



PERFORMANCE AUDIT • REPORT NUMBER 25-03 • DECEMBER 2025

Stable Housing Accountability Program

Improvements needed to ensure effective grant execution

Greg S. Griffin | State Auditor
Lisa Kieffer | Executive Director



DOAA
Georgia Department
of Audits & Accounts

This page intentionally blank



Performance Audit Division

Greg S. Griffin, State Auditor
Lisa Kieffer, Executive Director

Why we did this review

House Bill 1410, which was passed during the 2024 legislative session, required the state auditor to conduct a performance audit of expenditures for the Stable Housing Accountability Program (SHAP).

Based on statutory requirements, this audit evaluated whether the grant award process followed statute and best practices, whether funds were spent on eligible expenditures, and whether performance metrics were consistent with best practices.

Reimbursements were also to be included but could not be evaluated because the program only recently began processing reimbursements. We will release an addendum to this report in 2026 that addresses provider reimbursements.

About the Stable Housing Accountability Program

In 2024, House Bill 1410 created a state-funded homelessness grant program known as the Stable Housing Accountability Program (SHAP). While statutorily under the State Housing Trust Fund, SHAP is primarily administered by the Department of Community Affairs (DCA).

The General Assembly appropriated \$1 million to SHAP for fiscal year 2025 to cover the first year of grants and administrative expenses. DCA selected six providers to receive awards for calendar year 2025. All six were experienced providers already providing services similar to those required by SHAP.

Stable Housing Accountability Program

Improvements needed to ensure effective grant execution

What we found

We identified areas for improvement in grant award and certification processes. Notably, the Department of Community Affairs (DCA) did not ensure reviewers scored applications consistently, which impacted grant selection. Additionally, the certification process was not developed until after grants were awarded, resulting in delays that prevented providers from seeking reimbursements until more than seven months of the grant year had passed. DCA indicated the short implementation period contributed to these issues, and it is making changes to these processes for the upcoming grant year.

SHAP's award process lacked controls necessary to ensure grants were appropriately awarded.

DCA did not have sufficient controls to ensure consistent scoring and calculations for SHAP grant applications. While DCA staff indicated the process was modeled after other Housing Assistance Division grants, the absence of formal procedures led to inconsistencies in how staff scored the applications. For example, one reviewer awarded full points to a category with no comments while another scored significantly lower and noted missing elements on the same application. DCA's post-scoring review process did not ensure these inconsistencies were identified and addressed. We also identified score calculation errors that led to one grantee receiving an award despite having a lower score than another applicant.

Additionally, SHAP's application period was shorter than other grants—there were only 18 days from the grant announcement to the application deadline. By comparison, the U.S. Department of Housing and Urban Development has a minimum of 60 days (30 in limited circumstances). For the 2026 grant cycle, DCA increased the SHAP application period to 43 days.

Delays in the certification process prevented timely reimbursements to SHAP providers.

SHAP providers faced significant delays in accessing grant funds because of an extended certification process. Although statute only required the application to be posted by January 1, 2025, DCA had selected grantees and directed them to begin services on this date. However, DCA did not certify that providers met statutory requirements until more than seven months after program services began. Certification is required by statute before providers can request reimbursement (unique to this program); as a result, providers were unable to access their funds for the majority of the grant year. For the 2026 grant cycle, DCA plans to complete the certification process before issuing awards.

DCA did not establish performance measures to assess program and provider performance.

DCA did not establish performance measures for SHAP until late in the 2025 grant year, preventing effective monitoring of program and provider outcomes. Best practices indicate agencies should establish performance measures to communicate program goals and monitor progress toward achieving defined objectives. These should be communicated to potential awardees prior to issuing the awards. However, DCA did not establish performance measures until September 2025, approximately nine months after the 2025 grant period began.

Performance measures published for the 2026 grant year focus primarily on program outputs, such as the number of participants enrolled or receiving services, rather than outcomes to measure program effectiveness (e.g., percentage of clients who achieved self-sufficiency). Additionally, DCA staff cited the fact that clients can receive assistance from the program for up to 18 months as the reason to wait to define what constitutes the successful completion of a SHAP program until at least June 2026. DCA will establish baseline performance by the 2027 grant period.

What we recommend

DCA should create written, standard procedures for the SHAP grant award process and implement sufficient controls to ensure scoring consistency. Additionally, DCA should continue with its plan to certify providers prior to issuing awards. Prior to signing contracts with providers, DCA should consider additional outcome-based performance measures and establish clear methods to collect and monitor the data.

See **Appendix A** for a detailed listing of recommendations.

Agency Response: “DCA agrees with many elements of the report’s findings and recommendations and has already taken steps to address them and implement additional internal controls in the 2026 grant cycle.” DCA stated, “The timeline is extremely important to contextualize this audit.” DCA noted it “was under pressure to launch the program quickly” and “the accelerated timeline...impacted the program administration in its first year.” The audit began “four months after the single staff professional was hired to create the program and eleven business days after awards were announced.”

Table of Contents

Purpose of the Audit	1
Background	1
Findings and Recommendations	9
Finding 1: SHAP providers generally did not expand capacity or services after receiving the grant.	9
Finding 2: SHAP providers were approved for grants early but unable to access reimbursements for most of the year.	12
Finding 3: DCA’s award process did not ensure SHAP applicants were scored consistently.	15
Finding 4: DCA’s certification process did not ensure providers met all requirements.	18
Finding 5: The SHTF director was fully funded by SHAP funds but also performed non-SHAP duties.	21
Finding 6: DCA did not implement measures to monitor SHAP providers’ performance during the 2025 grant period.	22
Appendices	26
Appendix A: Table of Findings and Recommendations	26
Appendix B: Objectives, Scope, and Methodology	28
Appendix C: Counties with Homeless Populations of 100 or More	31
Appendix D: SHAP Programs by Provider	32

Purpose of the Audit

This performance audit was conducted in accordance with House Bill 1410—effective July 1, 2024—which required a performance audit of all expenditures for the Stable Housing Accountability Program (SHAP). The bill also required a review of the state’s awarding of contracts and grants, the use of metrics associated with expenditures, and whether performance metrics are met. Based on these requirements, we addressed the following questions:

- To what extent did the grant award process for SHAP follow statutory and best practice guidance?
- To what extent has the Department of Community Affairs (DCA) ensured that SHAP funds have only been spent on eligible, SHAP-related expenditures?
- To what extent has DCA developed performance metrics that measure the success of SHAP and are consistent with best practices?

A description of the objectives, scope, and methodology used in this review is included in **Appendix B**. A draft of the report was provided to DCA for its review, and pertinent responses were incorporated into the report.

Background

Homelessness in Georgia

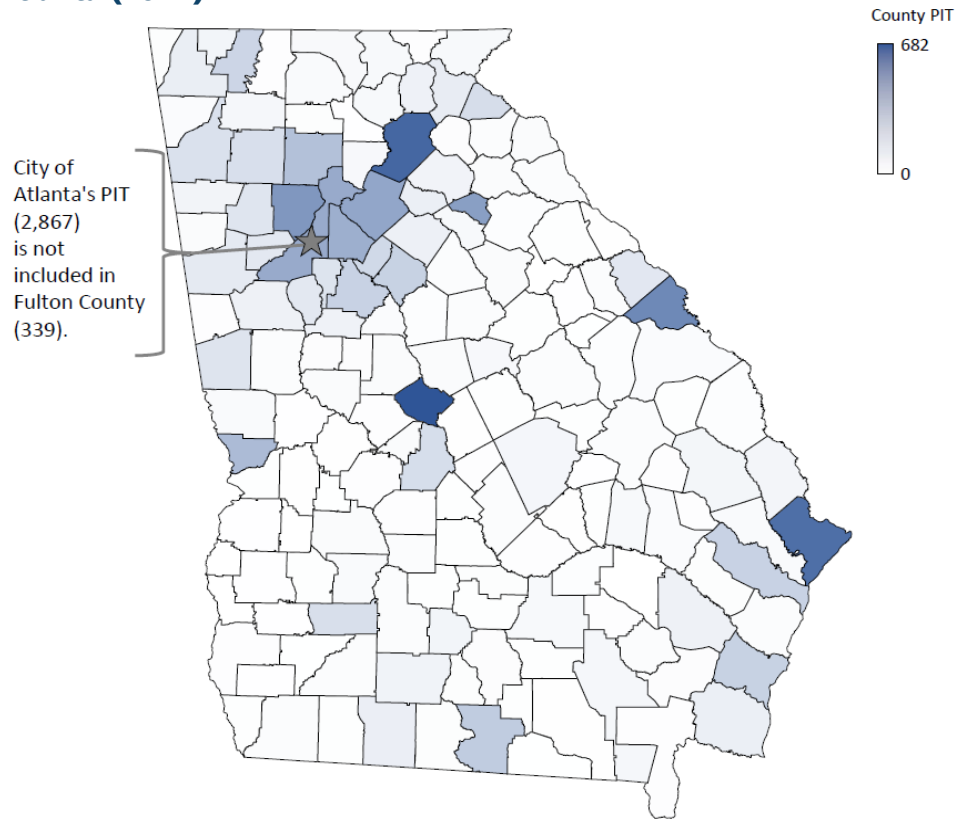
O.C.G.A. § 8-3-301 defines “homeless” as “persons and families who have no access to or can reasonably be expected not to have access to either traditional or permanent housing that can be considered safe, sanitary, decent, and affordable.” Those experiencing homelessness are frequently categorized as sheltered or unsheltered; sheltered individuals reside in an emergency shelter or transitional housing, while unsheltered individuals’ primary residence is a public or private place not designed for regular sleeping accommodations (e.g., cars, parks).

The U.S. Department of Housing and Urban Development (HUD) requires each state to conduct a Point-in-Time (PIT) count of sheltered and unsheltered people experiencing homelessness on a single night each January.¹ In 2024, the PIT count in Georgia was 12,290, with most individuals experiencing homelessness residing in metro areas and the largest concentration in the City of Atlanta (see **Exhibit 1 & Appendix C**). Approximately 54% of homeless individuals were unsheltered.

¹ PIT counts are conducted by Continuums of Care (CoCs), which are regional or local planning bodies that coordinate housing and services funding for the homeless. CoCs exist within all 50 states; Georgia has nine CoCs—eight that each cover one county and a ninth that covers the remainder of the state.

Exhibit 1

Homelessness in Georgia is primarily concentrated around metro Atlanta (2024)



Source: HUD data

The federal government provides states with funds to address homelessness.² These funds are primarily provided by HUD but can also come from other federal agencies that financially support programs related to housing, education, healthcare, and employment services. The homelessness programs and services are administered at the state and local levels, but they are typically subject to federal regulations based on the funding source.

Stable Housing Accountability Program

Passed in 2024, House Bill 1410 established the Stable Housing Accountability Program (SHAP), a fully state-funded grant program to address homelessness. The General Assembly appropriated \$1 million for fiscal year 2025 to fund the first year of grants and administrative expenses related to SHAP.

Two Georgia state entities are primarily tasked with administering SHAP:

- The **State Housing Trust Fund for the Homeless (SHTF) Commission** was previously established in O.C.G.A. § 8-3-306 to accept

² For more information on such programs in Georgia, see DOAA's *Homelessness Spending audit (2024)*: <https://www.audits2.ga.gov/reports/summaries/homelessness-spending/>

and disburse money for residential housing projects in a separate state trust fund. House Bill 1410 added SHAP funds to the Commission's responsibilities, requiring that a stable housing accountability program be certified by the Commission before receiving any SHAP funds. Because the SHTF does not have its own staff, the Commission contracts with staff from the Georgia Department of Community Affairs, as permitted by statute.

- The **Georgia Department of Community Affairs (DCA)** is primarily responsible for administering SHAP through its contract with the SHTF Commission. In September 2024, DCA created a SHTF office director position to lead SHAP's implementation and administration, in addition to managing other Commission duties. In fiscal year 2025, DCA's Housing Assistance Division administered SHAP³ (one of the few housing programs administered by DCA that is funded exclusively with state appropriations), as well as numerous federal grants related to housing programs and assistance, totaling approximately \$578 million.

House Bill 1410 defined the eligibility criteria for SHAP program participants. Specifically, similar to the standard definition of homelessness found in federal code,⁴ O.C.G.A. § 8-3-301(8) states that program participants in a stable housing accountability program must be individuals (along with their immediate families, if any) whose:

- Primary nighttime residence is in a public or private place not designed or used as medium- or long-term sleeping accommodation (such as a car, park, abandoned building, bus or train station, airport, or campground);
- Temporary residence is in a public or private charitable shelter not designed as a permanent dwelling place; or
- Current housing will be imminently lost if not paid for by the government or a charitable organization, in addition to the resources to obtain other permanent housing.

O.C.G.A. § 8-3-311(d) further establishes uniform, statewide minimum standards for stable housing accountability programs. As shown in **Exhibit 2**, statute differentiates between the minimum requirements for stable housing accountability programs and those for program participants.

³ DCA's Strategy and Key Initiatives Team began overseeing SHAP in September 2025.

⁴ See 42 U.S. Code § 11302.

Exhibit 2**HB 1410 establishes minimum standards for stable housing accountability programs and participants**

Program Requirements	
Provide Housing	Provide immediate and stable housing to all participants
Limited Stay	Limit stay to a maximum of 18 months, or when stable housing is obtained/offered
Long-Term Housing	Provide ongoing assistance for obtaining long-term affordable housing
Accountability	Remove participants who do not comply with program requirements, such as a good-faith effort to maintain sobriety from drugs and alcohol
Inspections	Conduct regular inspections of common areas and residential units
Participant Requirements	
Citizenship & GA Residency	Provide proof of U.S. citizenship and execute an affidavit verifying continuous residency in Georgia for the previous 12 months
Training/Education	Participate in free and relevant job training and educational opportunities until stable employment is obtained
Job Search	Engage in an active search and apply for stable employment
Maintain Employment	If employed, maintain employment as long as it is available
Counseling	Participate in counseling, mental health care, and substance abuse treatment programs, as necessary
Drug Testing	Submit to regular drug and alcohol testing
Criminal Activity	Abstain from criminal activity
Care of Minors	If minor children are residents, ensure they receive adequate nutrition, health care, and education
Compliance	Submit to regular review of compliance with applicable terms and conditions of SHAP

Source: O.C.G.A. § 8-3-311

SHAP is modeled after accountability courts, which makes it unique among state homelessness programs.

SHAP was intended by sponsoring legislators to incorporate aspects of accountability courts (such as requiring sobriety and job training) to address the immediate needs of homeless individuals and help participants attain self-sufficiency.⁵ Such provisions are different than those of many federal homelessness programs, which often provide housing and related services (such as those that address behavioral health issues) without requiring participation in those services to obtain or retain housing. According to DCA, the use of accountability courts as a model, along with other features (state-funded nature and detailed rules in legislation), makes SHAP unique among state homelessness programs.

SHAP Grant Cycle

SHAP's grant cycle is generally similar to other grants managed by DCA's Housing Assistance Division. As shown in **Exhibit 3** and described below, the process includes an application and award phase, a certification phase (which is unique to SHAP), and a reimbursement phase. SHAP grants are awarded on an annual basis, and current grantees must apply for renewal each year.

⁵ Unlike an accountability court, participation in a stable housing accountability program is voluntary and does not assume that a participant has engaged in criminal conduct.

Exhibit 3**SHAP's grant cycle is similar to other grants managed by DCA**

Source: DCA documents and O.C.G.A. § 8-3-311

Application and Grant Award

House Bill 1410 required the SHTF Commission to establish processes and criteria related to applying for SHAP funding prior to January 1, 2025. Specifically, the SHTF Commission was required to develop an application process for providers to apply for funding; publish uniform statewide minimum standards for a stable housing accountability program; and publish and maintain information related to the application process, minimum standards, approval criteria, and available funding for transitional housing projects on DCA's website.

House Bill 1410 also established the minimum criteria that must be used to evaluate the applications of possible SHAP awardees. These criteria include:

- Total number of stable housing accountability program clients/participants;
- Provider's ability to leverage other funds/in-kind services for the program;
- Geographic distribution of existing stable housing accountability programs;
- Quality of the various forms of assistance to be offered to program participants; and
- Likelihood that the provider will fulfill the terms and conditions included in House Bill 1410.

Statute allows DCA to include additional criteria for possible SHAP awardees during the application process. For example, DCA established minimum threshold requirements to apply for SHAP funding, such as being a registered business entity with the State of Georgia. DCA also required SHAP applications to consist of a project narrative document, a proposed budget, and several other attachments that demonstrate the applicant's ability to meet SHAP requirements as defined by statute.

After House Bill 1410 became law, DCA began the SHAP implementation in Fall 2024. DCA established a 100-point rating scale and criteria used to score all SHAP applicants that met its minimum threshold requirements. Based on this

Statute did not specify the number or amount of grants to be awarded, so DCA used staff judgement and considered provider characteristics and number served.

scoring process, DCA subsequently awarded SHAP's 2025 funding to the six applicants that scored the highest on its 100-point rating scale. DCA indicated that it set a minimum award of \$25,000 and considered multiple factors when determining the final grant amount, including a provider's housing model, access to additional resources, and the number of people proposed to be served. Awardees were notified in late December and expected to begin serving SHAP clients by January 1, 2025.

Certification

House Bill 1410 required that all stable housing accountability programs be certified by the SHTF Commission before they can receive reimbursements for providing SHAP services. The SHTF Commission must certify SHAP programs that, at a minimum, will meet the uniform standards established by House Bill 1410 (see **Exhibit 2** on page 4).

The certification process for grant year 2025 began after SHAP awardees had been selected, which is permitted by statute.⁶ To be certified, DCA required those awarded funds to submit program design documents, which included a narrative describing how the providers would implement their programs. DCA then conducted site visits of the facilities used by SHAP awardees. After DCA completed all tasks related to the certification process, the SHTF Commission accepted DCA's recommendation to certify all SHAP awardees.

Reimbursement

Like most of the grants administered by DCA's Housing Assistance Division, SHAP grantees receive reimbursements rather than all funds at once. In addition to being certified by the SHTF Commission, statute requires all providers of stable housing accountability programs to sign a contract agreeing to comply with SHAP requirements to receive their reimbursements.

Once SHAP providers are certified and have signed the contract referenced above, they may seek reimbursement for any eligible SHAP-related expenses incurred during the grant period (e.g., January 1 through December 31, 2025). This includes retroactive reimbursements for expenses that may have been incurred prior to certification but after the award process. DCA has determined that any SHAP award amounts not expended by the end of the grant year will no longer be eligible for reimbursement.⁷

DCA established additional guidelines and policy requirements related to the reimbursement process for providers in the SHAP grant agreement (i.e., contract) and published these on its website. According to the grant agreement, SHAP providers are required to submit at least one reimbursement request per month. Each reimbursement request must include a DCA-issued Reimbursement

⁶ DCA indicated the certification process will occur prior to final awardee selection for 2026 grants. See page 14 for additional information.

⁷ For the 2025 grant cycle, DCA will accept reimbursement submissions through January 31, 2026.

Homeless Management Information Systems

Homeless Management Information Systems (HMIS) allow local Continuums of Care (i.e., regional or local planning bodies that coordinate housing and services for the homeless) and service providers to collect client-level data on the provision of housing and services to homeless individuals and families, as well as persons at risk of homelessness. Examples of client data collected and recorded in HMIS include demographic information, history of homelessness, income and employment status, services received, dates when clients entered and left programs, and the reasons why clients left a program. DCA requires providers that receive SHAP funding to enter data into HMIS for their respective SHAP programs as a condition of receiving funding, which is consistent with HUD and other federal agencies’ requirements to receive federal funding related to homelessness programs.

Request Form that documents the costs eligible for reimbursement, in addition to Homeless Management Information System (HMIS) data quality reports pertaining to SHAP.

As shown in **Exhibit 4**, DCA has determined a variety of program costs are eligible for SHAP reimbursements. These include expenditures for transportation, housing, treatment, and case management.

Exhibit 4
A variety of costs are eligible for reimbursement under SHAP

Case Management	Assessments and coordination of housing and support services needed by clients
Housing	Operations for emergency shelters or long-term shelters / residential facilities
Transportation	To/from medical care, employment, or childcare
Nutrition	Food costs for children under 18, not to exceed \$200 per month per child
Childcare	Costs for care at a Department of Early Care and Learning licensed center
Mental Health	Direct outpatient treatment
Substance Abuse Treatment	Direct outpatient treatment
Capital Rehabilitation	Upgrades, repairs, or additions to property, including building renovations, upgrades, remodeling, and/or adding extra rooms

Source: 2025 SHAP Notice of Funding Availability

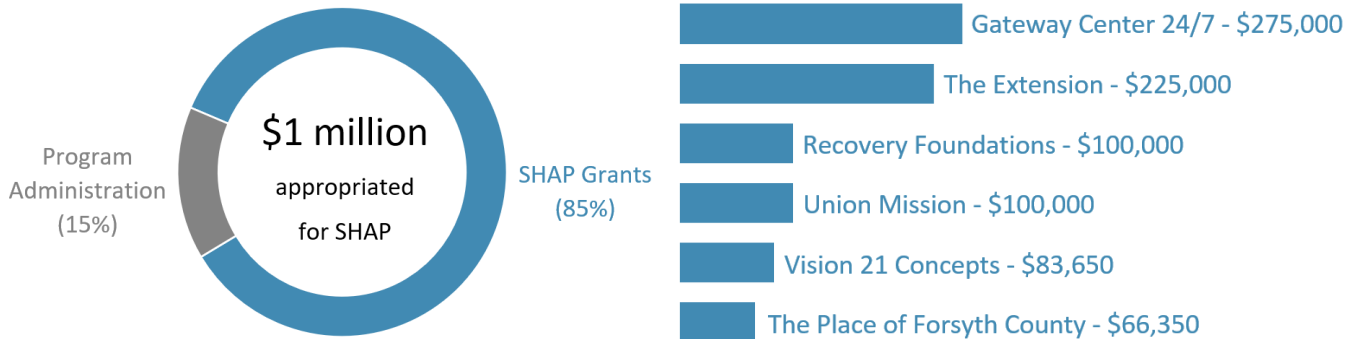
SHAP Appropriations and Awards

For fiscal year 2025 (SHAP’s first year), the General Assembly appropriated \$1 million to the program.⁸ As shown in **Exhibit 5**, \$850,000 was awarded as grants to SHAP providers, while the remaining \$150,000 was reserved for program administration (primarily for the SHTF director’s salary and benefits). The General Assembly increased total SHAP appropriations to \$1.75 million for fiscal year 2026.

⁸ SHAP funds are appropriated for the state’s fiscal year, but SHAP grants follow the calendar year. Under O.C.G.A. § 8-3-303, SHTF funds (including SHAP) do not lapse, so unspent funds do not have to be returned to the State Treasury. Unspent SHAP funds can be spent on future SHAP grants or administration.

Exhibit 5

85% of SHAP funds went to providers (FY 2025)¹



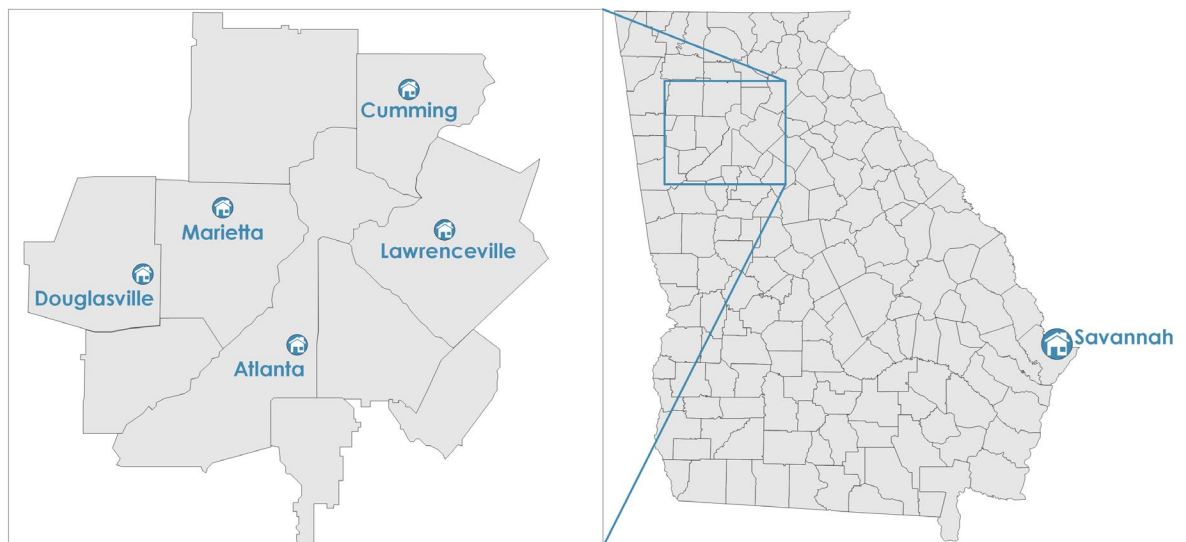
¹The funds were appropriated for fiscal year 2025, but the grant period was based on the calendar year (January-December 2025). Funds appropriated to the SHTF do not lapse.

Source: DCA records and the Appropriations Act

As shown in **Exhibit 5**, the SHTF Commission selected six nonprofit providers to receive SHAP funds in calendar year 2025. These providers operate primarily in metro Atlanta, with one in Savannah (see **Exhibit 6**). In total, SHAP funds have served approximately 155 individuals through October 2025, ranging from 6 to 69 by provider. See **Appendix D** for more information regarding the SHAP providers.

Exhibit 6

Five of six SHAP providers were in metro Atlanta (CY 2025)



Source: DCA records

Findings and Recommendations

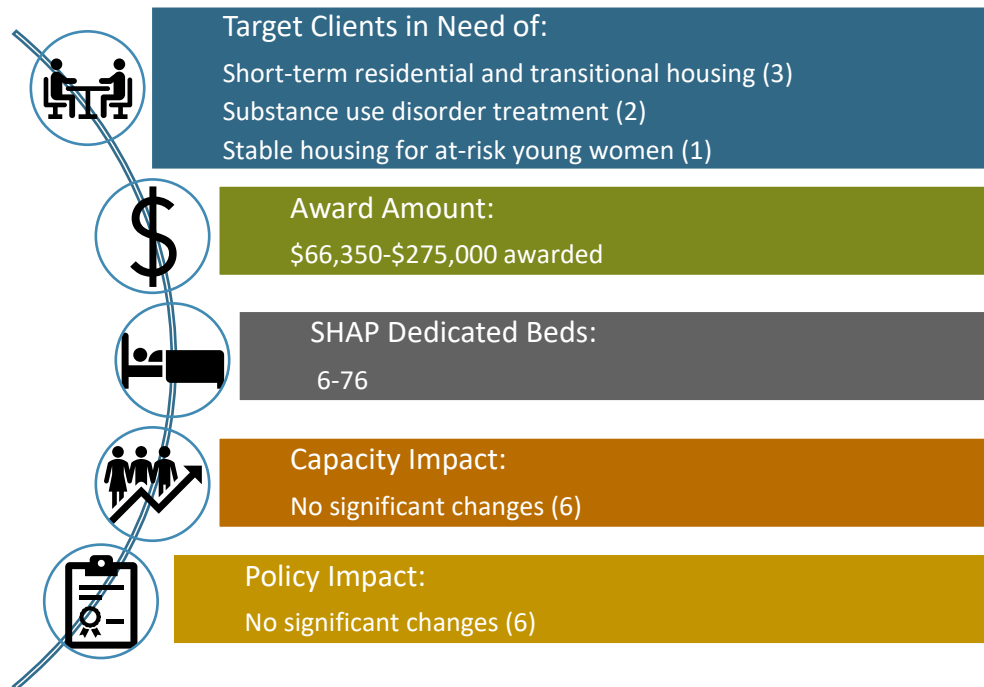
Finding 1: SHAP providers generally did not expand capacity or services after receiving the grant.

The six providers that received SHAP grants in calendar year 2025 are experienced providers of varying sizes and missions. All had previously provided their clients with services required by SHAP's statute, though some minor modifications have been required to fully comply. Grant awards were described as helping to maintain capacity by supplementing existing funds or filling budget gaps.

As summarized in **Exhibit 7**, SHAP awards were given to six providers of varying sizes and missions. Most offer other programs and services in addition to SHAP, such as emergency shelters, food pantries, re-entry from incarceration, and case management. The providers focus on different client groups, such as those needing short-term residential or transitional housing, those being treated for substance use disorder, or at-risk young women. Additional details for each provider can be found in **Appendix D**.

Exhibit 7

Summary of SHAP Providers (CY 2025)¹



¹The number shown in parentheses indicates the number of providers in each category.

Source: Provider applications, program designs, and interviews

Each provider's SHAP grant ranged from \$66,350-\$275,000 and represented only one of several fund sources for the providers. As such, SHAP funding generally did not expand providers' bed capacity or require any new services.

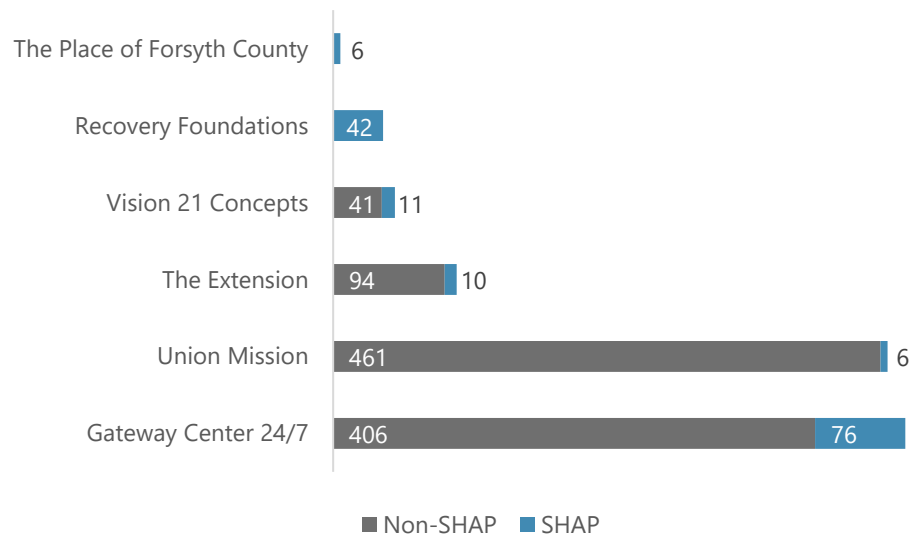
Each area is described below.

Capacity Impacts

As shown in **Exhibit 8**, the number of beds dedicated to the SHAP program for grant year 2025 varied significantly, ranging from 6 to 76. Four of the six providers dedicated a portion of their beds to the SHAP program, meaning only a segment of clients (between 1% and 21%) would be subject to all SHAP requirements.⁹ The two providers that dedicated all beds to SHAP were also the two providers with the smallest client population.

Exhibit 8

SHAP beds consist of some or all existing beds (CY 2025)¹



¹ Figures are based on provider estimates, as confirmed by DCA. Total capacity includes all provider facility locations.

Source: SHAP applications, program designs, and provider interviews

None of the six providers described SHAP as expanding the number of beds in their facility, because the SHAP funds contribute to only a portion of overall services that a client may receive. However, several providers described it as helping to maintain their existing capacity by supplementing current fund sources or supplanting funds that had been lost. One provider stated the SHAP funding enabled them to hire an additional case manager and thus maintain existing capacity that likely would have been lost due to funding constraints. Another provider stated that clients served with SHAP funding are not charged for services received (non-SHAP clients are charged between \$10 per night or a monthly fee for housing and other services). Additionally, all providers indicated they would consider expanding capacity if provided additional funding in future years.

⁹ As described in the next section, this does not reflect a large change in service provisions or requirements. Providers described this as largely modifications to data entry in HMIS or citizenship verifications.

Service and Policy Impacts

According to statute, SHAP providers are required to assist participants with obtaining long-term affordable housing. Prior to obtaining a SHAP grant, all six providers offered short-term housing with a goal of ensuring clients become self-sufficient. To that end, providers stated they were already fulfilling SHAP service requirements by helping their clients obtain permanent housing (e.g., renting an apartment, moving back in with family), search for or maintain stable employment, and obtain mental health counseling and substance abuse treatment (as needed). As described below, most providers did not have to significantly adjust their policies or practices to comply with SHAP-specific requirements.

- **Maximum Stay** – Providers are permitted to serve SHAP clients for no longer than 18 months; however, all providers stated their clients typically stay for less than that duration (e.g., no more than 90 days, 9-12 months). Providers indicated stays longer than 18 months are rare but proposed that in those instances eligible clients would continue to be served in another transitional housing program that they or another provider manage. For example, one provider indicated it would continue to serve the client with private funds. Another provider indicated that clients who might require a longer stay (e.g., due to medical issues) would not be enrolled in SHAP because they likely could not meet the work requirement.
- **Residency and Citizenship Verifications** – Statute limits SHAP participants to Georgia residents and U.S. citizens. None of the six providers had previously required clients to be Georgia residents, and each developed its own method or document to use for verification. Additionally, four providers had not previously verified their clients were U.S. citizens and described new verification methods, including checking a state-issued identification card or birth certificate in addition to following the statutory requirement to execute a residency affidavit (e.g., legally binding documents the client signs affirming they are a citizen).
- **Drug Testing** – Statute states programs must require clients to submit to regular drug and alcohol testing and remove clients who do not sustain good faith efforts to maintain their sobriety. (DCA staff stated the statute is intentionally broad to give providers flexibility.) None of the providers reported updating their drug testing policies, though the frequency of drug testing varied. (See Finding 4 for concerns related to DCA's enforcement of regular drug testing.) During interviews with the audit team, all six providers stated they test their clients upon intake, and three providers perform additional random or weekly tests. All providers indicated they test more frequently if the client exhibits suspicious behavior or failed a prior test. Additionally, one provider created new consequences for a failed test; these consequences include a behavioral contract and referral to substance abuse treatment.

- **Data Entry** – Per the award contract signed with DCA, SHAP providers are required to enter data into the Homeless Management Information Systems (HMIS, which is also used for federal homelessness grants). Examples of required data include client demographics, exit dates, goals, and services that were provided. Only one provider had not previously used HMIS because it did not receive federal funding; another had not entered client service data before SHAP.
- **Child-Related Requirements** – None of the six providers currently incorporate families and children as recipients of SHAP services. As such, no provider is subject to the statutory requirements to ensure nutrition counseling and childcare services are provided. However, two providers serve women with children through other programs, and one of these providers stated they were interested in expanding SHAP to those clients in future grant years.

DCA’s Response: “Non-profit service providers are dependent on outside funding to maintain services. Without the SHAP funding, it is difficult to assume that SHAP service providers would have been able to serve these individuals. On an accelerated timeline, it is impractical to expect new service providers to meet SHAP funding requirements. To expect a small-scale pilot initiative to be the catalyst for launching entirely new service providers is also unrealistic. Furthermore, there is no criteria, in statute or elsewhere, for SHAP providers to expand capacity or services after receiving the grant.”

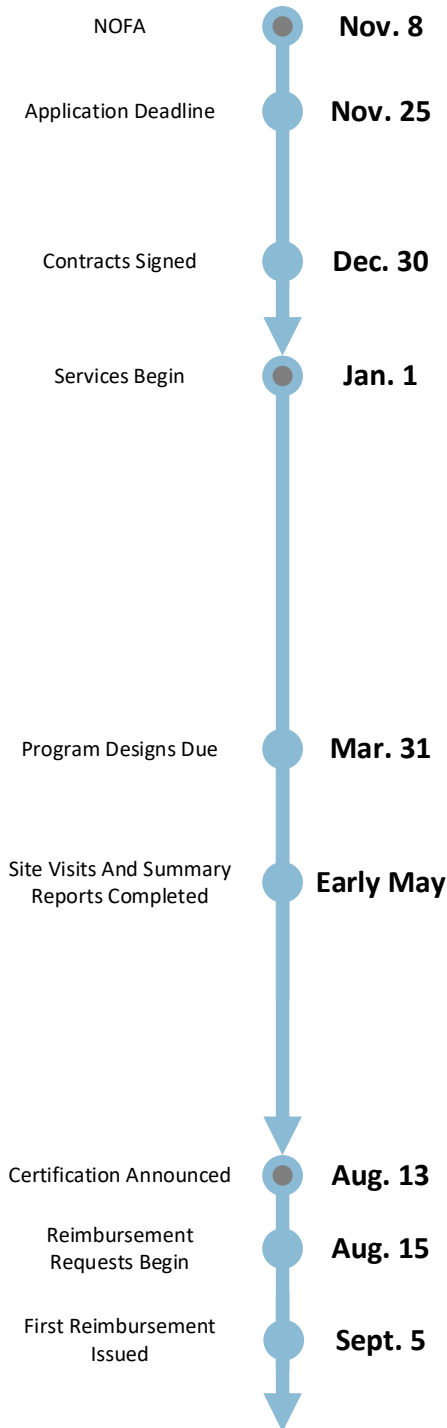
Auditor’s Response: The finding describes how the funding was used. It does not include recommendations for using the funding differently.

Finding 2: SHAP providers were approved for grants early but unable to access reimbursements for most of the year.

The SHAP grant’s implementation timeline created issues for applicants and grantees. The application timeline ensured awards were made by DCA’s intended date; however, providers were given less than three weeks to submit their applications. Additionally, DCA did not certify that grant awardees were meeting statutory requirements until more than seven months after program services began. Because certification is statutorily required prior to reimbursement, SHAP providers were unable to access grant funds for most of the grant year.

SHAP legislation was passed during the 2024 legislative session and went into effect on July 1, 2024, when DCA began receiving appropriations to implement the program. The legislation required the SHTF Commission to implement certain program components prior to January 1, 2025. This included publishing

Exhibit 9
SHAP awardees could not access funds for most of the 2025 grant year



Source: DOAA review of DCA documents and staff interviews

an application, minimum program standards, and the available funding amount. DCA fulfilled this statutory requirement by posting all three components in a Notice of Funding Availability (NOFA)¹⁰ on its website in November 2024.

DCA determined that SHAP's grant year would follow the calendar year, with the first grant period beginning on January 1, 2025.¹¹ As shown in the timeline in **Exhibit 9**, the application process was completed and grant awardees were selected before this date; however, grant awardees were unable to request reimbursements until August due to an extended certification period.

- **Application Timeline** – While not required by statute, DCA sought to complete its award process by January 1, 2025. With the publication of the NOFA, DCA first announced SHAP on November 8, 2024, and accepted applications from November 15-25. The 18 days from the NOFA publication to the application deadline were shorter than typically observed in federal grants (minimum of 30-60 days) and DCA's other housing grant programs (23-123 days).

It should be noted that DCA has not established policies related to grant announcements, including a minimum timeframe to ensure applicants have sufficient time to complete their applications. Providers awarded SHAP grants stated they were not impacted by the short timeline because they were already providing similar services and some had pre-prepared grant applications. However, the timeline may have impacted other applicants that were unprepared for the short application period.

- **Certification Timeline** – Unlike other homelessness grant programs, SHAP recipients are statutorily required to be certified as "meeting the terms and conditions" of O.C.G.A. § 8-3-311 prior to receiving reimbursements. As such, DCA was required to create a certification process specifically for SHAP (see Finding 4 for a description). This process began in January after

¹⁰ NOFAs are a common method by which DCA announces a grant opportunity to the public. NOFAs typically contain the purpose of the grant, the amount of funds available (including minimum and maximum grant amounts), eligibility of activities and applicants, and application procedures, processes, and timeframes.

¹¹ While the SHTF received funds for SHAP on July 1, 2024, there was no statutory requirement for the program to begin on January 1, 2025. Because SHAP is part of the SHTF, unspent funds do not lapse to the State Treasury.

SHAP program delays prevented a review of reimbursements

As noted previously, SHAP providers cannot receive reimbursements until contracts are signed and the programs are certified. All SHAP providers signed contracts in December 2024, but SHTF did not certify the selected grantees until August 13, 2025. As a result, the first reimbursement requests were not received until August 15. Therefore, it was not possible to include a review of program reimbursements as part of this review.

By September 23, DCA had received 10 reimbursement requests from grantees for approximately \$262,000. In mid-October, two reimbursements had been issued, while most were still under review pending additional information from providers. DCA indicated reimbursement processing typically takes 45-60 days.

An evaluation of the reimbursement process requires access to documentation for a significant portion of each grantee's requests, as well as evidence of DCA's review and approval processes. Given the small number of reimbursements processed as of the drafting of this report, it was not possible to complete the analysis and meet the statutory reporting deadline of December 31. As a result, we will complete that portion of the review once the 2025 grant year is complete and all reimbursements have been issued. We will issue an addendum to this report in Spring 2026.

awardees had been notified and services were expected to begin. In its training to providers, DCA indicated providers would be certified and able to submit reimbursement requests by April 30. However, the SHTF Commission did not certify programs until August 13, 2025—more than four months after required program designs were submitted (March 31) and three months after the SHTF director's summaries of site visits and program design reviews were submitted to DCA leadership (early May). DCA did not provide an explanation for the length of time required for activities that occurred during this period.

As previously discussed, the delay in certifying providers meant no reimbursement requests could be submitted for most of the 2025 grant year (the first requests were received in late August). Some providers indicated this put constraints on their budget planning. For example, one provider described having to use \$50,000 in reserves to cover the costs of SHAP services. DCA indicated that it began processing reimbursement requests as soon as providers submitted them (see Finding 5).

DCA has made changes for the 2026 grant year to help address the issues discussed above. The NOFA was announced on September 29, 2025, and applications were due November 10, giving applicants 43 days to complete their submission. Additionally, the certification process will occur prior to grant awards being made. Applications with the highest scores will undergo the certification process and be formally selected as grant awardees once certified by the Commission. This will allow the award and certification processes to be finalized concurrently, and providers will be able to request reimbursements earlier in the grant year.

RECOMMENDATIONS

1. DCA should establish a minimum time period for posting SHAP grants to ensure all applicants are able to complete their applications.
2. DCA should continue with plans to certify programs prior to selecting grant awardees so providers can access reimbursements in a timely manner.

DCA's Response: In its response, DCA stated: "Grantees were not able to access grant reimbursements early because they were not certified. DCA was unable to certify grantees prior to awarding the grants due to the accelerated timeline of selecting providers. Because DCA was aware of the delay in reimbursements, DCA considered an organization's financial capacity to operate in between reimbursements as part of the award process. Even when the reimbursement process opened, providers did not immediately submit reimbursement requests. DCA has implemented a plan to certify programs prior to selecting grant awardees in 2026 to ensure reimbursements in a timely manner."

Recommendation 1: DCA agreed "that 18 days for the 2024 award cycle was too short" and noted that it "increased the application timeline to 43 days for the 2026 award cycle." However, in its response, DCA noted, "A minimum time period for posting SHAP grants unnecessarily restricts DCA's ability to effectively award grants [and] prevents DCA from being able to nimbly address outside factors."

Recommendation 2: DCA indicated it has implemented this recommendation for the 2026 grant cycle.

Finding 3: DCA's award process did not ensure SHAP applicants were scored consistently.

DCA's process for selecting SHAP awardees included required components; however, DCA did not ensure consistent execution across all staff scoring the applicants. We identified several instances of inconsistent scoring and incorrect calculations, which led to the improper selection of at least one awardee based on application scores. Additional guidance and review will help ensure future grant awards are fair and consistent.

On behalf of the SHTF Commission, DCA executed the SHAP application process, adhering to statutory requirements (see text box on the next page). Though procedures are not documented, DCA staff stated the award process was similar to that used by the Housing Assistance Division in awarding grants. Division staff reviewed the applications and independently scored them against the rubric created for the grant. Two staff reviewed each application, and their scores were

averaged together to obtain the final score. The 48 applications¹² for the 2025 grant year were split among 12 Division staff, so the same two individuals did not review each application.

Based on staff scores, DCA identified the six highest scoring applicants to receive grants for grant year 2025. Awardees' scores ranged from 95.5 to 97.5 (out of 100 points), while scores for those that did not receive a grant ranged from 26.5 to 95.0. In our review of scoring sheets, we identified several instances of inconsistent and incorrect scoring, described below. These issues contributed to at least one instance in which an awardee may have been incorrectly selected.

- **Inconsistent scoring** – To ensure applicants receive equal consideration for the grant, scores should be based on a common understanding of the criteria; however, we found several instances in which SHAP scorers did not appear to interpret grant criteria similarly. In particular, we identified significant differences in scores for the same application, with 10 applications (21%) receiving scores that diverged by 30 points or more. For example, one staff member scored 100 points on an application and provided no comments, while the other staff member scored the same application 60 points with comments such as “no monitoring outlined.”¹³ Scorers also diverged on how individual questions were assessed. On a 15-point question, an application scored 13 points with the comment “very vague details” and 0 points with the comment “not addressed in project narrative.”

We also identified instances in which incorrect scores were applied for a question about geographic service area. While DCA's scoring rubric limited scores to a 2 for urban or 3 for rural, 18% (17) of the scorecards received scores of 1, 2.5, 4, or 5. Scorecard comments indicated scores varied for entities that reported serving both rural and urban counties, which was not addressed in the rubric.

DCA fulfilled statutory requirements for the SHAP application process

DCA—acting on the SHTF Commission's behalf—fulfilled all statutory requirements related to the SHAP application process. This included publishing the Notice of Funding Availability to its website and including relevant information such as minimum program standards and the amount of funding available.

Additionally, DCA's application included points for the criteria listed in statute (as described on page 4). The scoring rubric—which was published per statutory requirements—included 10 rating factors with 24 sub-categories. Many of these sub-categories included aspects of the five application approval criteria required by statute (e.g., total number of participants, quality of assistance).

¹² Fifty-two providers applied for SHAP, but four were not evaluated because they failed to meet one of five criteria set by DCA for doing business with the state (e.g., were not registered as a business with the Secretary of State).

¹³ The two staff members who reviewed this application were paired on seven others. In all reviews, one reviewer scored 97-100 while the other scored 45-96 (with three at 60 or below).

Calculation errors
impacted grant
award selection.

Consistent scoring is better ensured when staff operate under the same set of instructions and assumptions, but DCA did not develop written procedures outlining how staff should review and score the SHAP applications. Instead, they relied on staff expertise based on their history of working with federal grants (though given the criteria specific to SHAP, federal experience would not always translate). DCA indicated a pre-scoring meeting was held to discuss the scorecard rubric and answer any questions from staff; however, as demonstrated by the examples above, experienced scorers interpreted the same information differently.

- **Calculation Errors** – To ensure a fair and accurate selection process, total scores must be calculated consistently and according to an established scoring rubric. However, approximately 20% (19) of the 96 SHAP scoring sheets had an error that impacted scoring. Most commonly, scorers double counted sub-categories or skipped cells when calculating totals, which lowered or increased scores by as much as five points.

Scorecards for three of the six awardees contained errors; for one awardee, the error increased the average score to 95.5 when the correct score would have been 94.5. The correct score was 0.5 points below an applicant that did not receive a grant.

DCA created a rubric worksheet that included the scoring fields and maximum points per rating factor and sub-category. However, the spreadsheet did not contain formulas to calculate the total, leaving staff to edit their own scoring sheets to determine a final score. This issue can be addressed by using a spreadsheet with locked cells and an automatic calculation so scoring staff only enter each category's respective score.

DCA indicated inconsistent scoring is expected and thus averages the two scores into a final application score. However, this approach may not always be sufficient to ensure a fair selection of grantees, particularly when applicant scores are close. In the process reviewed, DCA awarded grants to the top six scoring applications, but the next five scorers were only 0.5 to 1.5 points lower.

Issues described in previous bullets would likely have been identified with additional processes to review and address inconsistencies and inaccuracies prior to finalizing the list of awardees. DCA staff stated they implemented one method—a post-scoring review—in which supervisory staff review scoring sheets and question scorers as needed; however, no questions arose during the review of SHAP scorecards. Another option, which is common with grants at the federal level, is a post-scoring meeting where staff discuss how they scored applications and can address inconsistencies. DCA does not use this option.

SHAP's grant timeline may have also contributed to the issues identified. As noted in Finding 2, the application deadline was November 25, 2024, and the SHTF Commission approved grants on December 19, 2024. This left only 16 business days for the full award selection process (pre-scoring meeting,

application distribution and scoring, supervisory review, score aggregation, and award amount determination).

RECOMMENDATIONS

1. DCA should develop written procedures for the overall award process, including instructions for how applications should be scored and how to identify and address scoring inconsistencies.
2. DCA should ensure score sheets have locked tallying cells.

DCA's Response: DCA stated that there was not an improper award based on scoring and indicated there was a final scoring committee review meeting to “determine feasibility of final award determinations and award amounts.”

Auditor's Response: DCA was unaware of the incorrect scoring and errors identified in this finding until notified by the audit team. Prior to notifying DCA of these issues, a post-scoring meeting had not been mentioned. If such meetings are held as a key component of award selection, it would be expected that staff would document the decisions made.

Recommendations 1 & 2: DCA indicated it has made the recommended changes for the 2026 grant cycle.

Finding 4: DCA's certification process did not ensure providers met all requirements.

DCA certified SHAP providers as required by statute; however, it did not perform activities that would ensure providers were fulfilling all statutory requirements. Such practices could include reviewing providers' policies and procedures during the certification process.

Statute requires the SHTF Commission to certify that a program meets the requirements of O.C.G.A. § 8-3-311 (e.g., length of stay, drug testing) prior to reimbursing SHAP expenses. By requiring certification before providing reimbursements, the statute seeks to ensure grant awardees are compliant with these requirements. According to DCA, the process is unique among its federal and state homelessness programs, which have compliance reviews after grant funds are provided. These programs offer similar services (e.g., case management, job search assistance) but typically participants are not required to utilize the services to remain in the program. Under SHAP, participants must be removed from the program if they do not comply with requirements.

During the 2025 grant year, DCA conducted the certification process after awardees had been selected. First, awardees submitted to DCA program designs

that described the program and commonly included discussions about stakeholder engagement, plans for implementation and evaluation, and their program theory and logic models. DCA staff then visited each site to inspect facilities and obtain information about resources for providing the services described in the program design documents. Finally, DCA staff submitted site visit summaries and program designs to agency leadership and the SHTF Commission, which certified all providers.

DCA's current process is not designed in a way that sufficiently ensures providers are meeting statutory requirements. In particular:

- **DCA did not fully check for compliance** – The program designs are narrative descriptions of procedures unique to the provider and did not include sufficient information to assess compliance with each statutory requirement. While providers may have included descriptions of some practices in their narratives (e.g., caseworkers monitoring length of stay), we noted certain requirements were not included. For example, multiple providers did not describe how they would require participants to abstain from criminal activity or remove them for doing so.

DCA's site visits were also not sufficient to assess statutory compliance. For example, when assessing the job training requirement, staff notes indicated the provider would give participants access to computers and a caseworker. However, this does not ensure the provider is requiring residents to participate in such activities to remain in the program.

DCA did not review or require submission of programs' formal policies and procedures as part of the program design or site visit. This documentation would provide greater assurance that each statutory requirement (or more broad program requirements) has been appropriately addressed. Alternatively, DCA could be more specific in the site visit form to ensure all requirements are sufficiently assessed. For example, DCA staff were prompted to list the documents a provider requires to determine citizenship and state residency; however, the form did not prompt them to review policies for removing clients who do not abstain from criminal activity.

- **DCA did not enforce all statutory requirements** – We identified potential non-compliance in our review of SHAP providers' site visit summaries. According to statute, certified SHAP providers must require participants "to submit to regular drug and alcohol testing."¹⁴ The frequency was not specified in statute or regulation, but initial grant documents from DCA stated that an interval of once every three months was expected. Site visit summaries indicate four of the six SHAP providers test at intake and upon suspicion of drug use, which does not appear to

Neither SHAP program designs nor site visit forms fully addressed provider policies for all statutory requirements.

¹⁴ O.C.G.A. § 8-3-311(d)(4) also requires programs to remove participants for failing to meet any statutory accountability measure, which includes "sustaining an honest, good-faith effort to achieve or maintain sobriety from drugs and alcohol."

comply with “regular” testing. DCA did not address this or require program modifications prior to certifying providers.

We also noted that DCA did not ensure providers complied with other requirements. For example, DCA’s contract with SHAP providers states residents/clients cannot be charged a fee. However, in discussions with the audit team, two providers stated they charge fees to SHAP (and all) clients once they obtain employment.¹⁵ DCA staff had not previously been aware of these fees and noted that they would have been detected later as part of their compliance monitoring process. In addition to pre-certification site visits, DCA plans to conduct at least one compliance site visit per year to observe the provider and perform desk audits of client files to ensure the provider is executing its program design.

RECOMMENDATIONS

1. DCA should strengthen the certification process to ensure potential awardees meet program requirements, including ensuring providers have written policies that align with SHAP’s statutory requirements.
2. DCA should clearly define and enforce a minimum interval of drug testing regularity.

DCA’s Response:

Recommendation 1: DCA indicated it has implemented this recommendation for 2026 grant cycle.

Recommendation 2: With regard to the 2026 award, DCA indicated it “is in the process of defining a minimum interval for drug testing.” However, it noted the intervals may vary by provider.

¹⁵ Both providers are focused on substance use disorder treatment and have a period of stabilization for new clients. Once stabilized and employed, both providers charge a fee to cover program costs and model paying rent once the client is independently housed.

Finding 5: The SHTF director was fully funded by SHAP funds but also performed non-SHAP duties.

In fiscal year 2025, DCA did not ensure SHAP funds were only used for SHAP expenditures, which conflicts with state law. SHAP funds were used to pay the full salary and benefits of the SHTF director, who performed other duties for the SHTF Commission in addition to administering SHAP. DCA staff stated they will appropriately allocate fund sources for the director’s expenditures in future years.

According to O.C.G.A. § 8-3-303, “all funds appropriated, donated, or otherwise received for the specific purpose of the stable housing accountability programs shall be used exclusively for such programs.” Statute also allows the SHTF Commission to contract with DCA to provide operational and professional support for SHAP and other programs.¹⁶ Through appropriations acts, the General Assembly has created separate programmatic funds for SHAP and the SHTF Commission’s other housing initiatives.

Of the \$1 million appropriated for SHAP, \$150,000 (15%) was reserved for administrative expenses. As shown in **Exhibit 10**, approximately \$134,000 (89%) was used to fully fund the salary and benefits of the SHTF director, a position created to administer SHAP and serve as the SHTF Commission’s financial manager. (The position was filled in mid-September 2024—near the end of the first quarter of fiscal year 2025.) Approximately \$11,000 was used for other administrative expenses (e.g., real estate rentals, computer charges, etc.) that, according to DCA, were associated with the SHTF director position.

Exhibit 10
SHAP administrative costs were
primarily for the SHTF director (FY 2025)

Expense Category	Amount ¹
Personnel Costs	\$133,906
Other Expenses	\$10,839
Unspent ²	\$5,254
Total	\$150,000

¹ Amounts do not total due to rounding.

² Because SHAP is part of the SHTF, unspent funds are not returned to the State Treasury.

Source: TeamWorks Financials

Though fully paid with funds statutorily restricted to the SHAP program, the SHTF director performed other duties during fiscal year 2025. This included providing the Commission with administrative and financial support, maintaining financial reports, reporting at Commission meetings, and assisting with preparations for the Commission members’ July retreat. Given the statutory

¹⁶ It is not unusual for the SHTF to use its funds for DCA staff. In fiscal year 2025, SHTF signed a contract to pay 10%, but not less than \$300,000, of all allocated funds to DCA and its employees to administer the Commission’s programs.

requirement related to SHAP, time spent on other duties should have been funded with other sources rather than SHAP funds.

DCA did not consider the statutory restriction on SHAP fund spending until notified by the audit team. DCA staff indicated in future years they would appropriately allocate fund sources based on the director's respective time spent on varying duties.

RECOMMENDATION

1. DCA should ensure SHAP funds are only used to fund the portion of staff time dedicated to SHAP activities.

DCA's Response:

Recommendation 1: DCA noted it “has taken steps to adapt program and Trust Fund budgets for state fiscal year 2026, so that SHAP funds are only used to fund the portion of staff time dedicated to SHAP activities.”

Finding 6: DCA did not implement measures to monitor SHAP providers' performance during the 2025 grant period.

DCA did not create performance measures for SHAP until late in the 2025 grant year. While DCA indicated it intends to begin monitoring SHAP's 2026 grantees, current measures should be improved to better assess program outputs and outcomes. SHAP providers independently measured their own programs' performance during the 2025 grant period using client-level data that DCA requires them to regularly collect and report.

According to best practices, agencies should establish performance measures to communicate program goals and monitor progress toward achieving defined objectives. Agencies that award grants should clearly communicate performance expectations and measurement practices to potential awardees in the Notice of Funding Availability (NOFA) prior to issuing awards. Communicating expectations and regularly monitoring performance would enable DCA to make evidence-based decisions to improve SHAP, such as providing additional assistance to providers or choosing not to renew a grant.

DCA did not create performance measures until September 2025, nearly nine months after awardees were selected and the 2025 grant period began. As such, DCA did not communicate program expectations to providers prior to awarding the grants. Additionally, without performance measures, DCA could not monitor performance for the 2025 grant period. DCA staff indicated the short implementation period prevented them from doing so.

Performance measures help communicate program goals and allow the agency to monitor provider and program performance.

All six providers indicated they monitored SHAP performance independently of DCA during the year, using their pre-established organizational performance measures. Providers used SHAP client data as the basis for these measures since they were already required to collect and submit the data to DCA using HMIS. Examples of the performance measures used by SHAP providers include the rate of clients securing stable housing, the average length of time clients remain sober from drugs and alcohol, the increase in client income, and the percentage of clients who remain employed for at least six months after leaving SHAP.

During our review, DCA published performance measures in the NOFA for the 2026 grant period.¹⁷ These measures (see **Exhibit 11**) are primarily focused on program outputs, which relate to the size and scope of services and activities (e.g., number of participants obtaining services, number receiving housing upon enrollment).

Exhibit 11

DCA's SHAP performance measures for the 2026 grant period primarily monitor program outputs

SHAP Performance Measures (2026 grant period)¹
Number of participants successfully enrolled in the program based upon estimated number of individuals program funding was awarded to serve
Number of participants who receive support services within 30 days of enrollment in the program
Number of participants who receive immediate housing the first day they enter the program
Number of participants who have graduated from the program and obtained stable housing before or at the allotted time allowed by statute
Number of participants who have obtained employment and/or education in six months or less after enrolling in the program

¹ When considering renewals for existing awardees, DCA is using performance measures similar to the first three measures. In place of the last two, DCA is using one measure that exclusively identifies the number of individuals actively participating in a SHAP program (i.e., participants who have not left or been dismissed from SHAP).

Source: 2026 SHAP NOFA and Project Guidelines

Our review of performance measures used by other entities that address homelessness identified several measures that could help DCA better monitor the impact of SHAP programs. Many of these measures can be assessed using HMIS data that providers are required to submit (described on page 7). Specifically:

- **Output measures** – Average length of time clients spend in SHAP, most and least common exit reasons provided by former SHAP clients, SHAP bed utilization rate (by provider).
- **Outcome measures** – Percentage of SHAP clients who become self-sufficient (by achieving permanent housing, employment, and sobriety), rate that SHAP clients return to homelessness, (i.e., whether the client appears in HMIS within a certain period after exiting SHAP).

¹⁷According to 2026 SHAP project guidelines, DCA will also monitor providers' compliance with statutory requirements (i.e., "long-term compliance") and funding reimbursement requirements (i.e., "operational compliance") in addition to performance measures.

Evaluation of SHAP performance measurement and program success was not possible during the audit period

Statute required DOAA to audit the performance measures used by DCA to evaluate the success of SHAP during the 2025 grant period. This was not possible because DCA did not establish performance measures for the 2025 grant year.

We were also unable to evaluate the success of SHAP programs because DCA has not yet determined what would define a successful exit from SHAP. Statute limits participants' stay to 18 months or when stable housing is obtained or offered. For the 2025 grant period, this would mean participants could be in the program until June 2026, beyond the statutory deadline of our report's submission (December 31, 2025). DCA is waiting to define a successful exit from SHAP until at least June 2026, or when all participants from the 2025 grant period would be required to leave SHAP programs.

As of October 31, 2025, HMIS data indicates approximately 67 individuals have left SHAP (about 43% of the 155 clients served). The two most common exit reasons were "non-compliance with program" and "completed program." However, DCA acknowledged that providers may define the same exit reasons differently and stated that "completed program" does not necessarily indicate a successful exit to stable housing.

Additionally, despite establishing performance measures, DCA has not yet identified the characteristics that would signal a successful exit to stable housing. For example, HMIS cites participants may leave a program prior to completion because they obtain housing or are enrolling in a substance abuse or detox center. However, DCA staff could not state whether these exits would be considered successful. Additionally, DCA does not provide HMIS users with definitions for exit reasons, so it is likely they are not used consistently across providers. If DCA intends to use HMIS data to evaluate successful program outcomes, it should define categories for the relevant fields.

According to DCA staff, because SHAP clients can remain in the program for up to 18 months, client data will not be ready for meaningful analysis until the first group of SHAP clients have had time to complete the program. Therefore, DCA is waiting to define the successful completion of a SHAP program until at least June 2026, and establish baseline performance by the 2027 grant period. While baseline data may be helpful in assessing impact, this delay contradicts best practices, which indicate that program goals and objectives should be clearly established and communicated to all parties prior to the provision of services. Additionally, because DCA did not identify what is considered a successful exit to stable housing, it is not clear how DCA will track its performance measure related to clients graduating from SHAP programs (shown in **Exhibit 11** on page 23).

Starting with the 2026 grant period, DCA is also requiring all current and new awardees to describe the goals and objectives of their own SHAP programs. Providers must create an evaluation plan that includes the key performance indicators and metrics they will use to measure progress toward self-defined goals and objectives. These goals, objectives, and evaluation plans are in addition to the performance measures DCA is implementing.

RECOMMENDATIONS

1. DCA should continue with its plans to measure performance but should consider additional measures that focus on program impacts and client outcomes.
2. DCA should define a successful program exit for SHAP so performance measures more specifically address program objectives.
3. DCA should define the data categories it will use to determine program success, including exit reasons.

DCA's Response: *"The inaugural 2025 grant period has not ended as of the date of this report draft. The grant period will end January 31, 2026."*

Auditor's Response: *Regardless of the 2025 grant's timeline, best practices indicate performance measures should be established prior to program implementation and be communicated to potential applicants in the NOFA.*

Recommendation 1: *DCA stated it "will measure performance when we have enough data to measure program impact and client outcomes." DCA indicated it would have additional measures developed before the 2027 grant cycle.*

Recommendation 2: *DCA stated it "implemented a statutorily prescribed program that does not define stable housing" and the definition of a successful program exit "is partially dependent on the current providers' data." DCA indicated it plans to have additional measures before the 2027 grant cycle.*

Recommendation 3: *DCA indicated it would define data categories to determine program success before the execution of the 2026 contracts.*

Appendix A: Table of Findings and Recommendations

	Agree, Partial Agree, Disagree	Implementation Date
Finding 1: SHAP providers generally did not expand capacity or services after receiving the grant. (p. 9)	Partial Agree	N/A
1.1 No recommendation	N/A	N/A
Finding 2: SHAP providers were approved for grants early but unable to access reimbursements for most of the year. (p. 12)	Partial Agree	N/A
2.1 DCA should establish a minimum time period for posting SHAP grants to ensure all applicants are able to complete their applications.	Partial Agree	
2.2 DCA should continue with plans to certify programs prior to selecting grant awardees so providers can access reimbursements in a timely manner.	Agree	2026
Finding 3: DCA's award process did not ensure SHAP applicants were scored consistently. (p. 15)	Partial Agree	N/A
3.1 DCA should develop written procedures for the overall award process, including instructions for how applications should be scored and how to identify and address scoring inconsistencies.	Agree	2026
3.2 DCA should ensure score sheets have locked tallying cells.	Agree	2026
Finding 4: DCA's certification process did not ensure providers met all requirements. (p. 18)	Partial Agree	N/A
4.1 DCA should strengthen the certification process to ensure potential awardees meet program requirements, including ensuring providers have written policies that align with SHAP statutory requirements.	Agree	2026
4.2 DCA should clearly define and enforce a minimum interval of drug testing regularity.	Partial Agree	2026
Finding 5: The SHTF director was fully funded by SHAP funds but also performed non-SHAP duties. (p. 21)	Agree	N/A
5.1 DCA should ensure SHAP funds are only used to fund the portion of staff time dedicated to SHAP activities.	Agree	2026
Finding 6: DCA did not implement measures to monitor SHAP providers' performance during the 2025 grant period. (p. 22)	Partial Agree	N/A
6.1 DCA should continue with its plans to measure performance but should consider additional measures that focus on program impacts and client outcomes.	Partial Agree	2027

	Agree, Partial Agree, Disagree	Implementation Date
6.2 DCA should define a successful program exit for SHAP so performance measures more specifically address program objectives.	Partial Agree	2027
6.3 DCA should define the data categories it will use to determine program success, including exit reasons.	Agree	2026

Appendix B: Objectives, Scope, and Methodology

Objectives

This report examines the Stable Housing Accountability Program (SHAP), which is under the State Housing Trust Fund for the Homeless and is administered by the Department of Community Affairs (DCA). Specifically, our review set out to determine the following:

1. To what extent did the grant award process for SHAP follow statutory and best practice guidance?
2. To what extent has DCA ensured that SHAP funds have only been spent on eligible, SHAP-related expenditures?
3. To what extent has DCA developed performance metrics that measure the success of SHAP and that are consistent with best practices?

Scope

This audit generally covered activity related to the Stable Housing Accountability Program (SHAP) that occurred from July 2024 to October 2025, with consideration of earlier or later periods when relevant. Information used in this report was obtained by reviewing relevant laws, rules, and regulations; interviewing agency officials and staff from the Department of Community Affairs (DCA); analyzing data and reports from DCA, TeamWorks Financials, and Homeless Management Information System (HMIS);¹⁸ comparing state law to DCA guidance documents and provider information; reviewing best practices for grant management from the U.S. Department of Housing and Urban Development (HUD) and for internal controls from the U.S. Government Accountability Office; and conducting site visits with each of the six SHAP providers (including touring the facilities and speaking with those in charge of oversight and finance).

As noted on pages 14 and 24 of our report, our ability to analyze DCA's expenditure of SHAP funds and implementation of performance measures was limited by the audit's statutory deadline (December 31, 2025) and DCA's timeline for implementing certifications (see Finding 2). Because only a small number of reimbursements were issued by mid-October, a complete investigation of funds sent to providers could not be completed prior to release of this report. We also intended to evaluate whether each provider had met DCA's performance metrics, but as noted in Finding 6, DCA had not created performance metrics for the 2025 grant year. A subsequent examination of grant year 2025 reimbursements will be conducted in Spring 2026, and performance measures will be addressed through our standard follow-up report procedures.

Government auditing standards require that we also report the scope of our work on internal control that is significant within the context of the audit objectives. All of our objectives address aspects of DCA's internal control structure related to SHAP. Specific information related to the scope of our internal control work is described by objective in the methodology section below.

¹⁸ HMIS allows service providers to collect client-level data on the provision of housing and services to homeless individuals and families, as well as persons at risk of homelessness.

Methodology

To determine the extent to which the grant award process for SHAP followed statutory and best practice guidance, we interviewed DCA staff regarding the award process, including development of scoring criteria and the evaluation process. We reviewed 96 original scoring sheets for 48 applicants (two score sheets per applicant) and performed recalculations after discovering errors in the score calculations. We also analyzed both total scores and scores given across certain evaluation criteria—as well as scoring staff notes—to determine whether staff were consistently evaluating applicants. Additionally, we compared the scoring rubric to the enabling statute to determine whether all required elements were included in the evaluation and scoring process. Finally, we reviewed best practices for grant selection and management from documents issued by the U.S. Office of Management and Budget and Department of Health and Human Services, as well procurement guidance in the Georgia Procurement Manual issued by the Department of Administrative Services.

To examine the certification of SHAP programs, we reviewed DCA documents and websites to identify information advertised to applicants, and we interviewed agency staff to determine process steps and timeline. Information from these sources was compared to the testimony of SHAP providers obtained during site visits. Additionally, we evaluated the certification process (primarily by reviewing the narrative program designs submitted by providers and DCA’s site visit notes) DCA used to assess providers’ compliance with SHAP’s statutory requirements.

To obtain information on the expenditure of SHAP funds and whether DCA ensured they were only spent on eligible, SHAP-related purposes, we reviewed state law to identify restrictions on SHAP expenditures. As noted on page 14, although we could identify the amounts DCA set aside in awards for each provider, reimbursements had not been granted for a long enough period for us to effectively review DCA’s reimbursement review and approval process. A subsequent review of these controls will be conducted in Spring 2026 after all provider reimbursements have been completed. We reviewed DCA policy and interviewed DCA staff to establish what the expected reimbursement process would be, including eligible reimbursement items and the appropriate documentation.

We identified SHAP’s administrative costs by interviewing DCA staff and examining data from the TeamWorks Financials system. DCA staff identified general amounts and purposes associated with administrative spending, primarily for the salary and benefits of one employee. The audit team verified these statements through an analysis of TeamWorks reports for fiscal years 2025. We analyzed reports for the SHAP program, as well as associated DCA activities including the State Housing Trust Fund program. General Ledger and Labor Distribution module data from TeamWorks was used to inform this objective and was determined to be sufficiently reliable for the purposes of our audit.

To determine the extent to which DCA developed performance metrics to measure the success of SHAP, we interviewed DCA staff to identify their progress toward developing metrics. To identify best practices for homelessness performance measures, we reviewed metrics used by various entities, including HUD, the National Alliance to End Homelessness, and the Florida Council on Homelessness. Additionally, we reviewed sources from the Government Accountability Office and the Government Finance Officers Association on the necessity of utilizing performance measures in a system of internal controls, including best practices for when and how to communicate them. We also interviewed SHAP providers to identify what data and measures they internally collect to assess their own performance.

Additionally, we interviewed agency staff involved with HMIS to understand how data is entered into the system and to determine definitions for data fields and values. We requested that DCA query HMIS and provide key fields for SHAP participants; we analyzed this data to determine the number of participants who entered and exited each SHAP provider's program between January 1, 2025 and October 31, 2025. We also analyzed this data to calculate metrics such as the average length of stay and whether participants exited successfully. As noted in Finding 6, we could not determine whether exits were successful. We did not assess the reliability of HMIS as a whole but did assess the relevant SHAP data and determined it was sufficiently reliable for the purposes of our analyses. Additionally, we received HMIS data for one provider directly from their Continuum of Care because their data entry was so different from other providers that it could not be captured by DCA's data query.

We conducted this performance 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 findings and conclusions based on our audit objectives. We believe that the evidence obtained provides a reasonable basis for our findings and conclusions based on our audit objectives.

If an auditee offers comments that are inconsistent or in conflict with the findings, conclusions, or recommendations in the draft report, auditing standards require us to evaluate the validity of those comments. In cases when agency comments are deemed valid and are supported by sufficient, appropriate evidence, we edit the report accordingly. In cases when such evidence is not provided or comments are not deemed valid, we do not edit the report and consider on a case-by-case basis whether to offer a response to agency comments.

Appendix C: Counties with Homeless Populations of 100 or More (2024)

County	Count
Bartow	127
Bibb	682
Chatham	579
Cherokee	249
Clarke	386
Clayton	110
Cobb	418
DeKalb	322
Dougherty	129
Floyd	120
Fulton ¹	339
Glynn	182
Gwinnett	356
Hall	610
Henry	179
Houston	133
Liberty	179
Lowndes	205
Muscogee	272
Newton	182
Paulding	104
Richmond	474
Rockdale	154
Stephens	136
Troup	109
Whitfield	167

¹ Fulton County does not include the homeless count for the City of Atlanta, which was 2,867.

Source: HUD Data

Appendix D: SHAP Programs by Provider (January-October 2025)

Organization	Client Focus	Location	Award Amount ¹	SHAP Beds ²	Total Capacity	Number Served	Exits
Gateway Center 24/7	Men in need of short-term residential and transitional housing	Atlanta	\$275,000	76 ³	482	38	29
Recovery Foundations	Men and women with substance use disorders	Lawrenceville	\$100,000	42	42	69	17
The Extension	Men and women with substance use disorders	Marietta	\$225,000	10	104	17	8
The Place of Forsyth County	At-risk young women in need of stable housing	Cumming	\$66,350	6	6	6	0
Union Mission	Men in need of short-term residential and transitional housing ⁴	Savannah	\$100,000	6	467	9	3
Vision 21 Concepts	Men and women in need of short-term residential and transitional housing	Douglasville	\$83,650	11	52	16	10

¹ DCA staff indicated they considered multiple factors in determining award amounts, including a provider's housing model, access to additional resources, and the number of people served.

² Figures are based on provider estimates, as confirmed by DCA. Total capacity includes all provider facility locations.

³ Provider anticipated being able to service more beds than they were actually able to.

⁴ The provider also serves women and families in their non-SHAP programs.

Source: Provider applications, program designs, provider interviews, and HMIS data from both DCA and the Cobb County Continuum of Care

This page intentionally blank