

Purpose: This document is a guide and does not replace contract language. This guide is meant to summarize and display items to facilitate invoice preparation using automation and reports.

Required Deliverables

Task 1 – Prepare and document all planned goals for activities to be performed for the contract term into the HOPWA Performance Chart (Attachment XXVIII). Submit the completed chart to the Contract Manager within 20 calendar days of contract execution.

Required: HOPWA Performance Chart Attachment XXVIII – [Fillable PDF](#)

➤ Submit: To “Contract Deliverables” folder in ShareFile

Task 2 – Prepare and provide a Disaster Response Plan, which includes Provider’s plans to ensure client safety during a natural disaster and submit it to the Contract Manager within 45 calendar days of contract execution.

Required: Disaster Response Plan

➤ Submit: To “Contract Deliverables” folder in ShareFile

Task 3 – Document all planned non-HOPWA funding sources leveraged amounts for the contract term on the Planned Leveraged Non-HOPWA Funds form (Attachment XXIX). Submit the completed form to the Contract Manager within 20 calendar days of contract execution.

Required: Planned Leveraged Non-HOPWA Funds form (Attachment XXIX) – [Fillable PDF](#)

➤ Submit: To “Contract Deliverables” folder in ShareFile

Task 4 – Designate a representative to participate in the planning process organized by the local homeless coalitions, and provide local homelessness advocates with information about HOPWA. If there is a vacancy, designate a new representative within 20 calendar days of the vacancy. Submit the name of the designated participating representative to the Contract Manager within 20 calendar days of contract execution, and in the event of a vacancy within 20 calendar days of a new designation.

Required: Name of designated HOPWA planning representative

➤ Submit: To the Lead Agency by email.

Task 5 – Maintain HOPWA Housing Case Managers throughout the contract term as needed. Each month create a list of Case Managers and submit the list within 10 calendar days after the end of each month.

Required: FTE Detail Summary

- Submit: To the subfolder folder of the relevant billing month in ShareFile
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Task 6 – Ensure HOPWA Housing Case Managers provide the following services for State HOPWA Program eligible clients throughout the contract term, as applicable. Create a brief summary verifying that all applicable services were provided to each eligible client, and submit the summary to the Contract Manager within 10 calendar days following the end of each month.

- a) STRMU, PHP, TBRA, Transitional Housing (e.g., hotel/motel stays), or supportive services, including paying invoices in accordance with all state and federal regulations on behalf of the client;
- b) State HOPWA Program enrollment, counseling, housing information, and referral services to assist a State HOPWA Program eligible client to locate, acquire, finance, and maintain housing; and
- c) Individual housing assessments and housing plans of care with the goal of promoting long-term housing stability.

Required:

1. **State HOPWA Program Monthly Expenditure and Reimbursement Report**
2. **A service report of eligible clients served from the state CAREWare system**

- Submit: To the subfolder folder of the relevant billing month in ShareFile
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Task 7 – Provide the most up-to-date list of housing assistance resources to all clients each month in a minimum of one of the following methods: pamphlets, posting on a bulletin board in view of clients, posting on Provider’s website, or another method approved in writing, in advance by the Project Sponsor. Submit the current list of housing assistance resources and method used to communicate housing assistance list to clients to the Contract Manager within 10 calendar days following the end of each month.

Required: Current listing of housing assistance resources and method used to communicate housing assistance list to clients

- Submit: To the subfolder folder of the relevant billing month in ShareFile
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Task 8 – Ensure that all prospective new clients are eligible to receive services by completing and entering at a minimum the following information into the HOPWA eligibility module in the CAREWare database within 10 calendar days following the end of each month.

- a) Client’s current NOE;
- b) Client’s total household gross income is less than or equal to 80% of the AMI guidelines as defined by HUD;
- c) Client’s proof of Florida residency; and

- d) Client’s verifiable documentation of need for housing assistance as documented in comprehensive case notes documenting the referral to HOPWA, the reasons for the HOPWA referral, and the delivery of housing services provided.

Required: Ensure that the following information is entered into state CAREWare system

- 1. Notice of Eligibility – Custom Reports**
- 2. Proof of Income – Demographics > Unique IDs > Attachments**
- 3. Proof of Florida Residency – Demographics > Unique IDs > Attachments**
- 4. Case notes documenting housing need**

➤ Due: Within 10 calendar days following the end of each month.

Task 9 – Complete the following required forms (Attachments V through XXVII) and include them in the client’s file for all State HOPWA eligible clients in the CAREWare database. Create a brief summary verifying that all forms were completed and were included in client’s file. Submit the summary to the Contract Manager within 10 calendar days following the end of each month.

HOPWA Client Forms	File Under/CW Label
Consent to Release Information	HOPWA
Memorandum of Understanding for Confidentiality of Client Information	Submit to HFUW
Participation Agreement	HOPWA
Participant Rights and Responsibilities	HOPWA
Income Eligibility Calculation Worksheet	HOPWA
Florida State HOPWA Program Checklist	HOPWA
Application Form for Housing Assistance	HOPWA
Client Needs Assessment for Assistance	HOPWA
Client Budget Worksheet	HOPWA
Housing Plan of Care	HOPWA
Worksheet for Calculating the Maximum Subsidy for Resident Rent/Mortgage Payment	HOPWA
Landlord/Mortgage Holder Agreement, if applicable	ShareFile with PO
Security Deposit Agreement, if applicable (PHP only)	ShareFile with PO
Client Agreement for Return of Security Deposit, if applicable	HOPWA
Client Housing and Support Service Payment Assistance Worksheet	HOPWA
Rent Reasonableness Checklist and Certification, if applicable	HOPWA
Disallowance of Increase in Annual Income (Earned Income Disregard), if applicable	HOPWA
Zero Income Affidavit, if applicable	HOPWA
HOPWA Housing Quality Standards Habitability Standards, if applicable	HOPWA
Termination of Assistance Letter, if applicable	HOPWA
Participant Conference/Termination Checklist, if applicable	HOPWA
Shared Housing Rent Calculation, if applicable	HOPWA
Domestic Partnership Declaration for HOPWA Assistance, if applicable	HOPWA

Required: Data elements must be entered into CAREWare attachments or submitted to the Lead Agency as specified.

➤ Due: Within 10 calendar days following the end of each month.

Task 10 – Ensure that all required elements included in the Case Management File Review Worksheet (Attachment XXXV) are entered in the CAREWare database and complete any applicable corrective action within 30 days following a monthly monitoring conducted by the Contract Manager.

Required: Data elements must be entered into CAREWare as specified.

- Due: Within 10 calendar days following the end of each month.
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Task 11 – Enter the following Expenditure Data into CAREWare, and generate a State HOPWA Program Monthly Expenditure and Reimbursement Report. Submit the report to the Contract Manager within 10 calendar days following the end of each month. Include the following items in the report:

- a) Number of clients served;
- b) Number of Units of Services Provided; and
- c) Monthly spending expenditures by service categories during the month.

Required:

1. **State HOPWA Program Monthly Expenditure and Reimbursement Report**
2. **A service report of eligible clients served from the state CAREWare system**

- Submit: To the subfolder folder of the relevant billing month in ShareFile within 10 calendar days following the end of each month.

See Invoice Requirements (Attachment I: C.3.a-d) of the contract.

Task 12 – Enter the following first time this year (FTTY) data into the CAREWare database for HOPWA client demographics within 10 calendar days following the end of each month. Include the following items in the database:

- a) Unduplicated client count; and
- b) Client's gender, race, ethnicity, and date of birth.

Required: Data elements must be entered into CAREWare as specified.

- Due: Within 10 calendar days following the end of each month.
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Task 13 – Conduct a survey using the HOPWA Client Satisfaction Survey Form (Attachment XXXVI) for a minimum of 5% of State HOPWA Program clients in the Provider's area. Submit responses collected from clients served to the Contract Manager by March 10th of each contract year.

Required: Completed Client Satisfaction Surveys (two formats available)

1. [Electronic Survey](#) (preferred)

- Submit: Clients may directly submit responses to the electronic survey using the link. Housing case managers may submit responses on behalf of clients. Results will be shared with individual providers periodically.

2. [Fillable PDF](#)

- Submit: To the subfolder folder of the relevant billing month in ShareFile within 10 calendar days following the end of each month. Please do not submit paper copies if responses were submitted electronically.
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Task 14 – Document all actual accomplished program goals for activities performed into the HOPWA Performance Chart (Attachment XXXIII) for the contract term. Submit the completed chart to the Contract Manager within 10 calendar days following the end of the contract term.

Required: HOPWA Performance Chart Attachment XXVIII – [Fillable PDF](#)

- Submit: To “Contract Deliverables” folder in ShareFile
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Task 15 – Complete the HOPWA CAPER Excel workbook provided by HUD, and submit it to the Contract Manager within 20 calendar days following the end of the contract term.

Required: HOPWA Consolidated APR/CAPER (Sample only) – [Excel](#)

- Submit: To “Contract Deliverables” folder in ShareFile
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Task 16 – Document all actual non-HOPWA funding sources leveraged amounts on the Planned Leveraged Non-HOPWA Funds form (Attachment XXXIV) for the contract term. Submit the completed form to the Contract Manager within 10 calendar days following the end of the contract term.

Required: Actual Leveraged Non-HOPWA Funds form (Attachment XXIX) – [Fillable PDF](#)

- Submit: To “Contract Deliverables” folder in ShareFile
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Task 17 – Comply with the requirements of the Department’s Data Security and Confidentiality requirements (Attachment VI) throughout the contract term.

Required: Ongoing compliance

Task Checklist

Task	Frequency	Submit
1. HOPWA Performance Chart (Planned Goals)	Annually	ShareFile
2. Disaster Response Plan	Annually	ShareFile
3. Planned Leveraged Non-HOPWA Funds form	Annually	ShareFile
4. Name of HOPWA planning representative	Annually or as changes occur	Email to Lead Agency
5. FTE Detail Summary	Monthly	ShareFile
6. Expenditure and Service Reports	Monthly	ShareFile
7. Housing Assistance Resource List	Monthly	ShareFile
8. Core Eligibility documentation and NOE	Monthly	CAREWare
9. Housing Case Management Client Files	Monthly	CAREWare
10. Case Management Files	Monthly	CAREWare
11. Expenditure Report Packet	Monthly	CAREWare
12. FTTY data entered	Monthly	CAREWare
13. HOPWA Client Satisfaction Surveys	Monthly	ShareFile or Survey Monkey
14. HOPWA Performance Chart (Actual Goals)	Annually	ShareFile
15. HOPWA APR/CAPER report	Annually	ShareFile
16. Actual Leveraged Non-HOPWA Funds form	Annually	ShareFile

Additional Deliverables & Special Provisions

- A. Submit the agency's audited financial statements (single audit) according to Audit Requirements for Awards of State and Federal Financial Assistance (Attachment III)
- B. Submit the Annual Compensation Report and Form 990 to the Contract Manager by January 31 of each contract year.
- C. Submit a budget narrative to the Contract Manager for approval by April 15 of each contract year.
- D. If applicable, complete the [Department's Authorization to Incur Travel Expense Form](#) (Attachment VII) and the [Department's Voucher for Reimbursement of Travel Expenses](#) (Attachment VIII) and submit them with the corresponding monthly invoice. Refer to the [Department of Health Travel Guidelines](#) for allowable costs.
- E. Maintain Level 2 Background and Drug Screening Requirements for staff allocated to the contract as outlined by Standard Contract Section L.1.
- F. Adhere to the most recent version of the [Florida State HOPWA Program Policies and Procedures](#) manual.
- G. Housing Case Managers must complete [Project Sponsor-approved training](#) within 90 calendar days of contract execution and upon hire in the event of a staff vacancy. Submit proof of training completion to the Contract Manager.