CT Balance of State Continuum of Care and Department of Mental Health & Addiction Services
CoC Project Monitoring Tool & Guide - 2027

Date Report Issued:

Recipient: **Service Provider/Subrecipient:**

Project Monitored: **Type of Review:**

Grant Number: **Monitoring Date:**

Current Operating Year: **Funder:**

Total Grant Amount: **Subrecipient Award Amount:**

Program Type: **Type of CoC Funds:** (include amounts)

Type of RA Funds: ☐ TRA ☐ PRA ☐ SRA ☐ N/A

Number of Households Served PIT: (include # of families & target pops)

CT BOS Renewal Project Evaluation Score:

Last QI Review Results:

Project Staff Participating in Visit:

Housing Innovations Staff Participating in Visit:

Report Key	
FINDINGS HIGHLIGHTED IN PINK	Signify significant area of non-compliance with federal, state and/or CoC requirements and/or risk of funding recapture. Submission of follow up plan required. You will receive a template and instructions for submission of a follow up plan with a final report. Monitoring may be abbreviated - items marked in pink will be assessed during abbreviated monitoring.
FINDINGS HIGHLIGHTED IN YELLOW	Signify area of non-compliance with federal, state and/or CoC requirements. Findings should be corrected. Submission of follow up plan is not required but agencies should note these are contractual obligations of the funding source(s).
CONTENT HIGHLIGHTED IN GREEN	Signifies best practice recommendations for consideration. Action is not required.
STANDARDS INDICATED WITH AN ASTERISK (*)	Monitoring may be abbreviated - items marked with an asterisk (*) will also be assessed during abbreviated monitoring.

Reviewer Impressions:

Sections

Visual Observation 4
Match Documentation 5
Project Administration & Indirect Costs and Requirements 6
Other Financial Management Requirements 8
Administrative Requirements 13
Reporting and Contract Requirements 18
Housing Assistance 20
Coordinated Entry & Participant Eligibility 32
Services 37
Emergency Preparedness & Response & Infection Control 46

Grantee Monitoring Tool & Guide Overview

IMPORTANT NOTE: This guide was compiled as a resource for Connecticut Balance of State Continuum of Care (CT BOS) & statewide Connecticut Department of Mental Health and Addiction Services (DMHAS) CoC Rental Assistance projects. It is based on the HUD CPD Monitoring Handbook 6509.2 REV7, & DMHAS & CT BOS Policies. This guide contains the monitoring standards determined to be the most significant and relevant for the types of CoC projects monitored by CTBOS and DMHAS. Additional areas may be reviewed by HUD during monitoring. For a complete listing of all HUD monitoring standards see HUD CPD Monitoring Handbookd (6509.2)

This guide includes requirements established by DMHAS, the Connecticut Department of Housing (DOH) and CT BOS that apply to Permanent Supportive Housing and Rapid Rehousing as specified in the CT PSH and RRH Requirements and Operations Guides. Both Guides are available on the Policies page of the CT BOS website.

This guide also includes requirements established by CT BOS. These requirements only apply to CT BOS projects. For CT BOS Policies, CT CAN Policies, and a range of resources and tools to help support compliance with HUD, DOH, DMHAS, & CT BOS requirements see the Policies Page and the Resources Page of the CT BOS website.

For Joint Transitional Housing (TH)/Rapid Rehousing (RRH) projects, the monitoring standards included in this guide for TH are applicable to the TH component and the standards for RRH are applicable to the RRH component.

Indicate Initials of Charts Selected and, if applicable, discharge/admission status				
#1 _____ ☐ Discharge ☐ Admission	#2 _____ ☐ Discharge ☐ Admission	#3 _____ ☐ Discharge ☐ Admission	#4 _____ ☐ Discharge ☐ Admission	#5 _____ ☐ Discharge ☐ Admission

- ☐ Applications, disposition records, and all related documents from at least one applicant referred by the CAN and not admitted to the program

Indicate Initials of Charts Selected:		
#1:	*#2:*	*#3:*

Visual Observation

1) Are financial records and valuables secured in limited access area? ☐ Yes ☐ No

Guidance: Recipients shall adequately safeguard all such assets and assure they are used solely for authorized purposes.

Reviewer Comments:

2) Are client files maintained in a confidential manner? * ☐ Yes ☐ No

Guidance: Recipients shall adequately safeguard charts and assure they are used solely for authorized purposes. Reviewer will look for evidence of locked charts and for proper safeguarding of client names and other confidential materials .578.103(b) Confidentiality

Reviewer Comments:

3) Does the agency have a drug free workplace statement? ☐Yes ☐ No

Guidance: Agency must have a drug free workplace statement that complies with the requirements of 24 CFR 21.200 and has been posted in an area visible to all employees engaged on the CoC award.

Reviewer Comments:

4) Physical plant *

A. Residents have adequate space with an acceptable place to sleep
☐ Yes ☐ No

B. Rooms have natural or mechanical ventilation
☐ Yes ☐ No

C. Residents have access to sufficient sanitary facilities
☐ Yes ☐ No

D. Heating and cooling is adequate/in working condition
☐ Yes ☐ No

E. Electricity/Illumination is adequate
☐ Yes ☐ No

F. Space/equipment to store and prepare food in a sanitary manner is suitable
☐ Yes ☐ No

G. Smoke detector is present on each occupied level of unit
☐ Yes ☐ No

H. Public areas have sufficient smoke detectors
☐ Yes ☐ No

I. Housing is maintained in a sanitary condition
☐ Yes ☐ No

Guidance: Items above are intended to inform a brief review of physical plant conditions. All housing assisted through leasing or rental assistance with CoC funds must be inspected prior to occupancy and re-inspected at least annually using HUD Housing Quality Standards. [*578.75(b)]*

Reviewer Comments:

Match Documentation

5) Required match. Is the required match met? All funds, except leasing, must be matched by at least 25% of funds or in-kind contributions from other sources. [578.53(a)] ☐ Yes ☐ No

Guidance: Agency must demonstrate by cash receipt in accounting records or MOU as specified below for in-kind that the required match was met for the program year being monitored. See HUD CoC Match Requirements.

Reviewer Comments:

6) In-Kind Match MOU. If the match has been met in whole or in part by services provided by a third party, is there an MOU that indicates: the hourly rate for the services (must be consistent with those paid for similar services); specific service to be provided; and profession of persons providing the service [578.73(c)(3)] ☐ Yes ☐ No

Reviewer Comments:

7) Eligibility of match. If match is met by in-kind contributions, would the services, goods, equipment, real property that is providing the match have been an eligible expense under Subpart D of the HEARTH CoC program? [578.73(c)(1)] ☐ Yes ☐ No

Guidance: For each component type (e.g. Rental Assistance, Supportive Services, Operating) eligible activities are defined in Subpart D of the HEARTH Interim Rule. Match must be used only for eligible activities. For more information see Fiscal Requirements Training Part 1 – slides, recording)

Reviewer Comments:

8) Value of match. Do records confirm that the value of each in-kind matching contribution was calculated properly? [24 CFR Part 84.23; 24 CFR Part 85.24; 24 CFR 578.73(b); 24 CFR 578.73(c); 24 CFR 578.103(a)(10)] ☐ Yes ☐ No

Reviewer Comments:

9) Operating year of match. Has the recipient or its subrecipients documented the eligibility and value of the cash and in-kind match contributions for the operating year(s) reviewed (e.g., all eligible confirmation letters for cash contributions, real property, goods, equipment, volunteer services, and memorandums of understanding (MOUs) for third-party services were executed prior to grant agreement execution)? [2 CFR 200.306; 24 CFR 578.73(b); 24 CFR 578.73(c)(3); 24 CFR 578.103(a)(10)] ☐ Yes ☐ No

Reviewer Comments:

10) Documentation of in-kind match. Does the grantee have documentation of the service hours provided where these hours are used as in-kind match? [578.73(c)(3)(ii)] ☐ Yes ☐ No
Guidance: Volunteer services shall be documented and, to the extent feasible, supported by the same methodology used by the recipient for employees; the basis for determining the value of personal services must be documented.

Reviewer Comments:

Project Administration & Indirect Costs and Requirements

11) Eligibility of Administrative Costs: If administrative funds are used for general management, oversight and coordination, has the grantee included the entire salary, wages and related costs of persons whose primary activity is program administration or has it pro-rated the share of

time of each person whose job includes any administrative function. Has the grantee used only one of these methods for each fiscal year grant? [578.59(a)(1)] ☐ Yes ☐ No

Reviewer Comments:

12) Allocation of Administrative costs. Have administrative costs been allocated to the following eligible activities: general management, oversight and coordination including travel costs associated with monitoring; contracts for legal, accounting or audit services; costs for goods and services required for administration of the program including equipment rental and purchase, insurance, utilities, supplies, rental and maintenance of office space; Training on Continuum of Care requirements (providing or participating in HUD sponsored trainings); or Environmental Review [578.59(a)] ☐ Yes ☐ No

Guidance: Reviewers will request a report showing administrative expenses drawn down and expended during the contract period. For more information see Fiscal Requirements Training Part 2 (slides, recording)

Reviewer Comments:

13) Staff eligibility for administrative costs. Does a randomly selected review of administrative personnel costs reveal that staff paid from CoC funds are working on eligible CoC funded activities? [578.59] ☐ Yes ☐ No
Guidance: If personnel costs are assigned to administration, reviewers will look for backup (e.g. time sheets) that shows staff was working on administrative activities for the time billed.

Reviewer Comments:

14) Sharing administrative funds. Does the grant recipient share at least 50% of the project administrative funds with its subrecipients? [578.59 (b)(2)] ☐ Yes ☐ No

Reviewer Comments:

15) Indirect Costs [578.63; 2 CFR 200.412-415]

a. Does the recipient allocate funds according to an indirect cost rate? ☐ Yes ☐ No

If no, proceed to Question 18, if yes proceed to 17b.:

b. Does the recipient have a Negotiated Indirect Cost Rate Agreement? ☐ Yes ☐ No
If no, proceed to Question 16d, if yes proceed to 16c:

c. Is recipient allocating costs consistent with the negotiated rate? ☐ Yes ☐ No

d. Does the recipient observe the expenditure limits for administrative funding at 578.59(a) – no more than 10% of the total grant amount? [578.63(c)] ☐ Yes ☐ No

e. Recipient is claiming the 15% de minimis indirect rate [200.414(F)] Has the recipient calculated the Modified Total Direct Costs in accordance with 200.68? ☐ Yes ☐ No

Guidance: For more information see Fiscal Requirements Training Part 2 (slides, recording)

Reviewer Comments:

Other Financial Management Requirements

16) Fiscal policies, procedures & records. Do the recipient and its subrecipients have written policies and procedures ensuring that the CoC program funds are used in accordance with requirements and sufficient records are maintained to enable HUD and the recipients to determine whether CoC requirements are being met? [24 CFR 578.103(a)] ☐ Yes☐ No

Reviewer Comments:

17) Source & application of funds. Do the recipient and its subrecipients maintain records that identify adequately the source and application of funds for Federally-sponsored activities?

☐ Yes ☐ No
Guidance: These records shall contain information pertaining to Federal awards, authorizations, obligations, unobligated balances, assets, outlays, income and interest. [2 CFR 200.302]

Reviewer Comments:

18) Internal controls. Do the fiscal records indicate that the grantee has effective internal control over, and accountability for, all grant funds, property and other assets and fiscal records that are adequately safeguarded? [2 CFR 200.303] ☐ Yes ☐ No

Reviewer Comments:

19) Recording of expenses. Do the grantees accounting records identify expenditures according to eligible activities [578.37-578.59, 2 CFR 200.302] ☐ Yes ☐ No

Reviewer Comments:

20) Expenditure eligibility. Randomly select financial transactions. Does a review of these transactions reveal that CoC expenditures were for eligible costs, that the transactions were supported by adequate source documentation and demonstrate that program expenses are allowable, allocable, and reasonable? [578.37-578.59; 2 CFR 200.302] ☐ Yes ☐ No

Guidance: For each component type (e.g. Rental Assistance, Supportive Services, Operating) eligible activities are defined in Subpart D of the HEARTH Interim Rule. For more information see: Fiscal Requirements Training Part 1 (slides, recording) & Part 2 (slides, recording)

Reviewer Comments:

21) Rental assistance expenditure eligibility. Were grant funds expended for rental assistance only for some or all of the following eligible costs, or the staff and overhead costs directly related to carrying out these eligible costs: rental assistance, administering rental assistance, security deposits, first/last months' rent, vacancy payments, and damages? [24 CFR 578.51]
☐ Yes ☐ No

Reviewer Comments:

22) Supportive services expenditure eligibility. Were supportive services paid with grant funds necessary to assist program participants to obtain and maintain housing and were the services provided specifically identified as eligible under 578.53(e)? [24 CFR 578.53(a)(1); 24 CFR 578.103(a)(9)] ☐ Yes ☐ No

Reviewer Comments:

23) Operating expenditure eligibility - security. If grant funds were expended on building security, were payments for a structure where more than 50 percent of the units or area was paid for with grant funds? [24 CFR 578.55(a)(4); 24 CFR 578.103(a)(17)] ☐ Yes ☐ No

Reviewer Comments:

24) Operating expenditure eligibility – maintenance, repair, utilities. If operating costs were expended on the maintenance and repair of housing or utilities, do records confirm that such costs are not included in the lease (if a lease has been executed)?[24 CFR 578.55(c); 24 CFR 578.103(a)(17) ☐ Yes ☐ No

Reviewer Comments:

25) Ineligible expenses. Does a review of program expenditures indicate the absence of any unallowable costs including entertainment, contributions and donations, fines and penalties, or general governmental expenditures, including salary and expenses of the chief executive officer of the recipient/subrecipient(s)? [24 CFR 578.99(e); 2 CFR 200.420-475] ☐ Yes ☐ No

Reviewer Comments:

26) Lobbying. Does a review of the expenditures indicate that costs related to lobbying political activities have not been charged to the program?[24 CFR 578.99(e); 2 CFR 200.450]
☐ Yes ☐ No

Reviewer Comments:

27) Payroll documentation. Are charges for salaries and wages based on payrolls documented by appropriate time sheets (including timesheets indicating actual times worked) and approved by responsible official of the grantee? [2 CFR 200.300-309] ☐ Yes ☐ No

Reviewer Comments:

28) Allocation of salaries. If salaries involve payments from more than one CoC activity line or more than one project (i.e., Rental Assistance, Leasing, Operating Costs, and Supportive Services) can payments for wages be clearly tracked to the eligible CoC activities? [2 CFR 200.405]
☐ Yes ☐ No
Guidance: For more information see Fiscal Requirements Training Part 2 (slides, recording) and Sample Personnel Activity Log

Reviewer Comments:

29) Program Income. Has program income earned by grantee been added to funds committed to project by HUD and used for eligible activities under 24 CFR Part 578 [578.97(b), 2 CFR 200.307]

☐ Yes ☐ No
Guidance: For more information see Fiscal Requirements Training Part 1 – (slides, recording)

Reviewer Comments:

30) Separation of duties: is there evidence that financial duties are separated so that no one individual has complete authority over a financial transaction? [2 CFR 200.302] ☐ Yes ☐ No

Reviewer Comments:

31) LOCCS. Does withdrawal information from the Line of Credit Control System (LOCCS) match the information from the CoC grantee's drawdown voucher requests and is project drawing down at least quarterly? [2 CFR 200.305] ☐ Yes ☐ No

Reviewer Comments:

32) Travel. Review a sample of travel expenditures. Were they necessary and proper? Was reimbursement in accordance with GSA policies? [2 CFR 200.474] ☐ Yes ☐ No

Reviewer Comments:

33) Cash payments. Did a review of the recipient's and its subrecipients' financial records demonstrate that cash payments were not being provided directly to the program beneficiaries? ☐ Yes ☐ No
Guidance: Gift cards are considered by HUD to be cash payments and are not allowable except if the purchases made using the card can be documented by a receipt (CoC FAQ #1542).

Reviewer Comments:

34) Equipment Records: Does the grantee maintain equipment records that contain information required (item, date acquired, cost, serial number, Federal share of acquisition)? [2 CFR 200.439] ☐ Yes ☐ No

Reviewer Comments:

35) Equipment Inventory: Has a physical inventory of the equipment been taken and the result reconciled with the property records in the past two years? [85.32 and 84.34] ☐ Yes ☐ No

Reviewer Comments:

36) Equipment Disposition: Do the recipient and subrecipient meet the requirement for procedures that require efforts to obtain the highest possible return for sale of equipment [24 CFR 84.34(f)(6); 24 CFR 85.32(d)(5)] and If grant-funded equipment was sold during the period under review, is there documented evidence to demonstrate that efforts were made to obtain the highest possible return? [24 CFR 84.34(f)(6); 24 CFR 85.32(d)(5)] ☐ Yes☐ No

Reviewer Comments:

37) Chart of accounts. Does the recipient's and its subrecipients' chart of accounts include a complete listing of the account numbers used to support the controls required to ensure that resources used do not exceed resources authorized? [2 CFR 200.302] ☐ Yes ☐ No

Reviewer Comments:

38) Audit. If Single Audits are required, does the recipient and its subrecipients have a system or methodology to ensure that such audits are conducted? [2 CFR 200.501]. And If single audits are required for any recipient or its subrecipient(s), is there documentation that the audits have been reviewed for compliance and that the recipient or subrecipient has taken appropriate follow-up actions, if necessary? [2 CFR 511]. If singe audits are not required, has the recipient and its subrecipients ensured that a standard audit was conducted? *(CT BOS Best Practice recommendation)*. ☐ Yes ☐ No

Reviewer Comments:

39) Fiscal controls. Did the recipient establish fiscal controls and accounting procedures to assure the proper disbursal of, and accounting for, grant funds to ensure that all financial transactions were conducted, and records maintained, in accordance with generally accepted accounting principles? [24 CFR 578.23(c)(5); 24 CFR 578.103(a)(17) ☐ Yes ☐ No

Reviewer Comments:

40) Procurement procedures. Do the nonprofit recipient and its subrecipients use established written procurement procedures? [2 CFR 200.317-326)] ☐ Yes ☐ No

Reviewer Comments:

41) Procurement standard of conduct. Do the recipient and its subrecipients meet the requirement to have a written standard of conduct governing the performance of its employees engaged in the award and administration of contracts? [2CFR 200.318] ☐ Yes ☐ No

Reviewer Comments:

42) Procurement free competition. Did the recipient and its subrecipients meet the requirement that all procurement transactions are conducted in a manner to provide, to the maximum extent practical, open and free competition? [2 CFR 200.319] ☐ Yes ☐ No

Reviewer Comments:

43) Unnecessary purchase. Did the recipient and its subrecipients meet the requirement to establish and follow written procedures to avoid purchasing unnecessary items? [2 CFR 200.318] ☐ Yes ☐ No

Reviewer Comments:

Administrative Requirements

44) Program fees. Grantee may not charge program participants any fees other than rent. Has the grantee complied with this requirement? [578.87(d)] ☐ Yes ☐ No
Guidance: For additional information see Housing Requirements Session 2 (slides, recording)

Reviewer Comments:

45) Subrecipient monitoring. Has the recipient evaluated each subrecipient's risk of noncompliance for the purposes of determining the appropriate subrecipient monitoring, (e.g., by considering prior experience with similar subawards, prior audit/monitoring results, new personnel or systems)? Does the recipient monitor subrecipients at least annually, retain documentation of monitoring and sanction of subrecipients, including findings and corrective actions required? Does the recipient provide a monitoring report to the CoC? If monitored by the recipient, did subrecipient(s) respond to resolve monitoring deficiencies [578.23(a)(16); 578.23(c)(8)]
☐ Yes ☐ No

Reviewer Comments:

46) Subrecipient agreements. Does the recipient have a signed agreement with all subrecipients requiring subrecipients to operate the project in accordance with the provisions of the CoC Program Interim Rule and certify that the subrecipients will a)maintain participant confidentiality; b) ensure the address or location of any family violence project assisted was not made public; c)establish the required educational policies and procedures d) designate a staff person responsible for ensuring that children served are enrolled in school and connected to appropriate services in the community; e)provide information, data and reports as required by HUD; and f) ensure subrecipent, its officers, and employees are not debarred or suspended from doing business with the Federal Government. [578.23(c)(11); 578.103(c)(4)]
☐ Yes ☐ No

Reviewer Comments:

47) Subrecipient classification. Has the recipient made an appropriate case-by-case determination of whether an entity that is receiving CoC funds is doing so in the role of either a subrecipient or contractor? [24 CFR 578.99(e); 2 CFR 200.330] ☐ Yes ☐ No
Guidance: See Using Contractors in HUD CoC and ESG Programs

Reviewer Comments:

48) SRA Contract. Where grant funds were expended for sponsor-based rental assistance, were there contracts between the recipient or its subrecipients and a sponsor organization of the program participant's housing owned or leased by the sponsor organization? [24 CFR 578.51(d); 24 CFR 578.103(a)(17)] ☐ Yes ☐ No

Reviewer Comments:

49) PRA Contract. For project-based rental assistance, 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? [24 CFR 578.51(e); 24 CFR 578.103(a)(17)]
☐ Yes ☐ No

Reviewer Comments:

50) Record retention. Are all records pertaining to CoC funds retained for the greater of 5 years or the period specified below? Participant eligibility documentation must be maintained for 5 years after the end date of the last grant period under which the participant was served. Where

CoC funds are used for acquisition, new construction or rehabilitation records must be maintained until 15 years after the date the project site was first occupied or used by participants. Has the project complied with record retention requirements? (578.103)
☐ Yes ☐ No

Reviewer Comments:

51) Homeless Participation. Does the grantee meet the participation requirements? (Each grantee and sub-grantee must have at least one homeless or formerly homeless individual on the board of directors or equivalent policy making entity. Each grantee and sub-grantee must to the maximum extent practicable involve homeless people through employment volunteer services or other means in maintaining, operating, and providing supportive services.) [578.75(g)]
☐ Yes ☐ No

Reviewer Comments:

52) CoC Written Standards. Did the recipient/subrecipient adopt the written standards for providing CoC assistance developed by the CoC? [24 CFR 578.23(c)(10); CoC grant agreement; 24 CFR 578.7(a)(9)] ☐ Yes ☐ No
Guidance: See CT BOS CoC Policies at: www.ctbos.org/policies

Reviewer Comments:

53) Participant Rights Notice *. Has the project documented receipt of the CT BOS Participant Rights Notice? [CT BoS Policies]. ☐ Yes ☐ No
Guidance: Client Bill of Rights, Emergency Transfer Rights, and Grievance Rights Notice have been consolidated into a single Participants Rights Notice

Reviewer Comments:

54) Nondiscrimination requirements. Does the project comply with the nondiscrimination requirements set forth in 24 CFR 5.105(a)? [578.93 (a)]. ☐ Yes ☐ No

Guidance: Recipients, subrecipients and partner agencies are subject to federal civil rights laws, including Fair Housing Act, Section 504 of the Rehabilitation Act of 1973, Title VI of the Civil Rights Act of 1964, the Age Discrimination Act of 1975, and the Americans with Disabilities Act of 1990.

Reviewer Comments:

55) Affirmatively furthering fair housing. If the recipient encountered a condition or action that impeded fair housing choice for current or prospective program participants, the recipient provided such information to the jurisdiction(s) that provided the Certification of Consistency with the Consolidated Plan? Did the recipient provide program participants with information on rights and remedies available under applicable federal, state, and local fair housing and civil rights laws?
☐ Yes ☐ No
Guidance: For more information please see: CT Fair Housing Center. Participants Rights Notice provides information on fair housing rights and remedies.

Reviewer Comments:

56) Reasonable accommodations *. Do the recipient and subrecipient make reasonable accommodations in rules, policies, practices and/or services when such an accommodation may be necessary to afford persons with disabilities equal opportunity to use and enjoy a CoC assisted housing unit or other CoC project service or activity? Do the recipient and subrecipient refrain from refusing residency and/or services to persons with disabilities or placing conditions on their residency or services because the persons may require reasonable accommodations? (Section 504 of the Rehabilitation Act of 1972 Joint Statement of HUD and DOJ – Reasonable Accommodations Under the Fair Housing Act – 5/17/04) ☐ Yes ☐ No
Guidance: For more information see: ADA Compliance Guide for Nonprofits

Reviewer Comments:

57) Accessibility for Persons with Disabilities *. Do the recipient and subrecipient: 1)Ensure that all meetings are held, and services provided in facilities that are physically accessible to persons with disabilities; 2) Take appropriate steps to ensure effective communication with applicants, beneficiaries, and members of the public, including furnishing appropriate auxiliary aids where necessary to afford equal opportunity to participate in, and enjoy the benefits of a CoC program or activity? Or if an action would result in a fundamental alteration in the nature of a program or in undue financial and administrative burdens, do the recipient and subrecipient take any other action that would ensure that, to the maximum extent possible, individuals with disabilities receive the benefits and services of the CoC program or activity? (*FY25 HUD Administrative Requirements and Terms*) ☐ Yes ☐ No
Guidance: For more information see ADA Compliance Guide for Nonprofits

Reviewer Comments:

58) Accessible technology. Do the recipient and subrecipient ensure comparable access for and effective communication with people with disabilities, including whenever electronic and information technology is used? *(FY25 HUD Administrative Requirements and Terms:*

Compliance with Section 504 of the Rehabilitation Act and the applicable sections of the Americans with Disabilities Act is required.) ☐ Yes ☐ No

Guidance: For more information see: Webinar slides - HI Accessibility Compliance Training (Section 508)*; Webinar Recording: ; Handout:* Accessibility (Section 508) Guide with screenshots

Reviewer Comments:

59) Drug-free workplace. Do recipients and subrecipients: 1) Publish a statement notifying employees that it is unlawful to manufacture, distribute, dispense, possess, or use a controlled substance in the applicant's workplace and such activities are prohibited. The statement must specify the actions that will be taken against employees for violation of this prohibition. The statement must also notify employees that, as a condition of employment under the federal award, they are required to abide by the terms of the statement and that each employee must agree to notify the employer in writing if the employee is convicted for a violation of a criminal drug statute occurring in the workplace, no later than 5 calendar days after such conviction. 2) Establish an ongoing drug-free awareness program to inform employees about: a)The dangers of drug abuse in the workplace; b) The applicant's policy of maintaining a drug-free workplace; c) Available drug counseling, rehabilitation, or employee assistance programs; and d)The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace. 3)Notify HUD and other federal agencies providing funding in writing within 10 calendar days after receiving notice from an employee of a drug abuse conviction or otherwise receiving actual notice of a drug abuse conviction. (*Requirements for Drug-free Workplace*)
☐ Yes ☐ No

Reviewer Comments:

60) Religious discrimination. In providing services and outreach activities related to such services supported in whole or part with CoC Program funds, do records document that the recipient did not discriminate against a program participant or prospective program participant on the basis of religion, a religious belief, a refusal to hold a religious belief, or a refusal to attend or participate in a religious practice? [24 CFR 578.87(b)(1); 24 CFR 578.87(b)(ii); 24 CFR 578.103(a)(13] ☐ Yes ☐ No

Reviewer Comments:

61) Religious activities. For recipients that engage in explicitly religious activities, do records document that the recipient performed such activities and offered such services outside of programs that are supported with federal financial assistance separately, in time or location, AND indicated that participation in such religiously explicit activities was voluntary for program

participants AND did not use CoC Program funds to support or engage in explicitly religious activities AND if a program participant objected to the religious character of a recipient that provided services, do records document that the recipient undertook reasonable efforts to identify and refer the program participant to an alternative provider within a reasonably prompt time?[24 CFR 578.87(b)(2); 24 CFR 578.103(a)(13)] ☐ Yes ☐ No

Reviewer Comments:

62) Organization chart. Do the recipient and its subrecipients have an organization chart that illustrates the actual lines of authority/responsibility? [24 CFR 85.20] ☐ Yes ☐ No

Reviewer Comments:

63) Employee responsibilities. Are primary duties for key employees of the recipient and its subrecipients defined? [24 CFR 85.20] ☐ Yes ☐ No

Reviewer Comments:

64) Conflicts of interest. Do the recipient/subrecipient, their employees, agents, consultants, officers, and elected or appointed officials meet the conflict of interest requirements (no financial interests or benefit from assisted activity on part of staff (or person with whom the staff member has immediate family or business ties) during his/her tenure with organization and one year following his/her tenure. This includes, procurement, rent reasonableness determinations and housing quality inspections for a property owned by the grantee or sub-grantee)? [578.95] ☐ Yes ☐ No

Reviewer Comments:

Reporting and Contract Requirements

65) APR. Was the most recent APR submitted to HUD no later than 90 days from the date of the end of the project's grant term? [578.103 (e)] ☐ Yes ☐ No

Reviewer Comments:

66) HMIS. Has the recipient or its subrecipents submitted client data to the CoC- designated HMIS (or comparable database, as applicable) for all program participants assisted? (HUD HMIS Data Standards and Comparable Database Requirements) ❍ ☐ Yes ☐ No

Guidance: HUD HMIS Data Standards; CT HMIS Knowledge Base; HUD Comparable Database Manual; Comparable Database Decision Tree

Reviewer Comments:

67) Grant amendment. If there was a significant change made that required a grant amendment, is an executed amendment on file? Did the CAN review and approve any grant amendments prior to submission to HUD and did the grantee notify the BOS SC of any approved amendments? Significant changes include, a change of recipient, a shift in a single year of more than 10 percent of the total amount awarded under the grant for one approved eligible activity category to another activity and a permanent change in the subpopulation served by any one project funded under the grant, as well as a permanent proposed reduction in the total number of units funded under the grant. [578.105 (a)] ☐ Yes ☐ No

Reviewer Comments:

68) YHDP Special Activities. If the project is using a YHDP special activity, has the grantee notified HUD via the project application or received HUD approval as required. ☐ Yes ☐ No

Reviewer Comments:

69) Number of Participants. Is the number of participants currently being served consistent with the number in the approved application? ☐ Yes ☐ No
Guidance: For YHDP projects, monitoring should note if the project is serving fewer participants than committed in the application; however, HUD is allowing some flexibility particularly for Navigator and Diversion/Rapid Entry.

Reviewer Comments:

70) Environmental Review. For projects in which participants do not choose their own housing unit, has the grantee complied with environmental review requirements (Grantee will not acquire, rehabilitate, convert, lease, provide sponsor or project based rental assistance, repair, dispose of, demolish or construct property or expend HUD funds until an Environmental Review under 24 CFR part 50 has been completed and the grantee has received HUD approval of the property)? [578.31] ☐ Yes ☐ No
Guidance: Nationwide Review covers the following project types through FFY27: Tenant-based Rental Assistance, Tenant-based Leasing, HMIS, Supportive Services Only, HMIS, CoC Planning. Where applicable, monitors will review files for evidence of environmental review. For more guidance see HUD Environmental Review Guidance

Reviewer Comments:

Housing Assistance

71) Rental Assistance Certificate (DMHAS PSH – TRA only). Does the Housing Provider provide each participant with a written copy of the CoC Rental Assistance certificate and maintain a copy in the participant's file? (CT PSH Operations Guide) ☐ Yes ☐ No
Guidance: Form is available at www.ctbos.org/resources

Reviewer Comments:

72) Housing Search (DMHAS PSH). Does the Housing Provider and/or Service Provider assist the participant to locate housing as quickly as possible and within 60 days from the date the certificate is issued? Does the Housing Provider issue an extension for up to 60 additional days if needed? Does the Housing Provider obtain written approval of the Housing and Homeless Services Unit for any additional extensions? (CT PSH Operations Guide) ☐ Yes ☐ No

Reviewer Comments:

73) Request for Lease Approval (DMHAS PSH). Does the Housing Provider maintain a copy of the Request for Lease Approval for all assisted units? (CT PSH Operations Guide) ☐ Yes ☐ No
Guidance: Form is available at www.ctbos.org/resources

Reviewer Comments:

74) Approval and Payment notification (PSH and TH). Does the project provide each participant with written notification specifying total contract rent for the unit, the participant's monthly contribution amount, and the requirement to report changes to income and/or household composition. (CT PSH Operations Guide) ☐ Yes ☐ No
Guidance: Letter is available at www.ctbos.org/resources

Reviewer Comments:

75) Rent Reasonableness Determination. Has the grantee conducted rent reasonableness determination assessments based on a minimum of three comparable unassisted units.? [578.49(b) and 578.51(g) and CT PSH Operations Guide] ☐ Yes ☐ No

Guidance: When grants are used to pay rent for all or part of a structure or structures, the rent paid must be reasonable in relation to rents being charged in the area for comparable space. In addition, the rent paid may not exceed rents currently being charged by the same owner for comparable unassisted space. The recipient or subrecipient must determine whether the rent charged for the unit receiving rental assistance is reasonable, taking into account the location, size, type, quality, amenities, facilities, and management and maintenance of each unit. Sample Rent Reasonableness Checklist and Certification form; HUD Rent Reasonableness Guidance

Reviewer Comments:

76) Rent Reasonableness Policy. Has the recipient and subrecipient established written policies and procedures for documenting comparable rents, determining rent reasonableness, and documenting rent reasonableness in participant case files? ☐ Yes ☐ No
Guidance: HUD Rent Reasonableness Guidance

Reviewer Comments:

77) FMR Ceilings (Leasing Projects Only). If CoC grant funds are used to lease individual units, has the grantee observed the limitation that rents may not exceed Fair Market Rents? [578.49(b)]
Guidance: HUD Fair Market Rents
☐ Yes ☐ No

Reviewer Comments:

78) Housing Quality Standards/NSPIRE. Has all housing assisted with leasing and rental assistance CoC funds been inspected prior to occupancy and re-inspected at least annually; beginning 10/1/26 has all housing assisted with leasing and rental assistance CoC funds been inspected in accordance with NSPIRE requirements for CoC programs? For DMHAS projects, are inspections performed within 15 days of receipt of the Request for Lease Approval? [587.75(b) CT PSH Operations Guide] ☐ Yes ☐ No
Guidance: HQS Inspection Form; National Standards for the Physical Inspection of Real Estate

Reviewer Comments:

79) Health and Safety Checklist. Has all housing been inspected using the "General Health and Safety Checklist" at least annually approximately 6 months following the HQS inspection?
(Required for all PSH, except DMHAS projects where there is no designated case manager – CT

PSH Requirements & Operations Guide, CT BOS Best Practices Recommendation for all other housing types) ☐ Yes ☐ No
Guidance: Form is available at www.ctbos.org/resources

Reviewer Comments:

80) Lead based paint visual inspection *. Has the grantee conducted a visual assessment of all units receiving financial assistance if the unit was constructed prior to 1978 and if there will be a child under 6 years of age or a pregnant woman residing in the unit? Have staff conducting the assessment completed the HUD web-based training? [578.99(f)] ☐ Yes ☐ No
Guidance: Units must be inspected to identify deteriorated paint (i.e., chipping, cracking, chalking, damaged, separated from substrate). HUD Lead Based Paint Visual Assessment On-Line Training

Reviewer Comments:

81) Lead based paint information. Do project files consistently document receipt by applicants and occupants of the Lead Hazard Information Pamphlet? [24 CFR 35.1010(b)] ☐ Yes ☐ No
Guidance: Protect Your Family from Lead in your Home pamphlet

Reviewer Comments:

82) Lead based paint data sharing – TBRA. Does the program share housing data with the local health department on a quarterly basis in an attempt to match assisted unit addresses with lead-poisoned children? [24 CFR 35.1225(f)] ☐ Yes ☐ No

Reviewer Comments:

83) Leases (PSH & RRH). Do participants have a signed lease with an initial term of at least one year, renewable for a minimum term of one month and terminable only for cause? Rental assistance projects must have leases between the program participant and the landowner or sublessor. Leasing projects must have a lease between the recipient or subrecipient and the landowner. Agreement/lease should provide formal due process rights. DMHAS projects must use the DMHAS standard lease or the lease must use the DMHAS approved lease addendum [578.77(a); 578.51(l)]
☐ Yes ☐ No

Reviewer Comments:

84) Rental Terms Summary Form (PSH). For new and renewal leases entered into on or after April 1, 2026 and on which a CoC recipient or subrecipient is the lessor, is the Rental Terms Summary Form completed and included in the lease? (CT Public Act 24-44) ☐ Yes ☐ No

Reviewer Comments:

85) Occupancy Agreements/Leases (TH). 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? Agreement/lease should provide formal due process rights. [24 CFR 578.3; 24 CFR 578.103] ☐ Yes ☐ No

Reviewer Comments:

86) Owner Assurance/HAP Contract (PSH). Is the Housing Assistance Payment (HAP) contract executed annually at lease signing (TRA only), and is the Owner's Assurance form executed annually at recertification*? (HAP required for all projects; owner assurance required for DMHAS projects)* ☐ Yes ☐ No

Guidance: Forms are available at www.ctbos.org/resources

Reviewer Comments:

87) TRA housing choice. Do participants choose the housing unit in which they wish to reside except as necessary to facilitate the coordination of supportive services, in which case participants may be required to live in a specific area for their entire period of participation or in a specific structure for the first year? [578.51(c)] ☐ Yes ☐ No

Reviewer Comments:

88) SRA requirements. Do participants live in housing owned or leased by the sponsor? [578.51(d)] ☐ Yes ☐ No

Reviewer Comments:

89) Limitation on transitional housing. Has the grantee observed the HUD 24-month time limit for transitional housing? If the recipient or its subrecipients provided transitional housing assistance for participants for more than 24 months, do the records show that permanent housing was not available or that the participant(s) needed additional time to prepare for independent living? Do YHDP projects make assertive efforts to house participants within 60 days? [578.79; CT BOS policies] ☐ Yes ☐ No

Guidance: CT BOS Performance Evaluation Criteria establish a one-year length of stay for non-DV transitional housing. Under HUD requirements, a homeless individual or family may remain in transitional housing for a period longer than 24 months, if permanent housing for the individual or family has not been located or if the individual or family requires additional time to prepare for independent living. However, HUD may discontinue assistance for a transitional housing project if more than half of the homeless individuals or families remain in that project longer than 24 months.

Reviewer Comments:

90) Housing Search. Does the project follow the requirement that participants of tenant-based rental assistance be informed that their housing choices are not limited to units on any list and that they have the right to choose the location and type of unit with applicable restrictions only as allowable by HUD? Does the project assist participants to identify suitable housing in the most rapid manner possible? (578.51; *CT PSH Operations Guide*) ☐ Yes ☐ No

Reviewer Comments:

91) Move-in. Are participants provided with assistance, as needed, to promptly access all available resources to move personal belongings, furnish the apartment, and obtain basic household goods and personal care items, such as cleaning supplies, linens, and cooking equipment, and toiletries? *(Required for PSH & RRH PSH & RRH Requirements & Operations Guides; Best Practice recommendation for other projects)* ☐ Yes ☐ No

Reviewer Comments:

92) Vacancies. Is rental assistance continued for a maximum of 30 days from the end of the month in which a unit was vacated, unless occupied by another eligible person (does not apply to institutional stays of 90 days or less)? [578.51(i)] ☐ Yes ☐ No

Reviewer Comments:

93) Unit retention –institutional stays: Brief periods of stays in institutions, not to exceed 90 days for each occurrence, are not considered vacancies (578.51). Has the project complied with this provision? ☐ Yes ☐ No

Reviewer Comments:

94) Retention of assistance in PSH. Has a family been able to retain rental assistance until the expiration of the lease in effect when qualifying member died, was incarcerated, or institutionalized? [578.75 (i)] ☐ Yes ☐ No

Reviewer Comments:

Calculation of occupancy charges/rent (PSH/TH). *Note: YHDP Crisis Housing is excluded from these requirements.*

95) A. Calculation (PSH/TH). Is income calculated in accordance with 24 CFR 5.609 and 5.611 and is the rent charged the greater of 30% of family's adjusted income, 10% of gross income, or the portion of a public welfare assistance payment designated to meet housing costs? Have the following mandatory annual deductions been correctly applied: $480/dependent, $400 for any elderly/disabled household, reasonable childcare expenses to enable work or education, and the following if it exceeds 3% of annual income: unreimbursed medical expenses for elderly or disabled, attendant care and auxiliary apparatus for each disabled household member to enable any member to work? Does the recipient, subrecipient and/or service provider meet with participants as necessary to resolve any disputes regarding rent calculation? Do YHDP Crisis Housing projects comply with the requirement that they not charge an occupancy fee (578.77(b); DMHAS requirement; CT BOS Policies] ☐ Yes ☐ No

Reviewer Comments:

B. Interim Adjustment (PSH/TH).

For DMHAS Projects: Does the project require participants to report income changes of more than $40 per month when such a change is expected to be ongoing within 10 days? Does the project adjust rent accordingly? Are participants notified 30 days in advance before any rent increase is implemented? Does any increase become effective on the first day of the first month following the 30-day notice? Does any decrease become effective on the first day of the month following the month in which the change triggering the decrease was reported? (*CT PSH Operations Guide)*

Guidance: Tool is available at www.ctbos.org/resources

For all projects: Does the project adjust rent when a participant reports an income increase or decrease? [578.77(c)] ☐ Yes ☐ No

Reviewer Comments:

C. Regular Review (PSH/TH). Is a regular review of income conducted at least annually? [578.77(c)] ☐ Yes ☐ No

Reviewer Comments:

D. Use of Rent Calculation Tool (PSH/TH). Does the project document use of the DMHAS Rent Calculation Worksheet at each initial lease signing, annual recertification, and any interim adjustment? *[Required for PSH – PSH Requirements & Operations Guide; CT BOS Best Practice recommendation for TH]* ☐ Yes ☐ No
Guidance: Tool is available at https://www.ctbos.org/resources

Reviewer Comments:

E. Notice of Recertification (PSH/TH). Does the Housing Provider send each participant an annual recertification letter 90 days before the effective date of the recertification? *[Required for PSH – PSH Requirements & Operations Guide; CT BOS Best Practice recommendation for TH]*

☐ Yes ☐ No

Reviewer Comments:

F. Recertification – High Income (PSH) When a participant is determined to have income sufficient to pay full rent, does the project assess the participant's need and preference for ongoing case management services and determine whether continued provision of case management services is necessary to assist the participant to retain stable housing? In a DMHAS CoC RA project does the Housing Provider consult with the Housing and Homeless Services Unit prior to recertification of such a participant? *[Required for PSH – PSH Requirements & Operations Guide]*

☐ Yes ☐ No

Reviewer Comments:

Calculation of occupancy charges/rent (RRH).

96) A) Calculation (YHDP RRH). Is rental assistance provided for the shortest amount of time necessary to prevent a return to homelessness and as a decreasing % of rent as defined below or as defined under #96A:

- Months 1-3 80% of rent
- Months 4-6 60% of rent
- Months 7-9 40% of rent
- Months 10-12 20% of rent

If continued assistance is authorized beyond 12 months by DOH, the subsidy will continue to pay 20% of rent with adjustments to the subsidy amount, as necessary, to cap combined tenant rent and utility allowance contribution at 65% of gross household income? Is subsidy

amount adjusted as necessary to cap combined tenant rent and utility allowance contribution at 65% of gross household income? Does the YHDP project select one of the allowable rent calculation methodologies and apply it consistently for all participants? Is the selected methodology and the start date for any methodology change documented in the projects' written policies and procedures ☐ Yes ☐ No

Guidance: CT RRH Operations Guide; Rent Calculation Tool Available at www.ctbos.org/youth

Reviewer Comments:

B) Calculation (RRH -other than YHDP). Is rental assistance provided for the shortest amount of time necessary to prevent a return to homelessness and at levels not exceeding:

- Month 1: Security and 1st Month's Rent and any applicable utility allowance covered at 100%
- Months 2-6: Tenants pay 30% of net income towards rent and any applicable utility allowance; RRH rental assistance covers the remaining rent and utility allowance
- Months 7 to program exit: Tenant pays 60% of net income towards rent and any applicable utility allowance; RRH rental assistance covers the remaining rent and utility allowance
- Rental assistance terminates once 60% of net income is equal to gross rent; gross rent is equal to rent plus any applicable utility allowance.

If tenant has been approved for PSH or other housing voucher (EHV, Mainstream, HCV, RAP) and is pending transition, tenant's portion of rent and any applicable utility allowance will be calculated at 30% until transitioned to permanent subsidy; and duration of rental assistance may not exceed 24 months. ☐ Yes ☐ No

(CT RRH Operations Guide; Rent Calculation Tool Available at www.ctbos.org/resources)

Reviewer Comments:

97) 90 Day Re-Certification (RRH). Does the project obtain income documentation and re-calculate rent monthly for all participants at a minimum ever 90 days (calculated from the move-in date)? Does the Re-Certification include: income determination, calculation of the amount of RRH rental assistance to be provided, fund request form (Form #19), Assessment of Progress on housing stability and income goals (form #7), update to housing stability plan, recertification form (Form #20); *(CT RRH Operations Guide)* ☐ Yes ☐ No

Reviewer Comments:

98) Interim Adjustment (RRH). Does the project require participants to report income changes of more than $40 per month? Does the project adjust rent when a participant reports an income decrease? *(CT RRH Operations Guide)* ☐ Yes ☐ No

Reviewer Comments:

99) Use of Required Rent Calculation Tool (RRH). Does the project document use of the relevant RRH Rent Calculation Tool at each initial lease signing, each 90-day review, and any interim adjustment? *(CT RRH Operations Guide)* ☐ Yes ☐ No
Guidance: YHDP Tool is available at www.ctbos.org/youth; For non-YHDP RRH tool is available at www.ctbos.org/resources;

Reviewer Comments:

100) Financial Assistance/Tenant Share Explanation (RRH). Does the project provide written notice (Form #17 or 17a) of the amount of financial assistance a participant will receive and their financial obligations to each participant at each initial lease signing, each 90-day recertification, and any interim adjustment? Is the landlord copied? *(CT RRH Operations Guide)*
☐ Yes ☐ No
Guidance: Form #17 and 17a are available at www.ctbos.org/resources

Reviewer Comments:

101) Exceptions in RRH. When a participant receives rental assistance beyond 12 months or at an amount in excess of those specified under #99/100, did the project obtain a signed exceptions form from DOH? Does the project comply with the HUD limit on RRH assistance (i.e., RRH rental assistance and/or case management may not continue beyond 24 months from project entry)? [578.37] ☐ Yes ☐ No
Guidance: CT RRH Operations Guide establishes a 12-month maximum term of financial assistance except in rare instances

Reviewer Comments:

102) Utility Allowance. If participants are responsible for paying some or all of the costs of their own utilities, did the project incorporate the utility allowance established by the applicable PHA when determining participant rent/occupancy charges? Did the project make a direct payment to the utility company or reimburse the participant for any amount that their utility allowance exceeded their participant contribution? Is direct payment to the utility company authorized in writing by the participant? (HUD Notice CPD-17-11) ☐ Yes ☐ No

Reviewer Comments:

103) Income documentation. (YHDP Crisis Housing & Youth Navigator projects are excluded) Where an occupancy charge or rent was charged do participant files document: income

evaluation [24 CFR 578.103(a)(6)(i)]; source documents for the assets held by the program participant and income received before the date of the evaluation (e.g., most recent wage statements for a minimum of a one month period, unemployment compensation statement, public benefits statements, bank statement)[24 CFR 578.103(a)(6)(ii)]; if source documents were unavailable, a written statement by the relevant third party or the written certification by the recipient's intake staff of the oral verification by the relevant third party of the income the program participant received over the most recent 3-month period; 24 CFR 578.103(a)(6)(iii)]; or if source documents and third-party verification were unavailable, the written certification by the program participant of the amount of income that the program participant was reasonably expected to receive over the 3-month period following the evaluation? 24 CFR 578.103(a)(6)(iv) ☐ Yes ☐ No

Reviewer Comments:

104) Certification of no income. * (YHDP Crisis Housing & Youth Navigator projects are excluded) At each initial certification, annual re-certification, and interim rent re-calculation does the project require each adult household member reporting zero income to complete a No Income Certification form? ☐ Yes ☐ No
Guidance: Sample form available at www.ctbos.org/resources

Reviewer Comments:

105) Participant obligation to pay (DMHAS PSH). If a participant fails to provide required interim changes in income or other factors, or submits incorrect or falsified information on any application, certification or re-certifications and, as a result, is charged a rent less than the amount required by HUD's rent formulas, is the participant required to reimburse DMHAS for the difference between the rent the participant should have paid and the rent he/she paid? The participant is not required to reimburse DMHAS for undercharges caused solely by DMHAS's failure to follow HUD's procedures for computing rent or assistance payments. Is the participant granted the right to have a reasonable repayment agreement? *(CT PSH Operations Guide*) ☐ Yes ☐ No

Reviewer Comments:

106) Owner/landlord obligation to repay (DMHAS PSH). Has the owner/landlord or housing provider been required to reimburse DMHAS for all overpayments where such overpayments are due to the owner/landlord or housing provider's error or the owner's failure to follow HUD's procedures? DMHAS may permit the owner/landlord or housing provider to repay such

overpayments in one lump sum or over a period of time through reduction of normal housing assistance payments. *(CT PSH Operations Guide*) ☐ Yes ☐ No

Reviewer Comments:

107) Security Deposits. If the grantee uses CoC funds for security deposits, are the amounts of the deposits not in excess of two months' rent? [578.49(b) and 578.51(a)] ☐ Yes ☐ No

Reviewer Comments:

108) Rental assistance damages. For property damages paid, were expenditures for a one-time cost per program participant AND not exceeding 1-month's rent to pay for any damage to housing due to the action of a program participant? [24 CFR 578.51(j); 24 CFR 578.103(a)(17)] ☐ Yes ☐ No

Reviewer Comments:

109) Dwelling size. Does the dwelling unit have at least one bedroom or living/sleeping room for each two persons, AND does the project comply with the prohibition against requiring children of the opposite sex, other than very young children, to occupy the same bedroom or living/sleeping room? [24 CFR 578.75(c)(1); 24 CFR 578.103(a)(8)] ☐ Yes ☐ No

Reviewer Comments:

110) Accommodating family composition changes. *Does the project comply with the CT BOS requirement to allow participants to alter their family composition at any time during the admission process or post admission except when a unit is not large enough by HUD standards, the services required to meet the needs of the new family member are not available, and/or housing the family together would present an imminent health and/or safety risk? When circumstances prevent accommodating changes to family composition, does the project assist the family in accessing a different unit or work with their CAN and assist the family in accessing a different project that meets their needs and can accommodate them together as a family? (CT BOS Policies) ☐ Yes ☐ No

Guidance: CT BOS Policies available at: www.ctbos.org/policies

Reviewer Comments:

111) Equal Access. * Does program comply with HUD Final Rule on Equal Access and HUD's Final Rule on Equal Access in Accordance with Gender Identity? (HUD Equal Access Rules)

☐ Yes ☐ No *Guidance: HUD Final Rules on Equal Access*

Reviewer Comments:

112) VAWA prohibitions against discrimination. * Has the project complied HUD's Final Rule Regarding the Implementation of Housing Protections Authorized in the Violence Against Women Act of 2013 (VAWA), which prohibits discrimination against individuals applying for or living in federally subsidized housing because of acts of domestic violence, sexual assault, dating violence, and stalking committed against them? This includes prohibitions against survivors being denied assistance as an applicant or evicted or having assistance terminated as a participant because of abuse and effects of abuse such as unit damages. VAWA protections are not only available to women, but are available equally to all individuals regardless of sex, gender identity, or sexual orientation. ☐ Yes ☐ No
Guidance: HUD VAWA 2022 Letter to CoC/ESG Recipients; HUD VAWA 2022 Webinar Series;

Reviewer Comments:

113) VAWA Emergency Transfer Plan. * Has the project complied with the CT BOS emergency transfer plan? ☐ Yes ☐ No
Guidance: CT BOS Emergency Transfer Plan; must retain records of all emergency transfer requests and the outcomes for a minimum of 3 years.

Reviewer Comments:

114) VAWA Lease Requirements and Bifurcation. * Has the project included the required descriptions of VAWA protections in leases, lease addendums, and contracts? As necessary, does the project bifurcate a lease to evict an abuser while allowing the survivor to stay?
☐ Yes ☐ No
Guidance: VAWA lease addendum sample (Note: HUD has not updated for the most recent VAWA reauthorization)

Reviewer Comments:

115) VAWA Required Notices. * Has the project provided the required Notice of Occupancy Rights and Domestic Violence Incident Certification Form to each adult tenant and applicant at the required times? ☐ Yes ☐ No
Guidance: HUD-5380 and HUD-5382

Reviewer Comments:

116) Combining Rental Assistance. Does the project comply with the requirement that rental assistance was not provided to a program participant who was already receiving rental assistance, or living in a housing unit receiving rental assistance or operating assistance through other federal, state, or local sources? [24 CFR 578.51(a); 24 CFR 578.103(a)(17)] ☐ Yes ☐ No

Reviewer Comments:

117) Combining SSO & Housing Assistance. For SSO projects, 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? [24 CFR 578.37(a)(3); 24 CFR 578.103(a)(17)]
☐ Yes ☐ No

Reviewer Comments:

118) Restriction on combining other funds. Does the project comply with HUD's restriction on combining funds (i.e., In a single structure or housing unit, the following types of assistance may not be combined: Leasing and acquisition, rehabilitation, or new construction; Tenant-based rental assistance and acquisition, rehabilitation, or new construction; Short- or medium-term rental assistance and acquisition, rehabilitation, or new construction; Rental assistance and leasing; or Rental assistance and operating)? [578.87 (b)] ☐ Yes ☐ No

Reviewer Comments:

Coordinated Entry & Participant Eligibility

119) Use of CAN. Did the recipient/subrecipient use the centralized or coordinated assessment system established by the CoC? Did the recipient/subrecipient comply with the written policies and procedures established by the CoC for determining and prioritizing which families and individuals would receive assistance? 24 CFR 578.(a)(8)? ☐ Yes ☐ No
Guidance: CT CAN Policies are available at: www.ctbos.org/policies

Reviewer Comments:

120) Statewide By-Name List. Did the project accept referrals only from the Statewide By-Name List that is maintained by each CAN with the exception of participants transferred from a different PSH project? For veterans and youth did the PSH project accept only referrals from

the separate prioritization processes established for these subpopulations? For transfers, was the placement coordinated through the local CAN? Is the CAN Referral Form in the participant's file? *(CT CAN Policies and Procedures)* ☐ Yes ☐ No
Guidance: CT CAN Policies are available at: www.ctbos.org/policies

Reviewer Comments:

121) Application Records (DMHAS PSH). Does the applicable DMHAS CoC Rental Assistance Office maintain copies of all application records, including those processed by the CAN? *(CT PSH Operations Guide)* ☐ Yes ☐ No

Reviewer Comments:

122) Vacancy Notification - When a vacancy occurs has the provider notified the applicable CAN – goal is to report within 24 hours of the unit becoming vacant. When a vacancy is anticipated, has the provider notified the applicable CAN within 72 hours? When a vacancy is filled does the project notify the applicable CAN within one business day*? (CT CAN Policies & Procedures)* ☐ Yes ☐ No

Reviewer Comments:

123) Referrals from other systems of care. Before accepting participants into CoC programs from the Mental Health, Foster Care, Correctional or Public Health Systems, providers are required work to ensure that all other discharge options have been exhausted. Accepting a person directly from publicly-funded institutions should only be considered if there are no other viable housing options and the person meets the eligibility criteria for the bed or unit. Does program being monitored meet these conditions? *(CTBOS Policies and Procedure)*
☐ Yes ☐ No
Guidance: This standard should be implemented by CANs. (CT CAN Policies and Procedures)

Reviewer Comments:

124) Applicant outreach. If the applicant referred by the CAN has not presented at the receiving project within 3 business days of the intake appointment, does the project make at least 3 contact attempts to reach the household over one week. If the project is unable to reach the applicant, do they immediately notify the CAN and request a new referral? *(CT CAN Policies and Procedures)* ☐ Yes ☐ No

Reviewer Comments:

125) Provider/applicant declinations. Does the project only decline CAN referrals for the following approved reasons: applicant has determined that the project does not meet his/her needs/preferences, there is no actual vacancy available in the project, the applicant missed two intake appointments, the applicant household presented with more people than referred by the CAN, or the project has determined that the applicant household cannot be safely accommodated or cannot meet tenancy obligations with the supports provided by the project? Does the project accept at least two-thirds of all referrals? When declining a referral, does the project provide a written notification to the applicant and CAN specifying: the reason the provider or applicant declined; an alternative recommendation regarding housing model/exit option for the client with justification; and instructions for appealing the decision, including the contact information for the person to whom and time frame under which the appeal should be submitted? *(CT CAN Policies and Procedures*) ☐ Yes ☐ No

Reviewer Comments:

126) Referral acceptance. When accepting a referral does the project, within one business day of the decision, provide a written notification to the applicant and CAN specifying first available move-in date (if such a date is known)? *(CT CAN Policies and Procedures)*
☐ Yes ☐ No

Reviewer Comments:

127) Eligibility denial notification (DMHAS PSH). If a referred applicant is determined not to meet project eligibility requirements, has the deciding entity notified the applicant in writing regarding the reason for the decision providing detailed instructions regarding what additional documents are required, who the applicant can contact to obtain assistance, and how to appeal the decision? When the decision has been made by the Housing Provider, has the CAN also been notified of the above?*(CT PSH Operations Guide)* ☐ Yes ☐ No

Reviewer Comments:

128) Chronic Homelessness Do all households admitted to PSH between January 2014 and December 31, 2020 meet the definition of chronic homelessness and has the grantee maintained documentation that applicable households served meet HUD's definition of chronic homelessness? [578.3] ☐ Yes ☐ No
Guidance: CoC and ESG Virtual Binder – Definition of Chronic Homelessness; HUD Final Rule Defining Chronic Homelessness

Resources for documenting chronic homelessness are available at: www.ctbos.org/resources
CT BOS Eligibility Documentation Training: Slides; Recording

Reviewer Comments:

129) DedicatedPLUS. Do all households admitted to PSH since January 1, 2021 meet the definition of DedicatedPLUS and has the grantee maintained documentation that applicable households served meet HUD's definition of Dedicated Plus? [578.3] ☐ Yes ☐ No
Guidance: HUD FAQ on Dedicated Plus Documentation Requirements; Resources for documenting DedicatedPLUS homelessness are available at: www.ctbos.org/resources
CT BOS Eligibility Documentation Training: Slides; Recording

Reviewer Comments:

130) Homeless status. Has the grantee maintained the required documentation indicating that all households served meet the relevant category of the HUD definition of homelessness and any applicable homelessness eligibility requirements defined by CT BOS? ☐ Yes ☐ No

Eligible categories are indicated below:

- YHDP Crisis Housing (HUD Component - TH): Categories 1 & 4
- YHDP Youth Navigator Services (HUD Component - SSO): Categories 1, 2, & 4
- YHDP Shelter Diversion & Rapid Exit Fund (HUD Component - RRH): Categories 1, 2, & 4
- YHDP RRH (HUD Component - RRH): Categories 1 & 4
- DV Bonus RRH: Category 4
- All Other RRH: Categories 1 & 4
- TH: Categories 1 & 4
- PSH: Category 1 & must meet CH/Dedicated Plus Definition (see #126 and #127 above) [578.3; CT BOS Policies]

Guidance: Resources for documenting homelessness are available at: www.ctbos.org/resources; CT BOS Eligibility Documentation Training: Slides; Recording

Reviewer Comments:

131)

132) HMIS Verification of Homelessness. Effective 10/1/26 does the project use the HMIS VOH tool to document homelessness for all participants except in cases where HMIS VOH does not apply (i.e., Category 2 or 4 homelessness)? (August 2026 DOH/DMHAS Policy Directive)
☐ Yes ☐ No

Reviewer Comments:

133) Lack of Third-party documentation. Does the project comply with the requirement that lack of third-party documentation must not prevent an individual or family from receiving street outreach services or receiving services provided by a victim service provider? 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?

[24 CFR 578.103(a)(3); 24 CFR 576.500(b)(5)] [24 CFR 578.103(a)(3); 24 CFR 576.500(b)]
☐ Yes ☐ No

Reviewer Comments:

134) Disability status (PSH). Do all households served in permanent supportive housing meet HUD's definition of a disabled household? For DMHAS PSH, other than those funded through the 2022 Supplemental NOFO to Address Rural and Unsheltered Homelessness, does the project serve only participants who have a serious mental illness, chronic problems with alcohol, drugs or both, or acquired immunodeficiency syndrome (AIDS) and/or related diseases. [578.37(a) and CT PSH Operations Guide] ☐ Yes ☐ No
Guidance: Resources for documenting disability are available at: www.ctbos.org/resources; CT BOS Eligibility Documentation Training: Slides; Recording

Reviewer Comments:

135) Age Requirement (YHDP). Does the project comply with the following YHDP age requirements: no member of the household can be older than 24 at project entry? Does the project document age eligibility for all household members? When legal documents are not available, does the project allow self-certification of date of birth while assisting the participant to obtain documentation? *(HUD YHDP NOFA, State of Connecticut Rapid Re-Housing Model Guidelines)* ☐ Yes ☐ No
Guidance: Resources for documenting YHDP eligibility are available at: www.ctbos.org/youth; CT BOS Eligibility Documentation Training: Slides; Recording

Reviewer Comments:

136) RRH income eligibility. Is the program only serving clients with gross annual income below 50% of AMI at the time of annual review? *(CT RRH Operations Guide)* ☐ Yes ☐ No

Reviewer Comments:

137) Transitional Housing diversion. Are all households screened for diversion prior to admission and only admitted if no other options are available? *(CT BOS Policies)*
☐ Yes ☐ No
Guidance: This standard should be implemented by CANs.

Reviewer Comments:

138) Written intake procedures. Do the records demonstrate that 1) the recipient and subrecipient had written intake procedures in place to ensure that documentation of program participants' homeless and disability (if applicable) status is maintained in accordance with the program requirements 2) that those procedures require obtaining documentation at project intake of the evidence relied upon to establish and verify homeless status, 3)that the procedures establish the order of priority for obtaining evidence of homelessness as first third-party documentation, second intake worker observations, third self-certification, and that the recipient/subrecipient following the procedures?[24 CFR 578.103(a)(3)-(4); 24 CFR 576.500(b); 24 CFR 576.500(c)] ☐ Yes ☐ No

Guidance: Sample Written Intake procedures available at www.ctbos.org

Reviewer Comments:

Services

139) On-going assessment of supportive service needs. Has the grantee conducted on-going assessments of participant's supportive services needs including the services needed, the availability of such services, and the coordination of services to ensure long-term housing stability? Is this documented in sampled client charts? (578.75(e), *CT PSH Operations Guide)*
☐ Yes ☐ No
Guidance: For projects with a designated service provider, at least every 6 months recipients and/or subrecipients shall conduct an assessment of the service needs of the program participants and should adjust services accordingly. Sample assessment available at www.ctbos.org/resources.

For projects with no designated Service Provider a "Brief Participant Needs Assessment" form that Housing Providers can use at a minimum annually is available at www.ctbos.org/resources.

Reviewer Comments:

140) Services for PSH and TH. Has the grantee made supportive services available to meet the needs of program participants and made adjustments as necessary based on assessments? Did participants receive supportive services for the duration of their stay? Are available supportive services designed to address the needs of participants? ([578.37(a)] ☐ Yes ☐ No
Guidance: Monitors will look for evidence that services are provided with a frequency that is responsive to participant needs (e.g. evidence of appropriate and timely intervention on identified issues that threaten housing stability or health/wellbeing; evidence that, in general, contact/attempts occur at least two times/month; contact/attempts that are less are supported by an assessment indicating a lower level of service need); Sample service plan available at: www.ctbos.org/resources.

Reviewer Comments:

141) Engagement Principles. Does the project adhere to the CT BOS Engagement Principles? *(CT BOS Policies)* ☐ Yes ☐ No

Reviewer Comments:

142) Substance Use and Recovery Housing. Does the project adhere to the CT BOS Substance Use and Recovery Housing Policy? *(CT BOS Policies)* ☐ Yes ☐ No

Reviewer Comments:

143) Person-centered Services. Are services person-centered? Do services help participants to recognize their desires and interests, define a vision for what they want and establish hope that those things are possible? Are services focused on participant strengths? Do services help participants to increase control over their own lives, develop relationships, access supports, and build skills and confidence? *(Required for PSH & RRH– PSH & RRH Requirements & Operations Guides; CT BOS Best Practice recommendation for other project types)* ☐ Yes ☐ No

Reviewer Comments:

144) Assertive Engagement in PSH, RRH, TH. *Project makes regular attempts using a variety of contact methods to engage participants. *(Required for PSH & RRH– PSH & RRH Requirements & Operations Guides; CT BOS Best Practice recommendation for other project types)*

☐ Yes ☐ No

Guidance: Monitors will look for evidence that engagement attempts are made with a frequency that is responsive to participant needs (e.g. evidence of timely attempts at intervention on identified issues that threaten housing stability or health/wellbeing; evidence that, in general, attempts occur at least 2 times monthly and at a frequency that is commensurate with participant needs; attempts that are less frequent are supported by an assessment indicating a lower level of service need and approved by a supervisor). When participants decline services or otherwise demonstrate reluctance to engage, monitors will look for use of a variety of contact methods (e.g., phone, mail, text, in person, invitations to recreational opportunities, attempts to provide concrete services, such as, food, clothing, toiletries).

Reviewer Comments:

145) Minimum contact (RRH). Do case managers meet with the participant household at least once per month? This is the responsibility of the case manager. If there is no contact with the participant after 30 days and multiple documented attempts, does the case manager initiate a "re-set discussion" making at least 2 attempts to engage in a discussion about program expectations, participant needs and preferences, the housing stability plan, and next steps with timelines to enable continued enrollment. Is the discussion documented in a letter to the participant? Does the project exit the participant from the program if there is still no contact? If after exit, the household makes contact and is still experiencing homelessness, does the case manager assist the participant to reconnect with the CAN via 211? *(CT RRH Operations Guide)* ☐ Yes ☐ No

NOTE: VAWA exempts Victim Service Providers from the monthly RRH case management requirement [24 CFR 578.37(a)(1)(ii)(F); 24 CFR 578.103(a)(17)]

Reviewer Comments:

146) Home Visits (PSH & TH). Do service provider staff meet with participants in their apartments at a frequency that is responsive to participant needs and at a minimum at least once within the first 30 days of tenancy and at least every six months thereafter? *[Required for PSH – PSH Requirements & Operations Guide; CT BOS Best Practice recommendation for TH]*
☐ Yes ☐ No

Guidance: Monitors will look for evidence that home visits are made with a frequency that is responsive to participant needs (e.g. evidence of timely intervention on identified issues that threaten housing stability or health/wellbeing; evidence that, in general, home visits occur at least every six months and at a frequency that is commensurate with participant needs; attempts that are less frequent are supported by an assessment indicating a lower level of service need).

Reviewer Comments:

147) Housing Stabilization Services. Does the project ensure the following:

a. Participants are educated regarding lease terms and assisted to avoid/correct lease violations and avoid eviction?
b. Staff understand the difference between their role and the landlord or property manager's role in supporting lease compliance?
c. The project coordinates with the Property Owner to encourage pro-active lease enforcement and prompt intervention by the Service Provider and/or Housing Provider when threats to housing stability are identified? ☐ Yes ☐ No

(Required for PSH & RRH– PSH & RRH Requirements & Operations Guides; CT BOS Best Practice recommendation for other project types) Guidance: Monitors will look for evidence that staff educate participants regarding the rights and obligations of tenancy, monitor lease compliance and offer assistance when lease violations occur. Monitors will look for evidence that property managers/landlords and not service staff are responsible for enforcing the lease.

Reviewer Comments:

148) Service Plans (PSH & TH). *

A) Service plans are completed within 60 days of project entry? ☐ Yes ☐ No
B) Service plans are updated at least every 6 months? ☐ Yes ☐ No
C) Services plans are signed by the direct service staff person, the participant and a supervisor? ☐ Yes ☐ No
D) Plans include specific and measurable action steps and indicate who is responsible for each action and when those actions will occur? ☐ Yes ☐ No
E) Goals are individualized and person-centered? ☐ Yes ☐ No
F) Case notes document that assistance with advancing goals/objectives is regularly provided to participants? ☐ Yes ☐ No
G) When working with a participant who is reluctant to engage, attempts to encourage service planning are documented? ☐ Yes ☐ No
H) Where no service provider is designated, the housing provider attempts to obtain any service plan developed by the primary case manager? ☐ Yes ☐ No

[Required for PSH – PSH Requirements & Operations Guide; CT BOS Best Practice recommendation for TH] Guidance: Sample service plan available at www.ctbos.org/resources.

Reviewer Comments:

149) Housing Stability Plans (RRH). * Does the case manager work with each participant household to develop an individualized housing stability plan? Does the plan include these components: measurable goals pertaining to housing, action steps for the participant and case manager, timelines for each step, monthly progress review, updates at least every 90 days, signatures of the participant, case manager and supervisor? *(CT RRH Operations Guide)*

☐ Yes ☐ No

Guidance: Sample plan (Form #7) is available at www.ctbos.org/resources

Reviewer Comments:

150) Housing Provider Service Obligations (DMHAS PSH). * In projects with no designated Service Provider, do Housing Providers:

a. Track which participants are already engaged with a case manager?

b. Maintain current contact information for the primary case manager in each client's file?

c. Coordinate and document such coordination with the primary case manager to encourage prompt intervention when the Housing Provider becomes aware of issues that may threaten housing stability?

d. Identify which participants are not already engaged with a primary case manager?

e. Make assertive efforts at a minimum every 6 months to connect all participants not already engaged to a primary case manager. Such efforts must include, for example, encouraging participants to engage in case management services during annual re-certification meetings and whenever an issue that threatens housing stability is identified. Engagement efforts must occur face-to-face at least annually and as frequently as determined feasible by the Housing Provider. Additional engagement efforts may also be conducted via mail and/or phone, including texting.
(CT PSH Operations Guide)

☐ Yes ☐ No

Guidance: Housing Provider is defined as either the LMHA (state operated or private, non-profit agencies) or DMHAS funded non-profit agencies that administers CoC Rental Assistance.

Reviewer Comments:

151) Higher Level of Care. When participant needs indicate that PSH and available community-based services may be insufficient, does the project document assessment of the need for a higher level of care and, when indicated, coordination with qualified providers and referral/connection to an appropriate level of care? As needed, does project take appropriate action to petition for conservatorship? *(PSH Requirements and Operations Guide)*
☐ Yes ☐ No

Reviewer Comments:

152) Moving-on from PSH. *Project assesses participants who have stabilized in housing for interest in and provides assistance with moving-on, including but not limited to helping participant to apply for other affordable housing opportunities, helping participants to locate another unit, helping participants to connect to alternative service providers, and providing temporary supports during the transition. *(Required for all PSH, except DMHAS projects where there is no designated case manager – PSH Requirements & Operations Guide)* ☐ Yes ☐ No

Reviewer Comments:

153) Limitation on Aftercare. Did the recipient and its subrecipients meet the requirement that program participants receive supportive services for no more than 6 months after rental assistance (PSH) or transitional housing ended? For RRH, did case management continue for no more than 60 days after financial assistance ends? [24 CFR 578.37(a)(1)(ii)(D); 24 CFR 578.103(a)(17), *CT RRH Operations Guide*] ☐ Yes ☐ No

Reviewer Comments:

154) Disability-related services. *Grantees may not require project residents to participate in disability-related services (this does not include substance abuse treatment services) [578.75(h)]. Has the program complied with this requirement? ☐ Yes ☐ No

Guidance: Examples of disability-related services include, but are not limited to, mental health services, outpatient health services, and provision of medication, which are provided to a person with a disability to address a condition caused by the disability.

Reviewer Comments:

155) Trauma-Informed & client-centered services. Does case management include trauma-informed, and client-centered approaches to building self-esteem, maximizing autonomy, developing skills, and establishing financial independence. *(CT BOS Policies, PSH & RRH Requirements & Operations Guides*) ☐ Yes ☐ No

Reviewer Comments:

156) Safety planning. Does the project provide survivors of domestic violence, sexual assault, stalking, and human trafficking with safety planning services? Does this include informed consent to assist any participants opting to have their name publicly included on the by name list to understand and reduce potential safety risks *(Per CT RRH Operations Guide: CT DV/HT RRH programs are required to offer safety planning services to survivors. Other RRH projects are required to refer survivors to organizations in their community with expertise in safety planning services. Best Practice Recommendation for other projects)* ☐ Yes ☐ No

Reviewer Comments:

157) Limited English Proficiency. Does the project take reasonable steps to ensure meaningful access to CoC PSH projects for people with Limited English Proficiency (LEP). This includes, for example, service and housing providers should determine what language needs exist, what assistance measures are sufficient for the CoC funded project, and what reasonable steps they will take to ensure meaningful access for LEP persons (e.g., hiring bilingual staff, translating written materials, using a language line interpreter service when necessary).
☐ Yes ☐ No

Reviewer Comments:

158) Confidentiality *

A. Procedures. Has the grantee/sub-grantee developed written procedures to ensure: all client records containing identifying information are kept secure and confidential; address of any family violence project will not be made public; address or location of any housing or program participant will not be made public? [578.103(b)] ☐ Yes ☐ No

Reviewer Comments:

B. Releases. * Is information sharing evidenced in chart authorized by a current release of information? [578.103(b)] ☐ Yes ☐ No

Reviewer Comments:

159) Educational Assurances: Designated Staff. * If the grantee provides housing or services to families or youth under age 25, has the grantee and subrecipient designated a staff person to be responsible for ensuring that children being served are enrolled in school and connected to appropriate services in the community including early childhood and post-secondary programs? [578.23(c)] ☐ Yes ☐ No

Reviewer Comments:

160) Educational Assurances: Policies and Practices. Are the project's policies and practices consistent with the most current laws related to providing education services to individuals up to 24 years of age and families (i.e. the Every Student Succeeds Act – ESSA)? [578.23(c)]
☐ Yes ☐ No
Guidance: A sample policy is available on the CT BOS website at: www.ctbos.org

Reviewer Comments:

161) Warning Letter (PSH). *Prior to commencing the termination process did the housing provider first notify the participant in writing that his/her CoC assistance is in jeopardy, including the reasons and was the case manager copied? (*PSH Requirements & Operations Guide)* ☐ Yes ☐ No

Reviewer Comments:

162) Termination of Assistance. * Based on review files of participants who have been terminated from the CoC program, has the recipient/subrecipient demonstrated a formal termination process that includes at least the following: a)provides formal due process before a person other than the person (or subordinate of that person) who made or approved the termination decision, b) provides the participant a written copies of rules, written notice of termination with clear statement of reasons for terminating, opportunity to appeal decision c) provides the participant written notification of final decision? For DMHAS projects, prior to commencing the termination process does the Housing Provider notify the participant in writing that the subsidy is in jeopardy, specifying the reasons, instructing the participant to contact the Housing Provider immediately, and copying the case manager? If an agreement is not reached within 60 working days about the issues raised in the warning letter, does the Housing Provider notify the participant in writing that the rental assistance will be terminated

and the participant has the right to appeal the decision?[578.91 and *PSH Requirements and Operations Guide*] ☐ Yes ☐ No

Reviewer Comments:

163) At-risk discharges * If an individual or family residing at a permanent housing project is at risk of returning to homelessness or an individual or family is being discharged from a transitional housing project without a stable placement, the service provider is required to notify the local CAN at the earliest possible point in the process. The CAN will convene a case conference to evaluate the situation, determine intervention(s) that might help to preserve housing or secure an alternative placement, plan for the best possible outcome and try to prevent a return to homelessness. This requirement does not apply in situations of imminent risk to self or others. Has the project complied with this requirement? *(CT BOS Policies)*

☐ Yes ☐ No

Reviewer Comments:

164) Disputes/Complaints. * When a DMHAS project participant/applicant has a dispute (complaint) about the administration of the CoC Rental Assistance Program (e.g., eligibility or termination decisions, rent calculation, repair issues, mistreatment by the Housing Office, etc.) was he or she provided with the opportunity to use the review process described in Section XIV of the DMHAS CoC Rental Assistance Operations Guide, including: A) Informal Conference with CAN; B) Hearing with DMHAS Appeal Panel C) Final Review by Review Panel *(PSH Requirements & Operations Guide)?* Were participants/applicants who have a dispute/complaint about CoC assistance they are receiving or were denied from a project other than a DMHAS project, were they provided with the opportunity to use the CT BOS Grievance process? *(CT BOS Policies)* ☐ Yes ☐ No

Reviewer Comments:

165) Security Deposit Return. If the project uses CoC funds for security deposits, does the project take the following steps to help ensure appropriate security deposit refunds: document condition of the unit at move-in (e.g. photos in chart), document exit inspection to assess any damage caused by the participant, request in writing from the property owner prompt refund of the full amount of the balance due with interest, including the name/address to which the refund should be sent? For DMHAS projects is the request to return the balance to DMHAS? For RRH projects is the request to return the balance to the participant? *(Required for PSH & RRH - PSH & RRH Requirements & Operations Guides; Best Practice recommendation for other projects)* ☐ Yes ☐ No

Guidance: For more information see the CT Judicial Branch web page on rental security deposits.

Reviewer Comments:

Emergency Preparedness & Response & Infection Control

166) **Emergency/Disaster Preparedness and Response Plan.** Do the recipient/subrecipient agencies have an emergency/disaster preparedness and response plan that encompasses at a minimum the following core elements:

A. Risk assessment protocols to identify potential crises—natural disasters, disease outbreaks, and other emergencies—on which to focus planning efforts? ☐ Yes ☐ No
B. Identification of and plan to coordinate with relevant partners - Disease/public health: local and state public health departments; local and state emergency management, healthcare providers, and other key partners; Natural disasters: local and state emergency management, municipal services, law enforcement, and other key partners? ☐ Yes ☐ No
C. Emergency protocols to minimize impact on or loss of staff and client lives, property and records? ☐ Yes ☐ No
D. Plan for communicating to staff, clients, volunteers, board, funders, partners, and the public during an emergency? ☐ Yes ☐ No
E. Emergency protocols to maintain continuity of critical services and to resume services when an unavoidable break occurs? ☐ Yes ☐ No
F. Steps and timeline for post-crisis evaluation and necessary plan revisions? ☐ Yes ☐ No
G. Protocols and expectations for training staff on executing and following the plan? ☐ Yes ☐ No

Reviewer Comments:

167) **Infection Control Practices & Response to Public Health Emergencies.** Has the project incorporated into its approach to infection control and response to any public health emergencies the following strategies [1]?

A. **Maintenance of Effort -** Has the project maintained operations to ensure the continuation of critical services throughout any public health emergency? ☐ Yes ☐ No
B. **Coordination –** Has the project partnered with local health authorities to prevent infectious disease outbreaks among participants? ☐ Yes ☐ No

[1] CDC Infection Control Inventory Planning Tool

C. Communications Has the project monitored what is happening locally and stayed updated with regards to any public health emergency and have they distributed critical information to staff and clients? ☐ Yes ☐ No

D. Staff Considerations

1. Has the project adjusted job duties for staff at higher risk of transmission and severe illness? ☐ Yes ☐ No
2. Have supervisors regularly discussed with and provided resources to staff related to mental health and coping with stress during a public health emergency? ☐ Yes ☐ No

E. Risk Reduction Protocols, Universal Precautions, Hygiene and Disinfecting

1. Has the project implemented the risk reduction, universal precautions, hygiene, and disinfection protocols as recommended by public health authorities? ☐ Yes ☐ No
2. Has the project provided staff and clients with the necessary training and supplies to implement these protocols? ☐ Yes ☐ No

F. Symptom Screening & Testing

1. Has the project implemented a plan to regularly screen staff and clients for symptoms and/or conduct testing as recommended by public health authorities? ☐ Yes ☐ No
2. Does the project have clear protocols as recommended by public health authorities for what to do if a staff person or client has symptoms or receives positive test results? ☐ Yes ☐ No

G. Vaccination

1. Has the project engaged in ongoing efforts to continuously build vaccine confidence among participants and staff, including deployment of culturally relevant and targeted engagement strategies for communities that have been historically mistreated by the medical establishment? ☐ Yes ☐ No
2. When vaccine resources are limited, has the project elevated to public health partners the prioritization of essential staff and participants who are at high risk of exposure, transmission, and severe illness? ☐ Yes ☐ No
3. Has the project worked with local public health officials and/or other healthcare partners to repeatedly offer convenient vaccination opportunities to participants? ☐ Yes ☐ No

Reviewer Comments: