

2020 Program Review and Certification Standards

G. Services Planning

New requirements are in red text and do not apply for the 2020 PR&C review. These requirements will be applicable in 2021.

Minor adjustments and clarifications and changes to Tiers are in green text. These changes are applicable for the 2020 PR&C review.

Bold are requirements that now apply for the 2020 PR&C review.

| Standard G1 | Guideline G1 | Monitoring Method | Conclusion | Certifying Official* | Tier | Program Type |
|--|---|---|--|----------------------|------|--|
| Agency staff develops individualized housing stabilization plans (IHSPs) with clients based on the initial client assessment within 5 business days of program entry. IHSPs are signed by program staff and the client and should include the following: (1) Specific goals and actions to address housing barriers (tenant screening and/or housing retention barriers), and other critical service needs; (2) Client, program staff, or community agency responsibility for each step; | <input type="checkbox"/> IHSPs clearly document client housing goals and the actions necessary to address housing barriers and other critical service needs. <input type="checkbox"/> IHSPs include actions to access services/supports in the community that clients need and desire. <input type="checkbox"/> Agency staff can describe the process for developing IHSPs based on a housing barriers and service needs assessment completed with clients, as well as how clients are actively engaged in creating their IHSP. <input type="checkbox"/> Agency staff can describe the process for engaging clients in creating achievable, time-bound IHSPs upon program entry, including with clients who have experienced multiple shelter stays, | <input type="checkbox"/> <u>File Review</u> : CSB reviewed client files. <input type="checkbox"/> <u>Discussion</u> : CSB discussed with agency staff. | <input type="checkbox"/> Compliant <input type="checkbox"/> Compliant with conditions <input type="checkbox"/> Non-compliant <input type="checkbox"/> N/A | | 1 | All programs except Maryhaven Safety, CPoA, Diversion, Single Adult Overflow, CARR Team |

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| <p>(3) Timeframes for completion of each step; (4) Services and supports to be provided and by whom; (5) Desired permanent housing and critical service need outcome(s).</p> <p>Agency staff assesses clients on an ongoing basis during their enrollment in the program. Agency staff updates IHSPs with the client as needed, but not less than once annually, taking into account progress, goal obtainment, and changing needs.</p> <p>For PSH, RRH, and Prevention, agency staff updates IHSPs with clients at program exit that, at minimum, includes relevant</p> | <p>long-term homelessness, and/or disabilities.</p> <ul style="list-style-type: none"> <input type="checkbox"/> Agency staff can describe how services are delivered in an individualized manner, beginning with an initial housing barrier and service needs assessment used to develop an initial IHSP. <input type="checkbox"/> Housing barrier assessment and IHSP development should be a top priority when clients enter shelter. There is evidence that clients receive an initial IHSP within 5 business days of entry or per timeframes established for the program and approved by CSB. <input type="checkbox"/> PSH clients should have an IHSP that addresses ongoing or likely housing retention barriers. IHSPs are updated at least annually, but preferably quarterly and may address goals and actions toward more independent housing (i.e., successful move-on from PSH). <input type="checkbox"/> Agency staff use IHSP planning tools and there is evidence that IHSPs address housing barriers | | | | | |
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| <p>ongoing housing stabilization goals.</p> | <p>and related income and critical service needs.</p> <ul style="list-style-type: none"> <input type="checkbox"/> For YHDP-funded programs, at youths' discretion, IHSPs should include an employment and education goal. <input type="checkbox"/> IHSPs are signed by program staff and clients. A copy of the signed IHSP is available for review in each client file. <input type="checkbox"/> Agency staff updates IHSPs with clients as circumstances or needs change. Family shelter updates IHSP with conditions if re-entering within 90 days. PSH, RRH and Prevention update the IHSP with clients exiting the program to reflect ongoing housing retention goals/actions. <input type="checkbox"/> Program management staff regularly monitors implementation of assessment and IHSP procedures. | | | | | |
| <p>Discussion and Basis for Conclusion</p> | | | | | | |

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| Standard G2 | Guideline G2 | Monitoring Method | Conclusion | Certifying Official* | Tier | Program Type |
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| <p>Client files include up-to-date case notes that record client and service provider contacts and client progress toward obtaining and, where applicable, maintaining permanent housing.</p> <p>RRH and Prevention programs should also assess clients monthly for financial assistance needs and at least quarterly to increase or decrease the amount, type and duration of assistance, including to determine whether housing stability has been achieved and case closure is indicated.</p> | <ul style="list-style-type: none"> <input type="checkbox"/> Case notes are concise, factual, relevant, and legible. Case notes include details of client progress toward IHSP goals and delineate client outcomes, including housing stabilization once clients move into housing. <input type="checkbox"/> All shelter and TH advocates provide a weekly note in each client file stating progress towards housing goals. <input type="checkbox"/> CARR team should document engagement as youth are contacted or monthly at minimum. <input type="checkbox"/> Street Outreach should attempt to locate and confirm open clients are still unsheltered via direct contact with client at minimum once per month (i.e., an outreach 'contact'). Multiple monthly contacts may be documented on a single contact record in CSP or case notes kept in the client case file. | <ul style="list-style-type: none"> <input type="checkbox"/> <u>File Review</u>: CSB reviewed client files. | <ul style="list-style-type: none"> <input type="checkbox"/> Compliant <input type="checkbox"/> Compliant with conditions <input type="checkbox"/> Non-compliant <input type="checkbox"/> N/A | | 1 | All programs except CPOA / Homeless Hotline |

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|--|--|--|--|--|--|--|
| | <ul style="list-style-type: none"> <input type="checkbox"/> Single adult shelter staff provides 1-2 sentences documented in a case note/activity log regarding staff interactions with residents in individual shelter charts for every 7 calendar days an individual is in shelter. One can be the Housing Assistance Screening Tool or a note around assisting the client in coordinating a meeting with his/her RRH case manager. <input type="checkbox"/> Diversion, Prevention, and RRH case notes should show progress toward obtaining and, where applicable, maintaining permanent housing. Client files should demonstrate bi-weekly engagement for Prevention and monthly engagement for RRH at a minimum. <input type="checkbox"/> For RRH and Prevention, the program uses the Homelessness Prevention and Rapid Re-Housing Case Review and Closure Checklist tool to guide service amount, type and duration, including exit determinations. <input type="checkbox"/> PSH should document engagement attempts quarterly at | | | | | |
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| | <p>a minimum with a goal of monthly engagement attempts. The regularity and intensity is dependent on client needs, barriers, and preferences to ensure clients retain housing and receive needed services.</p> | | | | | |
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Discussion and Basis for Conclusion

| Standard G3 | Guideline G3 | Monitoring Method | Conclusion | Certifying Official* | Tier | Program Type |
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| <p>The program screens and makes referrals to appropriate supportive service and mainstream benefits providers relevant to addressing client housing barriers and/or critical service needs. Staff helps clients determine eligibility and complete benefit applications.</p> | <ul style="list-style-type: none"> <input type="checkbox"/> The agency makes referrals to places that provide assistance with public assistance and benefits (such as Ohio Works First, Healthy Start, WIC, Public Child Care, Head Start, food stamps, Medicaid, Medicare, SSI, SSDI, etc.). <input type="checkbox"/> Other services include, but are not limited to: legal services; mediation services; employment search and retention; education and training; behavioral and physical health care services and treatment programs; transportation services; material assistance programs; adult/children’s protective | <ul style="list-style-type: none"> <input type="checkbox"/> <u>Discussion:</u> Agency staff explained the process regarding service referrals, what systems are used, or has SOAR-certified staff. <input type="checkbox"/> <u>File Review:</u> Documentation that YHDP programs have SOAR-certified staff. | <ul style="list-style-type: none"> <input type="checkbox"/> Compliant <input type="checkbox"/> Compliant with conditions <input type="checkbox"/> Non-compliant <input type="checkbox"/> N/A | | 1 | All programs |

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| | <p>services; and basic financial planning.</p> <ul style="list-style-type: none"> <input type="checkbox"/> The agency makes referrals to places that provide targeted services to represented sub-populations including, but not limited to: Youth (under 25), LGBTQ+, New Americans, Pregnant Women, Persons of Color, Survivors of Human Trafficking, Former Foster Youth (under age 22), Veterans, and Restored Citizens. <input type="checkbox"/> Agency staff is trained to use or access SOAR resources and can describe how staff links clients to services, if applicable. YHDP-funded programs must have SOAR-trained staff, per HUD requirements. <input type="checkbox"/> Agency staff can produce documentation of SOAR certification, if applicable, and documentation that clients routinely use these services. | | | | | |
| <p>Discussion and Basis for Conclusion</p> | | | | | | |

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| Standard G4 | Guideline G4 | Monitoring Method | Conclusion | Certifying Official* | Tier | Program Type |
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| <p>All programs use the applicable screening and prioritization tools at time of entry into the program in compliance with Homeless Crisis Response System (HCRS)* Policies and Procedures (P&Ps).</p> | <ul style="list-style-type: none"> <input type="checkbox"/> Agency staff can describe the process used to engage clients upon entry, including completion of the applicable screening and prioritization form no later than 5 business days from entry. <input type="checkbox"/> Shelters and CARR team staff completes the Housing Assistance Screening Tool (HAST, current effective version) for each client within 5 business days of program entry, submits it to the entity according to HCRS P&Ps, and uploads it to the head of household's record in CSP (or securely sends it to the RRH program to which the client is referred and accepted, to document prioritization). If the client has a break in shelter stays > 7 days, complete a new HAST. <input type="checkbox"/> Outreach staff completes the Verification of Street Homelessness. | <ul style="list-style-type: none"> <input type="checkbox"/> <u>File Review:</u> CSB reviewed client files. <input type="checkbox"/> <u>Discussion:</u> Agency staff explained methods used to engage clients in a timely manner. <input type="checkbox"/> <u>File Review:</u> PSH Monitored through USHS. CSB will review any of the selected PSH files that pre-date the agency's participation in USHS. | <ul style="list-style-type: none"> <input type="checkbox"/> Compliant <input type="checkbox"/> Compliant with conditions <input type="checkbox"/> Non-compliant <input type="checkbox"/> N/A | | 1 | <p>Shelters, CARR team, Outreach, RRH, PSH /USHS, TH</p> |

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| | <ul style="list-style-type: none"> <input type="checkbox"/> For RRH and TH/RRH, if the HAST is not uploaded in CSP it must be in the client file, along with confirmation that the client was referred to the RRH or TH/RRH program (e.g., email or other documentation from the entity managing the prioritization pool). <input type="checkbox"/> For PSH, a copy of the Severe Service Needs Assessment is available in each client file as part of the housing prioritization process managed through USHS. | | | | | |
| <p>Discussion and Basis for Conclusion</p> | | | | | | |

*Homeless Crisis Response System (HCRS) Policies & Procedures - <https://www.csb.org/providers/csb-hearth>

CSB reviews Tier 1 standards annually and Tier 2 standards every 4 years. For years when CSB does not review Tier 2 standards, agency staff certifies compliance with both Tier 2 and Tier 3 standards in the 'Certifying Official' column.

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