



OFFICE OF POLICY, PROCEDURES AND TRAINING

James K. Whelan
Executive Deputy Commissioner

NEW YORK CITY DEPARTMENT OF HOMELESS SERVICES

Procedure Number: DHS-PB-2020-016

<p>SUBJECT:</p> <p>DHS Facility Inspection Policy</p>	<p>APPLICABLE TO:</p> <p>All staff of Facility and Logistics Division, Routine Site Review Inspection (RSRI) Unit, DHS Directly-Operated or Provider Facilities/Programs Serving Homeless Individuals and Families</p>	<p>ISSUED:</p> <p>October 16, 2020</p> <p>(Replaces Shelter Inspection Policy DHS-PB-2018-011)</p>
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<p>ADMINISTERED BY:</p> <p>Facility and Logistics Division, Routine Site Review Inspection (RSRI) Unit</p>	<p>APPROVED BY:</p> <p>Joslyn Carter, Administrator Department of Social Services/ Department of Homeless Services</p>
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■ PURPOSE

The purpose of this procedure is to provide staff instructions for conducting inspections of Department of Homeless Services (DHS) directly-operated and funded facilities.

■ INTRODUCTION

The Routine Site Review Inspection (RSRI) Unit conducts inspections of DHS directly-operated and funded facilities annually. The resulting report is DHS' primary tool to determine whether a facility's physical environment is in compliance with the laws, codes, regulations, and rules governing Temporary Housing Assistance (THA).

■ POLICY

DHS must provide Temporary Housing Assistance (THA) in a setting that is safe, habitable, and in compliance with all governing laws, codes, regulations, and rules. To ensure that clients have safe housing, DHS conducts regular inspections.

■ DEFINITIONS

Corrective Action Plan (CAP): a detailed proposal that lists deadlines for correcting or curing the deficiencies listed in a Routine Site Review Inspection (RSRI) Report. The CAP may include evidence, e.g., photographs, invoices, etc., that demonstrates the correction of conditions listed in the subject RSRI Report.

Enforcement Conference: a conference convened by the Office of Regulatory Compliance and Accountability (ORCA) and issued pursuant to a Notice of Enforcement and the process outlined in the DHS Compliance Procedure, DSS contracts (if applicable), laws, codes, regulations and rules governing the provision of temporary housing assistance including, but not limited to, the Housing Maintenance, Building, and Fire Codes.

F&L: Facilities and Logistics.

Law(s): the New York City Charter (Charter), the New York City Administrative Code (Admin. Code), a local rule of the City of New York, the Constitutions of the United States of America and State of New York, a statute of the United States of America or State of New York and any ordinance, rule or regulation having the force of law and adopted pursuant thereto, as amended, and common law.

Provider: any person, entity, or organization that provides shelter or operates a facility on behalf of the DHS.

Routine Site Review Inspection (RSRI) Report: an examination conducted by DHS pursuant to the process outlined in this Procedure. An RSRI Report constitutes an inspection and an audit pursuant to Article V of the Human Services Standard Contract and Section 5.04 of Appendix A of the Human Services Standard Contract.

Shelter: as defined by 18 NYCRR Part 900.2 (d) and 352.3 (3), any unit, hotel room, apartment, apartment building, hotel, or location (contracted or not) utilized by the Department for the provision of THA.

Temporary Housing (TH): shelters authorized by 18 NYCRR §900 or 352.8 (a) & (b), §352.3 (e) and §491.

Temporary Housing Assistance (THA): A public assistance benefit provided temporarily for an eligible homeless individual or family to meet an immediate need for shelter.

■ BACKGROUND

The RSRI unit conducts one full annual inspection of DHS directly operated and funded facilities, followed by partial inspections within that calendar year. The resulting report is the RSRI Report, DHS's primary tool to determine whether a facility's physical environment is in compliance with the laws, codes, regulations, and rules governing THA.

The RSRI Report is a tool that:

- Identifies problematic building conditions;
- Minimizes the number of offline units;
- Makes Providers aware of outstanding facility violations; and
- Determines whether the facility is in compliance with the laws, codes, regulations, and rules that govern THA.

DHS reserves the right to update the RSRI Report form as it deems appropriate. Providers should contact their Program Administrator for a copy of the most recent version of the RSRI Report.

The RSRI occurs once a calendar year, which is defined as January through December. The RSRI Unit, however, will conduct additional partial inspections outside of the inspection cycle when DHS deems it necessary. These partial inspections do not supersede any annual Full inspection conducted within that calendar year. A partial inspection is to confirm compliance with the RSRI Corrective Action Plan (CAP).

After inspection of a facility, the Provider must submit a Corrective Action Plan (CAP) (**Appendix A**) for all items identified as unsatisfactory.

Conditions identified as severe must be addressed within 5 days.

Addressed requires the provider to demonstrate that the condition has either been fixed or has evidence to show that the item is actively being corrected as defined in Section V.

If the Provider fails to comply with the directives issued, DHS may refer the matter to the Office of Regulatory Compliance and Accountability (ORCA) for an enforcement conference.

■ PROCEDURE

I. Pre-Inspection

Prior to scheduling inspection, Facilities and Logistics (F & L) will review and identify previous violations from Enforcement Agencies. These agencies include:

- Fire Department of New York (FDNY)
- Housing Preservation and Development (HPD)
- Department of Buildings (DOB)
- Department of Health and Mental Hygiene (DOHMH).

The RSRI inspector will contact the Shelter/Program Director prior to conducting the inspection to confirm the appointment.

II. Walk-Through Inspection

On the day of the inspection, the RSRI Inspector brings copies of the previous violations and the RSRI Report, which is used as a checklist during the inspection.

Shelter Repair Squad

In addition to the RSRI and related inspections, DHS coordinates the scheduling of the Shelter Repair Squad (SRS). The SRS conducts inspections by sister city agencies (DOB, FDNY, DOHMH & HPD) twice annually, which are scheduled once during a six-month period (January-June and July-December). In combination, the RSRI and Shelter Repair Squad processes result in multiple inspections of shelters each year.

During the inspection, the RSRI Inspector may be accompanied by any of the following:

- Landlord
- Building Manager
- Director
- Security
- Head of Maintenance
- Owner or representative
- Caseworker
- Other Managerial staff

The Provider must provide access to all parts of the building which includes, but is not limited to, the following locations:

- Hallways
- Walls
- Ceilings
- Stairs
- Kitchens
- Windows
- Plumbing
- Electrical
- Dining Rooms/Cafeteria
- Client Rooms (inspected last)

DHS reserves the right to require the Provider to immediately remediate any condition that the RSRI Inspector deems severe, hazardous, or dangerous. In such cases, the RSRI Inspector immediately notifies the building escort (Provider, Building Manager, etc.) and the RSRI Director of the condition(s) requiring immediate remediation. The Provider must either remediate these conditions within 5 days and submit proof of such remediation or send a remediation plan to DHS within 5 business days.

If the RSRI Inspector finds that a client's room has deficiencies making it uninhabitable, the room may be taken offline in accordance with the below protocol. Taking a unit offline will satisfy the requirement for immediate remediation.

1. When the room is uninhabitable due to severe deficiencies, the RSRI Inspector immediately notifies the Shelter Director of their recommendation to take the unit offline and sends the RSRI Director the recommendation to take the unit offline, along with supporting documents.
2. The RSRI Director then reviews and sends the recommendation to the Assistant Commissioner (AC), Program Administrators and related-facility staff.

The Facilities and Logistics (F&L) Division makes the recommendation to take the unit offline to DHS Senior Management. DHS Senior Management and the Provider operating the facility then make a joint decision to take the room off-line.

At the end of the inspection, the RSRI Inspector conducts an Exit Conference with the Provider. The Exit Conference is a time for the inspector to share the severe deficiencies and violations and provide copies of previous violations from Enforcement Agencies.

III. Scoring Methodology

The RSRI Report contains questions in three main categories:

- **Cleanliness:** inspectors examine the facility to ensure it is free of dirt, debris, marks, and stains. Floors are inspected for cleanliness, wax build-up, and garbage. Walls and ceilings are inspected for graffiti and stains from water, food residue, and foot prints. Windows are inspected for soot and dirt accumulation. Kitchens are inspected for grease build-up.
- **Building Integrity:** inspectors check for broken/worn items throughout the facility. Various items including water faucets, bathroom doors and partitions, window screens, window guards, light switches and fixtures are inspected to ensure they are properly functioning.
- **Management:** inspectors review administrative logs and records of fire drills, facility violations, budgets, headcount, supplies, work order tickets, and the results of inspections by FDNY, DOB, New York State, and other oversight agencies.

The responses to the questions of the RSRI Report are categorized as one of the following categories: Excellent, Very Good, Satisfactory, and Unsatisfactory (**Appendix D**).

- **Excellent:** the building, building component, or individual item works as intended. In the case of cleanliness, no dirt, debris, or graffiti was discovered.
- **Very Good:** the building, building component, or individual item needs minor repair. In the case of cleanliness, minor dirt, debris, or graffiti was discovered.
- **Satisfactory:** the building, building component, or individual item works as intended but needs minor repair to make it 100% operational. In the case of cleanliness, some dirt, debris, or graffiti was discovered in several areas.

- **Unsatisfactory:** The building, building component, or individual item needs major repair for it to work as intended or is non-functional. In the case of cleanliness, dirt, debris, or graffiti is discovered in all parts of the facility.

IV. RSRI REPORT

DHS incorporates all field findings into the RSRI Report. The RSRI Inspector has 14 calendar days from the date of the inspection to compile the list of unsatisfactory items identified during the inspection, classify the deficiencies, and provide timeframes for remediation. The RSRI Report, which includes a list of the unsatisfactory items, is mailed and emailed to the Provider and the Landlord (if involved).

Items identified for remediation in the RSRI Report are categorized as 1, 2, or 3. Each category has different content and time requirements. Once the RSRI reports are issued to the Providers, the Providers must respond according to the deadline. See the below table for a description of the deficiency classifications and their corresponding timeframes.

CATEGORY	DEFICIENCY CLASSIFICATION	Response	DESCRIPTION
1	SEVERE	Remediation or CAP required within 5 days from the date of Issue of RSRI Report	<u>Electrical and plumbing systems</u> failures, extreme flooding, sparking wires, severe structural damage, no heat, radiator issues, lead paint, fire safety, sewer backups, violations, etc.
2	DEFECTIVE	Remediation or CAP within 30 days from the date of Issue if the RSRI Report	Non-functioning light and toilet fixtures, holes in walls, minor leaks, problems with doors and locks, broken and missing tiles, etc.
3	NON-HAZARDOUS	Remediation or CAP within 60 days from the date of Issue of the RSRI Report	Graffiti, broken and missing tiles, etc.

V. Corrective Action Plan

The Provider must send a copy of the RSRI Report to their Executive Director and Chair of the Board when responding to a CAP. Once a CAP is submitted, DHS will review it. DHS reserves the right to reject the CAP, in whole or in part. DHS will work with the Provider to come up with acceptable solutions.

A Corrective Action Plan can either:

- List the deadlines and action plan for correcting deficiencies listed in a RSRI Report; or
- Demonstrate that the deficiencies listed the RSRI have been remediated. This description may include evidence, such as photographs and invoices, that demonstrates the correction of conditions listed in the RSRI Report.

For both instances above, the Corrective Action Plan can include the following approved documents:

- Back up documents
- Photos
- Signed letter from architect or engineer
- Work orders / Work tickets
- Work Permits, including proof of filing
- Accepted Certificates of Correction

DHS reserves the right to conduct a re-inspection to verify the remediation of any condition for which it deems the provider's response does not adequately address the identified deficiencies.

Failure to complete a CAP may impede registration of any contracts and amendments for the site.

i. Responding to a CAP for Category 1 Items:

- The Provider must respond to the CAP and include a plan for remediating each unsatisfactory item within the timeframe(s) described in the RSRI Report and contain the signature of the Executive Director for all items identified within 5 business days of receipt of the RSRI Report.
- If the Provider does not submit a CAP within 5 days, DHS will send a Notice of Non-Compliance (only for severe items) to the Provider.

- If there are severe issues and the Provider fails to respond to the CAP within the required timeframe, DHS sends another Notice of Non-Compliance informing the Provider that the CAP is overdue and must be submitted within 48 hours.
 - If the Provider fails to respond to the Notice of Non-Compliance and has not submitted the CAP, DHS will schedule a Pre-Enforcement conference
 - In accordance with the 5-day timeframe, the Provider can indicate in the CAP whether remediation has been completed for Severe/Category 1 items identified during the inspection.
- ii. Responding to a CAP for Category 2 and 3 Items:
- Provider must respond to the CAP and include a plan for remediating each unsatisfactory item within the timeframe(s) described in the RSRI Report and contain the signature of the Shelter Director for all items identified within 14 business days of receipt of the RSRI Report.
 - If the Provider fails to respond to a CAP within 14 business days, the DHS sends a Notice of Non-Compliance to the Provider, who must respond to the CAP within 3 business days.
 - If the Provider fails to respond to the Notice of Non-Compliance and the CAP, DHS will schedule a Pre-Enforcement Conference.
 - If the Pre-Enforcement Conference is not successful, DHS will send a Non-Compliance Referral to ORCA to initiate an Enforcement Conference.
 - If the Provider fails to submit a CAP within 14 days, the DHS sends a “Notice of Non-Compliance” informing the Provider that the CAP must be submitted within three (3) business days.

VI. Re-inspection

When a Provider has successfully remediated any severe or unsatisfactory conditions, DHS may conduct a re-inspection of the specified areas to confirm compliance when there is no other evidence of the remediation.

The following is the Re-Inspection Process:

1. The DHS Inspector signs in and waits for the building escort.
2. The Inspector then refers to the CAP and proceeds to re-inspect the specified areas.
3. At the end of the inspection, the DHS Inspector conducts an Exit Conference with the escort.
4. The DHS Inspector returns to the DHS Office and updates the CAP with the status on the re-inspection.

When doing partial inspections, DHS will assess progress made in complying with the most recent CAP. Inspectors will track which conditions have been corrected and evaluate movement on those that have a longer correction trajectory. Severe conditions must be addressed by taking one of the following actions; condition corrected, unit(s) taken offline, or condition(s) mitigated with correction underway as defined in Section V of the Policy. Failure to make adequate progress will result in an Enforcement Referral (please see Section VII).

VII. Enforcement Referrals to ORCA

The Enforcement referral to ORCA is initiated when the Provider fails to:

- Submit a CAP after receiving a Severe CAP Letter (**Appendix B**) or Notice of Non- Compliance (**Appendix C**); and
- Fails to demonstrate that the conditions listed in the RSRI have been properly addressed.

Exception: Agreed upon conditions that require capital construction measures that have been identified and addressed in the CAP or other conditions where DHS has approved an extension of time required for repair will not be subject to Enforcement Referrals. These extensions are granted at DHS' discretion. F & L will monitor these matters as part of its project management portfolio.

When DHS makes an Enforcement Referral to ORCA, DHS must include all relevant information regarding a Provider's non-compliance, which includes the following documents:

- A copy of the RSRI inspection report
- The Provider's CAP or responses
- Any relevant communications between F&L and the Provider
- A copy of the Notice of Non-Compliance

VIII. Recoupment and/or Withholding of Funds

DHS reserves the right to chargeback and/or withhold all expenses incurred by the Department in correcting a Deficiency (including, but not limited to, labor and materials) from funds due or scheduled to become due to the Provider under its contract with DHS or other DHS-funding arrangement.

In the event of DHS chargebacks and/or DHS withholds funds, such chargeback and/or withholding will come from funds allocated in the Budget for Administrative Overhead where the deficiency is the Provider's responsibility either under its lease for the facility or due to the Provider's ownership of the facility. Where the deficiency is the responsibility of the landlord under the lease, the chargeback and/or withholding shall come from funds allocated to Administrative Overhead in the budget.

The Provider is prohibited from using funds in the budget designated for a purpose other than Administrative Overhead to pay for or offset any chargeback and/or withholding by DHS.

IX. Withholding of Funds

For deficiencies requiring long-term remediation, DHS expects the Provider to adhere to the timeframes described in the scope of work or CAP. Where DHS determines that the Provider's progress towards completing the remediation of a deficiency is not adhering to the agreed upon timeframes, DHS may withhold any funding in the Provider's budget designated for such work.

Withholding of funds may be surrendered at DHS's discretion or as follows:

- 50% of the withheld amount to be released once the Provider submits a plan that demonstrates it has engaged with its consultants, subcontractors, etc. to resolve the deficiency (submitted supporting documentation, i.e., contracts, letters of intent, etc.).
- The remaining 50% to be released once the deficiency has been properly addressed per the requirements set forth in the DHS Maintenance Policy Manual.

The Provider may request the release of withheld funds in extenuating circumstances or undue hardship.

X. Chargebacks to Contract

DHS reserves its right to correct any deficiency using its contractors, subcontractors, other entities or staff to resolve any outstanding deficiency.

This remedy is in addition to, and not in lieu of, any other remedies the Department may have under its contract with the Provider or law.

Where the Provider fails to correct any deficiency within the designated timeframe(s) as described in the RSRI Report and DHS determines to use its resources to correct the deficiency, F & L will issue a Notice to the Provider no less than 24 hours of the expected date of the Department's work to correct the deficiency. The Notice will inform the Provider of the:

- Deficiency to be corrected;
- Expected scope of work to be undertaken by the Department or its agents; and
- The expected date and time of the work.

The Notice will also serve as the Department's official notice to the Provider of its intent to recoup all expenses incurred by DHS in correcting the deficiency, in accordance with the Procedure and the Department's contract with the Provider, where applicable.

The amount of chargeback will be based on the prevailing wage(s)/labor costs and costs of material(s) that the Department used to correct the deficiency(ies), as determined by the Facilities and Logistics Division. Where DHS has corrected any deficiency using its staff, contractors, subcontractors, other entities or staff, the Facilities and Logistics Division will calculate the amount of the recoupment and submit a detailed written determination to the Department's Office of Legal Affairs ("OLA") and Finance Division ("Finance") for review and approval.

Upon approval of the Facilities and Logistics Division's determination of the amount of the chargeback from funds due or scheduled to become due to the Provider, OLA and Finance will issue a written notification to the Provider describing the basis for such action(s) to be taken.

Effective Immediately

■ **APPENDICES**

Appendix A	Notice of Noncompliance
Appendix B	Severe CAP Letter
Appendix C	Scoring Methodology

■ **ATTACHMENTS**

DHS-68 (E)	Sample Routine Site Review Inspection Corrective Action Plan
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Appendix A



Facilities and Logistics

Steven Banks
Commissioner

Joslyn Carter
DHS Administrator

James Russo
Chief Operating Officer

Isaac Selolwane
Deputy Commissioner

iselolwane@dhs.nyc.gov

33 Beaver Street
New York, NY 10004

xxx-xxx-xxxx tel
xxx-xxx-xxxx fax

August 22, 2019

Chris
17 Murray Street
New York, NY 10001

Re: Notice of Non-Compliance – Routine Site Review Inspection (RSRI)
Marie's House (17 Murray Street)

Dear Chris:

On 08/02/2019, you were sent a copy of the latest RSRI result for an inspection that was conducted on July 10, 2019. As previously mentioned, items rated less than satisfactory require a written Corrective Action Plan. This response should have been completed within 14 business days from receipt of the RSRI results and forwarded to my office. Our records indicate that you have not submitted a Corrective Action Plan. For your information, there were 22 unsatisfactory scores that required a response. Please forward this response as soon as possible so we can update our records.

If you wish to request another copy of your facility's results, please contact my Administrative Assistant, Nicole at (555) 555-1234. If you have any questions, please feel free to contact me directly at (555) 555-1235.

Sincerely,

Isaac Selolwane
Deputy Commissioner

cc:

- | | |
|---------------------------------|--|
| <input type="checkbox"/> Adults | <input checked="" type="checkbox"/> Families |
| Deputy Commissioner | Deputy Commissioner |
| Associate Commissioner | Associate Commissioner |
| Assistant Commissioner | Assistant Commissioner |
| Program Administrator | Program Administrator |

Appendix B



Facilities and Logistics

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Deputy Commissioner

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33 Beaver Street
New York, NY 10004

xxx-xxx-xxxx tel
xxx-xxx-xxxx fax

August 12, 2019

Jane Doe
17 Murray Street
New York, NY 10001

Re: Severe CAP Letter – Notice of Non-Compliance
Marie's House

Dear Jane:

On 08/02/2019, you were sent a copy of the latest RSRI result for an inspection that was conducted on July 10, 2019. In the report, you were notified that there are/is **11** severe condition(s) that required response(s) within **5 Days**. Our records indicate that you did not respond to the severe condition(s). Please forward this response by August 15, 2019 so we can update our records.

If you wish to request another copy of your facility's results, please contact my Administrative Assistant, Nicole at (555)555-1234. If you have any questions, please feel free to contact me directly at (555) 555-1235.

Sincerely,

Isaac Selolwane
Deputy Commissioner

cc:

- | | |
|--|---|
| <p><input type="checkbox"/> Adults
Deputy Commissioner
Associate Commissioner
Assistant Commissioner
Program Administrator</p> | <p><input checked="" type="checkbox"/> Families
Deputy Commissioner
Associate Commissioner
Assistant Commissioner
Program Administrator</p> |
|--|---|

Appendix C

SCORING METHODOLOGY (page 1 of 2)

The following chart outlines the scoring methodology applied to all RSRI Report questions:

SCORING GUIDELINE	CATEGORY BREAKDOWN
<p>1- Excellent: Condition where a building, building component, or individual item <u>performs as designed</u>. In the case of cleanliness, no dirt, debris, or graffiti is discovered during the inspection for the item being scored.</p> <p>2- Very Good: Condition where a building, building component, or individual item <u>needs minor repair</u>. In the case of cleanliness, minor dirt, debris or graffiti is discovered in parts of the facility during the inspection for the item being scored.</p> <p>3- Satisfactory: Condition where a building, building component, or individual item performs as it is designed, but <u>needs minor repair to make it 100%</u> operational. In the case of cleanliness, some dirt, debris, or graffiti is discovered in several areas during the inspection for the item being scored.</p> <p>4- Unsatisfactory: Condition where a building, building component, or individual item <u>needs major repair to function</u> or is <u>non-functional</u>. In the case of cleanliness, dirt, debris, or graffiti is discovered in all parts the facility during the inspection for the item being scored.</p>	<p>1- Cleanliness: Inspectors examine the facility to see if the facility is free of dirt, debris, marks, and stains. Floors are inspected for dirt, wax build-up, and garbage. Inspection of walls and ceilings include graffiti and stains from a variety of encounters; including water, food residue, and foot prints. Windows are checked for soot and general household dirt accumulations. In addition, kitchens are inspected for grease build-up.</p> <p>2- Structural Integrity: Inspectors identify broken or worn items throughout the facility. Various items are inspected to determine if they are operational and/or missing. Some examples include water faucets, bathroom doors and partitions, door closures, window screens and guards, light switches and fixtures, and similar items.</p> <p>3- Management: Inspectors review administrative logs and records that include: Fire drills, facility violations, budgets, headcount, recordkeeping related to inventory supplies and work order tickets, and various facility inspections required by the FDNY, DOB, New York State, and other oversight agencies.</p>

SCORING METHODOLOGY (page 2 of 2)

Each RSRI Report question has a point structure. Questions are scored between 0 (Unsatisfactory) and 100 (Excellent).

The RSRI Report generates two scores:

- a. The **Shelter** score, which accounts for all items in the RSRI Report.
 - b. The **Provider** score.
- If DHS and the Provider provide a mutual, written agreement, designated questions may be eliminated from scoring due to items that are not classified as maintenance and repair items but deemed capital projects. While these items are not scored for RSRI Report purposes, they are included as capital projects on the RSRI Report and the Provider shall deliver a capital plan to F&L.
 - Both the operator and the facility score are weighted as follows:
 - 60% for cleanliness
 - 30% for integrity
 - 10% for management
 - Questions that are marked as “not applicable” are eliminated from the scoring system.
 - **PERFORMANCE EVALUATION RATING:** To convert the weighted score (numerical) to the equivalent Performance Evaluation Rating, the following chart demonstrates the related values.
 - Approximately 13% of the overall Performance Evaluation Rating is directly related to the *RSRI Report* average score for each building.

Numeric Score	Performance Evaluation Rating
> 90	Excellent
81 - 90	Very Good
76 - 80	Satisfactory
<76	Unsatisfactory

ROUTINE SITE REVIEW INSPECTION CORRECTIVE ACTION PLAN

Shelter Director (print name) _____

RSRI Inspection Date _____

Shelter Director Signature _____

Date _____

Defect	Deficiency Type	Comments	Start Date	End Date	Remarks	Tracking No. W/O Number
		SAMPLE			<input type="checkbox"/> Completed _____ <input type="checkbox"/> To be completed by _____	
					<input type="checkbox"/> Completed _____ <input type="checkbox"/> To be completed by _____	
					<input type="checkbox"/> Completed _____ <input type="checkbox"/> To be completed by _____	
					<input type="checkbox"/> Completed _____ <input type="checkbox"/> To be completed by _____	
					<input type="checkbox"/> Completed _____ <input type="checkbox"/> To be completed by _____	

Please contact Marie Murray if there are any questions

Lorna Galsgow (718) 688-8514 or LGLASGO@dhs.nyc.gov

Please remember to include a START and END date for each deficiency

Report generated on _____

Time Printed _____