SAN DIEGO
**Regional Task Force
on Homelessness**

2022 Agency Evaluation Tool

Introduction

The intent of the Agency Evaluation Tool is for the agency to honestly evaluate the current state of their own organization in several key areas such as participation in coordinated entry, verification of chronic homelessness, utilization of data, and services provided. The information will be used by the agency and RTFH to generate a technical assistance (TA) plan that will be an effective resource for the agency. Possible types of technical assistance that could be included in the plan include referrals to workshop or training opportunities, sample tools or templates, HMIS guidance, and referrals to articles and outside experts.

The estimated time it may take an agency to complete this tool is 30 minutes, although this will likely vary from agency to agency. Agencies that have completed this tool in the past have indicated that the more time they spent completing the tool and reflecting on responses, the more they received from the process in terms of a responsive and helpful technical assistance plan. Due to the range of topics covered in the self-assessment, more than one staff person may need to be involved in its completion so it is recommended to review the list of sections on the next page and plan accordingly.

Each agency that is monitored will complete one survey. Most of the questions relate to agency-level practices, but some are project-specific. For agencies that receive monitoring for multiple projects, the survey is formatted to allow multiple responses to project-specific questions.

Instruction

All monitoring tools are due on Day 1 of your cohorts monitoring start date via Alchemer. The agency will receive a summary report with final results after the on-site visit has been completed.

Sections

The following sections are included in this tool.

- Coordinated entry (9)
- Homeless and chronic homeless definitions and recordkeeping (8)
- Enrollment (4)
- Housing (8)
- Eviction prevention (4)
- Data collection/quality and performance improvement (10)
- Staff development and training (2)
- Policies and procedures (5)
- Service provision (6)
- Grant management (3)
- General summary questions (3)

Contact Information

1.	Your Name:
2.	Your Title:
3.	Your Email:
4.	Your Phone Number:
5.	Agency Name:
6.	List all CoC funded Project Names: _____

Coordinated Entry

1. **The CoC projects utilize the Coordinated Entry System (CES) to fill all unit openings: (select one)**

   [ ] 100% of the time
   [ ] 90% - 99% of the time
   [ ] 80% - 89% of the time
   [ ] Less than 80% of the time

2. **Please explain any barriers that prevent the agency from utilizing the CES for openings 100% of the time.**

3. **Tools this agency uses in the CES matching process include: (select all that apply)**

   [ ] Reaching out to current providers that client is enrolled with
   [ ] Reaching out to the skilled assessor when we can't locate a client
   [ ] Reaching out to client's alternate contact
   [ ] Reaching out to the client via means other than phone and email
   [ ] Reaching out to the outreach team when we can't locate a client
   [ ] Regularly updating a client's need status in HMIS
   [ ] Assisting a client with obtaining documentation to ensure access to housing
   [ ] Uploading client documentation into HMIS
   [ ] Requesting a housing system navigator, when applicable
   [ ] Having a housing locator on staff
   [ ] Having case managers who are able to assist with obtaining documents
   [ ] Having case managers who are able to assist with housing location
   [ ] Other – Write In: _____

4. **What percentage of matches are declined by the participant or rejected by your program? Please explain the most common reasons for match refusals.**

   [ ] 0% of the time
   [ ] 1% - 20% of the time
   [ ] 21% - 40% of the time
   [ ] More than 41% of the time

5. **Who completes the match requests for the agency/program and who completes the referral status updates for the matches? Please reflect on whether the right staff members are handling these tasks.**

6. **Please rate how well the agency adheres to the standard of updating the referral status within 2 days after receiving the initial match.**

    [ ] Very well (i.e., this always occurs)
    [ ] Average (i.e., this occurs regularly but not always)
    [ ] Low (i.e., this doesn't occur frequently)

7. **Please rate how well the agency adheres to the standard of updating the referral status once the referred participant is deemed eligible or ineligible for the program.**

    [ ] Very well (i.e., this always occurs)
    [ ] Average (i.e., this occurs regularly but not always)
    [ ] Low (i.e., this doesn't occur frequently)

8. **Please answer Yes or No to the following questions:**
    - **We are aware of how and when to request a transfer (Yes / No)**

9. **If you would like to make any technical assistance requests related to coordinated entry, please explain.**

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Homeless and Chronic Homeless Definitions and Recordkeeping

10. **Please rate the overall level of staff knowledge on the homeless definition as prescribed on the HEARTH Act.**
    [ ] Very good (i.e., staff understand the definition and rarely need to seek help from others)
    [ ] Average (i.e., staff understand some parts of the definition but often have questions)
    [ ] Low (i.e., staff have a high need for additional training)

11. **Please rate the level of staff knowledge on the protocols for documenting homelessness (for programs that serve participants who are not chronically homeless).**

    [ ] Very good (i.e., staff understand the criteria for acceptable documentation and rarely need to seek help from others)
    [ ] Average (i.e., staff understand some parts of the criteria for acceptable documentation but often have questions)
    [ ] Low (i.e., staff have a high need for additional training)
    [ ] N/A (i.e., staff work in program(s) that only serve participants meeting the chronic homeless definition)

12. **Please rate the overall level of staff knowledge on the definition of chronic homelessness.**

    [ ] Very good (i.e., staff understand the definition and rarely need to seek help from others)
    [ ] Average (i.e., staff sometimes have difficulty applying the definition but often have questions)
    [ ] Low (i.e., staff have a high need for additional training)

13. **Please rate the overall performance of staff on collecting information and answering the chronic homeless determination questions accurately.**

    [ ] Very good (i.e., staff apply the definition accurately a high percentage of the time)
    [ ] Average (i.e., staff sometimes have difficulty applying the definition accurately)
    [ ] Low (i.e., staff have a high need for additional training)

14. **Pleases rate the level of staff knowledge on the protocols for verifying chronic homelessness.** *(PSH projects only)*

    [ ] Very good (i.e., staff understand how to obtain verification, the time frames for verification, and rarely need to seek help from others)
    [ ] Average (i.e., staff understand some parts of the verification process but often have questions)
    [ ] Low (i.e., staff have a high need for additional training)
    [ ] N/A (i.e., staff work in a program that is not required to verify chronic homelessness)

15. **The project ensures all new participations meet the definition of chronic homelessness, if applicable: (select one)** (Project-specific question; can be completed more than once in Alchemer)

    [ ] 100% of the time
    [ ] 90% - 99% of the time
    [ ] 80% - 89% of the time
    [ ] Less than 80% of the time
    [ ] Not Applicable

16. **Tools this agency uses in the process to verify chronic homelessness include: (select all that apply)**

[ ] HUD's Chronic Homelessness Flow Chart
[ ] Trainings on the chronic homeless definition
[ ] Other – Write In: _____
[ ] Not Applicable

17. **If you would like to make any technical assistance requests related to the homeless or chronic homeless definitions or recordkeeping requirements, please explain.**

Enrollment

18. **Does the agency have any questions about who can be served in any of its projects?**

19. **To what extent do you agree or disagree with the following statement: This agency expedites the admission process to the greatest extent possible and makes it person-centered and flexible.**

[ ] Strongly agree
[ ] Agree
[ ] Neutral
[ ] Disagree
[ ] Strongly disagree

20. **In practice, how well do you feel this agency eliminates barriers to entry (i.e., screening in versus screening out)?**

[ ] Very strong
[ ] Strong
[ ] Average
[ ] Weak
[ ] Very weak

21. **If you would like to make any technical assistance requests related to enrollment, please explain.**

Housing

Please rate the agency on the following questions using a scale from 1 to 5, where 1 is the lowest and 5 is the highest.

22. **How would you rate the agency in promoting participant choice in housing?**

23. **How would you rate the agency in providing education to participants about their lease or occupancy agreement terms?**

24. **How would you rate the agency in helping participants build relationships and connections to their community (to help foster housing stability)?**

25. **Please explain any high or low ratings in the previous three questions.**

26. **How does the agency inform participants of the right to request reasonable accommodations related to disabilities?**

27. **What kind of support may participants expect from program staff in their search for housing? Select all that apply.** (Project-specific question; can be completed more than once in Alchemer)

    [ ] Participants do not have a choice of units because the project has established buildings or units
    [ ] Staff locate potential units for participants
    [ ] Participants receive help from dedicated housing department staff
    [ ] Participate locate their own units
    [ ] Participate have access to a computer lab to use to conduct the housing search
    [ ] Staff counsel or train participants on methods to use in the housing search process (such as websites to visit, listings, etc.)
    [ ] Staff prepare or support participants in meeting and interviewing with landlords
    [ ] Other – Write In: _____

28. **If you would like to make any technical assistance request related to housing, please explain.**

Eviction Prevention

29. Tools this agency uses to help participants avoid eviction include: (select all that apply)

[ ] Relocation to another unit
[ ] An in-house Eviction Prevention program
[ ] Regular meetings involving property management and clinical services staff
[ ] Assisting tenants with obtaining a payee
[ ] Offering multiple payment plan options to tenants
[ ] Transfers to another program/agency when necessary to avoid eviction
[ ] Other – Write In: _____

30. How often does a participant at this agency lose their housing due to not making rent payments?

[ ] At least once a month
[ ] At least once every two months
[ ] At least once every three months
[ ] At least once every six months
[ ] At least once a year
[ ] Less than once a year or never

31. In cases where all efforts to avoid eviction are unsuccessful, please share the most common reasons that participants are evicted.

32. If you would like to make any technical assistance requests related to eviction prevention, please explain.

Data Collection/Quality and Performance Improvements

33. **Does your agency have an internal process for onboarding new employees into HMIS (i.e., helping them understand who the ATA is, what project types they need to be trained on, how to sign up for trainings, etc.)?**

   [ ] Yes
   [ ] No

34. **Does your agency have a system for preserving institutional knowledge of your internal HMIS procedures?**

   [ ] Yes
   [ ] No

35. **What personnel primarily enters participant universal data elements in HMIS? (select all that apply)**

   [ ] Agency Technical Administrator (ATA)
   [ ] Program Managers
   [ ] Supervisors
   [ ] Case Managers / Frontline Staff
   [ ] Interns or Temporary Staff
   [ ] Other – Write In: _____

36. **Once a participant is entered into HMIS and the universal data elements are completed, what personnel primarily maintains the record in HMIS (i.e., such as entering client level updates)? (select all that apply)**

   [ ] Agency Technical Administrator (ATA)
   [ ] Program Managers
   [ ] Supervisors
   [ ] Case Managers / Frontline Staff
   [ ] Interns or Temporary Staff
   [ ] Other – Write In: _____

37. **How many databases does this agency input program/service – related participant data into? Does the agency experience any challenges related to data accuracy or timely data input stemming from multiple database usage?**

38. **How often does this agency utilize the HMIS Help Desk: (select one)?**

   [ ] Daily
   [ ] Weekly
   [ ] Monthly
   [ ] Other – Write In: _____

39. **What does the agency most frequently use the HMIS Help Desk for?**

40. **How often does this agency review participant data and evaluate outcomes (select one)?**

   [ ] Monthly
   [ ] Quarterly
   [ ] Bi-annually
   [ ] Annually
   [ ] Other – Write In: _____

41. **Please explain any ways in which this agency utilizes HMIS data in program planning.**

42. **If you would like to make any technical assistance requests related to data collection/quality and performance improvement, please explain:**

Staff Development and Training

43. **In what content area(s) is there the greatest need for staff training or development at this agency?**

44. **If you would like to make any technical assistance request related to staff development and training, please explain.**

Policies and Procedures

45. **Do you provide opportunities for people with lived experience to share their expert advice and opinions on policy, procedures, and service delivery? If so, please provide us with more information as to how people with lived experience collaborate with your agency.**

46. **This agency has Human Resource policies in place regarding the following: (select all that apply)**

[ ] Sexual harassment
[ ] Non-discrimination
[ ] Whistle blower
[ ] Employee code of conduct
[ ] Employee grievance procedures
[ ] Confidentiality
[ ] Conflict of interest
[ ] Explanation of employee benefits
[ ] Employee expectations
[ ] Safety/evacuation procedures

47. **Please explain the methods used by the agency to inform and/or train employees on the policies mentioned in the preceding question.**

48. **Please rate the agency on VAWA implementation.**

[ ] Very good (i.e., agency understands VAWA requirements and has procedures and forms)
[ ] Average (i.e., agency understands VAWA requirements but there is progress to be made)
[ ] Low (i.e., agency has a high need for assistance related to VAWA requirements)
[ ] N/A

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49. If you would like to make any technical assistance requests related to policies and procedures, please explain.

Service Provision

50. Supportive services at our agency: (select all that apply)

[ ] Are voluntary and are not a requirement for tenancy
[ ] Focuses on helping tenants create a plan for obtaining or maintaining housing
[ ] Are developmentally appropriate for youth needs
[ ] Are developmentally appropriate for family needs
[ ] Take safety into account when orienting new tenants
[ ] Incorporate conversations about harm reduction when talking about tenant behavior
[ ] Utilize the goal planning process to review and set short-term goals
[ ] Utilize the goal planning process to review and set long-term goals
[ ] Review and update goal plans annually
[ ] Review and update goal plans every six months
[ ] Review and update goal plans quarterly
[ ] Review and update goal plans monthly

51. How do agency staff engage with SOAR to help connect individuals with cash benefits?

52. How do agency staff connect participants to employment or workforce development opportunities?

53. What is the typical caseload ratio? (Project-specific question; can be completed more than once in Alchemer)

54. What strategies does the agency use to encourage participation in services without making participation a requirement?

55. If you would like to make any technical assistance request related to service provision, please explain.

56. **The agency has a tracking system in place that tracks the following: (select all that apply)**

   [ ] Technical submission
   [ ] Grant agreement
   [ ] Development activities
   [ ] Start of operations
   [ ] End of operations
   [ ] Amendments
   [ ] Renewal
   [ ] APR deadlines
   [ ] Audits / monitoring

57. **What practices does the program utilize to monitor spending and identifying ways to spend funds in order to avoid unnecessary recapture of funds?**

58. **If you would like to make any technical assistance request related to grant management, please explain.**

General Summary Questions

59. **Please identify whether the agency would like to request any additional feedback or technical assistance related to areas that were flagged as "pass with findings" in the Intent to Renew.**

60. **Please identify whether the agency would like to request any technical assistance related to questions in which low scores were received in the Local Evaluation.**

61. **What assistance or guidance would help the agency improve in any of the areas covered in this self-assessment? For areas in which you would like assistance, what is the highest priority for you at this time?**

Thank you for taking our survey.
Your responses are very important to us.

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