

Report Date: 2/7/2022 11:40:10 AM

User Id: JBROWN

## Audit Checklist w/ Refs Audit Name: Shelter Plus Care

**Chart Review** 

Assessments Completed

An ongoing assessment is completed for supportive services required by the individuals of the program.

Section 453 of the McKinney-Vento Act

Clients Served

For the clients served by this program, the clients are those that are identified in the approved grant agreement.

Housing and Urban Development (HUD) Standards; SCCMHA Policy 09.08.02.01 Criteria; SCCMHA Policy 09.08.02.03 Referral/Application, Screening and Eligibility

Documentation of Disabilities and Income

The client files have adequate documentation to support the homeless individual's disabilities and income for program acceptance.

Housing and Urban Development (HUD) Standards; SCCMHA Policy 09.08.02.01 Eligibility Criteria; SCCMHA Policy 09.08.02.03 Referral/Application, Screening and Eligibility Criteria.

Rent Calculation

The rents being charged are accurately calculated. The client files include the supporting documentation used in preparing the rent calculation forms.

Housing and Urban Development (HUD)

Standards.

Criteria.

Rental Rates

The clients records show the amount of monthly/yearly rent. In reviewing these rents against documented comparable rents in the area, the rents are reasonable.

Housing and Urban Development (HUD); SCCMHA Policy 09.08.03.05 Rent

Reasonableness.

Rents Evaluated Annually

There is proof in the consumer records that rents are re-examined at least annually.

Housing and Urban Development (HUD)
Standards; SCCMHA Policy 09.08.04.04 Annual

Recertification.

Services Documented

Services are provided appropriately and documented.

Dept of Mental Health Admin Rules pg 6 R330.1053; Medicaid Manual, General Information for Providers; SCCMHA Provider Manual Residential Services Policy 03.02.07; Provider Participation Agreement

Supportive Services

The Supportive Services are appropriate and adequate to the special needs of the clients.

24 CFR 582.5 Definitions, Supportive Services;

**Documentation** 

Administrative Expenditures

The administrative costs are within the 8 percent cap, are what is allowable in the grant or program requirements.

24 CFR 582.105(e)(1)

Housing Inspections

For any units inspected, the habitability standards were met and there was evidence that the appropriate entity inspects the units annually.

Housing and Urban Development (HUD) Standards; SCCMHA Policy 09.08.03.03 Housing Inspection and Quality; SCCMHA Policy 09.08.04.04 Annual Recertification.

Person on Board of Directors

There is at least one homeless person or a formerly homeless person participating on the Board of Directors or other equivalent policymaking entity.

Housing and Urban Development (HUD) Standards; SCCMHA Policy 02.01.03 Consumer Involvement and Leadership; SCCMHA Policy 09.08.06.06 Consumer Participation.

Proof of Homelessness

Repeat Citations

The client files reviewed show adequate proof that the individuals or families were homeless prior to receiving rental assistance.

Housing and Urban Development (HUD) Standards; SCCMHA Policy 09.08.02.01 Eligibility Criteria; SCCMHA Policy 09.08.02.03 Referral/Application, Screening and Eligibility Criteria.

Provider has evidence that previous citations

have been corrected from the last annual audit.

 ${\tt SCCMHA} \ {\tt Auditing} \ {\tt Procedure}.$ 



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Termination of Housing Assistance Payments

Is there evidence staff are following the termination of assistance payments and due process for termination?

Housing and Urban Development (HUD) Standards; SCCMHA Policy 09.08.05.01 Termination of Housing Assistance; SCCMHA Policy 09.08.05.02 Housing Appeals and Grievance Procedure; SCCMHA Policy 02.01.11.02 Local Appeal.

## **Pre-Audit Review**

Consumer Participation in Audit

A consumer must be involved in at least one audit SCCMHA Consumerism Policy 02.03.01 and per category of audits.

Inclusion Policy 02.03.02

## **Staff File Review**

Training Minimum Standards

Minimum training standard for service type is met based upon SCCMHA Training Grid and is documented in staff file. Looking for 95% compliance overall with training for persons that have been employed over 60 days. (Refer to Pre-Audit review)

Medicaid Manual, General Info. Pg. 3; SCCMHA Provider Manual, Competency Requirements Policy 05.06.03; Specialized Certification Rules