ORANGE COUNTY CONTINUUM OF CARE
POLICIES, PROCEDURES AND STANDARDS COMMITTEE

Tuesday, May 13, 2025

3:30 p.m. – 5:00 p.m.

> ### Location:
> **County Administration South (CAS) Building**
> **Conference Center**
> **425 West Santa Ana Blvd. Room 104/106**
> **Santa Ana, CA 92701-4599**
> **Click Here for parking information.**
>
> ### Virtual Meeting Option*:
> **Zoom Meeting Link: Click here for meeting link**
> **Join by phone: +1 669 444 9171**
> **Webinar ID: 999 5994 4290**
>
> ***Listen-in option only***

Committee Chair: Nishtha Mohendra, Families Forward

Committee Members:
Judson Brown, City of Santa Ana
Andrew Crowe, Scholarship Prep
Melanie McQueen, PATH
Dr. Tiffany Mitchell, Orangewood Foundation
Robert "Santa Bob" Morse, Individual
Dawn Price, Friendship Shelter
Eric Richardson, Volunteers of America Los Angeles
Maricela Rios-Faust, Human Options

AGENDA

In compliance with the Americans with Disabilities Act, and County Language Access Policy, those requiring accommodation and/or interpreter services for this meeting should notify the Office of Care Coordination 72 hours prior to the meeting at (714) 834-5000 or email CareCoordination@ocgov.com. Requests received less than 72 hours prior to the meeting will still receive every effort to reasonably fulfill within the time provided.

Welcome and Introductions – Nishtha Mohendra, Chair

Public Comments – Members of the public may address the Policies, Procedures and Standards (PPS) Committee 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 PPS Committee. Public comments will be limited to three minutes. If there are more than five public speakers, this time will be reduced to two minutes. Members of the public utilizing interpreter services will be given double the amount of time to provide public comment.

To address the PPS Committee during the Public Comment period, members of the public are to complete a Request to Address the Committee form prior to the beginning of each agenda item and submit it to Continuum of Care (CoC) staff. Staff will call your name in the order received.

Members of the public may also submit public comment by emailing CareCoordination@ocgov.com. All comments submitted via email at least 24 hours before the start of the meeting will be distributed to the PPS Committee members and all comments will be added to the administrative records of the meeting. Please include "PPS Committee Meeting Comment" in the email subject line.

CONSENT CALENDAR

1. Approve the PPS Committee Meeting minutes from February 11, 2025.

BUSINESS CALENDAR

1. **Homeless Management Information System (HMIS) Policies and Procedures Recommended Changes** – Erin DeRycke, Director, Data Analytics, 2-1-1 Orange County (211OC), Orange County United Way
    a. Approve the recommended revisions to the HMIS Policies and Procedures, inclusive of the Client Record Requests, Data Use and Disclosure, Data Integration, and Data Release policies, as well as updates to the Client Consent Form, Grievance Form, and Privacy Notice, as recommend by the Orange County HMIS Policies and Procedures Working Group and Lived Experience Advisory Committee, for review and approval by the CoC Board.

2. **CoC Strategic Plan** – Nishtha Mohendra, Chair and Sarah Jones, CoC Manager, Office of Care Coordination
    a. Discuss next steps in planning for implementation.

3. **CoC Updates** – Felicia Boehringer, CoC Administrator, Office of Care Coordination

Adjournment to: Regular meeting on June 10, 2025, from 3:30 p.m. to 5:00 p.m., at CAS Multipurpose Rooms 103/105, located at 601 N. Ross St., Santa Ana, CA 92701.

ORANGE COUNTY CONTINUUM OF CARE
POLICIES, PROCEDURES AND STANDARDS COMMITTEE
Tuesday, February 11, 2025
3:30 p.m. – 5:00 p.m.

> **Location:**
> **County Administration South (CAS)**
> **Multipurpose Rooms 103/105**
> **425 West Santa Ana Blvd.**
> **Santa Ana, CA 92701-4599**
> **Click Here for parking information.**
>
> **Virtual Meeting Option*:**
> **Zoom Meeting Link: Click here for meeting link**
> **Join by phone: +1 669 444 9171**
> **Webinar ID: 999 5994 4290**
>
> ***Listen-in option only***

Committee Chair: Nishtha Mohendra, Families Forward

Committee Members:
Judson Brown, City of Santa Ana
Andrew Crowe, Scholarship Prep
Becks Heyhoe-Khalil, Orange County United Way
Melanie McQueen, PATH
Dr. Tiffany Mitchell, Orangewood Foundation
Dawn Price, Friendship Shelter
Robert "Santa Bob" Morse, Individual
Maricela Rios-Faust, Human Options

MINUTES

Welcome and Introductions – Nishtha Mohendra, Chair

Nishtha Mohendra, Chair called the meeting to order 3:31 p.m.

Present: Judson Brown, Andrew Crowe, Becks Heyhoe-Khalil, Melanie McQueen, Dr. Tiffany Mitchell, Nishtha Mohendra, Robert "Santa Bob" Morse, Dawn Price, and Maricela Rios-Faust.

Becks Heyhoe-Khalil arrived during Business Calendar Item 1 at 3:45 p.m.

Public Comments – Members of the public may address the Policies, Procedures and Standards (PPS) Committee 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 PPS Committee. Public 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 PPS Committee during the Public Comment period, members of the public are to complete a Request to Address the Committee form prior to the beginning of each agenda item and submit it to Continuum of Care (CoC) staff. Staff will call your name in the order received.

Members of the public may also submit public comment by emailing CareCoordination@ocgov.com. All comments submitted via email at least 24 hours before the start of the meeting will be distributed to the PPS Committee members and all comments will be added to the administrative records of the meeting. Please include "PPS Committee Meeting Comment" in the email subject line.

CONSENT CALENDAR

1. Approve the PPS Committee Meeting Minutes from January 14, 2025.

Dawn Price motioned to approve Consent Calendar Item 1. Robert "Santa Bob" Morse seconded the motion. Chair Nishtha Mohendra issued a voice vote. No nays, no abstentions, motion passed.

BUSINESS CALENDAR

1. **PPS Committee Membership –** Felicia Boehringer, CoC Administrator, Office of Care Coordination
    a. Receive update on plan for PPS Committee membership from members serving as Chairs of CoC Committees.

Felicia Boehringer outlined recent amendments to the PPS Committee Governance Charter, which now allows CoC Committee chairs to designate a representative from their committee to participate as a member of the PPS Committee, should a Chair be unable to serve. Furthermore, Felicia Boehringer initiated discussion regarding whether members wished to proceed with serving on the PPS Committee or selecting an alternative representative.

Public Comment:

*   Alan Achterberg submitted public comment via email in advance of the PPS Committee meeting. Alan Achterberg shared a growing interest in the community to be more involved in the process, which creates opportunities for Lived Experience Advisory Committee (LEAC) members to participate in additional committees. Alan Achterberg encouraged each CoC Board member to attend at least one LEAC meeting per year, as it is important to build relationships beyond the current network.

PPS Committee Member Discussion

*   Judson Brown shared efforts to encourage January Johnson of the Orange County Housing Authority (OCHA) to participate more with the CoC Board and Committees, emphasizing that participation from OCHA, the largest housing provider in Orange County, would provide valuable insight for the CoC Board and Committees.
*   Maricela Rios-Faust highlighted that new CoC Board members are joining the Domestic Violence (DV) Committee, stating the first step is to gauge interest, before presenting them with a possible

MINUTES   February 11, 2025

opportunity to serve as co-chairs of the DV Committee or join the PPS Committee. Maricela Rios-Faust also noted it may be helpful to explore a distinction between voting members and substitutes, stressing that CoC Committee members can still contribute meaningfully to discussions without voting. The PPS Committee can provide accessible ways for members to share perspectives and participate on agenda topics.

- Andrew Crowe confirmed plans to continue serving on the committee.
- Melanie McQueen confirmed plans to continue serving on the committee.
- Dr. Tiffany Mitchell expressed intention to serve on the committee at least during the first year, to learn and acclimate to the role.
- Dawn Price expressed the importance of the CoC Board expanding its knowledge base, noting that while the CoC Board is currently growing, there is a need to consider the next group of members, further suggesting that the committee commit to taking on a larger role in reviewing policies, procedures, and documents. Dawn Price also suggested providing more formalized spaces for CoC Committee members to contribute their perspectives while still being in alignment with the Brown Act; proposing presentations being a way to extend their ability to participate in discussion.
- Becks Heyhoe-Khalil indicated that an alternate from the Veterans Committee will likely need to be identified to serve on the committee.
- Robert "Santa Bob" Morse proposed the idea of implementing substitutes to increase interactivity, emphasizing that there is still an open seat for another at-large member.
- Chair Nishtha Mohendra welcomed Dawn Price as the new at-large member of the committee and Dr. Tiffany Mitchell for joining the CoC Board and being elected as Chair of the TAY Collaborative Committee. Chair Nishtha Mohendra emphasized the desire to develop leadership from interested members. Chair Nishtha Mohendra stated plans to continue serving as Chair, though the updated PPS Charter indicates that the CoC Board Vice Chair is not required to also serve as chair of PPS. Chair Nishtha Mohendra suggested the possibility of involving other committee members in leadership roles, such as co-chair or vice chair, reiterated the importance of building a leadership pipeline within the committee and explained that proxy voting and substitutions are not allowed under the current Governance Charter and process. Chair Nishtha Mohendra noted that the CoC Strategic Plan and PPS Committee goals for 2025 could present an opportunity to revisit these policies and processes in future meetings.

2. **CoC Strategic Plan** – Nishtha Mohendra, Chair and Sarah Jones, CoC Manager, Office of Care Coordination
   a. Discuss planning for utilizing CoC Committee meeting spaces for finalizing goals, strategies, and actions within the CoC Strategic Plan.

Sarah Jones gave a summary of the December 2024 CoC Board meeting, where the current CoC Strategic Plan framework was approved. The focus now is on laying the foundation, setting Strategic, Measurable, Ambitious, Realistic, Time-bound, Inclusive and Equitable (SMARTIE) goals, defining metrics, and establishing timelines for implementation, which is expected to begin in July 2025 and take three years to complete. Chair Nishtha Mohendra provided an update on the work behind the CoC Strategic Plan, its adaptability moving forward, and how it will apply within Orange County, discussing further how factors influencing the homelessness system will be addressed, federal impacts, and the many unknowns that need clarification on behalf of the CoC Board. Objectives within the Strategic Plan have already been agreed upon, and next steps involve refining the plan through established Strategies and Actions

Public Comment:

- Alan Achterberg submitted public comment via email in advance of the PPS Committee meeting, stating LEAC members feel uncomfortable being candid on committees due to fear of scrutiny or changes in privileges. Alan Achterberg stated there is a lack of accountability in the system, with unclear roles and responsibilities, and that the Strategic Plan should focus on improving feedback methods, client training, and expanding the role of Peer Specialists.

PPS Committee Member Comments:

- Judson Brown emphasized the importance of breaking down items into manageable pieces when presenting them to committees. Committee chairs should identify which objectives align with their committees and use that as a starting point for discussions. A standardized set of questions should be used by chairs to gather specific feedback. The CoC Strategic Plan can be reviewed in its entirety, but focus should be placed on one or two Strategic Aims. Judson Brown noted this approach will help differentiate between ideas that should be pursued ("Push on") versus those that may need to be reconsidered ("Strategically Abandon").
- Chair Nishtha Mohendra requested that the video by Aubrey Silter, consultant with AC Strategies, be resent to PPS Committee members to assist with creating priorities. While the video helps in this process, it does not provide guidance on which Objectives each committee should focus on. Aubrey Silter and the Office of Care Coordination staff will work with committees to identify specific objectives. Aubrey Silter is available to join virtually to facilitate committee discussions if needed. Chair Nishtha Mohendra explained that the CoC Strategic Plan can help identify action steps for the CoC and support implementation of the CoC's vision. Strategies and Actions will remain flexible, and the Office of Care Coordination will collaborate with CoC Committee chairs to bring the plan to committees without diluting the purpose of gathering feedback. A guided CoC Strategic Plan workshop session will be held in Spring 2025 to review the plan in detail. Chair Nishtha Mohendra also noted that the CoC Strategic Plan is a living document and should be adaptable, ensuring alignment with the CoC Board, particularly in relation to funding.
- Maricela Rios-Faust explained that the DV Committee's purpose is to support survivors. This focus will guide how the committee sets metrics and strategic objectives. Maricela Rios-Faust requested that dates for the CoC Board workshop sessions be provided to all Board members, as March and April 2025 are approaching quickly. Further, Maricela Rios-Faust stated that while tangible improvements may not be seen in the next year, capturing feedback, and starting the timeline for implementation with intentionality is essential. This timeline should be adaptable to changes in the federal administration and funding opportunities.
- Becks Heyhoe-Khalil asked if committees are setting SMARTIE goals or if they are helping to define strategies and actions. Additionally, Becks Heyhoe-Khalil sought clarification on whether committees should create new goals or support those already in the CoC Strategic Plan. Becks Heyhoe-Khalil further explained two potential approaches: one where the plan is brought to CoC Committees to create Actions, and another where committee agendas are integrated into the plan to gain buy-in from committee members on certain objectives and strategies. Becks Heyhoe-Khalil noted that the CoC Strategic Plan is not ready to be presented to committees until the CoC Board workshop. Bringing the entire plan to committees may be overwhelming, especially since the Veterans Committee will have met only once before the CoC Board workshop, limiting the time for feedback. Becks Heyhoe-Khalil highlighted that specific feedback from the December 2024 CoC Board meeting requested the inclusion of strategies for improving collaboration, particularly regarding the veteran's community and higher education and that feedback should be addressed and reflected upon in the Strategic Plan, even if not word-for-word.

- Dr. Tiffany Mitchell stressed the importance of understanding where Transitional Age Youth (TAY) providers can be most effective, stating the TAY Collaborative Committee should focus on Strategic Aims that are most relevant and elevated by the committee. Dr. Tiffany Mitchell further explained that the CoC Strategic Plan was reviewed through an equity lens, and it is crucial that all members approach the plan from this shared perspective. If this approach is not maintained, the Strategies may appear disjointed or misaligned.
- Andrew Crowe highlighted the need to elevate the education system, particularly primary and secondary education. He suggested that all CoC Committee chairs use a standardized template to ensure alignment in identifying actions within the CoC Strategic Plan. The template should focus on breaking down actions into smaller, manageable pieces for productive committee discussions. Andrew Crowe further asked whether there is a streamlined process for identifying actions in the Strategic Plan. Given the diversity of the committees, Andrew Crowe emphasized that the Office of Care Coordination staff and CoC Committee chairs will determine the most effective way to present the CoC Strategic Plan to each committee.
- Dawn Price inquired about the best approach for convening all CoC Committee chairs after the CoC Board workshop to collaborate on determining which sections of the CoC Strategic Plan should be assigned to each committee.

3. CoC Updates – Felicia Boehringer, CoC Administrator, Office of Care Coordination

Felicia Boehringer provided updates on a training conducted by Homebase called Financial Management for Agencies Receiving Federal Funding and practical strategies and how to navigate and ensure compliance and upcoming CoC meetings.

Nishtha Mohendra adjourned the meeting at 4:35p.m.

Adjournment to: Regular meeting on March 11, 2025, from 3:30 p.m. to 5:00 p.m., at CAS Multipurpose Rooms 103/105, located at 601 N. Ross St., Santa Ana, CA 92701.

<div align="right">

Business Calendar
Agenda Item 1

</div>

Date: May 13, 2025

Subject: Homeless Management Information System (HMIS) Policies and Procedures Recommended Changes

Recommended Action:

a. Approve the recommended revisions to the HMIS Policies and Procedures, inclusive of the Client Record Requests, Data Use and Disclosure, Data Integration, and Data Release policies, as well as updates to the Client Consent Form, Grievance Form, and Privacy Notice, as recommend by the Orange County HMIS Policies and Procedures Working Group and Lived Experience Advisory Committee, for review and approval by the CoC Board.

Background

At the August 2024, Continuum of Care (CoC) Meeting of the Board, the HMIS Policies and Procedures were approved, except for the Client Record Request policy. The CoC Board requested additional research be done to determine if the Client Record Request policy should be updated to allow clients to request their full record in HMIS. In addition to this Client Record Request policy, other policies and forms are being revised to reflect new guidance, update internal processes, or to provide clarity to users and clients.

2-1-1 Orange County (211OC), a key service of Orange County United Way, as the HMIS Lead for the Orange County CoC, convened the HMIS Working Group in November 2024 to propose revisions to the HMIS Policies and Procedures. These revisions were also shared with HMIS users and the CoC Board members during a feedback period from November 15, 2024, through December 1, 2024. On December 4, 2024, the HMIS Lead presented the proposed changes to the LEAC and received feedback. As the LEAC was only able to discuss the Client Record Request portion of the HMIS Policies and Procedures, the HMIS Lead and Office of Care Coordination committed to return to the LEAC to present on the remaining draft policies and forms. The updated Policies and Procedures were presented and approved by the LEAC on April 2, 2025.

Since December 2024, the HMIS Lead received feedback from various entities which is reflected in **Attachment A**. The PPS Committee is being asked to review and approve the additional recommended changes to the HMIS Policies and Procedures (**Attachment B**), as well as the HMIS Client Consent Form (**Attachment C**), Grievance Form (**Attachment D**), and the Privacy Notice (**Attachment E**). Changes to the HMIS Policies and Procedures and its connected forms are summarized below.

Attachment B: HMIS Policies and Procedures
- Agency Access Policy (Attachment B, page 13)
  - Agency Access HMIS Access Working Group membership updated to three to *five* members.

- Client Record Requests (Attachment B, page 24)
  - Clients requesting specific information from their HMIS record may work directly with an agency currently participating in HMIS to obtain that information

- Case notes can only be released by the agency that entered them, and may be released at the discretion of each agency
  - o Clients that want to receive their full HMIS record can submit the request to any agency currently participating in HMIS
    - Case notes will not be included in these requests
  - o Clients may request edits to data they contributed to HMIS (ex. responses to enrollment and assessment questions, documentation provided by the client)
    - Clients that wish to edit data for a specific project must contact the agency directly to request the edit
    - Clients cannot request edits for a specific project if the project is closed or the agency administering the project is no longer participating in HMIS
  - o Data contributed by a participating agency (enrollment history, services, case notes, etc.) cannot be edited at a client's request

- Data Use and Disclosure (Attachment B, page 26)
  - o Clarify that data may be used or disclosed without client consent for system administration, technical support, program compliance, analytical use, and other purposes as outlined in the Privacy Notice or required by law.

- Data Release (Attachment B, page 26)
  - o Clarify that client data will not be shared without consent except for uses and disclosures outlined in the Policies and Procedures or otherwise required by law.
  - o The HMIS Lead, CoC Collaborative Applicant, and CES Administrators may release aggregate data about the CoC without organization or CoC Board permission

- Data Integration (Attachment B, page 29)
  - o Agencies must be approved for HMIS access before submitting any data integration requests.
  - o Agencies requesting to integrate their own HMIS data with a case management software will be reviewed and approved by the HMIS Lead
  - o Agencies requesting to integrate HMIS data from other agencies that they do not manage will be reviewed and approved by the CoC Board
  - o Requests to integrate Coordinated Entry System data will be reviewed and approved by the HMIS Lead and the CES Lead
  - o Updated language around new API process
  - o Data normalization tasks added

Attachment C: Client Consent Form
- Clarify that the client is consenting for their data to be shared with other service providers/organizations in HMIS
- Signing the consent form also means that the client's data may be included in data requests approved by the CoC Board

Attachment D: Grievance Form
- Directed grievances with the Coordinated Entry System to the Office of Care Coordination
- Provided additional details on what is considered an HMIS grievance

Attachment E: Privacy Notice
- Clarifies that there are situations where client data may be disclosed without the client's consent
- Clients that submit a Client Record Request will have their full record sent to the agency that submitted the request on their behalf

Attachments
Attachment A – HMIS Policies and Procedures Feedback Received
Attachment B – HMIS Policies and Procedures (Redlined Version)
Attachment C – HMIS Client Consent Form (Redlined Version)
Attachment D – HMIS Grievance Form (Redlined Version)
Attachment E – HMIS Privacy Notice (Redlined Version)

Homeless Management Information System (HMIS) Policies and Procedures

Feedback Received from November 2024 – April 2025

HMIS Policies and Procedures Working Group Feedback Received November 2024

Policy	Feedback	Response	Additional Details
Client Record Requests	Concern around liability for agencies if case notes are released to clients	Revised policy: Case notes may be shared by the agency that entered them into HMIS at the agency's discretion	
Client Record Requests	More accessible data could improve client relationship	Revised policy: Clients requesting specific information in their HMIS record may work directly with an agency participating in HMIS	
Client Record Requests	HMIS Users would like more guidance around case notes, data entry, and how to talk to clients about their data, and suggested limiting case notes in client record requests to those entered after the training was completed	Revised policy: Case notes may be shared by the agency that entered them into HMIS at the agency's discretion	211OC will update training materials to provide additional guidance on client record requests and data collection
Client Record Requests	Sharing location data may be a safety concern if the client doesn't properly dispose of that information	211OC has a web page available for clients to understand the Client Record Request process, including tips for disposing of data after review	
Client Record Requests	Full HMIS record may be too much information for clients	Revised policy: Clients requesting specific information in their HMIS record may work directly with an agency participating in HMIS	
Client Record Requests	Allow clients to select what data they would like to see	Revised policy: Clients requesting specific information in their HMIS record may work directly with an agency participating in HMIS	

User Feedback Received November 2024

Policy	Feedback	Response	Additional Details
Client Consent Form	Edit Client Consent Form to change "agencies contributing data to HMIS" to "agencies with access to HMIS"	Form updated with language provided	
Client Record Requests	More guidance for agencies on how to process client record requests	211OC will update training materials to provide additional guidance on client record requests, as well as how to find specific information that does not require a full record request	

Lived Experience Advisory Committee (LEAC) Feedback Received December 2024

Policy	Feedback	Response	Additional Details
Client Record Requests	Client Record Requests should include all data in the client's file.	Revised policy: Clients that want to receive their full HMIS record may submit a record request by contacting a Service Provider currently participating in HMIS.	Clients will be able to select the types of data they would like to review. Case notes are not included in the full record request submitted to the HMIS Lead.
Client Record Requests	The process to request records should be a single step, and streamlined to make the process easy for the client.	Creation of Client Record Request Form	
Client Record Requests	Case notes are a common request by clients, however, it is important to balance the potential impact to the system and service providers if case notes are provided.	Revised policy: Clients requesting specific information in their HMIS record may work directly with an agency participating in HMIS.	Case notes may be shared by the agency that entered them at the agency's discretion. Case notes are not included in the full record request submitted to the HMIS Lead
Client Record Requests	Clients need to be made aware that it's possible to request their HMIS record.	211OC will update training materials and provide regular reminders to agencies that clients should be made aware of this right.	

Client Record Requests	Service Providers need to be trained on how to help the client get the information they want.	Revised policy: Clients requesting specific information in their HMIS record may work directly with an agency participating in HMIS.	211OC will update training materials to provide guidance on how to find information that a client may request from their record.
Client Record Requests	Clients are interested in checking their Coordinated Entry System (CES) status.	Revised policy: Clients requesting specific information in their HMIS record may work directly with an agency participating in HMIS.	

Policies, Procedures, and Standards Committee (PPS) Feedback Received December 2024

Policy	Feedback	Response	Additional Details
Client Record Requests	Train staff to assist clients with simple requests that don't require their full HMIS record	Revised policy: Clients requesting specific information in their HMIS record may work directly with an agency participating in HMIS.	211OC will update training materials to provide guidance on how to find information that a client may request from their record
Client Record Requests	Find out how agencies are currently handling record requests, and how many record requests agencies are receiving	Conducted Client Record Request survey	
Client Record Requests	The record request process should be client-focused	Revised policy: Clients requesting specific information in their HMIS record may work directly with an agency participating in HMIS Revised policy: Clients that want to receive their full HMIS record may submit a record request by contacting a Service Provider currently participating in HMIS Clients will be able to select the types of data that they would like to review	

Client Record Request Survey Feedback January 2025

Policy	Feedback	Response	Additional Details
Client Record Requests	Most agencies are sending HMIS record requests to the HMIS team	Revised policy: Clients requesting specific information in their HMIS record may work directly with an agency participating in HMIS. Revised policy: Clients that want to receive their full HMIS record may submit a record request by contacting a Service Provider currently participating in HMIS.	
Client Record Requests	Some agencies provide clients with copies of their paper files if asked	Revised policy: Clients requesting specific information in their HMIS record may work directly with an agency participating in HMIS.	
Client Record Requests	Agencies receive very few HMIS client record requests	N/A	
Client Record Requests	The client record request process should be as efficient as possible	Revised policy: Clients requesting specific information in their HMIS record may work directly with an agency participating in HMIS.	

Lived Experience Advisory Committee (LEAC) Feedback Received April 2025

Policy	Feedback	Response	Additional Details
Data Integration	Does the change in policy mean that data requests will no longer need to be approved by the CoC Board?	Revised policy: Agencies requesting to integrate their own HMIS data with a case management software will be reviewed and approved by the HMIS Lead Requests to integrate Coordinated Entry System data will be reviewed and approved by the HMIS Lead and the CES Lead	Changes in the Data Integration policy will not impact the Data Release policy and the Data Request Matrix
Client Record Requests	What if an agency denies a client's record request?	Clients should submit the HMIS Grievance Form to the HMIS Lead	

Item 1. Attachment A

Client Record Requests	How is client data entered into HMIS?	When a client accesses services at an agency participating in HMIS, data is collected from the client and entered into HMIS. Clients may refuse to answer questions, and cannot be denied services if they refuse to share their data with other agencies participating in HMIS. Agencies will also enter data into HMIS to document work they have done with the client, like services provided, documents collected, and other pertinent information.	
HMIS Participation Fees	Is HMIS data sold to outside entities?	Agencies participating in HMIS are charged HMIS participation fees to help supplement the ongoing costs of licenses in HMIS HMIS data will never be sold to any entities for any reason Requests for HMIS data must be approved in accordance with the Data Request Matrix	

Orange County HMIS Policies and Procedures

AUGUST 2024MAY 2025

Orange County United Way/2-1-1 Orange County
WWW.OCHMIS.ORG |WWW.UNITEDWAYOC.ORG| WWW.211OC.ORG

Orange County HMIS Policies and Procedures

Table of Contents

Orange County HMIS Policies and Procedures

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
Orange County United Way/2-1-1 Orange County	OCUW/211OC	~~Homeless Management Information System (HMIS)~~HMIS Lead Agency for Orange County ~~Continuum of Care (CoC)~~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~~ Orange County HMIS participating agencies and the HMIS Lead Agency that specifies the rights and responsibilities of each party regarding the use of HMIS.
Aggregate Data		Data that has been collected from different clients and compiled into sums. Aggregate data does not include any information that could identify a particular client.
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:
		   o Lives in a place not meant for human habitation, a safe haven, or in an emergency shelter, and
		   o 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

Updated 05~~08~~/202~~4~~5~~4~~

Orange County HMIS Policies and Procedures

		• 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	CoC	The Continuum of Care is a collection of nonprofits, and agencies, and people with lived experience of homelessness 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 experiencing homelessness; 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 Program	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 CoC'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.

Orange County HMIS Policies and Procedures

Coordinated Entry System Lead	CES Lead	The CES Lead is empowered by the CoC to manage the process of determining and updating the prioritization for all housing resources that participate in the Coordinated Entry System.
Coverage Rate		Coverage rate refers to the percentage of beds targeted to serve people experiencing homelessness 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 people experiencing homelesslessness 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 – Entry Exit	ES - EE	A project that offers temporary shelter (lodging) for people experiencing homelessness in general or for specific populations of people experiencing homelessness. Requirements and limitations may vary by program and will be specified by the funder. The EE shelterThis project type should be used for all shelters that collect Universal Data Elements (UDEs) and certain Program-Specific Data Elements (PSDEs) at project start and project exit, including projects that require or strongly encourage a continuous stay while a client resolves their experience of homelessness. In EE these shelters, length of stay is calculated based on the number of nights between project start and project exit, and performance measures will include changes from project start and project exit Data Collection Stages.
Emergency Shelter – Night-by-Night	ES - NbN	The NbN emergency shelterThis project type may be 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. This project type relies on creating a separate record of each individual date on which a client is present in the shelter as a means for calculating length of stay and implies that the emergency shelter is generally unable to collect as much client data at project exit as an EE emergency shelter ES – EE shelters for tracking utilization. In ES - NbN shelter:(1) entry information is collected the first time that a client stays at the shelter (2) the project records every discrete date (or series of dates) that the client resides in the shelter; (3) the HMIS

Orange County HMIS Policies and Procedures

		maintains historical data on the nights a client is sheltered; (4) the client may be exited when shelter staff has information that indicates that the client is unlikely to return to the shelter or the system may be designed to automatically generate an exit (dating back to the day after the last bed night) after an extended absence; and (5) 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 experiencing homelessness who are living on the street; • Improve the number and quality of emergency shelters for ~~homeless~~ individuals and families experiencing homelessness; • Help operate these shelters; • Provide essential services to shelter residents; • Rapidly re-house ~~homeless~~ individuals and families experiencing homelessness; and • Prevent families and individuals from becoming homeless.
Health Insurance Portability and Accountability Act of 1996	HIPAA	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~~Privacy Notice is structured.
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~~HUD's requirements and is used to collect client-level data and data on the provision of housing and services to ~~homeless~~ individuals and families experiencing homelessmess 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	HP	A project that offers supportive 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)~~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)~~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 experiencing homeless or are 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.
Lived Experience Advisory Committee	LEAC	This Committee was created to obtain and include community-level feedback from persons with current and past lived experience of homelessness in the CoC's efforts to end homelessness in Orange County. This includes providing input on policies, procedures, and standards development and improving the quality and types of services provided to people experiencing homelessness.
Longitudinal Systems Analysis	LSA	The LSA is a report submitted by each CoC on an annual basis to HUD, and includes demographic, performance, and household composition information, as well as patterns 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~~ childcare for persons in permanent housing or a dental care project funded to serve people experiencing homeless~~ness~~ ~~clients~~ should be ~~typed~~ designated 'Other.' A project funded to provide ongoing case management with associated housing outcomes should be ~~typed~~ designated '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	OPH	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)	OPH	A project that offers permanent housing and supportive services to assist people experiencing homeless~~ness~~ ~~persons~~ to live independently, but does not limit eligibility to individuals with disabilities or families in which one adult or child has a disability.

Orange County HMIS Policies and Procedures

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~~s~~ or famil~~ies experiencing homelessness to y~~ move as quickly as possible into permanent housing and achieve stability in that housing.
PH - Rapid Re-Housing Subtypes		RRH: Services Only - A RRH project that provides services only and does not provide ongoing rental assistance or support any inventory for participants. RRH: Housing with or without services - A RRH project that offers ongoing rental assistance that may or may not be accompanied by financial or other supportive services to participants.
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.~~ every two 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)~~CES, and ~~Homeless Management Information System (HMIS)~~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.

Updated 05~~08~~/2025~~4~~

Orange County HMIS Policies and Procedures

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 - Entry Exit • Emergency Shelter - Night-by-Night • 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	PATH	PATH is funded by the Substance Abuse and Mental Health Services Administration (SAMHSA). It provides services to ~~mentally ill homeless people~~people experiencing homelessness who are also experiencing mental illness, 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.
Rapid Re-Housing: Services Only	RRH: Services Only	A type of Rapid Re-Housing project that provides services only and does not provide ongoing rental assistance or support any inventory for participants.
Rapid Re-Housing: Housing with or without services	RRH: Housing with or without services	A type of Rapid Re-Housing project that offers ongoing rental assistance that may or may not be accompanied by financial or other supportive services to participants.
Runaway Homeless Youth program	RHY	The ~~Runaway and Homeless Youth Program (~~RHY~~)~~ program supports street outreach, emergency shelters and longer-term transitional living and maternity group home programs to serve ~~homeless ~~youth experiencing homelessness (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~~people experiencing homelessness 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.

Orange County HMIS Policies and Procedures

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,~~ childcare, employment assistance, and transportation services) and has associated housing outcomes.
Street Outreach	SO	A project that offers services necessary to reach out to people experiencing unsheltered ~~homeless people~~homelessness, connect them with emergency shelter, housing, or critical services, and provide urgent, non-facility-based care to people experiencing unsheltered homeless~~ness~~ ~~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~~SSVF is a program 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 experiencing homeless~~ness~~ 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 Report	SPM	The HUD System Performance Measures Report measures the performance of a CoC as a whole as mandated by the 2009 HEARTH Act. The ~~System Performance Report~~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 experiencing homelessness 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 Housing and Urban Development	HUD	HUD is a Cabinet department in the Executive branch of the US. Federal government. HUD provides funding to CoCs across the country serve people experiencing homelessness.
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. Individual users are staff or volunteers that have access to HMIS on behalf of agencies participating in HMIS. This form is signed on the user's first log-in to HMIS, and again every year the user's account is active.

Orange County HMIS Policies and Procedures

Veteran Affairs Supportive Housing	VASH	The ~~HUD Veterans Affairs Supportive Housing (HUD~~-VASH~~)~~ program combines Housing Choice Voucher (HCV) rental assistance for ~~homeless~~ Veterans experiencing homelessness with case management and clinical services provided by the ~~U.S. Department of Veterans Affairs (~~VA~~)~~. The VA provides these services for participating Veterans at VA ~~M~~medical ~~V~~centers (VAMCs) and community-based outreach clinics.

Orange County United Way: HMIS Lead Agency

The Orange County CoC has designated Orange County United Way as the ~~Homeless Management Information System (HMIS)~~ Lead Agency. Orange County United Way's key service, 2-1-1 Orange County (211OC), connects thousands of Orange County (OC) residents with health and human service resources, and administers ~~the Homeless Management Information System (~~HMIS~~)~~ for the Orange County CoC. As such, 211OC is tasked with assisting the Orange County CoC with:

- Developing and implementing a privacy plan, security plan and data quality plan for the Orange County CoC's 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 Continuum of Care (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

Updated 05~~08~~/202~~5~~4

Orange County HMIS Policies and Procedures

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 people experiencing homelessness persons, understand patterns of service use, and measure the effectiveness of homeless programs. Data on homeless personspeople experiencing homelessness is collected and maintained at the local level. HMIS implementations can encompass geographic areas ranging from a single city to an entire state.

The Homeless Emergency Assistance and Rapid Transition to Housing (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 communitythe CoC should be able to collect information from projects serving homeless families and individuals and families experiencing homelessness to use as part of their needs analyses and to establish funding priorities. The HEARTH Act also codified into law certain data collection requirements integral to HMIS. With enactment of the HEARTH Act, HMIS 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 people experiencing homelessness 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

11

Orange County HMIS Policies and Procedures

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 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 Lived Experience Advisory Committee (LEAC), Policies, Procedures and Standards Committee (PPS), 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~~ approved 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 training.~~related to HMIS functionality, privacy and security, and reporting functionality.
c. Develop and maintain ~~client~~ all HMIS related forms, including client forms and privacy forms.
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~~the OC HMIS website, 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 Grievance Form or calling 714-589-2360.~~
g. Host HMIS User Meetings open to all HMIS Users to discuss the use and implementation of HMIS. ~~Please refer to the OC HMIS calendar for additional meeting details.~~
h. Host the Data and Performance Management meetings, which are open to all HMIS ~~Agency Administrators~~users, and focus on performance and policies related to HMIS. ~~Please refer to the OC HMIS calendar for additional meeting details.~~
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.
l. Complete HMIS software testing, as needed.
m. Submit tickets for technical support to the HMIS vendor 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~~Monitor the availability of HMIS to HMIS Users, and~~. The HMIS Lead Agency will~~ inform all ~~HMIS U~~users of any planned or unplanned service outages via direct email or announcement on the ~~ochmis.org.~~OC HMIS website.
o. Facilitate access to system level data.

Orange County HMIS Policies and Procedures

p. 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 HMIS Help Desk. 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 HMIS Help Desk 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. Homeless assistance projects include Emergency Shelter, Transitional Housing, Permanent Housing, and Street Outreach projects. These projects offer assistance to clients who are entering from a literal homeless situation. Homelessness prevention projects provide assistance to clients who are at risk of homelessness.client, service, and housing data as appropriate for individuals and families who are experiencing homelessness or at-risk of homelessness. The organization must contribute data for at least one of the Project Types included in the latest published HMIS Data Standards Manual.

b. An organization that at minimum meets one of the following criteria will be granted access to HMIS:

  a. Manage at least one homeless assistance housing project, including Emergency Shelter, Transitional Housing, and Permanent Housing projects, that will be contributing data to HMIS. Adding these project types to HMIS will increase the CoC's bed coverage which is a priority for the CoC.

  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.

i. Organizations receiving funding that requires HMIS participation will be given data entry access, but this does not necessarily include data sharing with other Participating Aagencies. 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 complies with all HMIS data, technical and security standards, and 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.

iii. Victim Service Providers receiving CoC Program funds or ESG Program funds may request up to five licenses for read-only access in HMIS for the purpose of care coordination. The Victim Service Pprovider will be required to pay the User Fee for 1 – 5 users as outlined in the Participating Agency Requirements section.

c. Organizations that do not meet the above listed criteria will be required to complete the HMIS 101 online course and submit an HMIS Access Application for review and consideration by the HMIS Access Working Group as appointed by the Orange County CoC to further evaluate the request.

a. The HMIS Access Working Group will be comprised of three to four five CoC General members. Membership to the HMIS Access Working Group is recommended by the current HMIS Access Working Group members, the CoC Collaborative Applicant and the HMIS Lead Agency, and appointed by the CoC Board approves the appointments. The HMIS Access Working Group will meet monthly or on an as-needed basis for the purposes of evaluating HMIS Access Applications.

b. When vacancies occur, the Office of Care Coordination as the CoC Collaborative Applicant will send an email via the CoC distribution list notifying CoC General Membership of vacancies in the HMIS Access Working Group and soliciting interested participants. Additionally, as needed, the HMIS Access Working Group, CoC Collaborative Applicant and the HMIS Lead Agency will outreach to qualified CoC General Members individually to solicit interested participants. The CoC Collaborative Applicant will confirm interest from CoC General Members to be considered for the HMIS Access Working Group. The HMIS Access Working Group, the CoC Collaborative Applicant and the HMIS Lead Agency will then review all interested candidates to select the most qualified member(s) for the working group to be recommended to the CoC Board for appointment.

i. Qualifications:

1. Individual must belong to an agency that is an Orange County CoC General Member or be an Individual General Member

2. At least two (2) years of experience with the Homeless Management Information System (HMIS) preferred

3. At least two (2) years of experience with the Orange County homeless service system CoC preferred

4. Works collaboratively with team membersothers and can provide constructive feedback

Orange County HMIS Policies and Procedures

5.   Ability to make informed decisions based on objective analysis of available information
6.   Desire to positively impact the Orange County ~~homeless system~~CoC
7.   Understanding of the Orange County CoC's responsibility of promoting access and effective utilization of mainstream programs
8.   Have the availability to commit to serve a minimum term of one year

d. 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 Working Group to evaluate the organization's HMIS Data Sharing capabilities.

e. 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.

f. Agencies approved for HMIS access must begin entering data into HMIS within 90 days of approval. After this time the agency's approval will expire and the agency will need to resubmit their application to gain HMIS access.

g. Agencies that are denied access to HMIS by the HMIS Access Working Group may request an appeal. The purpose of the appeal is to ensure the integrity of the review process for the agency's application. Appeals must be submitted to the HMIS Help Desk.

   a. Upon receipt of the ~~request~~appeal, the HMIS Lead Agency will complete the Agency Access Process Review, and determine whether the ~~review~~ process was followed appropriately. If all steps of the review process were followed, the decision by the Agency Access Working Group stands. If all steps in the review process were not followed, a sub-set of the Policies, Procedures, and Standards Committee will provide a secondary review and make a final determination regarding the agency's application. This decision cannot be appealed, but agencies denied access to HMIS may re-apply in the future if they can effectively address the reasons their initial application was denied.

h. The HMIS Access Working Group and the HMIS Lead Agency reserve the right to remove HMIS Access if ~~the access~~HMIS is not being used to improve service provision for clients or contributing meaningful data to the Orange County CoC.

   ~~h.~~a.   Examples of unacceptable uses of HMIS include but are not limited to:
      ~~a.~~i.   Using HMIS data to monitor the whereabouts or service utilization of participants for purposes outside of housing-focused case management
      ~~b.~~ii.   Using HMIS data outside of a business need
      ~~c.~~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.)
      ~~d.~~iv.   Sharing client identifying data with persons or groups that don't have access HMIS

VI.   Participating Agency Requirements

   a. Submit ~~an~~a signed HMIS Participating Agency Agreement

15

Orange County HMIS Policies and Procedures

      a. Participating agencies must submit an HMIS Participating Agency Agreement, signed by the agency's Executive Director or equivalent leadership before the agency and/or projects can be set up in HMIS.

      b. ~~This document must be renewed annually with new agreements being~~On an annual basis, the agreements must be signed during the annual HMIS Agency Audit to have ongoing HMIS access.

b. Executive leadership must confirm the designation of two staff to be assigned the Agency Administrator role at the time of agency setup.

      a. If Agency Administrators must be designated after initial agency setup, executive leadership must contact the HMIS Lead Agency (via the ~~online~~ HMIS Help Desk) to notify the HMIS Lead Agency of the new Agency Administrators.

      b. The following information is required of all Agency Administrators:

         i. Full name.

         ii. Work email address that includes the staff name. Personal emails will not be allowed. Shared email accounts or general agency email 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 Ppolicies and Pprocedures 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~~Participating Agencies 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 Agency Audit Form for an overview of the items included in the audit. Please note that the audit form may change to accommodate changes in requirements.

      a. The HMIS Lead Agency will audit all HMIS Participating Agencies on a yearly basis, regardless of funding source. The CoC Collaborative Applicant may also attend audits.

      b. The HMIS Lead Agency will include the audit checklist in the scheduling email sent to the Agency Administrator at least two (2) weeks prior to the audit.

      c. Participating 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. Participating Agencies and the HMIS Lead Agency can request to reschedule the Agency Audit up to one (1) business day before the audit is scheduled. For example, the agency will notify the HMIS Lead Agency by end of day Monday that the agency will need to reschedule an audit for Tuesday. Requests to reschedule or cancellations that occur after that window has passed are considered unsuccessful attempts to contact the

Orange County HMIS Policies and Procedures

> Participating Aagency. Failing to attend the scheduled audit is also considered an unsuccessful attempt to contact the Participating aAgency.
>
> > i. After 2 unsuccessful attempts to contact the agency the HMIS Lead Agency will reach out to the agency's Executive Director or other leadership.
>
> f. If the agency remains unresponsive after attempting to contact the agency's leadership twice the agency will fail the audit for that year.
>
> g. If any deficiencies are found in the audit, the Agency Administrator and the HMIS Lead Agency staff person will agree upon a date that the issue should be resolved by. The Agency Administrator and HMIS Lead may revise the due date if needed. If the corrections are not made by the agreed upon date, the agency will fail the audit for that year.
>
> h. Agencies that fail their audit will be reviewed by the HMIS Access Ad Hoc to determine the appropriateness of the agency's continued participation in the OC HMIS, and the agency may have HMIS Access revoked.
>
> i. Agencies that pass their HMIS Annual Audit will be recognized on the OC HMIS Website.

g. Pay HMIS participation fees based upon CoC Bboard approved HMIS User License Fee Policy which details the fee structure.

> a. The HMIS User License Fee Policy is applicable to all Participating aAgencies participating in the Orange CountyOC HMIS.
>
> b. Participating 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. Participating Agencies that are Coordinated Entry Access Points (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 Participating aAgencies regardless of the number of Coordinated Entry System componentss they are participantsthe agency participates in.
>
> d. Participating 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. Participating 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 the HMIS Lead AgencyHelp Desk for an invoice. The additional Agency Administrators license fee is $759.28 per license annually. This fee is subject to change per vendor licensing fee.
>
> e. Participating Agencies may request standalone Looker licenses for the purposes of scheduling ad hoc reports to be sent to a secure location outside of HMIS. The fee for these licenses is $1,236 per license annually, and is subject to change per vendor licensing fee. This functionality is optional, and not necessary to access the agency's data in HMIS.
>
> f. If an HMIS Uuser has access to multiple agencies in HMIS, only the user's primary agency in HMIS will be charged.

Orange County HMIS Policies and Procedures

> g. Participating Agencies that join HMIS due toare 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.

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. Agencies can work collaboratively with other HMIS participating agencies to complete reporting, data quality, data entry, other requirements. The CES Lead and HMIS Lead Agency will only request the minimum necessary data and reports.

> a. All agencies participatingParticipating Agencies in HMIS are included in the HMIS Data Quality Report Cards published on a quarterly basis. The HMIS Data Quality Report Cards are created and posted by the HMIS Lead Agency. Review the Data Quality Monitoring and Reporting Process section of the Data Quality Plan for details regarding this process.
>
> b. Participating Agencies with Street Outreach, Emergency Shelter, Transitional Housing, Rapid Re-Housing, Homelessness Prevention, 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.
>
> c. Emergency Shelter, Transitional Housing, Rapid Re-Housing, Permanent Supportive Housing, and Other Permanent Housing projects are required to participate in the Housing Inventory Count (HIC) that occurs annually on one day during the last 10 days of January.
>
> d. Safe Haven, Emergency Shelter, and Transitional Housing projects are required to participate in the Sheltered Point in Time Count (PIT) that occurs annually on one day during the last 10 days of January.
>
> e. The System Performance Measures report (SPM) Report is submitted to HUD on an annual basis, and includes Street Outreach, Emergency Shelter, Transitional Housing, Rapid Re-Housing, Permanent Supportive Housing, and Other Permanent Housing projects. The reporting period for this report is October 1st through September 30th.
>
> f. The Longitudinal Systems Analysis (LSA) is submitted to HUD on an annual basis, and includes Emergency Shelter, Transitional Housing, Rapid Re-Housing, and Permanent Supportive Housing projects. The reporting period for this report is October 1st through September 30th.
>
> g. Review the HMIS Participating Agencies Schedule for an estimated timeline of activities that HMIS participating agencies may be required to participate in during the course of the year. Exact dates will be shared by the HMIS Lead.

i. Comply with Orange County'sthe CoC's minimum participation requirements for HMIS usage. The HMIS Lead Agency 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 Participating Aagency 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 Participating Aagency should continue to have access to HMIS. If the Participating Aagency 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. Participating Agency does not have at least one active HMIS Uuser.

b. Participating Agency does not have at least one active enrollment.

c. Participating Agency does not have activity in HMIS in the past 30 days. Activity includes enrollments, services, assessments, files, or exits. (This minimum participation is not applicable to Public Housing Authorities)

d. Participating Agency did not submit the HIC and/or PIT for appropriate project types during the previous HIC/PIT reporting period.

e. Participating Agency does not have at least one Agency Administrator that is an active HMIS user.

f. Participating Agency has not had staff representation for at least one HMIS 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 Agency 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 in order to gain and retain access to the OC HMIS. The forms are available on the OC HMIS website: HMIS Data & Set Up Forms

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 ~~P~~participating ~~A~~agency's Executive Director or equivalent leadership.

b. **HMIS Participating Agency Agreement** – Outlines the ~~P~~participating ~~A~~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 Executive Director or equivalent leadership.

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

b. Access roles control the level and type of access the user has to functionality within the OC HMIS. HMIS Users with access to OC HMIS will be assigned the Agency Staff, Agency Administrator, or Read Only access role. Agency Staff or Agency Administrator users can also be given CES access. ~~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.

19

Orange County HMIS Policies and Procedures

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. The Agency Administrator is responsible to be the first tier of technical support to their agency HMIS Users. After all resources are exhausted, the Agency Administrator will submit an HMIS helpdesk support ticket. Only Agency Administrator are permitted to submit tickets to ensure the request has been reviewed by the responsible parties.

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 HMIS U~~u~~ser has learned.
   d. HMIS Recertification – OC HMIS Users are required to complete an annual HMIS Recertification Training to reinforce HMIS data entry functionality.

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 A~~a~~ccess 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~~CES 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~~ people experiencing or at-risk of experiencing homeless~~ness~~ ~~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

20

Orange County HMIS Policies and Procedures

       d.   Revocation of consent and how to do it

X.   Agency Administrator Requirements

a. Agency Administrators are the designated point of contact for the Participating A~a~gency regarding HMIS related requests and updates. Agency Administrators must complete the Agency Administrator training before ~they can be~being 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 HMIS Account Update and Testing Form.

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 ~Agency Administrators can then contact the HMIS Help Desk. 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~HMIS updates and other relevant information with all HMIS U~u~sers at their agency.
    a. Agency Administrators periodically receive emails from the HMIS Lead Agency regarding OC 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 HMIS 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 Participating ~a~Agency or executive leadership 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 u~HMIS Users ~that they are obligated~of obligations 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~reported by HMIS Users ~report ~to ~you to ~the HMIS ~Agency Administrator~Lead Agency via the HMIS Help Desk.
    c. Ensure that all ~staff at your agency ~HMIS Users at the Participating Agency are aware that HMIS usernames and passwords are NOT to be shared with anyone under any

Orange County HMIS Policies and Procedures

circumstances. HMIS Users should not share their HMIS login information with other staff at their agency, their Agency Administrator, their executive leadership, their IT Staff, etc.

    d. Ensure all HMIS U~~u~~sers at the Participating A~~a~~gency 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 technology equipment meets the specifications outlined in the Technical Standards section of this document.

h. Agency Administrators must ensure that agency data quality either meets or exceeds 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~~ The Participating Agency run~~s~~ x, y, and z reports each month. ~~I~~ The Agency Administrator identif~~ies~~y data quality errors and ~~fix them myself or~~ delegate~~s~~ corrections ~~them~~ to Users x, y, and z." ~~Please~~ Agency Administrators must 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 with the HMIS Lead Agency to ensure the Participating A~~a~~gency 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 Participating A~~a~~gency is in compliance with the ~~Orange County~~OC HMIS Data Quality Plan.

i. Agency Administrators must ensure all projects in ~~the~~ HMIS ~~database~~ are set-up correctly, and notify the HMIS Lead Agency when a project is no longer serving clients.

    a. Participating 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.~~people experiencing or at risk of experiencing homelessness.

    b. Agency Administrators are required to notify the HMIS Lead Agency when project changes have occurred, including changes in funding sources and bed inventory.

    c. 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 Measures Report. Projects whose performance and/or data quality negatively affects the CoC as a whole may be subject to corrective action. Corrective action discussed in the Data Quality Plan around performance will be done in conjunction with the CoC Collaborative A~~a~~pplicant.

    d. 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.

Orange County HMIS Policies and Procedures

XI.   Technical Standards

a.   ~~HMIS~~ Participating Agencies must adhere to the following technical standards with regards to all technical equipment used to access HMIS. ~~HMIS~~ Participating Agencies must also adhere to the HUD HMIS Technical Standards. The HMIS Lead Agency is not responsible for providing proper technical equipment or for providing Information Technology (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 five (5) minutes of inactivity and point to the computer terminal or mobile device login page upon subsequent activity. HMIS Users should manually lock their screen ~~when~~ anytime 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 aAccess HMIS ~~OR~~ and/or share a network with computers and/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 (i.e., a locked office area that is not accessible to the public).
   a.   Participating AAgencies must adhere and be consistent with the agency's expectations of information security for staff working at the office full-time. Staff who work remotely will be expected to ensure the protection of proprietary agency and client information accessible from their remote office. Steps include, but are not limited to, the use of locked file cabinets, computers and desks; the regular maintenance of passwords; and any other steps appropriate for the job and the environment. ~~Agency~~ Participating Agencies should be at a minimum in compliance with the OC HMIS Technical Standards ~~policies~~ and the policies outlined in this document.

g.   The executive leadership ~~or other empowered officer~~ and/or equivalent leadership within ~~the HMIS p~~ the Participating ~~agency~~ 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.
      b. HMIS Users ~~will~~ shall 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 U~~u~~sers 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 HMIS U~~u~~ser out and ~~the user~~ will ~~need~~ require ~~to enter their password again~~password re-entry to gain access to HMIS.
      d. If an HMIS User attempts to log in four (4) times with an incorrect password, the OC HMIS will automatically lock their account. The HMIS U~~u~~ser will be unable to access HMIS for two hours unless the~~ir~~ Agency Administrator contacts the HMIS Help D~~d~~esk 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~~the P~~p~~articipating A~~a~~gency.
      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 HMIS U~~u~~ser will receive a notification two (2) calendar days prior to the account being locked. If an account is locked due to inactivity, the HMIS U~~u~~ser 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, ~~s~~aved 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 P~~p~~articipating A~~a~~gency and the HMIS Lead Agency or between staff at a P~~p~~articipating A~~a~~gency. The only permissible way to discuss ~~an individual~~a client over unencrypted email is using the client's HMIS ID number.

Orange County HMIS Policies and Procedures

        iii.   Participating Agencies must have a formal policy for intra-agency communication regarding clients that protects client privacy.

   b. HMIS Vendor

        i.   The HMIS Vvendor 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 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 Participating Aagency must ask the client to sign the **Client Consent to Share Protected Personal Information Fform** to continue sharing their data in HMIS.

        ii.   Participating 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 Participating Aagency 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 Participating Aagency 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 Fform** they cannot be pressured into signing the form or denied services on the basis of their refusal to sign. Participating Aagencies should follow the procedure outlined Client Privacy section within the Accessing and Completing Release of Information (ROI) Page Knowledge Base Article for entering client information into HMIS when clients refuse to sign the Client Consent to Share Protected Personal Information Fform. Refusal to sign

Orange County HMIS Policies and Procedures

the consent form means that all of that client's data is only visible by the Participating Aagency serving the client, HMIS System Administrators, and the HMIS Vendor.

d. Upon signing the **Client Consent to Share Protected Personal Information Fform** clients must be made aware of their right to revoke their consent to share protected information at any time.

e. Participating Aagencies must have copies of the **Revocation of Consent Fform** 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 Fform**, Pparticipating Aagency staff must follow the most current procedure for removing sharing access to the client's protected personal information in HMIS. Review the Refusing/Revoking Consent to Share Personal Information knowledge base article for more information.

f. Participating Aagencies must post the **Note Regarding Collection of Personal Information** in all areas where HMIS data entry occurs. Participating Aagencies should direct outreach teams to give a copy of the Note to each outreach worker.

g. Participating agencies that maintain a public website must post the **Privacy Notice** on their website.

h. Participating Aagencies must have copies of the **HMIS Client Grievance Fform** 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 Pparticipating Aagency staff.

   i. In the event that the Pparticipating Aagency's in house grievance policy was not able to resolve the grievance, clients will submit the grievance form directly to the HMIS Lead Agency.

e. Client Record Requests

   a. Clients requesting specific information from their HMIS record may work directly with a Participating Agency to obtain that information. The Participating Agency is responsible for verifying the client's identity prior to releasing any information.

      i. Any case notes entered into a client's HMIS record may only be shared by the Participating Agency that entered the case notes, and may be released at the discretion of each Participating Agency.

      ii. Participating Agencies do not have access to a client's complete record in HMIS, and will only be able to provide the client with information that can be accessed by that specific agency.

   a. Clients may inspect and obtain a copy of the following data entered in HMIS by requesting the Client Record Request Dashboard, which is inclusive of:

      i. Data on the client's Profile screen

      ii. The client's Release of Information

      iii. The client's enrollment history in any projects that participate in HMIS

      iv. All client documents uploaded into HMIS

   b. Clients that want to receive their full HMIS record may work with an Agency Administrator at any Participating Agency to submit a Client Record Request Form. Agency Administrators are responsible for submitting the Client Record Request Form to the HMIS Lead on the client's behalf. Case notes can only be released by the agency that

Orange County HMIS Policies and Procedures

entered them into HMIS, and will not be included in Client Record Requests submitted to the HMIS Lead.

b. Clients may submit the request to any agency participating in OC HMIS that they have been served by in the past.

   i. The Participating Agency is responsible for verifying the client's identity prior to submitting the form to the HMIS Lead Agency.

   ii. Agency Administrators must work with the client to determine what type of data they would like to see from their HMIS record:

      1. Client Record Request Dashboard, which includes the following information:

         a. Demographics: Client characteristics i.e., Race, Gender, Ethnicity, and Veteran Status

         b. Release of Information: Whether or not the client consented to share their data in HMIS, the Participating Agency that collected the consent, and the Start and End date of that consent

         c. Enrollment History: List of Participating Agencies and projects that served the client, and the Start and End Dates of those services

         d. Uploaded Documents: Documents uploaded into HMIS on the client's behalf i.e., Verification of Homelessness, Disability Verification, etc.

      2. Client responses to assessments completed at entry, exit, or at anytime during their program enrollment(s)

      3. Data entered by a Participating Agency regarding the client, including Services, Public Alerts, and Locations

      4. Coordinated Entry data, including status, history, and events

   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.iii. At the time of the request, the Agency Administrator must decide with the client an appropriate method for the client to receive their dashboard data that does not violate the privacy of the client's data.

   iii.iv. The HMIS Help Desk will respond to the requests as outlined in the HMIS Help Desk Policies section.

   iv.v. An Agency Administrator at the agency is required to review the dashboard data 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.

d. Clients may request edits to data associated with their client profile included in HMIS. Examples of data clients may request edits to include responses to enrollment and assessment questions, and documentation contributed by the client. Data contributed by a Participating Agency, including but not limited to services, case notes, and enrollment history, cannot be edited at a client's request.

> > i. Clients that wish to edit data for a specific project must contact the agency that administers the project directly to request the edit.
> > e.ii. Clients cannot request edits for a specific project if the project has closed and/or the agency that administered the project is no longer participating in HMIS.

XIII. Data Use and Disclosure

a. Client data may be used or disclosed for HMIS system administration, technical support, program compliance, analytical use, and other purposes as outlined in the Privacy Notice or required by state or federal law. Client consent is not required for these uses and disclosures. Uses involve sharing parts of client information with persons within an organizationa Participating Agency. Disclosures involve sharing parts of client information with persons or organizations outside an organizationa Participating Agency.

b. Participating Agencies may use data contained in the systemOC HMIS to support the delivery of services to clients experiencing homelessness in Orange County. Organizations Participating Agencies may use or disclose client information for administrative functions, technical support, and management purposes. Participating Organizations Agencies may also use client information for internal analysis, such as analyzing client outcomes to evaluate programs.

c. The HMIS Vvendor and any authorized subcontractor authorized by the HMIS Lead Agency shall not use or disclose data stored in the OC HMIS without expressed written permission from the HMIS Lead Agency 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 each Continuumthe HMIS Lead Agency on behalf of the CoC and the HMIS vendor contains 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 Agencies to any person, agency, or organization not participating in OC HMIS for any purpose without written permission from the client, with the exception of the uses and disclosures outlined in this document, subpoenas, academic research purposes or other circumstances as required by state and federal law.

c. Each Participating Agency owns their own data that is stored in the systemthe data that is entered and managed by their agency in HMIS. The Participating Aagency may not release personal identifiable client data without written permission from the client. Participating Agencies may release aggregate data for all clients to whom the Participating Aagency provided services. Aggregate data is data that has been collected from different clients and compiled into sums. Agencies may share this aggregate data for their agency as a whole, or for each of their projects.

d. Coordinated Entry data is owned by the CES Lead.

e. The Orange County CoCHMIS Lead Agency, CoC Collaborative Applicant, CES Lead Agency, and CES Administrators may release aggregate data about its ownthe continuum CoC at the program,

28

Orange County HMIS Policies and Procedures

> sub-regional, and regional level. Aggregate data may be released without organization or CoC Board permission ~~at the discretion of the CoC~~.

f. Requests for regional or sub-regional data, including ~~data~~ requests for ~~Academic~~ academic ~~Research~~ research ~~Purposes~~purposes, must be reviewed and approved by the CoC Board prior to the data being released if the request has not been pre-approved according to the Data Request Matrix below. If the request is pre-approved, the CoC Board will be notified that data has been shared at the next scheduled meeting.

g. Requests for data must be submitted to the HMIS Lead Agency by submitting the Data Request Form, 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. Is this a recurring data request? If so, h~~H~~ow often is this data needed?

h. Data Requests for ~~Academic~~ academic ~~Research~~ research ~~Purposes~~ purposes may include ~~personal protected~~client identifying information if the academic research is being conducted by:

   a. An individual employed by or affiliated with ~~an HMIS~~a P~~p~~articipating A~~a~~gency 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.

i. Data Requests 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 HMIS Policies and Procedures

Data Request Matrix

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	X			X	X		X	
Program Descriptor data[2]		X		X	X		X	
Client-level data[3]		X		X		X		X
Ongoing data requests	X			X		X	X	
For use as research		X		X	X			X
For media release		X		X		X		X
For other public use		X		X		X		X

XV. Data Breach

a. A data breach is the unauthorized access or acquisition of data that compromises the security, confidentiality, or integrity of data in HMIS. Data may be in any format (electronic, hardcopy or verbal) and may range from a single piece of data and/or an entire data system.

b. Breaches to the HMIS servers are managed by the HMIS Vvendor. If a breach to the HMIS servers occurs, the HMIS Vvendor will notify the HMIS Lead Agency, and the HMIS Lead Agency will notify the Pparticipating Aagencies as appropriate.

c. Data bBreaches may also occur at Pparticipating Aagencies. The Pparticipating Aagency is responsible for immediately mitigating the data breach to the extent possible as soon as the breach is identified, including notifying clients who may have been impacted by this breach. Data breaches could include but are not limited to:

    a. HMIS Uusers sharing HMIS account and/or passwords with others.

    b. Sharing client identifying information with anyone that doesn't have access to HMIS and/or hasn't been approved to access that data.

    c. Sharing client identifying information over an unencrypted network.

    d. Leaving printed documents with client identifying information in an unsecured location.

d. Any suspected data breach must be reported to the HMIS Lead Agency by submitting the Data Breach Incident Report. The HMIS Lead Agency will review the breach and the mitigating actions taken by the Participating Aagency, and will assist with any additional action that may be needed.

---

[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.

[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.

30

e. The HMIS Lead Agency will report all data breaches to the HMIS Agency Access Working Group, and ~~that group~~the HMIS Agency Access Working Group will determine if any corrective action is needed. Corrective action may include but is not limited to notifying the CoC Board, CoC ~~Lead~~Collaborative Applicant, and funders of the Participating ~~A~~agency, and revoking HMIS access.

XVI. Data Integration

a. Data integration is the process of exporting data from one data system and importing it into another. For the purposes of this policy, data import is the process of taking data from an outside case management database and importing it into HMIS, and data export is the process of taking data out of HMIS and importing it into an outside case management database.

b. Agencies must be approved for HMIS access before submitting any data integration requests. Requests for data import or export must be submitted through the Data Integration Request Form.

   a. Agencies requesting to integrate their own HMIS data with a case management software will be reviewed and approved by the HMIS Lead Agency.

   b. Agencies requesting to integrate HMIS data from other Participating Agencies that they do not manage will be reviewed and approved by the CoC Board.

   ~~b.~~c. Requests to integrate CES data will be reviewed and approved by the HMIS Lead Agency and the CES Lead Agency.~~Agencies requesting exports of their own data do not require approval from the CoC Board. All other requests are decided by the CoC Board in conjunction with the CoC Lead and the HMIS Lead. Requests must demonstrate how the data integration will improve care coordination for clients in order to be considered.~~

c. ~~Consult the current HUD Data Dictionary and HUD Data Standards Manual for HUD standard fields collected in HMIS. All imports must be in HUD CSV Format unless otherwise approved by the HMIS Lead.~~

c. All approved data integrations will occur through an Application Programming Interface (API) or other approved integration/systems connector methods. The data integration process ensures that external case management software is securely connected to OC HMIS through a structured pathway. Data from outside systems is first transmitted to Journey DB, an intermediate database, where it is encrypted using Transport Layer Security (TLS) during transmission and AES 256-bit encryption for storage of source code, data, and logs. From there, the data is securely transferred to HMIS, ensuring consistency and compliance with data governance standards.

   a. If the systems integration approach will be utilizing a Connector that is not an API, the method will need to be investigated and approved by the HMIS Lead Agency to ensure that the proper security and data integrity protocols are met, and that the integration workflow can accommodate this method. There is no guarantee that all systems connection methods and/or API's can be accommodated.

d. ~~Agencies wishing to request any data integration with OC HMIS must agree to the following policies. The Requesting Agency and/or Outside Database Vendor must sign an MOU prior to any work being completed.~~

Orange County HMIS Policies and Procedures

~~a.~~d.   Prior to transferring any data, the HMIS Lead Agency will conduct an Agency and ~~/~~Vendor Review which may include but is not limited to privacy, security, data sharing, data storage, data timeliness, data completeness, and data collection practices.

~~b.~~e.   All approved data integrations are subject to an annual review ~~by the HMIS Lead, CoC Lead, and CoC Board~~. This review will ~~include a certification to~~ ensure the data integration is in compliance with the HMIS Policies and Procedures, and that the items included in the Agency and ~~/~~Vendor Review are still in effect. ~~The review will also consider if the data integration is still necessary and favorable for the Continuum of Care.~~ If the ~~data integration is no longer considered necessary or if the audit~~ review is failed, the data integration will be terminated. Data integrations are subject to all ~~p~~Policies and ~~p~~Procedures outlined in this document. Imported data is owned by the agency responsible for managing the data in HMIS.

f.

~~c.~~g. Violation of any of the policies and procedures in this document may be grounds for termination of the data integration at any time, and is at the discretion of the HMIS Lead Agency. The CoC Board will be notified of any data integrations that have been terminated.

~~d.~~h.   The HMIS Lead Agency will provide an estimate for implementation and maintenance fees upon receiving the appropriate data integration request form. If the CoC Board chooses not to cover these fees, the Requesting Agency ~~they~~ will ~~become the responsibility of the agency requesting the data integration~~be responsible for the fees. Fees will be updated annually by the HMIS Lead Agency, and an annual invoice will be sent for costs of the continuation of data integrations services and support.

~~e.~~i. The Requesting Agency and Outside Database Vendor must agree to the Roles and Responsibilities outlined in this policy as applicable.

~~f.a. Data integrations are subject to all policies and procedures outlined in this document. Imported data is owned by the agency responsible for managing the data in HMIS.~~

~~g.~~j. Approved d~~D~~ata integration projects ~~approved by the CoC Board~~ will be scheduled to accommodate the current workload of the HMIS Lead. Scheduling is at the discretion of the HMIS Lead.

~~e.~~k. A critical component of data integration is understanding the responsibilities of those involved in the process. The following participants may be involved in the data integration process. ~~Please review~~Review the Roles and Responsibilities ~~the~~ tables below for the expected responsibilities for each participant. The responsibilities are subject to change and will be finalized when the project plan for the data integration is developed.

     ~~a. HMIS Lead: HMIS administrator for the Orange County CoC~~

     ~~b.~~a.   Requesting Agency: The Provider that is serving clients directly, and is the responsible party for the data. If the Requesting Agency is requesting a data import, the agency must be participating in HMIS, and must be in compliance with all policies and procedures outlined in this document. If the agency is not already participating in HMIS and does not meet the criteria outlined in the Agency Access section, the agency must submit the Agency Access Application and be approved to access HMIS prior to submitting the Data Import/Export Request Form.

     ~~c.~~b. Outside Database Vendor: The entity that provides the technical and administrative support for the outside database. This entity will not be given direct access to HMIS.

Orange County HMIS Policies and Procedures

Importing Data into HMIS	
Task	**Responsibility**
Submit Data Integration Request Form	Requesting Agency
Determine specifications of import into HMIS (frequency, ~~report~~ parameters, data elements, ~~report~~ format, etc.)	HMIS Lead Agency and ~~/~~Requesting Agency
Develop project plan	HMIS Lead Agency
Review privacy and ~~/~~consent practices for outside database to ensure client consent to share data in HMIS	HMIS Lead Agency
Review outside database for proper collection of HUD required data and/or custom data	HMIS Lead Agency
Data mapping normalization meeting facilitated by the HMIS Lead Agency	HMIS Lead Agency and Requesting Agency
Data normalized and mapped to operational elements in HMIS	Requesting Agency
Data mapping review	HMIS Lead Agency and Requesting Agency
~~Format/p~~Prepare data in approved format	Requesting Agency
Review prepared data for accuracy and completeness	Requesting Agency
Submit prepared data to HMIS Lead Agency in approved submission process	Requesting Agency
Review data from Requesting A~~a~~gency for proper format and completeness	HMIS Lead Agency
Complete import of data into HMIS	HMIS Lead Agency
Review imported data in HMIS and review accuracy and ~~/~~completeness	Requesting Agency
Report any data imported incorrectly to HMIS Lead Agency	Requesting Agency
Resolve any issues with import file and/or requesting database and resend data as needed	Requesting Agency
Resolve any issues with HMIS import and re-upload data as needed	HMIS Lead Agency

Exporting Data from HMIS	
Task	**Responsibility**
Submit Data Integration Request Form	Requesting Agency
Determine specifications of export from HMIS (frequency, ~~report~~ parameters, data elements, ~~report~~ format, etc.)	Outside Database Vendor, ~~/~~HMIS Lead Agency, and ~~/~~Requesting Agency
Develop project plan	HMIS Lead Agency
Represent and warrant software is in compliance with best practice policies for privacy and security practices	Outside Database Vendor

Orange County HMIS Policies and Procedures

Represent and warrant software is in compliance with best practice policies for access roles and data sharing	Outside Database Vendor
Represent and warrant software is in compliance with best practice policies for data storage and security infrastructure	Outside Database Vendor
Review ~~agencies/users~~entities that will have access to the data in the outside database to ensure compliance with HMIS Policies and Procedures	HMIS Lead Agency
Ensure HMIS Consent Form and related documents name outside database~~/vendor~~ for transparency	HMIS Lead Agency
~~Create export file and/or e~~Export data from HMIS as needed	HMIS Lead Agency
Import data into outside database	Outside Database Vendor
Review imported data in outside database for accuracy/completeness	Outside Database Vendor/Requesting Agency
Notify HMIS Lead Agency of any errors with export data	Outside Database Vendor or~~/~~Requesting Agency
Resolve any issues with HMIS export and resend data as needed	HMIS Lead Agency
Resolve any issues with outside database import as needed	Outside Database Vendor

Updated 05~~08~~/202~~4~~5

Revised 11~~10~~/2024

Orange County Continuum of Care
Homeless Management Information System Client Consent form

Welcome to the Orange County Continuum of Care (CoC).

You are currently accessing services from a service provider/organization participating in the Orange County Homeless Management Information System (HMIS). HMIS is the secure database used to collect and store information about clients served through this service provider/organization. It also allows the sharing of information among HMIS participating service providers/organizations to streamline access to services and help them understand a client's history of homelessness or housing instability. HMIS is managed and operated by Orange County United Way's 2-1-1 Orange County (211OC).

In Orange County, ~~all~~ service providers/organizations that participate in HMIS share data with each other to coordinate care and improve program outcomes. If you ~~agree to participate in HMIS~~sign this consent form, ~~this means~~ you agree to allow information gathered by a participating service provider/organization to be ~~entered into~~shared in HMIS with other service providers/organizations that have access to HMIS. This~~and~~ allows~~all~~ other participating service providers/organizations to view and use your data to provide services to you. Additionally, the service provider/organization will also be able to see what kind of services in Orange County you have received in the past. Signing this consent form also means that your data may be included in data requests approved by the CoC Board for academic research purposes, analysis of the homeless system of care, or other purposes as deemed appropriate by the Board.

A complete list of all service providers/organizations that participate in the HMIS is maintained at http://ochmis.org/about-hmis/contributing-agencies/. You can also ask the service provider/organization you are receiving services from for a list of HMIS participating service providers/organizations. Please note that the list of service providers/organizations ~~contributing data~~with access to HMIS can change frequently and without notice, and therefore the website should be consulted for the most recent list.

HMIS contains sensitive health and personal data. The Orange County CoC and HMIS participating service providers/organizations take your privacy very seriously and have implemented **the following protections to safeguard your data:**

- Individual client data is only viewable by trained staff at each participating service provider/organization.
- In order to participate in the HMIS, leaders at each agency must sign an Agency Agreement that includes a commitment to protecting client data and maintaining confidentiality.
- In order to use HMIS, service provider/organization staff must complete multiple trainings that examines privacy laws and the importance of client privacy.
- The HMIS is hosted on a secure server and data is encrypted.

What information is shared in the HMIS database?
We share Protected Personal Information (PPI), Protected Health Information (PHI), and general information obtained during your intake, assessment, and enrollment in the program. This may include, without limitation, the following:

- Your name and your contact information
- Your social security number and date of birth
- Your basic demographic information such as gender, race and ethnicity
- Your history of homelessness and housing (including your current housing status, and where and when you have accessed services)
- Your medical history and disabling conditions, including mental and physical health concerns, substance abuse history, and HIV/AIDS status
- Your case notes and services
- Your income sources and amounts
- Your non-cash benefits
- Your veteran status, service history and discharge status
- Information about other members of your household

If you feel any of your rights outlined in this document have been violated, please contact (714) 589-2360.

Revised 11~~10~~/2024

- Your self-reported history of domestic violence
- Verification of history of homelessness and/or disabling conditions (including third-party verifications and/or self-attestations)
- Your photo (optional)

By signing this form, you understand the following:

- <u>You have the right to receive services even if you do not sign this consent form.</u> Providers may not refuse to provide you with services based on your refusal to sign this form.
- You have the right to receive a copy of this consent form for your records.
- Your consent permits your data <u>to</u> be ~~entered~~ <u>shared</u> in HMIS and allows ~~any~~ participating service providers/organizations to view your history of homelessness and service utilization.~~,~~ <u>Service providers/organizations can also</u> add to or update your information in HMIS without asking you to sign another consent form. <u>Your consent also permits your data to be included in data requests approved by the CoC Board for academic research purposes, analysis of the homeless system of care, or other purposes deemed appropriate by the Board.</u>

  Formatted: Font:

- This consent form expires seven (7) years after the signature or at any time you choose to revoke your consent. Please note, the Orange County CoC is required to retain all data stored in HMIS for seven (7) years after the data was created or last changed. However, <u>data</u> stored ~~data~~ <u>in HMIS</u> will ~~not~~ <u>no longer</u> be ~~further~~ shared <u>in HMIS or data requests</u> upon the expiration of your consent<u>, or if you revoke your consent</u>.
- You may revoke your consent to share your information with other HMIS participating service providers/organizations at any time. Your revocation must be provided either in writing or by completing the Revocation of Consent form. The service provider/organization you are receiving services from must make this form available to you if you ask<u>; it</u>~~, and~~ <u>should be readily available to you and conspicuously posted at all participating service provider/organization locations.</u>~~it should be out and available for you to take from the office or facility you receive services from~~. Upon receipt of your revocation, 211OC will ~~remove your PPI and PHI from the shared HMIS database and prevent further PPI and PHI from being added~~<u>ensure your record is no longer shared with service providers/organizations in the HMIS database</u>. However, the PPI and PHI that you previously authorized to be shared cannot be entirely removed from the HMIS database. This information, as described previously, will remain accessible to the service providers/organizations that provided you with direct services.
- <u>There are some situations where your data may be shared without consent.</u> Participating agencies are required to post a Privacy Notice at each location where intakes are completed. The Privacy Notice contains more detailed information about how your information may be used and disclosed<u>; it</u> ~~and~~ should be readily available to you and conspicuously posted at all participating service provider/organization locations. You have the right to receive a copy of this notice for your records.
- You have the right to request, in writing, the following pieces of information. This information is to be provided to you within five (5) business days of your request.
  - o A correction of inaccurate or incomplete PPI and/or PHI
  - o A copy of your consent form
  - o A copy of your HMIS record (~~agency staff must review this information with you if you request such a review so that you can fully understand the information presented to you and how it is used~~<u>visit the Client Record Request page https://ochmis.org/hmis-client-record-requests/ for more information about this process</u>)
- Aggregate or statistical data that is released from the HMIS database will not disclose any of your PPI or PHI
- You are not waiving any rights protected under Federal and/or California law.

SIGNATURE AND ACKNOWLEDGEMENT

Your signature indicates that you have read (or been read) this consent form, have received answers to your questions, and you freely consent to have your information, and that of your minor children (if applicable and/or if you choose to include them), entered into the HMIS database. You also consent to share your information with other participating organizations as described in this consent form.

Client Name:_____Date Of Birth (DOB):__/_____/_____

Signature:_____Date Signed:_____/_____/_____

If you feel any of your rights outlined in this document have been violated, please contact (714) 589-2360.

Revised 11~~10~~/2024

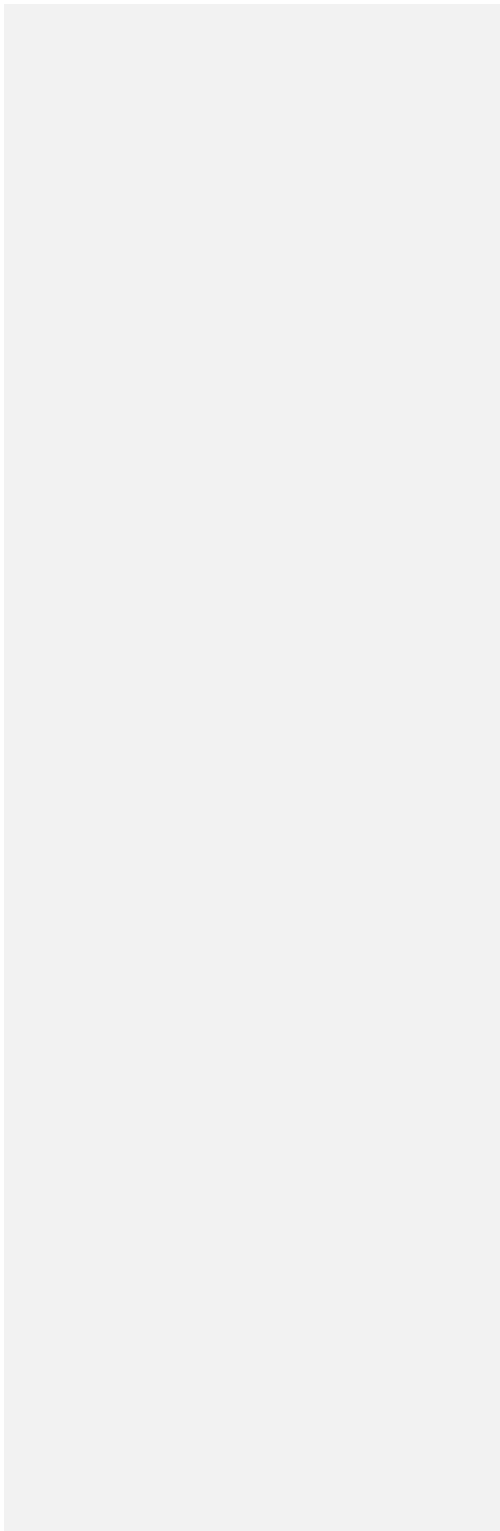**Minor Children (if applicable and/or if you choose to include them):**

Name:_____DOB:____/____/_____

Name:_____DOB:____/____/_____

Name:_____DOB:____/____/_____

Name:_____DOB:____/____/_____

Agency Staff Signature:

Agency Staff Name:_____Agency Staff Signature:_____

Agency Name:_____Date:____/____/_____

If you feel any of your rights outlined in this document have been violated, please contact (714) 589-2360.

Revised 11~~10~~/2024

Orange County Continuum of Care
Homeless Management Information System Participating Service Providers/Organizations

Please note that the list of service providers/organizations ~~contributing data to~~with access to HMIS can change frequently and without notice, and therefore the website should be consulted for the most recent list – http://ochmis.org/about-hmis/contributing-agencies/.

The following service providers/organizations are participating in the Homeless Management Information System (HMIS). These service providers/organizations have the ability to enter data into HMIS and/or ~~also~~ view the client's information previously entered by other HMIS participating service providers/organizations, including utilization of homeless services in Orange County.

1736 Family Crisis Center	
211OC	Health Care Agency – Behavioral Health Services
A Community of Friends	Health Care Agency OC Outreach & Engagement
Advanced Healthcare Administration	Healthcare In Action
American Family Housing	Helping HandUps
Anaheim Housing Authority	HIS-OC
APAIT	Hope Center of Orange County
Asian American Senior Citizens Service Center	Housing for Health Orange County
Be Well OC	Hub Resource Center
CalOptima	Illumination Foundation
Casa Teresa	Jamboree
Casa Youth Shelter	JMh – Anaheim Foundation
Celebrating Life Community Health Center	Last Is First Philanthropies
City Net	Leading Purpose
City of Brea	Lutheran Social Services of Southern California
City of Buena Park	Mariposa Women & Family Center
City of Costa Mesa	Mental Health Association
City of Dana Point	Mercy House
City of Fullerton	Moving Forward Psychological Institute, Inc.
City of Garden Grove	New Directions for Veterans
City of Huntington Beach	Nurturing Care LLC
City of Irvine	OC Rescue Mission
City of La Habra	Orange County Asian and Pacific Islander Community Alliance
City of Lake Forest	Orange County Housing Authority
City of Mission Viejo	Orange County United Way
City of San Clemente	People Assisting the Homeless (PATH)
City of San Juan Capistrano	Pathways of Hope
City of Stanton	Project Kinship
City of Westminster	Radiant Health Centers
Colette's Children's Home	Salvation Army
Community Action Partnership of Orange County	Santa Ana Housing Authority
County of Orange/Office of Care Coordination	Share Our Selves
Covenant House California	South County Outreach
Encompass Housing	Serving People In Need (SPIN)
Families Forward	StandUp for Kids
Families Together of Orange County	The Orangewood Foundation
Family Assistance Ministries	Thomas House
Family Health Matters - North Orange County Regional Health Foundation	US Veterans Initiative
	Volunteers of America Los Angeles (VOALA)
Family Promise of Orange County	Waymakers
Family Solutions Collaborative	We Care Los Alamitos
Friendship Shelter	WISEPlace
Grandma's House of Hope	

The following service providers/organizations have restricted access in HMIS. This means that the service providers/organizations are limited to only entering data into HMIS are not able to view client's history, files, project enrollments, etc.

Santa Ana Police Department

If you feel any of your rights outlined in this document have been violated, please contact (714) 589-2360.

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. For grievances related to care provided through the Coordinated Entry System, contact the Office of Care Coordination at CoordinatedEntry@ocgov.com. **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:
  Orange County United Way
  Attn: HMIS Department
  18012 Mitchell South
  Irvine, CA 92614

Your Name: _____   Date of Grievance: _____

Best Way to   ☐   Phone   ☐   Mailing Address
Contact You: ☐   Email   ☐   Case Manager/Advocate

Your Phone
Number: _____   Your Email Address: _____

Your Mailing
Address: _____

Case Manager/Advocate Contact Information (optional)

Name: _____   Email Address: _____

Phone Number: _____   Agency: _____

Grievance Information

_____   _____
Name of Individual who violated your privacy rights   Name of Agency who violated your privacy rights

Brief description of grievance (what happened):

```



```

Last Updated: 09/2023
11/2024

Formatted: Not Highlight
Formatted: Not Highlight

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

What violations are considered HMIS grievances?
Client should complete the HMIS Grievance Form if they feel their privacy and security regarding data stored in HMIS was violated, or if their HMIS rights were violated. Examples of violations could include the client's HMIS record being shared with someone who is not authorized to access their record, or a client being denied access to review their client record as outlined in the HMIS Policies and Procedures.

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 record. Review the HMIS Client Record Requests page (https://ochmis.org/hmis-client-record-requests/) for more information about this process.s, 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?

Last Updated: 09/2023
11/2024

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: 09/2023
11/2024

Last Revision: 01/2022

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

Privacy Notice

> **THIS PRIVACY NOTICE EXPLAINS UNDER WHAT CIRCUMSTANCES WE MAY SHARE AND DISCLOSE YOUR INFORMATION FROM THE OC HMIS. THIS NOTICE ALSO EXPLAINS YOUR RIGHTS REGARDING YOUR CONFIDENTIAL INFORMATION.**
>
> **PLEASE READ IT CAREFULLY.**

Our organization collects and shares information about individuals who access our services. The information is confidentially stored in a local electronic database called the Orange County Homeless Management Information System (OC HMIS). The OC HMIS securely records information (data) about persons accessing housing and homeless services in Orange County.

~~We ask for your permission to share~~C ~~c~~onfidential personal information that we collect about you and your family is~~. This confidential information is~~ referred to as Protected Personal Information (PPI). We are required to protect the privacy of your PPI by complying with the privacy practices described in this Privacy Notice.

Why We Collect and Share Information

The information we collect and share in the HMIS helps us to efficiently coordinate the most effective services for you and your family. It allows us to complete one universal intake per person; better understand homelessness in your community; and assess the types of resources needed in your local area.

By collecting your information for HMIS, we are <u>also</u> able to generate aggregate statistical reports requested by the Department of Housing and Urban Development (HUD).

The Type of Information We Collect and Share in the HMIS

We collect and share both PPI and general information obtained during your intake and assessment, which may include but is not limited to:

- Name and contact information
- Social security number
- Birthdate
- Demographic information such as gender and race/ethnicity
- History of homelessness and housing (including current housing status and where and when services have been accessed)
- Self-reported medical history including any mental health and substance abuse issues
- Case notes and services

Last Revision: 01/2022

- Case manager's contact information
- Income sources and amounts; and non-cash benefits
- Veteran status
- Disability status
- Household composition
- Emergency contact information
- Domestic violence history
- Photo (optional)

How Your Personal Information Is Protected in the HMIS

Your information is protected by passwords and encryption technology. Each HMIS user and participating organization must sign an agreement to maintain the security and privacy of your information. Each HMIS user or participating organization that violates the agreement may have access rights terminated and may be subject to further penalties.

How PPI May Be Shared and Disclosed

Unless restricted by other laws, the information we collect can be shared and disclosed without your consent under the following circumstances:

- To provide or coordinate services.
- For payment or reimbursement of services for the participating organization.
- For administrative purposes, including but not limited to HMIS system administrator(s) and developer(s), and for legal, audit personnel, and oversight and management functions.
- For creating de-identified PPI.
- When required by law or for law enforcement purposes.
- To prevent a serious threat to health or safety.
- As authorized by law, for victims of abuse, neglect, or domestic violence.
- For academic research purposes.
- In a situation where you have ~~properly~~ requested access to your HMIS records through the Client Record Request process, and an agency will be providing you ~~such access~~ with those records~~, your PPI data will be provided to such agency.~~
- Other uses and disclosures of your PPI can be made with your written consent.

> **Formatted:** Font color: Auto
>
> **Formatted:** Font: (Default) +Body (Calibri)
>
> **Formatted:** Header, Line spacing: At least 11.55 pt, No widow/orphan control, Don't adjust space between Latin and Asian text, Don't adjust space between Asian text and numbers, Pattern: Clear

Providing Your Consent for Sharing PPI in the HMIS

Generally, ~~If you choose~~ to share your PPI in the OC HMIS, we must have your written consent.
Exception:
- In a situation where we are gathering PPI from you during a phone screening, street outreach, or community access center sign-in, your verbal consent can be used to share your information in HMIS. If we obtain your verbal consent, you will be requested to provide written consent during your initial assessment. If you do not appear for your initial assessment, your information

will remain in HMIS until you revoke your consent in writing.
- ~~In a situation where you have properly requested access to your HMIS records and an agency will be providing you such access, your PPI data will be provided to such agency.~~

You have the right to receive services even if you do not consent to share your PPI in the OC HMIS.

How to Revoke Your Consent for Sharing Information in the HMIS

You may revoke your consent at any time. Your revocation must be provided either in writing or by completing the *Revocation of Consent* form. Upon receipt of your revocation, we will remove your PPI from the shared HMIS database and prevent further PPI from being added. The PPI that you previously authorized to be shared cannot be entirely removed from the HMIS database and will remain accessible to the limited number of organization(s) that provided you with direct services.

Your Rights to Your Information in the HMIS

You have the right to receive the following, no later than five (5) business days of your written request:

- A correction of inaccurate or incomplete PPI;
- A copy of your consent form;
- A copy of the OC HMIS Privacy Notice;
- A copy of your HMIS records; and
- A current list of participating organizations that have access to your HMIS data.

You can exercise these rights by making a written request to this organization.

Your Privacy Rights Regarding Your Information in the HMIS

If you believe your privacy rights have been violated, you may send a written grievance to this organization. You will not be retaliated against for filing a grievance.

If your grievance is not resolved to your satisfaction, you may send a written grievance appeal to the HMIS ~~System Administrator~~Lead, Orange County United Way.~~211 Orange County (211OC)~~.

Amendments to this Privacy Notice

The policies in this notice may be amended at any time. These amendments may affect information obtained by this organization before the date of the change. Amendments regarding use or disclosure of PPI will apply to information (data) previously entered in HMIS, unless otherwise stated. All amendments to this privacy notice must be consistent with the requirements of the federal HMIS privacy standards. This organization must keep permanent documentation of all privacy notice amendments.