



Issue Date	October 28, 2009
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Audit Report Number	2010-CH-1001
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TO: Thomas S. Marshall, Director of Public Housing Hub, 5DPH

FROM: 
Heath Wolfe, Regional Inspector General for Audit, 5AGA

SUBJECT: The Lake Metropolitan Housing Authority, Painesville, Ohio, Did Not Always Ensure That Section 8 Units Met HUD's Housing Quality Standards

HIGHLIGHTS

What We Audited and Why

We audited the Lake Metropolitan Housing Authority's (Authority) Section 8 Housing Choice Voucher program (program). The Authority was selected for audit based upon a congressional request from the Honorable Steven C. LaTourette. Our objective was to determine whether the Authority administered its program in accordance with the U.S. Department of Housing and Urban Development's (HUD) requirements and its program administrative plan regarding the enforcement of housing quality standards. This is the second of multiple audit reports that may be issued regarding the Authority's program.

What We Found

The Authority's program administration regarding housing unit conditions was inadequate. Of the 53 housing units statistically selected for inspection that did not receive a quality control inspection by the Authority, 51 did not meet HUD's housing quality standards, and 38 had exigent health and safety violations that existed at the time of the Authority's previous inspections. As a result, more than \$42,000 in program funds was spent on units that were not decent, safe, and sanitary. The Authority also received nearly \$5,000 in inappropriate program administrative fees. Based on our statistical sample, we estimate that over the

next year, HUD will pay more than \$903,000 in housing assistance for units with housing quality standards violations that had not received a quality control inspection.

Further, of the 27 housing units that received a quality control inspection by the Authority, 26 did not meet HUD's housing quality standards, and 15 had exigent health and safety violations that existed at the time of the Authority's previous inspections. As a result, more than \$39,000 in program funds was spent on units that were not decent, safe, and sanitary. The Authority also received nearly \$4,000 in inappropriate program administrative fees.

We informed the Authority's executive director and the Director of HUD's Cleveland Office of Public Housing of minor deficiencies through a memorandum, dated September 23, 2009.

What We Recommend

We recommend that the Director of HUD's Cleveland Office of Public Housing require the Authority to reimburse its program from nonfederal funds for the improper use of more than \$81,000 in program funds and implement adequate procedures and controls to address the finding cited in this audit report. These procedures and controls should help to ensure that more than \$903,000 in program funds is spent on housing units that meet HUD's requirements.

For each recommendation without a management decision, please respond and provide status reports in accordance with HUD Handbook 2000.06, REV-3. Please furnish us copies of any correspondence issued because of the audit.

Auditee's Response

We provided our inspection review results and supporting schedules to the Director of HUD's Cleveland Office of Public Housing and the Authority's chief executive officer during the audit. We also provided our discussion draft audit report to the Authority's executive director, its board chairman, and HUD's staff during the audit. We held an exit conference with the Authority's executive director on September 23, 2009.

We asked the Authority's executive director to provide comments on our discussion draft audit report by September 28, 2009. The Authority's executive director provided written comments, dated September 28, 2009. The Authority disagreed with our findings and recommendations. The complete text of the written comments, along with our evaluation of that response, can be found in appendix B of this report.

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BACKGROUND AND OBJECTIVE

The Lake Metropolitan Housing Authority (Authority) was created in October 1965 pursuant to Section 3735.01 of the Ohio Revised Code to provide safe and sanitary housing to low-income families. In 1977, the Authority began administering federal housing programs, beginning with the Section 8 rental housing assistance program. The Authority's jurisdiction was expanded to include all of Lake County, Ohio, in 1982. The Authority is a political subdivision of the State of Ohio and is governed by a seven-member board of commissioners appointed for five-year terms by local elected officials. The Authority's executive director is appointed by the board of commissioners and is responsible for coordinating established policy and carrying out the Authority's day-to-day operations.

The Authority administers its Section 8 Housing Choice Voucher program (program) funded by the U.S. Department of Housing and Urban Development (HUD). It provides assistance to low- and moderate-income individuals seeking decent, safe, and sanitary housing by subsidizing rents with owners of existing private housing. As of June 1, 2009, the Authority had 1,381 units under contract with annual housing assistance payments totaling more than \$8.8 million in program funds.

The Authority certified to troubled status on its Section Eight Management Assessment Program rating for the fiscal year ending June 30, 2008. As a result, HUD performed an on-site confirmatory review in February 2009 to assess the magnitude and seriousness of the Authority's noncompliance with program performance requirements. HUD and the Authority executed a corrective action plan, effective February 2009, to correct the deficiencies cited in the confirmatory review. This audit addressed areas that were not covered by the corrective action plan.

Our objective was to determine whether the Authority administered its program in accordance with HUD's requirements to include determining whether (1) the Authority's inspections were sufficient to detect housing quality standards violations and provide decent, safe, and sanitary housing to its residents and (2) the Authority conducted adequate quality control unit inspections to detect housing quality standards violations. This is the second of three planned audit reports regarding the Authority's program (see report number 2009-CH-1012, issued on August 14, 2009).

RESULTS OF AUDIT

Finding: Controls over Housing Quality Standards Were Inadequate

The Authority did not adequately enforce HUD's housing quality standards. Of the 80 program units statistically selected for inspection (53 non-quality control and 27 quality control), 77 did not meet minimum housing quality standards, and 53 had material violations that existed before the Authority's previous inspections. The violations occurred because the Authority lacked adequate procedures and controls to ensure that the inspections performed were adequate. As a result, more than \$81,000 in program funds was spent on units that were not decent, safe, and sanitary. We estimate that over the next year, the Authority will pay more than \$903,000 in housing assistance for units with housing quality standards violations.

HUD's Housing Quality Standards Not Met for Non-Quality Control Unit Inspections

From the 236 program units that passed the Authority's inspections performed between March 16 and June 16, 2009, we statistically selected 53 units for inspection by using data mining software. We did not include units that received a quality control inspection. The 53 units were inspected to determine whether the Authority ensured that its program units met HUD's housing quality standards. Our appraiser inspected the 53 units between July 14 and July 29, 2009.

Of the 53 units inspected, 51 (96 percent) had a total of 284 housing quality standards violations. In addition, 38 units were considered to be in material noncompliance since they had one or more exigent health and safety violations that predated the Authority's previous inspections. The following table categorizes the 284 housing quality standards violations in the 51 units.

Non-quality control unit inspections		
Category of violations	Number of violations	Number of units
Electrical	65	40
Security	41	24
Toilet/wash basin	22	13
Window	17	11
Heating equipment	15	12
Wall	15	13
Other interior hazards	11	6
Site and neighborhood conditions	10	6
Stairs, rails, and porches	10	6
Tub or shower in unit	10	7
Ceiling	9	8
Exterior surface	8	5
Other hazards	8	6
Range/refrigerator	8	6
Roof/gutters/chimney	7	6
Smoke detectors	7	7
Water heater	6	6
Plumbing/sewer/water supply	5	3
Floor	4	3
Sinks	3	3
Interior stairs and common halls	2	2
Evidence of infestation	1	1
Total	<u>284</u>	

Electrical Violations for Non-Quality Control Inspections

Sixty-five electrical violations were present in 40 of the Authority’s program units inspected. The following items are examples of electrical violations listed in the table: exposed fuse box connections, exposed electrical contacts, and missing outlet cover plates. The following pictures are examples of the electrical-related violations.

Unit 31: Exposed wiring in a junction box on the furnace because of a missing safety plate.



Unit 8: One of thirteen outlets missing a cover plate in the garage. A child under the age of eight resided in this unit.



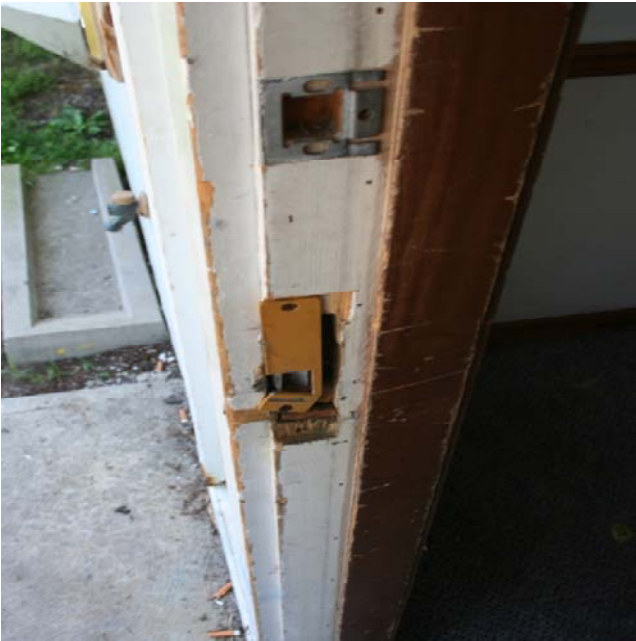
Security Violations for Non-Quality Control Unit Inspections

Forty-one security violations were present in 24 of the Authority's program units inspected. The following items are examples of security violations listed in the table: damaged door frames on entrance doors and damaged locks on entrance doors. The following pictures are examples of the security-related violations.

Unit 43: Security door frame split, damaged, insecure, and missing a striker plate.



Unit 20: Damaged door striker on main entry door into building, causing improper door lock operation.



Wall Violations for Non-Quality Control Inspections

Fifteen wall violations were present in 13 of the Authority's program units inspected. The following items are examples of wall violations listed in the table: handrails not secured to wall, mold on walls, and cracks in the walls. The following pictures are examples of the wall-related violations.

Unit 22: Damaged wall due to insecure handrail at second floor stairs.



Unit 11: Mold protruding from wall through paint and peeling in bathroom.



HUD's Housing Quality Standards Not Met for Quality Control Inspections

From the 27 program units that received a quality control inspection performed by the Authority in February 2009, we inspected 100 percent of the units. The 27 units were inspected to determine whether the Authority conducted adequate quality control unit inspections to detect housing quality standards violations. Our appraiser inspected the 27 units between July 14 and July 29, 2009.

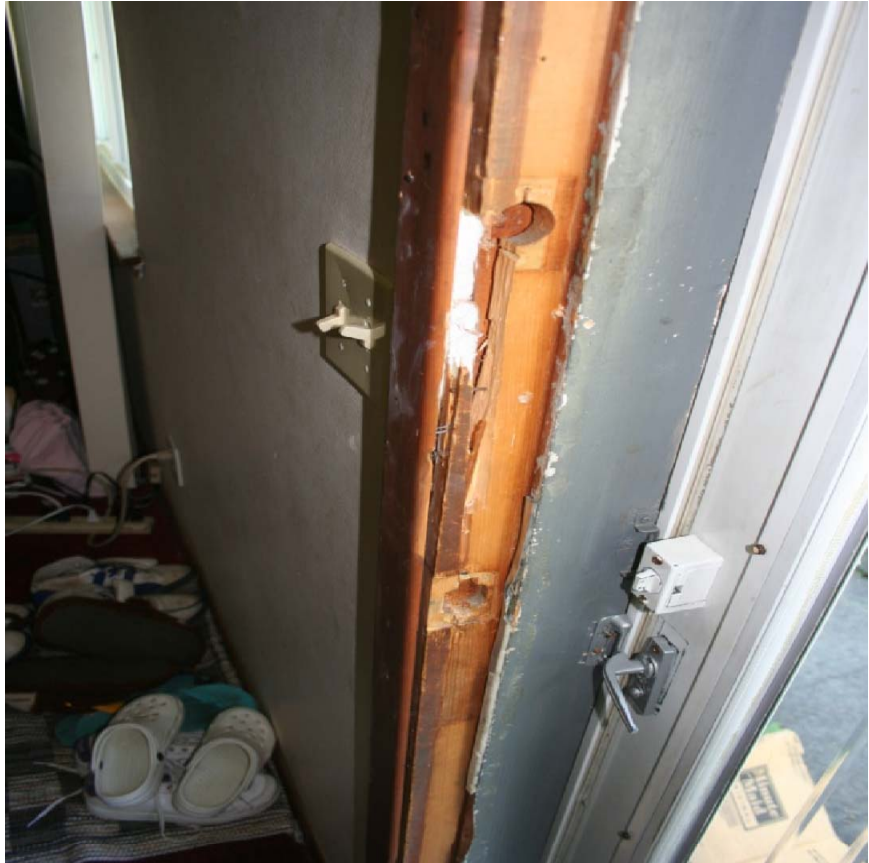
Of the 27 units inspected, 26 (96 percent) had a total of 175 housing quality standards violations. In addition, 15 units were considered to be in material noncompliance since they had one or more exigent health and safety violations that predated the Authority's previous inspections. The following table categorizes the 175 housing quality standards violations in the 26 units.

Quality control unit inspections		
Category of violations	Number of violations	Number of units
Security	37	17
Electrical	31	17
Window	19	13
Tub or shower in unit	16	11
Toilet/wash basin	13	9
Wall	11	8
Ceiling	10	8
Heating equipment	6	6
Range/refrigerator	6	5
Floor	5	4
Smoke detectors	4	4
Roof/gutters/chimney	3	3
Sinks	3	3
Exterior surface	2	2
Interior stairs and common halls	2	2
Other interior hazards	2	2
Other hazards	1	1
Plumbing/sewer/water supply	1	1
Site and neighborhood conditions	1	1
Stairs, rails, and porches	1	1
Water heater	1	1
Total	<u>175</u>	

Security Violations for Quality Control Inspections

Thirty-seven security violations were present in 17 of the Authority's program units inspected. The following items are examples of security violations listed in the table: damaged door frames on entrance doors, damaged locks, and missing strike plates. The following pictures are examples of the security-related violations.

Unit 35: Main entry door frame severely damaged and missing strike plate, allowing door to be insecure.



Unit 36: Entrance door off kitchen with severely damaged and split door frame and missing a strike plate. Children under the age of eight resided in this unit.



Electrical Violations for Quality Control Inspections

Thirty-one electrical violations were present in 17 of the Authority's program units inspected. The following items are examples of electrical violations listed in the table: exposed fuse box connections, exposed electrical contacts, and lights not secured. The following pictures are examples of the electrical-related violations.

Unit 03: Electric panel cover missing and lying on the floor. A child under the age of seven resided in this unit.



Unit 66: Light in the basement not properly secured, exposing wiring.



Wall Violations for Quality Control Inspections

Eleven wall violations were present in eight of the Authority's program units inspected. The following items are examples of wall violations listed in the table: handrails not secured, mold on walls, and holes in walls. The following pictures are examples of the wall-related violations.

Unit 09: Damaged wall at second floor stairs due to loose and insecure handrail.



Unit 56: Buildup of mold on the drywall above the tub. Children under the age of 12 reside in the unit.



Weaknesses in the Authority's Procedures and Controls over Its Inspections

The Authority lacked adequate procedures and controls to ensure that program units met HUD's requirements. The overall quality of the inspections performed by the Authority's contractors was not in accordance with HUD's housing quality standards. Housing quality standards were not interpreted correctly by the Authority's inspectors and as a result, were not applied appropriately and correctly by the inspectors. Therefore, the Authority did not determine during its inspections whether program units complied with HUD's housing quality standards. The Authority also lacked an effective quality control inspection process. It did not verify that its inspectors conducted accurate and complete inspections, and as evidenced by this finding, the quality control inspections were not adequate.

The Authority also failed to exercise proper supervision and oversight of its program inspections and did not follow its program administrative plan for quality control inspections. The plan requires a housing Authority supervisor or other qualified person to conduct quality control inspections of a sample of units to ensure that each inspector is conducting accurate and complete inspections and that there is consistency in the application of housing quality standards. In 2007 and early 2008, there was no supervisor or other qualified individual conducting quality control inspections; rather, the inspectors themselves were performing the required quality control inspections.

Further, from early 2008 through the summer of 2009, there were four different individuals in the position of housing choice voucher manager at the Authority. This frequent turnover in management contributed to the lack of an effective quality control inspection program because there was no consistency within the inspection program. Each of the four managers had different thoughts and ideas regarding the housing quality standards inspection process, including conducting quality control inspections.

Conclusion

The Authority's households were subjected to health- and safety-related violations, and the Authority did not properly use its program funds when it failed to ensure that units complied with HUD's housing quality standards. In accordance with 24 CFR [*Code of Federal Regulations*] 982.152(d), HUD is permitted to reduce or offset any program administrative fees paid to a public housing authority if it fails to enforce HUD's housing quality standards. The Authority disbursed \$42,197 in program housing assistance payments for the 38 non-quality control-inspected units that materially failed to meet HUD's housing

quality standards and received \$4,818 in program administrative fees. It also disbursed \$39,113 in program housing assistance payments for the 15 quality control-inspected units that materially failed to meet HUD's housing quality standards and received \$3,585 in program administrative fees. Program households were subject to potential conditions that were not decent, safe, or sanitary for a prolonged time as a result.

If the Authority implements adequate procedures and controls regarding its unit inspections to ensure compliance with HUD's housing quality standards, we estimate that more than \$903,000 in future housing assistance payments will be spent for units that are decent, safe, and sanitary over the next year. Our methodology for these estimates is explained in the Scope and Methodology section of this audit report.

Recommendations

We recommend that the Director of HUD's Cleveland Office of Public Housing require the Authority to

- 1A. Certify that the applicable housing quality standards violations have been corrected for the 77 units (51 non-quality control plus 26 quality control unit inspections) cited in this finding.
- 1B. Reimburse its program \$81,310 (\$42,197 plus \$39,113) for housing assistance payments and \$8,403 (\$4,818 plus \$3,585) in associated administrative fees) for the 53 units (38 plus 15 units) that materially failed to meet HUD's housing quality standards.
- 1C. Implement adequate procedures and controls to ensure that all program units meet HUD's housing quality standards to prevent \$903,984 in program funds from being spent over the next year on units that are in material noncompliance with the standards.
- 1D. Ensure that all inspectors are properly trained and are familiar with housing quality standards and can apply them appropriately.
- 1E. Ensure that all supervisory quality control inspectors are properly trained and are familiar with housing quality standards and can apply them appropriately.
- 1F. Implement a consistent quality control inspection program that is in accordance with HUD requirements and its own administrative plan.

We also recommend that the Director of HUD's Cleveland Office of Public Housing

- 1G. Revise the February 2009 corrective action plan with the Authority to ensure that it encompasses the recommendations cited in this finding.

SCOPE AND METHODOLOGY

To accomplish our objective, we reviewed

- Applicable laws, regulations, the Authority's 2000 and 2009 program administrative plans, HUD's program requirements at 24 CFR Parts 35 and 982, HUD's Public and Indian Housing Notice 2005-4, HUD Inspection Form 52580, Housing Inspection Manual-Section 8 Existing Housing Program, and HUD's Housing Choice Voucher Guidebook 7420.10.
- The Authority's household files, program policies and procedures, organizational chart, and program annual contributions contract with HUD.
- HUD's files for the Authority.

We also interviewed the Authority's employees, HUD staff, and program households.

Using data mining software, we statistically selected 53 of the Authority's program units to inspect from the 236 units that passed annual, initial, or reinspections by the Authority between March 16 and June 16, 2009. The 53 units were selected to determine whether the Authority's program units met HUD's housing quality standards. Our sampling criteria used a 90 percent confidence level, 50 percent estimated error rate, and precision of plus or minus 10 percent.

Our sampling results determined that 38 of the 53 units (72 percent) materially failed to meet HUD's housing quality standards. Materially failed units were those units that had one or more exigent health and safety violations that predated the Authority's previous inspections. All units were ranked, and we used auditor's judgment to determine the material cutoff line.

The Authority's July 2008 through June 2009 housing assistance disbursements listing showed that the average monthly housing assistance payment was \$509 for the 236 units in the population. Projecting our sampling results of the 38 units that materially failed to meet HUD's housing quality standards to the population indicates that 170 units or 71.70 percent of the population contains the attributes tested (would materially fail to meet HUD's housing quality standards). The sampling error is plus or minus 8.96 percent. In other words, we are 90 percent confident that the frequency of occurrence of the attributes tested lies between 62.74 and 80.66 percent of the population. This equates to an occurrence of between 148 and 190 units of the 236 units in the population.

- The lower limit is 62.74 percent times 236 units equals 148 units that materially failed to meet HUD's housing quality standards.
- The point estimate is 71.70 percent times 236 units equals 170 units that materially failed to meet HUD's housing quality standards.
- The upper limit is 80.66 percent times 236 units equals 190 units that materially failed to meet HUD's housing quality standards.

Using the lower limit of the estimate of the number of units and the average housing assistance payment, we estimate that the Authority will annually spend \$903,984 (148 units times \$509 average payment times 12 months) for units that materially fail to meet HUD's housing quality standards. This estimate is presented solely to demonstrate the annual amount of program funds that will be correctly paid over the next year on decent, safe, and sanitary housing if the Authority implements our recommendation. While these benefits would recur indefinitely, we were conservative in our approach and only included the initial year in our estimate.

We selected for review 100 percent of the Authority's program units that had received a quality control inspection since January 2009, which totaled 27 conducted in February 2009. The 27 units were inspected to determine whether the Authority's program units met HUD's housing quality standards. Our results determined that 15 of the 27 units (56 percent) materially failed to meet HUD's housing quality standards. Materially failed units were those units that had one or more exigent health and safety violations that predated the Authority's previous inspections.

We performed our on-site audit work between May and August 2009 at the Authority's offices located at 189 First Street, Painesville, Ohio. The audit covered the period July 1, 2007, through April 30, 2009, but was expanded as determined necessary.

We conducted the audit in accordance with generally accepted government auditing standards. Those standards require that we plan and perform the audit to obtain sufficient, appropriate evidence to provide a reasonable basis for our finding and conclusions based on our audit objective. We believe that the evidence obtained provides a reasonable basis for our finding and conclusions based on our audit objective.

INTERNAL CONTROLS

Internal control is an integral component of an organization's management that provides reasonable assurance that the following objectives are achieved:

- Program operations,
- Relevance and reliability of information,
- Compliance with applicable laws and regulations, and
- Safeguarding of assets and resources.

Internal controls relate to management's plans, methods, and procedures used to meet its mission, goals, and objectives. They include the processes and procedures for planning, organizing, directing, and controlling program operations as well as the systems for measuring, reporting, and monitoring program performance.

Relevant Internal Controls

We determined that the following internal controls were relevant to our audit objective:

- Program operations – Policies and procedures that management has implemented to reasonably ensure that a program meets its objectives.
- Relevance and reliability of data – Policies, procedures, and practices that management has implemented to provide reasonable assurance that operational and financial information used for decision making and reporting externally is relevant and reliable and fairly disclosed in reports.
- Compliance with laws and regulations – Policies and procedures that management has implemented to provide reasonable assurance that program implementation is in accordance with laws, regulations, and provisions of contracts or grant agreements.
- Safeguarding of assets and resources – Policies and procedures that management has implemented to prevent or promptly detect unauthorized acquisition, use, or disposition of assets and resources.

We assessed the relevant controls identified above.

A significant weakness exists if management controls do not provide reasonable assurance that the process for planning, organizing, directing, and controlling program operations will meet the organization's objectives.

Significant Weakness

Based on our review, we believe that the following item is a significant weakness:

- The Authority lacked adequate procedures and controls to ensure compliance with HUD's requirements and/or its program administrative plan regarding housing quality standards inspections (see finding).

Separate Communication of Minor Deficiencies

We informed the Authority's executive director and the Director of HUD's Cleveland Office of Public Housing of minor deficiencies through a memorandum, dated September 23, 2009.

APPENDIXES

Appendix A

SCHEDULE OF QUESTIONED COSTS AND FUNDS TO BE PUT TO BETTER USE

Recommendation number	Ineligible 1/	Funds to be put to better use 2/
1B	<u>\$89,713</u>	
1C		<u>\$903,984</u>
Totals	<u>\$89,713</u>	<u>\$903,984</u>

1/ Ineligible costs are costs charged to a HUD-financed or HUD-insured program or activity that the auditor believes are not allowable by law; contract; or federal, state, or local policies or regulations.

2/ Recommendations that funds be put to better use are estimates of amounts that could be used more efficiently if an Office of Inspector General (OIG) recommendation is implemented. These amounts include reductions in outlays, deobligation of funds, withdrawal of interest, costs not incurred by implementing recommended improvements, avoidance of unnecessary expenditures noted in preaward reviews, and any other savings that are specifically identified. In this instance, if the Authority implements recommendation 1C, it will cease to incur program costs for units that are not decent, safe, and sanitary and, instead, will expend those funds in accordance with HUD's requirements. Once the Authority successfully improves its procedures and controls, this will be a recurring benefit. Our estimate reflects only the initial year of this benefit.

Appendix B

AUDITEE COMMENTS AND OIG'S EVALUATION

Ref to OIG Evaluation

Auditee Comments



Lake Metropolitan Housing Authority

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September 28, 2009

Mr. Heath Wolfe
Regional Inspector General for Audit, Region V
US Department of Housing and Urban Development
Ralph H. Metcalfe Federal Building
77 West Jackson Boulevard, Suite 2646
Chicago, IL 60604-3507

RE: OIG Phase II Draft Audit Report

Dear Mr. Wolfe,

This letter represents the Lake Metropolitan Housing Authority's (LMHA) response to the Phase II Discussion Draft Audit Report, dated September 16, 2009.

The Lake Metropolitan Housing Authority recognizes the value of the OIG audit process and supports the assessment of our Housing Quality Standards Inspection process and procedures.

We think it is important to point out that we are pleased that due to our own internal efforts to increase compliance and customer service, only one out of the three areas scheduled for review in Phase Two resulted in a Draft Audit report. Our new Rent Reasonableness web based program has both increased the compliance and reduced potential errors created by staff. Our Abatement process has been through a number of enhancements including the creation on an internal control form that is required and created much needed checks and balances. We feel this is part of continuous improvement that LMHA is committed to.

Lake Metropolitan Housing Authority appreciates the time and effort in identifying issues within the HQS division and responds to the OIG Report as follows:

Listed below are several issues that we wish to address regarding individual units inspected:

Unit 01 - 2/25/09

Building Exterior

5.3 Electrical Illumination; missing globe

Agency Comment(s):

- This item indicates it is building exterior but uses issue 5.3 which is electrical hazards for secondary rooms.

Comment 1

Ref to OIG Evaluation

Auditee Comments

Comment 1

- Page 96 -105 of the Housing Inspection Manual, which outlines inspection criteria for the building exterior, does not identify a missing globe as a hazard. A missing globe in itself does not constitute an HQS fail unless there are broken or frayed electrical wires or bare metal wires as a result of the missing globe this item poses no risk to health or safety.

Comment 2

- This item can be a result of normal wear and tear of the unit, item cannot be determined with any certainty as present during original inspection (5) months previous to the audit

Comment 3

Laundry Facility

4.3 Electrical Hazards; GFCI socket missing

Agency Comment(s):

- At the time of the original inspection the LMHA administrative plan did not address the requirement of GFCI's.

Comment 2

Bathroom

3.11 Fix Wash Basin/Lavatory; drain inoperative, plugged.

Agency Comment(s):

- This item can be a result of normal wear and tear of the unit, item cannot be determined with any certainty as present during original inspection (5) months previous to the audit

Comment 3

Unit 03 - 2/25/09

Laundry Room

4.3 Electrical Hazards; GFCI socket missing

Agency Comment(s):

- At the time of the original inspection the LMHA administrative plan did not address the requirement of GFCI's.

Comment 2

5.2 Security; exterior door peeling

Agency Comment(s):

- This item can be a result of normal wear and tear of the unit, item cannot be determined with any certainty as present during original inspection (5) months previous to the audit

Comment 2

5.3 Electrical Hazards; missing dead man cover on panel, cover on the floor.

Agency Comment(s):

- This item can be a result of normal wear and tear of the unit, item cannot be determined with any certainty as present during original inspection (5) months previous to the audit

Comment 1

Exterior Water Heater Closet

4.2 Electricity/Illumination; missing globe

Agency Comment(s):

- A missing globe in itself does not constitute an HQS fail unless there are broken or frayed electrical wires or bare metal wires as a result of the missing globe this item poses no risk to health or safety.
- This item can be a result of normal wear and tear of the unit, item cannot be determined with any certainty as present during original inspection (5) months previous to the audit

Bathroom

Ref to OIG Evaluation

Auditee Comments

Comment 4

3.12 Tub or Shower; water control valves and spout not water sealed flush to wall. Separation from wall will cause water intrusion and mildew inside wall

Agency Comment(s):

- No current HQS deficiency exists as evidenced by the statement "will cause". The future status of the unit cannot be identified as a deficiency but may be considered a pass with comment

Comment 2

3.12 Tub or Shower; surrounded by mildew

Agency Comment(s):

- This item can be a result of normal wear and tear of the unit, item cannot be determined with any certainty as present during original inspection (5) months previous to the audit

Comment 3

Unit 06-2/25/09

From Draft Report with Photos – Unit 03:

We would like to comment on the photo and also comment on the full findings received by the HA by the OIG:

Laundry Room

4.3 Electrical Hazards; GFCI socket missing

Agency Comment(s):

- At the time of the original inspection the LMHA administrative plan did not address the requirement of GFCI's.

Comment 5

Bedroom

4.4 Security; all 3 bedroom doors have inverted door locks.

Agency Comment(s):

- O.I.G references section 4.4 of the H.Q.S Inspection Manual as basis for violation. Section 4.4 on Pg.92, which advises to utilize criteria for living room 1.4. This state's "Are all windows and doors that are accessible from the outside lockable?" Purpose: "To reduce the risk of burglary or other unlawful entry into dwelling". The inverted door locks are not applicable to this standard.

Comment 6

Bedroom Right Side

4.5 Window Condition; window blocked with tenant air conditioner which is screwed to window and window side frame, only 1 window in bedroom.

Agency Comment(s):

- 7/20/89 Clarification of Housing Quality Standards (HUD Memo): "24 CFR 887.251(j)(1) and the Section 8 Certificate program regulation at 882.109(j)(1) state that 'the building must provide an alternate means of egress in case of a fire (such as fire stairs or egress through windows).' The regulations do not state that there must be an alternate means of egress from each room. Since there are other windows and doors in the building, the building meets HQS for egress."

Unit 09-2/25/09

Ref to OIG Evaluation

Auditee Comments

Comment 7

This item can be a result of normal wear and tear of the unit, item cannot be determined with any certainty as present during original inspection (5) months previous to the audit

Laundry Room

4.3 Electrical Hazards; GFCI socket missing, within 6 feet of washtub/sink/drain

Agency Comment(s):

- At the time of the original inspection the LMHA administrative plan did not address the requirement of GFCI's.

Comment 2

4.3 Electrical Hazards; lint all over back wall of washer/dryer next to electrical and gas line.

Agency Comment(s):

This item can be a result of normal wear and tear of the unit, item cannot be determined with any certainty as present during original inspection (5) months previous to the audit

Comment 7

Bathroom Hall by Kitchen

4.3 Electrical Hazards; GFCI socket inoperable

Agency Comment(s):

- At the time of the original inspection the LMHA administrative plan address the requirement of GFCI's.

3.11 Fix Wash Basin/Lavatory; surround exterior area of sink a section is missing caulking and missing drain popup.

Comment 2

Agency Comment(s)

- This item can be a result of normal wear and tear of the unit, item cannot be determined with any certainty as present during original inspection (5) months previous to the audit
- O.I.G cites section 3.11 of the H.Q.S Inspection Manual as a basis for this violation. Section 3.11 indicates "Is there a working, permanently installed washbasin with hot and cold running water in the unit?" Purpose: To provide basic sanitary facilities for the tenant. Missing caulking and a missing drain pop-up does not hinder the use of the wash basin as a basic sanitary facility.

Comment 8

Ref to OIG Evaluation

Auditee Comments

Comment 2

Bathroom 2

3.11 Fix Wash Basin/Lavatory; missing drain popup.

Agency Comment(s):

- This item can be a result of normal wear and tear of the unit, item cannot be determined with any certainty as present during original inspection (5) months previous to the audit
- O.I.G cites section 3.11 of the H.Q.S Inspection Manual as a basis for this violation. Section 3.11 indicates "Is there a working, permanently installed washbasin with hot and cold running water in the unit?" Purpose: To provide basic sanitary facilities for the tenant. Missing caulking and a missing drain pop-up does not hinder the use of the wash basin as a basic sanitary facility.

Comment 2

Hall

8.6 Interior Stairs and Common Halls; handrail loose

Agency Comment(s):

- This item can be a result of normal wear and tear of the unit, item cannot be determined with any certainty as present during original inspection (5) months previous to the audit

Comment 2

4.7 Wall Condition; hole near handrail bracket.

Agency Comment(s):

- This item can be a result of normal wear and tear of the unit, item cannot be determined with any certainty as present during original inspection (5) months previous to the audit

Comment 2

Bedroom right front 1st floor by Living Room

4.4 Security, unfit door closure, frame striker missing.

- This item can be a result of normal wear and tear of the unit, item cannot be determined with any certainty as present during original inspection (5) months previous to the audit.

Comment 2

Bedroom left front

4.7 Wall Condition; hole

Agency Comment(s):

- This item can be a result of normal wear and tear of the unit, item cannot be determined with any certainty as present during original inspection (5) months previous to the audit

Comment 2

Bedroom right center

4.4 Security, unfit door closure, closet doors off hinges/track.

Agency Comment(s):

- O.I.G cites section 4.4 of the H.Q.S Inspection Manual as a basis for this violation manual instructs the use of the rating criteria utilized for the living room. 1.4 states "Are all windows and doors that are accessible from the outside lockable?". Purpose: to reduce the risk of burglary or other unlawful entry into dwelling. The closet door is not accessible from the exterior nor does the closet door off hinges/track increase the risk of burglary or other unlawful entry into the dwelling.

Comment 9

Ref to OIG Evaluation

Auditee Comments

Comment 9

Bedroom left front

4.4 Security, closet doors off hinges/track.

Agency Comment(s):

- O.I.G cites section 4.4 of the H.Q.S Inspection Manual as a basis for this violation manual instructs the use of the rating criteria utilized for the living room. 1.4 states "Are all windows and doors that are accessible from the outside lockable?". Purpose: to reduce the risk of burglary or other unlawful entry into dwelling. The closet door is not accessible from the exterior nor does the closet door off hinges/track increase the risk of burglary or other unlawful entry into the dwelling.

Comment 2

Unit 16- 2/25/09

Basement

7.2 Safety of Heating Equipment; debris leaning against furnace

7.4 Water Heater; gas debris stored 2" from heaters pilot

5.3 Electrical Hazards; personal tenant items at bottom of main entry electrical box.

Agency Comment(s):

- This item is the result of usage of the unit by the participant, item cannot be determined with any certainty as present during original inspection (5) months previous to the audit

Comment 1

Bathroom

3.3 Electrical Illumination; missing globe

Agency Comment(s):

- A missing globe in itself does not constitute an HQS fail unless there are broken or frayed electrical wires or bare metal wires as a result of the missing globe this item poses no risk to health or safety.

Comment 2

- This item can be a result of normal wear and tear of the unit, item cannot be determined with any certainty as present during original inspection (5) months previous to the audit

Comment 4

3.5 Window Condition; mildew buildup around window

Agency Comment(s):

- O.I.G cites section 3.5 of the H.Q.S Inspection Manual as a basis for this violation manual instructs the use of the rating criteria utilized for the living room. 1.5 states "Is there at least one window, and are all windows free of signs of severe deterioration or missing or broken-out panes?". The presence of mildew around the window does not constitute severe deterioration.
- This item is the result of usage of the unit by the participant, item cannot be determined with any certainty as present during original inspection (5) months previous to the audit

Comment 2

3.12 Tub or Shower; mildew buildup

Agency Comment(s):

- This item is the result of usage of the unit by the participant, item cannot be determined with any certainty as present during original inspection (5) months previous to the audit

Comment 2

Ref to OIG Evaluation

Auditee Comments

Comment 2

3.12 Tub or Shower; tub controls not fully able to shut off minor water drip.

Agency Comment(s):

- HQS Manual page 88 states “Pass the item but comment on the right of the form if the tub or shower is present and working but has the following types of defects: a dripping faucet; minor leaks; cracked porcelain; slow drain absent or broken support rod for the shower curtain; cracked, broken or missing tile; deteriorated grout around the tub.”

Comment 2

Garage

4.5 Window Condition; missing one section out of 4 sections of glass on side building window.

Agency Comment(s):

- OIG cites section 4.5 “Other Rooms Used for Living and Halls”. “Rooms used for living” is defined in the Housing Manual on page 90 as “are areas of the unit that are walked through or lived in on a regular basis.” The garage does not constitute a room used for living therefore the criteria used cannot be applied to this area.

Comment 2

5.2 Security; garage metal door frame left side, damaged/bent. possible cause by a car

Agency Comment(s):

- This item can be a result of normal wear and tear of the unit, item cannot be determined with any certainty as present during original inspection (5) months previous to the audit

Comment 2

8.4 Garbage and Debris; surrounding garage

Agency Comment(s):

- This item is the result of usage of the unit by the participant, item cannot be determined with any certainty as present during original inspection (5) months previous to the audit

Comment 9

Unit 18-2/25/09

Hall

4.4 Security; closet doors loose off track, tenant cause.

Agency Comment(s):

- O.I.G cites section 4.4 of the H.Q.S Inspection Manual as a basis for this violation manual instructs the use of the rating criteria utilized for the living room. 1.4 states “Are all windows and doors that are accessible from the outside lockable?”. Purpose: to reduce the risk of burglary or other unlawful entry into dwelling. The closet door is not accessible from the exterior nor does the closet door off hinges/track increase the risk of burglary or other unlawful entry into the dwelling.
- This item can be a result of normal wear and tear of the unit, item cannot be determined with any certainty as present during original inspection (5) months previous to the audit

Comment 2

Unit 29-2/24/09

Common Area Laundry Room

4.3 Electrical Hazards; GFCI receptacle missing,

Agency Comment(s):

- At the time of the original inspection the LMHA administrative plan did not

Comment 3

Ref to OIG Evaluation

Auditee Comments

Comment 10

address the requirement of GFCI's.
5.3 Electrical Hazard & 4.2 Electrical Illumination; Emergency exit light 2nd floor hallway inoperative.

Agency Comment(s):

- O.I.G cites section 5.3 of the H.Q.S Inspection Manual as a basis for this violation however, 5.3 instruct you to use the rating criteria utilized for the living room. 1.3 Electrical Hazard: "Is the room free from electrical hazards?" Purpose: "To assure that tenants are not exposed to and electrical hazards in the room. Fires and electrical shock result from inadequate or improperly installed electrical facilities." This light was located in (2nd-floor) exterior hallway.

Living Room

4.3 Electrical Hazards & 7.2 Safety of Heating Equipment; electric floor heater safety shield damaged and heat system blocked with tenant personal items.

Agency Comment(s):

- Due to the fact that this was inspected in the summer months when the heater would not be in use, it is reasonable to believe this condition occurred within the five months of the previous inspection.

Bathroom

3.6 Ceiling & 3.7 Wall Condition; peeling, cracked, water stains.

Agency Comment(s):

- This item can be a result of normal wear and tear of the unit, item cannot be determined with any certainty as present during original inspection (5) months previous to the audit

Comment 2

3.12 Tub or Shower; mildew around tub

Agency Comment(s):

- This item is the result of usage of the unit by the participant, item cannot be determined with any certainty as present during original inspection (5) months previous to the audit

Comment 2

Bedroom master

4.3 Electrical Hazards & 7.2 Safety of Heating Equipment; electric floor heater safety shield missing and heat system blocked with tenant personal items.

Agency Comment(s):

- This item is the result of usage of the unit by the participant, item cannot be determined with any certainty as present during original inspection (5) months previous to the audit

Comment 2

Bedroom right front

4.4 security; unfit door closure.

Agency Comment(s):

- O.I.G cites section 4.4 of the H.Q.S Inspection Manual as a basis for this violation manual instructs the use of the rating criteria utilized for the living room. 1.4 states "Are all windows and doors that are accessible from the outside lockable?" Purpose: to reduce the risk of burglary or other unlawful entry into dwelling. The bedroom door is not accessible from the exterior nor does it increase the risk of burglary or other unlawful entry into the dwelling.

Comment 11

Ref to OIG Evaluation

Auditee Comments

Comment 1

Comment 2

Comment 2

Comment 11

Comment 2

Comment 12

Comment 2

Unit 35 – 2/24/09

Item cannot be determined with any certainty as present during the original inspection (5) months previous to the audit

Laundry Room

4.2 Electrical Illumination; missing globe

Agency Comment(s):

- A missing globe in itself does not constitute an HQS fail unless there are broken or frayed electrical wires or bare metal wires as a result of the missing globe this item poses no risk to health or safety.
- This item can be a result of normal wear and tear of the unit, item cannot be determined with any certainty as present during original inspection (5) months previous to the audit

Hall

4.8 Floor condition; carpet torn near bedroom trip hazard.

Agency Comment(s):

- This item is the result of usage of the unit by the participant, item cannot be determined with any certainty as present during original inspection (5) months previous to the audit

Bathroom full hall

3.4 Security; door damage at bottom with a hole.

Agency Comment(s):

- O.I.G cites section 3.4 of the H.Q.S Inspection Manual as a basis for this violation manual instructs the use of the rating criteria utilized for the living room. 1.4 states “Are all windows and doors that are accessible from the outside lockable?”. Purpose: to reduce the risk of burglary or other unlawful entry into dwelling. The bathroom door is not accessible from the exterior nor does a whole in the door increase the risk of burglary or other unlawful entry into the dwelling.
- This item can be a result of normal wear and tear of the unit, item cannot be determined with any certainty as present during original inspection (5) months previous to the audit

3.7 Wall Condition; peeling wall paper.

Agency Comment(s):

- O.I.G cites section 3.7 of the H.Q.S Inspection Manual as a basis for this violation manual instructs the use of the rating criteria utilized for the living room. 1.7 states “Are the walls sound and free from hazardous defects?”. Purpose: To assure that the tenant is not exposed to any structural hazards and to assure that room is reasonably weather tight. Peeling wall paper does not constitute a structural hazard nor affects weather infiltration.
- This item can be a result of normal wear and tear of the unit, item cannot be determined with any certainty as present during original inspection (5) months previous to the audit

3.11 Fix Wash Basin/Lavatory; missing drain pop-up.

Agency Comment(s):

Ref to OIG Evaluation

Auditee Comments

Comment 2

- This item can be a result of normal wear and tear of the unit, item cannot be determined with any certainty as present during original inspection (5) months previous to the audit

Comment 8

- O.I.G cites section 3.11 of the H.Q.S Inspection Manual as a basis for this violation. Section 3.11 indicates “Is there a working, permanently installed washbasin with hot and cold running water in the unit?” Purpose: To provide basic sanitary facilities for the tenant. Missing caulking and a missing drain pop-up does not hinder the use of the wash basin as a basic sanitary facility.

Comment 12

3.12 Tub or Shower; Shower head plumbing exposed oversize wall hole.

Agency Comment(s):

- O.I.G cites section 3.12 of the H.Q.S Inspection Manual as a basis for this violation which states “Is there a working tub or shower with hot and cold running water in the unit?” Purpose: To provide basic sanitary facilities for the use of the tenant. A hole in the drywall around the plumbing does not affect the use of the shower as a basic sanitary facility as required by HQS. It is reasonable to believe this damage could have occurred due to normal wear and tear of the unit.

Comment 2

3.12 Tub or Shower; tub surrounded with mildew.

Agency Comment(s):

- This item is the result of usage of the unit by the participant, item cannot be determined with any certainty as present during original inspection (5) months previous to the audit

Unit 36-2/24/09

Item cannot be determined with any certainty as present during the original inspection (5) months previous to the audit

Exterior:

1.5 Window Condition; 2 windows screens damaged, 1 window screen not properly secured.

Agency Comment(s):

- The LMHA administrative plan does not address/create a requirement of or criteria for window screens.
- Pg. 65 Housing Inspections Manual “Screens are not required as part of this nationwide, minimum standard. However, an individual PHA is free to adopt a higher standard that does require screens.... ”
- The damaged screens posed no threat to the health or safety of the family

Comment 2

Kitchen

2.4 Security; missing striker plate.

Agency Comment(s):

- This item is the result of apparent forced entry in into the unit, item cannot be determined with any certainty as present during original inspection (5) months previous to the audit.

Comment 2

2.4 Security; door frame severely damaged/split.

Agency Comment(s):

Ref to OIG Evaluation

Auditee Comments

Comment 2

- This item is the result of apparent forced entry into the unit, item cannot be determined with any certainty as present during original inspection (5) months previous to the audit

Unit 38-2/24/09

Exterior and Living room

1.5 & 4.5 Window Condition & 7.3 Ventilation/Cooling; Security and installation of tenant air conditioner not properly done. Window is not properly sealed to prevent heat entry. At time of inspection window area was wrapped with black plastic. Present air conditioner installation prevents proper window security.

Agency Comment(s):

- Item cannot be determined with any certainty as present during original inspection (5) months previous to the audit. Previous inspection conducted in February, tenant provided A/C unit likely not present during PHA inspection.

Comment 2

Living Room

1.5 Security; entry storm door screen loose.

Agency Comment(s):

- The LMHA administrative plan does not address/create a requirement of or criteria for window screens.
- Pg. 65 Housing Inspections Manual "Screens are not required as part of this nationwide, minimum standard. However, an individual PHA is free to adopt a higher standard that does require screens...."
- The damaged screens posed no threat to the health or safety of the family

Comment 2

Bathroom full hall

3.10 toilet water Shut-off valve missing.

Agency Comment(s):

- At the time of the original inspection the LMHA administrative plan did not address the requirement of shut off valves.

Comment 2

Hall

4.8 Floor Condition; carpet worn and torn trip hazard.

Agency Comment(s):

- This item can be a result of normal wear and tear of the unit, item cannot be determined with any certainty as present during original inspection (5) months previous to the audit

Comment 2

Bedroom

4.2 Electrical Illumination; missing glob/shade.

Agency Comment(s):

- A missing globe in itself does not constitute an HQS fail unless there are broken or frayed electrical wires or bare metal wires as a result of the missing globe this item poses no risk to health or safety.
- This item can be a result of normal wear and tear of the unit, item cannot be determined with any certainty as present during original inspection (5) months previous to the audit

Comment 1

Comment 2

Ref to OIG Evaluation

Auditee Comments

Comment 2

Garage

5.2 Security; garage door hard to operate open/close.

Agency Comment(s):

- OIG cites section 5.2 "All Secondary Rooms". The garage does not constitute a room in the unit not used for living therefore the criteria used cannot be applied to this area.

Comment 2

8.4 Garbage and Debris; inside garage

Agency Comment(s):

- This item is the result of usage of the unit by the participant, item cannot be determined with any certainty as present during original inspection (5) months previous to the audit

Comment 3

Unit 42-2/23/09

Common Area Laundry Room

4.3 Electrical Hazards; GFCI receptacle missing,

Agency Comment(s):

- At the time of the original inspection the LMHA administrative plan did not address the requirement of GFCI's.

Comment 3

Kitchen

2.3 Electrical Hazards; missing GFCI above stove 4 feet from sink center,

Agency Comment(s):

- At the time of the original inspection the LMHA administrative plan did not address the requirement of GFCI's.

Comment 13

3.13 Ventilation at ceiling; excessive grease inside vent system, fan motor and blades.

Agency Comment(s):

- O.I.G has referenced section 3.13 of the H.Q.S Inspection Manual. The 3.13 section of the H.Q.S Inspection Manual addresses bathroom ventilation. 3.13 Ventilation: "Are there openable windows or a working vent system?" Purpose: To make sure that the bathroom can be properly ventilated by an openable window or mechanical or other vent to prevent accumulation of unhealthful odor and gases.
- This item can be a result of normal wear and tear of the unit, item cannot be determined with any certainty as present during original inspection (5) months previous to the audit

Comment 14

Bathroom

3.7 Wall Condition; surrounding at top of tub wall paint peeling.

Agency Comment(s):

- This item can be a result of normal wear and tear of the unit, item cannot be determined with any certainty as present during original inspection (5) months previous to the audit

Comment 2

3.12 Tub or Shower; tub spout separated from wall exposing area interior to water penetration.

Agency Comment(s):

- No current HQS deficiency exists. The future status of the unit cannot be identified as a deficiency but may be considered a pass with comment

Comment 12

Ref to OIG Evaluation

Auditee Comments

Comment 12

Unit 48-2/23/09

Kitchen

2.12 Sink; back splash to sink and counter the tiles are not cemented correctly, some are loose other just laying against the back splash not secure in place.

Agency Comment(s):

- O.I.G has referenced section 2.12 of the H.Q.S Inspection Manual. Section 2.12 states "Is there a working kitchen sink with hot and cold running water" Purpose: To assure that a properly connected sink is present in the unit. The back splash does not affect the usability of the kitchen sink.

Comment 3

Unit 56- 2/23/09

Laundry Room

4.3 Electrical Hazards; GFCI receptacle missing.

Agency Comment(s):

- At the time of the original inspection the LMHA administrative plan did not address the requirement of GFCI's.

Comment 2

Exterior

4.5 Window Condition; screen torn and loose at front.

Agency Comment(s):

- The LMHA administrative plan does not create a requirement of or criteria for window screens.
- Pg. 65 Housing Inspections Manual "Screens are not required as part of this nationwide, minimum standard. However, an individual PHA is free to adopt a higher standard that does require screens.... "
- The damaged screens posed no threat to the health or safety of the family

Comment 2

Bathroom

3.6 Ceiling Condition; at top of Tub or Shower wall section drywall area has buildup of mildew.

Agency Comment(s):

- This item is the result of usage of the unit by the participant, item cannot be determined with any certainty as present during original inspection (5) months previous to the audit

Comment 2

3.7 Wall Condition; at top of tub or shower wall section drywall area has buildup of mildew.

Agency Comment(s):

- This item is the result of usage of the unit by the participant, item cannot be determined with any certainty as present during original inspection (5) months previous to the audit

Comment 2

3.12 Tub or Shower; around tub buildup of mildew.

Agency Comment(s):

- This item is the result of usage of the unit by the participant, item cannot be determined with any certainty as present during original inspection (5) months previous to the audit

Ref to OIG Evaluation

Auditee Comments

Comment 7

Unit 58 – 2/23/09

Common Area Laundry Room

4.3 Electrical Hazards; GFCI receptacle missing.

Agency Comment(s):

- At the time of the original inspection the LMHA administrative plan did not address the requirement of GFCI's.

Comment 15

Kitchen

3.13 Ventilation; Hood vent system and vent screen at top of stove has excessive grease.

Agency Comment(s):

- O.I.G has referenced section 3.13 of the H.Q.S Inspection Manual. The 3.13 section of the H.Q.S Inspection Manual addresses bathroom ventilation. 3.13 Ventilation: "Are there openable windows or a working vent system. Purpose: To make sure that the bathroom can be properly ventilated by an openable window or mechanical or other vent to prevent accumulation of unhealthful odor and gases.
- This is not applicable to this situation; also the accumulation is from tenant use and could have occurred after the passed inspection date. This item can be a result of normal wear and tear of the unit, item cannot be determined with any certainty as present during original inspection (5) months previous to the audit

Comment 14

3.13 Ventilation; Hood vent system & 4.2 Electrical Illumination; light missing glob/shade.

Agency Comment(s):

- A missing globe in itself does not constitute an HQS fail unless there are broken or frayed electrical wires or bare metal wires as a result of the missing globe this item poses no risk to health or safety.
- This item can be a result of normal wear and tear of the unit, item cannot be determined with any certainty as present during original inspection (5) months previous to the audit

Comment 16

Comment 2

Unit 63 – 2/23/09

Basement

7.2 Safety of Heating Equipment & 8.7 Other Interior Hazards; Tenant mattress 1 foot away from gas heating system a potential fire hazard.

Agency Comment(s):

- This item is the result of usage of the unit by the participant, item cannot be determined with any certainty as present during original inspection (5) months previous to the audit

Comment 2

Comment 8

Bathroom full hall

3.12 Tub or Shower; Tub porcelain corroded at drain area.

Agency Comment(s):

- O.I.G cites section 3.12 of the H.Q.S Inspection Manual as a basis for this violation which states "Is there a working tub or shower with hot and cold running water in

the unit?" Purpose: To provide basic sanitary facilities for the use of the tenant. Page 88 identifies passed with comment items for the tub or shower and states the following items are pass with comment "a dripping faucet; minor leaks; cracked porcelain; slow drain; absent or broken support rod for the shower curtain; cracked, broken or missing tile; deteriorated grout around tub." By definition corroded porcelain does not affect the workability of the tub or shower and should be considered a pass with comment.

Unit 65 -2/23/09

Laundry Room

4.3 Electrical Hazards; GFCI receptacle missing.

Agency Comment(s):

- At the time of the original inspection the LMHA administrative plan did not address the requirement of GFCI's.

Comment 7

Kitchen

3.13 Ventilation; removed ventilation system, presently blocked with cardboard.

Agency Comment(s):

- O.I.G has referenced section 3.13 of the H.Q.S Inspection Manual. The 3.13 section of the H.Q.S Inspection Manual addresses bathroom ventilation. 3.13 Ventilation: "Are there openable windows or a working vent system?" Purpose: To make sure that the bathroom can be properly ventilated by an openable window or mechanical or other vent to prevent accumulation of unhealthful odor and gases.
- This is not applicable to this situation; also the installation of the cardboard most likely is from tenant and could have occurred after the passed inspection date.

Comment 15

Comment 2

Bathroom

3.6 Ceiling Condition; Buildup of mildew.

Agency Comment(s):

- This item is the result of usage of the unit by the participant, item cannot be determined with any certainty as present during original inspection (5) months previous to the audit

Comment 2

Bedroom

4.4 Security; bedroom door lock handle lock is reversed.

Agency Comment(s)

- O.I.G references section 4.4: Security of the H.Q.S Inspection Manual. Section 4.4 of the H.Q.S Inspection Manual instructs the use of 1.4 living room rating criteria. 1.4 Security: Are all windows and doors that are accessible from the outside lockable? Purpose: "To reduce the risk of burglary or other unlawful entry into dwelling." Definition and Clarification "Accessible to outside" means doors that open to outside or to a common public hallway." This bedroom door does not lead to the outside therefore we feel it should not be considered a "fail rating".

Comment 5

4.5 Window Condition; Window screen torn.

Agency Comment(s):

- The LMHA administrative plan does not address nor create a requirement of or criteria for window screens.

Comment 2

Comment 2

- Pg. 65 Housing Inspections Manual “Screens are not required as part of this nationwide, minimum standard. However, an individual PHA is free to adopt a higher standard that does require screens.... ”
- The damaged screens posed no threat to the health or safety of the family

Unit 66 – 2/23/09

Exterior

6.2 Condition of Stairs, Rails and Porches; Handrail loose left side.

Agency Comment(s):

- This item can be a result of normal wear and tear of the unit, item cannot be determined with any certainty as present during original inspection (5) months previous to the audit

Comment 2

Site and Neighborhood Conditions

8.10 Site and Neighborhood Conditions; Tenant abandon vehicle Firebird Pontiac.

Agency Comment(s):

- This item is the result of usage of the unit by the participant, item cannot be determined with any certainty as present during original inspection (5) months previous to the audit

Comment 4

3.12 Tub or Shower, 3.8 Floor Condition; Buildup of mildew around tub including the separation of tub water seal surrounding the tub, sides and flooring.

Agency Comment(s):

- O.I.G cites section 3.12 of the H.Q.S Inspection Manual as a basis for this violation which states “Is there a working tub or shower with hot and cold running water in the unit?” Purpose: To provide basic sanitary facilities for the use of the tenant. Page 88 identifies passed with comment items for the tub or shower and states the following items are pass with comment “a dripping faucet; minor leaks; cracked porcelain; slow drain; absent or broken support rod for the shower curtain; cracked, broken or missing tile; deteriorated grout around tub.” By definition corroded porcelain does not affect the workability of the tub or shower and should be considered a pass with comment.

Comment 2

- This item is the result of usage of the unit by the participant, item cannot be determined with any certainty as present during original inspection (5) months previous to the audit

Comment 1

Bedroom front

4.2 Electrical Illumination; missing globe/shade.

Agency Comment(s):

- A missing globe in itself does not constitute an HQS fail unless there are broken or frayed electrical wires or bare metal wires as a result of the missing globe this item poses no risk to health or safety.
- This item can be a result of normal wear and tear of the unit, item cannot be determined with any certainty as present during original inspection (5) months previous to the audit

Comment 2

Ref to OIG Evaluation

Auditee Comments

Comment 2

Bedroom left master

4.5 Window Condition; window screen damaged.

Agency Comment(s):

- The LMHA administrative plan does not address nor create a requirement of or criteria for window screens.
- Pg. 65 Housing Inspections Manual “Screens are not required as part of this nationwide, minimum standard. However, an individual PHA is free to adopt a higher standard that does require screens.... ”
- The damaged screens posed no threat to the health or safety of the family

Unit 68 –2/23/09

Bedroom Attic

4.2 Electrical Illumination; at stair well to attic bedroom light fixture has missing globe/shade.

Agency Comment(s):

- A missing globe in itself does not constitute an HQS fail unless there are broken or frayed electrical wires or bare metal wires as a result of the missing globe this item poses no risk to health or safety.
- This item can be a result of normal wear and tear of the unit, item cannot be determined with any certainty as present during original inspection (5) months previous to the audit

Comment 1

Comment 2

Bathroom full hall 1st floor

3.6 Ceiling Condition; Buildup of mildew.

Agency Comment(s):

- This item is the result of usage of the unit by the participant, item cannot be determined with any certainty as present during original inspection (5) months previous to the audit

Comment 2

Unit 71 – 2/25/09

Common Area Laundry Room

4.3 Electrical Hazards; GFCI receptacle missing wall and floor covered with lint.

Agency Comment(s):

- At the time of the original inspection the LMHA administrative plan did not address the requirement of GFCI's. The accumulation of lint is from participant use and could have occurred after unit passed inspection 5 months earlier.

Comment 3

Living Room

7.2 Safety of Heating Equipment & 7.4 Water Heater (gas); Tenant uses designated utility closet to store aluminum window.

Agency Comment(s):

- This item is the result of usage of the unit by the participant, item cannot be determined with any certainty as present during original inspection (5) months previous to the audit

Comment 2

Hall to upstairs

8.6 Interior Stairs and Common Halls; Safety handrail loose.

Ref to OIG Evaluation

Auditee Comments

Comment 2

Agency Comment(s):

- This item is the result of usage of the unit by the participant, item cannot be determined with any certainty as present during original inspection (5) months previous to the audit

Bathroom

3.8 Floor Condition & 3.13 Ventilation; Floor heating and cooling vent in front center of tub crushed/bent which may cause a tripping hazard.

Agency Comment(s):

- This item is the result of usage of the unit by the participant, item cannot be determined with any certainty as present during original inspection (5) months previous to the audit

Comment 2

Unit 72 – 2/26/09

Basement

2.12 Sink; Laundry washer drain tub control shut off valves inoperative continual water draining.

Agency Comment(s):

- O.I.G references section 2.12 of the H.Q.S Inspection Manual. 2.12 Sink: "Is there a working sink with hot and cold running water?" Purpose: "To assure that a properly connected sink is present in the unit. The laundry tub is located in the public laundry room and is not part of the unit."
- This item can be a result of normal wear and tear of the unit, item cannot be determined with any certainty as present during original inspection (5) months previous to the audit

Comment 8

Comment 2

Bathroom full hall

3.12 Tub or Shower; Tub spout separated from wall exposing hole to interior water penetration and possible mildew buildup.

Agency Comment(s):

- This item is the result of usage of the unit by the participant, item cannot be determined with any certainty as present during original inspection (5) months previous to the audit

Comment 2

Comment 4

- No current HQS deficiency exists. The future status of the unit cannot be identified as a deficiency but may be considered a pass with comment

Unit 78 – 2/24/09

Hall

4.4 Security; closet in hall missing closet doors. House under remodeling stage.

4.6 Ceiling Condition; closet in hall unfinished ceiling drywall in the interior. House under remodeling stage.

4.7 Wall Condition; closet in hall unfinished drywall in the interior. House under remodeling stage.

Bathroom

3.2 Electrical Illumination & 3.7 Wall Condition; Bathroom unfinished drywall square box to access electrical lighting inside. House under remodeling stage.

Comment 2

Bedroom 1 center left
4.4 Security; Door frame missing inside bedroom.
4.5 Window Condition; torn window screen.
4.7 Wall Condition; Drywall hole.
Bedroom 2 left rear
4.4 Security; Closet doors inoperative, off hinges/track.
Bedroom 3 right rear
4.4 Security; Door frame missing outside bedroom hallway.
4.4 Security; Door to door frame do not close properly.
Utility Closet
7.2 Safety of Heating Equipment; Closet being used for storage of tenant shoes and miscellaneous items.
4.6 Ceiling Condition; Drywall ceiling hole.

Agency Comment(s):

- Due to the remodeling of the unit, identified by the O.I.G, these items cannot be determined with any certainty as present during original inspection (5) months previous to the audit. Agency should not be held accountable for items not present during the original inspection.

In addition, we would like to address the following narrative from the report:

Electrical Violations for Non-Quality Control Inspections:

Sixty-five electrical violations were present in 40 of the Authority's program units inspected. The following items are examples of electrical violations listed in the table: exposed fuse box connections, exposed electrical contacts, and missing outlet cover plates.

Comments 17

- o **Agency Comments:** In reviewing the specifics regarding the electrical violations, we noted, and have brought to the OIG's attention, specific violations that are not present in the HQS book or could not be ruled out as occurring within the five months of the initial inspection. In addition, our new Administrative Plan was approved April 8, 2009. The previous Administrative Plan was more than ten years old and did not address GFCLs.

Security Violations for Non-Quality Control Unit Inspections:

Forty-one security violations were present in 24 of the Authority's program units inspected. The following items are examples of security violations listed in the table: damaged door frames on entrance doors and damaged locks on entrance doors.

Comments 17

- o **Agency Comments:** We are aware of at least two of the split door frames occurring outside of the five month timeframe from the initial inspection and the OIG re-inspection and was confirmed as tenant wear and tear. In a few of the other specific citation, we noted citations for closet doors and other doors not accessible from the outside, and it is our belief that these cited violations should be reviewed.

Wall Violations for Non-Quality Control Inspections:

Comment 17

Fifteen wall violations were present in 13 of the Authority's program units inspected. The following items are examples of wall violations listed in the table: handrails not secured to the wall, mold on the walls, and cracks in the walls.

- o **Agency Comments:** It is our opinion that this could be considered normal wear and tear caused by the tenant and having occurred during the five months from initial inspection to the OIG inspections.

HUD's Housing Quality Standards Not Met for Quality Control Inspections:

From the 27 program units that received a quality control inspection performed by the Authority in February 2009, we inspected 100 percent. The 27 units were inspected to determine whether the Authority conducted adequate quality control unit inspections to detect housing quality standards violations. Our appraiser inspected the 27 units between July 14 and July 29, 2009.

Of the 27 units inspected, 26 (96 percent) had a total of 175 housing quality standards violations. In addition, 15 units were considered to be in material noncompliance since they had one or more exigent health and safety violation that predated the authority's previous inspections. The following table categorizes the 175 housing quality standards violations in the 26 units.

Security Violations from Quality Control Inspections:

Thirty-seven security violations were present in 17 of the Authority's program units inspected. The following items are examples of security violations listed in the table: damaged door frames on entrance doors, damaged locks, and missing strike plates.

Comments 17

- o **Agency Comments:** It is our opinion that this could be considered normal wear and tear caused by the tenant and having occurred during the five months from initial inspection to the OIG inspections. However, we have shored up our quality control inspections to ensure this is addressed in the future.

Electrical Violations for Quality Control Inspections:

Thirty-one electrical violations were present in 17 of the Authority's program units inspected. The following items are examples of electrical violations listed in the table: exposed fuse box connections, exposed electrical contacts, and lights not secured.

Comments 17

- o **Agency Comments:** It is our opinion that this could be considered normal wear and tear caused by the tenant and having occurred during the five months from initial inspection to the OIG inspections. However, we have shored up our quality control inspections to ensure this is addressed in the future.

In reviewing the specifics regarding the electrical violations, we noted, and have brought to the OIG's attention, specific violations that are not present in the HQS book or could not be ruled out as occurring within the five months of the initial inspection. In addition, our new Administrative Plan was approved April 8, 2009. The previous Administrative Plan was more than ten years old and did not address GFCIs.

Comment 17

Wall Violations for Quality Control Inspections:

Eleven wall violations were present in 8 of the Authority's program units inspected. The following items are examples of wall violations listed in the table: handrails not secured, molds on walls, and holes in walls.

- o **Agency Comments:** It is our opinion that this could be considered normal wear and tear caused by the tenant and having occurred during the five months from initial inspection to the OIG inspections. We acknowledge that our quality control inspections were lacking and have taken steps to improve our quality control inspections.

Weaknesses in the Authority's Procedures and Controls Over Its Inspections:

The Authority lacked adequate procedures and controls to ensure that program units met HUD's requirements. The overall quality of the inspections performed by the Authority's contractors was not in accordance with HUD's housing quality standards. Housing quality standards were not interpreted correctly by the Authority's inspectors and as a result were not applied appropriately and correctly by the inspectors. Therefore, the Authority did not determine during its inspections whether program units complied with HUD's housing quality standards. The authority also lacked an effective quality control inspection process. It did not verify that its inspectors conducted accurate and complete inspections and as evidenced by this finding, the quality control inspections were not adequate.

The Authority also failed to exercise proper supervision and oversight of its program inspections and did not follow its program administrative plan for quality control inspections. The plan requires a housing Authority supervisor or other qualified person to conduct quality control inspections of a sample of units to ensure that each inspector is conducting accurate and complete inspections and that there is consistency in the application of housing quality standards. In 2007 and early 2008 there was no supervisor or other qualified individual conducting quality control inspections rather the inspectors themselves were performing the required quality control inspections.

Further, from early 2008 through the summer of 2009 there were four different individuals in the position of housing choice voucher manager at the Authority. This frequent turnover in management contributed to the lack of an effective quality control inspection program because there was no consistency within the inspection program. Each of the four managers had different thoughts and ideas regarding the housing quality standard inspection process including conducting quality control inspections:

- o **Agency Comments:**

While it is true the inspection department has been challenged, the sporadic quality control inspections has been replaced with a consistence quality control inspection process that includes a supervisor and a staff member not in the HQS department, as designed and prepared by the current HCV Manager.

Comment 18

Conclusion:

The Authority's households were subjected to health- and safety-related violations, and the Authority did not properly use its program funds when it failed to ensure that units complied with HUD's housing quality standards and perform timely annual inspections of its program units. In accordance with 24 CFR (Code of Federal Regulations) 982.152(d), HUD is permitted to reduce or offset any program administrative fees paid to a public housing authority if it fails to enforce HUD's housing quality standards. The Authority disbursed \$42,197 program housing

Comment 17

Comment 17

assistance payments for the 38 non-quality control-inspected units that materially failed to meet HUD's housing quality standards and received \$4,818 in program administrative fees. If also disbursed \$39,113 in program housing assistance payments for the 15 quality control-inspected units that materially failed to meet HUD's housing quality standards and received \$3,585 in program administrative fees. Program households were subject to potential conditions that were not decent, safe or sanitary for a prolonged time as a result.

If the Authority implements adequate procedures and control regarding its unit inspections to ensure compliance with HUD's housing quality standards, we estimate that more than \$903,000 in future housing assistance payments will be spent for units that are decent, safe, and sanitary over the next year. Our methodology for these estimates is explained in the Scope and Methodology of this audit report.

Agency Comments: The findings provided valuable insight into areas of improvement. LMHA respectfully requests review of the subsequent inspections due to the following agency concerns regarding the methodology used in identifying inspections to be audited as well as particular cited deficiencies:

- Due to the (5) month delay from the original full inspection to the audit inspection, the agency contends there is reason to support an inaccurate determination of non-compliance due to the wear and tear that occurred in the unit during the previous five months between the original inspection and audit.
- Inspections below were conducted prior to the most current administrative plan (4/1/2009) which the OIG used in making determination of deficiencies for these units. Due to the significant revisions made in the 4/1/09 Administrative Plan, deficiencies were identified by the OIG which had not yet been approved and adopted by the board. The previous Administrative Plan was well over ten years old, and the differences are substantial.

LMHA maintains an ongoing commitment to enhance the policies, procedures and internal controls which govern our administration of the Housing Choice Voucher Program. We acknowledge that the report identifies opportunities for improvement in our inspection process and have taken steps to incorporate the recommendations:

1A. Certify that the applicable housing quality standards violations have been corrected for the 77 units (51 non-quality control plus 26 quality control unit inspections cited in this finding.

1B. Reimburse its program \$81,310 (\$42,197 plus \$39,113) for housing assistance payments and \$8,403 (\$4,818 plus \$3,383) in associated administrative fees) for the 53 units (38 plus 15 units) that materially failed to meet HUD's housing quality standards.

1C. Implement adequate procedures and controls to ensure that all program units meet HUD's Housing Quality Standards to prevent \$903,984 in program funds from being spent over the next year on units that are in material noncompliance with the standards.

1D. Ensure that all inspectors are properly training and are familiar with Housing Quality Standards and can apply them appropriately.

1E. Ensure that all supervisory quality control inspectors are properly trained and are familiar with housing quality standards and can apply them appropriately.

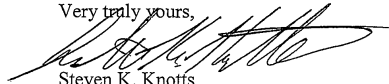
Ref to OIG Evaluation

Auditee Comments

1F. Implement a consistent quality control inspection program that is in accordance with HUD requirements and its own administrative plan.

We will be working with the HUD field office to incorporate these recommendations into our Corrective Action Plan.

Very truly yours,



Steven K. Knotts
Executive Director

OIG Evaluation of Auditee Comments

- Comment 1** We agree with the Authority’s assertion that HUD’s Housing Choice Voucher Guidebook 7420.10G does not identify a missing globe as a hazard. However, we made our determination based on the Authority’s housing quality checklist, entitled “Most Common Inspection Faults,” that lists light globes on all lights interior and exterior (except basement) as a common inspection fault. In addition, this violation was not listed as an exigent health and safety violation that predated the Authority’s previous inspections; therefore, we did not question the housing assistance payments.
- Comment 2** We performed tenant interviews, consulted with our appraiser, and reviewed the Authority’s latest inspection reports in conservatively determining whether a housing quality standards violation existed before the last passed inspection conducted by the Authority or whether it was noted on the last passed inspection conducted by the Authority and was not corrected. Also, HUD regulations at 24 CFR 982.401 require that all program housing meet HUD’s housing quality standards at the beginning of the assisted occupancy and throughout the tenancy. Therefore, we reported all violations identified at the time of our inspection so that HUD and the Authority could ensure that they were corrected. In addition, this violation was not listed as an exigent health and safety violation that predated the Authority’s previous inspections.
- Comment 3** We disagree with the Authority’s assertion that at the time of the original inspection, the Authority’s administrative plan did not address the requirement of ground fault circuit interrupters. The original inspection took place in December 2008; our determination was based on the Authority’s housing quality checklist used through December 31, 2008, entitled “Most Common Inspection Faults,” that lists ground fault circuit interrupters at all sinks including laundry and sump pumps as a common inspection fault.
- Comment 4** According to HUD’s Housing Choice Voucher Guidebook 7420.10G, the dwelling unit must be free of air pollutant levels that threaten the occupants’ health. The water control valves and spout were not water sealed flush to the wall, resulting in their separating from the wall, which allowed water intrusion that will more than likely cause mildew inside the wall. This outcome is probable since the tub is surrounded by mildew. Further, HUD’s publication, “The Key to Mold Control Is Moisture Control,” states that mold, often called mildew, which can grow almost anywhere—on walls, ceilings, carpets, or furniture—is a condition caused by wetness. Mold is caused by humidity or wetness, caused by water leaks, spills from bathtubs or showers, or condensation. Mold produces spores that float through the air and can cause health problems.
- Comment 5** According to HUD’s Housing Choice Voucher Guidebook 7420.10G, the building must provide an alternate means of exit in case of fire. The emergency exit must not be blocked. “Blocked” means that the exit is not useable due to

conditions such as debris, storage, being nailed shut, or a broken lock. An inverted door lock is an existing barrier that restricts and deprives emergency exit or use. The door can only be opened from the hall. The person inside the room does not have control and has been deprived of an exit under normal conditions or during emergency. There was a six-year-old child in the unit.

- Comment 6** According to HUD’s Housing Choice Voucher Guidebook 7420.10G, any sleeping room must have at least one window. If the window was designed to be opened, it must be in proper working order. The room has only one window, and the air conditioner unit is screwed to the window and window side frame; therefore, the window is not in proper working order. Also, according to regulations at 24 CFR 982.401(g)(2)(iv), any room used for sleeping must have at least one window. If the window was designed to be opened, the window must work. In addition, the guidebook states that the building must provide an alternate means of exit in case of fire. The emergency exit must not be blocked. See comment 5; the bedroom door also had an inverted lock.
- Comment 7** HUD’s regulations at 24 CFR 982.401(f)(2), when referring to outlets in both sections (ii) and (iii), specifically state that outlets must be in proper operating condition. Further, section 10.3 of HUD’s Housing Choice Voucher Program Guidebook 7420.10G discusses acceptability criteria for each of 13 housing quality standards performance requirements. The acceptability criteria for illumination and electricity performance requirements states in part that the public housing agency must be satisfied that the electrical system is free of hazardous conditions, including improper insulation or grounding of any component of the system. If outlets are not functioning as designed, they are a potential hazard. An inoperable ground fault circuit interrupter clearly is not “in proper operating condition.”
- Comment 8** HUD regulations at 24 CFR 982.401 require that a fixed basin, shower, or tub be in proper operating condition.
- Comment 9** HUD’s Housing Inspection Manual, General Health and Safety, section 8.7, states that types of hazards that may be present in the unit but not recorded before this item include a door that might fall because it is partially broken off its hinges. As mentioned in comment 2, this violation was not listed as an exigent health and safety violation that predated the Authority’s previous inspections.
- Comment 10** HUD’s Housing Choice Voucher Program Guidebook 7420.10G states that the Authority must be satisfied that the electrical system is free of hazardous conditions, improper connections, or improper insulation or grounding of any component of the system. A light fixture, if in place, must work properly, which includes emergency exit light fixtures. The guidebook further states that the condition and equipment of interior and exterior stairs, halls, porches, and walkways must not present a danger of tripping and falling. Emergency lighting must operate properly in an emergency for occupants not to trip and fall.

- Comment 11** HUD's Housing Choice Voucher Program Guidebook 7420.10G states that the dwelling unit must be structurally sound. The structure must not present any threat to the health and safety of the occupants and must protect the occupants from the environment. The guidebook also states that window and door surfaces (including door frame) must be in sufficient condition to support the installation and proper operation of window and door locks. As mentioned in comment 2, this violation was not listed as an exigent health and safety violation that predated the Authority's previous inspections.
- Comment 12** HUD's Housing Choice Voucher Program Guidebook 7420.10G states that the ceilings, walls, and floors must not have any serious defects such as severe bulging or leaning, large holes, loose surface materials, severe buckling, missing parts, or other serious damage. The structure must not present any threat to the health and safety of the occupants and must protect the occupants from the environment. As mentioned in comment 2, this violation was not listed as an exigent health and safety violation that predated the Authority's previous inspections.
- Comment 13** HUD's Housing Choice Voucher Program Guidebook 7420.10G states that improper operating conditions, including all conditions that may be unsafe such as broken or damaged source vents, flues, exhausts, and gas or oil liners that create a potential fire hazard or threat to health and safety, are not permitted.
- Comment 14** We performed tenant interviews, consulted with our appraiser, and reviewed the Authority's latest inspection reports in conservatively determining whether a housing quality standards violation existed before the last passed inspection conducted by the Authority or whether it was noted on the last passed inspection conducted by the Authority and was not corrected. Also, HUD regulations at 24 CFR 982.401 require that all program housing meet HUD's housing quality standards at the beginning of the assisted occupancy and throughout the tenancy. Therefore, we reported all violations identified at the time of our inspection so that HUD and the Authority could ensure that they were corrected.
- Comment 15** HUD's regulations at 24 CFR 982.401(h), performance requirement, state that the dwelling unit must be free of pollutants in the air at levels that threaten the health of occupants. Acceptability criteria at (2)(i) state that the dwelling unit must be free from dangerous levels of air pollution from carbon monoxide, sewer gas, fuel gas, dust, and other harmful pollutants. The ventilation system in the room was blocked by cardboard.
- Comment 16** HUD's regulations at 24 CFR 982.401(f) state that the dwelling unit must have sufficient electrical sources so occupants can use essential electrical appliances. The electrical fixture and wiring must ensure safety from fire.
- Comment 17** The violations noted in the audit report are consistent with published guidance, including the Section 8 Housing Inspection Manual, HUD's Housing Choice

Voucher Guidebook 7420.10G, HUD's regulations (24 CFR 982.401), and the Authority's program administrative plan including the inspectors' checklist in effect during the initial inspection. In addition, we performed tenant interviews, consulted with our appraiser, and reviewed the Authority's latest inspection reports in conservatively determining whether a housing quality standards violation existed before the last passed inspection conducted by the Authority or whether it was noted on the last passed inspection conducted by the Authority and was not corrected. Further, HUD regulations at 24 CFR 982.401 require that all program housing meet HUD's housing quality standards at the beginning of the assisted occupancy and throughout the tenancy. Therefore, we reported all violations identified at the time of our inspection so that HUD and the Authority could ensure that they were corrected. In certain instances, the violation was not listed as an exigent health and safety violation that predated the Authority's previous inspections. This condition was noted throughout our evaluation of the Authority's comments.

Comment 18 We acknowledge the Authority's efforts. The Authority's proposed actions, if fully implemented, should improve its procedures and controls to ensure that its quality control inspections are performed on a consistent basis and include a quality control supervisor. The Authority should provide supporting documentation to HUD's staff, who will work with the Authority, to resolve the recommendation.

Appendix C

HUD'S REGULATIONS AND THE AUTHORITY'S PROGRAM ADMINISTRATIVE PLAN

HUD's regulations at 24 CFR 982.1 state that HUD's Housing Choice Voucher program pays rental subsidies so eligible families can afford decent, safe, and sanitary housing.

HUD's regulations at 24 CFR 982.401 require that all program housing meet HUD's housing quality standards performance requirements both at commencement of assisted occupancy and throughout the tenancy.

HUD's regulations at 24 CFR 982.404 require that owners of program units maintain the units in accordance with HUD's housing quality standards. If the owner fails to maintain the dwelling unit in accordance with HUD's housing quality standards, the authority must take prompt and vigorous action to enforce the owner's obligations. The authority's remedies for such breach of the housing quality standards include termination, suspension, or reduction in housing assistance payments and termination of the housing assistance payments contract. The authority must not make any housing assistance payments for a dwelling unit that fails to meet the housing quality standards unless the owner corrects the defect within the period specified by the authority and the authority verifies the correction. If a defect is life threatening, the owner must correct the defect within 24 hours. For other defects, the owner must correct them within 30 calendar days.

HUD's regulations at 24 CFR 982.153 state that the public housing authority must comply with the consolidated annual contributions contract, the application, HUD regulations and other requirements, and its program administrative plan.

The Authority's program administrative plan, dated April 1, 2009, page 8-5, Clarifications of HUD Requirements, states that as permitted by HUD, the Authority has adopted the following specific requirements that elaborate on HUD standards: (1) in areas where plaster or drywall is sagging, severely cracked, or otherwise damaged, it must be repaired or replaced; (2) window sashes must be in good condition (solid and intact) and properly fitted to the window frame, damaged or deteriorated sashes must be replaced, and window screens must be in good condition (only applies if screens are present); (3) all exterior doors must be weather tight to avoid any air or water infiltration, be lockable, have no holes, have all trim intact, and have a threshold; and (4) if window security bars or security screens are present on emergency exit windows, they must be equipped with a quick release system. The owner is responsible for ensuring that the family is instructed on using the quick release system.

The Authority's program administrative plan, dated April 1, 2009, page 8-6, Life Threatening Conditions, states that HUD requires the Authority to define life-threatening conditions and to notify the owner or the family (whichever is responsible) of the corrections required. The responsible party must correct life-threatening conditions within 24 hours of Authority notification. The following are considered life-threatening conditions: any condition that

jeopardizes the security of the unit; major plumbing leaks or flooding, waterlogged ceiling or floor in imminent danger of falling; natural or LPgas or fuel oil leaks; any electrical problem or condition that could result in shock or fire; absence of a working heating system when outside temperature is below 50 degrees Fahrenheit; utilities not in service, including no running water; conditions that present the imminent possibility of injury; obstacle which prevents tenant's entrance or exit; and absence of a functioning toilet in the unit.

The Authority's program administrative plan, dated April 1, 2009, page 8-13, Quality Control Inspections, states that HUD requires an Authority supervisor or other qualified person to conduct quality control inspections of a sample of units to ensure that each inspector is conducting accurate and complete inspections and that there is consistency in the application of housing quality standards. The unit sample must include only units that have been inspected within the preceding three months. The selected sample will include (1) each type of inspection (initial, annual, and special), (2) inspections completed by each inspector, and (3) units from a cross-section of neighborhoods.