Standard E1	Guideline E1	Monitoring Method	Conclusion	Certifying Official*	Tier	Program Type
The program adheres to a Housing First Model, working to efficaciously place homeless clients in housing. Quick rehousing should be the central priority of all programs.	<ul> <li>The agency should have policy statement available for review.</li> <li>Review of case files should clearly demonstrate efforts to obtain housing in an expeditious manner. Case files should demonstrate compliance to the Housing First approach.</li> <li>Case managers should be able to demonstrate comprehension with the Housing First approach.</li> </ul>	CSB staff discussed with agency staff and reviewed case plans and policy statements to determine if housing is the top priority for clients.	<ul> <li>□ Compliant with conditions</li> <li>□ Non-compliant</li> <li>□ N/A</li> </ul>		1	All programs
Discussion and Basis fo	r Conclusion					

Standard E2	Guideline E2	Monitoring Method	Conclusion	Certifying Official*	Tier	Program Type
Homeless status is certified and documented at program entry and upon lease signing for all programs. Homeless	☐ Client files contain homeless certification documentation as required by HUD and approved and standardized by CSB. Documentation confirming homeless status	☐ CSB staff reviewed agency client files.	☐ Compliant ☐ Compliant with conditions		1	All programs except Prevention

status documentation	may be a Columbus Service	□ Non-	
is maintained in	Point (HMIS) printout or an	compliant	
accordance with	approved homeless outreach	•	
federal recordkeeping	provider Verification of Street	□ N/A	
requirements.	Homelessness Form.	,,	
	☐ For housing purposes the		
	Homeless status is		
	determined by a single		
	episode of homelessness of		
	7 or more consecutive days		
	in shelter, on the street, or on		
	the land, immediately prior to		
	program admission. For		
	those individuals being		
	released directly from		
	hospital, jail/prison, or		
	another institution for stays		
	less than 90 days,		
	documentation of		
	homelessness for 7 or more		
	consecutive days,		
	immediately prior to entry		
	into institution, is required.		
	Written documentation of		
	institution entry and exit		
	dates through hospital exit		
	paperwork is required. Stays		
	in institutions of fewer than		
	90 days do not constitute a		
	break in homelessness and		
	count toward total time		
	Count toward total time		

	homeless.			
	☐ All permanent housing			
	programs homelessness			
	documentation meets the			
	order of priority in			
	accordance with HUD			
	24CFR578.103.			
	□ Lack of third-party			
	documentation cannot			
	prevent clients from receiving			
	street outreach or victim			
	services.			
Discussion and Basis for	Conclusion			

Standard E3	Guideline E3	Monitoring Method	Conclusion	Certifying Official*	Tier	Program Type
Duration or Episodes of Homelessness are	☐ For chronic homeless documentation, agencies	<ul><li>CSB reviewed agency client files.</li></ul>	☐ Compliant		1	PSH, USHS
certified and documented in	must provide evidence that the household lives in a	Chent mes.	☐ Compliant with			1 311, 03113
accordance with the December 2015 Final	place not meant for human		conditions			
Rule on Defining	habitation, an emergency shelter, or an institutional		□ Non- compliant			
Chronically Homeless.	care facility if the individual has been living in the care facility for fewer than 90 days		□ N/A			

and had been living in a place not meant for human habitation, an emergency shelter immediately before entering the institutional care facility.			
Agencies must provide evidence that the household was living as described above continuously for at least 12 months or on at least 4 separate occasions in the last 3 years, where the combined occasions total at least 12 months and each break in homelessness included at least 7 consecutive nights.			
☐ For Rebuilding Lives documentation, agencies must provide evidence that the Rebuilding Lives eligibility criteria are met, per the USHS Narrative Manual and Policies and Procedures.			
☐ For Verification of Street Homelessness, a single documented encounter with an approved outreach			

	provider, on a single day within one month is sufficient to consider a household as homeless for the entire month.			
Discussion and Basis for	Conclusion			
This is a new standard.				

Standard E4	Guideline E4	Monitoring Method	Conclusion	Certifying Official*	Tier	Program Type
The head of household must have a qualifying disability, certified by a professional licensed by the State of Ohio.	<ul> <li>CSB Certification of Disability is required for each Permanent Supportive Housing household.</li> <li>The certification of disability must be issued not more than one 180 days prior to the household's entry into the program.</li> </ul>	☐ CSB staff reviewed agency client files.	<ul> <li>□ Compliant</li> <li>□ Compliant with conditions</li> <li>□ Non-compliant</li> <li>□ N/A</li> </ul>		1	PSH, USHS
	<ul> <li>The certification of disability must be signed by a professional licensed by the State of Ohio.</li> <li>If the CSB Certification of Disability is not available, a</li> </ul>					

	written Social Security Administration verification or copies of a disability check are acceptable.  Disability is defined as one or more of the following:			
	<ul><li>(1) Substance use disorder;</li><li>(2) Serious mental illness;</li><li>(3) Developmental disability;</li><li>(4) Post-traumatic stress disorder;</li></ul>			
	<ul><li>(5) Cognitive impairments resulting from brain injury; or</li><li>(6) Chronic physical illness or disability.</li></ul>			
Discussion and Basis fo	r Conclusion			
This is a new standard.				

Standard E5	Guideline E5	Monitoring Method	Conclusion	Certifying Official*	Tier	Program Type
Clients receiving Permanent Supportive Housing and Rapid Re- Housing supportive services should be	Agency staff can describe how the program staff assess and stay abreast of the service needs of the clients currently being served.	☐ CSB reviewed client files to ensure annual assessment of service needs.	<ul><li>Compliant</li><li>Compliant with conditions</li></ul>		1	PSH, RRH
assessed annually by the program, within 30	☐ Agency staff can give	<ul><li>CSB discussed policy with agency and</li></ul>	□ Non-			

	⊑.	. Program Operations		
days of their	examples of how	confirmed that a	compliant	
anniversary date, to	programming has been	tracking system is in		
ensure that service	modified based on new	place to ensure	□ N/A	
needs are being	information gathered through	timely assessments.		
accurately and	annual assessments.	I		
sufficiently met.		I		
Annual assessments	☐ Annual assessments are	I		
are available for	included in client files and	I		
review and used to	include some form of client	I		
determine program	feedback.	I		
direction and updates.		I		
Program policies	<ul> <li>Annual assessments are</li> </ul>	I		
should include the	available for review upon	I		
annual assessment	request.	I		
requirement.		I		
	☐ If applicable, a copy of the	I		
	recertification completed by	I		
	CMHA is included in the client	I		
	file.	I		
		ı		
	□ Policy is available for review.	L		
Discussion and Basis fo	or Conclusion			

HUD requires annual service assessments to be completed within 30 days of an individual's anniversary date.

Standard E6	Guideline E6	Monitoring Method	Conclusion	Certifying Official*	Tier	Program Type
The program	☐ Agency staff can describe or	☐ CSB staff discussed	□ Compliant			
effectively collaborates	document how consumer	with agency staff and			2	All programs

Agency:

with the system of	information is shared with	confirmed	□ Compliant	
1			· ·	
homeless providers	other service providers in a	collaboration	with	
and other community	systematic and collaborative	activities.	conditions	
organizations as well	manner, given appropriate			
as other service	client consent, to help meet		□ Non-	
providers.	the needs of program clients.		compliant	
			•	
	□ Programs collaborate with		□ N/A	
	the emergency shelter			
	system by:			
	> Sharing program openings			
	and waiting list protocols;			
	> Routinely educating			
	shelter staff on referral			
	processes;			
	> Routinely participating in			
	housing committee meetings			
	and housing fairs for shelter			
	clients;			
	> Accepting referrals from			
	more than one shelter;			
	> Routinely participating in			
	adult and family system			
	planning meetings, and;			
	> Routinely collaborating			
	with community outreach			
	programs (as applicable).			
Discussion and Basis fo	r Conclusion			 

Standard E7	Guideline E7	Monitoring Method	Conclusion	Certifying Official*	Tier	Program Type
Each program must have a policies and procedures manual that includes all operating policies and procedures for review. The program has written client eligibility criteria consistent with CSB funding requirements appropriate for the target population. The admissions policy, including re-entry	<ul> <li>□ The agency has a written resident admissions policy/residential selection plan with clearly delineated criteria not intended to unfairly discriminate against clients.</li> <li>□ For PSH programs, the Tenant Selection Plan must show prioritization of chronically homeless individuals, as defined by HUD and outlined in HUD Notice CPD-16-11.</li> </ul>	<ul> <li>□ CSB reviewed the program admissions policy to examine how agency determines client eligibility.</li> <li>□ For PSH, CSB reviewed the Tenant Selection Plan to ensure that USHS is referenced as the prioritization mechanism.</li> </ul>	<ul> <li>□ Compliant with conditions</li> <li>□ Non-compliant</li> <li>□ N/A</li> </ul>		1	All programs
policies and procedures, is posted. The program may not deny admission unless there are specific documented restrictions applicable to the project due to financing or sound safety and/or programmatic issues involved.	<ul> <li>When applicable to the program type, the agency must adhere to fair housing laws, rental housing laws, and regulations.</li> <li>For shelters, the agency has a written shelter client admissions policy with clearly delineated admission criteria. Eligible clients are those with</li> </ul>					

	no alternative, safe housing for the night and whose only alternative is to stay in a place not fit for human habitation or outdoors. Shelters may not deny admission solely due to the lack of client identification.			
	Rules regarding when clients can leave and return to the shelter cannot discriminate against clients and must be reasonable, not causing undue restrictions on shelter access.			
	There is evidence of the usage of the system-wide standardized service restriction form and inclusion in client files, as applicable.			
	Staff can explain admission criteria and how it is disseminated to potential applicants for housing.			
	The admissions policy includes the basis for which an applicant would be considered ineligible for			

		<u> </u>				
	admission. The criteria are					
	included in promotional					
	materials and distributed with					
	applications.					
Discussion and Basis for					1	
	Controlacion					
Standard E8	Guideline E8	Monitoring Method	Conclusion	Certifying	Tier	Program
Standard ES	duideline E8	Worldoning Wedned	Ooriolasion	Official*	1101	Type
Programs should have	Ctoff can provide everylee	□ Ageney eteff	Compliant	Official		Турс
_	☐ Staff can provide examples	☐ Agency staff	☐ Compliant		1	PSH, USHS
expedited admission	of expediting the admission	explained any			1	PSH, USHS
processes and policies,	process for applicants	streamlining of its	□ Compliant			
to the greatest extent	coming from a variety of	admissions process	with			
possible, including	circumstances and staff can	and provided	conditions			
providing assistance	provide examples of	examples for review				
with obtaining	systematic aiding of	in client files.	□ Non-			
necessary	applicants in obtaining		compliant			
documentation.	necessary documentation or	☐ CSB staff reviewed				
Program applicants	waiving documentation	the admission policy.	□ N/A			
may not be required to	requirements until after					
participate in more	admission.					
than two interviews and						
can be admitted within	☐ The program does not have					
a few days (if eligible	a waiting list and can explain					
and an opening is	the treatment of the					
available) upon						
completion of the	prioritization pool via USHS.					
•						
rental subsidy	☐ The program works to					
enrollment process.	minimize denials for reasons					

		<u> </u>				_
	unrelated to program					
	eligibility criteria (e.g. missed					
	appointments).					
	☐ Policy is available for review.					
Discussion and Basis fo	r Conclusion					
Standard E9	Guideline E9	Monitoring Mothod	Conclusion	Cortifying	Tier	Drogram
Stanuaru E9	Guideline E9	Monitoring Method	Conclusion	Certifying Official*	1161	Program Type
The agency has a	The agency can provide the	☐ CSB reviewed the	Compliant	Official		Type
cultural competency	<ul> <li>The agency can provide the cultural competency plan for</li> </ul>	cultural competency	☐ Compliant		2	All programs
plan that includes	review.					Ali programs
access to translation	review.	plan and client file(s) that illustrate	☐ Compliant			
services for persons			with			
with limited English	☐ Client files demonstrate the	translation services.	conditions			
proficiency.	provision of translation		NI			
proficiency.	services where necessary.		□ Non-			
			compliant			
			□ N/A			
Discussion and Basis fo	r Conclusion					
Standard E10	Guideline E10	Monitoring Method	Conclusion	Certifying	Tier	Program
Standard L10	duidelille L10	ivioriitoriiig ivietiiou	OUTGUSION	Official*	HICI	Type

		<u> </u>				
If the program serves	The agency can provide	CSB reviewed agency		Compliant		
families, a family served	evidence that all families	client files.			2	All programs
may include, but is not	are given the same access			Compliant		
limited to, regardless of	to services regardless of			with		
marital status, actual or	the adult's marital status.			conditions		
perceived sexual	This can include a policy					
orientation, or gender	statement regarding family			Non-		
identity, any group of	definition (to be included in			compliant		
persons presenting for	client eligibility criteria).					
assistance together with				N/A		
or without children and	For family shelters, the			, , .		
irrespective of age,	agency can demonstrate					
relationship, or whether	that the family served					
or not a member of the	consisted of one or more					
household has a	dependent children in the					
disability. A child who is	legal custody of one or					
temporarily away from	more adults (not to exceed					
the home because of	three) who, prior to losing					
placement in foster care	housing, were living					
is considered a member	together and working					
of the family. This	cooperatively to care for					
definition includes a	the children.					
family with or without						
children, an elderly						
family, a near-elderly						
family, a disabled						
family, a displaced						
family, the remaining						
member of a tenant						
family, 2-parent and 1-						
parent families,						
including those with			1			

Agency:

same-sex partners,				
families with				
intergenerational				
and/or extended family				
members, unmarried				
couples with children,				
families that contain				
adults who are not the				
biological parents of the				
children, and other				
family configurations.				
Discussion and Basis for	Conclusion			
This standard contains the	e revised "family" definition.			

Standard E11	Guideline E	L1	Monitoring Method	Conclusion	Certifying Official*	Tier	Program Type
All intake providers	☐ Agency staff can		Agency explained the	Compliant			
practice diversion and	demonstrate how	they	referral process and			1	CPOA /
referral to prevention	screen each appl	icant	provided examples of	Compliant			Homeless
upon receiving requests	requesting shelte	er to	clients diverted from	with			Hotline
for shelter, which	assess his/her in	nmediate	shelter.	conditions			
includes an assessment	housing needs, a	vailable					
of immediate housing	resources and al	ternate		Non-			
needs. All diversion	housing options s	so as to		compliant			
efforts include a referral	divert entry into s	helter as					
to prevention	appropriate.			N/A			
assistance. When				• • • • • • • • • • • • • • • • • • • •			
appropriate,	☐ Policy is available	e for					

		•		
assessment tools	review.			
ensure that diversion				
from shelter will not				
result in the applicant				
staying in a housing				
option that is either				
unsafe or unfit for				
human habitation.				
Program policies				
include diversion				
requirements.				
Discussion and Basis for	Conclusion	•		

Standard E12	Guideline E12	Monitoring Method	Conclusion	Certifying Official*	Tier	Program Type
A supervisor provides monthly (at least) case supervision for staff providing individualized services.	<ul> <li>Staff can describe the case consultation process, frequency and availability of supervisory support.</li> </ul>	Self-certification	<ul><li>☐ Compliant</li><li>☐ Compliant with conditions</li></ul>		3	All programs
A supervisor is available to provide case consultation during normal business hours and on an emergency basis	☐ There is evidence that supervisors provide at least monthly case review and are available for case consultation.		□ Non- compliant □ N/A			
during evenings and	☐ There is evidence that the					

weekends. The	supervisor has education,								
supervisor is qualified	training and/or experience								
by training, education,	to provide case supervision.								
and/or experience to									
provide case	☐ The policy includes the								
supervision.	agency's real-time practice								
	around how all direct line								
	staff access supervisory								
	crisis consultation for high-								
	risk/high profile situations.								
	, 6 .								
Discussion and Basis for	r Conclusion								
Agency signed in senara	Aganay aigned in congrete neglect								
Agency signed in Separa	gency signed in separate packet.								

Standard E13	Guideline E13	Monitoring Method	Conclusion	Certifying Official*	Tier	Program Type
The program has written intake and client record keeping policies and	The agency has a written record keeping procedure that is available for review.	CSB ensured that CSP printouts are signed by the client at each date of entry during	☐ Compliant ☐ Compliant with		1	All programs
procedures and files that include intake interviews and records of services provided.	☐ The agency can produce actual files that contain intake forms, signed CSP printouts (where applicable), case notes, and other records of service provision.	client file review.  ☐ CSB reviewed the written record keeping procedure.	conditions  □ Non- compliant □ N/A			
	<ul> <li>The agency can produce the client list and describe how it is maintained and updated.</li> </ul>					

Agency:

	□ Policy is available for review.					
Discussion and Basis for	r Conclusion					
Standard E14	Guideline E14	Monitoring Method	Conclusion	Certifying Official*	Tier	Program Type
The program has a policy or procedure for appropriate and successful referrals to other programs in cases where the program was not able to accommodate a client.	<ul> <li>Program staff is familiar with the referral process and appropriate referrals are available for review in the client file when applicable.</li> <li>Policy is available for review.</li> </ul>	☐ CSB staff discussed with agency staff and reviewed policy.	<ul> <li>□ Compliant</li> <li>□ Compliant with conditions</li> <li>□ Non-compliant</li> <li>□ N/A</li> </ul>		1	All programs
Discussion and Basis for	r Conclusion					

Standard E15	Guideline E15	Monitoring Method	Conclusion	Certifying Official*	Tier	Program Type
Client evaluation and	<ul><li>Agency staff can describe the</li></ul>	☐ Agency described	□ Compliant			

Agency:

feedback are	methods used for collecting	methods through			1	All programs	
collected, analyzed,	client feedback, how client	which client	Compliant				
available, and used,	feedback is analyzed and used	feedback is	with				
and there is evidence	to determine programming	collected and used	conditions				
that clients are	changes, and how clients are	to make decisions					
involved in decision-	involved in decision making	about service	Non-				
making processes,	and service planning.	provision and	compliant				
including planning for		program planning.					
services. Clients are	Documentation, including		N/A				
encouraged to	meeting notes, copies of	CSB reviewed	,				
complete exit surveys.	surveys and other evaluation	documentation,					
The program has a	tools, is available for review.	including meeting					
policy to ensure client		notes, copies of					
feedback.	Staff can give examples of how	surveys and/or					
	client feedback has been used	other evaluation					
	in recent months. A list of	tools.					
	dates and types of client						
	participation from the past 12						
	months is available for review.						
	At a minimum, agencies						
	should solicit informal client						
	feedback quarterly. Agencies						
	will conduct formal client						
	satisfaction surveys annually						
	and at exit. The annual survey						
	should contain questions						
	regarding the following topics:						
	> Voluntary participation in						
	religious activities, if any;						
	> Access to housing options;						
	> Access to employment						

	assistance; > Courteous treatment (treated with dignity and respect); > Access to any other personal development activities;			
	<ul><li>&gt; Any major obstacles to obtaining housing/goals.</li><li>□ Policy is available for review.</li></ul>			
Discussion and Basis for	or Conclusion			

Standard E16	Guideline E16	Monitoring Method	Conclusion	Certifying Official*	Tier	Program Type
The agency keeps daily logs documenting shift activities, special client instructions, and accounts of unusual or special situations. There is evidence that agency staff reviews the logs.	<ul> <li>If applicable, the program has a daily log that contains initials or other evidence that staff reviews the log.</li> <li>Agency staff can produce the log for review. Daily updates are clearly discernible.</li> </ul>	□ CSB reviewed a copy of the log.	<ul><li>□ Compliant</li><li>□ Compliant with conditions</li><li>□ Non-compliant</li></ul>		2	All programs
Discussion and Basis for	r Conclusion		□ N/A			

Standard E17	Guideline E17	Monitoring Method	Conclusion	Certifying Official*	Tier	Program Type
At least one program staff person is on duty at all times with verifiable training in emergency first aid, emergency evacuation, and CPR procedures.	, 5	Self-certification	☐ Compliant	Omolai	3	All programs
	members trained in First Aid, CPR and emergency evacuation that are scheduled for each shift.		<ul><li>Compliant with conditions</li></ul>			with on-site staffing
	<ul> <li>Training logs and certificates of completion are available for</li> </ul>		□ Non- compliant			
	review, as well as recent shift schedules.		□ N/A			

Agency signed in separate packet.

Standard E18	Guideline E18	Monitoring Method	Conclusion	Certifying Official*	Tier	Program Type
The shelter will provide sufficient food to clients to meet daily nutritional needs. All programs have plans with clients for adequate	<ul> <li>The agency has a plan for providing food for clients and making meal arrangements to provide adequate food for three meals a day.</li> <li>The shelter has a plan for</li> </ul>	Self-certification	<ul><li>☐ Compliant</li><li>☐ Compliant with conditions</li><li>☐ Non-</li></ul>		3	Shelters, PSH, RRH/Navigator, Navigator

food provision.	accommodating clients with	compliant		
	medical or cultural food			
	restrictions and staff can give	□ N/A		
	examples.			
	examples:			
	☐ At sites where clients prepare			
	their own food, clients must			
	have access to a kitchen and			
	a pantry. Food and other			
	necessary supplies are			
	provided on an as needed			
	basis.			
	buolo.			
	At aitee vulgare food in			
	☐ At sites where food is			
	prepared for or delivered to			
	clients, the staff is			
	knowledgeable in nutrition			
	and sanitary food safety			
	handling and safe food			
	storage practices.			
	3.1 G. P. 1.1.1.1			
	☐ If food is prepared for clients,			
	protocol is in place to train			
	staff in safe food practices.			
	There are provisions to ensure			
	food practices are safe.			
	☐ The shelter can produce a			
	food service license if			
	required.			
Discussion and Basis 1	-	I		
Discussion and basis	of Confidential			
1				

The standard has been	revised to include	PSH, RRH/	/Navigator.	and Navigator	programs.

Agency signed in separate packet.

Standard E19	Guideline E19	Monitoring Method	Conclusion	Certifying Official*	Tier	Program Type
Staff providing individualized services maintain an active caseload that is manageable based on the intensity and frequency of services provided and that ensures adequate time for individualized service monitoring and assistance.	<ul> <li>There is evidence that client caseloads are manageable and allow for individualized services.</li> <li>Program management staff regularly monitors implementation of the procedure.</li> </ul>	Self-certification	<ul> <li>□ Compliant</li> <li>□ Compliant</li> <li>with</li> <li>conditions</li> <li>□ Non-</li> <li>compliant</li> <li>□ N/A</li> </ul>		3	All programs
Discussion and Basis for	r Conclusion					

Agency signed in separate packet.

Standard E20	Guideline E20	Monitoring Method	Conclusion	Certifying Official*	Tier	Program Type
The agency has	☐ Shelter has a written policy		□ Compliant			
policies and	and procedure regarding	Voluntary self-			Vol	Shelters
procedures in place	admission of sex offenders.	certification	□ Compliant			
reasonably designed to	The policy must not violate		with			
identify sex offenders	the terms of the Good		conditions			
who are subject to	Neighbor Agreement.					

Agency:

		<del></del> -	- 100.0 operatione		 	
community notification				Non-		
requirements at		If the shelter serves		compliant		
intake. The agency		registered sex offenders				
board has adopted a		subject to community		N/A		
policy regarding		notification, then there is		,		
whether or not the		evidence that services are				
shelter will serve these		provided by licensed staff as				
sex offenders, and the		identified in the standard,				
policy is in accordance		such as case notes and				
with the terms of the		documentation of licensure.				
Good Neighbor						
Agreement. If the		If the shelter does not serve				
shelter provides		sex offenders subject to				
services to these		community notification, then				
offenders then an		the policy contains a				
LISW, CCDCIII, or LPCC		procedure for diversion				
must provide these		and/or discharge, and referral				
services. If the shelter		to other services.				
does not serve these						
sex offenders, then the						
policy has a protocol						
for removing the resident that includes						
a safety plan for the neighborhood and						
other residents.						
Discussion and Basis for	r Ca	nelusion			<u> </u>	
Agency signed in separa						
/ igency signed in separa	ico p	Jacket.				

Standard E21	Guideline E21	Monitoring Method	Conclusion	Certifying Official*	Tier	Program Type
The program has a written policy regarding client use of controlled substances and clients are verbally informed of the policy.	<ul> <li>The program has a written policy that describes what clients are expected to do with prescription medication (turn it in to staff, etc.).</li> <li>Clients are informed of this policy at intake and may obtain a copy of this policy upon request.</li> </ul>	Voluntary self- certification	<ul> <li>□ Compliant</li> <li>□ Compliant with conditions</li> <li>□ Non-compliant</li> <li>□ N/A</li> </ul>		Vol	All programs
Discussion and Basis f	for Conclusion					

Discussion and Basis for Conclusion Agency signed in separate packet.

Standard E22	Guideline E22	Monitoring Method	Conclusion	Certifying Official*	Tier	Program Type
The Agency has a performance and quality improvement plan that guides agency monitoring of program performance, client satisfaction, and achievement of positive client outcomes.	<ul> <li>The agency has a performance and quality improvement plan and monitoring reports available for review.</li> <li>The plan includes program performance targets and quality objectives and how program performance, positive client outcomes, client satisfaction and program quality is monitored.</li> </ul>	Voluntary self- certification	<ul> <li>Compliant</li> <li>Compliant with conditions</li> <li>Non-compliant</li> <li>N/A</li> </ul>		Vol	All programs

Agency:

	☐ The monitoring process includes performance and quality indicator reports that are produced and reviewed at least quarterly by program and agency management staff.			
	<ul> <li>Monitoring and evaluation result in confirmation that services meet the needs of clients and/or are used to inform changes to better meet client needs.</li> </ul>			
Discussion and Basis fo	r Conclusion			

Agency signed in separate packet.

Standard E23	Guideline E23	Monitoring Method	Conclusion	Certifying Official*	Tier	Program Type
Programs are annually	☐ Agency program or	0 -15 4:5:1:	□ Compliant			All
evaluated to measure	administrative staff can	Self-certification			3	All programs
effectiveness in	describe annual program		☐ Compliant with			
meeting the changing	evaluations and what		conditions			
needs of the	evaluation method is used.		o o mandro mo			
population served.			□ Non-compliant			
	☐ While on-going program					
	evaluation is encouraged, the		□ N/A			
	purpose of this standard is to		,			
	ensure that programs					
	periodically engage in a broad					

	assessment of how well it is meeting the needs of clients from a service design perspective.			
	☐ The evaluation results in confirmation that services meet the needs of clients or in changes being made to better meet the changing needs of homeless persons.			
	☐ Written reports, evaluation instruments and other			
	relevant documentation are available for review.			
Discussion and Rasis for	r Conclusion			

Agency signed in separate packet.

Standard E24	Guideline E24	Monitoring Method	Conclusion	Certifying Official*	Tier	Program Type
All Rapid Rehousing /	The signed MOA is available		Compliant			
Navigator programs	for review.	Self-certification			3	Shelters,
must have an executed			Compliant with			CPOA/Homel
MOA with the family			conditions			ess Hotline,
shelters and CSB						Stable
regarding system			Non-compliant			Families,
capacity management						RRH /
by the first quarter of			N/A			Navigator,
the fiscal year. All			• • • • • • • • • • • • • • • • • • • •			Navigator

shelters and Stable							
Families programs							
must have an executed							
MOA with the							
CPOA/Homeless							
Hotline and CSB							
regarding system							
capacity management							
by the end of the first							
quarter of the fiscal							
year. The Navigator							
program must have an							
executed MOA with the							
single adult shelters							
and CSB regarding							
service management by							
the first quarter of the							
fiscal year.							
Discussion and Basis for Conclusion							

Agency signed in separate packet.

Standard E25	Guideline E25	Monitoring Method	Conclusion	Certifying Official*	Tier	Program Type
If the program holds	$\square$ If the program holds funds or		□ Compliant			
funds or possessions	possessions on behalf of	Self-certification			3	All programs
on behalf of clients,	clients it has a written		□ Compliant with			
the program has a	recordkeeping system for		conditions			
written policy	tracking receipt and return of					
describing how and	funds or possessions held on		□ Non-compliant			
when the funds or	behalf of clients.		·			
possessions will be			□ N/A			

Agency:

promptly returned	☐ There is an easily accessible			
upon the client's	process for getting			
request. The program	funds/possessions back from			
has records of	program staff.			
accountability for any				
money management /				
payee programs for				
clients' funds or				
possessions turned				
over to the program for				
safekeeping.				
Discussion and Basis fo	r Conclusion			
Agency signed in separa	ite packet.			

Standard E26	Guideline E26	Monitoring Method	Conclusion	Certifying Official*	Tier	Program Type
The agency affirmatively furthers fair housing and has a written affirmative marketing strategy to market the program and its benefits to those least likely to apply without regard to race, color, national	☐ A marketing strategy may include materials that describe agency programs, advertising, direct outreach to potential clients, collaboration with organizations that serve potential clients, and efforts to raise funds for and awareness of Agency programs.	Method  CSB reviewed the strategy, marketing materials, and records of actions taken to affirmatively market the program.	<ul> <li>□ Compliant</li> <li>□ Compliant with conditions</li> <li>□ Non-compliant</li> <li>□ N/A</li> </ul>	Official*	1	PSH, USHS, TH
origin, sex, religion, familial status, and disability, as required by 24 CFR Part 578.93(c).	☐ The agency must maintain records of actions taken to affirmatively market programs and records that assess the results of the marketing	program.				

		· · · · · · · · · · · · · · · · · · ·		
	strategy.			
	☐ The agency must notify CSB if agency staff encounters a condition or action that impedes fair housing choice for current or prospective clients. The agency and CSB			
	will work together to give clients information on their rights and available remedies.			
Discussion and Basis for			l .	
This is a new standard.	iou 4 and Tiou 0			
* CSB staff initials for T *Agency staff signature	ier 1 and Tier 2 for Tier 3 and Voluntary			
CSB certifying official si	gnature	Date		
CSB certifying official le	gibly printed name	_		