

Monitoring & Technical Assistance Guide for Homeless Programs: Emergency Solutions Grant (ESG)

Lake County Community Development



- ✚ **Ensuring homeless funding is used effectively to assist homeless individuals & families to achieve self-sufficiency**
- ✚ **Complying with Federal Regulations and program requirements to maintain and expand funding**
- ✚ **Building grantee capacity & improving program performance to end homelessness in Lake County**

#	Requirement	Minimum Standard
Documentation Requirements		
1)	Program maintains adequate documentation to demonstrate participants were homeless prior to entry into the program in accordance to 24 CFR 583.5. (Exhibit A contains HUD definitions of homeless & required documentation.)	All client files reviewed meet the minimum documentation requirements in accordance to 24 CFR 583.5 to demonstrate participants are homeless prior to entry into the program. Except for shelters, the program has a procedure in place which indicates an order of preference for homelessness verification including 3 rd party, in-house verification and self-declaration in accordance with 576.500c.
2)	Program maintains adequate documentation to demonstrate participants in the ESG program do not exceed the allowable time limits: <ul style="list-style-type: none"> • Rapid Rehousing = 9 months • Shelter = 6 months • Homelessness prevention = 3 months¹ 	All client files reviewed demonstrate that participants do not exceed allowable time limits or less than 15% of files reviewed exceed the allowable time limits with written approval from Lake County or HUD or the program has a documented plan of correction to ensure all new and current clients have the necessary documentation.
Program Design & Policies		
3)	At least one homeless or formerly homeless person participates in a policy-making function within the program in accordance to 24 CFR 576.405 and, to the maximum extent practicable, involve the homeless in operating the program.	At least one homeless or formerly homeless person meaningfully serves on the grantee's Board of Directors or similar entity that considers and sets policies for the program.
4)	Program follows, to the maximum extent practicable, policies and procedures to ensure participants do not immediately become homeless when leaving the program (FOR PROGRAMS THAT ARE DESIGNED TO SERVE CLIENTS 6 WEEKS OR LONGER ONLY).	Program follows written plans to help residents acquire housing upon leaving the program and 80% of client files demonstrate diligent efforts to secure suitable housing.

¹ Rental assistance is limited to three months and payment of rental arrears is limited to three months.

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5)	All records containing personally identifying information (as defined in HUD’s standards for participation, data collection, and reporting in a local HMIS) of any individual or family who applies for and/or receives ESG assistance are kept secure and confidential.	In accordance to 2 CFR 200.332(a); ensure that every subaward is clearly identified to the subrecipient as a subaward and includes the following information at the time of the subaward and if any of these data elements change, include the changes in subsequent subaward modification. When some of this information is not available, the pass-through entity must provide the best information available to describe the Federal award and subaward.
6)	The program has a formal process that protects the rights of program participants related to termination of assistance.	In accordance with 24 CFR 576.203(c), if a program participant violates program requirements, the recipient or subrecipient may terminate the assistance in accordance with a formal process established by the recipient or subrecipient that recognizes the rights of individuals affected. The recipient or subrecipient 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.
Supportive Services		
5)	Case Management includes a timely in person assessment of need as well as the development of an Individualized Service Plan (ISP) that includes identification of need, services to be provided and auspices under which they are to be provided, the amount, scope, and duration of services, and client goals. Rapid rehousing programs must leverage the VI-SPDAT assessment that is performed on all Lake County individuals by PADS Lake County.	90% of client files reviewed have an Individual Service Plan (ISP) that includes identification of need, services to be provided and auspices under which they are to be provided, the amount, scope, and duration of services, and client goals. In addition, clients receive a copy of their ISP signed by both the caseworker and client and at least one staff visit per month is documented for the duration of the individual’s participation. <i>Effective August 30, 2015</i> , ESG rapid rehousing assistance can only be provided to participants receiving a VI-SPDAT score of 5, 6, 7, 8, or 9.

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6)	Program follows a written policy to systematically identify participants eligible for mainstream benefits, help participants enroll in all mainstream benefits for which they may be eligible, & ensure participants continue to receive benefits and effectively use those benefits to maintain self-sufficiency.	Program follows a written policy to screen clients for mainstream benefits during intake, help participants enroll in all mainstream benefits for which they may be eligible, & ensure participants continue to receive benefits and effectively use those benefits to maintain self-sufficiency.
7)	Program provides follow-up of clients for a minimum of 6 months after leaving the program. In homeless prevention programs, participants may only receive ESG prevention assistance once in a 24-month period.	In 75% of client files reviewed, the program demonstrates significant attempts to follow-up with clients within 6 months after leaving the program. In homeless prevention programs, procedures are in place to ensure that ESG assistance is provided only once in a 24-month period.
Housing		
8)	Housing is clean, secure, and in accordance to HUD Housing Quality Standards (HQS) 24 CFR 576.403. Please see Exhibit B for detailed ESG Habitability Standards.	See Exhibit B.
Financial		
9)	Program follows written policies and procedures to maintain adequate oversight and control of its finances to ensure accurate, current, and complete disclosure of financial results.	Program follows written procedures to record financial transactions, determine the reasonableness and allowability of costs, separate duties to ensure no one individual has authority over an entire financial transaction, and routinely compare expenditure & budget.
10)	Expenditures are eligible under the grant agreement / program regulations, are correctly classified, are supported by the general ledger, timesheets, payroll register, invoices, contracts, purchase orders, & receipts, and payment vouchers are submitted at least quarterly.	Payment vouchers are submitted at least quarterly and all expenditures reviewed are eligible, correctly classified, & have sufficient supporting documentation to demonstrate expenditures were incurred & justified. As necessary source documents will be cross referenced with voucher submissions.
11)	Program maintains time sheets that demonstrate salaries that are chargeable to more than one funding source or salaries shared among more than one budget line item are accurately allocated.	For all HUD funded positions, the program maintains time sheets that are signed and dated by the staff member and their supervisor. Time is recorded as actual time engaged in HUD activities (not percentages) and corresponds with billing information.

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12)	Program demonstrates meeting minimal match requirements of ESG (100%) 24 CFR 576.201.	Program leverage reports and vouchers provide adequate supporting documentation to demonstrate meeting cash or in-kind match requirements, including the specific amount and source of cash match.
13)	Program conducts an annual audit by an independent auditor that does not reveal findings or weaknesses that raise concerns about the agency's ability to sustain itself or meet grant obligations.	Most recent annual audit states that financial statements accurately reflect the actual revenues, assets, expenditures, & liabilities and the grantee quickly resolved any audit deficiencies, compliance findings, questioned costs, or recommendations.
14)	Program maintains a responsible financial plan and fundraising strategy updated annually and does not use HUD funds to replace State or Local government funds.	Program follows a written financial & fundraising plan updated annually and does not use HUD funds to replace local funds.
15)	Program follows written standards and guidelines for procurement to ensure that they are obtained as economically as possible through an open and competitive process, and that purchases are managed with good administrative practices and sound business judgment & prohibits conflicts of interest.	Program follows written procurement procedures that specify the steps taken to avoid the purchase of unnecessary items, some form of cost/price analysis for goods and services over a reasonable amount established by the program, and a system in place for tracking property and other assets bought or leased through grant funds.
16)	Homelessness prevention and rapid rehousing programs must have written criteria describing how the participant's share of rent and/or utilities is determined. In the case of rapid rehousing, the subsidy amount must be just enough for participants to maintain housing, with the subsidy declining over time.	Written standards exist for determining the share of rent and utilities covered by each program participant.
Progress and Reporting		
17)	Program accurately enters all client information and entry/exit information into the ServicePoint Homeless Management Information System within 5 days of services being provided. Recipients must adhere to the ESG Performance Measurement standards defined in Exhibit C.	Program enters all client data and entry/exit information into ServicePoint within 5 days of services being provided and program holds valid consent to service and release of information forms as necessary. As part of ESG Monitoring, the program's Data Quality HMIS report will be reviewed (where applicable).
18)	Program is progressing as planned in the original application – outcome goals and proposed number of clients served are achievable and within reach.	Progress is in line with outcome goals set in application, and actual clients served is in line with proposed number.

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19)	Quarterly reports are submitted on time with accurate and quality data.	Quarterly reports are submitted on time with accurate and quality data.
20)	Program is clearly meeting a goal in the Consolidated Plan, and has quantifiable data available for performance reporting.	Program demonstrates evidence that Consolidated Plan goal is being met and produces quantifiable quality data for performance reporting.