

Date: _8/10/2022_____ Department of Homelessness and Supportive Housing

Nonprofit Contract Monitoring Standard Assessment Form			
Nonprofit Agency: Sequoia Living	Program Name: Parkview Terrace		
Site Address: 871 Turk Street			
HSH Program Manager: Rakita O'Neal	Date Site Visit Conducted: 8/10/2022		
HSH staff site participants and titles:	Agency staff site visit participants and titles:		
Rakita O'Neal – Program Manager	Melissa Parker, Director of Social and Supportive Services		
	Kim Wessels, Resident Services Supervisor		
Quantity – Progra	AM UNITS OF SERVICE		
Review	Comments & Recommendations		
Units of service ☐ Has program met, or on target to meet contractual service level			
Quality - Pro	OGRAM SPECIFIC		
Review Comments & Recommendations			
Participant files ■ Does program maintain participant files that include: □ Client intake or program application □ Client appraisal/assessment information □ Client Release of Information □ Proof client received Grievance Policy □ Eligibility documentation (as applicable) □ Current and comprehensive case notes □ Service Plan □ Evidence of supervisor review □ Are case notes securely stored □ Are participant files easily accessible and clearly organized according to a sample file?	File are in order, organized and easy to follow		
Review	Comments & Recommendations		



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Staff Development and Training Activities ☐ Contractor ensures that staff receive varied training opportunities appropriate to job descriptions ☐ Specific examples of trainings offered to/attended by staff in the past year were documented.	
Program Policies and Procedures Written policies/procedures are in place: Eligibility House Rules Reasonable Accommodation Discharge/Denial of Service Grievance/Complaint Policy Coordination between Property Management and Supportive Services Data Security Policy Harm Reduction Policy Outreach and Engagement Quality Assurance Plan Any current MOUs (obtain copy) Emergency Response Plan for Site	
Customer Satisfaction ☐ Does program have method for customers to evaluate services received (e.g. surveys) ☐ At least 30% of clients served completed the survey during the previous program year ☐ Clients understand whom to contact for relevant types of assistance and indicate program is responsive to their needs.	
Programmatic and Physical Accessibility/Cultural Competence ☐ Facility, program and materials are accessible to persons with disabilities. ☐ Notice of Rights for People with Disabilities is publicly displayed. ☐ Forms related to reasonable accommodations are available to clients. ☐ Written materials are translated into applicable languages. ☐ Service delivery and activities offered respect the backgrounds and interests of clients served.	
Outreach Procedure/Materials ☐ Contractor has a written policy regarding how clients will be outreach to for engagement in services. ☐ Contractor provided examples of flyers, newsletters and other examples of outreach materials.	



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Staffing Pattern and Job Descriptions ☐ Staffing levels/types are adequate to deliver contracted services.	
Program Specific Administration ☐ Are monthly reports timely ☐ Are monthly reports accurate ☐ Is contractor responsive to agency requests	
Client Tracking System ☐ Contractor has a system for tracking client data relevant to contract objectives ☐ Group activities are documented with attendance logs ☐ Review of ONE system client data ☐ Contractor is meeting HSH Data Quality Standards for program enrollments and exits	

Notes:



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Program Service and Outcome Objectives				
Service Objectives	Goal	Actual	Achieved (Y/N)	Comments
Grantee shall actively outreach to at least 95 percent of tenants once every 30 days.	95%	100%	У	
2. Grantee shall offer assessment to 100 percent of tenants for primary medical care needs within 90 days of move-in.	100%	100%	у	
3. Grantee shall offer assessment to 100 percent of tenants for benefits within 30 days of move-in.	100%	100%	у	
4.				
Outcome Objectives	Goal	Actual	Achieved (Y/N)	Comments
1. 90% of tenants will maintain their housing for a minimum of 12 months	90%	100%	У	
2. At least 85% of tenant lease violations will be resolved without loss of housing	85%	100%	у	
3. At least 80% of tenants complete an annual tenant satisfaction survey	80%	100%	у	
4.				



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Corrective Actions Taken ☐ Yes ☐ No	
Date of Previous Monitoring Report:/no previous mon	nitoring
The previous monitoring report noted the following needs for corrective a	action (improvement needed or uneatisfactory
rating).	action (improvement needed or unsatisfactory
	Actions Taken
1.	
2.	
3.	
4.	
Follow Up	
Technical assistance needed per department	
Technical assistance requested by contractor	
Timeline for recommended program adjustments Recommended program adjustments completed	
GENERAL COMMENTS, RECOMMENDAT	rions & Follow-up
C. Description Hart Doorment S	Q Computer
CITY DEPARTMENT USE: DOCUMENT S	HARING & SIGNATURE
Shared with Contracts staff? Yes No	
Comments:	
HSH Program Monitor Signature: Rakita O'Neal	Date:
131 Flogialli Mollitoi Sigliature. Nanta O Neai	Date.



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