St Clair County Intergovernmental Grants Department
Permanent Supportive Housing (PSH) Policies and Procedures

Table of Contents

IGD Permanent Housing/ Permanent Supportive Housing

Purpose and Scope

This Permanent Supportive Housing (PSH) Policy and Procedure Manual establishes standardized guidance for the administration, implementation, and oversight of PSH programs funded through the St. Clair County Continuum of Care (CoC). As the CoC Lead Agency and Collaborative Applicant, the St. Clair County Intergovernmental Grants Department (IGD) is responsible for ensuring that all PSH programs operated by subrecipient agencies comply with the U.S. Department of Housing and Urban Development (HUD) CoC Program regulations at 24 CFR Part 578, as well as locally adopted St Clair County CoC Program Standards.

Subrecipients

Subrecipient agencies are organizations that operate Permanent Supportive Housing (PSH) projects on behalf of St. Clair County Intergovernmental Grants Department (IGD), the HUD CoC Program grant recipient. These agencies are entrusted with delivering direct housing and supportive services to program participants in accordance with HUD regulations and the policies outlined in this manual. Subrecipients are contractually obligated to comply with 24 CFR Part 578, St. Clair County CoC Program Standards and all other applicable regulations and policies. They are also responsible for maintaining accurate records, submitting timely reports, and cooperating with IGD's monitoring and oversight activities to ensure regulatory compliance, program integrity, and quality service delivery**.**

This manual serves as a reference for subrecipients to ensure consistent program delivery, promote housing stability for individuals and families with disabilities experiencing homelessness, and uphold core principles including Housing First, fair housing, and data-driven performance**.**

Program Overview

Permanent Housing/Permanent supportive housing (PSH) is a critical resource to help individuals and families with disabilities achieve stable housing and, over time, can help some get to the point where they are stable and successful without intensive services. PSH providers can support growth, recovery, independence, and program participant choice by recognizing that some program participants could reach a point where they want to and are able to move on to independent permanent housing (either subsidized or unsubsidized) while others will continue to need the intensive service environment of PSH for the foreseeable future. Providers should offer individualized services throughout a program participant's time in PSH that lead to improved quality of life, mental and physical health, employment, finances, and reduced substance use.

Who is Considered Homeless?

Changes in the HUD Definition of "Homeless" - On January 4, 2012, final regulations went into effect to implement changes to the U.S. Department of Housing and Urban Development's (HUD's) definition of homelessness contained in the Homeless Emergency Assistance and Rapid

Transition to Housing Act (HEARTH). The definition affects who is eligible for various HUD-funded homeless assistance programs.

HUD has four categories defining who is considered homeless. For additional information for all categories please utilize the following link: At a Glance_Criteria and Recordkeeping Requirements for Definition of Homeless. Information regarding categories and acceptance for programs can be located in SCCCOC Program Standards document at St. Clair County Illinois > Departments > Intergovernmental Grants > Community Development (RC Version: 9.13.3.0).

Eligibility Determination Chart: HUD Homeless Definition

Category	Definition	Criteria for Defining Homelessness	Documentation Required
Category 1 - Literally Homeless	Individual or family who lacks a fixed, regular, and adequate nighttime residence.	– Has a primary nighttime residence that is a public or private place not meant for human habitation. – Is living in a publicly or privately operated shelter designated to provide temporary living arrangements (including congregate shelters, transitional housing, and hotels and motels paid for by charitable organizations or by federal, state, and local government programs). - Is exiting an institution where they have resided for 90 days or less and resided in an emergency shelter or place not meant for human habitation immediately before entering that institution.	– Written referral by another housing or service provider. – Written observation by an outreach worker of the conditions where the individual or family was living. – Written certification by the individual or head of household seeking assistance stating that they were living on the streets or in a shelter. - For individuals exiting an institution: one of the forms of evidence above and discharge paperwork or written or oral referral from a social worker, case manager, or other appropriate official of the institution, stating the beginning and end dates of the time residing in the institution, or a written record of the intake worker's due diligence in attempting to obtain the information above and a written certification by the individual seeking assistance that they are exiting (or have just exited) the institution where they resided for 90 days or less.
Category 2 - Imminent Risk of Homelessness	Individual or family who will imminently lose their primary nighttime residence.	– Residence will be lost within 14 days of the date of application for homeless assistance. – No subsequent residence has been identified. – The individual or family lacks the resources or support networks needed to	– Court order resulting from an eviction action notifying the individual or family that they must leave within 14 days of the date of their application for homeless assistance, or the equivalent notice under state law, a Notice to Quit, or a Notice to Terminate issued under state law. – If the primary nighttime residence was a hotel or motel room not paid

Category	Definition	Criteria for Defining Homelessness	Documentation Required
		obtain other permanent housing.	for by federal, state, or local government programs for low-income program participants or by charitable organizations, evidence that the individual or family lacked the resources necessary to reside there for more than 14 days from the date of application for homeless assistance. – Oral statement by the individual or head of household seeking assistance that the owner or renter of the housing in which they currently reside will not allow them to stay for more than 14 days from the date of application for homeless assistance. The statement must be documented by the intake worker. – The oral statement is found credible by one of the following: 1.1. Written certification by the owner or renter of the housing or the intake worker's documentation of the owner or renter's oral statement. 1.2. If the owner or renter of the housing cannot be reached, a written description and certification of the intake worker's due diligence in contacting the owner or renter and a written certification by the head of household seeking the assistance that their statement is true and complete.
Category 4 - Fleeing/Attempting to Flee Domestic Violence	Any individual or family who is fleeing, or is attempting to flee, domestic violence.	– Is fleeing, or is attempting to flee, domestic violence. – Has no other residence. – Lacks the resources or support networks to obtain other permanent housing.	– Program participant's oral statement that the individual or family: 1.1. Was fleeing, or attempting to flee, domestic violence, dating violence, sexual assault, or stalking, or other dangerous or life-threatening conditions that relate to violence. 1.2. Lacked the resources or support networks needed to obtain other permanent housing.

Category	Definition	Criteria for Defining Homelessness	Documentation Required
			1.3. Had no other subsequent residence identified. – The documentation of the program participant's oral statement must include: 1.1. Written certification by the head of household that the statement is true and complete. 1.2. Written observation of the intake worker or a written referral by a housing or service provider, legal assistance provider, social worker, health care provider, law enforcement agency, pastoral counselor, or any other organization from whom the program participant had sought assistance for domestic violence, dating violence, sexual assault, or stalking. (This written referral or observation need only include the minimum amount of information required to document that the individual or family is fleeing domestic violence, dating violence, sexual assault, or stalking and is not required if obtaining or maintaining this information would have jeopardized the program participant's health or safety).

Eligibility for Permanent Supportive Housing (PSH)

To be eligible for PSH, individuals must meet Category 1 of HUD's homeless definition and have a diagnosed disability. For more detailed eligibility and documentation requirements, refer to the St. Clair County CoC Program Standards located at St. Clair County Illinois > Departments > Intergovernmental Grants > Community Development (RC Version: 9.13.3.0).

Additionally, please refer to your specific Notice of Funding Opportunity (NOFO) under which your project is funded, as it may include additional eligibility or prioritization requirements mandated by HUD.

a) ***PSH Eligibility When Fleeing Domestic Violence (DV)***
PSH projects can serve individuals fleeing DV (Category 4 of the homeless definition), but they must be residing in a shelter or transitional housing (TH) immediately prior to entering the PSH program. Direct entry from a housed situation is not permitted.

b) ***Exclusion of Imminent Risk (Category 2)***
PSH projects cannot serve individuals or families who are at imminent risk of losing their housing (Category 2 of the homeless definition).

c) ***Eligibility for Chronically Homeless Individuals***
For projects targeting chronically homeless individuals, eligibility is limited to those who are:

1) Living in a place not meant for human habitation, a safe haven, or an emergency shelter.
2) Have been homeless for at least 12 months or experienced four or more occasions of homelessness in the last 3 years, with each occasion separated by at least 7 days.

For further details, refer to Notice CPD-16-11: Prioritizing Persons Experiencing Chronic Homelessness and Other Vulnerable Homeless Persons in Permanent Supportive Housing - HUD Exchange

Housing First Approach

In accordance with 24 CFR Part 578 and the St. Clair County CoC Written Standards, this program operates under a Housing First model. Housing First is a low-barrier, client-centered approach that prioritizes rapid placement into permanent housing without preconditions such as sobriety, treatment participation, or service compliance.

The program emphasizes voluntary supportive services and individualized housing stability planning to support long-term housing success.

For the full policy and implementation standards, refer to the St. Clair County Illinois Continuum Of Care Program Standards located at St. Clair County Illinois > Departments > Intergovernmental Grants > Community Development (RC Version: 9.13.3.0)

Anti-Discrimination Policy

St. Clair County shall comply with all applicable non-discrimination laws and regulations, including those enforced by the U.S. Department of Housing and Urban Development (HUD) or any other applicable funding source, and shall ensure that no person is excluded from participation in, denied the benefits of, or subjected to discrimination under any program or activity funded in whole or in part by HUD and/or any other applicable funding source.

Client Screening and Intake Procedures

Coordinated Entry Participation

This Permanent Supportive Housing (PSH) program accepts referrals exclusively through the St. Clair County Continuum of Care's Coordinated Entry System (CES) in compliance with 24 CFR 578.7(a)(8). All eligibility assessments and prioritizations are conducted through CES to ensure fair and efficient access to housing resources. All referrals are made based on presumptive eligibility.

Detailed procedures related to CES participation, referral acceptance, and case coordination can be found in the St. Clair County Illinois > Departments > Intergovernmental Grants > Community Development (RC Version: 9.13.3.0)

Homeless Management Information System (HMIS) Participation

This program complies with the HUD requirements for Homeless Management Information System (HMIS) participation per 24 CFR 578.7(b) and 24 CFR 578.57. Staff are trained in data entry, security protocols, and client confidentiality procedures.

All client-level data is entered into HMIS in accordance with the CoC's HMIS Data Quality and Privacy Standards.

For more information, refer to the HMIS Policies and Procedures Manual St. Clair County Illinois > Departments > Intergovernmental Grants > Community Development (RC Version: 9.13.3.0)

Program Flow

Policy

Programs managed by subrecipients must have written policies and procedures in place that outline how required participant records are obtained and information distributed to client. They must also document each program participant's homeless status, including having written policies and procedures that require documentation at intake of homeless status. Lack of third-party documentation must not prevent an individual or family from receiving street outreach services or receiving services provided by a victim service provider.

Client Enrollment & Orientation Responsibilities

Responsible Staff:
Resident Assistant (RSA) /Case Manager (CM) /Counselor (C) Program Manager (PM)/Program Assistant (PA)
(*subrecipient agency to notify IGD title of persons staff that will be responsible).*

A. **Program Orientation and Enrollment**

Responsible Staff: Program Manager/Appropriate assigned agency

1. Program Overview – Topics to Review with Client:
    - Program Information
    - Fees

- Rent & Savings
- Program Rules
- House Rules
- Personal Belongings
- Housekeeping Expectations
- Contraband Items
- Eviction Process
- Program Discharge
- Disciplinary Action
- Grievance and Appeals Procedure/Termination Policy
- Client Bill of Rights
- Lead Based Paint

2. Enrollment Documentation- Must be Completed and Filed

i. Homeless Verification (at least one must be documented):
- HUD Verification of Homelessness w/documentation attached
- Shelter / Social Service Agency Referral Letter
- Consumer Self Certification
- Consumer Eviction Notice from courts, family, friends
- Consumer Motel/Hotel receipts
- Form E Homelessness Self- Declaration
- Form F Certification Based on Intake Conversation

ii. Income Verification-Must be updated annually
- Client Self-Certification of Income
- Third Party Certification of Income

iii. Enrollment Forms and Consent Forms
- Consumer Emergency Contact Form
- Admission Application
- Resident Admission Agreement
- Resident Responsibility Contract
- Rental Agreement
- Addendum for Drug Free Housing
- HIPAA Documentation
- Informed Consent for Services
- Notice of Privacy Practices
- Authorization for Release of Information
- Client's Bill of Rights
- Grievance and Termination Procedure
- Disclosure of Medical / Health Information
- Protect Your Family from Lead in Your Home
- HQS Inspection/Lead Evaluation (HQS inspection must be completed annually)
- VAWA addendum

B. Initial Assessment & Service Planning

Responsible Staff: Program Manager/Appropriate assigned agency staff

3. Scheduling and Intake
    - Schedule initial visit with client
4. Initial Visit – Assessments and Assignment:
    - Complete assessment forms, including:
        - Admission Note (within 24 hours of admission)
        - Integrated Assessment & Treatment Plan (IM+CANS)
        - Health Risk Assessment (HRA) Addendum (updated every 6 months)
        - Patient Health Questionnaire
    - Assign counselor and schedule regular session times.
    - Make referrals to appropriate internal or external programs.
5. Service Matching & Referrals:
    - Conduct "service matching" based on assessment.
    - Make referrals to appropriate internal or external programs.
    - .

C. Data Entry & Housing Transition

Responsible Staff: Program Manager/Appropriate assigned agency staff

6. HMIS Entry
    - Enter client into appropriate HMIS program (if applicable).
7. Permanent Supportive Housing Transition:
    - If client is selected for PSH:
        - Ensure the transitional housing occupancy agreement includes language for a minimum one-year lease.

Client Choice

All housing supported by CoC-funded PSH resources must meet all HUD requirements, including, but not limited to,

- Housing Quality Standards
- Rent Reasonableness Standards
- FMR (as relevant), as well as other requirements including
- Local regulations and community standards regarding occupancy limits based on unit size.

PSH programs will endeavor to offer as much client choice as possible regarding type and location of housing. Program will:

- Provide a safe and accessible living environment
- Offer supportive services that promote maximum independence
- Strive to locate housing in community settings that are:
    - Easily accessible by public transportation
    - Close to shopping and essential community services

D. Service Delivery Policies and Procedures

Responsible Staff: Program Manager/Appropriate assigned agency staff

Ongoing Program Administration – HUD Compliance:

1. Complete all previously mentioned Enrollment and Assessment steps (1-6).
2. Periodic Admission Review:

Conduct regular admission counts to review eligibility for program entry and/or exit.
*if client is accepted into the program, they will move onto step 3

3. Move-in preparedness:
   Confirm and provide move-in date for client
4. Housing Identification:
   Work with client to identify units
5. Occupancy Agreement Execution
   Perform, sign and date occupancy agreement with client on move-in day.
6. HMIS move-in update
   Update the client's record in HMIS with the confirmed move-in date

Service Delivery Policies and Procedures

Lease Term Requirements

All Permanent Supportive Housing (PSH) program participants must have a written lease that complies with HUD requirements under 24 CFR 578.77(a). Leases must be for an initial term of at least one year, unless a shorter term is mutually agreed upon, and must be renewable for terms that are a minimum of one month. The lease must be executed prior to occupancy, provided to the participant, and must not contain prohibited clauses under HUD regulations or local landlord-tenant law.

Occupancy Charge/ Rent Calculation & Rent Reasonableness

Occupancy charges or rent contributions for program participants must be calculated according to 24 CFR 578.77(c). Rent shall not exceed the highest of:

- 30% of the household's adjusted monthly income;
- 10% of the household's gross income; or
- The portion of any public assistance designated for housing.

These charges must be reviewed and recalculated during annual re-certification or when significant changes in income occur. Utility costs paid by the tenant per the lease must be considered using the local Housing Authority's utility allowance schedule.

Rent Reasonableness Requirement

HUD requires that rents paid under the CoC Program be reasonable in comparison to similar, unassisted units in the same market. This applies to all assisted units and structures. Subrecipients must document rent reasonableness before executing a lease.

Determining and Documenting Rent Reasonableness

Subrecipient program managers or appropriately assigned staff must evaluate the gross rent of a unit based on:

- Unit features: location, size, quality, age, type, and included amenities;
- Utilities and maintenance: types of utilities included (gas, electric, water/sewer, trash);
- Comparison to at least three similar unassisted units in the same market.

Documentation must include:

1) Rent and description of the assisted unit;
2) Printouts or listings of at least three comparable units;
3) Evidence that the comparable match in core features (e.g., amenities, utilities, location);
4) Use of the HUD Rent Reasonableness Checklist and Certification Form.

Rent is considered reasonable if it does not exceed $100 above the average rent of the three comparable. Rent must be reevaluated if there are changes to the unit or lease terms affecting the housing cost.

Excluded Costs: Gross rent does not include phone, cable, internet, late fees, or pet fees.

Annual Re-Certification Procedures

All participants must be re-certified at least annually to determine continued eligibility and rent reasonableness. Re-certification includes:

- Updated verification of income and household composition;
- Recalculation of rent contributions;
- Confirmation that the unit remains rent reasonable;
- Execution of revised lease or rental agreement if applicable.

Subrecipients should begin re-certification procedures at least 90 days prior to the anniversary of lease execution to avoid disruption of assistance.

For the full policy and additional guidance, refer to the St. Clair County Illinois Continuum Of Care Program Standards located at St. Clair County Illinois > Departments > Intergovernmental Grants > Community Development (RC Version: 9.13.3.0)

E. Quarterly/Annual Client Assessment Procedures

Policy

Quarterly progress reports of program status will be forwarded to IGD. Recipients and sub recipients shall conduct at a minimum an annual assessment of the service needs of the program participants and should adjust services accordingly. In order to meet this requirement, the Agency will conduct an annual assessment for clients who are in program each year.

Responsible Staff:
Program Assistant (PA)/Program Manager(PM)/ Resident Assistant (RSA)/ Case Manager(CM)/Counselor (C)
(*subrecipient agency to notify IGD title of persons that will be responsible*)

Procedures

1. Schedules An Annual Assessment With Client
   The Program Manager or appropriate assigned agency staff must schedule a reassessment with the client prior to their annual program anniversary date.

2. Complete Required Annual Forms with Client
   Client fills out the following forms (must be included in client file):
   - Updated Consent for Services
   - Updated Authorization(s)
   - Another Copy of Client Rights
   - Income/Rent recertification

Discharge Policy & Procedures

Policy

The termination of assistance policy is a specific component of a Housing First approach, which aims to minimize barriers to maintaining active program participation and housing.

Information regarding voluntary and involuntary discharge is made available to clients during the admission process. Program staff ensures that when service is terminated, either voluntarily or involuntarily, staff will follow an orderly and respectful process.

If an assisted unit is vacated before the end of the lease, the recipient or its subrecipients will pay rental assistance for vacancies for no more than 30 days from the end of the month in which the unit was vacated.

Involuntary termination is the court of last resort. Program staff must make every effort to avoid an involuntary discharge offering participants an opportunity to make the necessary adjustments to their behavior, lack of compliance with the lease or the circumstances prompting termination consideration.

- Clients can sometimes be offered the option of relocation in an effort to change the environment that might be contributing to problematic behavior.
- In cases of disgruntled clients who exhibit psychotic behavior that threatens the safety of themselves and/or others, 911 must be contacted immediately by staff on duty.
- Whenever possible, even under involuntary discharge situations, staff make every effort to ensure clients are accepted into other shelter.

Discharge may occur when clients:

- Achieve their goals and are ready to discontinue services
- No longer want to stay in the program and receive services
- Have needs that exceed the resources and expertise of the agency and opt to work with staff to relocate to a more appropriate environment
- Are non-compliant with occupancy agreement including disruptive/threatening/violent behavior
- Enter a non-payment of rent status
- Cause severe and repeated damage to property
- Possess and/or sell illicit drugs on the premises
- Possess unlawful weapons on the premises
- Are evicted from the unit.

If clients are being referred for discharge based on misconduct, problematic behavior or eviction, the Agency will discuss the client with IGD.
Property damages paid, will not exceed a one-time cost per program participant will not exceed 1month's rent to pay for any damage to housing due to the action of a program participant. [24 CFR 578.51(j) ; 24 CFR 578.103 (a)(17).

NOTE: Brief periods of stays in institutions (not to exceed 90 days) by program participants are not considered "vacant" and the recipient/subrecipient may continue to pay rent on the unit while the program participant is in the institution.

Staff Discharge Responsibilities

Responsible staff:

Program Manager/Appropriate assigned agency staff

1. Conduct Discharge Process using a Discharge Checklist (to be provided to IGD) to ensure an orderly and comprehensive discharge and file closing process.
    - Wrap-up case planning with the client
    - Complete a discharge/aftercare plan with the client
    - Have the client complete a Client Satisfaction Survey prior to leaving
    - Record the reason for discharge
    - Have client complete the discharge exit form
    - Make appropriate referrals where external after care is required
    - Ensure all personal property in the client file is returned to the client

2. File Documentation Promptly
   Discharge paperwork into the client file within one (1) week of client departure.

Participant Discharge Responsibilities

Procedures

Each resident is responsible for each listed responsibility.

1. Advance Notice
   Notify staff (case manager) thirty (30) days before planned departure:
   To render quality services and effectively manage unit/space availability, it is necessary to track overall utilization on an ongoing basis. Staff are responsible for knowing the status and location of each client participating in the program. Without timely notification of client departures, staff will not know if something unfortunate has occurred for which the police should be notified and/or known relatives contacted or if personal belongings should be removed from the unit. It is of the utmost importance that clients permit their case manager an opportunity to participate in the important decision of your housing transition. The benefits include assessment of individual preparedness and a comprehensive relocation plan.
2. Maintain Living Space

Clients should keep units clean and sanitary prior to move-out.

3. Complete exit form

   Client must meet with case manager or a staff person. As a social service program, certain requirements must be fulfilled. Completion of an exit form assists with finalizing follow-up responsibilities. Client input allows for evaluation of services provided and identify areas needing improvement.

Emergency Transfer Plan (DV Survivors)

Policy

In accordance with 24 CFR 5.2005 and the Violence Against Women Act (VAWA) , this program supports the rights of survivors of domestic violence, dating violence, sexual assault, or stalking to request emergency transfers to other available housing.

The program maintains an Emergency Transfer Plan that outlines procedures for making safe and confidential transfers when requested by eligible participants.

For full policy and procedure "IL 508 COC- St. Clair County/Belleville/East St. Louis Emergency Transfer Plan for Victims of Domestic Violence, Dating Violence, Sexual Assault, or Stalking" refer to the St. Clair County Illinois > Departments > Intergovernmental Grants > Community Development (RC Version: 9.13.3.0)

Record Retention

Policy

Per 24 CFR 578.103, all records pertaining to Continuum of Care funds must be retained for the greater of 5 years or the period specified below. Copies made by microfilming, photocopying, or similar methods may be substituted for the original records.

- Documentation of each program participant's qualification as a family or individual at risk of homelessness or as a homeless family or individual and other program participant records must be retained for 5 years after the expenditure of all funds from the grant under which the program participant was served.

Program Manager/Appropriate assigned agency staff will work to ensure that records are retained in according to the above CoC regulations.

Housing Inspections

Policy

All housing units assisted with Continuum of Care (CoC) program funds must meet the property standards outlined in 24 CFR 5.703 , excluding the carbon monoxide requirements. Units must also comply with applicable lead-based paint requirements under 24 CFR Part 35 , with subpart

applicability based on the type of rental assistance (tenant-based, project-based, sponsor-based, or acquisition/operations).

For specifics regarding requirements and suitable dwelling standards, refer to the St Clair County CoC Program Standards located at St. Clair County Illinois > Departments > Intergovernmental Grants > Community Development (RC Version: 9.13.3.0).

Lead-Based Paint Policy and Procedures

Policy

To prevent lead-poisoning in young children, CoC grantees must comply with the Lead-Based Paint Poisoning Prevention Act Of 1973 and its applicable regulations found at 24 CFR Part 35 , Parts A, B, M, and R. Under certain circumstances, a visual assessment of the unit is not required.

Subrecipient agency must provide the lead hazard information pamphlet to any resident who will be residing in a unit built before 1978. The tenant must receive the pamphlet before moving into the unit.

For units older than 1978 which will house one or more children under the age of 6, landlord and tenant must complete a Lead Based Paint Disclosure Form . The form describes any known current or previous lead-based paint hazards, and documents tenant's receipt of records and the lead hazard information pamphlet. Additionally, a visual lead-based paint assessment must be completed by a person trained in this inspection process. The inspection may be completed in conjunction with the habitability inspection if the inspector is qualified. At Intake, it should be noted on the Application Form if there will be any child in the household younger than 6 years. This information should be provided to the habitability inspector prior to their examination of the proposed rental unit.

If a notification is received from a public health department or other medical health care provider that a child of less than 6 years of age living in a unit funded by CoC rental assistance, has an elevated blood lead level, an environmental investigation of the dwelling unit and common lead level, an environmental investigation of the dwelling unit and common areas servicing the dwelling unit in which the child lived, regardless of whether the child is still living in the dwelling. For more information, see 24 CFR 35.730 and 24 CFR 35.1225.

Essential service activities, such as, counseling, case management, street outreach, referrals to employment, etc., are exempt and excluded from the lead-based paint inspection requirements.

The program ensures that applicants are not being denied assistance or services based on familial status or disability and that pre-1978 homes of families with children less than age six are being inspected and treated for lead hazards when triggered by the regulation NOTE: The Fair Housing Act prohibits denial of services based on familial status (presence of children under age 18) or disability 24 CFR 100.50 (b)(2); 24 CFR 35.1215.

Owners of units occupied by one or more children under age six must incorporate ongoing lead-based paint maintenance activities into regular building operations for those units and the common areas servicing those units 24 CFR 35.1220.

Responsible staff:
Program Manager/Appropriate assigned agency staff
Procedures

1. Complete The *Lead Screening Worksheet*
   Intended to guide grantees through the lead-based paint inspection process to ensure compliance with the rule.
   - Assigned staff uses the Lead Screening Worksheet to document:
     - any exemptions that may apply
     - whether any potential hazards have been identified
     - if safe work practices and clearance are required and used
   - The worksheet must be signed and dated during the time of completion
2. File Documentation

   A copy of the completed worksheet along with any additional documentation should be kept in each program file.
3. Request Visual Assessment (if applicable)
   - If a lead-based paint visual assessment is required:
     - Agency inspector will conduct a visual assessment.
     - The Program Manager/Appropriate assigned agency staff will contact their inspector or HRC Coordinator at IGD
4. Re-screen annually

   The *Lead Screening Worksheet* will be completed every annually to ensure compliance with 24 CFR Part 35.

Note: ALL pre-1978 properties are subject to the disclosure requirements outlined in 24 CFR 35, Part A, regardless of whether they are exempt from the visual assessment requirements.

If the leased property was constructed before 1978 and a child under the age of six be living in the unit occupied by the household receiving assistance, then a lead-based paint inspection is required. Per guidance in the *Lead Screening Worksheet,* if the program property is exempt from the visual assessment requirement and no further action is needed at this point. Program Director or appropriately assigned staff will place the screening sheet and supporting documentation for each exemption in the program file.

Procedures For Protect Your Family From Lead Pamphlet

Responsible staff: Program Manager/Appropriate assigned agency staff

1. At intake, the *Protect Your Family from Lead in Your Home* Pamphlet is issued and program participants will sign once they have received the Pamphlet.

2. The signed *Acknowledgement of Receipt of the Protect Your Family from Lead in your Home Packet* document in program participant's file.

Environmental Review Policy & Procedures

Policy

Subrecipient agency shall not rehabilitate, convert, or renovate or allow a landlord/owner to rehabilitate, convert or renovate a unit or prospective unit until an environmental review is performed under 24 CFR Part 50. The Subrecipient Agency shall supply all available, relevant information necessary to perform any environmental review required by 24 CFR Part 50 . The Subrecipient Agency must carry out mitigating measures required by HUD or select alternate eligible property.

Environmental reviews must also be completed for any project-based or leased housing assistance paid with CoC funding, if the project is not covered by the HUD completed Nationwide Programmatic review.

Procedure

1. Pre-Expenditure Requirements:
   Prior to expending of any grant funds, Program Manager of subrecipient agency is responsible for completing the Environmental Review and providing to IGD utilizing the forms provided by HUD.

2. Review and Approval:
   Once the form is completed, it will be sent to the Responsible Entity for review and approval (St. Clair County IGD) for review and approval

3. Submission of Environmental Reviews:
   All environmental forms will be sent to:
   - Brandon Lybarger brandon.lybarger@co.st-clair.il.us
   - Christina Anderson christina.anderson@co.st-clair.il.us

4. Collaboration for Changes:
   Subrecipient Agency will work with the Responsible Entity to make any changes if necessary, to the submitted form.

5. Recordkeeping:
   Once the form is signed off by the Responsible Entity, Program Manager/Appropriate assigned agency staff will place this in program file for recordkeeping purposes.

6. Grant Fund Utilization
   The Agency is now able to utilize grant funds

For more information refer to the St Clair County CoC program Standards located at St. Clair County Illinois > Departments > Intergovernmental Grants > Community Development (RC Version: 9.13.3.0).

Monitoring

Compliance monitoring will be conducted by the Collaborative Applicant and Consultant(s) to evaluate general administration and program operations. This process allows for assessing how projects implement these guidelines and identifying areas that may require additional resources or training to meet regulations, Policies & Procedures, Written Standards, and best practices. The primary goal of monitoring is to ensure compliance, identify and prevent deficiencies, and design corrective actions to improve or strengthen the performance of CoC funded programs. The Collaborative Applicant, Consultant(s), and Rank & Review Committee will regularly share information and discuss program performance to ensure that the monitoring process is comprehensive, transparent, and aligned with the program's goal. Details of compliance monitoring by the Collaborative Applicant are outlined in the Policy and Procedure Manual for Compliance Monitoring, available on St. Clair County Illinois > Departments > Intergovernmental Grants > Community Development (RC Version: 9.13.3.0).

Attachment A

Acknowledgement of Receipt of the Protect Your Family from "Lead in your Home Packet"

I hereby acknowledge receipt of the Protect Your Family from Lead in your Home Packet

_____ _____

Resident Signature Date

_____ _____

Staff Signature Date

Attachment B

Lead Screening Worksheet

About this Tool

The *Lead Screening Worksheet* is intended to guide grantees through the lead-based paint inspection process to ensure compliance with the rule. Program staff can use this worksheet to document any exemptions that may apply, whether any potential hazards have been identified, and if safe work practices and clearance are required and used. A copy of the completed worksheet along with any additional documentation should be kept in each

Instructions

To prevent lead-poisoning in young children, CoC grantees must comply with the Lead-Based Paint Poisoning Prevention Act Of 1973 and its applicable regulations found at 24 CFR Part 35, Parts A, B, M, and R. Under certain circumstances, a visual assessment of the unit is not required. This screening worksheet will help program staff determine whether a unit is subject to a visual assessment, and if so, how to proceed**. A copy of the completed worksheet along with any related documentation should be kept in each program participant's file.**

Note: ALL pre-1978 properties are subject to the disclosure requirements outlined in 24 CFR Part 35 Part A, regardless of whether they are exempt from the visual assessment requirements.

Basic Information

Name of Building:_____

Address _____ Unit Number _____

City _____

State IL Zip _____

Program Staff Signature:_____ Date: _____

Part 1: Determine Whether the Unit is Subject to a Visual Assessment

If the answer to one or both of the following questions is 'no,' a visual assessment is not triggered for this unit and no further action is required at this time. Place this screening worksheet and related documentation in the program participant's file.
If the answer to both of these questions is 'yes,' then a visual assessment is triggered for this unit and program staff should continue to Part 2.

1. Was the leased property constructed before 1978?
   - ☐ Yes
   - ☐ No
2. Will a child under the age of six be living in the unit occupied by the household receiving assistance? (Housing for the elderly, or a residential property designated exclusively for persons with disabilities. No child under the age of six shall be residing in the property.)
   - ☐ Yes
   - ☐ No

Part 2: Document Additional Exemptions (24 CFR 35.115)

If the answer to any of the following questions is 'yes,' the property is exempt from the visual assessment requirement and no further action is needed at this point. Place this screening sheet and supporting documentation for each exemption in the program participant's file.

If the answer to all of these questions is 'no,' then continue to Part 3 to determine whether deteriorated paint is present.

1. Is it a zero-bedroom or SRO-sized unit?
   - ☐ Yes
   - ☐ No
2. Has X-ray or laboratory testing of all painted surfaces by certified personnel been conducted in accordance with HUD regulations and the unit is officially certified to not contain lead-based paint? (Inspections conducted in accordance with 24 CFR 35.1320(a).
   - ☐ Yes
   - ☐ No
3. Has this property had all lead-based paint identified and removed in accordance with HUD regulations?
   - ☐ Yes
   - ☐ No
4. Is the client receiving Federal assistance from another program, where the unit has already undergone (and passed) a visual assessment within the past 12 months (e.g., if the client has a Section 8 voucher and is receiving assistance for a security deposit or arrears)?
   - ☐ Yes (Obtain documentation for the case file.)
   - ☐ No

5. Does the property meet any of the other exemptions described in 24 CFR 35.115(a).

   - ☐ Yes
   - ☐ No

Please describe the exemption and provide appropriate documentation of the exemption.

Part 3: Determine the Presence of Deteriorated Paint

To determine whether there are any identified problems with paint surfaces, program staff should conduct a visual assessment prior to providing financial assistance to the unit as outlined in the following training on HUD's website at: US Department of Housing and Urban Development - HUD - Visual Assessment Training.

If no problems with paint surfaces are identified during the visual assessment, then no further action is required at this time. Place this screening sheet and certification form (Attachment A) in the program participant's file.

If any problems with paint surfaces are identified during the visual assessment, then continue to Part 4 to determine whether safe work practices and clearance are required.

1. Has a visual assessment of the unit been conducted?

   - ☐ Yes
   - ☐ No

2. Were any problems with paint surfaces identified in the unit during the visual assessment?

   - ☐ Yes
   - ☐ No (**Complete Attachment A** – Lead-Based Paint Visual Assessment Certification Form)

Part 4: Document The Level Of Identified Problems

All deteriorated paint identified during the visual assessment must be repaired prior to clearing the unit for assistance. However, if the area of paint to be stabilized exceeds the de minimus levels (defined below), the use of lead safe work practices and clearance is required.

If deteriorating paint exists but the area of paint to be stabilized does not exceed these levels, then the paint must be repaired prior to clearing the unit for assistance, but safe work practices and clearance are not required.

1. Does the area of paint to be stabilized exceed any of the de minimus levels below?
   - 20 square feet on exterior surfaces
     - ☐ Yes

- ☐ No

- 2 square feet in any one interior room or space
  - ☐ Yes
  - ☐ No
- 10 percent of the total surface area on an interior or exterior component with a small surface area, like window sills, baseboards, and trim
  - ☐ Yes
  - ☐ No

If *any* of the above are 'yes,' then safe work practices and clearance are required prior to clearing the unit for assistance.

Part 5: Confirm all identified deteriorated paint has been stabilized

Program staff should work with property owners/managers to ensure that all deteriorated paint identified during the visual assessment has been stabilized. If the area of paint to be stabilized does not exceed the de minimus level, safe work practices and a clearance exam are not required (though safe work practices are always recommended). In these cases, the program staff should confirm that the identified deteriorated paint has been repaired by conducting a follow-up assessment.

If the area of paint to be stabilized exceeds the de minimus level, program staff should ensure that the clearance inspection is conducted by an independent certified lead professional. A certified lead professional may go by various titles, including a certified paint inspector, risk assessor, or sampling/clearance technician. Note, the clearance inspection cannot be conducted by the same firm that is repairing the deteriorated paint.

1. Has a follow-up visual assessment of the unit been conducted?
   - ☐ Yes
   - ☐ No
2. Have all identified problems with the paint surfaces been repaired?
   - ☐ Yes
   - ☐ No
3. Were all identified problems with paint surfaces repaired using safe work practices?
   - ☐ Yes
   - ☐ No
   - ☐ Not Applicable- The area of paint to be stabilized did not exceed the de minimus levels.
4. Was a clearance exam conducted by an independent, certified lead professional?
   - ☐ Yes

- No
- Not Applicable – The area of paint to be stabilized did not exceed the de minimus levels.

5. Did the unit pass the clearance exam?
    - Yes
    - No
    - Not Applicable – The area of paint to be stabilized did not exceed the de minimus levels.

Note: A copy of the clearance report should be placed in the program participant's file.

6. Were all identified problems with paint surfaces repaired using safe work practices?
    - Yes
    - No
    - Not Applicable – The area of paint to be stabilized did not exceed the de minimus levels.

7. Was a clearance exam conducted by an independent, certified lead professional?
    - Yes
    - No
    - Not Applicable – The area of paint to be stabilized did not exceed the de minimus levels.

8. Did the unit pass the clearance exam?
    - Yes
    - No
    - Not Applicable – The area of paint to be stabilized did not exceed the de minimus levels.

Note: A copy of the clearance report should be placed in the program participant's file

Attachment C

Lead-Based Paint Visual Assessment Certification Template

I, _____, CERTIFY THE FOLLOWING:
(Print Name)

- I have completed HUD's online visual assessment training and am a HUD-certified visual assessor.
- I conducted a visual assessment at _____ on_____.
  (Property address and unit #) (Date of assessment)
- No problems with paint surfaces were identified in the unit or in the building's common areas.

_____
(Signature)

_____
(Date)

Client Name: _____

Case Number: _____

Appendix I

Additional Resources

To access the following policies and procedures, along with other helpful information, please visit the Saint Clair County website:

St. Clair County Illinois > Departments > Intergovernmental Grants > Community Development (RC Version: 9.13.3.0)

- St Clair County CoC Program Standards
- East Saint Louis/ Belleville/ Saint Clair County Continuum of Care Il 508 Homeless Management Information Systems (HMIS) Policies and Procedures Manual
- Saint Clair County Continuum of Care Il 508 Coordinated Entry System Policy and Procedures
- St. Clair County Intergovernmental Grants Department/Community Development LEAD POLICIES AND PROCEDURES
- The Policy and Procedure Manual for Compliance Monitoring
- St. Clair County Continuum of Care- HUD Match Requirements

To access additional information and resources, please visit the HUD exchange website:

CoC: Continuum of Care Program - HUD Exchange

Lead-Based Paint - HUD Exchange

Utility Allowance Final CLEARED VERSION

Appendix II

Permanent Supportive Housing Guidance

This document contains information and guidance to help recipients understand the purpose and requirements related **Section 578.37 of the CoC Program Interim Rule** and its components.

If you are new to the CoC Program, please refer to the following resources for an introduction to the program components as outlined in the CoC Program Interim Rule.

- Introductory Guide to the CoC Program - HUD Exchange
- CoC Program Toolkit - HUD Exchange
- Continuum of Care (CoC) Program Eligibility Requirements - HUD Exchange
- CoC Program Components - Permanent Supportive Housing (PSH) - HUD Exchange
- eCFR :: 24 CFR 578.37 -- Program components and uses of assistance.
- CoC and ESG Additional Requirements - PSH Retention - HUD Exchange

Revision History

Revision Date	Description
1/24/2023	Adopted
5/30/2025	Revisions Adopted