COUNTY OF ORANGE
OFFICE OF CARE COORDINATION

Policies, Procedures and Standards (PPS) Committee Meeting
October 13, 2026

Welcome and Introductions

Nishtha Mohendra, Chair

Public Comments

Consent Calendar

Consent Calendar

Recommended Action

1. Approve the PPS Committee Meeting Minutes from July 14, 2026.

Business Calendar

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

Background

- The HMIS Lead convenes a working group on an annual basis at the direction of the CoC Board to review and update the HMIS Policies and Procedures and related documents

- The HMIS Working Group met 6 times from May through August to provide feedback on the HMIS Policies and Procedures, privacy and security forms, and the Data Quality Plan

- Proposed revisions were shared with the Lived Experience Advisory Committee on September 2nd, and a community feedback period was held from September 1st through September 18th

- The revisions presented today were approved by the Lived Experience Advisory Committee on October 7th

P & P: Help Desk

- New: HMIS Help Desk with provide weekly updates for tickets that take longer than 3 days to resolve

- New: Any client-identifying data sent to the HMIS Help Desk from a Participating Agency will be considered a data breach, and will be handled according to the policies in that section

P & P: Agency Administrator Requirements

- New: HMIS Lead should be notified of users that no longer need access to HMIS within 2 business days.
- New: Project set-up changes must be reported to the HMIS Lead within 5 business days.
- New: Project closures must be reported to the HMIS Lead within 15 business days of closure. Also, projects should be closed when they are not providing services for over 30 days.
- New: Agency Administrators must be employed by the Participating Agency, and cannot be a volunteer.

P & P: Privacy

- New: HMIS passwords should not be autosaved on any device, and if a password needs to be stored, a password manager should be used.

- Clarification: Users that transition from one Participating Agency to another may have their HMIS account reactivated without requiring additional training if the user has logged into their account within the last 60 days, and the user will maintain the same level of access to HMIS.

- New: Participating Agencies may send the Client Consent to Share Protected Personal Information Form electronically via applications such as DocuSign.

P & P: Privacy

- Clarification: Participating Agencies must explain that signing the Client Consent to Share Protected Personal Information form means that the client's record will be shared with other HMIS Participating Agencies for care coordination, and that the client's data may be shared in data requests approved by the CoC Board for analytical use or academic research purposes.

- Clarification: Note Regarding Collection of Personal Information must be available in all areas where staff are collecting data from clients to be entered into HMIS. Outreach teams should have paper or virtual copies to share with clients.

P & P: Client Record Requests

- New: Allows clients to request their record directly from the HMIS Lead.
- Clarification: Provides guidance on how to verify a client's identity in person or virtually.
- Clarification: Provides guidance on how client records can be shared with clients.
- New: Documentation that the client provided or signed can now be included in Client Record Requests.

P & P: Client Record Requests

- Clarification: Client Record Request Form Documentation will be included with the client's record to provide details about information included in the record.

- New: If an agency chooses to provide case notes, Participating Agencies must redact identifying third party information, like staff or agency names, names of other clients, or shelter bed numbers before providing to the client.

P & P: Data Release

- Clarification: Service Providers with access to Coordinated Entry data are not permitted to publish any Coordinated Entry data without approval of the CoC Board as outlined in the Data Request Matrix.

- Clarification: The CES Lead and CES Administrators are required to adhere to policies outlined in the HMIS Policies and Procedures regarding Data Release.

- New: Data requests must include a local stakeholder within the CoC that will be responsible for sharing the results of the request, and implementing changes within the CoC as appropriate.

- New: Exploratory data requests must include HMIS data as the primary focus of the analysis. Using HMIS data anecdotally in larger analyses will not be permitted.

P & P: Data Breach

- New: Participating Agencies will make at least 3 attempts over 2 weeks to notify clients impacted by data breaches using telephone, secure email, and mail.

- New: Establishes corrective actions for data breaches.

Other Revisions

- Data Quality Plan
  - Clarification: Added guidance for understanding the different data quality components.
  - Clarification: Added guidance for reviewing data accuracy, and reducing missing data.
  - New: Added a sample data quality plan to help Participating Agencies develop their own plans.

- Note Regarding Collection of Personal Information
  - Clarification: Simplified language

- Participating Agency Agreement
  - Clarification: Added additional language regarding client consent and user access
  - Clarification: Client data can still be entered into HMIS if the client doesn't give consent to share data
  - New: Removed HMIS Lead signature

Next Steps

- CoC Board approval on October 28th (pending PPS approval)

- Notify HMIS Participating Agencies of updates at the HMIS User Meeting (pending CoC Board approval)

- Implement new processes included in the HMIS Policies and Procedures

Business Calendar – Item #1

Recommended Action

a. Approve the recommended revisions to the HMIS Policies and Procedures, inclusive of changes to the HMIS Data Quality Plan, Notice Regarding Collection of Personal Information, and Participating Agency Agreement, as recommended by the Lived Experience Advisory Committee and HMIS Policies and Procedures Working Group, for review and approval by the CoC Board.

CoC Strategic Plan: CoC Board Evaluation Framework

Tim Shaw, Strategy Owner and CoC Board Member

ORANGE COUNTY CONTINUUM OF CARE

CoC Board Evaluation Framework

Stakeholder Review & Input

Ad Hoc Committee on Board and CA/AE Evaluation Processes · June 2026

DRAFT FOR STAKEHOLDER INPUT — Not a Final Policy Document

Your feedback on this outline will shape the full draft before Board consideration.

What We'll Cover Today

1. **Why is this needed?**
   The case for a formal Board evaluation process
2. **How we got here**
   The process to develop the framework outline
3. **What the framework covers**
   Purpose, guiding principles, and regulatory grounding
4. **Scope of evaluation**
   Six domains
5. **The two-track structure**
   Biennial self-evaluation + quadrennial independent review
6. **How it works**
   Methodology, roles, calendar, and public accountability
7. **Your input**
   Open questions for discussion

Why a Formal Board Evaluation Process?

The Gap

- No formal Board evaluation process has ever been codified
- System complexity and responsibility have grown significantly
- State dollars, PHAs, ad hoc responsibilities added over time
- With 34 cities and no dominant municipal center, the CoC Board is best positioned to provide regional accountability
- Without a credible self-evaluation process, the Board can’t credibly claim that accountability role

What a Framework Enables

- Structured, regular self-reflection and continuous improvement
- Clarified roles between the Board and Collaborative Applicant
- Strengthened stakeholder trust and public credibility
- Alignment with HUD requirements and governance best practices
- A basis for the Board to hold itself accountable and model accountability for the system
- Durable framework to reflect on impact – Are we doing what we set out to do?
- Ability for the Board to hold a future focus

How We Got Here

The process to develop this framework outline

Jan 2026	Jan–Apr	Apr–Jun	Now	Jul 2026	Fall 2026
Board Action CoC Board approved ad hoc committee formation as Year 1 strategic priority	**Foundations** Project plan and engagement plan finalized; best practices research completed	**Framework Drafting** Committee developed this outline drawing on HUD guidance and other models	**Stakeholder Input** Outline shared with LEAC, YAB, OCC, Service Provider Forum, HOC, and other stakeholders for input	**Full Draft** Committee incorporates feedback and develops full policy and process framework	**Formal Approval** LEAC and Policies, Procedures & Standards Committee review; CoC Board final adoption

What the Framework Is Built On

Regulatory requirements + governance best practices

HUD Regulatory Baseline

- 24 CFR § 578.7 — CoC responsibilities (operate CoC, evaluate outcomes, monitor subrecipients)
- 24 CFR § 578.5(b) — Board establishment requirement
- 24 CFR § 578.9 — Conflict of interest
- HEARTH Act, 42 U.S.C. 11381–11389
- HUD CPD Exhibit 29-2 — CA evaluation reference

OC CoC Governance Charter

- Section V.B.1 — Board responsibilities
- Section IV.A — Operating the CoC
- Section IV.C — PPS Committee review and approval process
- Section V.B.2 — Board composition (incl. lived experience)
- Charter amendments will be recommended where needed

Governance Best Practices

- BoardSource — Board Self-Assessment tool, Recommended Governance Practices
- CSBA — Board Self-Evaluation framework, annual self-evaluation guidance
- National Council of Nonprofits — board accountability standards

HUD compliance is the floor. The framework aspires to governance excellence beyond minimum requirements.

Guiding Principles

Governance Ownership

The Board retains responsibility for establishing, administering, and acting on evaluation.

Transparency & Credibility

Processes and results documented and communicated to strengthen stakeholder confidence in Board governance.

Fairness & Constructiveness

Promote clarity, shared expectations, and continuous improvement. Not punitive or performative.

Accountability Without Paralysis

Findings translated into action.

Lived Experience Integration

Perspectives of people with lived experience are incorporated into evaluation design.

HUD Compliance as a Start

Framework meets all applicable HUD requirements while aspiring to excellence beyond compliance.

Scalability & Sustainability

Processes are manageable and repeatable, balancing administrative burden with meaningful rigor.

Scope: Six Evaluation Domains

The Board is evaluated as a collective governing body, not as individual members

1 Governance Foundations & Role Clarity

- Board vs. CA/AE role separation
- Charter compliance (composition, quorum, meetings, COI)
- Member orientation & education
- Policy currency and adherence

2 Strategic Direction & Systems Leadership

- Strategic plan development & oversight
- Goals for reducing/ending homelessness; HUD SPMs
- Alignment of funding/policy with priorities
- Regional coordination across 34 cities. County, Commission to Address Homelessness

3 Oversight & Accountability

- CA/AE performance and MOU compliance
- CoC program performance (APRs, NOFO results)
- HMIS and CES oversight and performance
- Fiscal stewardship on Board-led responsibilities; response to deficiencies

4 Community Representation & Member Engagement

- HEARTH Act rep. requirements incl. lived experience
- Ensuring spaces for diverse perspectives
- Communication of decisions to CoC membership
- Responsiveness to LEAC, YAB, Service Provider Forum
- Engagement with cities, County, PHAs

5 Board Operations & Culture

- CA/AE partnership depth & quality
- Meeting management, agenda quality, materials
- Member preparation & participation; public comment
- Board culture, decision-making, succession planning

6 Continuous Improvement

- Track record on prior evaluation findings
- Development & execution of Improvement Plans
- Periodic review/update of governance policies & Charter

What's Outside the Scope

NOT IN SCOPE:

CA/AE Performance

Covered under a separate framework (Deliverable 2 of the project). The CA/AE evaluation process will be developed after the Board framework is complete.

NOT IN SCOPE:

Individual Board Member Performance

The framework evaluates the Board as a collective body. Individual director evaluation is not included.

The committee may recommend voluntary individual member self-reflection tools as a complement.

NOT IN SCOPE:

HMIS & CES System Evaluation

Addressed separately. The ad hoc committee will recommend alignment and engagement with HMIS and CES evaluation processes as a later deliverable.

Two-Track Evaluation Structure

Together these tracks provide ongoing accountability and periodic external validation

TRACK 1

Biennial Self-Evaluation

Frequency:	Every 2 years — Q1 (avoids PiT timing)
Who evaluates:	Board members complete structured questionnaire; results aggregated, not attributed
Instrument:	Rating scale + open-ended questions; covers all 6 domains
Stakeholder input:	Member survey, LEAC/YAB input, CA/AE input — advisory and informational; does not constitute a separate evaluation
Output:	Findings report + written Board Improvement Plan, formally adopted
Public accountability:	Summary findings and Improvement Plan shared publicly with CoC membership

TRACK 2

Quadrennial Independent Review

Frequency:	Every 4 years — aligned with strategic planning cycle (avoids PiT years)
Who evaluates:	Independent outside evaluator, competitively selected; no conflicts with OC CoC operations
Scope:	All 6 domains + review of self-eval findings, peer benchmarking, document review, stakeholder interviews
Stakeholder input:	Structured interviews with Board, member agencies, LEAC/YAB, CA/AE leadership, other partners
Output:	Written evaluator report to Board; formal Board response and comprehensive Improvement Plan
Public accountability:	Full evaluator report and Board's written response posted publicly on CoC website

Roles & Responsibilities

Role / Entity	Biennial Self-Evaluation	Quadrennial Independent Evaluation
CoC Board	Completes self-evaluation instrument; reviews findings; adopts Board Improvement Plan	Participates in evaluator interviews; formally responds to report; adopts comprehensive Improvement Plan
Board Chair (or designated officer)	Oversees administration; presents findings to Board; leads Improvement Plan development	Serves as primary Board contact for evaluator; presents report to full Board
PPS Committee	Reviews instrument biennially for currency; receives Improvement Plan progress reports	Oversees RFP and evaluator selection; receives final report
CA/AE Staff	Administers survey; compiles and formats results; provides logistical support; provides advisory input	Provides document access and administrative support; does not direct or review findings; provides advisory input
CoC Stakeholders (LEAC, members, partners)	Provide advisory input via member survey and LEAC input process	Engage in design of surveys and participate in structured stakeholder interviews
Independent Evaluator	N/A	Conducts evaluation; delivers findings and recommendations to Board

Public Accountability & Transparency

The Board's accountability is owed to the CoC membership and the public

Made Public

- Summary of biennial self-evaluation findings (not individual responses)
- Adopted Board Improvement Plan
- Improvement Plan progress reports
- Full independent evaluator report (quadrennial) including Board's formal written response
- All posted on OC CoC website and shared with CoC member agencies

Protected / Confidential

- Individual Board member responses anonymized; aggregate results only
- Board deliberation on findings in closed session
- Board's discussion notes from evaluation session
- Evaluator's interim drafts and working materials (triennial)

Note on Brown Act / public meeting compliance: The Board will ensure its processes are consistent with applicable open meeting requirements. CSBA guidance on board self-evaluation and the Brown Act is a useful reference.

Building the Accountability the System Needs

Ad Hoc Committee on Board and CA/AE Evaluation Processes
Orange County Continuum of Care Board · 2026

Next step

Committee incorporates stakeholder feedback and develops full policy and process framework draft — July 2026

Then

LEAC and PPS Committee formal review; CoC Board consideration and adoption

This is your CoC

Your input at this stage shapes what gets built. Thank you for engaging!

CoC Strategic Plan:
CoC Public Engagement and Advocacy Policy

Becks Heyhoe-Khalil, Strategy Owner and CoC Board Member; Nichole Gideon, Strategy Owner; and Alejandro Santiago, Manager, Community Engagement, United to End Homelessness, Orange County United Way

Next Meeting:

November 10, 2026, from 3:30 p.m. – 5:00 p.m., at CAS Multipurpose Rooms 103/105, located at 601 N. Ross St., Santa Ana, CA 92701

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