

INFORMAL GUIDANCE FROM HUD CHICAGO FIELD OFFICE. FOLLOW LINKS FOR OFFICIAL DOCUMENTS.

Planning To Use HUD-CPD Programs To Address COVID-19? Unofficial Recommendations From Your Rep.

CHECKLIST

Note: This is current as of 3/16/2020

Purpose

As partners come together to try and respond to the needs of the most vulnerable in their communities, here's a tool for CDBG, ESG, and CoC recipients laying out some of the details for adjusting projects. *Please note that these are simply my personal recommendations.*

CDBG Questions to Consider

1. Are you currently coordinating with health and emergency management locally and at the State?
 - a. Are funding resources identified?
 - b. Have you identified vulnerable populations? (i.e. seniors, homeless, at-risk of homelessness, people with disabilities)
 - c. How are the activities you currently fund affected by efforts to combat the virus?
2. What are your immediate needs?
3. What are your long-term needs?

CDBG – Immediate Needs

Yes	No	Question
		<u>Step 1:</u> Have you reviewed guidance regarding eligible expenses and National Objectives in the Quick Guide to CDBG Eligible Activities to Support Infectious Disease Response?
		<u>Step 2:</u> Are your local schools closed? If 'no' skip to Step 5.
		<u>Step 3:</u> Do any of your CDBG funded activities fall under the following categories? If 'no' skip to Step 5.
		a. 05D Youth Services
		b. 05L Child Care Services
		<u>Step 4:</u> If these activities will be affected as a result of the COVID-19 related school closure, you may wish to consider adjusting the subrecipient agreement (scope of work, funding, etc.) for this project. Any change must comply with the requirements at 24 CFR 91.505.
		<u>Step 5:</u> Are any of your CDBG funded activities targeted towards those most impacted by COVID-19 (ie. seniors, homeless, people with disabilities, mental health patients, etc.)? If 'no' skip to Step 7.
		<u>Step 6:</u> Have these activities changed their hours, staffing, or delivery methods? If so, you may wish to consider adjusting the subrecipient agreement (scope of work, funding, etc.) for these projects to ensure the program can maintain operations and meet the needs of the beneficiaries. NOTE: Changes in

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	<p>hours/staffing/delivery methods may result in slower expenditure rates. Communities are encouraged to monitor this closely to ensure they meet the timeliness standards at 24 CFR 570.902. Please contact your CPD Representative if you believe you will have timeliness issues related to your community's COVID-19 response.</p>
	<p>Step 7: Does your Con/AA Plan include language with the necessary cost categories for these activities/costs so that you don't have to make a substantial amendment? If so, you can proceed with the activity, though you may need to make revisions to your subrecipient agreements or contracts, per your internal policies and procedures. <i>If 'no' see Step 1 in the CDBG – Long-term Needs Checklist and contact your CPD Representative.</i></p>

CDBG – Long-term Needs

Yes	No	Question
		<p>Step 1: Does your currently approved Consolidated/Annual Action Plan contain language covering the necessary cost categories that would allow additional activities to be undertaken without triggering my Citizen Participation Plan? (24 CFR 91.505) <i>If 'yes' skip to Step 5.</i></p>
		<p>a. Do you plan to add the Urgent Need national objective to your Con/AA Plan in order to assist an activity that does not meet the criteria for slum and blight or low/moderate income benefit? <i>If 'no' skip to Step 3.</i></p>
		<p>Step 2: Have you documented the following per 24 CFR 570.208(C)? <i>You must answer 'yes' to each of the items below to proceed to Step 3.</i></p>
		<p>a. The condition is of recent origin ("developed or became critical within 18 months").</p>
		<p>b. The activity will, "alleviate existing conditions which pose a serious and immediate threat to the health or welfare of the community."</p>
		<p>c. You are unable to finance the activity on your own.</p>
		<p>d. There are no other sources of funding available for this activity.</p>
		<p>Step 3: Are you required to comply with the 30-day comment period for substantial amendments per 24 CFR 91.105(c)(2) (as of 3/16/20 HUD guidance requires you comply per the <i>Quick Guide to CDBG Eligible Activities to Support Infectious Disease Response</i>)? <i>If 'no' skip to Step 5.</i></p>
		<p>Step 4: Following your local Citizen Participation Plan and the Requirements at 24 CFR 91.105, conduct the consultation process. See Citizen Participation Requirements Checklist for more details. <i>Once the process is complete, continue to Step 5.</i></p>
		<p>Step 5: Submit an amendment to your plan in IDIS and notify your CPD Representative. <i>If the amendment is non-substantial skip to Step 7.</i></p>
		<p>Step 6: Have you received official notification from the local CPD Office that the amendment has been reviewed and approved? <i>You cannot proceed to Step 7 until you can answer 'yes' to this question.</i></p>

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	<p><u>Step 7:</u> Following your local policies and procedures, amend your subrecipient agreements and contracts, as necessary, if you are reallocating funds or changing the scope of work.</p>
<p><u>Step 8:</u> You may begin conducting activities.</p>	

CDBG FAQ

<p><i>If I haven't submitted my Consolidated Plan, can I amend it?</i></p>	<p>You can only amend plans that have been submitted. If you haven't submitted your Con. Plan to HUD, AND you haven't conducted your public consultation, you can make changes to the Con. Plan and then begin the consultation process. However, if you've already conducted your public consultation, any change to the Con. Plan would require you to conduct a new consultation.</p>
<p><i>Can I make a substantial amendment to my Annual Action Plan without making one to my Consolidated Plan?</i></p>	<p>No. Your Annual Action Plan should be derived from the goals and objectives outlined in your Con. Plan. Any change the former requires a change to the latter. However, the public consultation process for the amendments may be conducted concurrently.</p>
<p><i>Is there any guidance from HUD as to changes to public participation/hearing policies? May grantees suspend the onsite public participation hearings for the annual action plan? We have had several grantees contact us who have expressed concern about attending our mandatory public hearing this week, as they work with medically vulnerable populations.</i></p>	<p>If a grantee is concerned about significant public health risks that may result from holding in-person public hearings, the grantee may undertake a virtual public hearing (alone, or in concert with an in-person hearing) if it allows questions in real time, with answers coming directly from the elected representatives to all "attendees".</p> <p>As with an in-person hearing, the grantee must select a virtual hearing method or platform that provides for accessibility for persons with disabilities and LEP to participate. The grantee must document its efforts and the reason for them, and update its citizen participation plan as soon as possible.</p> <p>HUD understands the exigencies of a public health challenge and will not penalize a grantee who does its best to comply with citizen participation requirements and documents its efforts.</p>

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	<p><i>***Aaron’s two cents*** there have been additional questions regarding what is meant by “real-time”. No official guidance has been issued at this time, but I would first point grantees towards video conferencing platforms, followed by teleconferencing, followed by platforms that allow citizens to type-in questions in real-time.</i></p>
<p>How will HUD view a CDBG grantee that becomes untimely because it had to suspend or delay program operations to respond to the effects of the coronavirus (COVID-19)?</p>	<p>If a CDBG grantee does not carry out its activities in a timely manner, HUD consults with the grantee to determine the causes. If the causes are beyond the grantee’s control, as the virus is, HUD does not take corrective action, but works with the grantee to ensure that the grantee is timely at the next annual checkpoint.</p>

CoC & ESG Questions to Consider

1. Are you currently coordinating with state and local health and emergency management agencies?
2. Have you coordinated with your local entitlement jurisdiction?
3. What are your immediate needs?
4. What are your long-term needs?

CoC & ESG Action Steps

Yes	No	Question
		<p><u>Step 1:</u> Are you an ESG recipient? <i>If ‘yes’ refer to the Eligible ESG Program Costs for Infectious Disease Preparedness.</i></p>
		<p><u>Step 2:</u> Does your Con/AA Plan include language with the necessary cost categories for these activities/costs so that you don’t have to make a substantial amendment? If so, you can proceed with the activity, though you may need to make revisions to your subrecipient agreements or contracts, per your internal policies and procedures. <i>If ‘no’ refer to the CDBG Long-term Needs table above.</i></p>
		<p><u>Step 3:</u> For CoC grantees, have you reviewed the Using Continuum of Care Program Funds for Infectious Disease Preparedness and Response guide?</p>
		<p><u>Step 4:</u> Do plan to adjust the budget of your currently approved grant agreement to address COVID-19 related issues? <i>If ‘no’ skip to Step 6.</i></p>
		<p><u>Step 5:</u> Is this a major change (more than 10% between already approved budget line items). <i>If ‘no’ notify your local HUD CPD Representative of the change you plan to make, and you may begin undertaking the activity.</i></p>
		<p><u>Step 6:</u> As of the date of this checklist, you must follow the standard CoC grant amendment process with your local HUD Field Office.</p>

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CoC & ESG FAQ (taken from the [COVID-19 Planning & Response Office Hours on 3/13/20](#))

<i>Are there any recommendations for CoC's trying to find food, cleaning/sanitation supplies, personal protective equipment, etc.?</i>	HUD recommends you reach out to your state emergency management agency to access supply chains.
<i>Should providers consider canceling street outreach or shelter operations?</i>	Shelters should work with local public health departments.
<i>How should shelters isolate beneficiaries who are ill?</i>	The CDC recommends setting aside areas in your shelter to separate these individuals from the other beneficiaries. If you are experiencing space limitations, you may wish to contact your local entitlement community and your CPD Representative.
<i>Can we eliminate case management home visits to protect our staff?</i>	This is allowable so long as you notate the situation in the client file.

HOPWA Questions to Consider

1. Are you currently coordinating with state and local health and emergency management agencies? If you are the local health agency, are you coordinating with other HOPWA grantees in your jurisdiction?
2. Have you coordinated with your local entitlement jurisdiction?
3. What are your immediate needs?
4. What are your long-term needs?

HOPWA Action Steps

Yes	No	Question
		<u>Step 1:</u> Are you a HOPWA-C grantee (competitive)? <i>If 'yes' skip to Step 4.</i>
		<u>Step 2:</u> Does your currently approved Consolidated/Annual Action Plan contain language covering the necessary cost categories that would allow additional activities to be undertaken without triggering my Citizen Participation Plan? (24 CFR 91.505) <i>If 'no' CDBG Long-term Needs table above.</i>
		<u>Step 3:</u> Do you plan to redistribute funding between your activities? <i>If 'yes' refer to your citizen participation plan to determine if the change constitutes a substantial amendment. If it does, please refer to the CDBG Long-term Needs table above.</i>
		<u>Step 4:</u> Have any of your activities changed their hours, staffing, or delivery methods in response to COVID-19? If so, you may wish to consider adjusting project sponsor agreements (if applicable) for these projects to ensure the program can maintain operations and meet the needs of the beneficiaries. NOTE:

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	<p>Changes in hours/staffing/delivery methods may result in slower expenditure rates. Grantees must still comply with the quarterly draw requirements of the Performance Grant Agreement. Please contact your CPD Representative if you believe you will have timeliness issues related to your COVID-19 response.</p>
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HOPWA FAQ

<p><i>Can grantees/project sponsors postpone housing inspections due to COVID-19?</i></p>	<p>Grantees should do their best to keep their staff and clients safe. If they feel it necessary to postpone annual housing inspections, they should document that it is due to the COVID-19 and put a policy in place regarding when and how they will consistently use that judgement and implement that policy. Guidance will come out from HUD addressing regulatory waiver issues at a later date.</p>
<p><i>Can I use STRMU to assist clients who are at-risk of losing their housing due to a reduction in work hours/changes in childcare, etc. related to COVID-19?</i></p>	<p>Yes. The regulations at 24 CFR 574.300(b)(6) state that funds may be used to provide, “<i>Short-term rent, mortgage, and utility payments to prevent the homelessness of the tenant or mortgagor of a dwelling</i> [emphasis added]...” So long as you already have STRMU identified as an activity you’ll be conducting in your Con/Annual Action Plan (formula grantees) or grant agreement (competitive grantees), you may utilize STRMU funds for these purposes. If STRMU is not currently part of your plan/agreement, you will need to execute a substantial amendment. For more details, see the <i>HOPWA Action Steps</i> table above.</p>