

# Ocean County Homeless Prevention and Assistance Coalition

## Program Monitoring Tool

Project Title: \_\_\_\_\_

Date: \_\_\_\_\_

Performed By: \_\_\_\_\_

Monitoring of Homeless Service Program of:

Recipient Agency: \_\_\_\_\_

Sub-recipient Agency: \_\_\_\_\_

Agency \_\_\_\_\_

Agency Address \_\_\_\_\_

Primary Point of Contact \_\_\_\_\_

Email \_\_\_\_\_

Phone Number \_\_\_\_\_

Alternate Point of Contact \_\_\_\_\_

Email \_\_\_\_\_

Phone Number \_\_\_\_\_

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Project Title: \_\_\_\_\_

Date: \_\_\_\_\_

Part A: General Recordkeeping	Yes	No	N/A	Comments
A. Are all records regarding the project (outside of financial records) centrally located?				
B. Do these records contain:				
1. Program Grant Agreements with program regulations				
2. Grant Agreement Amendments and Budget Revisions				
3. Is there a program policies and procedures manual?				
4. Is there a system in place to monitor process in completing program milestones?				
C. Does the agency subcontract for any services in administration of program activities?				
1. Are grant agreement requirements passed along to sub-recipients/subcontractors?				
2. Are there written agreements (MOUs, contracts, etc.) with program partners?				
3. Is there regular contact with sub-recipients/subcontracts in program administration/implementation				
4. Is there evidence of a monitoring process for program partners?				
D. Are homeless or formerly homeless persons participating on board of directors or other equivalent policy-making entity of the recipient or sub-recipient?				
E. Is the agency HMIS data quality up to local standards? Has the agency provided a copy of the HMIS data quality?				

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Project Title: \_\_\_\_\_

Date: \_\_\_\_\_

Part B: Financial Records	Yes	No	N/A	Comments
A. Are all project financial records centrally located and stored in a secure location?				
B. Does the agency financial management system provide evidence that there are controls in place to account for all funds, property, and other assets?				
C. Does the agency compare budgeted line item costs against incurred costs in order to identify over/under spending on a line item basis so that adjustments can be made in a timely fashion?				
D. Are all project expenditures supported by timesheets, invoices, contracts, purchase orders, etc.?				
E. Is there evidence of financial records for any program funds given directly to clients?				
F. Does the agency prepare and submit monthly, or at a minimum quarterly, reimbursement reports?				
G. Does the agency understand that project records need to be retained for a minimum of five (5) years after close-out of the grant or clearance of any audit findings, and 15 years after close-out of a grant that funds acquisition, construction or rehabilitation activities?				
H. Has the agency been audited by independent auditors? If yes, were there any findings that the recipient is required to resolve? Note: obtain a copy of the agency's most recently completed audit.				

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Project Title: \_\_\_\_\_

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Part C: Program Participant File Recordkeeping	Yes	No	N/A	Comments
A. Are all records regarding the program participants centrally located?				
B. Do these records contain:				
1. Is there a valid lease (if applicable) and program occupancy agreement or program participation agreement signed by program participants				
2. Documentation for verification of homeless status				
3. Does the file include verification of the participant's disability? (required for Permanent Housing programs funded through CoC)				
4. Documentation for all sources of income				
5. Does the file contain documentation of total adjusted income and rent calculation? Annual re-certification?				
6. Documentation for termination if the participant has been terminated from the program.				
7. Documentation of any appeals by program participants				
C. Documentation that the case manager has met with the household at least monthly during their program enrollment period to develop individual service plan. Do these records include:				
1. Program intake/eligibility documentation; e.g. participant application, executed release of information forms, etc.				
2. Identification; e.g. government issued proof of citizenship: birth certificate, social security card, driver license, passport				
3. HMIS consent to Release Information Form signed by both client and staff				
4. Evidence that participants have been notified of program				

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requirements/regulations, termination reasons and process, appeals process, privacy and other participant rights at intake				
5. Are the most recent unit FMR and Rent Reasonableness guidelines being used? (for permanent housing programs)				

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Date: \_\_\_\_\_

Part D: Housing Quality Management	Yes	No	N/A	Comments
A. Are units providing housing/shelter inspected on an annual basis?				
B. Are unit/building inspections completed by agency staff? If so, is there evidence of the most recent inspection showing the unit/building is up to appropriate standards?				
C. Are unit/building inspections completed by third party agencies? If so, is there evidence of the most recent inspection showing the unit/building is up to appropriate standards?				
D. Are the units in compliance with local Fire codes? Is there documentation in program files supporting this?				
E. Do all units/buildings have the proper Certificate of Occupancy documentation issued by the local municipality?				

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Part E: Housing First	Yes	No	N/A	Comments
A. Do project policies reflect low barrier requirements for program entry				
B. Does the agency work to expedite the admission process?				
C. Is the project compliant with Fair Housing and Equal Access requirements?				
D. Does the agency seek input from persons with lived experience for project implementation?				
E. Does the project work to prevent evictions?				
F. Do participants sign a standard lease?				
G. Does case management & service model reflect participant choice and client centered services				
H. Are evidence-based practices and culturally appropriate services provided?				
I. Does termination policy reflect a housing first approach?				
J. Do termination procedures reflect a separation between housing and services				

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Part F: Participation in Coordinated Assessment	Yes	No	N/A	Comments
A. Does the agency have an active MOU signed with the Coordinated Assessment agency?				
B. Is there evidence of effective communication of program units and vacancies to the coordinated assessment agency?				
C. Have the program policies been updated to reflect use of the coordinated assessment process				
D. Have all vacancies since 9/17 been filled through the coordinated assessment agency referrals				
E. Have no more than 25% of eligible referrals sent by the coordinated assessment agency been denied?				
F. Does agency send denial letter to client.				

Ocean County HPAC		
Monitoring Review		
Agency		
Program		
Area of consideration	Score	Notes
General Record Keeping		
Financial Records		
Program Participant files/eligibility		
Housing Quality Management		
Housing First Implementation		
Participation in Coordinated Assessment		