, No or N/A	Comments
A (1) File includes documentation that units passed housing quality standards inspection prior to initial client move-in.		
A (2) For leasing funds, are the rent amounts within the current Fair Market Rent as established by HUD (which includes utilities) for the area? Note: Fair Market Rent includes utilities.		
A (3) For projects using rental assistance, do the rent amounts meet rent reasonableness criteria (HUD form in file)?		
A (4) Are the rents being charged accurately calculated (< 30% of income) and re-examined annually or when there is a change income with supporting documentation found in the client files?		
A (5) For CoC funded RRH, security deposit does not exceed two months' rent. In addition to the security deposit the agency may also pay the final months' rent in advance with documentation on		

file.		
A (6) Does the file include documentation that unit has passed annual housing quality standards inspections, including an inspection within the last 12 months?		
B. Participants	**Yes, No or N/A**	**Comments**
B (1) If contracted to serve chronically homeless, is the grantee serving the number of chronically homeless stated in Project Application? (Documentation of chronic homelessness must be in client file)		
B (2) If not contracted to serve chronically homeless, are there policies/procedures in place to ensure that turnover beds are being prioritized for the chronically homeless?		
B (3) Does the grantee have procedures for the termination of client participation and due process?		
B (4) Does the grantee conduct on-going assessments of the participants' supportive services needs and update the supportive service plan annually?		
B (5) Do the reviewed client files adequately document that the individuals or families were homeless prior to entry?		
B (6) For PSH projects only, do the client files reviewed adequately document the homeless individuals' disabilities?		

B (7) Do participant files contain documentation of household income?		
B (8) Do participant files contain documentation of supportive services provided?		
B (9) Are clients entering the program routinely screened for mainstream resource eligibility?		
B (10) Are SOAR trained case managers available to clients entering the program?		
	Percentage	
B (11) What is the bed utilization rate/persons served (compare project application to APR)?		
C. Performance	**Percentage**	**Comments**
C (1) Percentage of program participants remaining in permanent housing for more than 6 months (or exiting to permanent housing for TH).		
C (2) Percentage of program participants receiving earned income.		
C (3) Percentage of program participants receiving income from any source		
C (4) Of the clients leaving the program what percentage are exiting to permanent housing?		
	Grade	
C (5) Data Report Card Grade.		

	Yes, No or N/A	
C (6) Is the number of participants being served consistent with the number of participants targeted in the grant application? If not, please explain.		
C (7) Has the mean time homeless for clients entering the program decreased compared to the previous year?		
D. Financial Management	**Yes, No or N/A**	**Comments**
D (1) Does the agency have an annual independent audit? If so, obtain a copy of the auditor's report.		
D (2) Were ALL grant funds expended for activities identified and approved in CoC application?		
D (3) Is there adequate source documentation to support ALL expended grant funds (invoices, contracts, purchase orders, time sheets, etc.)?		
D (4) Does the recipient track match at least quarterly and maintain source documentation?		
D (5) Does the recipient draw funds from eLOCCS at least quarterly?		
E. HMIS	**Yes, No or N/A**	**Comments**
E (1) The agency has a signed HMIS participation Agreement.		
E (2) The agency has a signed authorization for release of		

information form that it uses for any client for which the agency uses HMIS for data sharing.		
E (3) Does the agency have in place policies and procedures to protect hard copies (paper) with personal identifying information?		
E (4) The agency enters Client Basic Demographic Data into the HMIS system within 72 hours of intake.		
F. Other	**Yes, No or N/A**	**Comments**
F (1) Is the grantee serving the target population stated in the Project Application (per the APR)?		
F (2) For TH projects only, do the entry-exit dates shown in the participant files indicate that the participants did not exceed the 24-month limitation of stay?		
F (3) Does the program have a designated staff person to ensure that children are enrolled in school and connected to appropriate services? (Name the individual in the comment box)		
F (4) Were there any findings/concerns at a HUD monitoring visit within the past year?		
F (5) Did the program resolve all concerns from the previous year's CoC monitoring visit?		
F (6) Was the APR submitted on time? (within 90 days of program end)		
F (7) Is the core data on the		

submitted APR accurate compared to data listed in the APR pulled from HMIS (Is the number of persons served w/in 1 person and is the outcome data all within 5%)?		
F (8) Is there documentation that all clients are entered into HMIS?		
F (9) Is there documentation that all clients were assessed through coordinated entry.		
	Percentage	
F (10) What percentage of CoC funds did the program spend in their last full operating year? (Compare APR to funding amount)		