



## **2019 On-Site Client File Review Checklist**

### **All Program Model Types**

#### **Introduction**

The following file review checklist will be used to determine whether appropriate documentation has been maintained by a CoC grant recipient. The reviewer is responsible for determining whether sufficient supporting documentation is included in the program participant relevant files. The reviewers will review participant files and HMIS records for 6-10 program participants. Each question will be marked as 'Yes', 'No', or 'Not Applicable.' Several questions have additional details explained in the Appendix. Each question indicates the project types and/or specific participant criteria that it is applicable to. Common reasons that each question may be marked as 'No' are outlined, although additional reasons may be identified due to the specific contents of a file review.

#### **Instructions**

On the first day of the monitoring window, All Chicago staff will begin communicating with agency staff to identify a date for the on-site file review, which will be planned to occur between days 21-35 of the monitoring window. All Chicago will send the agency the selected list of files 1-2 days before the scheduled date so staff may retrieve the files. At the beginning of the review, All Chicago will ask staff to demonstrate how forms and documentation are organized within the file structure. However, agency staff do not need to remain with the monitors the whole time. All Chicago will highlight preliminary results at the end of the file review. There will also be time designated during this day for any or all of the following activities: clarifying discussion of the self-assessment, staff interviews, and review of additional on-site documents related to the desk audit. The agency will receive a summary report on day 36 which will contain the on-site file review results. A conference call is scheduled between days 37-40 to discuss the on-site file review results and to develop a technical assistance (TA) plan. TA activities occur during days 41-45 of the monitoring window or are scheduled for future dates as necessary.



## **Questions by Program Model Type**

Project Type	# Questions	Questions
Permanent Supportive Housing (PSH)	36	1-8, 10-18, 21-29, 30-34, 43-47
Rapid Re-housing (RRH)	30	1-7, 10-19, 21, 29, 30-33, 35-37, 43-46
Transitional Housing (TH)	29	1-7, 10-13, 14, 16, 17, 20-23, 29, 30-33, 38, 41, 43-46
Safe Haven (SH)	28	1-7, 9-14, 16, 17, 21, 22, 29, 30-33, 39, 42-46
Supportive Services Only (SSO)	22	1-7, 12, 13, 14, 16, 17, 29, 30-33, 40, 43-46

Joint Transitional Housing and Rapid Rehousing (TH-RRH): To be developed

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## A. SITE REQUIREMENTS

1. Do the records demonstrate that the agency is able to make the current Chicago HMIS Privacy Packet available to program participants upon request?

**Applicability:** All project types

**Reasons for No:** Agency is not able to produce a paper or electronic version of the packet; Packet is outdated

2. Does the agency have the (HMIS) Standard Agency Privacy Posting displayed where participants can easily view the sign?

**Applicability:** All project types

**Reasons for No:** Agency does not have posting displayed; Posting is displayed but not in a visible area; Posting is outdated

## B. HOMELESS DOCUMENTATION

3. For program participants who qualified because their primary nighttime residence was a public or private place not designed for or ordinarily used as a regular sleeping accommodation for human beings, including a car, park, abandoned building, bus or train station, airport, or camping ground, or because they were living in a supervised shelter designed to provide temporary living arrangements, does the participant file include one of the following forms of documentation?

- a. HMIS record(s) or comparable database
- b. Written referral by another housing or service provider
- c. Written physical observations of where the individual was or is currently living by staff and written record of reasonable efforts to obtain HMIS record or written referral
- d. Certification by the individual or head of household seeking assistance and written record of reasonable efforts to obtain HMIS record or written referral



**Applicability:** All project types; individual applicability depends on the specific situation of the participant

**Reasons for No:** File lacks acceptable form of homeless documentation; participant doesn't meet homeless eligibility criteria; homeless documentation does not cover the time of entry into the program; homeless eligibility information in HMIS conflicted with information in the file; conflicting information about the participant's eligibility is found in different parts of the file; it is unclear from the homeless documentation what eligibility criteria the participant met; self-certification is not signed

4. For program participants who qualified as homeless because they were exiting an institution where they resided for 90 days or less, and had resided in an emergency shelter or place not meant for human habitation immediately before entering that institution, does a review of program participant files confirm that they were in the institution 90 days or less as evidenced by:
  - a. discharge paperwork or written or oral referral from a social worker, case manager, or other appropriate official of the institution, stating the beginning and end dates of the time residing in the institution, or
  - b. a written record of the intake worker's due diligence in attempting to obtain the information above and a written certification by the individual seeking assistance that stated he or she is exiting (or has just exited) the institution where he or she resided for 90 days or less?

**Applicability:** All project types; individual applicability depends on the specific situation of the participant

**Reasons for No:** File lacks documentation of institutional stay; Documentation indicates the participant resided in the institution 90 days or more; Documentation does not cover time period immediately prior to enrollment in the program; Documentation does not clearly support that the participant resided in an institution



5. For program participants who qualified as homeless because they were exiting an institution where they resided for 90 days or less and had resided in an emergency shelter or place not meant for human habitation immediately before entering that institution, does a review of program participant files confirm that the program participant resided in a shelter or place not meant for human habitation immediately prior to entering the institution, as evidenced by:

- a. a written referral by another housing or service provider;
- b. a printed record from HMIS or a comparable database used by victim service providers or legal service providers;
- c. a written observation by an outreach worker of the conditions where the individual or family was living; or
- d. written certification by the individual or head of household seeking assistance?

**Applicability:** All project types; individual applicability depends on the specific situation of the participant

**Reasons for No:** File lacks documentation of participant's homeless eligibility prior to institutional stay; Documentation does not demonstrate the participant experienced literal homelessness immediately prior to the institutional stay; Documentation does not cover the time period immediately preceding the institutional stay

6. Where the program participant qualified under paragraph (4) of the definition of homeless and was served by a victim service provider, do the records show that either the program participant or the intake worker certified in writing that the individual or head of household made an oral statement that the program participant:

- a. was fleeing, or attempting to flee, domestic violence, dating violence, sexual assault or stalking, or other dangerous or life-threatening conditions that relate to violence;
- b. lacked the resources or support networks necessary to obtain other permanent housing; and
- c. had not identified other subsequent residence?



**Applicability:** All project types; individual applicability depends on the specific situation of the participant

**Reasons for No:** Neither program participant or intake worker certified the head of household's oral statement in writing; The certified oral statement does not meet the specified criteria; Participant was required to obtain unnecessary documentation to support their domestic violence status

7. Where the program participant qualified under paragraph (4) of the definition of homeless and was served by an organization that is not a victim service provider, do the records contain the required documentation and support for the program participant's oral statement that the program participant or family:
- a. was fleeing, or attempting to flee, domestic violence, dating violence, sexual assault or stalking, or other dangerous or life-threatening conditions that relate to violence;
  - b. lacked the resources or support networks necessary to obtain other permanent housing; and
  - c. had not identified other subsequent residence?

Additionally, does the documentation of the program participant's oral statement include:

1. a written certification by the head of household that the statement is true and complete; and
2. a written observation of the intake worker or a written referral by a housing or service provider, legal assistance provider, social worker, health care provider, law enforcement agency, pastoral counselor, or any other organization from whom the program participant had sought assistance for domestic violence, dating violence, sexual assault, or stalking. (This written referral or observation need only include the minimum amount of information required to document that the individual or family is fleeing domestic violence, dating violence, sexual assault or stalking and is not required if obtaining or maintaining this information would have jeopardized the program participant's health or safety).

**Applicability:** All project types; individual applicability depends on the specific situation of the participant

**Reasons for No:** Neither program participant or intake worker certified the head of household's oral statement in writing; The certified oral statement does not meet the specified criteria; Participant was required to obtain unnecessary



documentation to support their domestic violence status; the documentation does not include written certification that the statement is true and complete; the documentation does not include a written observation or written referral

## C. CHRONIC HOMELESSNESS DOCUMENTATION

8. Where chronic homelessness is required for entry into a project (e.g., Permanent Supportive Housing), does a review of program participant files confirm that there is acceptable evidence of the qualifying household's chronic homeless status at time of entry and that the recipient complied with the Chicago CoC Chronic Homelessness Verification Packet? See appendix for detailed requirements.

**Applicability:** PSH projects; participants who entered after the project's 2017 grant start date.

**Reasons for No:** Participant does not meet the chronic homeless definition; Chronic Homelessness Verification Packet was not completed; Chronic Homelessness Verification Packet was not completed correctly; Disability documentation insufficient; homeless status documentation insufficient; length of homelessness documentation insufficient;

## D. ELIGIBILITY

9. Did the recipient meet the requirement to serve hard-to-reach homeless persons with severe mental illness who came from the streets or places not meant for human habitation and have been unwilling or unable to participate in supportive services?

**Applicability:** SH projects; all participants

**Reasons for No:** Participant not literally homeless at entry; File lacks documentation of severe mental illness



## E. COORDINATED ENTRY

10. Do the HMIS records demonstrate that the participant was screened and referred via Coordinated Entry?

**Applicability:** PSH, RRH, SH, Youth TH projects; youth participants who entered after 4/20/17, individual participants who entered after 6/6/17, and family participants who entered after 8/14/17.

**Reasons for No:** No Coordinated Entry referral in HMIS; Participant has a Coordinated Entry referral to a different project in the agency; Transfer between programs occurred without utilization of CES

11. Do the HMIS records demonstrate that the recipient accurately entered HMIS Needs Statuses for all program participants in alignment with Coordinated Entry policies and procedures?

**Applicability:** PSH, RRH, SH, Youth TH projects; all participants.

**Other notes:** Needs status required to be updated within 2 business days. Needs status should reflect that the participant is enrolled in the program or the program is attempting contact.

**Reasons for No:** Coordinated Entry not used so HMIS Needs Status not updated; HMIS Needs Status not updated; HMIS needs status is incorrect

## F. HMIS DATA AT ENTRY INTO PROJECT

12. Does the project start date found on records in the file match the project start date in HMIS?

**Applicability:** All project types; all participants.

**Other notes:** See appendix for applicable rules by project type.

**Reasons for No:** Project start dates do not match; Records missing or unclear in file; HMIS data is missing



13. Do the HMIS records and participant files demonstrate that the recipient accurately entered the housing status at entry?

**Applicability:** All project types; all participants.

**Reasons for No:** Housing status not entered; Housing status does not match status located in the file; Entered as stably housed at time of entry; Evidence of housing status at entry not located in file; Housing status and current residence reflect different information

14. Do the HMIS records and participant files demonstrate that the recipient accurately entered the income at entry?

**Applicability:** All project types; all participants.

**Reasons for No:** Income entered does not match income documented in file; Calculation of monthly income is incorrect; Income documentation not located in file

15. Do the HMIS records and participant files demonstrate that the recipient accurately entered the move-in date?

**Applicability:** PSH and RRH projects; participants who entered or had an interim review after 10/1/17.

**Reasons for No:** Move-in date not entered, Move-in date entered incorrectly

## G. CLIENT CONSENT AND SUPPLEMENTAL (ROI)

16. Do the records in the file demonstrate that the program participant accurately completed the HMIS Client Consent and Supplemental (ROI)?

**Applicability:** All project types; all participants.

**Other notes:** Most recent version was released June 1, 2018.

**Reasons for No:** HMIS Client Consent form is missing from file; Supplemental form is missing from file; HMIS Client Consent form was completed but it is an outdated



version and the annual assessment date has passed at which the participant should have completed a new version; HMIS Client Consent form was incomplete and/or missing a signature

17. Do the HMIS records demonstrate that the recipient accurately entered the HMIS Client Consent for Data Sharing (ROI)?

**Applicability:** All project types; all participants who entered or had an interim review after 5/1/17.

**Other notes:** Use of supplemental form started 5/1/17.

**Reasons for No:** Consent form not entered in HMIS; Supplemental form not entered in HMIS; Data entry in HMIS does not match form in file; Start date for ROI in HMIS does not match project start date in the file; Unable to verify because HMIS Client Consent form is missing from file; The record is not locked in HMIS but should be; ROIs not entered for dependents

## H: LEASES, SUBLEASES & OCCUPANCY AGREEMENTS

18. Did program participants receiving permanent housing assistance have a signed and dated lease agreement of at least 1 year that was renewable (for a minimum term of 1 month) and terminable only for cause?

**Applicability:** PSH and RRH projects; participants with a move-in date.

**Reasons for No:** Original lease is missing from the file; current lease is missing from the file; incomplete lease in the file; lease does not clearly indicate terms of renewal; lease does not clearly indicate terminable causes; lease not dated; lease not signed

19. In instances where grant funds were expended for rental assistance, were lease agreements in place between the program participant and the landlord/landowner?

**Applicability:** RRH projects; participants with a move-in date



**Reasons for No:** Lease is between the agency and landlord instead of participant and landlord; Unable to determine because lease is not in the file

20. Do records document that program participants receiving transitional housing assistance signed a lease, sublease or occupancy agreement of at least 1 month that was renewable for up to 24 months?

**Applicability:** TH projects; all participants

**Reasons for No:** Lease/sublease/occupancy agreement is missing from the file; incomplete lease/sublease/occupancy agreement; lease/sublease/occupancy agreement does not clearly indicate terms of renewal; lease/sublease/occupancy agreement not dated; lease/sublease/occupancy agreement not signed

## I: LEASING AND RENTAL ASSISTANCE

21. Where grant funds were expended for leasing structures or units to provide housing or supportive services, was the rent paid reasonable in relation to rents being charged in the area for comparable space and did not exceed rents currently being charged by the same owner for comparable unassisted space?

**Applicability:** PSH, RRH, TH, or SH projects with leasing or rental assistance BLI; all participants within applicable projects

**Reasons for No:** Rent reasonableness documentation missing from file; rent reasonableness determination is incorrect; rent reasonableness not completed prior to lease

22. Where grant funds were expended for leasing structures or units to provide housing or supportive services, did the recipient or its subrecipients exceed HUD-determined fair market rents (FMR)?

**Applicability:** PSH, TH, or SH projects with leasing BLI; all participants within applicable projects



**Reasons for No:** Documentation that rent is under FMR missing from file; rent is above FMR for unit size

23. Where grant funds were expended for leasing structures or units, did the recipient or its subrecipients not exceed 2 months of actual rent for a program participants' security deposit or first/last months' rent?

**Applicability:** PSH or TH projects with leasing or rental assistance BLI; all participants within applicable projects

**Reasons for No:** Unclear because documentation of security deposit is missing from file; security deposit exceeded allowable amount

24. Where grant funds were expended for leasing structures or units to provide housing to homeless persons, did the recipient or its subrecipients meet the requirement to ensure lease agreements were in place between the recipient/subrecipient and property owner that supports the costs charged to the grant for leasing costs?

**Applicability:** PSH projects with leasing BLI; all participants within applicable projects

**Reasons for No:** Lease agreement between the recipient/subrecipient and property owner missing from file

25. Did the recipient and its subrecipients meet the requirement to calculate occupancy charges or rent collected from program participants as provided at 24 CFR 578.77?

**Applicability:** PSH projects with leasing or rental assistance BLI; all participants within applicable projects

**Reasons for No:** Occupancy charges or rent not documented in file; criteria or formula for calculating occupancy charges or rent is not clearly defined; file is missing record of updated occupancy charges/rent calculations



26. For project-based rental assistance paid, were there contracts between the owner of an existing structure and the recipient or subrecipient where the owner agrees to lease the subsidized units to eligible participants?

**Applicability:** PSH projects utilizing project-based rental assistance; all participants within applicable projects

**Reasons for No:** File is missing record of contract between owner and recipient/subrecipient outlining ability to lease unit to eligible clients; contract in the file is outdated; contract in the file is not signed or date

27. If an assisted unit was vacated before the end of the lease, did the recipient or its subrecipients pay rental assistance for vacancies for no more than 30 days from the end of the month in which the unit was vacated?

**Applicability:** PSH projects utilizing rental assistance BLI; individual applicability depends on the specific situation of the participant

**Reasons for No:** Rental assistance was paid for more than 30 days after the end of the month in which the unit was vacated; it is unclear in the file whether rental assistance payments stopped 30 days after the month in which the unit was vacated; rental assistance payments not documented in the file

28. For property damages paid, were expenditures for a one-time cost per program participant AND did not exceed 1-month's rent to pay for any damage to housing due to the action of a program participant?

**Applicability:** PSH projects utilizing rental assistance BLI; individual applicability depends on the specific situation of the participant

**Reasons for No:** Property damages paid exceed allowable amount; property damages paid more than once per program participant; it is unclear in the file whether property damages paid met the requirements; property damage payments not documented in the file



## J: HOUSING INSPECTIONS

29. Does a review of program participant files confirm that there is acceptable evidence that the recipient or its subrecipients conduct an initial/move-in and annual Housing Quality Standards inspections? To be considered complete, an HQS inspection should include the address, unit, date, signatures, determination, landlord name, etc.

**Applicability:** All project types that are supported with leasing or rental assistance budget line items; all participants in applicable projects.

**Reasons for No:** HQS inspection missing from the file; HQS inspection not completed prior to lease (or unable to determine if completed according to that timeframe); HQS inspection is missing final determination; unclear if repairs were resolved; signatures missing for tenant or property manager; HQS inspection form is incomplete

30. Does a review of program participant files confirm that there is acceptable evidence that the recipient or its subrecipients conduct a lead-based paint inspection if applicable?

**Applicability:** All housing under the CoC Program must meet all applicable Lead-Based Paint Requirements at 24 CFR part 35. For housing that receives operating funds but not funds for leasing or rental assistance, subparts A, B, K, and R apply.

**Other Notes:** When performing an HQS inspection, the lead-based paint questions included on the HQS Inspection Form 52580 suffice, even for those families with children.

**Reasons for No:** Lead-based paint inspection missing from file; unit did not pass inspection; inspection not completed prior to the lease

## K: SERVICES AND SUPPORTS

31. Does a review of program participant files confirm that there is acceptable evidence that the recipient or its subrecipients conduct an ongoing assessment of services? Is



there evidence of at least annual assessment of service needs to ensure mainstream benefits are received and renewed, including referrals to Affordable Healthcare?

**Applicability:** All project types; all participants.

**Reasons for No:** File lacks initial assessment; file lacks annual assessments; assessment doesn't ensure mainstream benefits are received and renewed; assessment doesn't determine need for healthcare benefits; assessment not signed and dated by staff and clients; assessment is minimal; assessment doesn't demonstrate changes in need

32. Does a review of program participant files confirm that there is acceptable evidence that the recipient or its subrecipients complete an initial Individual Service Plan (ISP) developed by the participant and Case Manager that includes goals and timeline for completion?

**Applicability:** All project types; all participants.

**Reasons for No:** ISP missing from file; goals are not specific; goals are not individual; goals are not easily understood; minimal goals are listed; ISP does not include due dates/timelines; it is unclear what is the role of the case manager versus the participant; it is unclear if the participant contributed to the creation of the ISP

33. Does a review of program participant files confirm that there is acceptable evidence that the recipient or its subrecipients provide referrals to mainstream resources?

**Applicability:** All project types; all participants.

**Reasons for No:** File does not contain documentation/copies of referrals or a referral checklist; the file does not have ROIs to support referrals

34. Did program participants receive supportive services for the duration of their stay in a permanent supportive housing project?

**Applicability:** PSH projects; all participants.

**Reasons for No:** Documentation of supportive services missing from the file



35. Did the recipient and its subrecipients meet the requirement that program participants receive supportive services for no more than 6 months after rental assistance ended?

**Applicability:** RRH projects; all participants

**Reasons for No:** Unable to determine length/extent of financial assistance from documentation in the file; Participant received services for more than 6 months after rental assistance ended

36. Were the program participants re-evaluated not less than once annually to determine if they lacked sufficient resources and support networks to retain housing without Continuum of Care assistance and the types and amounts of assistance that the program participant needs to retain housing?

**Applicability:** RRH projects; all participants

**Reasons for No:** Annual re-assessments not conducted; Re-assessment was not broad enough in scope to determine resources/support networks the participant needs to maintain housing; Discrepancy between amount of assistance needed as determined by assessment and amount of assistance provided

37. Does the project require participants to meet with a case manager at least once per month to assist the participant in ensuring long-term housing stability?

**Applicability:** RRH projects; all participants

**Reasons for No:** No evidence of monthly case management in the file

38. Did the recipient and its subrecipients meet the requirement to provide services to former residents of transitional housing for no more than 6 months after leaving transitional housing or homelessness, respectively, to assist their adjustment to independent leaving?

**Applicability:** TH projects; all participants



**Reasons for No:** Participant was provided services and exited more than 6 months after leaving TH

39. Do the records document that the housing provides low-demand services and referrals for the residents?

**Applicability:** SH projects; all participants

**Reasons for No:** Documentation indicates participant requirement; documentation does not indicate flexibility and individuality in services and referrals

40. Were supportive services being provided by a recipient or its subrecipients that did not also provide the housing or housing assistance for the program participants?

**Applicability:** SSO projects; all participants

**Reasons for No:** Documentation indicates the agency also provides housing assistance to the participant

## L: LENGTH OF TIME SERVED

41. Did the recipient and its subrecipients meet the requirement to provide transitional housing assistance for no longer than 24 months per program participant? (Except under documented circumstances)

**Applicability:** TH projects; all participants

**Other Notes:** HUD may discontinue assistance for a transitional housing project if more than half of the homeless individuals or families remain in the project longer than 24 months.

**Reasons for No:** Participant enrolled more than 24 months without documentation of additional time needed to prepare for independent living

42. Do the records document that the recipient met the requirement to provide 24-hour residence for eligible persons for an unspecified period?



**Applicability:** SH projects; all participants

**Reasons for No:** Documents in file indicate residence is not 24-hours; Documents in file indicate residence is limited in length

## M: EXITS

43. Does a review of program participant files confirm that there is acceptable evidence that the recipient or its subrecipients provide participants with a clear reason for termination?

**Applicability:** All project types; participants who have been terminated from the program.

**Reasons for No:** Documentation that participant received written reason for termination not included in the file

44. Does a review of program participant files confirm that there is acceptable evidence that the recipient or its subrecipients explain and provide participants with a due process for termination?

**Applicability:** All project types; participants who have been terminated from the program.

**Reasons for No:** Documentation that participant received due process when informed of termination not included in the file

45. Does a review of program participant files confirm that there is acceptable evidence that the recipient or its subrecipients document evidence of the participant's exit destination?

**Applicability:** All project types; participants who have exited the program.

**Reasons for No:** Documentation of exit destination missing from file; documentation in file is unclear what type of destination it is; File lacks third party



documentation, such as a lease, or attempt; Unclear whether destination documentation was requested

46. Does a review of program participant files confirm that there is acceptable evidence that the recipient or its subrecipients follow a Housing First approach by not terminating the participant for any of the following reasons: failure to participate in supportive services, failure to make progress on a service plan, loss of income or failure to improve income, active or history of substance abuse, having a mental health condition, having a physical or developmental disability, having a rental or eviction history, being too young or too old, having a criminal record with exceptions for mandated restrictions, being a victim of domestic violence, or any other activity not covered in a typical lease agreement?

**Applicability:** All projects; participants who have exited the program.

**Reasons for No:** Documentation in the file indicates a housing first approach was not followed

47. In permanent supportive housing projects where a qualifying program participant died, was incarcerated, or institutionalized for more than 90 days, do records document surviving members of the household who were living in a CoC Program-assisted housing at time of the qualifying member's death, long-term incarceration, or long-term institutionalization received rental assistance until the expiration of the lease in effect at the time of the qualifying member's death, long-term incarceration, or long-term institutionalization?

**Applicability:** PSH projects; individual applicability depends on the specific situation of the participant

**Reasons for No:** Remaining members of the household did not receive assistance until the expiration of the lease in effect; Unclear if remaining members received assistance until the expiration of the lease in effect



## APPENDIX

3. Project start date by program model type according to 2017 HMIS Data Standards Manual v 1.3 (updated April 2018):

**Safe Haven and Transitional Housing:** Date the client moves into the residential project (i.e. first night in residence).

**Permanent Housing, including Rapid Re-Housing:** Date following application that the client was admitted into the project. To be admitted indicates the following factors have been met: 1) Information provided by the client or from the referral indicates they meet the criteria for admission; 2) The client has indicated they want to be housed in this project; 3) The client is able to access services and housing through the project. The expectation is the project has a housing opening (on-site, site-based, or scattered-site subsidy) or expects to have one in a reasonably short amount of time.

**Other Service Projects:** including but not limited to: services only, day shelter, homelessness prevention, coordinated assessment, health care it is the date the client first began working with the project and generally received the first provision of service.

11. The requirements for documenting disability are:
  - a. written verification of the disability from a professional licensed by the state to diagnose and treat the disability and his or her certification that the disability is expected to be long continuing or of indefinite duration and substantially impedes the individual's ability to live independently; or
  - b. written verification from the Social Security Administration; or
  - c. the receipt of a disability check (e.g., Social Security Disability Insurance check or Veteran Disability Compensation); or



- d. intake staff-recorded observation of disability that, no later than 45 days of the application for assistance, is confirmed and accompanied by evidence in paragraph (c)(1), (2), (3), or (4) of this section; or
- e. other documentation approved by HUD.

15. Is there supporting documentation to verify the Head of Household met the Chronic Homeless Definition (at the time of intake):

**A homeless individual:**

- Current Living Situation: Currently living in a place not meant for human habilitation, safe haven, or emergency shelter;
- Disability Status: With a disability; and,
- Duration of Homelessness: Has been homeless on the streets or in shelter either:
  - o Continuously for at least 12 months; or,
  - o On at least 4 separate occasions in the last 3 years, so long as the combined occasions equal at least 12 months (365 days)

“Chronically homeless” also includes:

- Institutional Care: Persons who have been residing in an institutional care facility (e.g., jail, substance abuse or mental health treatment facility, hospital, or other similar facility) for fewer than 90 days who met all the necessary criteria above prior to entering that facility; or,
- Families: Families with an adult head of household or, if there is no adult in the family, a minor head of household who meets all the necessary criteria above.

**Current Homeless Status:**

Does a review of program participant files confirm that there is acceptable evidence of the qualifying head of households’ current homelessness? One of the following:

- HMIS record(s) or comparable database
- Written referral by another housing or service provider



- Written physical observations of where the individual was or is currently living by staff and written record of reasonable efforts to obtain HMIS record or written referral
- Certification by the individual or head of household seeking assistance and written record of reasonable efforts to obtain HMIS record or written referral

**Disability:**

Does a review of program participant files confirm that there is acceptable evidence of the qualifying head of household's disability? The requirements for documenting disability are:

- a. written verification of the disability from a professional licensed by the state to diagnose and treat the disability and his or her certification that the disability is expected to be long continuing or of indefinite duration and substantially impedes the individual's ability to live independently;
- b. written verification from the Social Security Administration;
- c. the receipt of a disability check (e.g., Social Security Disability Insurance check or Veteran Disability Compensation);
- d. intake staff-recorded observation of disability that, no later than 45 days of the application for assistance, is confirmed and accompanied by evidence in paragraph (c)(1), (2), (3), or (4) of this section; or
- e. other documentation approved by HUD.

**Length of Time Homeless:**

Does a review of program participant files confirm that there is acceptable evidence of the qualifying head of household's length of homelessness (12 months) as either one continuous year or 4 or more occasions of homelessness over a period of 3 years?

Using a combination of evidence, must document each occasion and break in homeless with at least one of the following:

- HMIS (or comparable database) record
- Written referral by another housing or service provider



- Written physical observation by community member of conditions where household is living
- Written physical observation by staff of conditions where the household is living or certification by staff of encounter with client prior to intake
- Last Resort (Second-Party): Written certification of staff based on professional judgement at intake and written record of reasonable efforts to obtain HMIS record and written referral
- Last Resort (First-Party): Certification of individual or head of household seeking assistance providing specific months residing in place not meant for human habitation, emergency shelter, a safe haven and written record of reasonable efforts to obtain HMIS record and written referral