

# STATE OF UTAH

## Housing Opportunities for Persons with AIDS (HOPWA)



### POLICY AND PROCEDURE MANUAL

Homelessness Services Office  
HOUSING AND COMMUNITY DEVELOPMENT DIVISION  
DEPARTMENT OF WORKFORCE SERVICES

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## SECTION I: GENERAL INFORMATION

### A. PURPOSE OF POLICY AND PROCEDURE MANUAL

All sub-recipients are required to have in place an agency HOPWA Policy and Procedure Manual that includes the current policies and procedures of Department of Housing and Urban Development (HUD), Homelessness Programs Office (HPO), as well as any sub-recipient-specific requirements.

This manual provides staff, project sponsors, and partners with comprehensive information on federal regulations, and references to assist recipients to meet HUD requirements when utilizing HOPWA funds. It is the responsibility of all agencies to disseminate pertinent information and ensure that their staff and partner agencies are aware of, understand, and comply with policies and procedures in this guide. This manual does not replace the provisions contained in the Department of Housing and Urban Development 24 CFR Parts 576 and 91, Docket No. FR-5474-I-01, Housing Opportunities for Persons with AIDS (HOPWA) Program and Consolidated Plan Conforming Amendments. Nor does it replace any other applicable Federal, State and local laws, or ordinances and regulations pertaining to the Housing Opportunities for Persons with AIDS (HOPWA). Its purpose is to assist agencies to implement grant requirements. Sub-recipients must always refer to the following HUD Housing Opportunities for Persons with AIDS (HOPWA) regulations for more in-depth and updated information.

See Links listed below

- ELECTRONIC CODE OF FEDERAL REGULATIONS: As of October 9, 2012, the e-CFR resides at a new URL.

Please reset your bookmarks, favorites, links and desktop shortcuts to: [www.ecfr.gov](http://www.ecfr.gov).

U.S Dept. of Housing & Urban Development: <https://www.hudexchange.info/programs/hopwa/>

- HOPWA Operating Formula: [https://www.hudexchange.info/resources/documents/2012Operating\\_Formula.pdf](https://www.hudexchange.info/resources/documents/2012Operating_Formula.pdf)
- Utah AIDS Data: <http://health.utah.gov/epi/diseases/hivaids/surveillance/>

The Housing Opportunities for Persons with Aids (HOPWA) program was established to provide housing assistance and related supportive services for low-income persons living with HIV/AIDS and their families.

Three types of grants are made under the HUD HOPWA program:

1. HOPWA **formula** grants are made using a statutorily mandated formula to allocate approximately 90 percent of HOPWA funds to eligible cities on behalf of their metropolitan areas and to eligible states.
2. HOPWA **competitive** funds are awarded on the basis of a national competition.
3. HOPWA **technical assistance** funds are also awarded through a national competition.

All sub-recipients will serve the identified population to provide housing, financial assistance and supportive services as stated in the HOPWA contract Scope of Work.

## **B. PROGRAM DESCRIPTION**

The Housing Opportunities for Persons with AIDS (HOPWA) Program is the only Federal program dedicated to the housing needs of persons living with HIV/AIDS and their families.

The HOPWA funds are appropriated annually through the U.S. Department of Housing and Urban Development (HUD) by formula to eligible states and Eligible Metropolitan Statistical Areas (EMSAs) that meet the minimum number of cumulative AIDS cases.

As an eligible state (grantee), the State of Utah receives a HOPWA formula grant, administered by the Homelessness Programs Office (HPO), Housing and Community Development Division, Department of Workforce Services.

The HOPWA Program aims to assist HOPWA eligible households to:

- Increase access to healthcare and other supportive services necessary to focus on managing their disease
- Avoid becoming homeless while facing severe challenges in meeting personal and medical needs in addition to their housing costs.
- Gain more stability, continue case management and have better health options.

The State of Utah HOPWA program is designed to assist statewide HOPWA eligible households living with HIV/AIDS who are under 80% area median income (AMI) with well-coordinated housing, medical and supportive case management services to establish or maintain a stable, safe, and affordable, with sanitary living environment free from discrimination while waiting for permanent housing placement or Section 8 Housing.

The Homelessness Services Office (HPO) partners with nonprofit organizations and housing agencies to provide housing and support services to beneficiaries. HOPWA project sponsors are expected to participate in collaborating for necessary supportive services for their clients.

### **HOPWA COMMUNITY COLLABORATION:**

In 2001, Housing and Community Development funded a consultant to unify all the HOPWA stakeholders to form the current statewide

HOPWA Steering Committee (page 47). This independent group continues to meet to address common issues and to:

- Coordinate activities between the City and State HOPWA Programs
- Identify gaps in services
- Work with HOPWA Project Sponsors to resolve any housing delivery problems
- Identify existing rental units and make that information available to HOPWA clients

The HOPWA Steering Committee shall vote on and determine the term of the Chair not to exceed one year but may be renewable.

The Federal HOPWA Program funds housing, social services, supportive services, program planning, and development costs. These include, but are not limited to, the acquisition, rehabilitation, or new

construction of housing units; costs for facility operations; rental assistance; and short-term payments to prevent homelessness.

Persons living with HIV/AIDS and their families may require housing that provides emergency, transitional, or long-term affordable solutions. Click on this link: [HOPWA Technical Assistance](#) for information on how to manage program resources.

### **C. RESPONSIBILITY FOR GRANT ADMINISTRATION BY THE STATE**

(a) General

Grantees are responsible for ensuring that grants are administered in accordance with the requirements of this part and other applicable laws. Grantees are responsible for ensuring that their respective project sponsors carry out activities in compliance with all applicable requirements.

(b) Grant agreement

The grant agreement will provide that the grantee agrees, and will ensure that each project sponsor agrees, to:

- (1) Operate the program in accordance with the provisions of these regulations and other applicable HUD regulations;
- (2) Conduct an ongoing assessment of the housing assistance and supportive services required by the clients in the program;
- (3) Assure the adequate provision of supportive services to the clients in the program; and
- (4) Comply with such other terms and conditions, including record keeping and reports (which must include racial and ethnic data on clients) for program monitoring and evaluation purposes, as HUD may establish for the purposes of carrying out the program in an effective and efficient manner.

(c) Enforcement

HUD will enforce the obligations in the grant agreement in accordance with the provisions of 24 CFR 85.43. A grantee will be provided an opportunity for informal consultation before HUD will exercise any remedies authorized in paragraph (a) of that section.

(d) Grantee CAPER Report

HPO (the State's grant recipient) must submit a Consolidated Annual Performance and Evaluation Report (CAPER) on program accomplishments to support program evaluation and the ability to measure program beneficiary outcomes as related to: maintaining housing stability; preventing homelessness; and improving access to care and support. Grantees are required to report on the activities undertaken only, thus there may be components of these reporting requirements that may not be applicable. This agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless that collection displays a valid OMB control number.

Resource Links

[HOPWA Consolidated Annual Performance and Evaluation Report \(CAPER\): Form HUD-40110-D \(DOCX\)](#)

## **D. FUNDING ALLOCATION PROCESS**

HUD provides HOPWA grantees the flexibility to determine how best to apportion recipients.

HPO is the HOPWA grantee and will contract with statewide eligible project sponsors to implement this program at the local level and distribute the HOPWA grants to sub-recipients selected through a funding allocation system described below.

The State may allocate repeat funding directly to organizations or agencies that have demonstrated success with ongoing homeless assistance programs funded by the HOPWA Program in the previous year.

The HOPWA funding formula uses several objective measures of community need, including poverty, targeted population demographics, housing overcrowding, and growth lag.

HOPWA funds will be obligated within 180 days of the date of the HUD grant award and the entire award must be expended within 24 months of the date of the grant award.

HPO funds nonprofit partners for the following HOPWA eligible activities:

- Tenant based rental assistance (TBRA)
- Project based rental assistance (PBRA)
- Short term rent, mortgage, and utility assistance (STRMU)
- Permanent housing placement services (PHP)
- Supportive services, including case management (SS)
- Resource identification services for participating agencies (RI)

The funding allocation is a competitive process that begins with a Request for Proposal (RFP). This competitive process includes the review of proposals and funding recommendations offered by a diverse group of stakeholders:

- State HOPWA Allocation Committee
- Grantee staff
- Other State and/or local government representatives
- Continuum of Care representatives
- Other service providers
- Community members

The HOPWA Allocation Committee reviews and assesses against desired program criteria, and awards are made to individual organizations. *For example, in assessing overall capacity, a reviewer may award points if:*

- operating costs are partially supplemented by other funds;
- agency demonstrates partnerships within the community.

**E. GRANT APPLICATION PROCESS:**

The Homelessness Programs Office:

- Posts Public Notice for Request for Proposals (RFP) – on the Department of Workforce Services Grant page (<https://jobs.utah.gov/department/rfg/index.html>) and the HCD Homelessness Programs grant page (<https://jobs.utah.gov/housing/homelessness/index.html>) to apply for HOPWA funding.
- Solicits proposals for HOPWA programs. Priority will be given to projects that target the HOPWA eligible very low-income persons: are cost effective, have participation by the public and private sector, and address problems of housing, health, safety, and welfare.
- Arranges one or more Application Workshops to educate and inform applicants how to apply
- Provides Application information on the Department of Workforce Services website: <https://jobs.utah.gov/housing/homelessness/hopwa/index.html>

The contract period runs from July 1 to June 30 of the State’s fiscal year.

The HOPWA Project Sponsor must submit a proposal that complies with the criteria established for the application. The successful applicant may enter into an agreement with the State and is subject to the federal regulations governing HOPWA funds. The State may amend, supplement, or cancel all or part of this application through public notice if the State deems it is in the best interest to do so.

Agencies interested in applying for HOPWA funds should contact the Department of Workforce Services, Housing and Community Development Division, Homelessness Programs Office at 801-468-0116. The HOPWA RFP is online at <https://jobs.utah.gov/housing/homelessness/hopwa/index.html>

- ✓ Click on HOPWA FUNDING APPLICATION for the HOPWA Application Form

**SECTION II: HUD HOPWA PROGRAM ELIGIBILITY**

**F. ELIGIBLE SERVICES AREAS**

Funds received through this award currently support clients and programs as listed below:

COUNTIES	CITIES AND NON-PROFIT ORGANIZATIONS
Davis County	Catholic Community Services of Utah
Salt Lake County	Salt Lake Community Action Program
	Housing Authority of Salt Lake City
	Housing Authority of County of Salt Lake



	West Valley City Housing Authority
	Logue Foundation
Weber County	Housing Authority of the City of Ogden

**G. ELIGIBLE PROJECT SPONSOR**

Project Sponsors are nonprofits (including faith-based organizations) or governmental agencies targeting services to individuals living within the State’s metropolitan statistical areas.

Project Sponsors must demonstrate the ability to manage the HOPWA program and all applicable State and Federal policies and procedures including compliance with Federal and State non-discrimination laws.

Project Sponsors must have established internal control and fiscal accounting procedures.

Project Sponsors should demonstrate the ability to coordinate, where appropriate, client services with other service providers and leverage, where possible, other resources toward meeting overall client needs and program goals.

Project Sponsors must demonstrate the ability to meet all reporting and record keeping requirements including maintaining the confidentiality of client records.

Project Sponsors must demonstrate that they can and will make third party payments without identifying clients as HOPWA recipients or as having AIDS or HIV.

**H. ELIGIBLE PROGRAM CLIENT**

There are two basic elements of HOPWA eligibility:

1. A low income household has at least one person who has Acquired Immunodeficiency Syndrome (AIDS) or related diseases (Human Immunodeficiency Virus (HIV) diagnosis and his/her family is eligible to receive HOPWA assistance. This includes households where the only eligible person is a minor. Medical verification of status is required.
2. Total household income is less than 80 percent of the Area Median Income (AMI), as defined by HUD.

All client files must contain documentation that verifies the clients’ eligibility to receive HOPWA assistance. Acceptable medical documentation of HIV status includes:

- A statement of HIV verification signed by a physician, certified health care worker, or HIV testing site representative;
- A Ryan White number

- Social Security Administration records indicating the nature of a disability determination;
  - Other relevant federal program records verifying HIV status.
- It is important to note that project sponsors must have adequate signed releases of information from HOPWA clients that allow them to obtain and store HIV status documentation. As part of a private medical record, such information is highly confidential and protected by state laws that govern HIV status information (see Confidentiality Standards, p. 24 of this manual).

HUD sets Median Income levels for communities across the country; these numbers vary significantly. This data can be found at: <http://www.huduser.org/datasets/il.html>

“Low income” means total household income of less than 80 percent of the median income for the area (Area Median Income or AMI), as defined by HUD. HUD AMIs are calculated annually for individual localities and organized by number of persons in the household<sup>1</sup>. In calculating eligibility, the entire household income must be taken into account, not just the income of the HOPWA eligible person. The number of persons living in the household applying for assistance must also be verified. A statement from the client regarding household composition is acceptable documentation.

The Project Sponsor should have income verification for all adult members of a household (including any minor’s income). If an adult member of a household has no verifiable income, the Project Sponsor must have the person sign and date a statement indicating that he/she has no income.

Income documentation should reflect current income. Typically income statements should be less than 90 days old, based on the date of eligibility determination. Eligibility must be verified annually, taking into account possible changes in household income.

To receive HOPWA housing assistance and supportive services, at least one family member must have HIV/AIDS and the household must income-qualify. The HOPWA-eligible person in any household can be a minor<sup>1</sup>. However, an adult with custodial authority must accompany the eligible minor. In such a case, the ‘head of the household’ is the custodial adult.

## **I. DEFINITIONS - HOPWA ACTIVITIES IN ALPHABETICAL ORDER:**

- **ADMINISTRATIVE COSTS:** Costs for general management, oversight, coordination, evaluation, and reporting. Such costs do not include expenses directly related to carrying out eligible activities, which are eligible as activity delivery costs. By statute, grantee administrative costs are limited to 3% of total grant award, to be expended over the life of the grant. Project sponsor administrative costs are limited to 7% of the portion of the grant amount they receive.
- **BENEFICIARY(IES):** All members of a household who received HOPWA assistance during the operating year including the one individual who qualified the household for HOPWA assistance

as well as any other members of the household (with or without HIV) who benefitted from the assistance.

- **CENTRAL CONTRACTOR REGISTRATION (CCR):** The primary registrant database for the U.S. Federal Government. CCR collects, validates, stores, and disseminates data in support of agency acquisition missions, including Federal agency contract and assistance awards. Both current and potential federal government registrants (**grantees**) are required to register in CCR in order to be awarded contracts by the federal government. Registrants must update or renew their registration at least once per year to maintain an active status. Although recipients of direct federal contracts and grant awards have been required to be registered with CCR since 2003, this requirement was extended to indirect recipients of federal funds with the passage of ARRA (American Recovery and Reinvestment Act). Per ARRA and FFATA (Federal Funding Accountability and Transparency Act) federal regulations, all grantees and sub-grantees or subcontractors receiving federal grant awards or contracts must have a DUNS (Data Universal Numbering System) Number.
- **CHRONICALLY HOMELESS PERSON:** An individual or family who : (i) is homeless and lives or resides in a place not meant for human habitation, a safe haven, or in an emergency shelter; (ii) has been homeless and living or residing in a place not meant for human habitation, a safe haven, or in an emergency shelter continuously for at least 1 year or on at least 4 separate occasions in the last 3 years; and (iii) has an adult head of household (or a minor head of household if no adult is present in the household) with a diagnosable substance use disorder, serious mental illness, developmental disability (as defined in section 102 of the Developmental Disabilities Assistance and Bill of Rights Act of 2000 (42 U.S.C. 15002)), post-traumatic stress disorder, cognitive impairments resulting from a brain injury, or chronic physical illness or disability, including the co-occurrence of 2 or more of those conditions. Additionally, the statutory definition includes as chronically homeless a person who currently lives or resides in an institutional care facility, including a jail, substance abuse or mental health treatment facility, hospital or other similar facility, and has resided there for fewer than 90 days if such person met the other criteria for homeless prior to entering that facility. (See 42 U.S.C. 11360(2))This does not include doubled-up or overcrowding situations.
- **DISABLING CONDITION:** Evidencing a diagnosable substance use disorder, serious mental illness, developmental disability, chronic physical illness, or disability, including the co-occurrence of two or more of these conditions. In addition, a disabling condition may limit an individual's ability to work or perform one or more activities of daily living. An HIV/AIDS diagnosis is considered a disabling condition.
- **FACILITY-BASED HOUSING ASSISTANCE:** All eligible HOPWA Housing expenditures for or associated with supporting facilities including community residences, SRO dwellings, short-term facilities, project-based rental units, master leased units, and other housing facilities approved by HUD.
- **FAITH-BASED ORGANIZATION:** Religious organizations of three types: (1) congregations; (2) national networks, which include national denominations, their social service arms (for example, Catholic Charities, Lutheran Social Services), and networks of related organizations (such as YMCA and YWCA); and (3) freestanding religious organizations, which are incorporated separately from congregations and national networks.

Direct government funds may not be used to support inherently religious activities such as prayer, worship, religious instruction, or proselytization.

Any inherently religious activities that the organizations may offer must be offered separately in time or location from services that receive federal assistance.

FBOs cannot discriminate on the basis of religion when providing services (GAO 2006:13).

- **GRASSROOTS ORGANIZATION:** An organization headquartered in the local community where it provides services; has a social services budget of \$300,000 or less annually, and six or fewer full-time equivalent employees. Local affiliates of national organizations are not considered “grassroots.”
- **HOPWA ELIGIBLE INDIVIDUAL:** The one (1) low-income person with HIV/AIDS who qualifies a household for HOPWA assistance. This person may be considered “Head of Household.” When the CAPER asks for information on eligible individuals, report on this individual person only. Where there is more than one person with HIV/AIDS in the household, the additional PWH/A(s), would be considered a beneficiary(s).
- **HOPWA HOUSING INFORMATION SERVICES:** Services dedicated to helping persons living with HIV/AIDS and their families to identify, locate, and acquire housing. This may also include fair housing counseling for eligible persons who may encounter discrimination based on race, color, religion, sex, age, national origin, familial status, or handicap/disability.
- **HOPWA HOUSING SUBSIDY ASSISTANCE TOTAL:** The unduplicated number of households receiving housing subsidies (TBRA, STRMU, Permanent Housing Placement services and Master Leasing) and/or residing in units of facilities dedicated to persons living with HIV/AIDS and their families and supported with HOPWA funds during the operating year.
- **HOUSEHOLD:** A single individual or a family composed of two or more persons for which household incomes are used to determine eligibility and for calculation of the resident rent payment. The term is used for collecting data on changes in income, changes in access to services, receipt of housing information services, and outcomes on achieving housing stability. Live-In Aides (see definition for Live-In Aide) and non-beneficiaries (e.g. a shared housing arrangement with a roommate) who resided in the unit are not reported in the CAPER.
- **HOUSING STABILITY:** The degree to which the HOPWA project assisted beneficiaries to remain in stable housing during the operating year.
- **IN-KIND LEVERAGED RESOURCES:** These involve additional types of support provided to assist HOPWA beneficiaries such as volunteer services, materials, use of equipment and building space. The actual value of the support can be the contribution of professional services, based on customary rates for this specialized support, or actual costs contributed from other leveraged resources. In determining a rate for the contribution of volunteer time and services, use the rate established in HUD notices, such as the rate of ten dollars per hour. The value of any donated material, equipment, building, or lease should be based on the fair market value at time of donation. Related documentation can be from recent bills of sales, advertised prices, appraisals, or other information for comparable property similarly situated.
- **LEVERAGED FUNDS:** The amount of funds expended during the operating year from non-HOPWA federal, state, local, and private sources by grantees or sponsors in dedicating assistance to this client population. Leveraged funds or other assistance are used directly in or in support of HOPWA program delivery.
- **LIVE-IN AIDE:** A person who resides with the HOPWA Eligible Individual and who meets the following criteria: (1) is essential to the care and well-being of the person; (2) is not obligated to the support of the person; and (3) would not be living in the unit except to provide the

necessary supportive services. *See the Code of Federal Regulations Title 24, Part 5.403 and the HOPWA Grantee Oversight Resource Guide for additional reference.*

- **MASTER LEASING:** Applies to a nonprofit or public agency that leases units of housing (scattered-sites or entire buildings) from a landlord, and subleases the units to homeless or low-income tenants. By assuming the tenancy burden, the agency facilitates housing of clients who may not be able to maintain a lease on their own due to poor credit, evictions, or lack of sufficient income.
- **NEW CONSTRUCTION** of facilities (for single room occupancy (SRO) dwellings and community residences, only) to provide housing and services for eligible persons. *(A completed "Application for Multi-Family Housing Loan" must be submitted for review and approval for this activity.)*
- **OPERATING COSTS:** Applies to facility-based housing only, for facilities that are currently open. Operating costs can include day-to-day housing function and operation costs like utilities, maintenance, equipment, insurance, security, furnishings, supplies and salary for staff costs directly related to the housing project but not staff costs for delivering services.
- **OUTCOME:** The measureable outcome of the HOPWA assisted household has been enabled to establish or maintain a stable living environment in housing that is safe, decent, and sanitary, (per the regulations at 24 CFR 574.310(b)) and to reduce the risks of homelessness, and improve access to HIV treatment and other health care and support.
- **OUTPUT:** The number of units of housing or households that receive HOPWA assistance during the operating year.
- **PERMANENT HOUSING PLACEMENT SERVICES (PHP):** Supportive Services such as case management & placement in housing such as application fees, credit check expenses, first month's rent and security deposit not to exceed two months' rent costs.
- **PROGRAM INCOME:** Gross income directly generated from the use of HOPWA funds, including repayments. See grant administration requirements on program income for state and local governments at 24 CFR 85.25, or for non-profits at 24 CFR 84.24.
- **PROJECT-BASED RENTAL ASSISTANCE (PBRA):** A rental subsidy program that is tied to specific facilities or units owned or controlled by a Project Sponsor or Sub recipient. Assistance is tied directly to the properties and is not portable or transferable.
- **PROJECT SPONSOR ORGANIZATIONS:** Any nonprofit organization or governmental housing agency that receives funds under a contract with the grantee to provide eligible housing and other support services or administrative services as defined in 24 CFR 574.300. Project Sponsor organizations are required to provide performance data on households served and funds expended. Funding flows to a Project Sponsor as follows:  
HUD Funding ➡ Grantee ➡ Project Sponsor
- Resource identification services for participating agencies (RI): Establishes, coordinates, and develops housing assistance resources for eligible persons (including conducting preliminary research and making expenditures necessary to determine the feasibility of specific housing-related initiatives).
- **SHORT-TERM RENT, MORTGAGE, AND UTILITY (STRMU) ASSISTANCE:** Time-limited, housing subsidy assistance designed to prevent homelessness and increase housing stability. Grantees may provide payments for rent, mortgage, and /or utilities for up to 21 weeks in any 52 week period. The amount of assistance varies per client depending on funds available, tenant need and program guidelines.
- **STEWARDSHIP UNITS:** Units developed with HOPWA, where HOPWA funds were used for acquisition, new construction and rehabilitation that no longer receive operating subsidies from HOPWA. Report information for the units is subject to the three-year use agreement if

rehabilitation is non-substantial and to the ten-year use agreement if rehabilitation is substantial.

- **SUBRECIPIENT ORGANIZATION:** Any organization that receives funds from a Project Sponsor to provide eligible housing and other support services and/or administrative services as defined in 24 CFR 574.300. If a sub recipient organization provides housing and/or other supportive services directly to clients, the sub recipient organization must provide performance data on household served and funds expended. Funding flows to sub recipients as follows:  
HUD Funding → Grantee → Project Sponsor → Sub recipients
- **SUPPORTIVE SERVICES, INCLUDING CASE MANAGEMENT (SS):** Supportive Services include, but is not limited to, health (*health education and wellness counseling*) - mental health assessment *psychiatric reviews or services which determine the mental health of the client*); permanent housing placement (*facilitate the movement of homeless individuals and families to permanent housing (long-term housing) within 24 months of their transitional housing stay*) ; drug and alcohol abuse treatment and counseling (*provide for group therapy, peer counseling, disease management, chemical dependency counseling, and family counseling*); day care (*adults and children*); nutritional services (*nutritional diet education and counseling, meal preparation, food purchases, and grocery vouchers*); intensive care when required (*provide for the locating of a care provider who can appropriately care for the individual and referral of the individual to the care provider*); and case management, except that health services may only be provided to individuals with acquired immunodeficiency syndrome or related diseases and not to family members of these individuals.
- **TECHNICAL ASSISTANCE** assists in establishing and operating a community residence including planning and other pre-development or pre-construction activities, but not limited to, costs related to community outreach and educational activities regarding AIDS or related diseases for persons residing in the proximity of the community residence.
- **TENANT- BASED RENTAL ASSISTANCE (TBRA):** TBRA is a rental subsidy program similar to the Housing Choice Voucher program that grantees can provide to help low-income households access affordable housing. The TBRA voucher is not tied to a specific unit, so tenants may move to a different unit without losing their assistance, subject to individual program rules. The subsidy amount is determined in part by household income and rental costs associated with the tenant's lease.
- **TRANSGENDER:** Transgender is defined as a person who identifies with, or presents as, a gender that is different from his/her gender at birth.
- **VETERAN:** A veteran is someone who has served on active duty in the Armed Forces of the United States. This does not include inactive military reserves or the National Guard unless the person was called to active duty.

Links: ELECTRONIC CODE OF FEDERAL REGULATIONS, the e-CFR resides at a new URL: [www.ecfr.gov](http://www.ecfr.gov).

⇒ U.S Dept. of Housing & Urban Development: [HOPWA Rental Assistance Guidebook](#)

## **J. ELIGIBLE SERVICE ACTIVITIES**

HOPWA funds will be focused on direct housing assistance to those most in need and on supportive services for the HOPWA eligible individuals.

Applicants are strongly encouraged to partner with other service providers (both public and private) to coordinate client services and fully leverage the available resources in the particular service area.

Eligible housing activities (direct housing assistance) for this HOPWA program can be met through the provision of:

- Tenant based rental assistance (TBRA)
- Short term rental, mortgage, and utility assistance (STRMU)

Applicants may request up to 7 percent of the total award for administrative costs. See program guidelines for qualified administrative costs.

SUMMARY OF ELIGIBLE ACTIVITIES		
Activity Type	Priority	Budget Parameters
TBRA	HIGH	Total housing assistance 65% or greater (may be combined with STRMU so that total housing assistance is 65% *or greater)
STRMU	HIGH	Total housing assistance 65% *or greater (may be combined with TBRA so that total housing assistance is 65% or greater)
Supportive Services ▪ Including permanent housing placement	MEDIUM	35%* or less
Administrative Costs	N/A	Not more than 7% *

See table below.

EXAMPLES OF HOPWA BUDGET ALLOCATIONS		
Housing Assistance	Supportive Services	Administrative Costs
65%	35%	0
70 %	23%	7%
75 %	20%	5%

**TENANT-BASED RENTAL ASSISTANCE (TBRA)** is a rental subsidy used to help participants obtain permanent housing in the private rental housing market that meets housing quality standards and is rent reasonable. Eligible costs include rent (not mortgage payments) and utility costs. Working much like the Section 8 Housing Choice Voucher Program, HOPWA tenant-based assistance pays the difference between the Fair Market Rent or ‘reasonable rent’ and the tenant’s portion of the rent. With TBRA, the HOPWA Project Sponsor makes rental payments directly to property owners. The HOPWA subsidy covers a portion of the full rent; the tenant also pays a portion based on their adjusted income or gross income. The HOPWA TBRA program subsidy payment is the difference between the contract rent charged for an approved unit and the tenant rent payment.

There are three key elements for the determination of the HOPWA TBRA assistance:

1. Calculation of gross and adjusted household income;

2. Calculation of tenant rent payment (based on income); and
3. Calculation of HOPWA subsidy payment.

(See TBRA rent calculation for further guidance on rent and utility cost calculations).<sup>2</sup>

HOPWA participant rent payments will be the higher of two amounts:

- 10 % of gross household income;
- 30 % of adjusted income
- If the family is receiving payments for welfare assistance from a public agency and a part of the payments, adjusted in accordance with the family's actual housing costs, is specifically designated by the agency to meet the family's housing costs, the portion of the payment that is designated for housing costs.

Please note that all units must comply with Housing Quality Standards (HQS), occupancy standards & rent standards.

Project Sponsors may enter into annual renewable contracts with clients. Project sponsors will be required to assure that all property and occupancy standards continue to be met through the entire contract period. Project sponsors must reexamine participant's family income, size and composition at least once a year.

Program client files must contain the following documentation:

- Properly calculated household income;
- Properly calculated program client rent payment;
- The HOPWA subsidy, properly calculated, including use of utility allowances (when applicable) and FMR rent standards;
- Verification that housing meets Housing Quality Standards (HQS) and lead standards;
- Housing assessment and plan (completed at least annually);
- Medical documentation of HIV/AIDS status; and
- Copy of legal lease.

Files should contain third-party income documentation, such as pay stubs, earning statements, checks, W-2 forms, and income tax returns. If a participant reports no income, a signed and witnessed 'Verification of No Income' statement must be present in the participant's file.

(See <https://www.hudexchange.info/resource/1025/hopwa-program-administration-toolkit/> for further information).

In addition, client files should contain proper documentation to support any use of the Earned Income Disregard. The Earned Income Disregard, as it is commonly called, allows qualified individuals and

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<sup>2</sup> HUD HOPWA Oversight and Monitoring Guide, Chapter 4, Tenant Based Rental Assistance:  
<https://www.hudexchange.info/programs/hopwa/hopwa-performance-management-and-monitoring/>



families receiving housing assistance to keep more of their earned income for a period of up to two years following an increase in employment income. This resource provides guidance in implementing the Earned Income Disregard for the purpose of calculating client income & resident rent payment (See <https://www.hudexchange.info/resource/1025/hopwa-program-administration-toolkit/> for further information & form).

Client eligibility status, household composition, and rental payments must be verified at least annually. This is called “re-certification”. The Project Sponsor must have a tracking method for client eligibility and verifying changes in income, family composition, and circumstances. The Project Sponsor must have policies and procedures that require the client to notify the sponsor of income changes during the course of a program year.

- All payments must be made to a third party, not directly to a program client.

**SHORT-TERM RENT, MORTGAGE, AND UTILITY (STRMU) ASSISTANCE** is time-limited housing assistance to prevent homelessness and increase housing stability for clients with an emergency need to move to long-term housing solutions for participants receiving this time-limited housing assistance.

STRMU is designed to be a short-term, needs-based intervention to prevent homelessness. As such, individuals must meet the following additional criteria in order to receive STRMU assistance:

- Program client must be currently housed. Homeless individuals are **not** eligible for STRMU assistance.  
Assistance is provided to help homeowners and renters remain in their current place of residence.
- Program client must be able to document that he/she has a legal right to occupy premises or has responsibility for the utility payment. Examples of acceptable documentations are as follows:
  - Rental payments: Program client must be named tenant under valid lease or reference in lease as occupant of the premises.
  - Mortgage payments: Program client must demonstrate that he/she is owner of mortgaged property (mortgage, deed of trust, title insurance policy)
  - Utility payments: Program client must have account in their name or proof of responsibility to make utility payments (copies of money orders, cancelled checks, receipts).
- Client must demonstrate he/she does not have the resources to meet rent, mortgage, or utility payments and, in the absence of STRMU assistance, would be at risk of homelessness.
- Documentation of a default or late payment notice is not required; client can provide copies of bank statements and bills to demonstrate need.

Project Sponsors may provide assistance for a period of up to 21 weeks in the 52 week period (July 1<sup>st</sup> to June 30<sup>th</sup>). The amount of assistance varies per client depending on funds available, tenant need, and program guidelines. STRMU is not intended to provide regular monthly relief to households in situations that are not financially manageable under normal circumstances. If a household is living in a unit that is not normally affordable then access to long-term rental assistance (HOPWA or other) would be a better solution than STRMU assistance.

Example of “Emergency Need

- Applicant experiences a sudden loss of income due to changes in health
- Applicant has lost employment and has not yet been found eligible for SSDI
- Applicant’s household loses a source of income when family composition changes
- Due to above, applicant family faces eviction, foreclosures, or utilities shut-off
- Applicant faces extraordinary and unexpected health care costs

**K. ELIGIBLE STRMU EXPENSES:**

- Rent and mortgage assistance:
  - Must be reasonable and represent actual housing costs
  - The amount of assistance provided is not limited to Fair Market Rents or “reasonable rent” limits
  - Unlike other types of HOPWA assistance, tenants are *not required* to pay 30 % of their income toward the rent or mortgage payment. If they are able, program clients must pay a portion of their housing costs, as any portion paid by tenant does not count against the 21-week STRMU benefit ceiling. The Project Sponsors must document if they decide upon this method.
- Late Fees:
  - Late fees and other penalties may be paid if the household is at risk of eviction or loss of housing.
  - Utility assistance late fees may be paid
- Utility payments
- All payments must be made to the third party, not directly to program client.

Note: Project Sponsors may establish caps (limits) for rent, mortgage, or utility assistance.

**L. INELIGIBLE STRMU EXPENSES**

- Security deposits and first month’s rent:  
STRMU assistance helps homeowners and renters stay in their current place of residence; as such, **security deposits** and **first month’s rent** are not eligible costs under STRMU. These costs are eligible as Permanent Housing Placement (PHP) costs under the supportive services activity.
- Moving assistance
- Household supplies and furnishings
- Automobile expenses
- Telephone expenses

**DOCUMENTATION:**

Program Client files must contain the following documentations:

- AIDS/HIV status;
- Properly calculated household income;
- Need for STRMU assistance;
- Time limits, consistent with 21 weeks of assistance in a 52 week program year (July 1<sup>st</sup>–June 31<sup>st</sup>);
- Verification that housing meets Lead-Based Paint Requirements;

- Housing assessment and plan update at least annually; and
- Valid lease.

**M. SUPPORTIVE SERVICES:**

Supportive Services for HOPWA housing assistance clients and other eligible non-housing assistance clients are eligible expenses. Supportive services help program participants to stabilize their living situations and address care needs of persons living with HIV infection.

In general, HOPWA program focus must be on program client’s housing assistance rather than supportive services. No more than *35 percent* of the total grant *may be* utilized for supportive services (*Note: Permanent housing placement costs are included in the 35 percent cap*). . All supportive service expenses for HOPWA program must be documented as being last resort – that is, all other resources for supportive services must be exhausted prior to using HOPWA funds for supportive services.

**PERMANENT HOUSING PLACEMENT** is a subset of supportive services, but is also tracked separately from supportive services (*Note: Permanent housing placement costs are included in the 35 percent supportive services cap*). Permanent housing placement services may be used to help eligible persons establish a new residence where ongoing occupancy is expected to continue. It may be used to compliment other forms of HOPWA housing assistance.

Costs associated with locating housing:

- Housing referral
- Tenant counseling:
  - Understanding a residential lease and its obligations
  - Mediation of disputes

Costs associated with placement in housing:

- Application fees and credit check expenses
- First month’s rent and security deposit (not to exceed two months’ rent)
- One-time utility connection fees and processing credit
- All payments must be third party, not directly to program client

These costs, especially security deposits, are not considered rental assistance and should be billed as a supportive service. Placement costs cannot exceed the value of two months’ rent in the new unit. Such funds must be designated to be returned to the Project Sponsor’s HOPWA program when beneficiaries vacate the new unit. Returned funds must be recorded and tracked as program income and used to further the project sponsor’s HOPWA program purposes.

The following eligible HOPWA Supportive Services expenses must include in the Annual Program Report (APR):

- Adult day care and personal assistance
- Alcohol and drug abuse services
- Case management/advocacy/coordination of benefits

- Child care
- Education
- Employment assistance and training for persons with HIV/AIDS
- Health and medical services (with restrictions listed below)
- Legal services
- Life skills management
- Nutritional services (including meals)
- Mental Health services
- Outreach
- Transportation

Note: Permanent housing placement (see below) is also designed as supportive services in the reporting forms, but should be a separate budget line item and tracked separately as a data element.

Required documentation includes:

- Documentation of HIV status
- Properly calculated household income
- Documentation of need for supportive service assistance
- Housing assessment and plan

Despite this flexibility of services, HUD has limitations on what is considered to be an eligible service. Project Sponsors will need to adequately track supportive service activities, document related expenditures, and adhere to these limitations. In general, HOPWA-funded supportive services can be provided to income-eligible persons with HIV and AIDS and their family members. However, as noted in the HOPWA regulations, *health services* may only be provided to “individuals with acquired immunodeficiency syndrome or related diseases and not to family members” (24 CFR 574.300b (7)).

Any supportive service, including health services, should be provided as a last resort. The sponsor should document reasonable efforts to qualify recipients for other programs that might pay for supportive services in the client’s Individual Housing Service Plans that demonstrate Project Sponsors are conducting required on-going assessments of the housing assistance and supportive services.

The flexibility built into the range of eligible HOPWA supportive services under this activity can be a challenge given the limited amount of HOPWA funds available to support these services. This flexibility helps Project Sponsors adapt their projects to local needs and gaps in services, but the project sponsor needs to understand the limits of this flexibility. While HOPWA acknowledges the importance of combining housing assistance with other supports, HOPWA funds can only be used for eligibility activities related to housing needs. The sponsor needs to clarify the nature and scope of the supportive services that will be offered as part of the housing stabilization plan through their HOPWA project.

The following items should be tracked and documented in program client files:

- Recipients of supportive services are eligible, as defined by HOPWA regulations;
- The activity itself is an eligible HOPWA activity;
- The services are adequate and appropriate for the level of support required by clients;

- The activities conform with the sponsor’s grant agreement, such as limits on health care;
- Records of supportive services back up the beneficiary data and expenditures reported to the grantee.

In addition, project sponsors must report at the end of the year the following:

- The number of eligible households received the specific service;
- The amount the sponsor spent on the specific category; and
- The value of other non-HOPWA funds brought into the project (leveraged) for this activity.

**Ineligible permanent housing expenses include but are not limited to:**

- Moving costs
- Standard furnishings
- Housekeeping/household supplies

**SECTION III: HUD HOPWA PROGRAM REQUIREMENTS**

**HOPWA PROGRAM REQUIREMENTS:** Housing Plans and Assessments assist in ensuring that clients achieve greater housing stability by receiving HOPWA assistance. Regulation 24 CFR 574,500 (b) (2) states that the grantee will ensure that for each project, project sponsor agrees to “conduct an ongoing assessment of the housing assistance and supportive services required by the clients in the program.” The housing assessment process includes gathering client information about current finances, past rental history, behavioral history and other service needs. The housing assessment is the foundation for the development of individualized housing service plans. The sponsor should assess housing and supportive service needs at the point of intake or application and create plans for housing stability. The sponsor should update these plans at least annually.

All program client files must contain an individualized housing assessment and housing and service plan with evidence of annual updates and ongoing progress.

Examples of Housing Assessments and Client Housing Plans may be found at:

<https://www.hudexchange.info/resource/1025/hopwa-program-administration-toolkit/#rent>

**N. HOUSING QUALITY STANDARDS (HQS)**

Inspections are required for each unit subsidized (TBRA or permanent housing placement) with HOPWA assistance (except STRMU). Each unit must pass a housing quality inspection to ensure the housing is safe and sanitary and in compliance with local and state housing codes, licensing standards, and any other jurisdictional requirements, and the HOPWA program habitability standards as outlined in 24 CFR

574.310 (b) (see HOPWA Habitability checklist attached to application). Housing quality inspections are made at initial move-in and annually during the term of the rental assistance. Prior to occupancy by the HOPWA funded tenant, the unit must be inspected and approved by the project sponsor. The staff member performing the inspection does not need any special training, just familiarity with the HOPWA guidelines. The sponsor should use the attached HOPWA Habitability Form that covers the standards set out in the HOPWA regulations.

- Units must be decent, safe and sanitary
- These standards apply to any housing through tenant-based rental assistance (TBRA).

Note: does not apply to STRMU

#### **O. HUD ENVIRONMENTAL REVIEW COMPLIANCE**

- Project sponsor must complete an environmental review to assume all the Environmental Review Document responsibilities.
- Unless the Environmental Review documents are approved, HPO will not release funds for an eligible services rendered.
- Project sponsor must submit completed Environmental Review Document electronically through the Webgrants System.
- Link to Webgrants is: <https://webgrants.community.utah.gov/index.jsp>

#### **P. LEAD-BASED PAINT REQUIREMENTS**

HUD's lead based paint requirements were changed in 2000 and their applicability to HOPWA housing assistance clearly delineated. The lead based paint requirements can affect much of the housing assistance provided through HOPWA. This section identifies the HOPWA activities that are subject to the lead based paint requirements and outlines the steps that grantees and project sponsors must take to ensure that HOPWA-assisted housing is lead safe.

Preventing children from being exposed to lead based paint hazards is the responsibility of grantees and project sponsors under the HOPWA program.

The changes to the lead based paint requirements reflect the new understanding concerning the hazards of lead dust and require safe work practices for any stabilization or hazard reduction activities and clearance inspection upon completion of activities.

The Lead-Based Paint Poisoning Prevention Act (42 U.S.C. 4801 et seq.), as amended by the Residential Lead Based Paint Hazard Reduction Act of 1992 (42 U.S.C. 4851 et seq.) and implementing regulations at 24 CFR part 35, subparts A, B, M, and R shall apply to housing occupied by families receiving assistance through HOPWA (see *Lead Inspection checklist that is attached to HOPWA application*).

- HUD's lead-based paint rules apply to all housing assisted through TBRA or STRMU.
- Specifically, lead-based paint rules apply when:
  1. Housing to be assisted was constructed before 1978; and
  2. Residents will include a pregnant woman or a child 6 years of age or younger.

Note: Studio units are exempt.

- All housing meeting the above criteria must receive a lead-based paint visual assessment before assistance may be provided.
- Staff must complete an online training course before performing assessments. This training can be found at: <https://apps.hud.gov/offices/lead/training/visualassessment/h00101.htm>

#### Applicability

The HOPWA regulations (24 CFR 574.635) state that The Lead-Based Paint Poisoning Prevention Act (42 U.S.C. 4821–4846) and the Residential Lead-Based Paint Hazard Reduction Act of 1992 (42 U.S.C. 4851–4856) apply to activities under the HOPWA program and implementing regulations at part 35, subparts A, B, H, J, K, M, and R of this part apply to HOPWA activities.

The Lead Based Paint regulations (24 CFR PART 35 LEAD-BASED PAINT POISONING PREVENTION IN CERTAIN RESIDENTIAL STRUCTURES) cover HOPWA supported tenant based rental assistance, acquisition, leasing, supportive services, operations, project based rental assistance, rehabilitation assistance, and security deposits under sub-parts H, J, K, M.

There are a number of significant exemptions to these requirements which will substantially lessen the impact for HOPWA providers. Exempt projects/properties have no need to comply with the lead based paint requirements. However, in all HOPWA supported activities in which children less than six years of age are present, sponsors should seek to maintain a lead based paint free environment.

The table below fully delineates the lead based paint compliance requirements by type of HOPWA assistance provided.

24 CFR 35.115 EXEMPTIONS FROM LEAD BASED PAINT REQUIREMENTS	
All Housing Constructed after	All residential property for which construction was completed on or after
A zero-bedroom dwelling Unit	This includes a single room occupancy (SRO) dwelling unit; If shelters do not provide separate bedrooms, they are exempt under the zero bedroom
Emergency rental assistance or foreclosure prevention assistance up to 100 days	This exemption for a dwelling unit expires no later than 100 days after the initial payment or assistance – the exemption applies to the unit and the length of time the unit receives HUD assistance
For Tenant Based Rental Assistance (Sub-part M) applies only if child under 6 is present	Lease based paint requirements apply only to dwelling units occupied or to be occupied by households that have one or more children of less than 6 years of age, common areas servicing such dwelling units, and exterior painted surfaces associated with such dwelling units or common areas; If the designated party
Housing for elderly or a residential property designated exclusively for persons with disabilities	This exemption shall not apply if a child less than age 6 resides or is expected to reside in the dwelling unit (see definitions of ‘housing for elderly’ and ‘expected to reside’ in <a href="#">24CFR 35.110</a> )

Lead based paint requirements differ according to the type of assistance provided through HOPWA. The table below summarizes lead based paint compliance requirements by the key types of HOPWA support.

#### LEAD BASED PAINT COMPLIANCE REQUIREMENTS BY TYPE OF HOPWA ASSISTANCE

HOPWA Assistance	Lead Based Paint Requirements
Short Term Supported Housing, up to 60 days of assistance in a 6 month period	Exempt from compliance – provided the 100 day limit is not exceeded. The 100 day period applies to the unit and not the household so if the same unit is used for multiple households and the use of the unit for HOPWA assistance will
Short Term Rent Mortgage and Utility assistance (STRMU)	Provided the assistance does not exceed 100 days, it is exempt as ‘emergency rent or mortgage’ assistance. The requirement is linked to the unit so if the household receiving assistance that will extend for longer than 100 days, the <a href="#">Sub-Part K</a> requirements must be met. The 100 day period is cumulative so if
Permanent Housing Placement Assistance	This provides security deposits and other assistance for units where on-going residency is expected. Since the residency would be expected to exceed 100 days, <a href="#">the Sub-Part K</a> requirements apply.
Operating Support	Projects providing operating support to housing through HOPWA must meet the <a href="#">Sub-Part K</a> requirements.
Supportive Services	Programs that provide services such as medical care, education, or food service are not considered housing assistance programs and are not covered by the regulation. HUD recommends that efforts be made to assure that facilities
Tenant Based Rental Assistance	If the assisted household contains <b>children less than six years of age</b> , then the <a href="#">Sub-part M</a> requirements must be met.
Project Based Rental Assistance than \$5,000/unit/year	<a href="#">Sub-Part H</a> applies; note there are differing requirements based on the amount of annual support; <b>less than \$5,00/unit/year and greater</b>
Rehabilitation Assistance	<a href="#">Sub-Part J</a> applies; requirements vary depending on dollar amount of rehabilitation support: under \$5,000/unit, between \$5,000 and \$25,000/unit and over \$25,000/unit. The higher the amount of rehab support, the more

As noted above, the lead based paint compliance requirements are based on the type and amount of assistance provided through HOPWA. In addition to specifying how lead based paint is to be inspected for and remediated, the requirements also include providing notifications to affected households, following up and coordinating with public health agencies when housing is provided to children who have elevated levels of lead in their bloodstream. The requirements associated with the different sub- parts of the lead based paint regulations, along with the HOPWA program components to which they apply are presented in the table below. The steps that must be taken to comply with the requirements are discussed after the table. [Note if using this in electronic format (recommended) the included links will bring you to the source documents.]

Review of lead based paint compliance requirements based on type of HOPWA assistance received

Part 35 Regulations Sub-Part	Applies to HOPWA Activity	Compliance for Housing Constructed Prior to 1978 Requires



K	<p><b>Operating Support</b> to facility based projects; <b>STRMU</b> assistance in excess of 100 days; <b>Permanent Housing Placement</b> if the housing is expected to be occupied in excess of 100 days</p>	<p>Provision of Pamphlet  Visual Assessment Paint Stabilization using safe work practices (before occupancy projects; of a vacant unit, or if occupied, upon receipt of federal Clearance  Provision of Notice of hazard reduction activity and clearance results to occupants  Ongoing Lead-Based Paint Maintenance</p>
M	<p>Tenant Based Rental Assistance ONLY APPLIES IF A CHILD UNDER 6 YEARS WILL OCCUPY UNIT</p> <p>ADDITIONAL TBRA REQUIREMENT TO COMMUNICATE WITH DEPARTMENT OF HEALTH WITH REGARD TO CHILDREN WITH ELEVATED BLOOD LEAD LEVEL</p>	<p>Units Occupied/To be Occupied By A Family With a Child Under Age Six:  Provision of Pamphlet by the owner  Visual Assessment by the designated party during initial and periodic inspections Paint Stabilization using safe work practices before occupancy or, if unit is already occupied, within 30 days after Visual Assessment report  Clearance by the designated party  Provision of Notice of hazard reduction activity, including clearance results, to occupants  Ongoing Lead-Based Paint Maintenance  Ongoing Requirement of Tenant-Based Rental Assistance Programs: Report to the public health department an updated list of the addresses of units receiving assistance (at least quarterly) At least quarterly, attempt to obtain from the <del>pl</del>health department a list of the names and/or addresses of children under the age of six with an identified EIBLL; match the EIBLL list with the rental assistance program's list (unless the public health department makes this comparison), and respond to the matches of any EIBLL children who live in units receiving assistance.</p>
H	<p>Project Based Rental Assistance – Annual federal assistance per year is <u>less than \$5,000/unit/year</u></p> <p>Project Based Rental Assistance = Annual federal assistance in <u>excess of \$5,000/unit/year</u></p>	<p>Provision of Pamphlet  Visual Assessment (during initial and periodic inspections)  Paint Stabilization using safe work practices  Clearance  Provision of Notice of hazard reduction activity and results to Occupants  Ongoing Lead-Based Paint Maintenance</p> <p>Provision of Pamphlet  Ongoing Lead-Based Paint Maintenance between September 15, 2000 &amp; the completion of a risk assessment  Risk Assessment (must be completed in pre-1960 construction by September 17, 2001, and in 1960-1978 construction by September 15, 2003)  Provision of Notice of the results of the risk assessment to occupants  Interim Controls using safe work practices to treat hazards identified in the risk assessment  Clearance  Provision of Notice of hazard reduction activity and results to occupants</p>

		Ongoing Lead-Based Paint Maintenance immediately subsequent to risk assessment unless all lead-based paint has been removed Reevaluation
J	Rehabilitation of existing structures \$5,000/unit or less in Federal rehab expenditures	Provision of Pamphlet Determine Whether to Evaluate or Presume If Evaluate: Test paint on all surfaces to be disturbed by rehab Provision of Notice to occupants of the results of the paint test Use safe work practices while working on surfaces which contain lead-based paint Repair paint on surfaces where lead-based paint has been identified and was disturbed during rehab Clearance of the work area If Presume: Presume lead-based paint present Provision of Notice to occupants of presumption of the presence of lead-based paint and LBP hazards Use safe work practices on all surfaces disturbed by rehab work Repair paint on all surfaces disturbed by rehab Clearance of the work area Provision of Notice of hazard reduction activity, including clearance results, to occupants Ongoing Lead-Based Paint Maintenance required after rehab of a rental property using HOME or CILP funds Record Keeping
J	Rehabilitation of existing structures, more than \$5,000/unit in Federal rehab assistance but less than \$25,000	Provision of Pamphlet Determine Whether to Evaluate or Presume Evaluate Test paint on all surfaces to be disturbed by rehab Risk Assessment in assisted unit, in common areas, and on exterior surfaces Provision of Notice to occupants of the results of the paint test and risk assessment Interim Controls on identified hazards and hazards created by rehab, using safe work practices Clearance of the unit Presume Presume lead-based paint and lead-based paint hazards Provision of Notice to occupants of presumption of the presence of lead-based paint and LBP hazards Standard Treatments throughout the unit, using safe work practices Clearance of the unit Provision of Notice of hazard reduction activity, including clearance results, to occupants Record Keeping

	Rehabilitation of existing structures, more than \$25,000/unit in Federal rehab assistance	Provision of Pamphlet Determine Whether to Evaluate or Presume Evaluate Test Paint on all surfaces to be disturbed by rehab Provision of Notice to occupants of the results of the paint test and risk assessment Risk Assessment in assisted unit, in common areas, and on exterior surfaces Abatement of identified lead-based paint hazards and hazards created by rehab Interim Controls using safe work practices permitted on exterior surfaces not disturbed by rehab Clearance of the unit, including an abatement report Presume Presume lead-based paint Provision of Notice to occupants of presumption of the presence of lead-based paint and LBP hazards Abatement of the surfaces disturbed by rehab and deteriorated, friction, impact, and chewable surfaces Interim Controls using safe work practices permitted on exterior surfaces not disturbed by rehab  Clearance of the unit, including an abatement report  Provision of Notice of hazard reduction activity, including clearance results, to occupants Record Keeping
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The most common requirements, if a HOPWA assisted unit is found to be subject to the lead based paint are:

Visual Assessment which means looking for:

Deteriorated paint;

- (1) Visible surface dust, debris and residue as part of a risk assessment or clearance examination; or
- (2) The completion or failure of a hazard reduction measure.

A self-training module to acquire the skills necessary to conduct a visual assessment is available online at the HUD website; the course can be completed in less than one hour.

Individuals who conduct housing quality inspections for HOPWA assisted units should, at a minimum, complete the self-training module.

Provision of pamphlet

- Provided to tenants in each occupied unit that is subject to the requirements under Part 35
- Download pamphlet from: [www.hud.gov/lea/leadhelp.html](http://www.hud.gov/lea/leadhelp.html)

- A printed, color version of the pamphlet, "Protect Your Family from Lead in Your Home," can be purchased from the U.S. Government Printing Office (\$24.00 for packages of 50) by calling 1-202-512-1800 (this is a toll call). The GPO stock number is 055-000-00507-9. [Check for the Spanish version stock number.] Individual copies of the printed, color version, in either English or Spanish ("Proteja a Su Familia del Plomo en Su Casa"), can be obtained at no cost from the National Lead Information Center at 1-800-424-LEAD. The Center also has a black and white version that can be photocopied.
- Paint Stabilization
  - Repairing any physical defect in the substrate of a painted surface that is causing paint deterioration, removing loose paint and other material from the surface to be treated, and applying a new protective coating or paint.
  - Paint stabilization must be performed using 'safe work practices'.

Safe Work Practices **new** requirement in 9-15-2000 regulations

- Includes occupant protection, worksite containment, using specialized cleaning methods, products and devices, and not using prohibited methods.
- 24CFR 35.1350 Safe work practices.
- **Clearance** new requirement in 9-15-2000 regulations
- An activity conducted following lead-based paint hazard reduction activities to determine that the hazard reduction activities are complete and that no soil-lead hazards or settled dust-lead hazards, as defined in this part, exist in the dwelling unit or worksite. The clearance process includes a visual assessment and collection and analysis of environmental samples. Dust-lead standards for clearance are found at Sec. 35.1320. 24 CFR 35.1340 Clearance.
- Notice
- Communicates the results of the evaluation of paint and/or hazards, a decision to presume the presence of lead-based paint or LBP hazards, or the completion of lead hazard reduction, including the results of clearance.
- Only required where paint stabilization or other hazard reduction has been undertaken. If assessment does not determine need for stabilization, then notice is not required.
- Ongoing Lead Based Paint Maintenance
- Conducting a visual assessment for deteriorated paint, bare soil, and the failure of any previous hazard reduction measures at unit turnover and every twelve months thereafter; paint stabilization; treatment of contaminated bare soil; safe work practices when work disturbs lead-based paint greater than de minimis; repair of failed lead hazard control measures; clearance testing after all repairs, abatement, or hazard control activities; and the solicitation of occupant reports of deteriorated paint or failed lead hazard control work.
- Ongoing lead-based paint maintenance is required only when there is a continuing, active programmatic relationship for more than one year between the property and the federally funded program, such as continuing financial assistance, ownership, or periodic inspections or certifications.
- Responsibilities of owners and grantees under Tenant Based Rental Assistance  
Grantee responsibilities (may be delegated to project sponsors):
- Conducting a visual assessment prior to initial occupancy and at annual re-inspections of TBRA assisted units
- If paint stabilization or other hazard reduction activity has taken place, conducting a clearance inspection
- Owner's responsibilities:
  - Performing paint stabilization or other hazard reduction activity

- Providing notice of clearance if the activity has taken place

## **Q. DAVIS BACON LABOR REGULATIONS**

Requirement ***does*** apply to HOPWA-funded renovation, major rehabilitation or conversion activities.

## **R. ADDITIONAL REQUIREMENTS FOR HOPWA GRANTEES**

**24 CFR 35.170 Noncompliance with the requirements of subparts B through R of 24 CFR Part 35.** A designated party (HOPWA grantee) who fails to comply with any requirement of subparts B, C, D, F through M, and R of Part 35 shall be subject to the sanctions available under the relevant Federal housing assistance or ownership program and may be subject to other penalties authorized by law.

Sec. 35.175 Records.

The Grantee shall keep a copy of each notice, evaluation, and clearance or abatement report required by subparts C, D, and F through M of Part 35 for at least three years. Those records applicable to a portion of a residential property for which ongoing lead-based paint maintenance and/or reevaluation activities are required shall be kept and made available for the Department's review, until at least three years after such activities are no longer required.

For more information regarding HOPWA and lead based paint requirements, please visit:

- The On-Line Guide to HUD's Lead Based Paint Regulation:  
[https://www.hud.gov/program\\_offices/healthy\\_homes/enforcement/lshr](https://www.hud.gov/program_offices/healthy_homes/enforcement/lshr) The on-line resource for HOPWA information: <http://hudhre.info/>
- HOPWA's home page on the HUD Website <https://www.hudexchange.info/programs/hopwa/>

PROJECT sponsor (sub-grantee) Policies and Procedures <sup>3</sup>

### Confidentiality Policy

The HOPWA regulation that implements this requirement, 24 CFR 745.440, states: All "project sponsors shall agree to ensure the confidentiality of the name of any individual assistance under this part and any other information regarding individuals receiving assistance."

The sponsor's confidentiality policy should, at a minimum, address:

- How staff will gather, record, and store confidential information;
- The consent process for the release of confidential information;
- Protocols for responding to breaches of confidentiality;
- Standards contained in relevant state and federal laws, including HIPAA compliance (if applicable) and HIV confidentiality statutes; and

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<sup>3</sup> See Chapter 3: Basic Oversight Elements in HUD HOPWA Grantee Oversight Manual for further guidance: [https://www.hudexchange.info/resources/documents/HOPWAOversightGuide\\_Aug2010.pdf](https://www.hudexchange.info/resources/documents/HOPWAOversightGuide_Aug2010.pdf)

- Privacy standards related to data collection and use of participant information for program reporting, such as HMIS.
- The recipient and its sub recipients must develop and implement written confidentiality procedures in accordance with this section.

It is also important that the organization not use any identifying information that could compromise a client’s confidentiality regarding the HOPWA program. For example, checks to property owners, envelopes, letterhead, and other printed material should not contain any language that might indirectly disclose a client’s HIV status.

#### Client Termination Policy

As described in 24 CFR 574.310 (e), HOPWA regulations require agencies to create a formal process for handling the termination of clients from HOPWA assistance. This includes policies for handling surviving family members, in the event of a death of a HOPWA-eligible person.

Termination Procedures should include the following elements:

- Written notice to the client containing a clear statement of the reasons for termination
- Opportunity for a client to a review of the decision, allowing the client to confront opposing witnesses, present written objection, and be represented by individual counsel or representation, before a person other than the person (or a subordinate of that person), who made or approved the termination decision; and
- Provide prompt written notification of the final decision to the client.

#### Conflict of Interest

According to 24 CFR 574.625, organizations should have policies in place that identify and handle potential conflicts of interest on the part of board members, staff persons, and other representatives of the organization, such as volunteers. Conflict of interest policies are often part of an organizations “code of conduct” for board, staff and volunteers. HUD regulations require that sponsors and grantees have adequate codes governing conflict of interest in place.

#### Faith-based Organizations

A primarily religious organization must provide all eligible HOPWA activities in a manner free from religious influence and in accordance with principles outlined in 24 CFR 574.300 ( c).

#### Fair Housing and Equal Opportunity

HOPWA project sponsors and their activities must comply with all federal laws, executive orders, and regulations pertaining to fair housing and equal opportunity, and must take measures to ensure non-discriminatory treatment, outreach, and access to program resources (see pg. 70 of the HOPWA Oversight Guide for specifics on how this relates to the HOPWA program:

[http://www.hudhre.info/documents/HOPWA Oversight Guide.pdf](http://www.hudhre.info/documents/HOPWA%20Oversight%20Guide.pdf)).

DUNS Number

All sub-grantees are required to register with Dun and Bradstreet to obtain a DUNS number, if they have not already done so. For more information see 73 FR23483, April 30, 2008 or go to: <http://www.dnb.com/US/duns update/>

#### Central Contractor Registration (CCR)

The Central Contractor Registration (CCR) is the primary registrant database for the U.S. Federal Government. CCR collects, validates, stores, and disseminates data in support of agency acquisition missions, including Federal agency contract and assistance awards. Both current and potential federal government registrants are required to register in CCR to be awarded contracts by the federal government. Registrants must update or renew their registration at least **annually** to maintain an active status. Per FFATA (Federal Funding Accountability and Transparency Act) federal regulations, all sub-grantees or subcontractors receiving federal grant awards or contracts must be registered with the CCR. To register go to: <https://uscontractorregistration.com/central-contractor-registration-ccr/>

#### Method of Payment

Disbursements will be made either on a monthly or quarterly basis for Reimbursement Requests. HPO requires that project sponsors submit their reimbursement request on WebGrants. To establish an account go to: <https://webgrants.community.utah.gov/index.jsp>

#### Record Retention

Each sponsor must maintain all HOPWA-related program and financial records for a five-year period, in order to document compliance with the provisions of HOPWA regulations.

## SECTION VI: HUD HOPWA REPORTING REQUIREMENT

### **S. REPORTING**

Project sponsors are required to complete the HOPWA Annual Progress Report (APR) to provide annual performance reporting on clients outputs and outcomes that enables an assessment of project sponsors performance in achieving the housing stability outcome measures. The APR fulfills statutory reporting requirements and provides the grantee and HUD with the necessary information to assess the overall performance and accomplishment of the project sponsors program activities under the approved goals and objectives.

HOPWA Project sponsors are required to submit an APR for each operating year in which HOPWA grant funds were expended. Information on each competitive grant is to be reported in a separate APR. Project sponsors must complete Part 1-5 on standard report elements. Project sponsors approved for 'Other Activities', as detailed in their contract agreement, are requested to adapt the APR to report on their unique program accomplishments.

In addition, project sponsors must comply with the Federal Funding Accountability and Transparency Act 2006 (FFATA) (Public Law 109-282), which requires grant recipients to provide general information for all entities (including contractors and sub-subcontractors) receiving \$25,000 +in federal funding.

The APR is due by July 30<sup>th</sup> of each year.

Outcomes: Form Completion Tool

The APR has been created by HUD to complete the Annual Progress Report (APR). It includes tips, data checks, and auto-summation of various elements within the report. Once complete, the report may be emailed to the HOPWA office and printed out in hard copy for record keeping purposes.

#### TIPS

There are some inherent limitations to the Excel platform that hinder user-friendliness.

For example:

- Computer requirements:

**Faster computers will perform better.** A lot of data is collected in an APR, particularly when additional sponsors are added. For instance, when the 'add another sponsor' option is selected, worksheets are created for all the sections of the report requiring the additional sponsor data. You will notice that tab numbers will be numbered to indicate this-P17 (2), P17 (3) etc.: (second copy of Page 4 (for 2<sup>nd</sup> sponsor), third copy of Page 4 (for 3<sup>rd</sup> sponsor). (You may notice text at the bottom of the screen stating that the system is 'calculating'). This may result in very slow performance.

Other minor issues to consider:

- The page numbers on the APR do not match the numbers on the tabs (P1, P2, etc.).
- Users are not able to tab easily from field to field within spreadsheets; therefore, it is best to select the field with your mouse where you wish to enter data.
- Printed copies of the report may include occasional blank pages as a result of different versions of Excel. The workbook is password protected and, as such, you will not be able to expand the print area.

#### SUBMITTING THE APR

APR Submission via Email

Remember that the file name must have the following naming convention:

- Project Sponsor Name
- Program Year
- Date
- Email the report to [jdomenici@utah.gov](mailto:jdomenici@utah.gov). You will also want a hard copy for your records. You can print the whole document or print select pages.

There are a few printing options: To print preset pages:

- Go to the 'Main' tab. At the top of the page there are buttons you may select to print the instructions or the report form.

To print the entire document

- Go to File: Print.
- In the print menu, select "Entire Workbook" from the options provided and click 'OK'.
- To select the pages/tabs you would like to print: Go to File: Print.
- In the print menu, select the pages and click "OK". OR



- With the workbook open, hold down the ‘Control’ key, select each page/tab you would like to print. You will notice that as each tab is selected it will change color.
- Go to File: Print.
- In the print menu, select “Active Sheets” from the options provided and click “OK”.

APR Submission in Hard Copy

Please mail it to the following:

Jennifer Domenici  
 Program Specialist  
 Homelessness Programs Office  
 Housing & Community Development  
 1385 South State Street – 4<sup>TH</sup> Floor  
 Salt Lake City, Utah 84115

**FINANCIAL RECORDS:** The grantee shall agree, and shall ensure that each project sponsor agrees, to maintain and make available to HUD for inspection financial records sufficient, in HUD's determination, to ensure proper accounting and disbursing of amounts received from a grant under this part.

Monitoring

HPO reserves the right to conduct monitoring visits with project sponsors. Visits may be scheduled as a matter of routine or based on project sponsors performance, fiscal reporting, program reporting or other areas of concern.

Monitoring Guide

The reference link below discusses in more detail HOPWA requirements, eligibility, and monitoring requirements. It also has some useful tools and forms that may assist in running your HOPWA program.

Please note: Not all activities described in guide are part of the HPO HOPWA Program.

- <http://www.hudhre.info/index.cfm?do=viewHopwaPrgmAdminToolkit#checklist>

## Appendix

### HOPWA Income Eligibility Verification Checklist

All HOPWA applicants must be income eligible – annual gross income cannot exceed 80% of the area median income (as determined by the HUD income limits table

<http://www.huduser.org/datasets/il.html>). Income must be verified at least annually or as income changes for TBRA clients. Income must be verified each time a client applies for STRMU.

Form A	Annual Gross and Adjusted Income Worksheet
Form A-1	Suggested Forms of Income Verification and Documentation of Expenses
Form A-1 Guideline	Income Exclusions
Form B	Earned Income Disregard (EID) Worksheet

Form B Guideline	Earned Income Disregard (EID) Instructions
Form C	Verification of No Income Declaration

Form A

Annual Gross and Adjusted Income Worksheet

Complete this worksheet to determine income eligibility for all HOPWA applicants, annual gross income cannot exceed 80% of the area median income. For STRMU applicants, the monthly annual adjusted income must be determined for monthly STRMU assistance on the STRMU worksheet (complete to line 19). The total income of the household (Annual Gross Income) is from all sources anticipated to be received in the 12-month period following the effective date of the income certification.

1.	The full amount, before payroll deductions, of wages and salaries, overtime pay, commissions, fees, tips and bonuses, other compensation for personal services prior to payroll deductions. (Applies to client and <b>all</b> household members 18 and older. For full-time students 18 and over, only \$480 of annual earned income should be included here). However, if the 18+ full time student is the head of the household, spouse, or co-head of the household, then all of the income of the student is counted).	\$
2.	Periodic payments from Social Security, annuities, insurance policies, retirement funds, pensions, disability or death benefits, excluding lump sum payments for the delayed start of a periodic payment.	\$
3.	Payments in lieu of earnings, such as unemployment, disability, worker’s compensation, and severance pay.	\$
4.	PUBLIC ASSISTANCE, including payments made under other programs funded, separately or jointly, by federal, state, or local governments, which are not excluded by Federal Statutes (see Attachment 2 Income Exclusions).	\$
5.	Periodic allowances including alimony and child support payments, and regular contributions or gifts received from organizations or persons not residing in the residence.	\$
6.	Net income from operation of a business or profession. Interest, dividends, and other net income of any kind from real or personal property.	\$
7.	All regular pay, special pay and allowances of a member of the Armed Forces (Except Hostile Fire Pay).	\$
8.	Annual Gross Income* Total of lines 1-7 <b>Note:</b> Annual income must be reassessed at least annually. However, if there is substantial change in the household’s income during the year, an adjustment must be made to the resident rent to reflect the change in income.	\$
9.	Enter the Amount of the HUD low-income limits table, adjusted for family size. If Line 8 is greater than the low-income limit, the client is not eligible for HOPWA assistance. If line 8 is less than the low-income limit, continue to line 10	
10.	<u>Monthly GROSS income</u> (Line 8 divided by 12 months)	\$
11.	<u>10% of MONTHLY GROSS INCOME</u> (Line 10 multiplied by 10%)	\$

Per HUD regulations 24CFR5.611 (a) the annual <u>adjusted</u> income is determined by deducting the following allowances from the annual <u>gross</u> income.			
12.	Enter annual gross income from Line 8.	\$	
13.	<u>\$480.00 FOR EACH DEPENDENT</u> Dependents, including household members under the age of 18, elderly dependents, handicapped, disabled, or full-time students, but not the family head, spouse or foster children	-\$	
14.	<u>\$400 FOR ANY ELDERLY OR DISABLED FAMILY MEMBER.</u> This allowance is provided to any family whose <u>head, spouse, or sole member</u> is at least 62 years of age <b>OR</b> is handicapped/disabled. This deduction <u>always</u> applies to households with persons with HIV or AIDS (ONLY ONE DEDUCTION PER FAMILY/HOUSEHOLD PER YEAR) -	-\$400	
15.	<u>ANY REASONABLE CHILDCARE EXPENSES</u> These are expenses anticipated during the year for children 12 years of age and under that enable a household member to work, seek employment, or to further education. Deductible expenses for childcare to enable a person to work shall not exceed the amount of income received from such work. Childcare <u>cannot</u> be paid to another member of the household. (ONLY EXPENSES NOT REIMBURSED FROM ANY OTHER SOURCES ARE ALLOWED.)	-\$	
16.	i. <u>EXPENSES FOR NON-ELDERLY DISABLED FAMILY MEMBERS.</u> This allowance covers reasonable expenses anticipated during the period for attendant care (provided by a non-household member) and/or auxiliary apparatus for any disabled household member that enables that person or any other household member to work. Deduction may not exceed the amount of income generated by the person enable to work. (ONLY EXPENSES NOT REIMBURSED FROM ANY OTHER SOURCES IN EXCESS OF 3% OF ANNUAL GROSS INCOME ARE ALLOWED).	-\$	
	ii. <u>MEDICAL EXPENSES AND/OR ASSISTANCE FOR ANY ELDERLY OR DISABLED FAMILY MEMBER</u> If deductions are taken on i and ii line for medical expenses, the deduction on line 13 must also be taken. (ONLY EXPENSES NOT REIMBURSED FROM ANY OTHER SOURCES IN EXCESS OF 3% ANNUAL GROSS INCOME ARE ALLOWED)		
	a. <b>ENTER</b> TOTAL non-reimbursed expenses for this category (add amounts listed under heading i and ii).		\$
	b. Multiply Annual Gross Income by 3%		\$
	Subtract <b>b.</b> from <b>a.</b> and enter difference	\$	
17.	<u>EARNED INCOME DISREGARD (EID)/SELF-SUFFICIENCY INCENTIVES FOR PERSONS WITH DISABILITIES.</u> In addition to deductions mandated in <b>24CFR5.611 (a)</b> , HUD requires disregard for income to previously unemployed persons with disabilities who have earned income as described in <b>24CFR5.617 (a) (b) (c) (d)</b> . If applicable, enter amount of Income disregard as calculated on lines 3 or 4 of Form B Earned Income Disregard worksheet, depending on applicable exclusion period.	-\$	
18.	<u>ANNUAL ADJUSTED INCOME.</u> Subtract the sum of lines 13-17 from the Annual Gross Income (line 12)	\$	
19.	<u>MONTHLY ADJUSTED INCOME.</u> (Line 18 divided by 12 months)	\$	
20.	30% of MONTHLY ADJUSTED INCOME (Multiply Line 19 by 30%)	\$	

21.	Enter the higher amount of line 11 or line 20. TBRA clients must pay this portion of rent. If either the 10% gross or 30% adjusted income amount are greater than the Fair Market Rent or the resident's actual rent, the applicant is not eligible for TBRA.	\$
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I verify that the above information is true and accurate and any changes to the above information will be updated within 14 business days of the change.	
Client Name/ID Client Signature	Date
Case Manager Name Case Manager Signature	Date
Supervisor's Signature	Date

### Suggested Forms

#### Income Verification and Documentation of Expenses

Below are listed different ways in which to verify income and document expenses. This can be done by reviewing documentation (bills, statements, receipts etc.), or through oral communication with an appropriate third party (ex. Social Security Office staff, medical providers etc.). If using oral communication as a form of verification, the contact must be documented, signed and dated by Project Sponsor staff.

	A. Types of income and expenses	B. Third party written	C. Third party oral
1.	Wages and salaries including statement indicating base and overtime rates, bonuses contact with employer and incentive payments by phone or in person specifying amount to be earned per pay period.	Pay stubs, earnings statement or W-2 form identifying employee and showing amount earned and period of time covered by employment. Signed and dated form or letter from employer specifying amount to be earned per pay period and length of pay period.	Oral verification from employer specifying amount to be earned per pay period and length of pay period, documented by Project Sponsor staff.
2.	Tips/gratuities and self-employment	Notarized statement from applicant or form 1040/1040A showing amount earned and employment period.	None.
3.	Income maintenance, TANF, Social Security including statement indicating <u>dates and amount</u> received	One copy of check issued by agency. Award letter signed by agency.	Oral verification from the income provider, <u>showing amount and period</u> received and documented by Project Sponsor staff

4.	Unemployment/Worker's Compensation statement.	Same as 3B.	Same as 3C.
5.	Child Support Payments received.	Copy of payment records furnished by court, signed and dated, showing amount received.	Oral verification from paying parent, documented by Project Sponsor staff.
		Copy of divorce decree showing amount of support	
		Copy of uncashed check.	
		Written and signed statement from paying parent.	
6.	Interest/dividends	Passbook showing interest received and period covered.	Oral verification from savings institution, documented by Project Sponsor staff showing amount and period received.
		Income tax return.	
		Dividend statement from bondholder or stock company.	
7.	Income-generating assets such as rental property, etc.	Tax records, rental checks, lease agreement	None.
		Statement signed by applicant specifying assets.	
8.	Child care expenses	Receipts, canceled checks.	Oral verification from childcare provider, documented by Project Sponsor staff.
		Letter from childcare agency, babysitter, or person providing care showing amounts received or expected and period of service.	
		Itemized list signed by applicant.	
9.	Medical expenses	Receipts, canceled checks	Oral verification from hospital or physician payment, documented by Project Sponsor staff.
		Records of insurance	
		Itemized list signed by applicant.	
10.	Rent, mortgage, and utilities	Bills statements, receipts, canceled checks.	Oral verification from landlord, etc. documented by Project Sponsor staff.
		Letter received from landlord showing amount of rent paid.	

Other Information that May Require Verification

	A. Review of documents	B. Third party written	C. Third party oral
1.	Dependent children <ul style="list-style-type: none"> <li>• Age</li> <li>• Relationship</li> </ul>	<ul style="list-style-type: none"> <li>▪ Income tax returns</li> <li>▪ Support payment records</li> <li>▪ Marriage certificates</li> </ul>	None.

		<ul style="list-style-type: none"> <li>▪ Social Security records</li> <li>▪ Birth certificates</li> <li>▪ VA records</li> <li>▪ Divorce records</li> </ul>	
2.	Disability Same as 2B but with telephone or in-person contact.	<p>Doctor's statement furnished by applicant.</p> <p>Social Security Administration records indicating nature of disability.</p>	
3.	Full-time student status Same as 3B but with telephone or in-person contact.	<p>School identification card or school records specifying period of time attended and indicating full-time status.</p> <p>Written statement, dated and signed, from school specifying that applicant is enrolled full-time and the dates attending.</p>	

**Income Exclusions**

(For complete regulations, refer to 24CFR5.609(c))

**Annual Gross Income Does Not Include:**

1. Income from employment of children (including foster children) under the age of 18 years; payments received for the care of foster children or foster adults (usually persons with disabilities, unrelated to the tenant family, who are unable to live alone);
2. Lump-sum additions to family assets, such as inheritances, insurance payments (including payments under health and accident insurance and worker's compensation), capital gains and settlement for personal or property losses;
3. Amounts received by the family that are specifically for, or in reimbursement of, the cost of medical expenses for any family member;
4. Income of a live-in aide;
5. The full amount of student financial assistance paid directly to the student or to the educational institution
6. The special pay to a family member serving in the Armed Forces who is exposed to hostile fire;
7. Amounts received under training programs funded by HUD;
  - a. Amounts received by a person with a disability that are disregarded for a limited time for purposes of Supplemental Security Income (SSI) eligibility and benefits because they are set aside for use under a Plan to Attain Self-Sufficiency (PASS);
  - b. Amounts received by a participant in other publicly assisted programs which are specifically for or in reimbursement of out-of-pocket expenses incurred (special equipment, clothing, transportation, child care, etc.), and which are made solely to allow participation in a specific program;
  - c. Amounts received under a resident service stipend. A resident service stipend is a modest amount (not to exceed \$200 per month) received by a resident for performing a service for the Public Housing Authority (PHA) or owner, on a part-time basis, that enhances the quality of life in the development. Such services may include, but are not limited to, fire patrol, hall monitoring, lawn maintenance, resident initiatives

- coordination, and serving as a member of the PHA's governing board. No resident may receive more than one such stipend during the same period of time;
- d. Incremental earnings and benefits resulting to any family member from participation in qualifying State or local employment training programs (including training programs not affiliated with a local government) and training of a family member as resident management staff. Amounts excluded by this provision must be received under employment-training programs with clearly defined goals and objectives, and are excluded only for the period during which the family member participates in the employment-training program;
  8. Temporary, nonrecurring or sporadic income (including gifts);
  9. Reparation payments paid by a foreign government pursuant to claims filed under the laws of that government by persons who were persecuted during the Nazi era;
  10. Earnings in excess of \$480 for each full-time student 18 years or older (excluding the head of household and spouse);
  11. Adoption assistance payments in excess of \$480 per adopted child;
  12. Deferred periodic amounts from Supplemental Security Income (SSI) and Social Security benefits that are received in a lump sum amount or in prospective monthly amounts;
  13. Amounts received by the family in the form of refunds or rebates under State or local law for property taxes paid on the dwelling unit;
  14. Amounts paid by a State agency to a family with a member who has a developmental disability and is living at home to offset the cost of services and equipment needed to keep the developmentally disabled family member at home; or
  15. Amounts specifically excluded by any other Federal statute from consideration as income for purposes of determining eligibility or benefits under a category of assistance programs that includes assistance under any program to which the exclusions set forth in 24CFR5.609(c) apply. A notice will be published in the Federal Register and distributed to PHAs and housing owners identifying the benefits that qualify for this exclusion. Updates will be published and distributed when necessary. The value of an allotment provided to an eligible household under the Food Stamp Act of 1977 is excluded;

EARNED INCOME DISREGARD/SELF-SUFFICIENCY INCENTIVES FOR PERSONS WITH DISABILITIES. In addition to deductions mandated in 24 CFR 5.611(a), HUD requires disregard for income to previously unemployed persons with disabilities who have earned income as described in 24 CFR 5.617(a) (b) (c) (d).

### Form B

#### Earned Income Disregard (EID) Worksheet

##### STEP 1: Determine Eligibility

- A. A disabled household receiving assistance through one of the following programs:
  - HOPWA (Housing Opportunities for Persons with AIDS) TBRA
  - HOME (Housing Opportunities Made Equal)
  - SHP (Supportive Housing Program)

- Housing Choice Voucher (Section 8)

AND

B. Whose annual income increases as a result of employment of a family member who is a person with disabilities and who was previously unemployed for one or more years prior to employment; **OR**

C. Whose annual income increases as a result of increased earnings by a family member who is a person with disabilities during participation in any economic self-sufficiency or other job training program; **OR**

D. Whose annual income increases, as a result of new employment or increased earnings of a family member who is a person with disabilities, during or within six months after receiving assistance, benefits or services under any state program for temporary assistance for needy families funded under Part A of Title IV of the Social Security Act, as determined by the responsible entity in consultation with the local agencies administering temporary assistance for needy families (TANF) and Welfare-to-Work (WTW) programs. The TANF program is not limited to monthly income maintenance, but also includes such benefits and services as one-time payments, wage subsidies and transportation assistance--provided that the total amount over a six-month period is at least \$500.

- If eligible proceed to Step 2 –

STEP 2: Calculate Amount of Earned Income Disregard

1.	Current annual gross income. Income should be verified and proper documentation maintained in the file.	\$
2.	Pre-employment/previous annual income (if any) If Line #2 is higher than Line #1 the Disregard cannot be applied at this time. Enter "0" in Line 17 on page 3 and continue with income calculations.	\$
3.	<b>100 % Income Disregard:</b> If currently in the first 12-month exclusion period subtract Line #2 from Line #1. Enter this amount on Page 3, Line 17 and continue with remaining income calculations.	\$
4.	<b>50% Income Disregard:</b> If currently in the second 12-month exclusion period divide Line #3 by two. Enter this amount on page 3, Line 17 and continue with remaining income calculations.	\$

Initial and Phase-In Exclusion Periods

Initial 12-Month Exclusion: 100% Exclusion of income over the amount of prior income (if any). This cumulative period begins on the date a member who is a person with disabilities of a qualified family is first employed OR the date the family first experiences an increase in annual income attributable to employment.

Second 12-Month Exclusion/Phase-In: 50% Exclusion of income over the amount of income prior to the beginning of the initial exclusion (if any).

The second 12-month cumulative period after the date a member who is a person with disabilities of a qualified family is first employed OR the date the family first experiences an increase in annual income



attributable to employment. If the period of increased income does not last for 12 consecutive months, the disallowance period may be resumed at any time within the 48-month period, and continued until the disallowance has been applied for a total of 12 months

Maximum 48-Month Disallowance: The 48-month period is *consecutive* and begins at the initial exclusion, either the date that a qualified family member is first employed or the date when the family first experienced an increase in annual income. The exclusion ends when the qualifying family member uses both 12-month exclusions (initial 12-month 100% and second 12-month 50%) or until the 48-month lifetime maximum is reached, whichever comes first.

Form C

Verification of No Income (English)

I, \_\_\_\_\_, have applied for HOPWA assistance through the HUD Housing Opportunities for Persons with AIDS program. The United States Government requires verification of all income.

I have stated during this verification process that I have no income at this time. I have not received income since \_\_\_\_\_. I do not expect to receive any income until \_\_\_\_\_. I applied for \_\_\_\_\_ (other financial assistance) on \_\_\_\_\_.

I understand that it is my responsibility to report any change in income, from any source, within 14 business days after such change. I verify that all statements regarding my income are true.

Client Signature	Date
Case Manager Name	Date
Case Manager Signature	
Case Manager notes:	

Formulario C (Spanish)

Verificación de no Tener Ingresos

Yo, \_\_\_\_\_, he solicitado ayuda de HOPWA mediante el programa de Oportunidades de Vivienda para Personas con SIDA del HUD. El gobierno de los Estados Unidos requiere verificación de todos los ingresos.

He afirmado durante este proceso de verificación no tener ingresos en este momento. No he recibido ingresos desde \_\_\_\_\_. No espero recibir nada de ingresos hasta \_\_\_\_\_. Solicité \_\_\_\_\_ (otra asistencia financiera) en/el \_\_\_\_\_.

Entiendo que es mi responsabilidad informar de cualquier cambio en los ingresos, de cualquier fuente, en los 14 días hábiles siguientes a dicho cambio. Verifico que todas mis declaraciones sobre mis ingresos son verdaderas.

Firma del Cliente	Fecha
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Nombre del Gestor de Caso Firma del Gestor de Caso	Date
Notas del Gestor de Caso:	

**HOPWA Basic Habitability Checklist**

Unit or Facility Address (include street address, city and zip code)

Landlord/ Property-owner Contact Information  
(include name, company name, mailing address and phone number)

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	YES	NO
<u>State and local codes.</u> Unit is compliant with all applicable state and local housing codes, licensing requirements, and any other requirements in the jurisdiction regarding the condition of the structure and the operation of the		
<u>Structure and materials.</u> The unit is structurally sound so as not to pose any threat to the health and safety of the occupants and so as to protect the residents from the elements.		
<u>Access.</u> The unit is accessible and capable of being utilized without unauthorized use of other private properties. The unit has alternate means of egress in case of fire.		
<u>Space and security.</u> Each resident is afforded adequate space and security for themselves and their belongings. Each resident must be provided an acceptable place to sleep.		
<u>Interior air quality.</u> Every room or space has natural or mechanical ventilation. Unit is free of pollutants in the air at levels that threaten the health of residents.		
<u>Water supply.</u> The water supply is free from contamination.		
<u>Sanitary facilities.</u> Residents have access to sufficient sanitary facilities that are in proper operating condition, may be used in privacy, and are adequate for personal cleanliness and the disposal of human waste.		
<u>Thermal environment.</u> The unit has adequate heating and/or cooling facilities in proper operating condition.		
<u>Illumination and electricity.</u> The unit has adequate natural or artificial illumination to permit normal indoor activities and to support the health and safety of residents. There are sufficient electrical sources to permit the use of essential electrical appliances while assuring safety from fire.		
<u>Food preparation and refuse disposal.</u> All food preparation areas contain suitable space and equipment to store, prepare, and serve food in a sanitary manner.		
<u>Sanitary condition.</u> The unit and any equipment are maintained in sanitary condition.		
<u>Fire safety.</u> Each unit includes at least one battery-operated or hard-wired smoke detector, in proper working condition, on each occupied level of the unit. Smoke detectors are located, to the extent practicable, in a hallway adjacent to a bedroom. If the unit is occupied by hearing impaired persons, smoke detectors have an alarm system designed for hearing-impaired persons in each bedroom occupied by a hearing-impaired person.		

<p><b>Fire safety.</b> The public areas of all units must be equipped with a sufficient number, but not less than one for each area, of battery-operated or hard-wired smoke detectors. Public areas include, but are not limited to, laundry rooms, community rooms, day care centers, hallways, stairwells, and other common areas.</p>		
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Agency Name	Agency Staff Name	Date
Signature		
Program Participant Name (If Applicable)		Date
Signature		
Landlord/Property – Owner Name		Date
Signature		

**Lead-Based Paint Visual Assessment**

All units in which ESG program participants reside are subject to Lead-Based Paint requirements (not applicable to emergency shelter programs with stays less than 100 days). This form must be completed and included in each program participant file. Individuals completing this form must complete the online HUD <http://www.hud.gov/offices/lead/training/visualassessment/h00101.htm> training.

Program Participant Name: \_\_\_\_\_

Property Address: \_\_\_\_\_

Property Owner Name: \_\_\_\_\_

Check all that apply:

- Property was built after 1978 Year Property Built \_\_\_\_\_
- No child under 6 lives with program participant
- Property is zero bedrooms, SRO housing, elderly housing
- Property has been tested and determined to not to contain lead-based paint (attach documentation)
- Property has had lead-based paint hazards removed (attach documentation)
- If any items are checked above, no visual assessment is required. Please include appropriate signatures (agency and program participant) and dated.
- No items are checked above (Visual Assessment required)

Interior: Is there any peeling, chipping, chalking, or cracking paint? <input type="checkbox"/> YES <input type="checkbox"/> NO	Interior: Deterioration exceeds the de minimis level? YES <input type="checkbox"/> NO      NA <input type="checkbox"/> <input type="checkbox"/>
Exterior: Is there any peeling, chipping, chalking, or cracking paint? <input type="checkbox"/> YES      NO <input type="checkbox"/>	Exterior: Deterioration exceeds the de minimis level? YES <input type="checkbox"/> NO      NA <input type="checkbox"/> <input type="checkbox"/>
Common Areas: Is there any peeling, chipping, chalking, or cracking paint? <input type="checkbox"/> YES      NO <input type="checkbox"/> NA <input type="checkbox"/>	Common Areas: Deterioration exceeds the de minimis level? <input type="checkbox"/>
Describe Any Action Taken:	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
PROGRAM PARTICIPANT:	
Signature	Date
PROPERTY OWNER NAME:	
Signature	Date
Program Staff Name:	
Signature	Date

**HUD MONITORING FORM (CHECKLIST)**

STATE OF UTAH  
HOMELESSNESS PROGRAMS OFFICE (HPO)  
\_\_\_\_\_

HOUSING AND COMMUNITY DEVELOPMENT DIVISION (HCDD)  
DEPARTMENT OF WORKFORCE SERVICES (DWS)

HOUSING OPPORTUNITIES FOR PERSONS WITH AIDS (HOPWA) PROGRAM  
\_\_\_\_\_

PROGRAM PERFORMANCE SUMMARY AND  
REGULATORY COMPLIANCE CHECKLIST

Sub recipient \_\_\_\_\_  
 Sub recipient Address: \_\_\_\_\_  
 Phone # \_\_\_\_\_ E-mail: \_\_\_\_\_  
 Project Name: \_\_\_\_\_ Project Address: \_\_\_\_\_  
 HOPWA Funding Year: \_\_\_\_\_ Contract Period: \_\_\_\_\_

HOPWA Categories

- |   |  |
|---|--|
| Housing Acquisition                         | Housing Construction   |
| Housing Rehabilitation, Conversion, Repairs | Housing Leasing  |
| Project or tenant-based rental assistance   | Short-term rental, utility, mortgage assistance                |
| Housing Information Services                | Resource Identification  |
| Housing Operations                          | Technical Assistance   |
| Supportive Services                         | Administrative Expenses (cannot exceed 7% of amount requested) |

HOPWA Funding Allocation for this Category: \$ \_\_\_\_\_  
 Responsible Staff: \_\_\_\_\_ Signature: \_\_\_\_\_

PART A  
 PROGRAM PERFORMANCE SUMMARY

The purpose of establishing *Performance Indicators* is to determine that the project has met or is meeting its objectives by evaluating the program activities and summarizing the community/social benefits of the project. To meet standards, HOPWA Sub recipients must contract and expend 100% of award and/or complete the project within 2 years of HUD approval.

PERFORMANCE INDICATORS (24 CFR 574.520, 574.530, 574.540)

Project Award	\$
Project award as a percent of total funds awarded in the fiscal year. (Definition: HOPWA funds awarded the project, divided by total HOPWA funds allocated for the category)	%
The Sub recipient:	
Expended 100% of award and/or completed the project within 2 years of HUD approval of funding	Meets standards
Major project objective (Example: Provide HIV/AIDS clients and their families with short-term rental and utility assistance and provide appropriate supportive services.)	
<b>Proposed number of units/clients and their families to be served.</b> (Definition: units/clients and their families are the performance objectives outlined in the scope of work of the HOPWA contract)	
Total number of units/clients and their families served in the contract year	
<b>Percent of performance objectives achieved.</b> (Definition: Total number of units/clients and their families served divided by the number proposed in the HOPWA contract)	%

<b>Number of “concerns” identified during annual site monitoring visit.</b> (Definition: A matter which, if not properly addressed, can become a finding and result in sanctions)		
<b>Number of “findings” identified during annual site monitoring visit.</b> (Definition: A finding is a violation of law or regulation which can result in sanction)		

**PART B**

**PROJECT FILE RECORDS REVIEW**

In preparation for the monitoring visit, a desk audit of sub recipient material contained in the project file will be conducted prior to visiting the agency/project site. The review will ensure sub recipient activities were eligible, in compliance with HOPWA regulations.

**HOPWA ELIGIBILITY (24 CFR 574.300, 574.310, 574.320, 574.330, 574.340)**

Is there an eligibility determination form on file for the project and is eligibility consistent with contract description of the project?	Yes N/A	No
Are appropriate supportive services provided for any HOPWA assisted housing?	Yes N/A	No
Do the eligible housing activities meet the general standards such as housing quality standards, minimum use period, etc.?	Yes N/A	No
Are the additional standards for rental assistance being met, such as maximum subsidy?	Yes N/A	No
Are the additional standards for short-term supported housing being met such as the 21-week rule?	Yes N/A	No

**SPECIAL RESPONSIBILITIES OF PROJECT SPONSOR (24 CFR 574.410, 574.420, 574.430, 574.440, 574.450)**

Did the project sponsor demonstrate the capacity and capability to effectively administer the activity?	Yes N/A	No
Does the project sponsor cooperate and coordinate in providing assistance with other organizations and government agencies?	Yes N/A	No
Is the project sponsor charging any fees, except for rent, for any activity?	Yes N/A	No
Are the project sponsor’s client files kept in a way that ensures the confidentiality of its clients?	Yes N/A	No
Do client files contain all HUD required information? Are files kept in orderly fashion?	Yes N/A	No

Comments:

**PERFORMANCE AND EXPENDITURES (24 CFR 574.450, 574.605)**

Are performance objectives, performance standards, reporting requirements and timelines clearly established for the project?	Yes N/A	No
Do reports indicate that the agency is meeting contract performance objectives?	Yes N/A	No
Do reports indicate that the clients are low-income (80% of area median income or below)?	Yes N/A	No
Are HOPWA funds being spent at the planned rate?	Yes N/A	No
Are expenditures supported by invoices, purchase orders, etc.?	Yes N/A	No
Are Accounts Payable files properly set up, and is backup information easily accessible?	Yes N/A	No

Comments:

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REPORTING REQUIREMENTS (24 CFR 574.450, 574.650, CFR Part 85; OMB Circular A-110)

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Is the agency submitting required reports on time?	Yes N/A	No
Are program, performance, and demographic reports and invoices usually correct?	Yes N/A	No

Comments:

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INSURANCE (24 CFR Part 85, OMB Circular A-100)

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Has the agency submitted an original Certificate of Insurance showing proper coverage and listing the City as "additional insured"?	Yes N/A	No
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Comments:

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AUDIT (24 CFR 85, OMB Circular A-133, OMB A-128, OMB A-87, OMB A-21)

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Did the agency receive \$50,000 or more from the State the past two consecutive years? If yes, has the agency submitted the required audit to the City?	Yes N/A	No
Did the audit contain recommendations, concerns or findings? If yes, is there evidence on file that the recommendations have been implemented and the concerns and or findings cleared?	Yes N/A	No

Did the Agency qualify for an A-133 due to other Federal Funding received? It does not matter if the funds were for the HOPWA Program or not. (The \$300,000 threshold is aggregate of all funding the agency receives) Per CFR Part 84 Grants and Agreements with Non-Profit Organizations, and OMB A-133, audits are to be conducted for the agency as a whole.	Yes N/A	No
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Comments:

**PART C**

**ON-SITE INTERVIEW AND VERIFICATION WITH AGENCY PERSONNEL**

**MANAGEMENT (24 CFR 574.605, OMB Circular A-110, A-122, A-133)**

Does the agency have a regular means of monitoring project performance and activities?	Yes N/A	No
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Comments:

**BUDGETARY CONTROLS (OMB Circular A-110, A-102, 24 CFR 574.605)**

**FINANCE AND RECORD KEEPING (OMB Circular A-133, A-128 and 24 CFR 574.605)**

Does the agency have a regular means of monitoring program revenue, program income, and expenditures?	Yes N/A	No
Are project funds accounted for separately within the accounting system?	Yes N/A	No
Does the agency keep separate financial and program records for each project?	Yes N/A	No
Does the agency track and report program income?	Yes N/A	No
Does the agency keep records for the time period required (four years from the date of audit, or if findings, four years from the date the findings are resolved)?	Yes N/A	No
Do the project files contain copies of the grant application, a determination of eligibility, contract, and any amendments, reimbursements requests, backup documentation for each invoice, copies of approved invoices, and warrants and correspondence with the City?	Yes N/A	No

Comments:

**INTERNAL CONTROLS (OMB Circular A-87, A-122)**

Are duties and responsibilities separated so that no one employee has sole control over cash receipts, disbursements, reconciliation of bank accounts, receivables, etc.?	Yes N/A	No
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Is the payroll prepared by personnel who are neither responsible for the time-keeping function nor detailed to deliver paychecks or cash to employees?	Yes N/A	No
Are written procedures maintained covering the recording of transactions, an accounting manual, and a chart of accounts?	Yes N/A	No
Does the Sub recipient maintain a policy manual covering:	Yes N/A	No
Approval authority for financial transactions?	Yes N/A	No
Guidelines for controlling expenditures, such as purchasing requirements and travel authorizations?	Yes N/A	No
Procedures governing the maintenance of accounting record?	Yes N/A	No

Comments:

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**INVENTORY CONTROLS (OMB Circular A-110, A-122, A-21, A-133, 24 CFR 574.605)**

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Does the agency have a control system with adequate safeguards to prevent loss, damage or theft of property of non-expendable items with a purchase price of over \$1,000?	Yes N/A	No
Does the agency maintain property records that include: description, serial number, source of property, who holds title, actual cost of the property, and federal share of that cost, location, use and condition of the property?	Yes N/A	No
Has the agency purchased any items over \$1,000 with project funds?	Yes N/A	No
If the agency has purchased equipment with project funds, is the equipment appropriately inventoried and tagged as HOPWA property?	Yes N/A	No

Comments:

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**PERSONNEL (24 CFR 574.605, OMB Circular A-110)**

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Does the agency have written personnel policies governing:	Yes N/A	No
Hiring, promotion, and termination?	Yes N/A	No
Salaries and fringe benefits?	Yes N/A	No
Annual leave, vacation, and holidays?	Yes N/A	No

Performance evaluations?	Yes N/A	No
Do personnel records include a current job description for each project employee?	Yes N/A	No
Is there an organization chart which sets forth actual lines of responsibility?	Yes N/A	No

Comments:

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**GOVERNING BODY (OMB A-87)**

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Is the board currently constituted in accordance with agency bylaws?	Yes N/A	No
Do the board and subcommittees meet in accordance with the agency's bylaws?	Yes N/A	No
Are minutes of board meetings taken and distributed?	Yes N/A	No

Comments:

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**AMERICANS WITH DISABILITIES ACT (24 CFR 8.6; Section 504 Title VIII)**

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Has the agency documented a Section 504 self-evaluation?	Yes N/A	No
If the agency employs 15 persons or more, are the self-evaluation results on file and made available?	Yes N/A	No
If the agency fully in compliance with Section 504 of the Rehabilitation Act and the Americans with Disabilities Act?	Yes N/A	No
If no, does the agency have a Corrective Action Plan indicating steps it will take to make the program and services accessible?	Yes N/A	No

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**SEPARATION OF CHURCH AND STATE (24 CFR 574.300 (c))**

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Are there are religious activities during the time the HOPWA program is operating?	Yes N/A	No
Is there any evidence of staff attempting to proselytize HOPWA clients?	Yes N/A	No

Comments:

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General Comments:

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**State Monitoring Checklist**

HOMELESSNESS PROGRAMS OFFICE (HPO)  
 HOUSING AND COMMUNITY DEVELOPMENT DIVISION (HCDD)  
 DEPARTMENT OF WORKFORCE SERVICES (DWS)

HOUSING OPPORTUNITIES FOR PERSONS WITH AIDS (HOPWA) PROGRAM

Agency: \_\_\_\_\_ HOPWA Contract #: \_\_\_\_\_ Contract  
Period: \_\_\_\_\_  
HOPWA Staff: \_\_\_\_\_  
Conducted on: \_\_\_\_\_

	Comments
<b>A. Program Policy &amp; Procedure (Project Sponsor)</b>	
1. Copy of executed contracts	
2. Does sub-grantee have an Operating Policies and Procedures Manual?	
3. Policy and Procedure Manuals for HOPWA grant	
4. Does the sub-grantee have a clearly defined and understandable Eligibility Policy, including provisions for ineligible clients? Discuss.	
5. Does the sub-grantee have a Termination policy, including due process and an appeals procedure? Describe.	
6. Does the sub-grantee have a Drug Free Workplace Policy? Describe	
7. Are procedures in place to protect client confidentiality? Discuss	
8. Are procedures in place for adequate case management?	
<b>B. Program Financial - Reimbursement</b>	
1. Is the sub-grantee submitting reimbursement requests at least quarterly? Is rate of draw-down consistent with end of contract expenditures?	
2. Resident rent payment calculation	
3. What process is in place to ensure that all funds have been issued directly to a third party and not directly to clients?	
<b>C. Program Eligibility Documentation</b>	
1. Medical documentation on HIV Status	
2. Documentation on the number of household members	
3. Eligibility for uncompensated health care payments	
4. Verification of household income	
5. Is there a system for spot checking to ensure documentation is complete -signature?	
6. Is a separate file maintained for each client served? Discuss	
<b>D. Program Confidentiality Plan</b>	

1. Are client files maintained in locked cabinets or rooms? Who has the keys? Where are keys kept?		
2. Is access to client records restricted only to agency staff directly involved in program operations?		
3. Are fiscal records secured in a limited access area?		
E. Program Internal Control Process		
1. Program time-limit tracking process		
2. Is there a master spreadsheet to maintain cumulative months served per client or other applicable record keeping database?		
3. Are there internal controls in place, such as segregation of duties to effectively reduce the chance to conceal errors or commit fraud?		
4. How often are there staff meetings to discuss client progress?		
5. Is the Supervisor signature on employee time sheets?		
6. Do employee time-sheets indicate actual times, and not percentages? If employee is being paid from more than one source, is this indicated on time- sheet?		
F. Collaboration Process		
1. Does the agency link with other programs in the community?		
2. Does the agency participate in HMIS?		
G. Conflicts of Interest		
1. Is there a process in place that prohibits employees, officers, consultants, or other agents of the sub-grantee from participating in the decision making process related to procurement if that person, or that person's family, partner, or any organizations employing any of the above, has a direct financial interest or benefit from that procurement? Where written? Signature required?		
2. Is there a process in place that prohibits any employee, officer, consultant, or other agent of the sub-grantee from accepting any gift, gratuity, favors, or anything of monetary value from a contractor, consultant or other entity whose services and/or products are procured by the sub-recipient? Where written? Signature required?		
3. Are employees, officers and agents of the sub-grantee required to adhere to Contract Attachment C – Code of Conduct relating to Abuse, Neglect, Maltreatment and Exploitation? Signed form?		
H. Other Federal Requirements		
1. Does the sub-grantee make its facilities and services available to all persons with handicaps, and without regard to race, color, religion, sex, age, familial status or national origin?		

2. Does the sub-grantee discriminate against any employee or applicant for employment, or limit employment or give preference in employment on the basis of religion?		
3. Does the sub-grantee give preference to any person obtaining shelter or other services offered by the sub-recipient on the basis of religion?		
4. Does the sub-grantee require program participants to attend religious services or meetings as a condition of receiving other social services offered by sub-recipient, such as shelter or a meal?		
Client Files Only		
Is there medical documentation in the client file verifying HIV status?		
Please specify the HOPWA Activities: STRMU or PHA and how much money and how many months of financial assistance have been paid out?		
Is this amount easily identifiable in the file?		
Are the Applicant & Contractor Signatures and Dates completed?		
Is there documentation of the number of members in a household?		
If Eligibility is based on Income, did the applicant meet the requirements? (Gross Income)		
If Eligibility is based on Income, is there documentation in the case file, and does it cover the full month prior to application date?		
Is there a new application process if client has returned later for more benefits (there has been a break in service), and does the case note document the compelling need for more service?		
For rental assistance payments, does the client file contain a signed current lease with client's name, Land Lord (LL) name, address? Lease date Address Client signature LL signature		
For rental assistance payments, does the client file contain a notice of lease termination or eviction from the landlord with client name, LL name, address, amount owed, and date?		
For utility assistance payments, does the client file contain a notice of termination of service from the utility provider with client name, address? Does lease indicate termination if utilities not paid?		
Is it verifiable that all funds have been issued directly to a third party and not to client?		
Are expenditures in accordance with the approved HOPWA eligible services as per scope of work?		
CASE NOTES/NARRATION: Do Case Notes document:		

1) Why client was funded? a) One-time crisis? (not on-going situation) b) "Probable sustainability" description 2) How was eligibility determined? a) Categorical b) Income 3) Services provided: Type/Amount/Date(s) 4) Do file notes narrate Exit Information?		
Is there indication that this household was referred to other supportive services?		

Notes:

Corrective Actions Required:

HOPWA Monitoring Conducted by:

Jennifer Domenici (State Program Specialist)

## HOPWA STEERING COMMITTEE

	NAME	AGENCY	EMAIL ADDRESS
1.	Allison Allred	Communicable Disease Prevention	<a href="mailto:aallred@utah.gov">aallred@utah.gov</a>
2.	Brandy Romero	Utah AIDS Foundation	<a href="mailto:brandy.romero@utahaids.org">brandy.romero@utahaids.org</a>
3.	Brianne Glenn	Ryan White HIV Treatment & Care	<a href="mailto:bglenn@utah.gov">bglenn@utah.gov</a>
4.	Dillon Hase	Salt Lake City	<a href="mailto:dillon.hase@slcgov.com">dillon.hase@slcgov.com</a>
5.	Elizabeth Rhone	U OF U - Division of Infectious Disease	<a href="mailto:elizabeth.rhone@hsc.utah.edu">elizabeth.rhone@hsc.utah.edu</a>
6.	Hannah O'Neil	U OF U - Division of Infectious Disease	<a href="mailto:Hannah.ONeil@hsc.utah.edu">Hannah.ONeil@hsc.utah.edu</a>
7.	Jackie Rojas	Housing Authority of Salt Lake City	<a href="mailto:jrojas@haslcutah.org">jrojas@haslcutah.org</a>
8.	Jared Hafen	Utah AIDS Foundation	<a href="mailto:jared.hafen@utahaids.org">jared.hafen@utahaids.org</a>
9.	Jennifer Domenici	DWS, Housing & Community Development	<a href="mailto:jdomenici@utah.gov">jdomenici@utah.gov</a>
10.	Jennifer Schumann	Salt Lake City	<a href="mailto:jennifer.schumann@slcgov.com">jennifer.schumann@slcgov.com</a>
11.	Liz Slusser	Housing Connect	<a href="mailto:lizslusser@housingconnect.org">lizslusser@housingconnect.org</a>
12.	Lucia Chavarria	Utah Community Action	<a href="mailto:lucia.chavarria@utahca.org">lucia.chavarria@utahca.org</a>
13.	Mark Young	U OF U - Division of Infectious Disease	<a href="mailto:mark.young@hsc.utah.edu">mark.young@hsc.utah.edu</a>
14.	Peter Danzig	U OF U - Division of Infectious Disease	<a href="mailto:peter.danzig@hsc.utah.edu">peter.danzig@hsc.utah.edu</a>
15.	Sahil Oberoi	Utah Community Action	<a href="mailto:sahil.oberoi@utahca.org">sahil.oberoi@utahca.org</a>
16.	Travis James	Ogden Housing Authority	<a href="mailto:travisj@xmission.com">travisj@xmission.com</a>