ORANGE COUNTY CONTINUUM OF CARE BOARD Wednesday, January 19, 2022 2 p.m. – 4 p.m.

Webinar:

https://ocgov.webex.com/ocgov/j.php?MTID=m1e 809d3117ac859b148da43914bc7d86

Dial by Phone: +1 (213) 306-3065

Access Code: 2466 841 5658

AGENDA

Board Members

Matt Bates, City Net
Judson Brown, City of Santa Ana
Nikki Buckstead, Family Solutions Collaborative
Donald Dermit, The Rock Church
Becks Heyhoe, OC United Way [Secretary]
Tim Houchen, Hope4Restoration
Patti Long, Mercy House
Dawn Price, Friendship Shelter
Albert Ramirez, City of Anaheim

Eric Richardson, Volunteers of America Maricela Rios-Faust, Human Options [Vice Chair] Soledad Rivera, Families Together of OC Elida Sanchez, Santa Ana Unified School District Dr. Shauna Sorrells, Orangewood Foundation George Searcy, Jamboree Housing Tim Shaw, Individual [Chair] Christina Weckerly Ramirez, Health Care Agency

Call to Order - Tim Shaw, Chair

Board Member Roll Call – Becks Heyhoe, Secretary

<u>Public Comments:</u> Members of the public may address the Continuum of Care (CoC) Board on items listed within this agenda or matters not appearing on the agenda so long as the subject matter is within the jurisdiction of the CoC Board. Members of the public may address the CoC Board with public comments on agenda items in the business calendar after the CoC Board member discussion. Comments will be limited to three minutes. If there are more than five public speakers, this time will be reduced to two minutes.

To address the CoC Board, members of the public are to enter their name and agenda item number in the WebEx chat box to be placed in a queue. CoC Board staff will call your name in the order listed in the chat box.

CONSENT CALENDAR

All matters are approved by one motion unless pulled by a Board Member for discussion or separate action. The CoC Board requests that only pertinent information be discussed during this time.

1. Approve Continuum of Care Board Special Meeting Minutes from December 9, 2021.

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2. Approve Continuum of Care Board Meeting Minutes from December 15, 2021.

BUSINESS CALENDAR

- 1. Orange County Homelessness Updates Doug Becht, Director, Office of Care Coordination and Zulima Lundy, CoC Manager
 - a. System of Care Update
 - b. Continuum of Care Update
- 2. Brown Act Update and Determination in accordance with Assembly Bill 361 Zulima Lundy, CoC Manager
 - a. Determination in accordance with AB 361 Section 3(e)(3) that, while the state of emergency due to the COVID-19 pandemic, as originally proclaimed by the Governor on March 4, 2020, remains active and/or state or local officials have imposed or recommended measures to promote social distancing, the Orange County CoC Board has reconsidered the circumstances of the state of emergency and has determined that the state of emergency continues to directly impact the ability of the members to meet safely in person and/or state or local officials continue to impose or recommend measures to promote social distancing.
- 3. 2022 CoC Board Appointments Zulima Lundy, CoC Manager
 - **a.** Elect CoC Board Officers for the upcoming term:
 - i. Appoint the Chair
 - ii. Appoint the Vice Chair
 - iii. Appoint the Secretary
 - **b.** Appoint CoC Committee Chairs and Membership:
 - i. Appoint a CoC Board Member to the Coordinated Entry System (CES) Committee
 - ii. Appoint CoC Board Members to the Policies, Procedures and Standards Committee
 - iii. Appoint a CoC Board Member to the Orange County Housing Finance Trust Advisory Board to advise the OC Housing Finance Trust Board of Directors
 - **c.** Recommend a CoC Board Member to the CoC Representative seat for the Commission to End Homelessness.
- **4. Policy, Procedures and Standards Committee Recommendations –** Zulima Lundy, CoC Manager and Erin DeRycke, 211OC, and Maricela Rios-Faust, Vice-Chair
 - **a.** Approve the recommended updates to the Homeless Management Information System (HMIS) Policies and Procedures.
 - **b.** Take action in support of the HMIS Lead, 2-1-1 Orange County, entering into a multi-year contract with the HMIS Vendor, BitFocus.
 - **c.** Approve the recommendation for the North Orange County Public Safety Collaborative request with the following principles and within the following parameters, as recommended by the Ad Hoc and the Policies, Procedures and Standards Committee:
 - 1. Preservation of HMIS integrity is paramount
 - 2. Supports the aim of linking individuals experiencing homelessness to appropriate resources and are therefore proposing that this collaboration could focus on integration with Coordinated Entry System (CES).

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- 3. Encourage participation in HMIS through the current established processed in the HMIS Policies and Procedures for the entry of data that may be valuable to the Orange County CoC.
- 4. Mechanism of implementation will require further thought and potential policy and process.
- 5. 2022 Point in Time (PIT) Count Update Zulima Lundy, CoC Manager and Matt Bates, City Net
- 6. Continuum of Care (CoC) Committee Updates CoC Committee Chairs
 - a. Lived Experience Advisory Committee Tim Houchen, Committee Chair
 - **b.** Coordinated Entry System Committee Zulima Lundy, CoC Manager
 - c. Housing Opportunities Committee Judson Brown, Committee Chair
 - d. Transitional Aged Youth Committee Becks Heyhoe, Secretary and Committee Chair
- 7. System of Care Data Integration System and Care Plus Program Update Natalie Dempster, Data Integration Manager

Next Meeting: Wednesday, March 23, 2022, from 2 p.m. – 4 p.m.

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ORANGE COUNTY CONTINUUM OF CARE BOARD SPECIAL MEETING Thursday, December 9, 2021

4 p.m. – 5 p.m.

Webinar:

https://ocgov.webex.com/ocgov/j.php?MTID=m78 381b0705d5cda70df63e3c20e22480

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MINUTES

Board Members

Jeanne Awrey, OC Dept. of Education
Matt Bates, City Net
Judson Brown, City of Santa Ana
Natalie Bui, Veteran Affairs CRRC
Donald Dermit, The Rock Church
Becks Heyhoe, OC United Way [Secretary]
Tim Houchen, Hope4Restoration
Patti Long, Mercy House

Dawn Price, Friendship Shelter
Albert Ramirez, City of Anaheim
Maricela Rios-Faust, Human Options [Vice Chair]
Soledad Rivera, Families Together of OC
George Searcy, Jamboree Housing
Tim Shaw, Individual [Chair]
Christina Weckerly Ramirez, Health Care Agency

Call to Order - Tim Shaw, Chair

Chair Tim Shaw called the meeting to order at 4:03 p.m.

<u>Board Member Roll Call</u> – Felicia Boehringer, Continuum of Care Administrator

Present: Matt Bates, Judson Brown, Donald Dermit, Tim Houchen, Patti Long, Dawn Price, Maricela Rios-Faust, George Searcy, Tim Shaw and Christina Weckerly-Ramirez.

Absent excused: Jeanne Awrey, Natalie Bui, Becks Heyhoe, Albert Ramirez, and Soledad Rivera.

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- David Duran suggested that the CoC Board consider the recommendation for there to be oversite of service providers in Orange County. David Duran stated that there needs to be better policies and procedures in place regarding issues and disagreements occurring in shelters in Orange County.
- Pat Davis expressed gratitude for the development of housing solutions being discussed on the agenda and wondered how to inspire other communities to step up to convert motels into permanent housing developments. Pat Davis announced that the Longest Night Virtual Candlelight Vigil is coming up, and there will be a few different activities planned for that event.

CONSENT CALENDAR

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• No Consent Calendar Items

BUSINESS CALENDAR

- 1. Project Homekey Zulima Lundy, CoC Manager and Karen Betances, Shelter Manager
 - a. Update on Homekey Program Round 1
 - The Orange County Continuum of Care (CoC) authorized the utilization of Homeless Housing, Assistance and Prevention (HHAP) Program Round 2 funding to provide the operating subsidies for Homekey Program Round 1 proposals to operate as interim housing before developing into permanent supportive housing. Zulima Lundy provided information about the awarded Homekey Round 1 projects:
 - o Stanton Inn & Suites provides 70 units of non-congregate shelter to vulnerable individuals who are age 65 and older and/or having underlying health conditions that pose high risk for severe COVID-19 illness.
 - o Tahiti Motel provides 57 units of non-congregate shelter to vulnerable individuals who are age 65 and older and/or having underlying health conditions that pose high risk for severe COVID-19 illness.
 - Zulima Lundy provided updates on Homekey Program Round 1. Referrals into the Homekey Program ended on November 30, 2021. The Stanton Inn & Suites and Tahiti Motel Homekey program sites are scheduled to begin site rehabilitation and develop into permanent supportive housing options starting in Spring 2022, with interim housing operations ending on March 31, 2022. There is approximately \$6 million in HHAP Round 2 funding no longer needed for operating subsidies.
 - Karen Betances reviewed the Homekey Program Round 1 Performance Metrics, including the number of participants enrolled, total number of participants served, program exit destinations, and enrollment in benefits.
 - **b.** Overview of Homekey Program Round 2 and Proposed Projects
 - On September 2, 2021, the California Housing & Community Development (State HCD) announced the availability of approximately \$1.45 billion in Homekey Program Round 2 funding through the release of the Notice of Funding Availability (NOFA). Zulima Lundy provided information on the key items detailed in the NOFA, including requirements, matches, and important deadlines.
 - The County of Orange, including OC Community Resources and Office of Care Coordination, has identified three Homekey Program Round 2 project proposals that will submit an application in advance of the January 31, 2022, deadline for the bonus award and geographic pools. Zulima Lundy reviewed the project proposals for Riviera Motel in Stanton, Motel 8 in Costa Mesa, and Huntington Beach Oasis in Huntington Beach.

- The Huntington Beach Oasis Project is proposed to operate as interim housing for a period of up to five years and will develop into Permanent Supportive Housing for individuals with low-income. This project will offer 62 units of Permanent Supportive Housing to individuals experiencing chronic homelessness. The Office of Care Coordination is recommending the use of \$1,250,000 in HHAP Round 2 funding allocated to the Orange County CoC to provide enough funding for up to three years of interim housing operations, along with additional funding identified by HCA, to make this a competitive and viable project application.
- c. Recommended Action: Approve the allocation \$1,250,000 in Homeless Housing, Assistance, and Prevention (HHAP) Round 2 funding to the Huntington Beach Oasis, a Homekey Program Round 2 project application, if awarded by California Department of Housing & Community Development, during interim housing phase

Tim Houchen made a motion to approve the recommended action. Dawn Price seconded the motion. Matt Bates, Judson Brown, Donald Dermit, Tim Houchen, Dawn Price, Maricela Rios-Faust, Tim Shaw and Christina Weckerly-Ramirez voted yes. Patti Long and George Searcy abstained. The motion passed.

• Public Comment

- O David Duran emphasized the large amount of funding being used in comparison to the number of individuals projected to be served. David Duran expressed frustration in the need of more developments to support permanent supportive housing and noted that this is a great start.
- o Brooke Weitzman expressed that it is great to see the County of Orange investing in housing. Brooke Weitzman expressed concern that the CoC Board has not raised questions about the lack of services in the South Planning Area and urged for the CoC to push for a county-wide use of funds and to reconsider limitations places on participants, such as a curfew.

Motion to Adjourn: Meeting was adjourned at 4:39 p.m.

Next Meeting: Wednesday, December 15, 2021, from 10 a.m. to 12 p.m.

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ORANGE COUNTY CONTINUUM OF CARE BOARD SPECIAL MEETING Wednesday, December 15, 2021 10 a.m. - 12 p.m.

Webinar:

https://ocgov.webex.com/ocgov/j.php?MTID=m78 381b0705d5cda70df63e3c20e22480

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MINUTES

Board Members

Jeanne Awrey, OC Dept. of Education Matt Bates, City Net Judson Brown, City of Santa Ana Natalie Bui, Veteran Affairs CRRC Donald Dermit, The Rock Church Becks Heyhoe, OC United Way [Secretary] Tim Houchen, Hope4Restoration Patti Long, Mercy House

Dawn Price, Friendship Shelter Albert Ramirez, City of Anaheim Maricela Rios-Faust, Human Options [Vice Chair] Soledad Rivera, Families Together of OC George Searcy, Jamboree Housing Tim Shaw, Individual [Chair] Christina Weckerly Ramirez, Health Care Agency

Call to Order - Tim Shaw, Chair

Chair Tim Shaw called the meeting to order at 10:00 a.m.

Board Member Roll Call – Felicia Boehringer, Continuum of Care Administrator

Present: Jeanne Awrey, Matt Bates, Judson Brown, Natalie Bui, Donald Dermit, Patti Long, Albert Ramirez, Maricela Rios-Faust, George Searcy, Tim Shaw and Christina Weckerly-Ramirez. Tim Houchen joined the meeting at 11:59 a.m.

Absent excused: Becks Heyhoe, Dawn Price, and Soledad Rivera.

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Pat Davis commended the CoC for the work being done on the Racial Equity Roadmap and expressed hope that the CoC Board can support that work and model it in other areas.

CONSENT CALENDAR

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1. Approve Continuum of Care Board Meeting Minutes from November 17, 2021.

Donald Dermit motioned to approve the item on the Consent Calendar. Maricela Rios-Faust seconded the motion. Tim Shaw abstained. Jeanne Awrey, Matt Bates, Judson Brown, Natalie Bui, Patti Long, Albert Ramirez, George Searcy, and Christina Weckerly-Ramirez voted yes. The motion passed.

BUSINESS CALENDAR

- 1. Orange County Homelessness Updates Doug Becht, Acting Director, Office of Care Coordination and Zulima Lundy, CoC Manager
 - a. Doug Becht provided the following System of Care Updates:
 - Orange County Cold Weather Armory Emergency Shelter Program The Orange County Cold Weather Emergency Shelter program provides shelter for individuals experiencing homelessness at the National Guard Armory in Santa Ana. The Armory is located at 612 East Warner Ave. in Santa Ana.
 - Project Roomkey The County of Orange continues to operate temporary isolation shelters with a total capacity of 100 beds for individuals and families experiencing homelessness who are COVID-19 sick or symptomatic. Referrals into the program are made by the Public Health Services, hospitals, shelters, street outreach teams, and law enforcement.
 - COVID-19 Vaccination Efforts The Office of Care Coordination is working with Public Health Services and two Federally Qualified Health Centers (FQHC) on vaccination efforts for those experiencing homelessness. The FQHCs are Families Together of Orange County in Tustin and Share Our Selves in Costa Mesa.
 - The State of California's Emergency Rental Assistance (ERA) Program The State of California's ERA Program is referred to as CA COVID-19 Rent Relief or Housing is Key. Orange County tenants with rental arrears and/or past due utility bills are encouraged to apply for assistance.
 - b. Zulima Lundy provided the following CoC Updates:
 - HOME-ARP Updates HOME Investment Partnerships American Rescue Plan Program (HOME-ARP) funding provides HOME grantees, in collaboration with other community stakeholders, a chance to make targeted, strategic investments in housing and other assistance for people experiencing homelessness and other vulnerable populations. HOME jurisdictions are required to engage in the consultation with the CoC and public participation processes and develop a HOME-ARP allocation plan. The CoC will be facilitating a consultation with the Cities of Fullerton, Irvine, and Huntington Beach on January 6, 2022. The Office of Care Coordination will be sending information on how to participate in the HOME-ARP consultation process via email.
 - 2021 Longitudinal Systems Analysis (LSA) Data Submission The Homelessness Data Exchange (HDX) 2.0 opened for LSA uploads on Monday, December 6, 2021. The Office of Care Coordination is working with 211 Orange County, the Homeless Management Information System (HMIS) Lead, to ensure accurate data is being reported. The LSA report provides the U.S. Department of Housing and Urban Development (HUD) and Continuums of Care (CoCs) with critical information

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- about how people experiencing homelessness use their system of care. An update on the LSA data submission will be presented to the CoC Board in February 2022.
- Emergency Housing Vouchers (EHV) Update The CoC has partnered with local Public Housing Authorities (PHAs) to distribute EHVs to assist individuals and families who are experiencing homelessness; at risk of homelessness; fleeing, or attempting to flee, domestic violence, dating violence, sexual assault, stalking, or human trafficking; or were recently homeless and for whom providing rental assistance will prevent the household's homelessness or having high risk of housing instability. Zulima Lundy reviewed the progress on the issuance and leasing of EHVs by the PHAs.
- EHV Dashboard HUD has established an EHV dashboard, which showcases EHV data at the national, region, field office, state, and PHA-level. The public-facing dashboard is accessible at the following link: https://www.hud.gov/program_offices/public_indian_housing/ehv/dashboard.
- Funding Opportunities Zulima Lundy reviewed the details of the Domestic Violence Shelter-Based Program Request for Proposals (RFP) and the City of Santa Ana and Santa Ana Housing Authority Affordable Housing Development RFP, which are currently open to the public. The Office of Care Coordination will be releasing the North Service Planning Area COVID-19 Homeless Response Services RFP shortly.
- 2. Brown Act Update and Determination in accordance with Assembly Bill 361 Zulima Lundy, CoC Manager Zulima Lundy provided a background on the Brown Act legislation as it relates to holding virtual meetings. The Orange County CoC has been conducting the Board and Committee meetings in accordance with the waivers as authorized in Executive Order N-908-21. With the waivers coming to an end and in accordance with subsection (e) to Government Code Section 54953, the Orange County CoC will be considering the circumstances of the recommended action to continue teleconferenced meetings for the next 30 days.

Continued teleconference meetings for the next 30 days will support the Orange County CoC in continuing to meet to further the goals of the CoC and ensure continuity of CoC activities. Additionally, it will provide the CoC Board and the CoC general membership ample time to plan for the transition to in-person meetings and implementation of COVID-19 safety protocols.

Recommended Action:

a. Determination in accordance with AB 361 Section 3(e)(3) that, while the state of emergency due to the COVID-19 pandemic, as originally proclaimed by the Governor on March 4, 2020, remains active and/or state or local officials have imposed or recommended measures to promote social distancing, the Orange County CoC Board has reconsidered the circumstances of the state of emergency and has determined that the state of emergency continues to directly impact the ability of the members to meet safely in person and/or state or local officials continue to impose or recommend measures to promote social distancing.

George Searcy motioned to approve the recommended action. Natalie Bui seconded the motion. Motion passed unanimously.

Public Comments:

- Pat Davis and John Underwood requested that the CoC Board consider a hybrid model as meetings return to an in-person format to address transportation and accessibility concerns.
- David Duran reiterated that public access needs to be considered with a shift to in-person meetings and stated that the CoC Board may miss the representation of important community issues if the meetings are not accessible in a hybrid format.

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3. C4 Innovations Racial Equity Roadmap Data Request – Zulima Lundy, CoC Manager and Lisa Bahadosingh, C4 **Innovations**

Zulima Lundy provided an overview of the Office of Care Coordination's partnership with C4 Innovations to conduct a Racial Equity Analysis of the Orange County CoC. As part of the Racial Equity Roadmap, C4 Innovations will be analyzing data by race and ethnicity to identify, understand and address racial inequities in the Orange County CoC. Zulima Lundy provided a summary of the data request by C4 Innovations, including the HMIS data points being requested and reporting period.

Lisa Bahadosingh from C4 Innovations provided context for the data request and benefits of the data in identifying racial inequities and potential gaps in data. Lisa Bahadosingh shared that there will be three foundational sessions beginning on January 13, 2022, for the CoC to participate.

Recommended Action:

a. Approve C4 Innovations' data release request utilizing Homeless Management Information System (HMIS) data to inform the Racial Equity Roadmap as recommended by the Office of Care Coordination.

Patti Long motioned to approve the recommended action. Matt Bates seconded the motion. Motion passed unanimously.

CoC Board Member Comments:

- Judson Brown expressed that the Racial Equity Analysis is important to City of Santa Ana, as the lowest income city in Orange County. Judson Brown stated that he hopes C4 Innovations is able to capture the larger picture of the inequitable distribution of people experiencing homelessness in Orange County and its effects on the City of Santa Ana.
- Matt Bates expressed the importance of broadening the perspective of the analysis to include system performance and to consider the historic barriers of housing to people of color in Orange County. Matt Bates stated that understanding the legacy of racial systemic discrimination will help the CoC to frame efforts moving forward.

Public Comments:

- John Underwood inquired about why C4 Innovations will not be looking granularly at data narrowed down by zip code.
- David Duran stated that since the clearing of the Santa Ana Riverbed, many individuals experiencing homelessness have returned to the City of Santa Ana due to the proximity of services, leading to a high population of individuals experiencing homelessness.

4. 2022 Orange County Point In Time Count Presentation – Zulima Lundy, CoC Manager and Matt Bates, City Net

The Office of Care Coordination has contracted with City Net to conduct the 2022 Unsheltered Point In Time (PIT) Count. Matt Bates from City Net presented information about the 2022 PIT Count, including the benefits of the PIT Count, methodology, timeline and important dates, volunteer needs, and COVID-19 safety considerations.

Zulima Lundy shared that information will be sent to the CoC regarding upcoming virtual volunteer information sessions and the updating of the PIT Count website: http://www.everyonecountsoc.org/

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Board Member Comments:

• Tim Shaw asked for clarification on how to connect with City Net to support the 2022 PIT Count efforts. City Net encouraged emailing info@everyonecounts.org for further information.

Public Comments:

- Nikki Buckstead shared the ways in which the Family Solutions Collaborative (FSC) is supporting the 2022 PIT Count efforts. FSC will be opening their nine access points as walk-in centers on January 25th and 26th to engage with families experiencing homelessness and provide supportive services and incentives. FSC will be conducting a training with City Net around completing the survey and engaging with families.
- John Underwood inquired if there is a role for law enforcement in accompanying PIT Count team members to remote locations where unhoused residents are located.
- David Duran stated that in past years, one of the challenges was the timely report of the PIT Count and inquired if there is an estimate of the date the report will be released in 2022.
- Pat Davis reiterated John Underwood's comment regarding law enforcement and wondered how to best outreach and build trust with the people experiencing homelessness who are surveyed during the PIT Count.

5. Orange County CoC Leadership Vision for Calendar Year (CY) 2022-24 – Tim Shaw, Chair and CoC Vision Ad Hoc

On February 20, 2021, the CoC Board approved the creation of a CoC Vision Ad Hoc. The CoC Vision Ad Hoc developed a draft of a three-year Leadership Vision for the Orange County CoC Board, focusing on efforts that:

- Permanently house those experiencing homelessness
- Ensure an efficient, dignified system
- Promote an equitable and just system
- Drive system-wide engagement and collaboration
- Strengthen regional leadership and accountability
- Smartly allocate funds to match the greatest needs

Recommended Action:

a. Adopt the Orange County CoC Leadership Vision for CY2022-24 as recommended by the CoC Vision Ad Hoc.

Patti Long motioned to approve the recommended action. Donald Dermit seconded the motion. Motion passed unanimously.

CoC Board Member Comments:

- Patti Long emphasized that good leadership requires vision and the desire to be bold, stating that serving on the CoC Board is not about building a resume, but effecting change.
- Zulima Lundy read a statement of support on behalf of Dawn Price for the work of the CoC Vision Ad Hoc and the resulting document that is before the CoC Board today.
- George Searcy commended the CoC Vision Ad Hoc and voiced support for the implementation. George Searcy emphasized the importance of the CoC supporting the need for more available housing, especially when it comes to diversity and inclusion.
- Judson Brown expressed concern about the use of the terminology "homeless prevention" in the CoC Leadership Vision, as this term is often used broadly as an excuse to not take action towards ending homelessness. The CoC Vision Ad Hoc responded that the language was included as a literal interpretation of the CoC's roles and responsibilities.

Public Comments:

- Pat Davis expressed support and appreciation of the direct and realistic approach of the CoC Board.
- Nikki Buckstead expressed appreciation for the innovative approach, forward thinking, and leadership of the CoC Board.
- Rebecca Kovacs-Stein, a volunteer for housing search assistance, emphasized the lack of available
 housing in Orange County and suggested that housing navigation programs employ the services of
 part-time realtors to assist clients.
- David Duran expressed hope that the CoC Board will not fall into the perception of the public and begin using negative rhetoric against out unhoused community.

6. 2022 CoC Board Recommendations – Zulima Lundy, CoC Manager

Zulima Lundy provided an overview of the CoC Board nomination and election process, including CoC Board seats to be filled, and the timeline of the nomination and election process from October 2021 to present. The Orange County CoC has identified nine candidates to fill the CoC Board seat vacancies.

Recommended Action A:

Ratify the results from the CoC Board election to appoint the following candidates to the available CoC Board seats:

- i. Elida Sanchez for the McKinney-Vento representative seat
- ii. Eric Richardson for the veteran representative seat
- iii. Albert Ramirez for Emergency Solutions Grant (ESG) Entitlement Jurisdiction or Funded Agency/ Recipient Agency seat\
- iv. George Searcy for the at-large seat prioritizing Affordable Housing Development Background and Expertise
- v. Dawn Price for the at-large seat representing expertise on homeless services and/or subpopulation focus, prioritizing People with Disabilities
- vi. Nikki Buckstead for the at-large seat representing expertise on homeless services and/or subpopulation focus, prioritizing Families
- vii. Dr. Shauntina Sorrells for the at-large seat representing expertise on homeless services and/or subpopulation focus, prioritizing Transitional Aged Youth
- viii. Becks Heyhoe for the at-large seat with no prescribed area of expertise/experience
- ix. Tim Shaw for the at -large seats with no prescribed area of expertise/experience

Recommended Action B:

Approve the 2022 CoC Board Meeting Calendar as recommended by the Office of Care Coordination.

Patti Long motioned to approve recommended actions A and B. Maricela Rios-Faust seconded the motion. Motion passed unanimously.

<u>Public Comments:</u>

• Rebecca Kovacs-Stein commented that she would like to see the results of the election and is not comfortable with anyone in any active litigation being appointed to the CoC Board.

7. Homekey Program Update and Recommendation – Zulima Lundy, CoC Manager and Albert Ramirez, City of Anaheim

The County of Orange, including OC Community Resources and Office of Care Coordination, has identified Homekey Program Round 2 project proposals that will submit an application in advance of the January 31, 2022, deadline for the bonus award and geographic pools. Zulima Lundy provided background on the CoC Board Special Meeting on December 9, 2021, and the proposed partnership with the City of Anaheim Studio 6 Motel Conversion project to create a viable and competitive application.

Albert Ramirez presented on the details and timeline of the Studio 6 Motel Conversion project, which will operate as interim housing for a period of up to five years prior to rehabilitation of the motel into Permanent Supportive Housing. The projects will offer 119 units total, of which 83 units will be part of the Homekey Program and the remaining 28 units will be used by other partners. The Studio 6 Motel Conversion project proposal requires a funding commitment of \$7.92 million to operate as interim housing for up to five years.

Zulima Lundy clarified that the Office of Care Coordination is recommending the use of \$2,000,138 in Homeless Housing, Assistance and Prevention (HHAP) Round 2 funding allocated to the Orange County CoC to provide enough funding for up to three years of interim housing operations, along with additional funding identified by Health care Agency (HCA) and the Office of Care Coordination.

Recommended Action A:

Approve the allocation of \$2,000,138 in Homeless Housing, Assistance and Prevention (HHAP) Program Round 2 funding to the Studio 6 Motel Conversion, a Homekey program Round 2 project application by the City of Anaheim, if awarded by the California Department of Housing & Community Development, for operating subsidies during interim housing phase.

George Searcy motioned to approve the recommended action. Jeanne Awrey seconded the motion. Maricela Rios-Faust confirmed her support for the recommended action via the chat. Albert Ramirez abstained. Matt Bates, Judson Brown, Natalie Bui, Donald Dermit, Patti Long, Tim Shaw and Christina Weckerly-Ramirez voted yes. The motion passed.

CoC Board Member Comments:

- Tim Shaw voiced his support that this is an efficient use of HHAP Round 2 funding and highlighted the direct tie to the CoC Vision of identifying opportunities to expand housing availability via the Homekey Program.
- Patti Long requested clarification on this item in comparison to the items voted on during the CoC Special Board meeting on December 9, 2021.
- Donald Dermit expressed gratitude to the Cities of Anaheim, Huntington Beach, and Costa Mesa for pursuing Homekey Program funding and requested clarification about the targeted age range of this project, emphasizing the need for housing for individuals ages 65 and older.

Public Comments:

- Pat Davis expressed that she is happy to see this project moving forward and hopes this is just the
- Rebecca Kovacs-Stein inquired about what is happening to individuals who are currently sheltered at the Studio 6 Motel location, as she is working with an individual who received an eviction notice.
- John Underwood provided context about the lessons learned in Los Angeles County as it relates to Homekey and the robust "adaptive re-use" projects and urged the CoC to broaden their Homekey methodology.

8. The Longest Night Virtual Candlelight Vigil – Tim Houchen, CoC Board Member

Tim Houchen provided information on the Longest Night Virtual Candlelight Vigil, hosted by Home 4 Restoration & Women Driver's Interfaith Group. On this night, the lives of Orange County neighbors who died without a permanent, safe, and secure place to call home are commemorated. The event will begin on December 21, 2021, at sunset. To receive a link to this year's vigil by signing up on Women's Driver's Email list: https://eepurl.com/hle9jp.

MINUTES December 15, 2021 CoC Board Pckt. Pg 13 Tim Houchen provided an update on his efforts to create a taskforce or commission to better understand homeless mortality in Orange County and begin identifying ways to reduce the number of deaths. Tim Houchen expressed the importance of comprehensive data to create programs to reduce the deaths. This item was brought to the Lived Experience Advisory Commission for discussion.

<u>Public Comments:</u>

• David Duran expressed that the number of individuals that pass away due to the effects of experiencing homelessness is much higher than the 386 being represented.

Motion to Adjourn: Meeting was adjourned at 12:28 p.m.

Next Meeting: Wednesday, January 19, 2022, from 2 p.m. to 4 p.m.

December 15, 2021 **MINUTES** - 8 -

Date: January 19, 2022

Subject: Brown Act Update and Determination in accordance with Assembly Bill 361

Recommended Action:

a. Determination in accordance with AB 361 Section 3(e)(3) that, while the state of emergency due to the COVID-19 pandemic, as originally proclaimed by the Governor on March 4, 2020, remains active and/or state or local officials have imposed or recommended measures to promote social distancing, the Orange County CoC Board has reconsidered the circumstances of the state of emergency and has determined that the state of emergency continues to directly impact the ability of the members to meet safely in person and/or state or local officials continue to impose or recommend measures to promote social distancing.

Background

The Ralph M. Brown Act (Gov. Code §§ 54950-54963) requires that most deliberations and actions of public boards, committees, and commissions ("BCCs") be conducted and taken openly. Prior to the COVID-19 emergency, this required meetings of BCCs to be held in person, with teleconferencing by a member allowed only under limited circumstances. On June 11, 2021, the Governor issued Executive Order N-08-21, waiving certain provisions of the Brown Act and authorizing BCCs to hold public meetings virtually. The Executive Order specified that those waivers remain valid through September 30, 2021.

On September 16, 2021, the Governor signed into law Assembly Bill 361 (AB 361), amending the Brown Act to allow BCCs to continue virtual meetings until January 1, 2024, but with less flexibility than afforded by the Executive Order. AB 361 adds a new subsection (e) to Government Code Section 54953, laying out the requirements for such meetings.

AB 361 notes that virtual meetings must take place during a proclaimed state of emergency where State or local officials have imposed or recommended measures to promote social distancing, or during a proclaimed state of emergency where the BCC determines by majority vote that meeting in person would present imminent risks to the health or safety of attendees. If the BCC determines that holding virtual meetings is in the best interest, it shall make the following findings every 30 days thereafter:

- 1. Review and reconsider the circumstances of the state of emergency.
- 2. Find that the state of emergency continues to directly impact the ability of the members to meet safely in person. [or] State or local officials continue to impose or recommend measures to promote social distancing.

During the December 15, 2021, meeting, the Orange County CoC Board evaluated the state of the COVID-19 emergency and determined it continuous to directly impact the ability of the members to meet safely in person thus recommending the continuation of teleconference meeting for the next 30 days.

Analysis

The Orange County CoC has been conducting the Board and Committee meetings in accordance with the waivers as authorized in Executive Order N-908-21. With the waivers coming to an end and in accordance with subsection (e) to Government Code Section 54953, the Orange County CoC will be considering the circumstances of the recommended action to continue teleconferenced meetings for the next 30 days. This action will support the Orange County CoC in continuing to meet to further the goals of the CoC and ensure continuity of CoC activities. Additionally, it will provide the CoC membership and the Collaborative Applicant ample time to plan for the transition to in-person meetings and implementation of COVID-19 safety protocols.

Date: January 19, 2022

Subject: 2022 Continuum of Care (CoC) Board Appointments

Recommended Action:

- **a.** Elect CoC Board Officers for the upcoming term:
 - i. Appoint a CoC Board Chair
 - ii. Appoint a CoC Board Vice Chair
 - iii. Appoint a CoC Board Secretary
- **b.** Appoint CoC Committee Chairs and Membership:
 - i. Appoint a CoC Board Member to the Coordinated Entry System (CES) Committee
 - ii. Appoint CoC Board Members to the Policies, Procedures and Standards Committee
 - iii. Appoint a CoC Board Member to the Orange County Housing Finance Trust Advisory Board to advise the OC Housing Finance Trust Board of Directors
- **c.** Recommend a CoC Board Member to the CoC Representative seat for the Commission to End Homelessness.

Background and Analysis

The Orange County Continuum of Care (CoC) Board and its subcommittees are chaired by designated representatives to ensure the sustained vision and support of CoC Board initiatives. At the first meeting of each calendar year, the CoC Board will elect the Board Officers (Chair, Vice-Chair and Secretary) to serve for one-year terms. CoC Board Officers may serve for more than one but not more the two consecutive terms as an Officer. During the CoC Board meeting, nominations and election of officers will occur amongst CoC Board Membership via roll call vote. CoC Board Officers are expected to attend a monthly planning meeting with the Office of Care Coordination, as well as commit to responsibilities outlined in Attachment A.

Following the election of the CoC Board Officers, the CoC Board Vice Chair will be responsible for chairing the Policies, Procedures and Standards (PPS) Committee. Additional PPS Committee membership shall be comprised of the chairs of any ongoing CoC Board Committees, as well as no fewer than one and no more than two at large board members. The PPS Committee members continuing into the 2022 calendar year include Matt Bates, Commission to End Homelessness Representative; Judson Brown, Chair of the Housing Opportunities Committee; and Christina Weckerly-Ramirez, at large seat representative. At least one additional representative is needed, as the Coordinated Entry System (CES) Steering Committee chair, Natalie Bui, has completed her term.

On November 17, 2021, the CoC Board was presented with the recommended action to appoint CoC Board Member to the Orange County Housing Finance Trust (OCHFT) Advisory Board to advise the OC Housing Finance Trust Board of Directors. Due to the upcoming CoC Board elections, the CoC Board motioned to

defer the appointing of an OCHFT representative from the CoC Board until the January 2022 meeting of the CoC Board.

Additionally, a new Chair of the CES Steering Committee shall be appointed by the CoC Board membership, as well as a CoC Board representative to the Commission to End Homelessness. The role and committee descriptions included in Attachment A are provided to assist the CoC Board in making informed decisions in the nomination and selection process.

Attachments

Attachment A – CoC Board Officer and Representative Descriptions

Orange County Continuum of Care Board Officer Role Descriptions

CoC Board Chair

- Responsible for facilitating the work of the Orange County Continuum of Care (CoC), including:
 - Build community awareness of the needs of all populations at risk of homelessness and experiencing homelessness
 - Ensure, to the greatest extent possible, access to homeless services by all subpopulations
 - Ensure relevant organizations and projects serving various homeless and at-risk subpopulations are represented in the planning and decision-making for the overall coordination of homeless services
 - Promoting regional coordination and collaboration across service providers and sectors
 - Promoting utilization of the Homeless Management Information System and the Coordinated Entry System
- In partnership with CoC Board and the Office of Care Coordination:
 - o Coordinate the CoC federal programs and State homeless service grants
 - Set goals and priorities for ending homelessness in Orange County
- Responsible for leading the monthly CoC Board meetings, including calling the meeting to order, managing the agenda, taking votes and adjourning meetings
- Meet monthly with Vice Chair and Office of Care Coordination to discuss the work of the CoC and plan for upcoming meetings of the CoC. This includes:
 - Matters referred to the CoC Board by the CoC Committees to be placed on calendar for consideration and action by the CoC Board or CoC At Large Membership
 - If there is an issue of importance to the CoC Board, the Chair will coordinate with Office of Care Coordination staff prior to placing the item on the calendar
- Responsible for signing documents on behalf of the Orange County CoC Board

CoC Board Vice Chair

- Responsible for Chairing CoC Board meetings in the absence of Chair or when Chair must recuse himself/herself
- Meet monthly with Chair and Office of Care Coordination to discuss the work of the CoC and plan for upcoming meetings of the CoC. This includes:
 - Matters referred to the CoC Board by the CoC Committees to be placed on calendar for consideration and action by the CoC Board or CoC At Large Membership
 - If there is an issue of importance to the CoC Board, the Chair will coordinate with Office of Care Coordination staff prior to placing the item on the calendar
- Responsible for supporting the Chair on matters related to the CoC
- Responsible for chairing the Policy, Procedures and Standards Committee meetings

CoC Board Secretary

- Responsible for chairing CoC Board meetings in the absence of both the Chair and Vice Chair, or when Chair and Vice Chair must recuse themselves
- Responsible for calling roll and tracking attendance at CoC Board meetings
- Responsible for calling roll and tracking motions and votes during CoC Board meetings when action items are being considered
- Responsible for reviewing the draft CoC Board minutes recorded by the Office of Care Coordination

Committee Representative Descriptions

Coordinated Entry System (CES) Steering Committee Chair

- The CES Committee shall be chaired by a CoC Board Member appointed by the CoC Board for a twoyear term, ensuring continuity and alignment with the CoC Board.
- The CES Committee is responsible for the following functions:
 - Creating any workgroups necessary for the proper and efficient functioning of the CES and dissolving workgroups, if they are determined to be unnecessary for the proper and efficient functioning of the CES.
 - Vetting all proposed policies arising from workgroups to ensure adherence to the Homeless Emergency Assistance and Rapid Transition to Housing (HEARTH) Act, U.S. Department of Housing and Urban Development (HUD) Notices and regulations, and evidence-based practices. The CES Committee will then determine whether proposed policies and standards will be referred for additional input and recommendation to the Policies, Procedures and Standards Committee.
 - Identify opportunities and develop recommendations to strengthen and improve the CES core elements of access, assessment, prioritization, and referral.
 - Identify opportunities and develop recommendations to align HMIS functionality with CES policies and procedures.
 - Working with the CES Lead Agency (County of Orange) to update the CES Policies and Procedures at minimum every five years, which will include all procedures and policies needed to comply with HUD mandates and HEARTH Act regulations.

Policies, Procedures and Standards (PPS) Committee Representatives

- The PPS Committee shall be chaired by the CoC Board's Vice Chair. The PPS Committee chair will meet for a monthly PPS Committee Planning Meeting with the Office of Care Coordination.
- Additional membership shall be comprised of the chairs of any ongoing CoC Board Committees, as well as no fewer than one and no more than two at large board members.
- The PPS Committee Chair and members that chair any ongoing CoC Board Committees, shall remain on the PPS Committee so long as they hold their seat as Vice Chair of the CoC Board or Chair of any CoC Board Committees.
- At large members shall be nominated by the CoC Board annually upon completion of the CoC Board Officer elections, with the exception of the first year.
- The PPS Committee is responsible for the following functions:
 - Recommending any committees, workgroups and ad hoc groups necessary for the proper and efficient functioning of the Orange County CoC and recommending dissolving any committees, workgroups and ad hoc groups, if they are determined to be unnecessary for the proper and efficient functioning of the Orange County CoC.

Item III. Attachment A

- Vetting all proposed policies arising from committees/workgroups to ensure adherence to the Homeless Emergency Assistance and Rapid Transition to Housing (HEARTH) Act, U.S. Department of Housing and Urban Development (HUD) Notices and regulations, and evidence-based practices. The PPS Committee will then determine whether proposed policies and standards will be referred for additional input, recommended to the CoC Board for adoption through a consent item, or head for further conversation and vote by the full CoC Board.
- Establishing a clear standard for the level of care that agencies should provide by program type. This level of care and service delivery will support a minimum threshold and consistent practices across the CoC.
- Working with the Collaborative Applicant (County of Orange) to update the CoC Board Governance Charter annually, which will include all procedures and policies needed to comply with HUD mandates and HEARTH Act regulations.

Representation in other Boards

Orange County Housing Finance Trust Advisory Board Representative

- Orange County Housing Finance Trust (OCHFT) adopted Bylaws detailing the creation of an Advisory Board. The Advisory Board will consist of seven members and shall advise the Board of Directors with respect to all matters that OCHFT Board of Directors has taken in furtherance of OCHFT's purpose.
- The Advisory Board membership is entitled to attend all OCHFT regular and special meetings and to fully participate in such meetings but cannot vote on project applications or amendments to OCHFT bylaws, rules, or procedures. It is anticipated that the Advisory Board will meet quarterly.
- Terms of office for members of the Advisory Board shall be for two (2) years. An Advisory Board member's seat shall be deemed vacant if he or she fails to attend three consecutive regular or special meetings, or if his or her appointing body removes him or her. Upon a vacancy, the appointing body shall be notified and shall attempt to fill the vacancy within sixty (60) days of the vacancy occurring.
- One of the seven members of the Advisory Board will be a member who also serves on the Orange County CoC Board.

Commission to End Homelessness Representatives

- The purpose of the Commission to End Homelessness (Commission) is to:
 - Work in collaboration with County government, City governments, philanthropy, business sector, community- and faith-based organizations, and other interested stakeholders to focus on regional policy and implementation strategies, affordable housing development, data and gaps analysis, best practice research, social policy and systemic change to promote an effective response to homelessness within Orange County.
 - Act as an advisory Commission to the BOS, having no independent authority to act on matters such as legislation or lobbying.
 - Foster regional leadership that promotes resource development to address homelessness within Orange County.
- Non-voting members of the Commission shall have the following terms of office and only serve while a member of the Continuum of Care Board:
 - All non-voting members will have two-year terms; terms of office may be renewed at the discretion of the Commission. Maximum term will be (four terms) eight years.
 - A member, who has not been reappointed or replaced at the expiration of his/ her term, shall serve as a member of the Commission until reappointed or replaced by the Commission.

Date: January 19, 2022

Subject: Policy, Procedure and Standards Committee Recommendations

Recommended Action for HMIS:

- a. Approve the recommended updates to the Homeless Management Information System (HMIS) Policies and Procedures.
- b. Take action in support of the HMIS Lead, 2-1-1 Orange County, entering into a multi-year contract with the HMIS Vendor, BitFocus.

Background and Analysis

On July 13, 2021, an update was provided to the Policies, Procedures and Standards (PPS) Committee on the Orange County Continuum of Care (CoC) Board directive to establish a schedule and review process for the HMIS Policies and Procedures and shared the Data Quality Plan proposal. The Policies and Procedures annual review proposed plan is to create a working group comprised of HMIS Agency Administrators and one (1) to two (2) CoC Board Members to review HMIS Policies and Procedures on an annual basis. The 2021 review would begin in August 2021. The Data Quality Plan included the data quality components, monitoring and reporting, data quality reports and tools, and proposed incentives and enforcements.

On August 10, 2021, 2-1-1 Orange County (211OC) as the HMIS Lead and the Office of Care Coordination as the Collaborative Applicant provided an update to the PPS Committee on the progress to date of identifying a working group to support with this process, including identifying HMIS Agency Administrators and CoC Board members to engage and participate in the review. The working group was confirmed and comprised of five members — Donald Dermit, CoC Board member; Soledad Rivera, CoC Board member; Katherine Rodriguez, HMIS Administrator for Family Solutions Collaborative; John Paul Bryan, HMIS Administrator for Mercy House; and Cassie Wood, HMIS Administrator for City Net.

The HMIS Policies and Procedures Working Group met on five occasions to review the HMIS Policies and Procedures in detail as well as provide edits and recommendations on how to best improve and clarify sections of the document on September 10, 2021; October 1, 2021; November 2, 2021; December 9, 2021; and January 4, 2022. Through this process, additional policies that had been developed to support the operations and management of HMIS were incorporated into one comprehensive document of HMIS Policies and Procedures, including the HMIS fee policy and the HMIS Access and Minimum Participation Requirement Policy.

The attachments accompanying this Agenda Item Memo provide an updated draft of the HMIS Policies and Procedures, as well as summary of proposed changes and new forms and accompanying documents developed to support the HMIS Policies and Procedures. These materials and proposed changes for the HMIS Policies and Procedures were presented to the PPS Committee for recommended action on January 5, 2022. The PPS Committee motioned to approve the recommended changes to the HMIS Policies and Procedures, noting that the agency access application and appeals process will be updated. The Office of

Care Coordination committed to bringing a revised agency access application and appeals process to the PPS Committee at a future meeting.

Approval of Recommended Action B for the updates to the HMIS Policies and Procedures will support the Orange County CoC with the ongoing operations and management of the HMIS. Additionally, it will provide the needed guidance and support to 2110C to operate the HMIS as described in the HMIS Policies and Procedures document.

211OC is currently negotiating a contract with the HMIS vendor, BitFocus, for continued access to Clarity, the HMIS platform utilized by the Orange County CoC. Through the negotiation process, 211OC has identified potential cost-savings if a multi-year contract with the HMIS Vendor is established. 211OC is interested in receiving support from the Orange County CoC to enter into a multi-year contract. As such, Recommended Action C would support 211OC in moving forward with the negotiation process.

Attachments

Attachment A – Orange County HMIS Policies and Procedures

Attachment B – Orange County HMIS Project Performance Overview

Attachment C – Orange County HMIS Grievance Form

Attachment D – Summary of Proposed Changes to the Orange County HMIS Policies and Procedures

Recommended Action for North Orange County Public Safety Collaborative:

- c. Approve the recommendation for the North Orange County Public Safety Collaborative request with the following principles and within the following parameters, as recommended by the Ad Hoc and the Policies, Procedures and Standards Committee:
 - 1. Preservation of the Homeless Management information System (HMIS) integrity is paramount
 - 2. Supports the aim of linking individuals experiencing homelessness to appropriate resources and are therefore proposing that this collaboration could focus on integration with Coordinated Entry System (CES).
 - 3. Encourage participation in HMIS through the current established processed in the HMIS Policies and Procedures for the entry of data that may be valuable to the Orange County Continuum of Care (CoC).
 - 4. Mechanism of implementation will require further thought and potential policy and process.

Background and Analysis

On August 10, 2021, the representatives from the North Orange County Public Safety Collaborative (NOCPSC) provided a presentation to the Policies, Procedures and Standards (PPS) Committee on their efforts to address homelessness in the North Service Planning Area and request to integrate Outreach Grid with the HMIS utilized by the Orange County CoC. As a result, the PPS Committee moved to establish an Ad Hoc to review the request by the NOCPSC in more detail and return to the PPS Committee with a recommendation on how to best address the request.

An Ad Hoc comprised of three members – Christina Weckerly-Ramirez, Eric Richardson, and Analisa Andrus – was established to explore the request to establish a data-sharing mechanism between Outreach Grid and HMIS. The Ad Hoc had an initial meeting on September 28, 2021; a joint meeting with representatives from NOCPSC and Outreach Grid on October 25, 2021, to further discuss the request and gain additional insight and background; and a final meeting on January 5, 2022, to debrief on the information received and arrive at a recommendation for the PPS Committee Meeting.

The Ad Hoc recommend redefining the request from NOCPSC and Outreach Grid, with the following principles and within the following parameters:

- The preservation of HMIS integrity is paramount, including governance, data quality, functionality
 and purpose. The ad hoc has outstanding concerns regarding how the proposed manual push / pull
 of data could compromise data integrity and recommend this be further explored in conjunction
 with the HMIS Lead to ensure appropriate checks and balances.
- The Ad Hoc supports the aim of linking individuals experiencing homelessness to appropriate resources and are therefore proposing that this collaboration could focus on data-sharing and integration of CES elements only. This would involve a pull of CES- related data only from HMIS into Outreach Grid. The Ad Hoc was supportive of receiving information and data from Outreach Grid to HMIS, as determined appropriate by the Orange County CoC, through a pull mechanism.
- The Ad Hoc is committed to promoting efficiencies in service delivery and propose that NOCPSC and Outreach Grid seek to become HMIS participating agencies through the current established process as detailed in the HMIS Policies and Procedures. This would allow for the entry of data directly into HMIS and facilitate care coordination with the Orange County CoC.
- The Ad Hoc recognized that mechanics of implementation will require further thought and potential policy / process, including but not limited to:
 - o Role-Based Access Control determining which users have view, edit and deletion privileges and who is responsible for setting and maintaining these permissions.
 - o Release of Information / Authorization.
 - o Audit and Breach Procedures.
 - o Frequency and Costs
 - o Roles and Responsibilities

The recommendation for the NOCPSC request was presented to the PPS Committee for approval on January 11, 2022, and approved by the PPS Committee.

Approval of the recommended action by the CoC Board in response to the NOCPSC request will provide the next step and direction for the Orange County CoC and the HMIS Lead to develop a data-sharing policy and related processes and procedures. Additional updates will continue to be provided to the CoC Board and PPS Committee on the progress to date, as well as draft policies and procedures to be implemented.

Orange County HMIS Policies and Procedures

JANUARY 2022

2-1-1 Orange County
www.ochmis.org | www.2110c.org

Item IV. Attachment A

Orange County HMIS Policies and Procedures

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Key Terms and Acronyms

All documents referenced in the HMIS Policies and Procedures can be found on the HMIS Documents page of the OC HMIS Information website unless otherwise noted.

Term	Acronym (if applicable)	Definition
2-1-1 Orange County	2110C	Homeless Management Information System (HMIS) Lead Agency for Orange County Continuum of Care (CoC)
Agency Administrator	AA	The HMIS User designated by their agency to serve as Agency Administrator is responsible for training new HMIS Users and overseeing data quality management, among other duties described in the Policies and Procedures
Agency Agreement		The agreement form between OC HMIS participating agencies and 211OC that specifies the rights and responsibilities of the participating agency and 211OC regarding the use of HMIS.
Annual Homeless Assessment Report	AHAR	The AHAR is a national-level report that provides information about homeless service providers, people and households experiencing homelessness, and various characteristics of that population. It informs strategic planning for federal, state, and local initiatives designed to prevent and end homelessness. The AHAR is submitted to Congress on an annual basis.
Chronically Homeless	CH	In order to be eligible for housing restricted to chronically homeless individuals or families under the CoC program, participants must meet the definition of chronically homeless. The definition of chronically homeless is: • A homeless individual with a disability as defined in section 401(9) of the McKinney-Vento Assistance Act (42 U.S.C. 11360(9)), who: • Lives in a place not meant for human habitation, a safe haven, or in an emergency shelter, and • Has been homeless and living as described for at least 12 months* or on at least 4 separate occasions in the last 3 years, as long as the combined occasions equal at least 12 months and each break in homelessness separating the occasions included at least 7 consecutive nights of not living as described. • An individual who has been residing in an institutional care facility for less, including jail, substance abuse or mental health treatment facility, hospital, or other similar facility, for fewer than 90 days and met all of the criteria of this definition before entering that facility*; or • A family with an adult head of household (or, if there is no adult in the family, a minor head of household) who meets all of the criteria of this definition, including a family whose

		composition has fluctuated while the head of household has been homeless.
Client Identifying Information	CII	Client Identifying Information, also known as Personal Protected Information (PPI), is a category of sensitive information that is associated with an individual person. This information should be accessed only on a strict need-to-know basis, handled and stored with care. This category includes but is not limited to: First names, last names, dates of birth, and Social Security Numbers.
Continuum of Care	СоС	The Continuum of Care is a collection of nonprofits and agencies that come together to promote community wide commitment to the goal of ending homelessness; promote access to and affect utilization of mainstream programs by homeless individuals and families; and optimize self-sufficiency among individuals and families experiencing homelessness.
Continuum of Care Board	CoC Board	The Orange County Continuum of Care Board is the governing body for the Orange County CoC. They are committed to the goal of ending homelessness and are organized to carry out the responsibilities required under the CoC Program regulations, 24 CFR Part 578.
Continuum of Care Collaborative Applicant	CoC Collaborative Applicant	The Orange County CoC designated the County of Orange as the Collaborative Applicant. The CoC Collaborative Applicant is tasked with coordinating the development of the CoC system, its planning, and supporting the various functions and activities as required by the HEARTH Act.
Continuum of Care Program	CoC	The CoC Program is designed to assist individuals (including unaccompanied youth) and families experiencing homelessness and to provide the services needed to help such individuals move into transitional and permanent housing, with the goal of long-term stability. More broadly, the program is designed to promote community-wide planning and strategic use of resources to address homelessness; improve coordination and integration with mainstream resources and other programs targeted to people experiencing homelessness; improve data collection and performance measurement; and allow each community to tailor its program to the particular strengths and challenges within that community.
Coordinated Entry System	CES	A project that administers the continuum's centralized or coordinated process to coordinate assessment and referral of individuals and families seeking housing or services, including the use of a comprehensive and standardized assessment tool.
Coverage Rate		Coverage rate refers to the percentage of beds targeted to serve homeless clients in a geographic area that are captured in the Homeless Management Information System (HMIS) divided by the total number of beds targeted to serve homeless clients in the geographic area (excluding beds targeted to serve domestic violence clients). Coverage rate estimates are used to project a total homeless count if there are homeless service providers in the jurisdiction that do not participate in HMIS.

Day Shelter	DS	A project that offers daytime facilities and services (no overnight lodging) for persons who are experiencing homelessness.
Department of Health and Human Services	HHS	The U.S. Department of Health and Human Services (HHS), also known as the Health Department, is a cabinet-level department of the U.S. Federal government. The Health Department's goal is to protect the health of all Americans and provide essential human services.
Department of Housing and Urban Development	HUD	The U.S. Department of Housing and Urban Development (HUD) is a Cabinet department in the Executive branch of the US. Federal government. HUD's goal is to create strong, sustainable, inclusive communities and quality affordable homes for all.
Emergency Shelter	ES	A project that offers temporary shelter (lodging) for people experiencing homelessness in general or for a specific population of people experiencing homelessness. Requirements and limitations may vary by program and may be specified by the funder.
Emergency Shelter Tracking Method		The method used to track the nights that a client stays at an Emergency Shelter project. One method must be identified in an HMIS for each Emergency Shelter project. The method used is important for the indication of length of stay in projects. • Entry/Exit: Used for all shelters that are able to collect client data (Universal Data Elements and certain Program-Specific Data Elements) at project start and project exit, including projects that require or strongly encourage a continuous stay while a client resolves their homelessness. For such shelters, length of stay is calculated based on the number of nights between project entry and project exit. • Night-by-Night (NBN): Used by some high-volume shelters and shelters where a significant proportion of clients spend a night at the shelter as needed on an irregular basis. For reporting purposes, a client's length of stay in the project will be based on the actual number of bed nights and not on the period of time from entry to exit.
Emergency Solutions Grants Program	ESG	 The ESG program provides funding to: Engage homeless individuals and families living on the street; Improve the number and quality of emergency shelters for homeless individuals and families; Help operate these shelters; Provide essential services to shelter residents; Rapidly re-house homeless individuals and families; and Prevent families and individuals from becoming homeless.
Health Insurance Portability and Accountability Act of 1996	НІРАА	The Health Insurance Portability and Accountability Act of 1996, particularly the Privacy Rule under Title II, regulates the use and disclosure of Protected Health Information (PHI) held by covered entities and business associates. HIPAA is the base operational privacy rule on which the Orange County HMIS privacy rule is structured.

Orange County HMIS Policies and Procedures

HMIS Lead Agency		The HMIS Lead Agency is an agency, organization, or government department designated by the CoC Board to administer and manage the HMIS for the CoC jurisdiction.
Homeless Management Information System	HMIS	A data system that meets U.S. Department of Housing and Urban Development's requirements and is used to collect client-level data and data on the provision of housing and services to homeless individuals and families and persons at risk of homelessness. The HMIS is also the primary reporting tool for HUD homeless service grants as well as for other Federal, State and local government streams of funding related to homelessness. HMIS data is used to better inform homeless policy and analyze program and system impact in addressing homelessness.
Homelessness Prevention	НР	A project that offers services and/or financial assistance necessary to prevent individuals and families from experiencing homelessness, including moving into an emergency shelter or place not meant for human habitation.
Housing Inventory Count	HIC	The Housing Inventory Count (HIC) is a point-in-time inventory of housing programs within a CoC that provide beds and units dedicated to serve people experiencing homelessness (or for permanent housing projects, were experiencing homelessness at entry). The project types included in the HIC are Emergency Shelter, Transitional Housing, Rapid Re-housing, Safe Haven, and Permanent Supportive Housing. The US Department of Housing and Urban Development (HUD) requires the submission of the HIC on an annual basis.
Housing Opportunities for Persons with AIDS Program	HOPWA	HOPWA provides housing assistance and related supportive services for persons with HIV/AIDS, and family members who are homeless or at risk of homelessness. This project has different project reporting requirements than the other HUD funded projects described in the Policies and Procedures.
Interagency Data Sharing Consent Form		Allows client-level data and enrollment data to be shared among OC HMIS Participating Agencies. HOPWA funded projects are exempt from the data sharing mandate due to privacy laws protecting clients' HIV status.
Length of Stay	LOS	The number of days between the beginning of services and the end of services. It is calculated using entry and exit dates or shelter stay dates, depending on the project's method of tracking bed nights.
Longitudinal Systems Analysis	LSA	The LSA is a report submitted by each CoC on an annual basis, and includes demographic, performance, and household composition information, as well as patters of system use. The LSA from each CoC is consolidated to create the AHAR that is submitted to Congress.

Other (project type)		A project that offers services, but does not provide lodging, and cannot otherwise be categorized as another project type, per above. Any project that provides only stand-alone supportive services (other than outreach) and has no associated housing outcomes should be categorized as 'Other.' For example, a project funded to provide child care for persons in permanent housing or a dental care project funded to serve homeless clients should be typed 'Other.' A project funded to provide ongoing case management with associated housing outcomes should be typed 'Services Only.'
Participating Agencies		Agencies, organizations or local government departments that actively participate in HMIS through input of client-level data and project information.
PH - Housing Only	ОРН	A project that offers permanent housing for persons who are experiencing homelessness, but does not make supportive services available as part of the project.
PH – Housing with Services (no disability required for entry)	ОРН	A project that offers permanent housing and supportive services to assist homeless persons to live independently, but does not limit eligibility to individuals with disabilities or families in which one adult or child has a disability.
PH - Permanent Supportive Housing (disability required for entry)	PSH	A project that offers permanent housing and supportive services to assist chronic homeless persons with a disability (individuals with disabilities or families in which one adult or child has a disability) to live independently.
PH - Rapid Re-Housing	RRH	A permanent housing project that provides housing relocation and stabilization services and short- and/or medium-term rental assistance as necessary to help a homeless individual or family move as quickly as possible into permanent housing and achieve stability in that housing.
Point in Time Count	PIT	A point-in-time count is an unduplicated count on a single night during the last ten days of January of the people in a community who are experiencing homelessness that includes both sheltered and unsheltered populations. An annual sheltered PIT count is conducted using HMIS data and other sources. A biannual unsheltered PIT is conducted on odd years.
Policies, Procedures, and Standards Committee	PPS Committee	The PPS Committee will function as an advisory group to the CoC Board. This committee aligns with the intent of ensuring that the CoC has clearly documented policies and standards for process review, policy formation, assessment of current policies and procedures and formation and conduct of committees in the service of the CoC, Coordinated Entry System (CES) and Homeless Management Information System (HMIS). The PPS Committee will support with creating a clear structure for policy development and subsequent revisions, monitoring and vetting work done through committees, work groups and ad hoc groups will create efficiencies and improve the amount of work that the CoC Board can accomplish.

Project Types		A project is to be assigned a 'Project Type' based on the lodging or service it is providing. The project type selected directly impacts data collection and reporting requirements. The U.S. Department of Housing and Urban Development defines these Project Types in HMIS: • Homelessness Prevention • Street Outreach • Emergency Shelter • Day Shelter • Transitional Housing • Safe Haven • PH - Rapid Re-Housing • PH - Permanent Supportive Housing (disability required for entry) • PH - Housing with Services (no disability required for entry) • PH - Housing Only • Coordinated Entry • Services Only • Other
Projects for Assistance in Transition from Homelessness	РАТН	PATH is funded by the Substance Abuse and Mental Health Services Administration (SAMHSA). It provides services to mentally ill homeless people, primarily through street outreach, to link them to permanent community housing. This project has different reporting requirements than HUD funded projects and uses HMIS to collect this information.
Runaway Homeless Youth program	RHY	The Runaway and Homeless Youth Program (RHY) supports street outreach, emergency shelters and longer-term transitional living and maternity group home programs to serve homeless youth (up to age 25). The program is managed by the Family and Youth Services Bureau (FYSB).
Safe Haven	SH	A project that offers supportive housing that (1) serves hard to reach homeless persons with severe mental illness who came from the streets and have been unwilling or unable to participate in supportive services; (2) provides 24-hour residence for eligible persons for an unspecified period; (3) has an overnight capacity limited to 25 or fewer persons; and (4) provides low demand services and referrals for the residents.
Services Only	SSO	A project that offers only stand-alone supportive services (other than outreach) to address the special needs of participants (such as child care, employment assistance, and transportation services) and has associated housing outcomes.

Street Outreach	SO	A project that offers services necessary to reach out to unsheltered homeless people, connect them with emergency shelter, housing, or critical services, and provide urgent, non-facility-based care to unsheltered homeless people who are unwilling or unable to access emergency shelter, housing, or an appropriate health facility. Only persons who are "street homeless" should be entered into a street outreach project. Projects that also serve persons other than "street homeless" must have two separate projects to be set up in an HMIS – one 'Street Outreach' and the other 'Services Only.'
Supportive Services for Veteran Families Program	SSVF	This program is overseen by the VA, and the purpose is to provide supportive services grants to private non-profit organizations and consumer cooperatives who will coordinate or provide supportive services to very low-income veteran families who are residing in permanent housing, are homeless and scheduled to become residents of permanent housing within a specified time period, or after exiting permanent housing, are seeking other housing that is responsive to such very low-income veteran family's needs and preferences.
System Performance Measures	SPM	The HUD System Performance Report measures the performance of a CoC as a whole as mandated by the 2009 HEARTH Act. The System Performance Report analyzes the performance of Safe Haven, Street Outreach, Emergency Shelter, Transitional Housing, and Permanent Housing (including Permanent Supportive Housing, Rapid Re-Housing, and Other Permanent Housing) project types in the Orange County CoC that participate in HMIS.
Transitional Housing	TH	A project that provides temporary lodging and is designed to facilitate the movement of homeless individuals and families into permanent housing within a specified period of time, but no longer than 24 months. Requirements and limitations may vary by program and may be specified by the funder.
U.S. Department of Veterans Affairs	VA	The U.S. Department of Veterans Affairs provides patient care and federal benefits to veterans and their dependents.
User Agreement		The agreement form between individual users and the HMIS Lead Agency that outlines a user's responsibilities when using HMIS. This form is signed on the user's first log-in to HMIS, and again every year the user's account is active.
Veteran Affairs Supportive Housing	VASH	The HUD-Veterans Affairs Supportive Housing (HUD-VASH) program combines Housing Choice Voucher (HCV) rental assistance for homeless Veterans with case management and clinical services provided by the U.S. Department of Veterans Affairs (VA). VA provides these services for participating Veterans at VA medical centers (VAMCs) and community-based outreach clinics.

211OC: HMIS Lead Agency

The Orange County CoC has designated 2-1-1 Orange County (2110C) as the Homeless Management Information System (HMIS) Lead Agency. As the HMIS Lead Agency, 2110C is tasked with assisting the Orange County CoC with:

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- Developing and implementing a privacy plan, security plan and data quality plan for the CoC HMIS
- Ensuring consistent participation of State, Federal and local government funded recipients and sub recipients in HMIS
- Ensuring HMIS is administered in compliance with requirements prescribed by the U.S. Department of Housing and Urban Development (HUD)
- Ensuring the HMIS operates efficiently and effectively to promote agency participation and system coordination
- Providing system, agency, and project-level analysis of utilization and performance across the CoC

HMIS Lead Agency Contact Information:

OC HMIS Information Website http://ochmis.org/

OC HMIS Training Website http://training.ochmis.org/
OC HMIS Login https://oc.clarityhs.com/login

HMIS Helpdesk http://ochmis.211oc.happyfox.com/home

I. Background & Purpose

The Homeless Management Information System (HMIS) is the electronic data collection system utilized by the Orange County CoC to comply with the responsibilities outlined in 24 CFR 578.7(b) for designating and operating an HMIS. HMIS is the local information technology system requirements that U.S. Department of Housing and Urban Development (HUD) funding recipients and subrecipients use for homeless assistance programs as authorized by the McKinney-Vento Homeless Assistance Act. The Homeless Emergency Assistance and Rapid Transition to Housing (HEARTH) Act codifies in law certain data collection requirements integral to HMIS. The HEARTH Act requires that HUD ensure operation of and consistent participation by recipients and sub-recipients in an HMIS compliant software. Current HMIS standards are included in the 2004 Technical Standards and the 2010 Data Standards.

HUD and other planners and policymakers use aggregate HMIS data to better inform homeless policy and decision making at the federal, state and local government levels. HMIS enables HUD to collect aggregate data at the national-level on the extent and nature of homelessness over time. Specifically, an HMIS can be used to produce an unduplicated count of homeless persons, understand patterns of service use, and measure the effectiveness of homeless programs. Data on homeless persons is collected and maintained at the local level. HMIS implementations can encompass geographic areas ranging from a single city to an entire state.

The HEARTH Act also requires that all communities have an HMIS with the capacity to collect unduplicated counts of individuals and families experiencing homelessness. Through HMIS, a community should be able to collect information from projects serving homeless families and individuals to use as part of their needs analyses and to establish funding priorities. The HEARTH Act also codifies into law certain data collection requirements integral to HMIS. With enactment of the HEARTH Act, HMIS

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participation became a statutory requirement for recipients and subrecipients of CoC Program and Emergency Solutions Grants (ESG) funds.

An HMIS can be used to:

- Produce an unduplicated count of persons experiencing homelessness for each CoC
- Describe the extent and nature of homelessness locally, regionally, and nationally
- Identify patterns of service use
- Measure program effectiveness

The ensuing set of HMIS Policies and Procedures documents the Orange County CoC's operation of its HMIS and acts as a guide to its continuing operation in compliance with the CoC and ESG Regulations and Interim Rules. The HMIS Policies and Procedures have been developed in mind to further the following HMIS Goals:

- Assist in facilitating the coordination of care for homeless and at risk of homelessness populations.
- Ensure accurate data about the nature of homeless services and clients in the Orange County CoC.
- Ensure accurate data about the nature and extent of prevention and diversion services provided to households at risk of homelessness in the Orange County CoC.
- Collect data that fulfills federal, state and local requirements for homeless reporting and inform system gaps and resource development

II. Policies and Procedures Summary

This document serves as the minimum standards of participation in the Orange County HMIS and represents general best practices. Operational standards in this document are not intended to supersede grant specific requirements and operating procedures as required by funding entities. PATH, HOPWA, and VA providers have operating rules specific to the U.S. Departments of Health and Human Services (HHS) and Veterans Affairs (VA).

The HMIS Lead Agency, 211OC, will update this document at any time when necessary due to HUD or local CoC changes. The latest versions of the HUD HMIS Data Standards Manual and Data Dictionary are the basis for all programming specifications and requirements of HMIS. Updates will be brought to the Policies, Procedures and Standards Committee and the CoC Board for approval. Upon approval, updates to this document will be announced to all Agency Administrators via email and posted on the OC HMIS website. The most recently updated version of this document is the only version that is considered valid and supersedes all previous versions.

III. HMIS Lead Agency Responsibilities

- a. Provide HMIS User training as needed.
- b. Develop and maintain training materials for all HMIS trainings.
- c. Develop and maintain client forms, including client and privacy forms.

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- d. Create HMIS User accounts and control access to HMIS.
- e. Communicate all system-wide changes to Agency Administrators via direct emails, announcements on ochmis.org and/or User Meetings.
- f. Resolve HMIS-related grievances that cannot be resolved by the agency working with the client. Clients can submit a grievance by completing the <u>Grievance Form</u> or calling 714-589-2360.
- g. Host HMIS User Meetings open to all HMIS Users to discuss the use and implementation of HMIS.
- h. Host the Data and Performance Management meetings, which are open to all HMIS Agency Administrators, and focus on performance and policies related to HMIS.
- i. Provide technical support to Agency Administrators via the HMIS Help Desk.
- j. Serve as intermediary between Participating Agencies and the HMIS vendor.
- k. Alert the HMIS vendor to all HUD deadlines for data standards changes, required reporting specifications, etc.
- I. Complete HMIS software testing, as needed.
- m. Submit tickets on behalf of Participating Agencies when HMIS Lead Agency is not able to resolve a technical issue.
- n. Ensure OC HMIS will be available to HMIS Users at a minimum of 99.95 percent of the monthly billing cycle. The HMIS Lead Agency will inform all HMIS Users of any planned or unplanned service outages via direct email or announcement on ochmis.org.
- o. Facilitate access to system level data.
- Establish HMIS participation fees based on appropriate criteria in collaboration with the CoC Collaborative Applicant and as approved by the CoC Board.
- q. Serve as Lead for all HUD-required reporting involving HMIS data (HIC and Sheltered PIT, System Performance Measures, Longitudinal Systems Analysis, etc.).
- r. Publish system, agency, and project level reports from HMIS as needed.

IV. Help Desk Policies

- a. HMIS Help Desk hours are Monday through Friday from 9AM to 5PM, excluding holidays.
- b. Only designated Agency Administrators may submit requests for technical support to the HMIS Help Desk. The methods of contacting the HMIS Help Desk are below. Agency Administrators should not directly contact individual members of the HMIS team.
 - a. HMIS Help Desk phone number 714-589-2360
 - b. HMIS Help Desk website http://ochmis.211oc.happyfox.com/home
- c. HMIS Staff strives to answer all technical support tickets within three (3) business days, but workload, holidays and number of available staff may delay response. Agency Administrators are responsible for raising technical issues in a timely manner, keeping in mind that their request may not be solved same day.
- d. Client identifying information should never be sent to the <u>HMIS Help Desk</u>. This includes but is not limited to: First Names, Last Names, Dates of Birth, or Social Security Numbers. If you need to discuss a specific client only the client's HMIS unique ID should be sent. Agency Administrators who repeatedly submit client identifying information to the <u>HMIS Help Desk</u> may be subject to corrective action.

V. Agency Access

- a. In order to be granted HMIS Access, an organization must be able to meaningfully contribute information related to homeless assistance projects and/or homelessness prevention projects to the Orange County CoC.
- b. An organization that at minimum meets one of the following criteria will be granted access to HMIS:
 - a. Manage a homeless assistance project and has the project included in HMIS to support an increase in bed coverage for the CoC. The following homeless assistance project types will increase bed coverage: emergency shelter, transitional housing, rapid rehousing, permanent supportive housing, and/or other permanent housing.
 - b. Receive federal and/or state funding for the implementation and operations of a homeless assistance project and/or homelessness prevention project that requires HMIS participation. Attachment B details federal and state funding sources that requires HMIS participation.
 - i. Organizations receiving funding that requires HMIS participation will be given data entry access, but this does not necessarily include data sharing with other agencies. Law enforcement agencies and legal service providers receiving funding that requires HMIS participation will be given data entry access only.
 - ii. Victim service providers and legal service providers that are recipients of funds requiring participation in HMIS, but do not directly enter data into an HMIS, must use a comparable database. A comparable database allows the collection of the aggregate data needed for reporting while respecting the sensitive nature of the client-level information if it complies with all HMIS data, technical and security standards.
 - c. Organizations that do not meet the above listed criteria will be required to submit an <u>HMIS Access Application</u> for review and consideration by the HMIS Access Ad Hoc to further evaluate the request.
 - d. The HMIS Access Ad Hoc will be comprised of two to three CoC members appointed Board by the CoC Board membership, the CoC Collaborative Applicant and the HMIS Lead. The HMIS Access Ad Hoc will meet on an as-needed basis for the purposes of evaluating HMIS Access Applications.
 - e. The HMIS Access Application requires organizations to detail how their organization's participation in HMIS will be able to meaningfully contribute information related to homeless assistance projects or homelessness prevention projects to the Orange County CoC and how the HMIS access will improve the provision of homeless services in the Orange County CoC. The HMIS Access Application will also assist the HMIS Access Ad Hoc evaluate the organization's HMIS Data Sharing capabilities.
 - f. Organizations that meet the requirements for HMIS Access must be in compliance with all other aspects of the HMIS Policies and Procedures, including the HMIS Participating Agency Agreement and the Data Sharing Agreement.
 - g. The HMIS Access Ad Hoc and the HMIS Lead reserve the right to remove HMIS Access if the access is not being used to improve service provision for clients or contributing

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meaningful data to the Orange County CoC. Examples of unacceptable uses of HMIS include but are not limited to:

- i. Using HMIS data to monitor the whereabouts or service utilization of participants for purposes outside of housing-focused case management
- ii. Using HMIS data outside of a business need
- iii. Using data in HMIS as a reason to not serve a client that is not related to eligibility criteria (ie. substance use history, mental health issues, etc.)
- iv. Sharing client identifying data with persons or groups that don't have access HMIS

VI. Participating Agency Requirements

- a. Submit an HMIS Participating Agency Agreement
 - a. Participating agencies must submit an HMIS Participating Agency Agreement, signed by the agency's Executive Director with an original signature in blue ink (wet, not digital) before the agency and/or projects can be set up in HMIS.
 - b. This document must be renewed annually with new agreements being signed during the annual HMIS Agency Audit.
- b. Executive Directors must confirm the designation of an Agency Administrator and Backup Agency Administrator at the time of agency setup.
 - a. If Agency Administrators or Backup Agency Administrators must be designated after initial agency setup, Executive Directors must contact the HMIS Lead Agency (via the online HMIS Help Desk) to notify the HMIS Lead Agency of the new Agency Administrator or Backup Agency Administrator.
 - b. The following information is required of all Agency Administrators and Backup Agency Administrators:
 - i. Full name.
 - ii. Work email address. Personal emails will not be allowed. Shared email accounts are also not allowed.
 - iii. Work phone number.
- c. Comply with all federal, state and local government laws and regulations regarding non-profit data collection, and with all HMIS policies and procedures including the latest versions of the HMIS Data and Technical Standards Final Notice and the HMIS Data Standards Manual relating to the collection, storage, retrieval, and dissemination of client information.
- d. When applicable, participating agencies may be obligated to comply with the Health Insurance Portability and Accountability Act ("HIPAA"), and/or with 42 CFR Part 2, regarding the confidentiality of substance use disorder patient records. Where possible, these agencies should comply with HIPAA, with 42 CFR Part 2, and with the HMIS Privacy Plan. If it is not possible to reconcile all of the applicable rules, then agencies should comply with the more stringent regulations. Agencies and programs are responsible for ensuring HIPAA and 42 CFR Part 2 compliance.
- e. Abide by the Violence Against Women and Department of Justice Reauthorization Act of 2005 (VAWA).

- f. Participate in an annual HMIS Agency Audit to ensure compliance with the HMIS Policies and Procedures. Review the <u>Agency Audit Form</u> for an overview of the items included in the audit. Please note that the audit form may change to accommodate changes in requirements.
 - a. 211OC will audit all HMIS Participating Agencies on a yearly basis, regardless of funding source. The CoC Collaborative Applicant may also attend audits.
 - b. 211OC will include the audit checklist in the scheduling email sent to the Agency Administrator two (2) weeks prior to the audit.
 - c. Agencies are expected to be prepared for the audit by completing all items included in the scheduling email.
 - d. An Agency Administrator must be present during the audit.
 - e. Agencies and 2110C can request to reschedule the Agency Audit up to one (1) business day before the audit is scheduled. Requests to reschedule or cancellations that occur after that window has passed may be subject to corrective action.
 - f. If any deficiencies are found in the audit, the agency and the 211OC staff person will agree upon a date that the issue should be resolved by. If the corrections are not made by the agreed upon date, the agency will be subject to corrective action.
- g. Pay HMIS participation fees based upon CoC board approved fee structure.
 - a. The HMIS User License Fee Policy is applicable to all agencies participating in the Orange County HMIS.
 - b. Agencies that receive state and/or federal funding that require HMIS participation will be charged for the number of licenses the agency has active at the end of the calendar year, based on the fee structure detailed below:
 - i. 1-5 users: \$750 annually
 - ii. 6 24 users: \$2,750 annually
 - iii. 25 or more users: \$3,500 annually
 - c. Agencies that are Coordinated Entry Access Points will be charged an annual fee of \$200 in addition to any user fees they may incur. This applies to all Access Points, whether or not they are required to participate in HMIS. The \$200 fee will apply to agencies regardless of the number of Coordinated Entry Systems they are participants in.
 - d. Agencies are allowed up to two active Agency Administrators at a time. Agencies will be allowed an additional Agency Administrator for every 700 active enrollments at the end of the calendar year. Agencies that require additional Agency Administrators in addition to those outlined in this policy must pay the set-up and ongoing user fees for those accounts, and can contact 2110C for an invoice.
 - e. If a user has access to multiple agencies in HMIS, only the agency where the user is employed will be charged.
 - f. Agencies that are newly awarded funding that requires HMIS participation during the calendar year will be required to pay \$500 prior to the awarded funding being implemented in HMIS.
 - g. There will be no charge for agencies not receiving funding that requires HMIS participation.
- h. Complete any reporting, data quality, data entry, or other requirements outlined by the U.S. Department of Housing and Urban Development (HUD), the Coordinated Entry System (CES) Lead, or the HMIS Lead.

- a. All agencies participating in HMIS are included in the HMIS Data Quality Report Cards published on a quarterly basis. Review the Data Quality Monitoring and Reporting Process section of the Data Quality Plan for details regarding this process.
- b. Agencies with Street Outreach, Emergency Shelter, Transitional Housing, Rapid Re-Housing, or Permanent Supportive Housing/Other Permanent Housing projects are included in the Project Performance reports published on a monthly basis. Review the Orange County CoC Project Performance Overview document for more details on this process.
- i. Comply with Orange County's minimum participation requirements for HMIS usage. 2110C will conduct a quarterly review to ensure all agencies are meeting the minimum participation requirements. If any of the following are true at the time of the review, the agency will have one month to rectify the issue. If the issue is not resolved after one month the HMIS Agency Access Working Group will be notified to determine whether or not the agency should continue to have access to HMIS. If the agency is found to not meet the minimum participation requirements during the quarterly review at least three times in a year the HMIS Agency Access Working Group will also be notified.
 - a. Agency does not have at least one active user.
 - b. Agency does not have at least one active enrollment.
 - c. Agency does not have activity in HMIS in the past 30 days. Activity includes enrollments, services, assessments, files, or exits.
 - d. Agency did not submit the HIC and/or PIT for appropriate project types.
 - e. Agency does not have at least one Agency Administrator that is an active HMIS user.
 - f. Agency has not had staff representation for at least one User Meeting during the previous quarter.
- j. Organizations found to not meet one or more of the guidelines above may be contacted by the HMIS Lead Agency to discuss the appropriateness of the agency's continued participation in the OC HMIS, the HMIS Lead may inform the HMIS Access Ad Hoc to determine the appropriateness of the agency's continued participation in the OC HMIS, and the organization may have HMIS Access revoked.

VII. Agreements and Certifications

- a. All OC HMIS Participating Agencies must have updated versions of the documents below on file with the HMIS Lead Agency, 211OC, in order to gain and retain access to the OC HMIS.
 - a. Interagency Data Sharing Consent Form Allows client-level data and enrollment data to be shared among OC HMIS Participating Agencies. HOPWA funded projects are exempt from the data sharing mandate due to privacy laws protecting clients' HIV status. The Interagency Data Sharing Consent Form must be signed by the participating agency's Executive Director with an original signature in blue ink (wet not digital).
 - b. HMIS Participating Agency Agreement Outlines the participating agency's responsibilities in protecting client privacy, properly obtaining client consent to share data, monitoring the use of HMIS and reporting any breaches of security by agency staff and improper system use of HMIS. Must be signed by the Executive Director with an original signature in blue ink (wet not digital).

c. User Agreement – Outlines the HMIS User's responsibilities in protecting client privacy, proper system use and abiding of the HMIS Policies and Procedures. Must be signed during each user's first log-in to HMIS, and must be renewed annually.

VIII. HMIS User Access Roles

- a. Users with access to HMIS will be assigned one of the following access roles. Access roles control the level and type of access the user has to functionality within the OC HMIS.
 - a. Agency Staff: Users with this access have the ability to add and edit client profiles, enrollments, services, and exits, as well as the ability to run client-level, canned, and ad hoc reports. This level of access is the most common in OC HMIS.
 - b. Agency Administrator: Users with this access have the same abilities as Agency Staff users, as well as the ability to delete enrollments, services, files, and location data at the user's Primary Agency.
 - c. Read Only: Users with this access can view client profiles, enrollments, services, and exits, but cannot add or edit data, and they cannot run canned or ad hoc reports.
 - d. CES Access: Agency Staff or Agency Administrator users can also be given CES access. Users with CES access have access to the Referrals page, which includes adding clients to the Community Queue, adding and editing housing opportunities, and reviewing or denying matches to housing opportunities.

IX. HMIS User Requirements

- a. Agency Staff and Agency Administrator users must complete the following trainings:
 - a. HMIS Part 1 Training Covers the history and purpose of HMIS and the contents of the OC HMIS Policies and Procedures handbook.
 - b. HMIS Part 2 Training Covers HMIS functionality, HUD definitions, key terms, and data quality best practices.
 - c. HMIS Task List A list of tasks to be completed by the user in the Clarity Training Site to assess what the user has learned.
- b. Read Only users must complete the following training:
 - a. HMIS Part 1 Training Covers the history and purpose of HMIS and the contents of the OC HMIS Policies and Procedures handbook.
- c. Users requesting CES access must complete the following training in addition to the trainings mentioned in part A of this section.
 - a. HMIS Coordinated Entry Training Includes an overview of the different roles involved in the Coordinated Entry process, and a review of the HMIS functionality needed for each role.
- d. All HMIS Users must provide the following information in order to receive an HMIS account:
 - a. The HMIS User's first and last name.
 - b. The HMIS User's *work* email. Personal emails will not be allowed. Shared email accounts are also not allowed.

- e. All HMIS Users must be able to clearly explain the purpose and benefit of HMIS and the related HMIS Consent Form to the homeless and at-risk of homelessness populations as detailed in the Client Privacy section. This includes providing an overview of:
 - a. What is HMIS?
 - b. What personal identifying data will be collected and how it will be used
 - c. Privacy and confidentiality standards
 - d. Revocation of consent and how to do it

X. Agency Administrator Requirements

- a. Agency Administrators must complete the Agency Administrator training before they can be certified as Agency Administrators. This training covers the responsibilities of the Agency Administrator, as well as training on HMIS functionality specific to Agency Administrators.
- b. Agency Administrators are responsible for training all staff at their agency as needed.
 - a. Identify staff members who need access to HMIS and ensure they complete any required HMIS User trainings in a timely fashion.
 - b. Inform the HMIS Help Desk of HMIS Trainings completed by any users at the agency by submitting the <u>HMIS Account Update and Testing Form</u>.
- c. Agency Administrators are the primary technical support for their HMIS Users.
 - a. All HMIS User technical questions should be directed first to the Agency Administrator. If the Agency Administrator cannot solve the problem, they can then contact the <u>HMIS Help Desk</u>. HMIS Users who are not certified Agency Administrators are not allowed to contact the HMIS Help Desk. See the Help Desk Policies section for more details.
- d. Agency Administrators are responsible for sharing system-wide changes and other relevant information with all users at their agency.
 - a. Agency Administrators periodically receive emails from the HMIS Lead Agency regarding HMIS. Agency Administrators are responsible for reading these emails and communicating the relevant information in them to their staff who are HMIS Users.
 - b. Agency Administrators should attend the monthly User Meetings. These webinars are announced via direct email to all Agency Administrators.
- e. Agency Administrators must notify the HMIS Lead Agency of all personnel changes.
 - a. When an HMIS User no longer needs access to HMIS, whether due to changing job responsibilities or departure from the agency, Agency Administrators must complete the HMIS Account Update & Testing Form.
 - b. When an Agency Administrator no longer needs access to HMIS, whether due to changing job responsibilities or departure from the agency, another Agency Administrator at the agency or the Executive Director is required to submit the contact information of the replacement Agency Administrator via the HMIS Help Desk.
- f. Agency Administrators must monitor compliance with standards of confidentiality and data collection, entry, and retrieval outlined in the OC HMIS Policies and Procedures.
 - a. Inform your users that they are obligated to report suspected instances of noncompliance and/or security violations to the Agency Administrator as soon as possible.
 - b. Escalate any security violations that your agency's HMIS Users report to you to the HMIS Agency Administrator via the HMIS Help Desk.

- c. Ensure that all staff at your agency are aware that HMIS usernames and passwords are NOT to be shared with anyone under any circumstances. HMIS Users should not share their HMIS login information with other staff at their agency, their Agency Administrator, their Executive Director, their IT Staff, etc.
- d. Ensure all HMIS users at the agency are able to clearly explain the purpose and benefit of HMIS and the related HMIS Consent Form to clients as included in the HMIS User Requirements section.
- g. Agency Administrators are responsible for ensuring that agency equipment meets the specifications outlined in the Technical Standards section of this document.
- h. Agency Administrators must ensure that agency data quality either meets data quality thresholds for each relevant project type, or is on track to meet said thresholds.
 - a. Agency Administrators should be able to describe their agency's regular data quality monitoring procedure. For example, "We run x, y, and z reports each month. I identify data quality errors and fix them myself or delegate them to Users x, y, and z." Please review the OC HMIS Data Quality Plan for guidance. The HMIS Lead Agency is available to help develop an agency's data quality monitoring procedure as needed.
 - b. Agency Administrators must work the HMIS Lead Agency to ensure the agency is collecting all relevant Universal and Program Specific Data Elements dependent on project type and funding source.
 - c. All data entered into the OC HMIS must meet applicable Data Quality and Data Timeliness standards based on project type as agreed by the CoC in partnership with the CoC Board and the CoC Collaborative Applicant.
 - d. Agency Administrators are responsible for ensuring the agency is in compliance with the Orange County HMIS Data Quality Plan.
- i. Agency Administrators must ensure all projects in the HMIS database are set-up correctly, and notify the HMIS Lead when a project is no longer serving clients.
 - a. Agencies should notify the HMIS Helpdesk when they would like any of their projects to start participation in the OC HMIS. The HMIS Lead Agency and/or the CoC Collaborative Applicant reserves the right to deny access to agencies and/or projects that do not serve the homeless population.
 - b. The HMIS Lead Agency and/or the CoC Collaborative Applicant will provide technical assistance and recommendations to the agency on how to best set up the project in HMIS to ensure adequate reporting and benefit to the Orange County CoC and its System Performance Report. Projects whose performance or data quality negatively affects the CoC as a whole may be subject to corrective action. Corrective action around performance will be done in conjunction with the CoC Collaborative applicant.
 - c. Agency Administrators are required to submit a **Project Close Out Form** when projects are no longer active. The HMIS Lead Agency will deactivate the project in HMIS so no new enrollments can be added to the project. Data from deactivated projects will remain available in HMIS for 7 years per HUD requirements.

XI. Technical Standards

- a. HMIS Participating Agencies must adhere to the following technical standards with regards to all technical equipment used to access HMIS. The HMIS Lead Agency is not responsible for providing proper technical equipment or for providing IT services unrelated to HMIS.
- b. The most recent version of the following web browsers are supported for accessing HMIS:
 - a. Google Chrome
 - b. Microsoft Edge
 - c. Mozilla Firefox
 - d. Apple Safari
- c. An internet connection is required to access HMIS, and is the sole responsibility of the participating agency.
- d. All screens must lock within 5 minutes of inactivity and point to the computer terminal or mobile device login page upon subsequent activity. Users should manually lock their screen when they leave their device unattended.
 - a. Windows: Press the Windows + L keys on the keyboard
 - b. Mobile device: Briefly press the Power button
 - c. Mac: Press Control + Command + Q keys on the keyboard
- e. Computers, Tablets, or Other Mobile Devices that Access HMIS OR share a network with computers or mobile devices that access HMIS (iPads and other devices that run on iOS are exempt from these requirements)
 - a. Must have virus protection software that has been updated in the past week and performs scans daily and automatically updates to the most current version.
 - b. Must have a firewall in place between any computer and internet connection for the entire network, be protected with at minimum Wired Equivalent Privacy (WEP), use Network Address Translation (NAT), and maintain the most recent virus security updates.
- f. All computer terminals and mobile devices used to access HMIS (including organization network equipment) must be stored in a secure location (ie. a locked office area that is not accessible to the public).
- g. The Executive Director or other empowered officer within the HMIS participating agency will be responsible for the maintenance and disposal of onsite computer and mobile device equipment. This includes:
 - a. Purchase of and upgrades to all existing and new computer and mobile device equipment for utilization in the system.
 - b. Provision of computer terminals or mobile device to all HMIS Users for accessing HMIS that have a unique username/password to log onto the operating system.

XII. Privacy

- a. HMIS Account Passwords
 - a. The HMIS vendor will enforce a password change for all HMIS accounts every 180 days.
 - HMIS Users will never share passwords or HMIS accounts for any reason. The sharing of HMIS accounts and/or passwords directly endangers the privacy of clients who entrust

- their personal identifying information to the OC HMIS. HMIS users found to be sharing HMIS accounts and/or passwords will be subject to corrective action.
- c. After 30 minutes of inactivity in the OC HMIS, the system will automatically lock the user out and the user will need to enter their password again to gain access to HMIS.
- d. If an HMIS User attempts to log in four (4) times with an incorrect password, the HMIS will automatically lock their account. The HMIS user will be unable to access HMIS for two hours unless their Agency Administrator contacts the HMIS Helpdesk to unlock the account.

b. Access to HMIS

- a. As discussed in the Agency Administrator Responsibilities section, agency staff who no longer need access to HMIS will have their HMIS account access revoked. In the event that HMIS account access is not revoked for any reason, the former HMIS User is required to act with integrity and not attempt to access HMIS if their job duties no longer include HMIS or if they leave their HMIS participating agency.
- b. The HMIS Lead Agency reserves the right to lock the account of an HMIS User who has not completed required trainings. The HMIS Lead Agency will unlock the account once the required trainings have been completed.
- c. If an HMIS User does not log into HMIS for 60 days, the HMIS account will be locked automatically. The user will receive a notification two (2) calendar days prior to the account being locked. If an account is locked due to inactivity, the user will be required to complete the trainings outlined in the HMIS User Requirements section as well as any other trainings required by the HMIS Lead Agency to regain access to HMIS.

c. HMIS Data

- a. Participating Agencies
 - i. All HMIS Users are required to ensure that client identifying information is never sent across an unencrypted network, saved in an unprotected folder on a computer, or, in the case of hard copies of client identifying information, stored anywhere other than a locked file cabinet or office.
 - ii. Client Identifying Information CANNOT be sent over unencrypted email either between a participating agency and 2110C or between staff at a participating agency. The only permissible way to discuss an individual client over unencrypted email is using the client's ID number.
 - iii. Agencies must have a formal policy for intra-agency communication regarding clients that protects client privacy.

b. HMIS Vendor

- i. The vendor will perform daily and weekly backups to prevent loss of data.
- ii. Backups will be stored both onsite and offsite. All standard security and privacy precautions apply to offsite storage. The offsite storage facility is equipped with surge protectors and natural disaster protective measures.

d. Client Privacy

- a. In order for client records to be shared in HMIS, clients must consent to share their data with other agencies participating in HMIS.
 - i. If the agency's first interaction with the client is over the phone, or otherwise not in person, clients can verbally consent to share their data. However, during the

- first in person meeting with the client the agency must ask the client to sign the **Client Consent to Share Protected Personal Information form** to continue sharing their data in HMIS.
- ii. Agency staff must explain the form to clients and how their information is used and viewed.
- iii. The form can be digitally signed in HMIS, or the agency can print a physical copy of the form for the client to sign. If the client signs a physical copy, the agency is required to upload the signed consent form to HMIS. If the agency chooses to keep physical files, they must be stored in a secure location.
- b. Protected Personal Information (PPI) is defined in this manual and the Consent to Share Personal Protected Information form as:
 - i. [Clients'] name and [Clients'] contact information
 - ii. [Clients'] social security number and date of birth
 - iii. [Clients'] basic demographic information such as gender and race/ethnicity
 - iv. [Clients'] history of homelessness and housing (including [Clients'] current housing status, and where and when [Clients] have accessed services)
 - v. [Clients'] self-reported medical history and disability status, including mental and physical health concerns, substance abuse history, and HIV/AIDS status
 - vi. [Clients'] case notes and services
 - vii. [Clients'] income sources and amounts; and non-cash benefits
 - viii. [Clients'] veteran status
 - ix. Information about other members of [Clients'] household
 - x. [Clients'] self-reported history of domestic violence
 - xi. [Clients'] photo (optional)
- c. If clients refuse to sign the Client Consent to Share Protected Personal Information form they cannot be pressured into signing the form or denied services on the basis of their refusal to sign. Participating agencies should follow the procedure outlined in HMIS Part II Training for entering client information into HMIS when clients refuse to sign the Client Consent to Share Protected Personal Information form. Refusal to sign the consent form means that all of that client's data is only visible by the agency serving the client, HMIS System Administrators, and the HMIS Vendor.
- d. Upon signing the Client Consent to Share Protected Personal Information form clients must be made aware of their right to revoke their consent to share protected information at any time.
- Participating agencies must have copies of the Revocation of Consent form available in areas accessible to clients at all times. Clients should NOT have to request this form from participating agency staff.
 - i. If a client submits a Revocation of Consent form, participating agency staff must follow the most current procedure for removing sharing access to the client's protected personal information in HMIS. Review the <u>Refusing/Revoking Consent</u> to <u>Share Personal Information</u> knowledge base article for more information.
- f. Participating agencies must post the **Note Regarding Collection of Personal Information** in all areas where HMIS data entry occurs. Participating agencies should direct outreach teams to give a copy of the Note to each outreach worker.

- g. Participating agencies must post the **Privacy Notice** on their website.
- h. Participating agencies must have copies of the **HMIS Client Grievance form** available in areas accessible to clients at all times in the event of an HMIS related grievance. Clients should NOT have to request this form from participating agency staff.
 - i. In the event that the participating agency's in house grievance policy was not able to resolve the grievance, clients will submit the grievance form directly to 2110C.

e. Client Record Requests

- a. Clients may inspect and obtain a copy of their data as entered in HMIS.
 - i. This includes the data on the client's Profile screen, the client's Release of Information, the client's enrollment history in any projects that participate in HMIS, and a list of all client documents uploaded into HMIS.
- b. Clients may submit the request to any agency participating in OC HMIS that they have been served by in the past.
 - i. An Agency Administrator at the agency is responsible for submitting a ticket to the HMIS Help Desk to request the Client Record Request Dashboard for the client within five (5) business days of the request except where exempted by state and federal law.
 - ii. At the time of the request, the Agency Administrator must decide with the client an appropriate method for the client to receive their dashboard that does not violate the privacy of the client's data.
 - iii. The HMIS Help Desk will respond to the request as outlined in the HMIS Help Desk Policies section.
 - iv. An Agency Administrator at the agency is required to review the dashboard with the client upon request.
- c. No client shall have access to another client's data for any reason, except for parents or guardians of a minor requesting their minor child's records.

XIII. Data Use and Disclosure

- a. Client data may be used or disclosed for system administration, technical support, program compliance, analytical use, and other purposes as required by law. Uses involve sharing parts of client information with persons within an organization. Disclosures involve sharing parts of client information with persons or organizations outside an organization.
- b. Participating Agencies may use data contained in the system to support the delivery of services to clients experiencing homelessness in Orange County. Organizations may use or disclose client information internally for administrative functions, technical support, and management purposes. Participating Organizations may also use client information for internal analysis, such as analyzing client outcomes to evaluate programs.
- c. The vendor and any authorized subcontractor shall not use or disclose data stored in the OC HMIS without expressed written permission in order to enforce information security protocols. If granted permission, the data will only be used in the context of interpreting data for research and system troubleshooting purposes. The Service and License Agreement signed individually by

Orange County HMIS Policies and Procedures

each Continuum and vendor contain language that prohibits access to the data stored in the software except under the conditions noted above.

XIV. Data Release

- a. Data release refers to the dissemination of aggregate or anonymous client-level data for the purposes of system administration, technical support, program compliance, and analytical use.
- b. No identifiable client data, including but not limited to name, Social Security Number, or Date of Birth, will be released by the HMIS Lead Agency or any Participating Organizations to any person, agency, or organization not participating in HMIS for any purpose without written permission from the client, with the exception of subpoenas, academic research purposes or other circumstances as required by law.
- c. Each Participating Agency owns their own data that is stored in the system. The agency may not release personal identifiable client data without written permission from the client. Agencies may release aggregate data for all clients to whom the agency provided services. Aggregate data is data that has been collected from different clients and compiled into sums. Agencies may share this data for their agency as a whole, or for each of their projects.
- d. The Orange County CoC may release aggregate data about its own continuum at the program, sub-regional, and regional level. Aggregate data may be released without organization permission at the discretion of the CoC.
- e. Requests for regional or sub-regional data, including data for Academic Research Purposes, must be reviewed and approved by the CoC Board prior to the data being released if the request has not been pre-approved below. If the request is pre-approved, the CoC Board will be notified that data has been shared.

Data Request Criteria	HMIS Participating Agency		Entity Does not Participate in HMIS		CoC Board Sub- Committee/Work Group		CES Administrators ¹	
	Approved	Needs Approval	Approved	Needs Approval	Approved	Needs Approval	Approved	Needs Approval
Aggregate system level data	х			Х	Х		Х	
Program Descriptor data ²		Х		Х	Х		Х	
Client-level data ³		Х		Х		Х		Х
Ongoing data requests	Х			Х		Х	Х	
For use as research		Х		Х	Х			Х
For media release		Х		Х		Х		Х
For other public use		Х		Х		Х		Х

¹ CES Administrators include the Agency Administrators at agencies that have been contracted by the CES Lead to manage and facilitate the Coordinated Entry System in HMIS.

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² Project descriptor data elements (PDDE) are intended to identify the organization, specific project, and project details for each project participating in HMIS. Approved entities may request PDDE for any projects in HMIS.

³ Client-level data requests from CES Administrators and CoC Board Sub-Committees or Work Groups should be submitted through the HMIS Help Desk, and will be reviewed and approved by the CoC Manager, the CES Lead, and the HMIS Lead.

- f. Requests for data must be submitted to the HMIS Lead by submitting the <u>Data Request Form</u>, which includes the information below.
 - a. Requestor's Name
 - b. Requestor's Organization
 - c. Description of the data needed, including reporting period and specific data elements
 - d. Description of what the data will be used for (research, media use, etc)
 - e. Will this data be published? If yes, where?
 - f. When is the data needed by?
 - g. How often is this data needed?
- g. Data Request for Academic Research Purposes may include personal protected information if the research is being conducted by:
 - a. An individual employed by or affiliated with an HMIS participating agency for use in a research project conducted under a written research agreement approved in writing by the CoC Collaborative Applicant; or
 - b. By an institution for use in a research project conducted under a written research agreement approved in writing by the CoC Collaborative Applicant.
 - c. A research agreement must:
 - i. Establish rules and limitations for the processing and security of personal protected information in the course of the research;
 - ii. Provide for the return or proper disposal of all personal protected information at the conclusion of the research;
 - iii. Restrict additional use or disclosure of personal protected information, except where required by law; and
 - iv. Require that the recipient of data formally agree to comply with all terms and conditions of the agreement.
- h. Data Request that seek clarification or require a subset of data that has already been published in the form of a dashboard or as part of another data request as approved by the CoC Board may be provided by the HMIS Lead Agency in consultation with the CoC Collaborative Applicant.



Orange County Continuum of Care: Project Performance Overview

The Orange County Continuum of Care (CoC) publishes project performance data for all Street Outreach, Emergency Shelter, Transitional Housing, Rapid Re-Housing, and Permanent Supportive Housing/Other Permanent Housing projects that participate in HMIS. These reports highlight different measures that HUD and the CoC have determined are important in effectively ending homelessness for the clients in Orange County. These reports can be used to spotlight successes for the different projects, and can be used to help providers develop processes for improving performance if needed.

Project Performance reports are published on a monthly basis, and follow the schedule below. Prior to the reports being published draft data is sent to each agency to allow them time to review and correct their HMIS data as needed. Once published, the reports are presented at the monthly Data and Performance Management Committee Meeting. Thresholds are also discussed during this meeting, and are subject to change.

Schedule

	Street Outreach	Emergency Shelter	Transitional Housing	Rapid Re-Housing	PSH-OPH Permanent Supportive Housing & Other Permanent Housing	Homeless Prevention
Month Presented at Data Meeting	August	January	December	May	October	March
Reporting Period	6/1 - 5/31	11/1 - 10/31	10/1 - 9/30	3/1 - 2/28	8/1 - 7/31	1/1 - 12/31
Month Presented at Data Meeting	February	July	June	November	April	September
Reporting Period	12/1 - 11/30	5/1 - 4/30	4/1 - 3/31	9/1 - 8/31	2/1 - 1/31	7/1 - 6/30

Measures

The Orange County CoC measures ten goals for optimizing services provided to people experiencing homelessness. Applicability of each goal and the goal's target vary by project type. See below for a description of each goal, the project types it applies to, and the targets for each project type.

Last Updated 11/2021

Goal 1 - Prioritize Clients Experiencing Literal Homelessness

Goal: 100% of clients in projects dedicated to serving clients experiencing homelessness come from literal homelessness situations to ensure that the CoC's limited resources are focused on those with the greatest need.

Goal 1's applicable project types and targets:

Street Outreach	Emergency Shelter	Transitional Housing	Rapid Re-Housing	PSH-OPH
100%	100%	100%	100%	100%

Universe: Adults and heads of household active during the reporting period.

This goal considers the following Prior Living Situations to be literal homeless situations:

- Place not meant for habitation (e.g., a vehicle, an abandoned building, bus/train/subway station/airport or anywhere outside)
- Emergency shelter, including hotel or motel paid for with emergency shelter voucher, or RHY-funded Host Home shelter
- Safe Haven
- Transitional housing for homeless persons (including homeless youth)
- Interim Housing (ONLY clients who exited the project prior to 10/1/2019)

For all project types the following situations make an enrollment a "neutral" entry, meaning it is excluded from the measure entirely:

- Clients entering from non-homeless situations who are fleeing domestic violence situations.
- Clients that are **Chronically Homeless** and entering from non-homeless situations.
- Clients entering from an institutional setting where their length of stay was less than 90 days, and the client was homeless prior to entering the institution.
- Clients entering from a non-homeless situation where their length of stay was less than 7 nights, and the client was homeless prior to entering the non-homeless situation.

For PSH-OPH projects the following Prior Living Situations are also considered a "neutral" entry:

- Permanent housing (other than RRH) for formerly homeless persons)
- Rental by client, with RRH or equivalent subsidy

Goal 2 - Decrease Length of Stay in Temporary Shelter & Outreach

Goal: Clients enrolled in Street Outreach, Emergency Shelter, and Transitional Housing projects spend as little time as possible experiencing homelessness in these project types before moving to more stable housing situations.

Goal 2's applicable project types and targets:

Street Outreach	Emergency Shelter	Transitional Housing	
<=65 Days	<=30 Days	<=180 Days	

Universe: Clients active during the reporting period.

This measure is calculated by counting the number of days between the client's Project Start Date and Project Exit Date or Reporting Period End Date (whichever is earlier) for Street Outreach, Transitional Housing, and Emergency Shelter Entry/Exit projects. For Emergency Shelter Night-By-Night projects, this measure is calculated by counting the number of bed night services provided during the enrollment.

Goal 3 - Decrease Length of Time in Prevention projects

Goal: Clients enrolled in Homeless Prevention projects spend as little time as possible in a Homeless Prevention project by receiving services that stabilize their housing situation as quickly as possible.

Goal 3's applicable project types and targets:

Homeless Prevention
<=60 Days

Universe: Clients active during the reporting period.

This measure is calculated by counting the number of days between the client's Project Start Date and Project Exit Date or Reporting Period End Date (whichever is earlier)

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Goal 4 - Place Households in Units As Soon As Possible

Goal: Place clients in RRH/PSH-OPH projects into permanent housing as quickly as possible to reduce the amount of time clients remain homeless.

Goal 4's applicable project types and targets:

Rapid Re-Housing	PSH-OPH
<=30 Days	<=30 Days

Universe: Clients active during the reporting period.

This measure is calculated by counting the number of days between the client's Project Start Date and Housing Move-In Date.

Goal 5 - Ensure Projects are being Fully Utilized

Goal: Ensure that all available beds are filled as often as possible to reduce the amount of time people experiencing homelessness are unsheltered.

Goal 5's applicable project types and targets:

Emergency Shelter	Transitional Housing	PSH-OPH	
>=70%	>=80%	>=95%	

Universe: Heads of Households in households with adults and children, and all clients in households without children or with only children.

For households with adults and children, the bed nights of the head of household active during the reporting period are compared to the number of days the project's unit inventory was available for occupancy during the reporting period. For households without children and households with only children, the bed nights of all clients active during the reporting period are compared to the number of days the project's bed inventory was available for occupancy during the reporting period.

Goal 6 - Help Adults Increase Their Income while Enrolled in the Project

Goal: Projects focus on helping clients increase* their income over the course of their enrollment.

*Note: Homeless Prevention project enrollments count as a positive contribution to this measure if clients increase or maintain their income.

Goal 6's applicable project types and targets:

Emergency Shelter	Transitional Housing	Rapid Re-Housing	PSH-OPH	Homeless Prevention
>=10%	>=12%	>=40%	>=65%	>=45%

Universe: Adults who are still active in the project as of the end of the reporting period and have a length of stay of at least 365 days.

This measure compares the client's total monthly income at Project Entry to the latest total income reported during the enrollment.

Goal 7 - Help Adults Increase Their Income as of Project Exit

Goal: Projects focus on helping clients increase* their income by the time they exit a project.

Goal 7's applicable project types and targets:

Emergency Shelter	Transitional Housing	Rapid Re-Housing	PSH-OPH	Homeless Prevention
>=15%	>=35%	>=42%	>=45%	>=40%

Universe: Adults who exited a project during the reporting period.

This measure compares the client's total monthly income at Project Entry to the client's total monthly income at Project Exit.

^{*}Note: Homeless Prevention project enrollments count as a positive contribution to this measure if clients increase *or maintain* their income.

Goal 8 - Help Clients Exit to Successful Housing Situations

Goal: Place clients into successful housing situations with the ultimate goal of permanently housing clients. With the exception of Street Outreach projects, all other project types' successful housing situations are defined as permanent housing situations. Since clients in Street Outreach projects are experiencing unsheltered homelessness, any move to a sheltered situation is also considered a successful outcome.

Goal 8's applicable project types and targets:

Street Outreach Emergency Shelter		Transitional Housing	Rapid Re-Housing	Homeless Prevention	
>=15%	>=30%	>=75%	>=80%	>=90%	

Universe: Clients exited during the reporting period.

Review the Exit Destinations section to see a list of all possible exit destinations in HMIS.

Goal 9 - Stabilize Clients in Permanent Housing

Goal: Clients should be stabilized in permanent housing either by remaining in a permanent housing project after being placed in a housing unit, or by exiting the project to a permanent housing destination.

Goal 9's applicable project types and targets:

PSH-OPH
>=93%

Universe: Clients active during the reporting period with a Housing Move-In Date and all clients that exited a project during the reporting period.

Clients active at the end of the reporting period with a Housing Move-In Date are considered a success. Active clients at the end of the reporting period without a Housing Move-In Date are excluded from the measure. For clients that exited a project during the reporting period, review the Exit Destinations section to see a list of all possible exit destinations in HMIS.

Goal 10 - Ensure Clients Do Not Fall Back Into Homelessness after being Housed

Goal: Ensure that clients are not returning to the homeless system after they have been placed in permanent housing destinations. For Homeless Prevention projects, ensure that clients do not enter the homeless system after exiting to a permanent housing destination.

Goal 10's applicable project types and targets:

Street	: Outreach	Emergency Shelter	Transitional Housing	Rapid Re-Housing	PSH-OPH	Homeless Prevention
<	=12%	<=15%	<=10%	<=7%	<=7%	<=15%

Universe: Clients that exited the project to a permanent housing destination during the reporting period.

This measure includes two years of data instead of one. For example, if the reporting period for the report is 1/1/21 - 12/31/21, the reporting period for this measure would be 1/1/20 - 12/31/21. Clients are only included in this measure if they exit the project to any of the permanent housing destinations below. Clients are considered to return to the homeless system if they have an enrollment in any of the project types above at least 15 days after the permanent housing exit.

- Moved from one HOPWA funded project to HOPWA PH
- Owned by client, no ongoing housing subsidy
- Owned by client, with ongoing housing subsidy
- Permanent housing (other than RRH) for formerly homeless persons
- Rental by client in a public housing unit
- Rental by client, no ongoing housing subsidy
- Rental by client, with GPD TIP housing subsidy
- Rental by client, with HCV voucher (tenant or project based)
- Rental by client, with other ongoing housing subsidy
- Rental by client, with RRH or equivalent subsidy
- Rental by client, with VASH housing subsidy
- Staying or living with family, permanent tenure
- Staying or living with friends, permanent tenure

Goal 11 - Receive Referrals from the Coordinated Entry System

Goal: Permanent Housing projects should be receiving referrals from the Coordinated Entry System to ensure that the highest priority clients are receiving the housing resources they need to end their homelessness.

Goal 11's applicable project types and targets:

Rapid Re-Housing	PSH-OPH
TBD	TBD

Universe: Heads of households with a Project Start Date during the reporting period.

This measure is comparing the number of new enrollments in the housing project during the reporting period to the number of completed referrals the housing project had during the reporting period. Completed referrals means that a household was matched to a housing opportunity, and that match resulted in an enrollment in a housing project at that agency.

Goal 12 - Limit the Referrals from the Coordinated Entry System that are Denied by Housing Providers

Goal: Permanent Housing projects should not be denying households that are matched to their housing opportunities unless the household is not eligible to be served by the project. However, households may choose to deny a match to a Housing Provider.

Goal 12's applicable project types and targets:

Rapid Re-Housing	PSH-OPH
TBD	TBD

Universe: Denied matches to permanent housing projects during the reporting period.

When a household is matched to a housing opportunity, that match can be denied by either the Housing Provider or the household that was matched to the opportunity. This measure is determining the percentage of all denials that were denied by the Housing Provider.

Goal 13 - Accept Matches from the Coordinated Entry System Quickly

Goal: Once a household is matched to a housing opportunity, the Housing Provider should determine whether or not the household is eligible and start working with the household on their housing placement as soon as possible in order to shorten the time a household is experiencing homelessness.

Goal 13's applicable project types and targets:

Rapid Re-Housing	PSH-OPH
TBD	TBD

Universe: Heads of households with a completed referral to a Housing Provider during the reporting period.

This measure is determining the number of days between the date a household was matched to a housing opportunity and the head of household's Project Start Date in the housing project.

Goal 14 - Successfully Match Households to a Housing Provider

Goal: Housing Providers should communicate with the CES Leads to ensure that households are being appropriately matched to their housing opportunities.

Goal 14's applicable project types and targets:

Rapid Re-Housing	PSH-OPH
TBD	TBD

Universe: Heads of households that were matched to a Housing Provider during the reporting period that resulted in either a completed or denied referral.

When a household is matched to a housing opportunity, the match results in either a completed referral, which is an enrollment in a housing project, or a denied referral, which means that either the Housing Provider decided that they could not serve the household, or the household decided they did not want to be served by the Housing Provider. Households that disappear or are otherwise unable to be contacted are also considered denials by the household. This measure is determining the percentage of matches that resulted in an enrollment in a housing project.

Last Updated 11/2021

Exit Destinations

Green cells with a checkbox represent a successful exit for that project type, and yellow cells with an X represent a neutral exit for that project type, meaning that those responses are excluded from the measure calculation entirely. Blank cells are considered unsuccessful exits for that project type.

Destination	Street Outreach	Emergency Shelter	Transitional Housing	Rapid Re-Housing	PSH-OPH
Client doesn't know					
Client refused					
Data not collected					
Deceased	X	X	Х	Х	Х
Emergency shelter, including hotel or motel paid for with emergency shelter voucher, or RHY-funded Host Home shelter	✓				
Foster care home or foster care group home	✓	Х	Х	Х	Х
Hospital or other residential non-psychiatric medical facility	X	X	Х	Х	Х
Host Home (non-crisis)	✓				
Hotel or motel paid for without emergency shelter voucher	✓				
Jail, prison, or juvenile detention facility					
Long-term care facility or nursing home	✓	X	X	X	X
Moved from one HOPWA funded project to HOPWA PH	✓	✓	✓	✓	✓
Moved from one HOPWA funded project to HOPWA TH	✓				
No exit interview completed					
Other					
Owned by client, no ongoing housing subsidy	✓	✓	✓	✓	✓
Owned by client, with ongoing housing subsidy	✓	✓	✓	✓	✓
Permanent housing (other than RRH) for formerly homeless persons	✓	✓	✓	✓	✓
Place not meant for habitation (e.g., a vehicle, an abandoned building, bus/train/subway station/airport or anywhere outside)					
Psychiatric hospital or other psychiatric facility	✓				
Rental by client in a public housing unit	✓	✓	✓	✓	✓
Rental by client, no ongoing housing subsidy	✓	✓	✓	✓	✓
Rental by client, with GPD TIP housing subsidy	✓	✓	✓	✓	✓
Rental by client, with HCV voucher (tenant or project based)	✓	✓	✓	✓	✓
Rental by client, with other ongoing housing subsidy	✓	✓	✓	✓	✓
Rental by client, with RRH or equivalent subsidy	✓	✓	✓	✓	✓
Rental by client, with VASH housing subsidy	✓	✓	✓	✓	✓
Residential project or halfway house with no homeless criteria	X				
Safe Haven	✓				
Staying or living with family, permanent tenure	✓	✓	✓	✓	✓
Staying or living with family, temporary tenure (e.g. room, apartment, or house)	✓				
Staying or living with friends, permanent tenure	✓	✓	✓	✓	✓
Staying or living with friends, temporary tenure (e.g. room, apartment, or house)	✓				
Substance abuse treatment facility or detox center	✓				
Transitional housing for homeless persons (including homeless youth)	✓				

Orange County Continuum of Care Homeless Management Information System (OC HMIS)

HMIS Grievance Form

If you feel a violation of your rights as an HMIS client has occurred or you disagree with a decision made about your "Protected HMIS Information" you may complete this form. Complete this form only after you have exhausted the grievance procedures at the agency you have a grievance with. It is against the law for any agency to take retaliatory action against you if you file this grievance. You can expect a response within 30 days via the method of your choice.

Grievances may be submitted to the OC HMIS team by either of the following methods:

- Call the HMIS team at (714) 589-2360
- Send this form to:

2-1-1 Orange County Attn: HMIS Department 1505 E 17th Street Suite 108 Santa Ana, CA 92705

Your Name:					Date of Grievance:	
Best Way to		Phone		Mailing Add	ress	
Contact You:		Email		Case Manag	er/Advocate	
Your Phone Number:					Your Email Address:	
Your Mailing Address:						
Case Manager/A	dvoc	ate Conta	ct Info	rmation (opt	ional)	
Name:					Email Address:	
Phone Number:					Agency:	
Grievance Inforr	natio	n				
Name of Individua	al who	violated y	our priv	vacy rights	Name of Agency w	ho violated your privacy rights
Brief description c	of griev	vance (wha	t happe	ened):		

Last Updated: 12/2021

What Is HMIS?

The Homeless Management Information System (HMIS) is a web-based information system used by organizations that serve homeless and at-risk individuals in Orange County in order to compile information about the persons they serve.

Why Gather and Maintain Data?

HMIS will gather and maintain unduplicated statistics on a regional level to provide a more accurate picture of our region's homeless and at-risk population. HMIS will also help us understand client needs, help organizations plan appropriate resources for the clients they serve, inform public policy in an attempt to end homelessness, streamline and coordinate services and intake procedures to save client's valuable time, and so much more.

Written Client Consent

Each client must complete a **Consent to Share Protected Personal Information** in order for their identifying information to be shared with other agencies participating in HMIS. If the client refuses to provide consent, only the agency serving the client will have access to his or her information. Clients cannot be denied services for refusing to provide consent. A copy of the form will be provided to the client upon request.

Common Questions

Who can access my information?

Only staff who work directly with clients or who have administrative responsibilities can look at, enter, or edit client information. Please visit our website for a list of the Agencies Contributing Data to HMIS (ochmis.org > About HMIS > Contributing Agencies). Please note that this list can change frequently and without notice; therefore the website should be consulted for the most recent list.

Who will receive my information?

No client identifying information (names, dates of birth, etc.) will be released to entities not participating in HMIS without your consent. Information is stored in an encrypted central database. Only organizations that are contributing data to HMIS and have agreed to abide by the **HMIS Policies and Procedures** will have access to HMIS data.

Don't I have a right to privacy?

Clients do have the right to privacy, and also the right to confidentiality. You are entitled to a copy of the privacy notice upon request. Clients have the right to know who has modified their HMIS record. You also have the right to request access to your HMIS client records, and a printed copy of this data. You have the right to review this data with agency staff. You may not see other clients' records, nor may they see your information.

What if I don't want to provide information?

Clients have the right not to answer any questions, unless entry into a program requires it. You may not be denied services based on your refusal to sign a **Consent to Share Protected Personal Information.**

What if I believe my rights have been violated?

Clients have the right to file a grievance with the agency or with the HMIS Administrative Office at 211OC. Grievances must be filed through written notice. Clients will not be retaliated against for filing a complaint.

Last Updated: 12/2021

Proposed Changes – HMIS Policies and Procedures

January 11, 2022



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New Sections/Documents

- Help Desk Policies pg. 11
 - · HMIS Help Desk hours are Monday through Friday from 9AM to 5PM, excluding holidays.
 - Only designated Agency Administrators may submit requests for technical support to the HMIS Help Desk. The methods of contacting the HMIS Help Desk are below. Agency Administrators should not directly contact individual members of the HMIS team.
 - HMIS Help Desk phone number 714-589-2360
 - HMIS Help Desk website http://ochmis.211oc.happyfox.com/home
 - HMIS Staff strives to answer all technical support tickets within three (3) business days, but workload, holidays and number of available staff may
 delay response. Agency Administrators are responsible for raising technical issues in a timely manner, keeping in mind that their request may not be
 solved same day.
 - Client identifying information should never be sent to the <u>HMIS Help Desk</u>. This includes but is not limited to: First Names, Last Names, Dates of Birth, or Social Security Numbers. If you need to discuss a specific client only the client's HMIS unique ID should be sent. Agency Administrators who repeatedly submit client identifying information to the <u>HMIS Help Desk</u> may be subject to corrective action.
- Agency Access Policy pg. 12
 - Appeals Process



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New Sections/Documents

- HMIS User Access Roles pg. 16
 - Users with access to HMIS will be assigned one of the following access roles. Access roles control the level and type of access the user has to
 functionality within the OC HMIS.
 - Agency Staff: Users with this access have the ability to add and edit client profiles, enrollments, services, and exits, as well as the ability to run
 client-level canned and ad hoc reports. This level of access is the most common in OC HMIS.
 - client-level, canned, and ad hoc reports. This level of access is the most common in OC HMIS.

 Agency Administrator: Users with this access have the same abilities as Agency Staff users, as well as the ability to delete enrollments, services, files, and location data at the user's Primary Agency.
 - Read Only: Users with this access can view client profiles, enrollments, services, and exits, but cannot add or edit data, and they cannot run
 canned or ad hoc reports.
 - CES Access: Agency Staff or Agency Administrator users can also be given CES access. Users with CES access have access to the Referrals
 page, which includes adding clients to the Community Queue, adding and editing housing opportunities, and reviewing or denying matches to
 housing opportunities.



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New Sections/Documents

Project Performance Overview

	Street Outreach	Emergency Shelter	Transitional Housing	Rapid Re-Housing	PSH-OPH Permonent Supportive Housing & Other Permanent Housing	Homeless Prevention
Month Presented at Data Meeting	August	January	December	May	October	March
Reporting Period	6/1 - 5/31	11/1 - 10/31	10/1 - 9/30	3/1 - 2/28	8/1 - 7/31	1/1 - 12/31
Month Presented at Data Meeting	February	July	June	November	April	September
Reporting Period	12/1 - 11/30	5/1 - 4/30	4/1 - 3/31	9/1 - 8/31	2/1 - 1/31	7/1 - 6/30

Goal 6 - Help Adults Increase Their Income while Enrolled in the Project

Goal: Projects focus on helping clients increase* their income over the course of their enrollment.

Note: Homeless Prevention project enrollments count as a positive contribution to this measure if clients increase or maintain their income

Goal 6's applicable project types and targets:

Emergency Shelter	Transitional Housing	Rapid Re-Housing	PSH-OPH	Homeless Prevention
>=10%	>=12%	>=40%	>=65%	>=45%

Universe: Adults who are still active in the project as of the end of the reporting period and have a length of stay of at least 365 days.

This measure compares the client's total monthly income at Project Entry to the latest total income reported during the enrollment.



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New Sections/Documents

- Project Performance Overview New Goals
 - Goal 11 Receive Referrals from the Coordinated Entry System
 - Goal 12 Limit the Referrals from the Coordinated Entry System that are Denied by Housing Providers
 - Goal 13 Accept Matches from the Coordinated Entry System Quickly
 - Goal 14 Successfully Match Households to a Housing Provider

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