Program Participant File Review	Date:							
Name of Program Officer Completing Review:								
Client ID (from HMIS or Comparable Database):								
Where is the client residing? Indicate Address (if housed) or Emergency Shelter Name (if DV, don't enter Shelter Name)								
# of Household members?								
Date of Entry into ESHAP Program - (Intake/Admission Date):								
Date of Program Exit, if applicable:								
General Client File Information	Yes	No	Finding	Concern		Comments		
Was a VI-SPDAT administered to the client?	100	140	Tilluling	Concern	Score:	Commonto		
Was the VI-SPDAT conducted within 30 days? Record date.					HMIS Date:	File date:		
If the client has been at the shelter >30 days, do they have a regularly updated Housing Stability Plan?								
Was the client refered to an appropriate housing resource based upon their VI-SPDAT score? If no, is there documentation to justify utilized housing resource?								
Do the areas addressed in the Housing Stability Plan match the areas of concern identified in the VI-SPDAT?								
Were referrals made to mainstream resources or other programs in accordance needs identified in the VI-SPDAT?								
Did the client receive any type of "Rent Smart" classes or materials?								
Is the client still enrolled/receiving ESHAP assistance (any services)? If no, record EOP date.								
Are there appropriate releases of information in the client file? (HMIS, general releases)								
Does the file document that the client has been informed of their rights to fair housing?*								
Grievance policy procedures?*								
Appeal of termination policy procedures?*								
If the client is no longer enrolled/receiving assistance did the subrecipient document the date of termination and reason in client file?								
If this client was terminated due to program violations or noncompliance, does the file contain evidence that due process for termination was adequately managed? 576.402								
Written notice to the participant containing a clear statement of the reason for termination;								
 A review of the decision, in which the participant is given the opportunity to present written or oral objections before a person other than the person (or subordinate of the person) who made or approved the termination decisions, AND 								
3. Prompt written notification to the program participant. NOTE: Termination under housing relocation and stabilization and rental assistance does not bar the recipient or sub recipient from providing further assistance at a later date to the same individual or family.								
Are there concerns regarding the content, or lack of content, of client file in regard to intake and assessment, informing clients of their rights and shelter rules & policies, required documentation, eligibility determinations, referrals, follow-up, and client exit?								

Homeless Verification 576.2	Yes	No	Finding	Concern	Comments
Under which category does this person/family meet HUDs definition of homelessness? See below:					(ESHAP does not fund activities for persons who would fit Categories 2 or 3)
Category 1. Literally Homeless: Individual or family who lacks a fixed, regular, and adequate nighttime residence, meaning 1) Has a primary nighttime residence that is a public or private place not meant for human habitation, or 2) is living in a shelter or place designated to provide temporary living arrangements (including congregate shelters, transitional housing, and hotels or motels paid for by charitable organizations or the government)					
Which of the Required Documentation is present: 1) Written observation by the outreach worker or 2) Written referral by another housing or service provider or 3) Certification by the individual or head of household seeking assistance stating that (s)he was living on the streets or in a shelter; 4) For individuals exiting an institution one of the forms of evidence above AND; a. discharge paperwork or written/oral referral or b. written record of intake workers due diligence to obtain evidence AND certification by individual that they exited the institution.					
Category 4: Fleeing/Attempting to Flee DV: Any individual or family who: 1. Is fleeing or attempting to flee domestic violence; 2. Has no other residence; 3. Lacks the resources or support networks to obtain other permanent housing. See below:					
Which of the Required Documentation is present: VSP's: An oral statement by the individual or head of household seeking assistance which states; they are fleeing; they have no subsequent residence; AND they lack resources. Statement must be documented by a self-certification by the intake worker. For non-VSP's- 1) an oral statement by the individual or head of household seeking assistance that they are fleeing. This statement is documented by a self-certification or by the caseworker. Where the safety of the individual or family is not jeopardized the oral statement must be verified; AND certification by the individual or head of household that no subsequent residence has been identified AND self certification or other written documentation that the individual or family lacks the financial support networks to obtain other housing.					
Rapid Re-housing - Housing Relocation and Stabilization 576.104 and 576.105	Yes	No	Finding	Concern	Comments
Has the client received housing relocation and stabilization assistance under the Rapid Re-housing component? (eligible for clients who meet the criteria under paragraph 1 of the homeless definition in 576.2, or who meet the criteria under paragraph 4 of the homeless definition and live in an emergency shelter or other place described in paragraph 1 of the homeless definition.)					
If the client moved into housing with ANY ESG assistance, is there evidence of a habilitability and/or housing quality standards inspection in the client file.					

^{*}If not in file, each document must be posted publicly for anyone to see.