

## Before Starting the CoC Application

The CoC Consolidated Application is made up of two parts: the CoC Application and the CoC Priority Listing, with all of the CoC's project applications either approved and ranked, or rejected. The Collaborative Applicant is responsible for submitting both the CoC Application and the CoC Priority Listing in order for the CoC Consolidated Application to be considered complete.

The Collaborative Applicant is responsible for:

1. Reviewing the FY 2017 CoC Program Competition NOFA in its entirety for specific application and program requirements.
2. Ensuring all questions are answered completely.
3. Reviewing the FY 2017 CoC Consolidated Application Detailed Instructions, which gives additional information for each question.
4. Ensuring all imported responses in the application are fully reviewed and updated as needed.
5. The Collaborative Applicant must review and utilize responses provided by project applicants in their Project Applications.
6. Some questions require the Collaborative Applicant to attach documentation to receive credit for the question. This will be identified in the question.

- Note: For some questions, HUD has provided documents to assist Collaborative Applicants in filling out responses. These are noted in the application.

- All questions marked with an asterisk (\*) are mandatory and must be completed in order to submit the CoC Application.

For CoC Application Detailed Instructions [click here](#).

## **1A. Continuum of Care (CoC) Identification**

### **Instructions:**

For guidance on completing this application, please reference the FY 2017 CoC Application Detailed Instructions and the FY 2017 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

**1A-1. CoC Name and Number:** CA-601 - San Diego City and County CoC

**1A-2. Collaborative Applicant Name:** Regional Task Force on the Homeless

**1A-3. CoC Designation:** CA

**1A-4. HMIS Lead:** Regional Task Force on the Homeless

## 1B. Continuum of Care (CoC) Engagement

### Instructions:

For guidance on completing this application, please reference the FY 2017 CoC Application Detailed Instructions and the FY 2017 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

**1B-1. From the list below, select those organization(s) and/or person(s) that participate in CoC meetings. Using the drop-down boxes, indicate if the organization(s) and/or person(s): (1) participate in CoC meetings; and (2) vote, including selection of CoC Board members. Responses should be for the period from 5/1/16 to 4/30/17.**

Organization/Person Categories	Participates in CoC Meetings	Votes, including electing CoC Board Members
Local Government Staff/Officials	Yes	Yes
CDBG/HOME/ESG Entitlement Jurisdiction	Yes	Yes
Law Enforcement	Yes	Yes
Local Jail(s)	Yes	No
Hospital(s)	Yes	Yes
EMT/Crisis Response Team(s)	Yes	No
Mental Health Service Organizations	Yes	Yes
Substance Abuse Service Organizations	Yes	Yes
Affordable Housing Developer(s)	Yes	Yes
Disability Service Organizations	Yes	Yes
Disability Advocates	Yes	No
Public Housing Authorities	Yes	Yes
CoC Funded Youth Homeless Organizations	Yes	Yes
Non-CoC Funded Youth Homeless Organizations	Yes	Yes
Youth Advocates	Yes	Yes
School Administrators/Homeless Liaisons	Yes	Yes
CoC Funded Victim Service Providers	Yes	Yes
Non-CoC Funded Victim Service Providers	Yes	No
Domestic Violence Advocates	Yes	Yes
Street Outreach Team(s)	Yes	No
Lesbian, Gay, Bisexual, Transgender (LGBT) Advocates	Yes	Yes
LGBT Service Organizations	Yes	Yes
Agencies that serve survivors of human trafficking	Yes	Yes
Other homeless subpopulation advocates	Yes	Yes
Homeless or Formerly Homeless Persons	Yes	Yes
Other:(limit 50 characters)		

Business	Yes	Yes
Philanthropy	Yes	Yes
Higher Education	Yes	Yes

**Applicant must select Yes, No or Not Applicable for all of the listed organization/person categories in 1B-1.**

**1B-1a. Describe the specific strategy(s) the CoC uses to solicit and consider opinions from organizations and/or persons that have an interest in preventing or ending homelessness.  
(limit 1000 characters)**

The RTFH Board composed of a wide range of persons and entities, augmented by 5 advisory boards, 8 subgroups, and a full membership group invites participation from anyone interested in ending homelessness. Invested partners, such as liaisons from behavioral and mental health and law enforcement teams give insight for outreach to high- risk persons; outreach to persons with human trafficking or lived homelessness experience ensure representatives hold Board and committee seats. Unaccompanied Youth Task Force and advocates for LGBTQ youth provide input for planning and coordination of services for their respective populations. Law enforcement, probation and the Re-Entry Roundtable contribute knowledge on justice-involved persons and systems. A Homeless newsletter editor regularly attends to give input. Meetings follow the Brown Act and meeting dates, agendas, and open invitation for citizen input are publicly posted in advance. Public input is invited at the beginning of each meeting.

**1B-2. Describe the CoC's open invitation process for soliciting new members, including any special outreach.  
(limit 1000 characters)**

The RTFH uses multiple efforts to regularly invite interested individuals and organizations to become active members in the CoC. Using monthly notices via public website postings, email distribution and outreach to potentially under-represented constituents, and to CBOs serving homeless and at-risk persons, the RTFH encourages a wide array of stakeholders. Vibrant connections to other networks, such as the Alliance for Regional Solutions, Network of Care, the Unaccompanied Youth Task Force, the Churches Against Human Trafficking, as well as print media (Homelessness News or Voice of San Diego) provide information about the RTFH and how to participate. Formal invitations to join the RTFH are noticed each Fall and Spring.

**1B-3. Describe how the CoC notified the public that it will accept and consider proposals from organizations that have not previously received CoC Program funding in the FY 2017 CoC Program Competition, even if the CoC is not applying for new projects in FY 2017. The response must include the date(s) the CoC made publicly knowing they were open to proposals.  
(limit 1000 characters)**

The CoC open solicitation process uses a public website and e-mail to 200 stakeholders on the HIC including non-HUD funded agencies and developers, and announcements in community forums to invite any eligible entity to participate in the CoC Competition. A public request for Intent to Submit is released about 30 days in advance of NOFA. Technical assistance and resources are provided to each potential applicant who responds to the intent. This allows new entities to prepare for formal application. Public notices of funding and information and training sessions are offered to public through the RTFH and stakeholder websites. All projects compete for inclusion in the application based on eligibility, organizational capacity, assessment using standardized scoring tool, established CoC housing and population priorities, subregional need for project, contribution to the CoC system and alignment with Board directives. Three new potential applicants responded with intents in 2017

## 1C. Continuum of Care (CoC) Coordination

### Instructions:

For guidance on completing this application, please reference the FY 2017 CoC Application Detailed Instructions and the FY 2017 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

**1C-1. Using the chart below, identify the Federal, State, Local, Private and Other organizations that serve homeless individuals, families, unaccompanied youth, persons who are fleeing domestic violence, or those at risk of homelessness that are included in the CoCs coordination; planning and operation of projects.  
Only select "Not Applicable" if the funding source(s) do not exist in the CoC's geographic area.**

Entities or Organizations the CoC coordinates planning and operation of projects	Coordinates with Planning and Operation of Projects
Housing Opportunities for Persons with AIDS (HOPWA)	Yes
Temporary Assistance for Needy Families (TANF)	Yes
Runaway and Homeless Youth (RHY)	Yes
Head Start Program	No
Housing and service programs funded through Department of Justice (DOJ) resources	No
Housing and service programs funded through Health and Human Services (HHS) resources	Yes
Housing and service programs funded through other Federal resources	Yes
Housing and service programs funded through state government resources	Yes
Housing and service programs funded through local government resources	Yes
Housing and service programs funded through private entities, including foundations	Yes
Other:(limit 50 characters)	

**1C-2. Describe how the CoC actively consults with Emergency Solutions Grant (ESG) recipient's in the planning and allocation of ESG funds. Include in the response: (1) the interactions that occur between the CoC and the ESG Recipients in the planning and allocation of funds; (2) the CoCs participation in the local Consolidated Plan jurisdiction(s) process by providing Point-in-Time (PIT) and Housing Inventory Count (HIC) data to the Consolidated Plan jurisdictions; and (3) how the CoC ensures local homelessness information is clearly communicated and addressed in Consolidated Plan updates.  
(limit 1000 characters)**

The RTFH consults with 4 local ESG areas and functions as an administrative entity for a 5th area, the State ESG(CA-ESG) for decision- making processes. HIC, PIT, and unmet need data and trend information is provided each local

ESG and CDBG entitlement areas. An Evaluation Committee and ESG subcommittee, the ESG Administrative Entity (AE) foster ESG coordination and evaluation, including a process that reviews and approves letters of support for funding. ESG representatives meet monthly as Board members. RTFH and ESG entitlements coordinate at least annually. County HCDS is the official AE. These efforts created a ESG manual including cross-jurisdictional policies, standards, and information that is shared across jurisdictions. An AE committee reviews, scores, and recommends project funding to CA-ESG. CAPER reports are evaluated annually. RTFH members and ESG reps attend RTFH, Consolidated Plan advisory sessions in community planning meetings. Over a dozen contacts occur annually.

**1C-3. CoCs must demonstrate the local efforts to address the unique needs of persons, and their families, fleeing domestic violence that includes access to housing and services that prioritizes safety and confidentiality of program participants.  
(limit 1000 characters)**

CES allows entry via any convenient point. CoC & ESG agencies offer both housing and DV services which fosters a rapid move to safety. DV and sexual violence screening is part of Common Assessment (CA) and acts when DV risk is detected. A Domestic Violence Council (DVC) ensures CA procedures are client- driven, trauma-informed, and culturally-relevant. Protocols address physical and emotional safety, privacy, confidentiality, transportation to safety. CoC adheres to laws protecting victims. Unique identifiers, strict data sharing protocols allow coordination of DV services, emergency, and public resources. Lethality assessment helps clients select among housing options. Safety plans, secured housing, transportation, health care, legal aid, DoJ, Justice Center, and DA alerts when abusers are released help ensure safety. Free cell phone in-home training, finances planning, and distance learning help clients bridge from home to the community. CoC, PHA, HHSA, DOJ join to address DV needs

**1C-3a. CoCs must describe the following: (1) how regular training is provided to CoC providers and operators of coordinated entry processes that addresses best practices in serving survivors of domestic violence; (2) how the CoC uses statistics and other available data about domestic violence, including aggregate data from comparable databases, as appropriate, to assess the scope of community needs related to domestic violence and homelessness; and (3) the CoC safety and planning protocols and how they are included in the coordinated assessment.  
(limit 1,000 characters)**

CRFTH offers regular CES on-line training and support. RTFH, DVC develop trainings on the complexity of DV, privacy, confidentiality, emergency response, and safety planning. Data from HMIS, CES, DV response teams, shelter, hospitals and support services are brought together to build comprehensive understanding of DV / HT in the region. Questions focused on DV assessment expand CAT tools. DV service providers contribute data to the RTFH for inclusion in reports and planning effort. The CES Policies address DV assessment and record keeping. Local prevalence data, HIC, and hospital input help inform the CoC needs assessment and CES policies for DV housing and services. . NIJ-funded research is helping to frame and create responses to sex

/ labor trafficking

**1C-4. Using the chart provided, for each of the Public Housing Agency's (PHA) in the CoC's geographic area: (1) identify the percentage of new admissions to the Public Housing or Housing Choice Voucher (HCV) Programs in the PHA's that were homeless at the time of admission; and (2) indicate whether the PHA has a homeless admission preference in its Public Housing and/or HCV program.**

**Attachment Required: If the CoC selected, "Yes-Public Housing", "Yes-HCV" or "Yes-Both", attach an excerpt from the PHA(s) written policies or a letter from the PHA(s) that addresses homeless preference.**

Public Housing Agency Name	% New Admissions into Public Housing and Housing Choice Voucher Program during FY 2016 who were homeless at entry	PHA has General or Limited Homeless Preference
San Diego Housing Commission	50.13%	Yes-Both
County of San Diego Housing & Community Development	42.00%	Yes-HCV
Oceanside	12.20%	Yes-HCV
City of Carlsbad Housing & Neighborhood Services	17.00%	Yes-HCV
Housing Authority of the City of National City	0.00%	No

**If you select "Yes--Public Housing," "Yes--HCV," or "Yes--Both" for "PHA has general or limited homeless preference," you must attach documentation of the preference from the PHA in order to receive credit.**

**1C-4a. For each PHA where there is not a homeless admission preference in their written policies, identify the steps the CoC has taken to encourage the PHA to adopt such a policy. (limit 1000 characters)**

There is currently no homeless preference in the Housing Authority of the City of National City (HANC) policies. HANC hosts a small homeless population in comparison with other jurisdictions. The CoC has not inspired the HANC- PHA to adopt a specific homeless policy. To access vouchers, however, there is a Cooperative Agreement among PHA's that honors the waiting list placement from the jurisdiction where the application was initially recorded. This means people retain their place on waiting lists across jurisdictions. All other PHAs where over 90% of homelessness occurs have and use homeless preferences.

**1C-5. Describe the actions the CoC has taken to: (1) address the needs of Lesbian, Gay, Bisexual, Transgender (LGBT) individuals and their families experiencing homelessness, (2) conduct regular CoC-wide training with providers on how to effectively implement the Equal Access to Housing in HUD Programs Regardless of Sexual Orientation or Gender Identity, including Gender Identify Equal Access to Housing, Fina Rule; and (3) implementation of an anti-discrimination policy. (limit 1000 characters)**



The CoC does not discriminate with regards to housing or services on the basis of any protected classification, including gender-based ones, per existing fair housing laws and regulations such as 77 FR 5662 ("Equal Access Rule") & PIH Notice #2014-20. The CoC does not have a formal separate policy regarding this issue as it is universally incorporated into all agreements associated with federal funding and providers commit to implementing all program services in accordance with those. Providers have internal P&Ps pursuant to equitable delivery of services regardless of sexual orientation. Representatives from the local service provider regionally known for serving the LGBTQ population are active participants in CoC governance. Furthermore, within the past year, the CoC did provide a community training addressing gender-based fair housing requirements and provided participants with an assessment tool to assist them in determining their alignment with these requirements.

**1C-6. Criminalization: Select the specific strategies implemented by the CoC to prevent the criminalization of homelessness in the CoC's geographic area. Select all that apply.**

Engaged/educated local policymakers:	<input checked="checked" type="checkbox"/>
Engaged/educated law enforcement:	<input checked="checked" type="checkbox"/>
Engaged/educated local business leaders	<input checked="checked" type="checkbox"/>
Implemented communitywide plans:	<input type="checkbox"/>
No strategies have been implemented	<input type="checkbox"/>
Other:(limit 50 characters)	
	<input type="checkbox"/>
	<input type="checkbox"/>
	<input type="checkbox"/>

## 1D. Continuum of Care (CoC) Discharge Planning

### Instructions:

For guidance on completing this application, please reference the FY 2017 CoC Application Detailed Instructions and the FY 2017 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

**1D-1. Discharge Planning-State and Local: Select from the list provided, the systems of care the CoC coordinates with and assists in state and local discharge planning efforts to ensure those who are discharged from that system of care are not released directly to the streets, emergency shelters, or other homeless assistance programs. Check all that apply.**

Foster Care:	<input checked="" type="checkbox"/>
Health Care:	<input checked="" type="checkbox"/>
Mental Health Care:	<input checked="" type="checkbox"/>
Correctional Facilities:	<input checked="" type="checkbox"/>
None:	<input type="checkbox"/>

**1D-1a. If the applicant did not check all the boxes in 1D-1, provide: (1) an explanation of the reason(s) the CoC does not have a discharge policy in place for the system of care; and (2) provide the actions the CoC is taking or plans to take to coordinate with or assist the State and local discharge planning efforts to ensure persons are not discharged to the street, emergency shelters, or other homeless assistance programs. (limit 1000 characters)**

**1D-2. Discharge Planning: Select the system(s) of care within the CoC's geographic area the CoC actively coordinates with to ensure persons who have resided in any of the institutions listed below longer than 90 days are not discharged directly to the streets, emergency shelters, or other homeless assistance programs. Check all that apply.**

Foster Care:	<input checked="" type="checkbox"/>
Health Care:	<input checked="" type="checkbox"/>

<b>Mental Health Care:</b>	<input checked="checked" type="checkbox"/>
<b>Correctional Facilities:</b>	<input checked="checked" type="checkbox"/>
<b>None:</b>	<input type="checkbox"/>

## 1E. Continuum of Care (CoC) Project Review, Ranking, and Selection

### Instructions

For guidance on completing this application, please reference the FY 2017 CoC Application Detailed Instructions and the FY 2017 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

**1E-1. Using the drop-down menu, select the appropriate response(s) that demonstrate the process the CoC used to rank and select project applications in the FY 2017 CoC Program Competition which included (1) the use of objective criteria; (2) at least one factor related to achieving positive housing outcomes; and (3) included a specific method for evaluating projects submitted by victim service providers.**

**Attachment Required: Public posting of documentation that supports the process the CoC used to rank and select project application.**

Used Objective Criteria for Review, Rating, Ranking and Section	Yes
Included at least one factor related to achieving positive housing outcomes	Yes
Included a specific method for evaluating projects submitted by victim service providers	Yes

### 1E-2. Severity of Needs and Vulnerabilities

**CoCs must provide the extent the CoC considered the severity of needs and vulnerabilities experienced by program participants in their project ranking and selection process. Describe: (1) the specific vulnerabilities the CoC considered; and (2) how the CoC takes these vulnerabilities into account during the ranking and selection process. (See the CoC Application Detailed Instructions for examples of severity of needs and vulnerabilities.)  
(limit 1000 characters)**

(1) The specific vulnerabilities the CoC considered were: chronically homeless veterans and non-veterans, persons with multiple disabilities including mental illness and/or substance abuse, persons fleeing DV, and youth, including TAY and unaccompanied minors.

(2) Depending on the type of project (TH, PSH, RRH), the scoring tool assigned a higher point value to populations that evidence-based practice indicates are best served by that housing type. For example, TH projects that served a higher percentage of youth, DV victims, and/or substance abusers earned a higher score than those TH that did not. All projects received increased points for having a higher percentage of their beds/units allocated to chronically homeless persons. Projects that serve the greatest number of the highest need/most vulnerable populations with good outcomes generally receive the highest scores.

**1E-3. Using the following checklist, select: (1) how the CoC made publicly available to potential project applicants an objective ranking and selection process that was used for all project (new and renewal) at least 2 days before the application submission deadline; and (2) all parts of the CoC Consolidated Application, the CoC Application attachments, Priority Listing that includes the reallocation forms and Project Listings that show all project applications submitted to the CoC were either accepted and ranked, or rejected and were made publicly available to project applicants, community members and key stakeholders.**

**Attachment Required: Documentation demonstrating the objective ranking and selections process and the final version of the completed CoC Consolidated Application, including the CoC Application with attachments, Priority Listing with reallocation forms and all project applications that were accepted and ranked, or rejected (new and renewal) was made publicly available. Attachments must clearly show the date the documents were publicly posted.**

Public Posting	
CoC or other Website	<input checked="checked" type="checkbox"/>
Email	<input checked="checked" type="checkbox"/>
Mail	<input type="checkbox"/>
Advertising in Local Newspaper(s)	<input type="checkbox"/>
Advertising on Radio or Television	<input type="checkbox"/>
Social Media (Twitter, Facebook, etc.)	<input type="checkbox"/>

**1E-4. Reallocation: Applicants must demonstrate the ability to reallocate lower performing projects to create new, higher performing projects. CoC's may choose from one of the following two options below to answer this question. You do not need to provide an answer for both.**

Option 1: The CoC actively encourages new and existing providers to apply for new projects through reallocation.

Attachment Required - Option 1: Documentation that shows the CoC actively encouraged new and existing providers to apply for new projects through reallocation.

Option 2: The CoC has cumulatively reallocated at least 20 percent of the CoC's ARD between FY 2013 and FY 2017 CoC Program Competitions.

No Attachment Required - HUD will calculate the cumulative amount based on the CoCs reallocation forms submitted with each fiscal years Priority Listing.

**Reallocation: Option 2**

**No Attachment Required - HUD will calculate the cumulative amount based on the CoCs reallocation forms submitted with each fiscal years Priority Listing.**

**1E-5. If the CoC rejected or reduced project application(s), enter the date the CoC and Collaborative Applicant notified project applicants their project application(s) were being rejected or reduced in writing outside of e-snaps.** 08/28/2017

**Attachment Required: Copies of the written notification to project applicant(s) that their project application(s) were rejected. Where a project application is being rejected or reduced, the CoC must indicate the reason(s) for the rejection or reduction.**

**1E-5a. Provide the date the CoC notified applicant(s) their application(s) were accepted and ranked on the Priority Listing, in writing, outside of e-snaps.** 08/28/2017

**Attachment Required: Copies of the written notification to project applicant(s) their project application(s) were accepted and ranked on the Priority listing.**

## 2A. Homeless Management Information System (HMIS) Implementation

### Intructions:

For guidance on completing this application, please reference the FY 2017 CoC Application Detailed Instructions and the FY 2017 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

**2A-1. Does the CoC have in place a Governance Charter or other written documentation (e.g., MOU/MOA) that outlines the roles and responsibilities of the CoC and HMIS Lead?** Yes

**Attachment Required:** If "Yes" is selected, a copy of the sections of the Governance Charter, or MOU/MOA addressing the roles and responsibilities of the CoC and HMIS Lead.

**2A-1a. Provide the page number(s) where the roles and responsibilities of the CoC and HMIS Lead can be found in the attached document(s) referenced in 2A-1. In addition, indicate if the page number applies to the Governance Charter or MOU/MOA.** Charter pp 7 - 11; HMIS P&P pp 7 - 13

**2A-2. Does the CoC have a HMIS Policies and Procedures Manual? Attachment Required: If the response was "Yes", attach a copy of the HMIS Policies and Procedures Manual.** Yes

**2A-3. What is the name of the HMIS software vendor?** Mediware Information Systems

**2A-4. Using the drop-down boxes, select the HMIS implementation Coverage area.** Single CoC

**2A-5. Per the 2017 HIC use the following chart to indicate the number of beds in the 2017 HIC and in HMIS for each project type within the CoC. If a particular project type does not exist in the CoC then enter "0" for all cells**

**in that project type.**

Project Type	Total Beds in 2017 HIC	Total Beds in HIC Dedicated for DV	Total Beds in HMIS	HMIS Bed Coverage Rate
Emergency Shelter (ESG) beds	1,337	149	1,188	100.00%
Safe Haven (SH) beds	42	0	42	100.00%
Transitional Housing (TH) beds	2,343	387	1,939	99.13%
Rapid Re-Housing (RRH) beds	706	103	603	100.00%
Permanent Supportive Housing (PSH) beds	3,882	0	3,882	100.00%
Other Permanent Housing (OPH) beds	814	0	503	61.79%

**2A-5a. To receive partial credit, if the bed coverage rate is below 85 percent for any of the project types, the CoC must provide clear steps on how it intends to increase this percentage for each project type over the next 12 months.**

**(limit 1000 characters)**

The CoC is working to increase and/or maintain HMIS bed coverage by working with regional funding entities to develop common contract language regarding HMIS and Coordinated Entry participation. The steps in this process include:

**2A-6. Annual Housing Assessment Report 12**  
**(AHAR) Submission: How many Annual**  
**Housing Assessment Report (AHAR) tables**  
**were accepted and used in the 2016 AHAR?**

**2A-7. Enter the date the CoC submitted the 05/05/2017**  
**2017 Housing Inventory Count (HIC) data into**  
**the Homelessness Data Exchange (HDX).**  
**(mm/dd/yyyy)**



## 2B. Continuum of Care (CoC) Point-in-Time Count

### Instructions:

For guidance on completing this application, please reference the FY 2017 CoC Application Detailed Instructions and the FY 2017 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

**2B-1. Indicate the date of the CoC's 2017 PIT count (mm/dd/yyyy). If the PIT count was conducted outside the last 10 days of January 2017, HUD will verify the CoC received a HUD-approved exception.** 01/27/2017

**2B-2. Enter the date the CoC submitted the PIT count data in HDX. (mm/dd/yyyy)** 05/05/2017

## 2C. Continuum of Care (CoC) Point-in-Time (PIT) Count: Methodologies

### Instructions:

For guidance on completing this application, please reference the FY 2017 CoC Application Detailed Instructions and the FY 2017 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

**2C-1. Describe any change in the CoC's sheltered PIT count implementation, including methodology and data quality changes from 2016 to 2017. Specifically, how those changes impacted the CoCs sheltered PIT count results. (limit 1000 characters)**

The 2017 Sheltered PIT count implementation was almost identical to the 2016 implementation. The only changes were administrative in nature. The count is taken from the HMIS. HMIS participating agencies are then contacted to verify the count and data quality of numbers reported.

**2C-2. Did your CoC change its provider coverage in the 2017 sheltered count?** No

**2C-2a. If "Yes" was selected in 2C-2, enter the change in provider coverage in the 2017 sheltered PIT count, including the number of beds added or removed due to the change.**

Beds Added:	0
Beds Removed:	0
Total:	0

**2C-3. Did your CoC add or remove emergency shelter, transitional housing, or Safe-Haven inventory because of funding specific to a Presidentially declared disaster resulting in a change to the CoC's 2017 sheltered PIT count?** No

**2C-3a. If "Yes" was selected in 2C-3, enter the number of beds that were added or removed in 2017 because of a Presidentially declared disaster.**

Beds Added:	0
Beds Removed:	0
Total:	0

**2C-4. Did the CoC change its unsheltered PIT count implementation, including methodology and data quality changes from 2016 to 2017?** No

CoCs that did not conduct an unsheltered count in 2016 or did not report unsheltered PIT count data to HUD in 2016 should compare their efforts in 2017 to their efforts in 2015.

**2C-4a. Describe any change in the CoC's unsheltered PIT count implementation, including methodology and data quality changes from 2016 to 2017. Specify how those changes impacted the CoC's unsheltered PIT count results. See Detailed Instructions for more information. (limit 1000 characters)**

The 2017 PIT was the first year the San Diego CoC gathered supplemental local data from its local jail system by conducting a census and providing a special survey designed to capture information from the jail population the night of the count. San Diego County identified a representative sample of inmates from 5 county jail facilities and conducted the surveys using County staff.

1,200 inmates were asked "Where did you sleep the night before you were arrested?"

Those that self reported being unsheltered were given a shortened version of the general PITC survey. The results of the survey indicated that 21% of those in jail would have been counted as unsheltered during the count had they not been in jail. This number could have potentially added another 1,000 persons to the street count. This number was not included in the number reported as those in hospitals and jails are not eligible to be included in the count.

**2C-5. Did the CoC implement specific measures to identify youth in their PIT count?** Yes

**2C-5a. If "Yes" was selected in 2C-5, describe the specific measures the CoC; (1) took to identify homeless youth in the PIT count; (2) during the planning process, how stakeholders that serve homeless youth were engaged; (3) how homeless youth were engaged/involved; and (4) how the CoC worked with stakeholders to select locations where homeless youth are most likely to be identified. (limit 1000 characters)**

The 2017 youth count was structured more as a separate event than in 2016. San Diego Youth Services were identified as the lead service provider for recruitment and materials disbursement. This allowed project coordinators to delegate site research and volunteer recruitment to SDYS. The Voices of the Youth Count effort in San Diego in the summer of 2016 model was used as a basis for the 2017 youth count. Similar service provider and youth outreach teams were utilized, and some of the VoYC toolkit was utilized too. This methodology used a combination of "come and be counted" events mixed with

youth informed hot spot survey outreach. Due to pressure from the service providers and also in an attempt to understand fully what the scope of youth homelessness in San Diego looks like- unstably housed youth were allowed to, and compensated for, taking our survey.

**2C-6. Describe any actions the CoC implemented in its 2017 PIT count to better count individuals and families experiencing chronic homelessness, families with children, and Veterans experiencing homelessness. (limit 1000 characters)**

In 2017 the San Diego organization, Dreams for Change, which is committed to helping families at their two locations were added as a count and survey site to the PIT. As part of their program they offer a locked safe spot for unsheltered families to park their cars at night that is not assessable by our counters. They provided a count the night of the 2017 PIT of the number of unsheltered families and individuals using the two sites and also surveyed the families.

## **3A. Continuum of Care (CoC) System Performance**

### **Instructions**

For guidance on completing this application, please reference the FY 2017 CoC Application Detailed Instructions and the FY 2017 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

**3A-1. Performance Measure: Reduction in the Number of First-Time Homeless. Describe: (1) the numerical change the CoC experienced; (2) the process the CoC used to identify risk factors of becoming homeless for the first time; (3) the strategies in place to address individuals and families at risk of becoming homeless; and (4) the organization or position that is responsible for overseeing the CoC's strategy to reduce or end the number of individuals and families experiencing homelessness for the first time.  
(limit 1000 characters)**

The number of first-time homeless (Metric 5.1) decreased overall by 11.5% (1190 persons) from 2015 to 2016. Of those, 57% had no prior service entries marking a 10% reduction from 2015 for the same population. Strategies like CES triage and tracking, creation of recuperative health care beds, in-custody PITC survey, and at targeted youth outreach deter persons at risk of homelessness. The Opening Doors group (ODG) marshalled efforts to count, track and provide more frequent efforts focused on veterans. A Planning Committee and consulting firm are directly responsible to Board for development and oversight of strategies to end general homelessness. A veteran's consortium and the Unaccompanied YOUTH Task force contribute to the ongoing planning and assessment.

**3A-2. Performance Measure: Length-of-Time Homeless. CoC 's must demonstrate how they reduce the length-of-time for individuals and families remaining homeless. Describe (1) the numerical change the CoC experienced; (2) the actions the CoC has implemented to reduce the length-of-time individuals and families remain homeless; (3) how the CoC identifies and houses individuals and families with the longest length-of-time homeless; and (4) identify the organization or position that is responsible for overseeing the CoC's strategy to reduce the length-of-time individuals and families remain homeless.  
(limit 1000 characters)**

The median LoT homelessness for ES and SH is 33 days which increases to 77 days when TH is added to the data set. Coordinated efforts reduce the typical waiting times for accessing system resources. Public Housing Authorities provide resources such as County mainstream resources targeted for homeless and Veterans and the PHA for San Diego City dedicated RRH vouchers for persons exiting shelter. The Oceanside PHA dedicated vouchers support CES. CES screening identifies and prioritizes vulnerable persons and helps deter

persons at risk. CES - SPDAT protocols and Board directives give priority to those with the longest time in homelessness in CoC-funded projects and CES Navigation services help locate housing. Scoring tools measure and awards points for projects that reduce client time homeless from one APR to the next. Provider 'Best practices' learning groups and landlord incentives support. CES / Subpopulations advisory group and outreach staff implement strategies.

### **3A-3. Performance Measures: Successful Permanent Housing Placement and Retention**

**Describe: (1) the numerical change the CoC experienced; (2) the CoCs strategy to increase the rate of which individuals and families move to permanent housing destination or retain permanent housing; and (3) the organization or position responsible for overseeing the CoC's strategy for retention of, or placement in permanent housing. (limit 1000 characters)**

Metric 7b2. evidences 94% successful exit and retention rate a slight increase (2%) over 2015 (revised) which aligns with the CoC continuing success in PSH placement and retention. RTFH Standards emphasize low barrier, housing first, rapid movement to PSH followed by access to county full service partnership comprehensive services(FSP). Housing search and navigation and landlord incentives increased access to client- preferred units. "Step down" units were offered to PH tenants whose services needs had decreased and stabilized which increased FSP - supported units available for moving persons directly from the street.

### **3A-4. Performance Measure: Returns to Homelessness.**

**Describe: (1) the numerical change the CoC experienced, (2) what strategies the CoC implemented to identify individuals and families who return to homelessness, (3) the strategies the CoC will use to reduce additional returns to homelessness, and (4) the organization or position responsible for overseeing the CoC's efforts to reduce the rate of individuals and families' returns to homelessness. (limit 1000 characters)**

HMIS is foundational to monitoring returns to homelessness (RTH). A newly launched Systems Framework reporting tool is able to publicly report RTH from each system component monthly. HDX Metric 2, shows total return to homelessness at 7%. Data reveal variances in RTH at 'critical times' and pathways. By-Name-Lists CES case conferencing identify those with high recidivism. Strategies include: 1) Expanded RRH and navigator support quickly move persons into housing; 2) Tracking and data analysis of RRH and TH practices and linked outcomes; 3) Consulting the PSH Learning Collaboratives that regularly reviews data and best practices; 4) Subregional assessment of housing capacity vs. need determined by PITC and funding allocation; 5) HMIS dashboard reports identify and track population trends; 6) Ongoing landlord outreach, education, and special incentives from PHAs and a help-line to reduce barriers and eviction. HMIS-CES Subpopulations Committee oversee progress on this measure.

### **3A-5. Performance Measures: Job and Income Growth**

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**Describe: (1) the strategies that have been implemented to increase access to employment and mainstream benefits; (2) how the CoC program-funded projects have been assisted to implement the strategies; (3) how the CoC is working with mainstream employment organizations to help individuals and families increase their cash income; and (4) the organization or position that is responsible for overseeing the CoC's strategy to increase job and income growth from employment, non-employment including mainstream benefits. (limit 1000 characters)**

CoC-funded agencies are highly proactive in improving employment outcomes and mainstream benefits (MB) access. Strategies include: employment support staff; formal/informal partnerships with WIA-funded workforce development providers; tangible assistance to support employment/ education goals; hard & soft skill development classes; SOAR training for staff; over-the-phone enrollment in MB; low/no-cost ID vouchers; call-in access centers to resolve issues in eligibility screening or benefits denial; clinics to assist in VA benefits screening. The CoC provides information about and support for new/recurring funding to support employment services. A case study running since 2014 under the SD Workforce Partnership (SDWP) is demonstrating strong outcomes in evidence-based employment. The collective action of the participating agencies and the representation on the CoC governance board by the SDWP continues to move SD toward more formal and region-wide strategic initiatives.

**3A-6. Did the CoC completely exclude a geographic area from the most recent PIT count (i.e. no one counted there, and for communities using samples in the area that was excluded from both the sample and extrapolation) where the CoC determined there were no unsheltered homeless people, including areas that are uninhabitable (deserts, forests).** Yes

**3A.6a. If the response to 3A-6 was "Yes", what was the criteria and decision-making process the CoC used to identify and exclude specific geographic areas from the CoCs unsheltered PIT count? (limit 1000 characters)**

San Diego County has 627 census tracts, the PITC effort covers 593 of them. The 34 census tracts not covered are a mixture of uninhabitable desert wilderness, rural wilderness and inaccessible military bases. Remote area services such as The Salvation Army Backcountry outreach staff, Sheriff community response teams, and Border patrol agents help validate the lack of homeless persons in these areas. A review of the topography is done by the RTFH. Rural areas that are impassible are excluded. This information is combined with outreach to businesses, outreach teams and community members to confirm wilderness, and lack of homeless persons. Street outreach, law enforcement, and homeless outreach teams and other service providers are consulted when planning the PITC because of their knowledge of the homeless street population in various remote or hidden areas.

**3A-7. Enter the date the CoC submitted the** 06/05/2017  
**System Performance Measures data in HDX,**  
**which included the data quality section for FY**  
**2016.**  
**(mm/dd/yyyy)**



## 3B. Continuum of Care (CoC) Performance and Strategic Planning Objectives

### Instructions

For guidance on completing this application, please reference the FY 2017 CoC Application Detailed Instructions and the FY 2017 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

### 3B-1. Compare the total number of PSH beds, CoC program and non CoC-program funded, that were identified as dedicated for yes by chronically homeless persons in the 2017 HIC, as compared to those identified in the 2016 HIC.

	2016	2017	Difference
Number of CoC Program and non-CoC Program funded PSH beds dedicated for use by chronically homelessness persons identified on the HIC.	592	661	69

**3B-1.1. In the box below: (1) "total number of Dedicated PLUS Beds" provide the total number of beds in the Project Allocation(s) that are designated ad Dedicated PLUS beds; and (2) in the box below "total number of beds dedicated to the chronically homeless:, provide the total number of beds in the Project Application(s) that are designated for the chronically homeless. This does not include those that were identified in (1) above as Dedicated PLUS Beds.**

Total number of beds dedicated as Dedicated Plus	
Total number of beds dedicated to individuals and families experiencing chronic homelessness	
Total	0

**3B-1.2. Did the CoC adopt the Orders of Priority into their standards for all CoC Program funded PSH projects as described in Notice CPD-16-11: Prioritizing Persons Experiencing Chronic Homelessness and Other Vulnerable Homeless Persons in Permanent Supportive Housing.** Yes

**3B-2.1. Using the following chart, check each box to indicate the factor(s) the CoC currently uses to prioritize households with children based on need during the FY 2017 Fiscal Year.**

History of or Vulnerability to Victimization	<input checked="" type="checkbox"/>
Number of previous homeless episodes	<input checked="" type="checkbox"/>

Unsheltered homelessness	<input checked="" type="checkbox"/>
Criminal History	<input type="checkbox"/>
Bad credit or rental history (including not having been a leaseholder)	<input checked="" type="checkbox"/>
Head of Household with Mental/Physical Disability	<input checked="" type="checkbox"/>

**3B-2.2. Describe: (1) the CoCs current strategy and timeframe for rapidly rehousing every household of families with children within 30 days of becoming homeless; and (2) the organization or position responsible for overseeing the CoC's strategy to rapidly rehouse families with children within 30 days of becoming homeless.  
(limit 1000 characters)**

RRH projects are cost-effective mechanisms for quickly rehousing families. Journey, Door of Hope, Focus, RRH for TAY, Alpha RRH2, and CrC RRH augment pre-2015 inventory, making RRH available throughout the region for special needs groups. Projects link to outreach, emergency shelter, and schools. Secured housing sites ensure safety and services for DV persons. All projects use the CES, VI-SPDAT and supplements to assess housing need. Households with moderate scores are matched to RRH. The central data HMIS system assists in identifying programs vacancies or where vouchers and services are needed. RRH providers an RTFH -CES review program usage, help revise RRH system protocols, and to ensure rapid transition for families and special needs youth including LGBTQ. Resources derive from mixed sources: VA, ESG, CoC, and privately supported RRH providers work to enhance system effectiveness and ensure capacity to address family homelessness at its onset, a proven best practice.

**3B-2.3. Compare the number of RRH units available to serve families from the 2016 and 2017 HIC.**

	2016	2017	Difference
Number of CoC Program and non-CoC Program funded PSH units dedicated for use by chronically homelessness persons identified on the HIC.	70	136	66

**3B-2.4. Describe the actions the CoC is taking to ensure emergency shelters, transitional housing, and permanent supportive housing (PSH and RRH) providers within the CoC adhere to anti-discrimination policies by not denying admission to, or separating any family members from other members of their family or caregivers based on age, sex, gender, LGBT status, marital status or disability when entering a shelter or Housing.  
(limit 1000 characters)**

CoC has worked to ensure adherence with anti-discrimination based on age, sex, gender and LGTQ status, marital status, and disability by the following actions:

- Inclusion of 24CFR 576.102 as a minimum requirement in the RTFH Board-

- adopted Written Standards (May 2017, p. 26);
- Reference to 24CFR 5.105 in the RTFH Standards
  - CoC Separation Policy distributed and adopted in 2013;
  - Training & Community Conversation (2015-16) including marital status challenges for non-CoC funded housing provided by faith-based organizations;
  - Distribution Equal Access Assessment Tool – Gender

**3B-2.5. From the list below, select each of the following the CoC has strategies to address the unique needs of unaccompanied homeless youth.**

Human trafficking and other forms of exploitation?	Yes
LGBT youth homelessness?	Yes
Exits from foster care into homelessness?	Yes
Family reunification and community engagement?	Yes
Positive Youth Development, Trauma Informed Care, and the use of Risk and Protective Factors in assessing youth housing and service needs?	Yes

**3B-2.6. From the list below, select each of the following the CoC has a strategy for prioritization of unaccompanied youth based on need.**

History or Vulnerability to Victimization (e.g., domestic violence, sexual assault, childhood abuse)	<input checked="" type="checkbox"/>
Number of Previous Homeless Episodes	<input checked="" type="checkbox"/>
Unsheltered Homelessness	<input checked="" type="checkbox"/>
Criminal History	<input checked="" type="checkbox"/>
Bad Credit or Rental History	<input checked="" type="checkbox"/>

**3B-2.7. Describe: (1) the strategies used by the CoC, including securing additional funding to increase the availability of housing and services for youth experiencing homelessness, especially those experiencing unsheltered homelessness; (2) provide evidence the strategies that have been implemented are effective at ending youth homelessness; (3) the measure(s) the CoC is using to calculate the effectiveness of the strategies; and (4) why the CoC believes the measure(s) used is an appropriate way to determine the effectiveness of the CoC's efforts. (limit 1500 characters)**

The strength of the regional response to youth homelessness currently resides amongst individual providers individually funded to conduct outreach, provide housing, and other supportive and wrap around services to the homeless youth population. The CoC does not yet presently have collective strategies that cut across individual provider responses. However, there is now a sizable representation to the CoC Board through the newly combined Unaccompanied Youth Task Force (UYTF), the Ending Youth Homeless Collaborative and the CES Youth Subcommittee that is now one group collectively focused on

developing system-wide strategies to ending homelessness among unaccompanied youth. One of the more recently implemented strategies has been to standardize counting and interviewing processes among the youth population as part of both the annual PITC as well as a local initiative called the "Youth Count Project" and "Voices of Youth Count Survey." WE have also contributed to the creation of an addendum to our VI-SPDAT common assessment tool that asks additional assessment questions targeting the youth population. The newly combined UYTF has also received funding to encourage youth participation directly on and input directly to the group. As we strengthen our count of youth and apply youth-focused assessments in the coming year, we will be better able to assess our impact on identifying and better serving this population.

**3B-2.8. Describe: (1) How the CoC collaborates with youth education providers, including McKinney-Vento local educational authorities and school districts; (2) the formal partnerships the CoC has with these entities; and (3) the policies and procedures, if any, that have been adopted to inform individuals and families who become homeless of their eligibility for educational services. (limit 1000 characters)**

CoC funding recipients adhere to the local Educational Assurances Policy (EAP) which requires identification of staff whose job is to ensure children are enrolled in school consistent with HUD EAP and the Elementary and Secondary Education Act. The CoC policy includes:

- Formal adoption of a EAP
- Requirement that a signed EAP is filed
- Family choice for selecting housing near child's school
- Assist DV families to enroll children in a public school of their choice and procedures to ensure safety
- Offering families a letter verifying eligibility for services
- Ensuring transportation
- Review of rights with parents
- Posting EAP
- Advocacy when educational rights are violated
- Exit plans include education
- Technical assistance on request
- SEA and LEA contacted when warranted. School liaisons link youth to services and join CoC agencies on the Unaccompanied Youth Task Force to help identify and respond to special needs of homeless children. Board Members engage in SEA and LEA events.

**3B-2.9. Does the CoC have any written formal agreements, MOU/MOAs or partnerships with one or more providers of early childhood services and supports? Select "Yes" or "No".**

	MOU/MOA	Other Formal Agreement
Early Childhood Providers	Yes	
Head Start		
Early Head Start		
Child Care and Development Fund		
Federal Home Visiting Program		
Healthy Start	Yes	
Public Pre-K		
Birth to 3		
Tribal Home Visiting Program		

Other: (limit 50 characters)		

**3B-3.1. Provide the actions the CoC has taken to identify, assess, and refer homeless Veterans who are eligible for Veterans Affairs services and housing to appropriate resources such as HUD-VASH and Supportive Services for Veterans Families (SSVF) program and Grant and Per Diem (GPD).  
(limit 1000 characters)**

A region-wide action network addresses veteran homelessness. CoC outreach, assessment and placement systems coordinate VA, CoC, PHA, and mainstream supports. A Vet Consortium and CES employ a By-Name-List to assess eligibility and assure match to appropriate housing and services. The VI-SPDAT lists the declared veteran status which the VA validates. VA case managers, treatment specialists, and housing navigators assess acuity and support placement in PSH, RRH, GPD, domiciliary or acute care facilities as needed. The network includes and coordinates non VA and VA funded programs that serve all veterans regardless of VA eligibility. Resources include: VASH, RRH, SSVF, CoC, ESG, HCV, and private funds programs. Landlord Incentives stimulate access to marketplace housing for veterans. PHA resources are allocated for veterans who are ineligible for VA services. In 2016 the Vet Consortium and Opening Doors committee lead the efforts. A revised strategic plan is in process.

**3B-3.2. Does the CoC use an active list or by name list to identify all Veterans experiencing homelessness in the CoC?** Yes

**3B-3.3. Is the CoC actively working with the VA and VA-funded programs to achieve the benchmarks and criteria for ending Veteran homelessness?** Yes

**3B-3.4. Does the CoC have sufficient resources to ensure each Veteran is assisted to quickly move into permanent housing using a Housing First approach?** No

## 4A. Continuum of Care (CoC) Accessing Mainstream Benefits and Additional Policies

### Instructions:

For guidance on completing this application, please reference the FY 2017 CoC Application Detailed Instructions and the FY 2017 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

**4A-1. Select from the drop-down (1) each type of healthcare organization the CoC assists program participants with enrolling in health insurance, and (2) if the CoC provides assistance with the effective utilization of Medicaid and other benefits.**

Type of Health Care	Yes/No	Assist with Utilization of Benefits?
Public Health Care Benefits (State or Federal benefits, e.g. Medicaid, Indian Health Services)	Yes	
Private Insurers:	Yes	
Non-Profit, Philanthropic:		
Other: (limit 50 characters)		

### 4A-1a. Mainstream Benefits

CoC program funded projects must be able to demonstrate they supplement CoC Program funds from other public and private resources, including: (1) how the CoC works with mainstream programs that assist homeless program participants in applying for and receiving mainstream benefits; (2) how the CoC systematically keeps program staff up-to-date regarding mainstream resources available for homeless program participants (e.g. Food Stamps, SSI, TANF, substance abuse programs); and (3) identify the organization or position that is responsible for overseeing the CoCs strategy for mainstream benefits.  
(limit 1000 characters)

Questions 4A will be completed after new project selections is complete

**4A-2. Low Barrier: Based on the CoCs FY 2017 new and renewal project applications, what percentage of Permanent Housing (PSH) and Rapid Rehousing (RRH), Transitional Housing (TH), Safe-Haven, and SSO (Supportive Services Only-non-coordinated entry) projects in the CoC are low-barrier?**

Total number of PH (PSH and RRH), TH, Safe-Haven and non-Coordinated Entry SSO project applications in the FY 2017 competition (new and renewal)	
Total number of PH (PSH and RRH), TH, Safe-Haven and non-Coordinated Entry SSO renewal and new project applications that selected "low barrier" in the FY 2017 competition.	

Percentage of PH (PSH and RRH), TH, Safe-Haven and non-Coordinated Entry SSO renewal and new project applications in the FY 2017 competition that will be designated as "low barrier"	0.00%
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**4A-3. Housing First: What percentage of CoC Program Funded PSH, RRH, SSO (non-coordinated entry), safe-haven and Transitional Housing; FY 2017 projects have adopted the Housing First approach, meaning that the project quickly houses clients without preconditions or service participation requirements?**

Total number of PSH, RRH, non-Coordinated Entry SSO, Safe Haven and TH project applications in the FY 2017 competition (new and renewal).	
Total number of PSH, RRH, non-Coordinated Entry SSO, Safe Haven and TH renewal and new project applications that selected Housing First in the FY 2017 competition.	
Percentage of PSH, RRH, non-Coordinated Entry SSO, Safe Haven and TH renewal and new project applications in the FY 2017 competition that will be designated as Housing First.	0.00%

**4A-4. Street Outreach: Describe (1) the CoC's outreach and if it covers 100 percent of the CoC's geographic area; (2) how often street outreach is conducted; and (3) how the CoC has tailored its street outreach to those that are least likely to request assistance. (limit 1000 characters)**

In process.

**4A-5. Affirmative Outreach**

Specific strategies the CoC has implemented that furthers fair housing as detailed in 24 CFR 578.93(c) used to market housing and supportive services to eligible persons regardless of race, color, national origin, religion, sex, gender identify, sexual orientation, age, familial status, or disability; who are least likely to apply in the absence of special outreach.

Describe: (1) the specific strategies that have been implemented that affirmatively further fair housing as detailed in 24 CFR 578.93(c); and (2) what measures have been taken to provide effective communication to persons with disabilities and those with limited English proficiency. (limit 1000 characters)

TO be completed after final project selection.

**4A-6. Compare the number of RRH beds available to serve populations from the 2016 and 2017 HIC.**

	2016	2017	Difference
RRH beds available to serve all populations in the HIC	579	706	127

**4A-7. Are new proposed project applications requesting \$200,000 or more in funding for housing rehabilitation or new construction?** No

**4A-8. Is the CoC requesting to designate one or more SSO or TH projects to serve** No

**homeless households with children and youth defined as homeless under other Federal statutes who are unstably housed (paragraph 3 of the definition of homeless found at 24 CFR 578.3).**



## 4B. Attachments

### Instructions:

Multiple files may be attached as a single .zip file. For instructions on how to use .zip files, a reference document is available on the e-snaps training site:  
<https://www.hudexchange.info/resource/3118/creating-a-zip-file-and-capturing-a-screenshot-resource>

Document Type	Required?	Document Description	Date Attached
01. 2016 CoC Consolidated Application: Evidence of the CoC's communication to rejected participants	Yes		
02. 2016 CoC Consolidated Application: Public Posting Evidence	Yes		
03. CoC Rating and Review Procedure (e.g. RFP)	Yes		
04. CoC's Rating and Review Procedure: Public Posting Evidence	Yes		
05. CoCs Process for Reallocating	Yes		
06. CoC's Governance Charter	Yes	Governance Charte...	08/11/2017
07. HMIS Policy and Procedures Manual	Yes	HMIS Policies & P...	08/11/2017
08. Applicable Sections of Con Plan to Serving Persons Defined as Homeless Under Other Fed Statutes	No		
09. PHA Administration Plan (Applicable Section(s) Only)	Yes	Q1C-4 - PHA Homel...	08/22/2017
10. CoC-HMIS MOU (if referenced in the CoC's Goverance Charter)	No		
11. CoC Written Standards for Order of Priority	No		
12. Project List to Serve Persons Defined as Homeless under Other Federal Statutes (if applicable)	No		
13. HDX-system Performance Measures	Yes	HDX System PM - ...	08/23/2017
14. Other	No		
15. Other	No		

## Attachment Details

**Document Description:**

## Attachment Details

**Document Description:**

## Attachment Details

**Document Description:**

## Attachment Details

**Document Description:**

## Attachment Details

**Document Description:**

## Attachment Details

**Document Description:** Governance Charter - San Diego CoC (601)

## **Attachment Details**

**Document Description:** HMIS Policies & Procedures - San Diego CoC  
(601)

## **Attachment Details**

**Document Description:**

## **Attachment Details**

**Document Description:** Q1C-4 - PHA Homeless Admission Preferences -  
PHA Plan Excerpts

## **Attachment Details**

**Document Description:**

## **Attachment Details**

**Document Description:**

## **Attachment Details**

**Document Description:**

## **Attachment Details**

**Document Description:** HDX System PM - FY 2016 - CA601

## **Attachment Details**

**Document Description:**

## **Attachment Details**

**Document Description:**

## Submission Summary

**Ensure that the Project Priority List is complete prior to submitting.**

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1B. Engagement	08/22/2017
1C. Coordination	08/24/2017
1D. Discharge Planning	08/22/2017
1E. Project Review	08/24/2017
2A. HMIS Implementation	08/22/2017
2B. PIT Count	08/22/2017
2C. Sheltered Data - Methods	08/22/2017
3A. System Performance	08/23/2017
3B. Performance and Strategic Planning	Please Complete
4A. Mainstream Benefits and Additional Policies	Please Complete
4B. Attachments	Please Complete

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**Submission Summary**

No Input Required



# Regional Task Force on the Homeless

## San Diego City & County

## Governance Charter

# Operational Responsibilities and Authorities

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Version 3.0

Document Number: CoCGC2.0

Corresponding By-Laws Number: CoCBL1.0

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## 1. Introduction

The purpose of the Regional Task Force on the Homeless Governance Charter (Charter) is to describe the structure, composition, roles, responsibilities and committee formation of the organization.<sup>1</sup> On an annual basis, the Charter will be updated allowing for Regional Task Force on the Homeless (RTFH) response to environmental, regulatory, and strategic issues. This Charter incorporates the Bylaws of the RTFH with regard to its operations and stated roles and responsibilities.

In 2009, the U.S. Department of Housing and Urban Development (HUD) enacted the Homeless Emergency Assistance and Rapid Transition to Housing Act (HEARTH) that established a Continuum of Care (CoC) program to address homelessness and created specific rules, regulations and procedures to be competitive for federal dollars. The HEARTH Act also includes a provision to establish a "governance structure" that ensures an opportunity for all stakeholders to be included and participate in the CoC program.<sup>2</sup> Subsequently HUD released the 2012 Interim Rule detailing the requirements for CoC implementation of HEARTH.<sup>3</sup>

Serving as San Diego's CoC, the Regional Continuum of Care Council (RCCC), a cross-sector stakeholder group established in 1998, reconstituted in 2014, and merged to become RTFH in January 2017 develops strategic policy as well as coordinates

<sup>1</sup> RTFH serves as San Diego City and County's Continuum of Care as defined in Section 578.5 of the Homeless Emergency Assistance and Rapid Transition to Housing Act (HEARTH) published in July 2012.

<sup>2</sup> Southern Nevada Homelessness Continuum of Care (CoC) Governance Structure

<sup>3</sup> 24 CFR 578 HUD Interim Rule, CoC Program, effective August 30, 2012

resources needed to effectively address homelessness in San Diego.<sup>4</sup>

In its capacity as the CoC as well as the central organization on homelessness in San Diego City and County, the RTFH is responsible for:

- Advocating for policies and essential services that promote fair housing, client well-being, and rights/protections under the law;
- Promoting a community-wide commitment to the goal of ending homelessness;
- Providing funding for efforts to quickly re-house individuals and families who are homeless, which minimizes the trauma and dislocation caused by homelessness;
- Promoting access to and effective use of mainstream programs and resources; and
- Optimizing self-sufficiency among individuals and families experiencing homelessness.<sup>5</sup>

## 2. Overview

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The RTFH is a membership-based, collective impact organization originally formed in 1984 as the San Diego Mayor's Task Force on Homelessness, which later expanded to serve the full region as a community collaborative. In 2004, the RTFH became an independent 501(c)3 nonprofit that absorbed the RCCC to create a regional authority on homelessness in 2017. Goals adopted by the RCCC in 2015 note the need for stakeholder engagement well beyond the homeless and housing service delivery system in order to achieve the regional goal of ending homelessness by 2020.

San Diego envisions a system of care throughout the region that ensures all persons at-risk of or experiencing homelessness have a safe, supportive and permanent place to call home with services available to help them stay housed and improve the quality of their lives. The vision is ambitious, and possible. The community is building a future where homelessness is rare, brief, and non-recurring and in which there are sufficient resources, political leadership, and civic involvement to erase homelessness as a permanent fixture in our social landscape. The vision focuses on the principles of Housing First as well as quick access to permanent housing, strengths-based consumer relationships, coordination and collaboration with mainstream partners, provision of necessary services, policy and resource advocacy, comprehensive community education, and data-driven decision-making.

This Charter memorializes the purpose of the collective impact initiative to end homelessness using the federally-defined CoC responsibilities, outlines the primary work

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<sup>4</sup> Until 2017, the RCCC was an unincorporated association as defined under Section 18035 of the California Corporations Code. The RCCC no longer exists and its functions have been transferred to the RTFH.

<sup>5</sup> <https://www.hudexchange.info/resources/documents/CoC-Duties-Establishing-and-Operating-a-CoC-Slides.pdf>

of RTFH, and promotes partnership among the various leadership bodies.<sup>6</sup> An organizational chart depicting the relationships amongst the various leadership bodies in the collective impact initiative may be found in Appendix F.

## 2.1 Mission

The mission of RTFH is to engage stakeholders in a community-based process that works to end homelessness for all individuals and families throughout San Diego City and County, address the underlying causes of homelessness, and to lessen the negative impact of homelessness on individuals, families and communities.

## 2.2 Geographic Boundaries

The RTFH includes total geography within the County of San Diego, including all (un)incorporated cities and areas. These boundaries contain other HUD designated program components, including Housing Authorities, HUD geocode areas, local Emergency Solutions Grant (ESG) Areas, communities eligible for State ESG funds, as well federally designated Community Development Block Grant (CDBG) entitlement areas, Housing Opportunities for Persons With AIDS (HOPWA), HOME Investment Partnerships Program (HOME), and U.S. Department of Veterans Affairs (VA) service areas. This geography is referred as the San Diego Region (Region). Various subdivisions are recognized within the Region such as Central, East, South, North Inland, and North Coastal areas.

## 2.3 Emergency Solutions Grant Entitlement Areas

Emergency Solutions Grant (ESG) funds are awarded to the San Diego ESG entitlement areas by HUD for the purpose of providing Essential Services, Shelter Operations, and assistance to persons who are homeless or at-risk of being homeless in the Region. The RTFH directly participates with jurisdictions that receive ESG funds. In each case, the RTFH consults with the jurisdiction to develop cooperative plans and strategies that leverage ESG and other resources to provide emergency shelter, prevention, and rapid re-housing services.

The RTFH and ESG entitlement areas are responsible for reporting and evaluating the performance of ESG program recipients and subrecipients. In response, the RTFH has prepared an ESG Guide that includes information about the responsibilities of the RTFH and ESG area, HUD regulations, cross-jurisdiction strategies, and policy statements. Because the Guide is updated periodically, the most recent Guide is incorporated in its entirety in the Charter by reference here.

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<sup>6</sup> CoC responsibilities outlined in 24 CFR Part 578.

## 3. Assumptions/Constraints/Risks

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### 3.1 Assumptions

For the purpose of this Charter, the RTFH is assuming its current structure remains in place but acknowledges change may occur due to efficiency studies underway.

### 3.2 Constraints

Implementation of this Charter is reliant on volunteer participation from members of the community and continued funding from HUD and other sources such as those providing match and leverage to RTFH programs.

### 3.3 Risks

Should no stakeholders agree to participate in the RTFH, the Region may not meet HUD HEARTH regulations. Non-compliance with federal regulations could result in reputational damage to RTFH, as well as jeopardize current and future funding. It is the responsibility of RTFH, as the lead coordinating group inclusive of the Homeless Management Information System Lead Agency and Collaborative Applicant, to ensure the effective implementation of the Charter.

## 4. Purpose & Responsibilities

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### 4.1 Purpose

The purpose of RTFH is to assist in the coordination, development, and evaluation of services and housing for populations at-risk of and experiencing homelessness through planning, education and advocacy. To achieve this purpose RTFH will:

- Create a system for coordinated assessment and housing prioritization for the most chronic and vulnerable homeless individuals and families;
- Reinforce a Housing First philosophy for all homeless housing and service providers;
- Increase access to permanent housing through various means including rapid re-housing, permanent supportive housing, and other viable forms of permanent housing;
- Evaluate performance of services within the Region through data collection, analysis, and monitoring;
- Plan for and conduct an annual Point-In-Time Count (PITC) of homeless persons within the Region;

- Create capacity in communities throughout the Region to take ownership of and incorporate evidence-based practices to end homelessness;<sup>7</sup> and
- Develop plans to fulfill the mission of ending homelessness for all individuals and families throughout the Region.

## 4.2 Roles & Responsibilities

The RTFH is, at minimum, responsible for all duties assigned by HUD under the CoC Program.<sup>8</sup> This section defines the basic roles, responsibilities, and committee structures required for operation of RTFH. Appendix H provides a detailed overview of RTFH roles and responsibilities.

### 4.2.1 Full Membership

The RTFH garners community-wide commitment to ending and preventing homelessness by engaging stakeholders in all parts of the Region. In addition to the entities identified by HEARTH as required to participate in RTFH, the Full Membership includes a variety of community partners to the extent they are invested in ending homelessness and present in the Region. Examples of additional stakeholders include private foundations, philanthropists, employment development, and private health service organizations. Members can be individuals or representatives of organizations.

It is the responsibility of the **RTFH Full Membership (FM)** to:

- Establish a Governance Board (Board) to act on behalf of RTFH. This Board must be representative of the relevant organizations and projects serving homeless sub-populations and include at least one homeless or formerly homeless individual;
- Adopt and follow a written process for selection of Board Members and review this process at least once every five years;
- Elect Homeless Service Provider seats annually;
- Elect Full Membership Liaison to the Board at discretion of FM;
- Ratify full slate of Board Members annually;
- Participate on Board Advisory Committees;
- In consultation with RTFH, follow and ratify annually a Governance Charter;
- Attend meetings of the FM, with published agendas, at least twice per year;
- Facilitate sharing of provider expertise and intervention strategies through Learning Collaboratives, as needed; and
- Inform and support the development of regional plans.

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<sup>7</sup> West Virginia Balance of State Governance Charter.

<sup>8</sup> HUD identifies three major areas of responsibility for a CoC: operating a CoC; designing and operating a Homeless Management Information System and ensuring CoC planning.

## 4.2.2 Governance Board

The Board acts on behalf of RTFH and is representative of the relevant organizations and projects serving people experiencing homelessness within the Region, including at least one homeless or formerly homeless individual. This cross-sector representative Board enhances the Region's capacity to coordinate and leverage resources from various sectors and carry-out its responsibilities.

It is the responsibility of the **Board** to:

- Select Board Members annually and fill vacancies as needed;
- Establish policies for RTFH operations including but not limited to written standards for providing homeless assistance, conflict of interest, recusal, and terms of assistance;
- Direct and evaluate performance of RTFH operations;
- Establish plans for ending homelessness in the Region:
  - Set regional goals and priorities for ending homelessness, including but not limited to HUD CoC and ESG targets;
  - Ensure relevant organizations and projects serving homeless sub-populations are represented in planning and decision-making; and
  - Build community awareness inclusive of the needs of all homeless populations found in the region.
- Call and facilitate meetings of the FM. Meetings will be held, at minimum, twice annually;
- Designate and operate a Homeless Management Information System (HMIS):
  - Designate a single HMIS for the Region;
  - Designate an eligible applicant to manage the RTFH's HMIS, known as the HMIS Lead.
- Prepare applications for funds:
  - Establish priorities for funding projects;
  - Designate a Collaborative Applicant that will ensure only one application for HUD CoC Program funds is submitted and will collect and combine required application information from all approved projects within the Region;
  - Authorize grant applications, raise and allocate funds, and approve sustainability plans.
- Establish a designated Point-of-Contact (POC) for RTFH. Designation of the POC takes into consideration two critical aspects:
  - The POC must have functional knowledge, access, and regular communication with the internal structures of the Collaborative Applicant;
  - To be effective, the POC must possess a comprehensive understanding of HUD regulations and detailed procedures associated with compliance with CoC, ESG, and HUD Veterans Affairs Supportive Housing (VASH) programs, including HMIS functions.

### 4.2.3 Governance Board Executive Committee

The Executive Committee provides a mechanism for Board leaders (Chair, Vice Chair, Secretary, Treasurer) to engage, within the limits set by Board policy and the bylaws, in decision making, oversight, and communication on important RTFH matters.

The Executive Committee has meetings during the year separate from the Board and are convened as needed by the Chair. The Executive Committee's actions are reported not later than the next meeting of the Board. **The Executive Committee** has the responsibility to:

- Act for the Board and make decisions on matters which:
  - Require action before the next Board meeting;
  - Have been specifically delegated by the Board to the Executive Committee; and
  - Affect the budget and require immediate action.
- Act for the Board in the administration of established policies and programs, and make recommendations to the Board with respect to matters of policy and operations. May use a Working Group to assist in vetting items for Board and Executive Committee meetings; and
- Review RTFH activities and programs and recommend priorities.

### 4.2.4 Governance Board Advisory Committees

The RTFH established Advisory Committees (AC) to provide advice on its primary activities, key issues or community initiatives. The following ACs are established as Standing ACs incorporating members of the FM and may only be disbanded by a change to the Charter. The ACs are as follows:

***Audit Committee:*** Responsible for making recommendations to the Board on hiring and firing independent auditors, negotiating the auditor's compensation, conferring with the auditor to satisfy its members that the RTFH's financial affairs are in order, reviewing and determining whether to accept an audit, assuring non-audit services performed by the auditors conform with standards for auditor independence, and approving performance of any non-audit services provided by the auditor.

***Coordinated Entry System and Subpopulations (CES):*** The primary responsibility of CES is to advise on and support the Region's implementation and use of CES.

***Data Advisory Committee (DAC):*** Responsible for advising on data and data systems necessary to achieve RTFH's mission of ending homelessness.

***Evaluation Advisory Committee (Evaluations):*** Responsible for monitoring, evaluating and recommending improvements to enhance RTFH and RTFH Member Organization performance. Agencies receiving CoC funding are unable to participate in the annual rating and ranking process for HUD CoC funds.

**Finance Committee (Finance):** Responsible for making recommendations to the Board on financial policies, goals, and budgets that support the mission, values, and goals of the RTFH, and to review the RTFH's financial performance against its goals in order to make programmatic and financial plan recommendations to the Board.

**Nominations & Selection Advisory Committee (N&S):** Responsible for RTFH governance, N&S evaluates and recommends changes to improve RTFH's structure and ensure it is meeting the mission. N&S reviews Board Member nominations and provides recommendations to the Board. It also reviews the Charter and provides recommendations to the Board and FM.

**Task Groups:** Periodically, RTFH needs to complete specific, time limited tasks in order to comply with regulatory demands or to advance its goals and objectives. At the request of the Board, a temporary Task Group or Ad Hoc Committee may be formed to complete the identified task. These groups perform specific functions associated with completion of the task and are guided by and report to one of the established RTFH groups which may include the Board or an AC.

## 4.2.5 Intergovernmental Council

In order to engage key government representatives in the effort to end homelessness, RTFH will form an Intergovernmental Council (IC). The purpose of the IC will be to promote and coordinate local government activities to assist homeless persons. The IC will consist of current public officials representing various levels of government such as cities, county, state, and federal. The positions of Chairperson and Vice Chairperson will be elected and rotate among the represented agencies on an annual basis.

The **IC** will have various duties, including:

- Fill the two Elected Official seats on the Board;
- Meet regularly and serve in an advisory role to the Board; and
- Review all local activities and programs assisting the homeless to ensure alignment with RTFH policy and plans such as CES participation.

## 4.2.6 Operations Staff

RTFH staff provide infrastructure support to the Board, Full Membership and ACs. Examples of responsible areas include but are not limited to:

- Collaborative Applicant
- HMIS Lead
- CES Administration & Oversight
- Performance Monitoring and Evaluation
- Point-in-Time Count Coordination
- Full Membership Coordination including Annual Recruitment
- Support to Board, Executive Officers, and ACs
- Website & Document Portal Management
- General Point-of-Contact



- Fundraising
- Community Outreach & Education

## Appendix A: Record of Changes

The RTFH Governance Charter will be updated annually. The table below will be used to provide the version number, the date of the version, the author/owner of the version, and a brief description of the reason for creating the revised version should any changes be made.

Table 1: Record of Changes

Version Number	Date	Author/Owner	Description of Change
1.0	4/28/15	RCCC	Administrative changes
2.0	3/28/16	N&S Charter Sub-Committee	New format, condensed verbiage, added by-laws, governance structure modification
3.0	5/4/2017	N&S Committee	Changes to align with merging of RCCC & RTFH

## Appendix B: Acronyms

Table 2: Acronyms

Acronym	Literal Translation
<b>AC</b>	Advisory Committee
<b>CA</b>	Collaborative Applicant
<b>CES</b>	Coordinated Entry System
<b>CDBG</b>	Community Development Block Grant
<b>CoC</b>	Continuum of Care
<b>DAC</b>	Data Advisory Committee
<b>ESG</b>	Emergency Solutions Grant
<b>FM</b>	Full Membership
<b>HEARTH</b>	Homeless Emergency Assistance and Rapid Transition to Housing Act
<b>HMIS</b>	Homeless Management Information System
<b>HOME</b>	HOME Investment Partnerships Program
<b>HOPWA</b>	Housing Opportunities for Persons With AIDS
<b>HUD</b>	U.S. Department of Housing & Urban Development
<b>IC</b>	Intergovernmental Council
<b>IO</b>	Infrastructure Organization
<b>MOU</b>	Memorandum of Understanding
<b>N&amp;S</b>	Nominations & Selection Advisory Committee
<b>NOFA</b>	Notice of Funding Availability
<b>PITC</b>	Point-in-Time Count
<b>RCCC</b>	Regional Continuum of Care Council
<b>VA</b>	U.S. Department of Veterans Affairs

## Appendix C: Glossary

Table 3: Glossary

Term	Definition
Collaborative Applicant	The Collaborative Applicant is the entity that submits the annual CoC Consolidated Application for funding and is charged with collecting and combining the application information from all applicants for all projects within the RTFH's geographic area.
Collective Impact	Commitment of a group of important actors from different sectors to a common agenda for solving a specific social problem. Unlike most collaborations, collective impact initiatives involve a centralized infrastructure, a dedicated staff, and a structured process that leads to a common agenda, shared measurement, continuous communications, and mutually reinforcing activities among all participants.
Community Development Block Grant (CDBG)	CDBG, one of the longest-running programs of the U.S. Department of Housing and Urban Development, funds local community development activities such as affordable housing, anti-poverty programs, and infrastructure development.
Consolidated Plan	The Consolidated Plan is designed to help states and local jurisdictions to assess their affordable housing and community development needs and market conditions, and to make data-driven, place-based investment decisions. The consolidated planning process serves as the framework for a community-wide dialogue to identify housing and community development priorities that align and focus funding from the CPD formula block grant programs: CDBG, HOME, ESG, and HOPWA. The Consolidated Plan is carried out through Annual Action Plans, which provide a concise summary of the actions, activities, and the specific federal and non-federal resources that will be used each year to address the priority needs and specific goals identified by the Consolidated Plan. Grantees report on accomplishments and progress toward Consolidated Plan goals in the Consolidated Annual Performance and Evaluation Report (CAPER).
Continuum of Care (CoC)	A CoC is a regional or local planning body that coordinates housing and services funding for homeless families and individuals.
Coordinated Entry System (CES)	CES is a system designed to coordinate program participant intake, assessment, and provision of referrals for housing placement. The system covers the Region, is easily accessed by individuals and families seeking housing or services, is well advertised, and includes a comprehensive and standardized assessment tool.

Term	Definition
Emergency Solutions Grant (ESG)	The ESG program provides funding to: (1) engage homeless individuals and families living on the street; (2) improve the number and quality of emergency shelters for homeless individuals and families; (3) help operate these shelters; (4) provide essential services to shelter residents, (5) rapidly re-house homeless individuals and families, and (6) prevent families/individuals from becoming homeless.
Geo Code Area	A particular geographic location identified with a six-digit number by HUD and used for annual allocation of funds. The characterization is based on population statistics such as the average age or income of its inhabitants.
Geographic Boundaries	Includes all geography within the County of San Diego, including (un)incorporated cities and areas.
Governance Board	Body leading the collective impact initiative that oversees RTFH functions.
Homeless Emergency Assistance and Rapid Transition to Housing (HEARTH) Act of 2009	On May 20, 2009, President Obama signed the HEARTH Act of 2009. The HEARTH Act amends and reauthorizes the McKinney-Vento Homeless Assistance Act with substantial changes, including a consolidation of HUD's competitive grant programs.
HOME Investment Partnerships Program (HOME)	HOME is a type of United States federal assistance provided by HUD to States in order to provide decent and affordable housing, particularly housing for low- and very low-income Americans.
Homeless Management Information System (HMIS)	HMIS is a local information technology system used to collect client-level data and data on the provision of housing and services to homeless individuals and families and persons at risk of homelessness.
Homeless Management Information System (HMIS) Lead	Entity designated by the RTFH in accordance with HEARTH to operate HMIS.
Housing Opportunities for Persons with AIDS (HOPWA)	To help take care of the housing needs of low-income people who are living with HIV/AIDS and their families.
Housing Authority	A housing authority is generally a governmental body that governs some aspect of a region's housing, often providing low rent or free apartments to qualified residents.
Housing First	Housing First is a recovery-oriented approach to ending homelessness that centers on quickly moving people experiencing homelessness into independent and permanent housing and then providing additional supports and services as needed.
Memorandum of Understanding (MOU)	An MOU is a formal agreement between two or more parties. Companies and organizations can use MOUs to establish official partnerships. MOUs are not legally binding but they carry a degree of seriousness and mutual respect.

Term	Definition
Permanent Supportive Housing (PSH)	PSH is a program that helps eligible people find a permanent home and also get local mental health services but only if and when they need that help.
Point-in-Time Count (PITC)	The PITC is a count of sheltered and unsheltered homeless persons on a single night in January. HUD requires that CoCs conduct an annual count of homeless persons who are sheltered in emergency shelter, transitional housing, and Safe Havens on a single night and unsheltered at least biennially.
Prevention Programs	Homeless Prevention Programs provide rental assistance, utility assistance and supportive services directly related to the prevention of homelessness to eligible individuals and families who are in danger of eviction, foreclosure or homelessness.
Rapid Re-Housing (RRH)	RRH is an intervention, informed by a Housing First approach that is a critical part of a community's effective homeless crisis response system. It quickly connects families and individuals experiencing homelessness to permanent housing through a tailored package of assistance that may include the use of time-limited financial assistance and targeted supportive services.
Regional Continuum of Care Council (RCCC)	<i>The RCCC was a cross-sector stakeholder group established in 1998, reconstituted in 2014, and merged with the Regional Task Force on the Homeless in 2017 to develop strategic policy as well as coordinate resources needed to effectively address homelessness in San Diego.</i>
RTFH Member	RTFH members can be an individual, agency and/or department within a political subdivision who are concerned with and/or providing services to the various homeless sub-populations furthering the direction of the RTFH. An agency and/or department with more than one individual representing that organization will be recognized as one member.
RTFH Individual Member	RTFH full individual membership is designed for those interested in and committed to ending homelessness, including consumers, students, educators, San Diego residents, and others. Individuals who care about the quality of services provided to persons experiencing homelessness, who want to ensure they are meeting their needs to the greatest extent possible are individual RTFH members.
RTFH Organizational Member	RTFH Organizational Membership is open to organizations, corporations and agencies interested in supporting the RTFH's commitment to ending homelessness.
Recipient	An eligible entity that signs a grant agreement for a specified funding source.
Sub-population (homeless)	For the purpose of the Charter, sub-populations are referring to categories of individuals with related, yet distinct, needs that can be addressed through a CoC. Representation of sub-populations as required by HEARTH must be reflected on the Board.

Term	Definition
Sub-recipient	Eligible entity that receives a sub-grant from the recipient to carry-out a project.
U.S. Department of Housing & Urban Development (HUD)	A U.S. government agency created in 1965 to support community development and increase home ownership.
U.S. Department of Veterans Affairs (VA)	The VA is a government-run military veteran benefit system with Cabinet-level status.

## Appendix D: Referenced Documents

This table summarizes the relationship of the Charter to other relevant documents. Here, identifying information for all documents used to arrive at and/or referenced within this document will be provided (e.g., related and/or companion documents, prerequisite documents, relevant technical documentation, etc.).

Table 4: Referenced Documents

Document Name	Document Location and/or URL	Issuance Date
Alameda County CoC/ EveryOne Home Governance Charter	<a href="http://everyonehome.org/wp-content/uploads/2016/02/CoCs-Governance-Charter.pdf">http://everyonehome.org/wp-content/uploads/2016/02/CoCs-Governance-Charter.pdf</a>	June 2015
Continuum of Care Duties	<a href="https://www.hudexchange.info/resources/documents/CoC-Duties-Establishing-and-Operating-a-CoC-Slides.pdf">https://www.hudexchange.info/resources/documents/CoC-Duties-Establishing-and-Operating-a-CoC-Slides.pdf</a>	NA
ESG Guide	TBD	TBD
HEARTH Act	<a href="https://www.hudexchange.info/resources/documents/HomelessAssistanceActAmendedbyHEARTH.pdf">https://www.hudexchange.info/resources/documents/HomelessAssistanceActAmendedbyHEARTH.pdf</a>	May 2009
HUD Interim Rule	<a href="https://www.hudexchange.info/resources/documents/CoCProgramInterimRule_FormattedVersion.pdf">https://www.hudexchange.info/resources/documents/CoCProgramInterimRule_FormattedVersion.pdf</a>	August 2012
Notice Establishing Additional Requirements for a Continuum of Care Centralized or Coordinated Assessment System	<a href="https://www.hudexchange.info/resources/documents/Notice-CPD-17-01-Establishing-Additional-Requirements-or-a-Continuum-of-Care-Centralized-or-Coordinated-Assessment-System.pdf">https://www.hudexchange.info/resources/documents/Notice-CPD-17-01-Establishing-Additional-Requirements-or-a-Continuum-of-Care-Centralized-or-Coordinated-Assessment-System.pdf</a>	January 2017
RTFH By-Laws	<a href="http://nebula.wsimg.com/295b6dc187e4b55049160278c72dfe76?AccessKeyId=84F4D43D27BED21A7BD2&amp;disposition=0&amp;alloworigin=1">http://nebula.wsimg.com/295b6dc187e4b55049160278c72dfe76?AccessKeyId=84F4D43D27BED21A7BD2&amp;disposition=0&amp;alloworigin=1</a>	January 2016
Southern Nevada Homelessness CoC Governance Structure	<a href="http://www.helphopehome.org/">http://www.helphopehome.org/</a>	August 2014
West Virginia Balance of State CoC Charter	Drop Box (will update with URL once finalized)	October 2015



## Appendix E: Approvals

The undersigned acknowledge they have reviewed the Charter and agree with the information presented within this document. Changes to this Charter will be coordinated with, and approved by, the undersigned, or their designated representatives.

*Instructions:* List the individuals whose signatures are desired. Examples of such individuals are RTFH Governance Board Chair, RTFH Governance Board Vice-Chair, RTFH President & CEO, and any other appropriate stakeholders.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_

Title: \_\_\_\_\_

Role: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_

Title: \_\_\_\_\_

Role: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

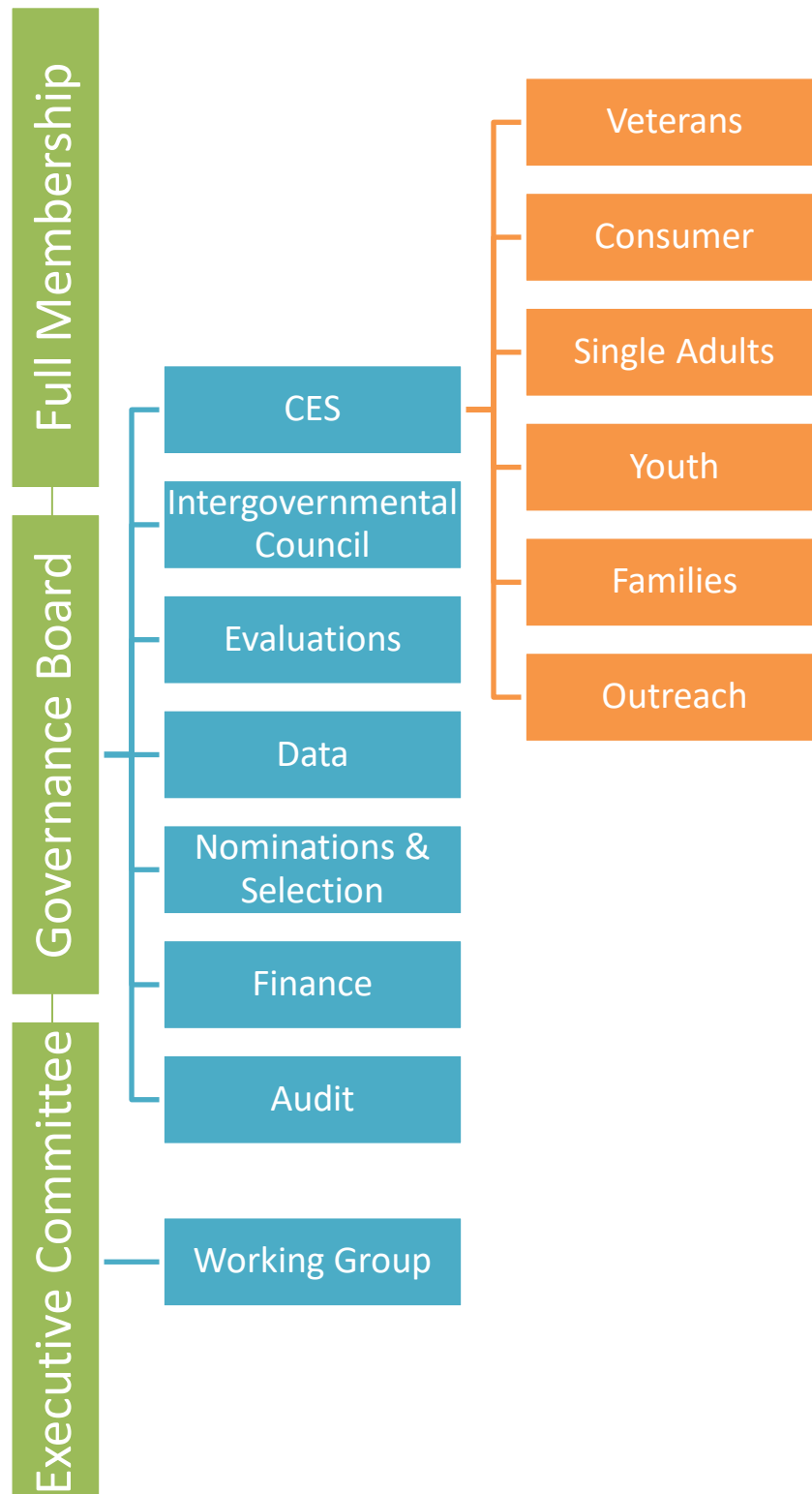
Print Name: \_\_\_\_\_

Title: \_\_\_\_\_

Role: \_\_\_\_\_

## Appendix F: Organizational Chart

Table 5: RTFH Organizational Chart



## Appendix G: RTFH Governance Board Structure

Table 6: RTFH Governance Board Structure

Board Structure		Sub-Population Representation	Organizational Representative
<i>Appointed Seats</i>	County Health and Human Services Agency	Homeless Families with children Unaccompanied youth (UY) Seniors Veterans Chronic homeless Substance abuse Co-Occurring Disorders Victims of domestic violence Seriously mentally ill Transition Age Youth (TAY) HIV/AIDS Human trafficking Unaccompanied women	Charged with coordinating efforts of all health and human services providers.
	Public Housing Authority: County of San Diego Department of Housing and Community Development		Charged with coordinating efforts with all other public housing authorities within the Region.
	Public Housing Authority: San Diego Housing Commission		
	San Diego Workforce Partnership		Charged with coordinating efforts of all employment agencies and workforce development services providers.
	United Way of San Diego County		Charged with coordinating collective impact efforts.
	U.S. Department of Veterans Affairs		Charged with coordinating efforts of all homeless Veterans providers.
<i>Community Stakeholders</i>	Homeless / Formerly Homeless	Transition Age Youth (TAY) HIV/AIDS Human trafficking Unaccompanied women	Charged with representing all homeless individuals or formerly homeless individuals.
	Homeless Service Provider – General, Central, East, North Coastal, North Inland, and South Bay Regions (6)		Charged with coordinating efforts with all service providers in the designated region. Preference given to emerging needs and regions under the General Homeless Service Provider seat.
	Education		Charged with coordinating efforts with all education organizations.
	Health (3)		Charged with coordinating efforts with all healthcare providers.
	Law Enforcement / Justice System		Charged with coordinating efforts with all other public law enforcement agencies within the Region.

	Business (3)		Charged with coordinating efforts with all business organizations. Preference given to affordable housing developers.
	Elected Official (2)		Charged with coordinating efforts with all jurisdictions within the Region.
	Funder (2)		Charged with coordinating efforts of philanthropy.
	Faith Community		Charged with coordinating efforts of all faith-based organizations.
	Technology Business		Charged with coordinating efforts of all technology organizations.
	Homeless Advocate		Charged with advocating on behalf of persons experiencing homelessness.
	Flexible (3)		Charged with coordinating efforts in their sectors. Preference given to consumers, affordable housing developers, and County of San Diego law enforcement agencies.

## Appendix H: RTFH Roles & Responsibilities

Table 6: RTFH Roles & Responsibilities

Responsibility	Required Activity	Responsible Stakeholder(s):
Operate the RTFH	Hold meetings of the FM, with published agendas, at least twice per year. One meeting will be the Annual Meeting.	Board RTFH Staff
	Make an invitation for new members to join publicly available within the geographic area at least annually. Ensure an updated membership roster is maintained.	RTFH Staff
	Adopt and follow a written process to select a Board and its members to act on behalf of RTFH. The process must be reviewed, updated, and approved by the Board and FM at least once every 5 years.	Board FM RTFH Staff
	Appoint additional committees, subcommittees, or workgroups.	Board
	Participate in ACs, additional committees, subcommittees, or workgroups.	Board FM RTFH Staff
	Develop, follow, and update annually a Charter, which will comply with HEARTH and all other applicable regulations.	Board FM N&S AC HMIS Lead Collaborative Applicant RTFH Staff
	Establish performance targets appropriate for population and program type, monitor recipient and sub-recipient performance, evaluate outcomes, and take action against poor performers. This includes ESG and CoC funded programs.	Board Evaluations AC RTFH Staff Recipient
	Establish and operate a CES system that provides an initial, comprehensive assessment of the needs of individuals and families for housing and services.	Board CES AC RTFH Staff

	Establish and consistently follow written standards and policies for providing homeless assistance inclusive of CoC and ESG programs.	Board Evaluations AC RTFH Staff
	Designate a single HMIS for the Region.	Board
	Direct and evaluate performance of RTFH.	Board
	Provide support to Board, Executive Officers, and ACs. In addition, manage the Website & Document Portal and serve as the RTFH's general Point-of-Contact as directed by the Board. Conduct community outreach and engagement as appropriate.	RTFH Staff
	Review RTFH activities and act on behalf of the Board as designated by the Board.	Executive Committee
Designating and operating an HMIS	Designate an eligible applicant to manage the RTFH's HMIS, which will be known as the HMIS Lead.	Board
	Review, revise, and approve a privacy plan, security plan, and data quality plan for the HMIS.	HMIS Lead DAC
	Ensure consistent participation of recipients and sub-recipients in the HMIS.	HMIS Lead RTFH Staff
	Ensure the HMIS is administered in compliance with requirements prescribed by HUD.	HMIS Lead DAC RTFH Staff
Continuum of Care planning	Coordinate the implementation of a housing and service system within the Region that meets the needs of homeless individuals (including unaccompanied youth) and families. At a minimum, such system encompasses the following: <ul style="list-style-type: none"> <li>• Outreach, engagement, and assessment;</li> <li>• Shelter, housing, and supportive services; and</li> <li>• Prevention strategies.</li> </ul>	Board CES AC RTFH Staff
	Planning for and conducting, at least biennially, a PITC of homeless persons within the Region.	RTFH Staff
	Establish plans for ending homelessness in the Region.	Board IC RTFH Staff

	Conduct an annual analysis including gaps of the homeless needs and services available within the Region.	RTFH Staff HMIS Lead
	Provide information required to complete the Consolidated Plan(s) within the Region.	RTFH Staff
	Consult with ESG program recipients within the Region on the plan for allocating ESG funds as well as reporting on and evaluating the performance of ESG program recipients and sub-recipients.	Evaluations AC HMIS Lead RTFH Staff
	Identify and apply for competitive homeless-related federal, state, and local grants, as appropriate.	Board Resources AC Collaborative Applicant RTFH Staff
	Facilitate Learning Collaboratives to help assure the use of evidence-based programs and other innovations with fidelity and benefit to consumers.	FM RTFH Staff
	Issue annual report of homelessness in the region.	Board RTFH Staff
	Develop, as appropriate, and review solicitation responses for the RTFH and provide recommendations to the Board.	RTFH Staff
	Actively engage with RTFH stakeholders.	Board RTFH Staff



# **San Diego County Regional Continuum of Care Council's Homeless Management Information System (HMIS) Policies and Procedures**

**HMIS Lead Agency  
Regional Task Force on the Homeless (RTFH)**

**April 21, 2016**



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## 2. PROJECT SUMMARY

### 2.1 Background

To end homelessness, a community must know the scope of the problem, the characteristics of those who find themselves homeless, and understand what is working in their community and what is not. Solid data enables a community to work confidently towards their goals as they measure outputs, outcomes, and impacts.

A Homeless Management Information System (HMIS) is the information system designated by a local Continuum of Care (CoC) to comply with the requirements of CoC Program interim rule 24 CFR 578. It is a locally-administered data system used to record and analyze client, service and housing data for individuals and families who are homeless or at risk of homelessness. HMIS is a valuable resource because of its capacity to integrate and un-duplicate data across projects in a community. Aggregate HMIS data can be used to understand the size, characteristics, and needs of the homeless population at multiple levels: project, system, local, state, and national. The Annual Homeless Assessment Report (AHAR) is HUD's annual report that provides Congress with detailed data on individuals and households experiencing homelessness across the country each year. This report could not be written if communities were not able to provide HUD with reliable, aggregate data on the clients they serve.

In 2010 the U.S. Interagency Council on Homelessness (USICH) affirmed HMIS as the official method of measuring outcomes in its Opening Doors: Federal Strategic Plan to Prevent and End Homelessness. Since then many of the federal agencies that provide McKinney-Vento Act and other sources of funding for services to specific homeless populations have joined together and are working with HUD to coordinate the effort.

HMIS is now used by the federal partners and their respective programs in the effort to end Homelessness, which include:

- U.S. Department of Health and Human Services (HHS)
- U.S. Department of Housing and Urban Development (HUD)
- U.S. Department of Veterans Affairs

The HMIS Data Standards (<https://www.hudexchange.info/resources/documents/HMIS-Data-Standards-Manual.pdf>) provide communities with baseline data collection requirements developed by each of these federal partners.

This manual is designed for CoCs, HMIS Lead Agencies, HMIS System Administrators, and HMIS Users to help them understand the data elements that are required in an HMIS to meet participation and reporting requirements established by HUD and the federal partners.

HUD is responsible for coordinating the collection of data, oversee HMIS rules and regulations, and report to Congress through the AHAR, and will continue to manage the HMIS regulations provide support and guidance to local CoCs and HMIS Lead Agency Agencies, and provide guidance to users in collaboration with the federal partner agencies. The 2014 release of the Data Dictionary and Manual is the first joint publication of HUD and the federal partners and is intended to provide guidance to communities around federal expectations for HMIS.

## **2.2 Regional Continuum of Care Council (RCCC)**

The San Diego Regional Continuum of Care Council (RCCC) has designated the Regional Task Force on the Homeless (RTFH) to serve as its HMIS Lead Agency. In that capacity, RTFH is responsible for the management and development of the RCCC's HMIS implementation. Under the guidance of the RTFH, Agencies with homeless-dedicated programs are required to participate in the RCCC's HMIS to support local data collection, service, and planning functions within the RCCC's jurisdiction. Participating Agencies are defined as those agencies that have signed Agency Participation Agreements. The RTFH encourages Agencies that provide beds and services funded by other federal, state, local, or private resources to also participate in the HMIS.

The RCCC includes all of the geography within San Diego County, including 18 incorporated cities and all unincorporated areas. For HMIS purposes, the San Diego Region is often described as the City of San Diego and the outlying County, or as composed of five sub regions, Central, East, South, North Inland, and North Coastal areas. These boundaries contain other HUD designated program components, including multiple Housing Authorities, thirteen (13) HUD geocode areas, three (3) local Emergency Solutions Grant (ESG) areas, ten (10) communities eligible for State ESG funds, as well as federally designated Community Development Block Grant (CDBG) entitlement areas, Housing Opportunities for Persons With AIDS (HOPWA) programs, HOME Investment Partnerships Programs (HOME), Veterans Administration (VA) service areas, Projects for Assistance in Transition from Homelessness (PATH), and Runaway and Homeless Youth (RHY) programs. The CoC's primary area of operations within the CoC geography includes the areas served by the program components listed above. This geography is referred to as the San Diego CoC Region (Region).

## **2.3 San Diego's HMIS Software**

The HMIS provides homeless service providers throughout the Region with a collaborative approach to data collection and client management.

The RCCC selected "ServicePoint," a web-based HMIS software owned by Bowman Systems to be the HMIS software of record. It empowers human services providers, agencies, coalitions, and communities to manage real-time client and services data. The RTFH contracts directly with Bowman Systems for this software and supports end-users with help desk, ongoing training, and project customization including development of project-specific assessments and settings. The RTFH works directly with Participating Agencies to identify needs and requirements for custom reports developed by the RTFH or canned reports made available by Bowman Systems.

ServicePoint features:

- Combine the ease of the internet and the performance of a powerful database;
- Protects client confidentiality by carefully restricting access;
- Has a robust client and referral tracking, case management, agency and program indexing;
- Has an advanced reporting tool to understand and use key data;
- Facilitates the secure sharing of data to help providers to effectively and efficiently perform client case management;
- Ensures client, project, and agency-level data is available and accessible to all Participating Agencies in accordance with Federal, State, and RCCC-approved visibility settings and data

sharing policies;

- User-friendly, requiring a minimum learning curve for data entry and generation of reports;
- Ensures program and agency-wide reports are easily produced by agencies; and
- Ensures providers can record detailed client profiles, assessments, referrals, history, and outcomes.

#### Benefits to Participating Agencies:

- Increased ability to prepare statistical and programmatic reports for funders, boards, and other stakeholders;
- Saves staff time needed to gather client data;
- Formulates statistics and completes funding reports;
- Increases ability to track client outcomes and measures the success of services provided;
- Increases ability to work collaboratively and to cooperate with other agencies to achieve meaningful results; and
- Significantly improves efficiency in delivering and managing services, resulting in tangible cost savings.

#### Benefits to Clients:

- Provides a comprehensive view of the client, minimizing data collection;
- Provides an ability to comprehensively coordinate client care in real time; and
- Provides a single client record for improved provision of services.

# 1. HMIS LEAD AGENCY MISSION AND CONTACT INFORMATION

## 1.1 Regional Task Force on the Homeless (RTFH)

### ***RTFH Mission***

“To provide comprehensive data and trusted analysis that empowers the entire community to identify, implement, and support efforts to prevent and alleviate homelessness.”

### **Contact Information**

<b>Role</b>	<b>Email/Contact</b>	<b>Function</b>
Executive Director	4699 Murphy Canyon Road San Diego, California 92123 Telephone: (858) 292-7627 Fax: (858) 292-7627 x11 Website: www.RTFHSD.org	CoC HMIS Lead Agency HMIS direction & oversight
HMIS System Administrator	Telephone: (858) 292-7627 x15	General HMIS Administration Oversight and supervision of technical HMIS team
HMIS Security Officer	Telephone: (858) 292-7627 x13	Monitor security of the HMIS Ensure HMIS Lead Agency and Participating Agency compliance with Security Policies and Procedures
HMIS Technical Team	Taskforce@RTFHSD.org	
HMIS Project Analyst	Telephone: (858) 292-7627	General technical support for HMIS issues related to end-user access, troubleshooting, information requests, system functionality errors, etc. Training
HMIS Data Analyst	Telephone: (858) 292-7627	Issues related to data quality, management, and/or mandated reports, report failure, etc.

## 1.2 Regional Continuum of Care Council (RCCC)

### ***RCCC Mission***

“The mission of the San Diego RCCC is to engage organizations in a community-based process that works to end homelessness for all individuals and families throughout the region and address the underlying causes of homelessness and to lessen the negative impact of homelessness on individuals, families and communities.”

[www.SanDiegoCoC.org](http://www.SanDiegoCoC.org)

## 3. ROLES AND RESPONSIBILITIES

### 3.1 General Compliance, Documentation, and Officials

#### *HMIS Lead Agency Responsibilities*

##### *Policy*

The HMIS Lead Agency will adopt and implement the Physical, Technical, and Administrative safeguards for the protection of information contained in the HMIS. The HMIS Lead Agency will be responsible for the organization and management of the RCCC's HMIS as outlined in the RCCC's Memorandum of Understanding with the HMIS Lead Agency.

Participating Agencies shall adopt, at a minimum, the HMIS Policies and Procedures as a baseline or develop their own where not in conflict with this Policy.

##### *Procedure*

The HMIS Lead Agency is responsible for all system-wide policies, procedures, communication, and coordination. It is also the primary contact with the software vendor, and is expected to implement all necessary system-wide changes and updates. The system is defined as the HMIS system.

In addition, the HMIS Lead Agency is responsible for all privacy concerns relating to the HMIS and serves as the Privacy Official (PO) for the RCCC.

The HMIS Lead Agency may amend the HMIS Policies and Procedures at any time, subject to the approval of the RCCC Data Advisory Committee (DAC). The DAC may bring issues to Regional Continuum of Care Council (RCCC) as necessary for resolution.

Amendments may affect data that had been entered in the HMIS before the effective date of any such amendment. This policy is consistent with current standards for HMIS as outlined in the most recently published HMIS Data Standards Manual.

The HMIS Lead Agency Executive Director (or his/her designee) will serve as the HMIS System Administrator whose primary function is to manage the HMIS in accordance with HUD and other federal agency guidelines.

#### *HMIS Lead Agency System Administrator Responsibilities*

The HMIS System Administrator shall:

- Provide training support to Participating Agencies by determining training needs of HMIS end-users, developing training materials, and providing technical support by troubleshooting data with Participating Agencies;
- Manage end-user accounts and access controls;
- Identify and develop system enhancements and communicate enhancements and/or changes to Participating Agencies;
- Communicate system-related information to Participating Agencies;
- Develop and modify reports for end-users as requested;
- Maintain files of the name and contact information of the current Security Officer for each Participating Agency;

- Ensure, through contract or instruction, that Participating Agencies will:
  - Identify a Participating Agency Administrator who serves as the primary contact between the Participating Agency and the HMIS Lead Agency on matters outlined in this document including but not limited to:
    - Providing HMIS support for their agency and escalating unresolved issues to the HMIS System Administrator;
    - Notify all end-users from their agency of system-wide changes and other relevant information;
    - Ensure all end-users from their agency are trained in the HMIS;
    - Notifies the HMIS Lead Agency of personnel changes;
    - Monitors their agency's compliance with standards of confidentiality and data collection, entry and retrieval;
    - Ensures all authorized end-users from their agency complete training before requesting access to the HMIS and understand and adhere to the HMIS User Agreement;
    - Ensures Participating Agency adherence to HMIS Policies and Procedures; and
    - Makes continuous efforts to detect violations of privacy and security and respond to any indication or report of violations.

### ***HMIS Lead Agency Security Officer Responsibilities***

The HMIS Lead Agency will name one employee as HMIS Security Officer.

The duties of the HMIS Lead Agency Security Officer will be included in the individual's job description and must be signed by the HMIS Security Officer to indicate understanding and acceptance of these responsibilities. The HMIS Security Officer's contact information is incorporated into these HMIS Policies and Procedures by reference.

Duties include, but are not limited to:

- Work cooperatively with the HMIS System Administrator to review the HMIS Policies and Procedures on an annual basis or at the time of any changes to the following:
  - The security management process, the methods of data exchange, and any HMIS data or technical requirements issued by HUD and the federal partners;
  - In the event that changes are required to the HMIS Privacy and Security Policies and Procedures, the Security Officer will work with the HMIS System Administrator to develop recommendations for review, modification, and approval by the DAC;
  - Review the HMIS Security Certification Checklist annually, test the HMIS Lead Agency security practices for compliance, and work with the HMIS System Administrator to coordinate communication streams;
  - Certify that the HMIS Lead Agency adheres to the HMIS Privacy and Security Policies and Procedures;



- Demonstrate risk in reduction over time;
  - Develop mitigation plans for any identified security shortfall, including milestones to demonstrate the reductions in risk over time;
  - Implement any approved plan for mitigation of shortfalls and provide appropriate updates on progress to the DAC;
  - Respond to any security questions, requests, or security breaches, and communicate security-related HMIS information to each Participating Agency Security Officer and the Participating Agency's end-users, and will inform the DAC as appropriate; and
  - Monitor HMIS Audit Reports monthly.
- The HMIS Security Officer and any user employed or retained by the HMIS Lead Agency able to access HMIS data will undergo criminal background verification. Records of the completed background checks (though not the results) are subject to inspection by the RCCC;
  - The HMIS Lead Agency will follow its own policies regarding hiring individuals with criminal justice histories, as long as they comply with all relevant laws; and
  - The HMIS Lead Agency will not hire individuals whose background checks reveal criminal histories related to identity theft or fraud. The HMIS Lead Agency will manage the results of any background checks conducted on a case-by-case basis.
  - The HMIS Lead Agency will maintain all policies and procedures, including changes, in either electronic or paper format, for a period of six (6) years after creation or most recent revision and adoption; and
  - The HMIS Lead Agency will also document all changes to electronic systems such as server change out, new applications, changes in technology vendors or any substantive change to the infrastructure of systems.

### ***Participating Agency Responsibilities***

Participating Agency shall adopt, at a minimum, the HMIS Privacy and Security Policies as a baseline or develop their own where not in conflict with the HMIS Privacy and Security Policies and Procedures.

- Participating Agencies may require more rigorous privacy standards but they must, at minimum, meet and not contradict the HMIS Privacy and Security Policies and Procedures;
- Participating Agencies that elect to adopt different Privacy and Security Policies shall attach a copy of the policies to the HMIS Security Certification Checklist;
- More stringent mandates shall be submitted to the HMIS System Administrator for incorporation into these policies where applicable;
- Participating Agencies shall annually self-certify compliance with the HMIS Privacy and Security Policies and Procedures unless they have developed and operate under their own;
- Participating Agencies shall record compliance with the HMIS Privacy and Security Policies and Procedures, or their own if so elected, through completion of the HMIS Security Certification Checklist;



- Failure to submit the HMIS Security Certification Checklist within 30 (thirty) days of its due date in any given year will be considered to be a violation of the terms of the HMIS Agency Participation Agreement and these policies;
- Each Participating Agency shall indicate within the HMIS Security Certification Checklist, whether or not it has:
  - Adopted the HMIS Privacy and Security Policies and Procedures; or
  - Adopted different Privacy and Security Policies and Procedures that meet the requirements outlined in the HMIS Privacy and Security Policies and Procedures.
- Participating Agencies must maintain documentation regarding changes to their Security and Privacy policies for a period of six (6) years beyond adoption.

A Participating Agency's Privacy and Security Policies shall at minimum:

- Specify the purpose for collecting the information;
- Specify all potential uses and disclosures of information;
- Specify the time period for which the hard copy and electronic data will be retained at the organization;
- Specify the method for disposing of data or removing identifiers from personal information that is not in current use;
- State the process and applicability of amendments;
- Offer reasonable accommodations for persons with disabilities and/or language barriers;
- Allow the client the right to inspect and to have a copy of their client record and offer to explain any information the individual may not understand;
- Include reasons and conditions when a Participating Agency would not release information to any party not authorized by the client; and
- Specify a procedure for accepting and considering questions or complaints about the Privacy and Security Policy.

### ***Participating Agency Data Owner***

The Participating Agency Data Owner is an employee of the Participating Agency who is ultimately responsible for the protection and use of the data entered into the HMIS and shall:

- Develop Participating Agency procedures for determining and granting access to systems that comply with applicable Federal and State laws that govern the privacy and confidentiality of data;
  - Participating Agency may impose greater restrictions not specifically covered by Federal or State law, or other regulations; and
  - Data sharing restrictions requested by the client and accepted by the Participating Agency may also impose a data access restriction.
- Monitor end-user data access; and

- Determine Participating Agency data retention schedule.

Each Participating Agency is responsible for conducting a security review annually and certifying that each participating project is in compliance with minimum standards of the HMIS Privacy and Security Policies and Procedures and HMIS Data and Technical Standards. Participating Agencies shall include a provision in their policies and procedures to comply with this policy.

Participating Agency network design should allow for uninterrupted communication between workstations and the internet. All communication between servers should be designed to be performed on a Local Area Network (LAN).

Participating Agency hard copies of data stored in HMIS shall be treated in the following manner:

- End-users are responsible for maintaining the security of all client data extracted from the HMIS, including hard copies, and any data collected for purpose of data entry into the HMIS;
- Hard copy records containing Personally Identifiable Information (PII) must be disposed of through means such as cross cut shredding and pulverizing or use of a Certified Destruction Vendor;
- Records shall be kept in individual locked files or in rooms that are locked when not in use;
- Records in use (i.e. on the desktop) shall be maintained in such a manner as to prevent exposure of information to anyone other than the user directly utilizing the record;
- End-users or other staff shall not remove records or other information from their place of business without written permission from appropriate supervisory staff;
  - Written permission must specify the reason for removal of information and handling procedures while off site;
  - Staff shall maintain information in a secure manner while off site; and
  - Records transferred from one location to another physical location (i.e., different building), must be placed in sealed envelopes and utilize a tracking receipt to capture in transit responsibility up to and including delivery of records.
- Faxes or other printed documents with HMIS information shall not be left unattended; and
  - Fax machines and printers shall be kept in secure areas.
- After completion of faxing, copying or printing information, documents should be removed from the machines immediately; and
  - The Participating Agency Data Owner may delegate the responsibility of the day-to-day maintenance of the data, which then becomes the responsibility of the Participating Agency Administrator (defined below).

### ***Participating Agency Administrator Responsibilities***

Each Participating Agency must designate an Agency Administrator and a backup Agency Administrator responsible for the oversight of all activities that generate or have access to client data in the HMIS to ensure adherence to HMIS Policies and Procedures in this document. Changes to Agency Administrators must be reported to the HMIS Lead Agency within ten (10) business days.

The Participating Agency Administrator shall be responsible for:

- Reviewing the Participating Agency's Privacy and Security Policies to ensure consistency with the HMIS Privacy and Security Policies and Procedures;
- Providing oversight of all personnel who generate or have access to client data in the HMIS for HMIS Policy & Procedure compliance;
- Serving as the primary contact between end-users and the HMIS System Administrator;
- Providing Participating Agency technical support by troubleshooting data and escalating unresolved issues to the HMIS System Administrator;
- Notifying members of their Participating Agency of any system-wide changes and other relevant information;
- Offering training support to Participating Agency end-users when approved by the HMIS Lead Agency (ex. "Train-the-Trainer");
- Notifying the HMIS Lead Agency of Participating Agency personnel changes;
- Monitoring compliance with standards of confidentiality and data collection, entry, and retrieval related to the HMIS;
- Ensuring all authorized end-users are trained before being granted access to the system and are adhering to the HMIS User Agreement (Appendix B);
- Ensuring Participating Agency adherence to internal Privacy and Security Policies and Procedures and contractual privacy and security procedures;
- Making continuous efforts to detect violations of privacy and security of the HMIS and respond to any indication or report of violations; and
- Providing the name and contact information of the Participating Agency's Security Officer.

### ***Participating Agency Security Officer Responsibilities***

Each Participating Agency must designate an Agency Security Officer who will serve as the Participating Agency Security Officer for the HMIS and is responsible for ensuring compliance with the security standards outlined in this document.

Participating Agencies must provide the name and contact information of the Agency Security Officer to the HMIS Lead Agency and report changes to that information within ten (10) business days.

Participating Agency Security Officer responsibilities include but are not limited to:

- Review and testing the Participating Agency's security practices for compliance;
- Certify the Participating Agency's adherence to the HMIS Security Policy and Procedures;
- Develop mitigation plans for identified security shortfalls including milestones;
- Demonstrate reduction in risk over time;
- Complete HMIS Security Certification Checklist and submit it within thirty (30) days of its due date to the HMIS Security Officer;

- Communicate any security questions, requests, or security breaches to the Participating Agency Administrator;
- Communicate security-related HMIS information relayed from the HMIS Security Officer to the Participating Agency end-users; and
- Complete security training offered by the HMIS Lead Agency.

## **3.2 Monitoring and Auditing**

### ***Policy***

The HMIS Lead Agency will develop monitoring procedures so regular checks are performed on system usage, security attack vectors, and other risks to information. Mitigation plans, based on risks, shall be developed to reduce risk associated with an event or identified system vulnerability.

### ***Procedure***

The HMIS Lead Agency will develop a monitoring and investigation process including a communication plan for informing the DAC, Participating Agency Administrators, and Participating Agency Security Officers of issues related to privacy and security including:

- Identification of risks associated with the connection between the HMIS and Participating Agencies shall be addressed in contractual language to ensure the reduction of risk;
- Development and implementation of Participating Agency requirements for reporting and investigation of complaints on privacy or security policies, security incidents, or privacy breaches;
  - The HMIS Lead Agency will communicate any reported security breaches or failures to the Participating Agency Security Officer with mutual clients within 24 hours of the discovery.
- Privacy and Security Policy and Procedure concerns reported to the HMIS Lead Agency; and
- Processes established by Participating Agencies for receiving and reviewing complaints from clients about potential violations of HMIS policies.

The HMIS software vendor will monitor HMIS for security breaches and suspected system security failures.

- Breaches or system security failures will be reported to the HMIS Security Officer and HMIS System Administrator;
- Corrective actions, potentially in the form of sanctions, may be implemented if necessary to mitigate the identified risk; and
- Any sanction by RTFH may be appealed, after the completion of investigation, to the DAC for relief of the severity of the penalty.

### ***Participating Agency Procedure***

All suspected breach of security, or any incident in which unauthorized use or disclosure of information has occurred, or where the HMIS may have been accessed or used in a manner inconsistent with the HMIS Policies and Procedures, must be reported to the HMIS Security Officer.

Procedures include:

- HMIS end-users are obligated to report to their Participating Agency's HMIS Security Officer suspected instances of noncompliance with established HMIS Policies and Procedures that may leave HMIS data vulnerable to intrusion;
- The HMIS Lead Agency is responsible for reporting security incidents involving the real or potential intrusion of HMIS to the DAC;
- Each Participating Agency is responsible for reporting any security incidents involving the real or potential intrusion to the HMIS Security Officer;
- Participating Agencies will regularly check their system for security breaches and failures by running reports such as User Login, User Information, and Audit Report. Any such breaches or failures will be reported to the HMIS System Administrator and HMIS Security Officer;
- The HMIS Lead Agency will notify the DAC of critical security breaches that require necessary corrective action to mitigate the identified risk;
- End-users must report security violations, including suspected uncorroborated violations, as soon as discovered to their Participating Agency Administrator or Participating Agency Security Officer;
- Participating Agency will relay reports within one (1) business day of receipt to the HMIS Lead Agency Security Officer
- A complete investigation, or determine and mitigation actions, is not required prior to the initial reporting;
- Participating Agencies shall report any violation of the HMIS Policies and Procedures to the HMIS Lead Agency; and
- Reporting does not preclude or substitute for any corrective actions determined by Participating Agency.

Each Participating Agency is responsible for monitoring its projects to ensure the standards set forth in these HMIS Policies and Procedures are met to the greatest possible extent, and that data quality issues are quickly identified and resolved. Each Participating Agency is responsible for addressing and correcting any issues identified through the monitoring process.

Any Participating Agency failing to meet data quality standards will be in violation of the terms of the HMIS Agency Participation Agreement.

Participating Agency Security Officer will be responsible for:

- Testing its security practices; and
- Completing an HMIS Security Certification Checklist;
  - Failure to submit the Checklist within thirty (30) days of its due date in any given year may require the Participating Agency to undergo graduated sanctions as defined by the RCCC;
  - Participating Agencies may appeal sanctions to the DAC;
  - The DAC may sanction the Participating Agency, including revocation of access to the HMIS and CoC funding for that year, until such time as the DAC determines the Participating Agency has achieved compliance. The DAC may elevate issues to the RCCC Governance Board.

The Participating Agency's HMIS Security Certification Checklist will indicate whether it meets each of the requirements outlined in the HMIS Privacy and Security Policies and Procedures.

If a requirement is not met at the time of execution of the HMIS Agency Participation Agreement, or at the time of annual certifications thereafter, the Participating Agency must establish a date no later than three (3) months from the certification review date by which that requirement will be met. An updated HMIS Security Certification Checklist indicating full compliance will be provided to the HMIS Lead Agency by the target date or the Participating Agency will be in violation of the terms of the HMIS Participation Agreement and could be subject to sanctions.

## 4. IMPLEMENTATION

### 4.1 HMIS Participation Agreement

#### *Policy*

The Executive Director (and/or designee) of any Participating Agency shall execute, comply, and enforce the HMIS Participation Agreement (Appendix A).

#### *Procedure*

Participating Agencies wishing to participate in the HMIS must sign an HMIS Participation Agreement (Appendix A) before any end-user is allowed access to the HMIS.

### HMIS User Agreement Requirement

#### *Policy*

End-users of Participating Agencies shall execute, and comply with the HMIS User Agreement (Appendix B).

#### *Procedure*

The HMIS System Administrator shall provide end-users authorized by Participating Agencies with an HMIS User Agreement (Appendix B) for signature. The HMIS System Administrator will maintain HMIS User Agreements of all end-users.

The Participating Agency end-user must sign an HMIS User Agreement and be trained by the HMIS Lead Agency before being granted access to the HMIS. The HMIS Lead Agency will train the Participating Agency end-users to use the HMIS software upon execution of the HMIS Participation Agreement. HMIS access will only be granted after required training is satisfactorily completed. Participating Agency end-user access and passwords will be granted upon completion of mandatory training.

### 4.2 HMIS Data Collection and Data Quality

#### *Policy*

Participating Agencies shall enter data into the HMIS in real time or within three (3) business days of collecting the information. At minimum, data entered must include Universal Data Elements (UDEs). Program Specific Data Elements (PSDEs) are required to be entered as outlined in the most recently published HMIS Data Standards Manual. Participating Agencies may also be required to collect additional data fields locally identified to support specific regional projects.

#### *Procedure*

#### *Data Entry*

Participating Agencies must enter:

- Universal Data Elements (UDEs) as documented in the most recently published HMIS Data Standards Manual as the minimum set of data elements for all clients served by projects;
- Program-Specific Data Elements (PSDEs) as required by the Participating Agency and/or funder as documented in the most recently published HMIS Data Standards Manual;
- Participating Agencies must also collect data fields locally identified for specific programs; and

- “Client Doesn’t Know” and “Client Refused” must only be used to indicate the client did not know or the client refused to provide the data. “Data Not Collected” must only be used to indicate the data was not collected.

### **Data Quality and Completeness**

All data entered into the HMIS shall be complete. Partially complete or missing data (e.g., digit(s) in a SSN, year of birth, information on disability or veteran status) can negatively affect the ability to provide comprehensive care to clients. Missing data could mean the client does not receive services that could help them become permanently housed and end their homelessness.

The goal is to collect one hundred percent (100%) of all data elements. However, the RCCC recognizes this may not be possible in all cases. Therefore, it has established an acceptable range of Missing (null) and Incomplete (Client Doesn’t Know/Client Refused) responses, depending on the data element and the type of program entering data.

All programs using the HMIS shall enter data on one hundred percent (100%) of the clients they serve.

#### **Acceptable Range of Missing and Incomplete Responses:**

Data Element	Required For	Residential Projects		Street Outreach and Services Only Projects	
		Missing	Incomplete	Missing	Incomplete
Universal Data Elements (UDEs):					
Name	All	<5%	<7%	<10%	<12%
Social Security Number	All	<5%	<7%	<10%	<12%
Date of Birth	All	<5%	<7%	<10%	<12%
Race	All	<5%	<7%	<10%	<12%
Ethnicity	All	<5%	<7%	<10%	<12%
Gender	All	<5%	<7%	<10%	<12%
Veteran Status	Adults	<5%	<7%	<10%	<12%
Disabling Condition (Y/N)	Adults	<5%	<7%	<10%	<12%
Residence Prior to Project Entry	Adults/HoH	<5%	<7%	<10%	<12%
Length of Stay in Previous Place	Adults/HoH	<5%	<7%	<10%	<12%
Destination (Exit)	Adults/HoH at Exit	<5%	<7%	<10%	<12%
Relationship to Head of Household	All	<5%	<7%	<10%	<12%
Client Location	HoH ONLY	<5%	<7%	<10%	<12%
Continuously Homeless for at Least One Year	Adults/HoH	<5%	<7%	<10%	<12%
Number of Times Client Homeless in Past 3 Years	Adults/HoH	<5%	<7%	<10%	<12%
If 4 or More (for Above), Total Number of Months	Adults/HoH 4+ONLY	<5%	<7%	<10%	<12%
Total Number Months Cont. Homeless Prior to Entry	Adults/HoH	<5%	<7%	<10%	<12%
Status Documented?	Adults/HoH	<5%	<7%	<10%	<12%
Additional Data Elements:					
Domestic Violence Victim/Survivor	Adults/HoH	<5%	<7%	<10%	<12%
Service	Adults/HoH	<5%	<7%	<10%	<12%
Income Received (Y/N)	Adults/HoH	<5%	<7%	<10%	<12%
Non-Cash Benefit Received (Y/N)	Adults/HoH	<5%	<7%	<10%	<12%
Covered by Health Insurance (Y/N)	Adults/HoH	<5%	<7%	<10%	<12%
HUD Verification: (Elements measure completeness at Entry ONLY)					



Disability Type	All	<5%	<7%	<10%	<12%
Income Source	All	<5%	<7%	<10%	<12%
Income Amount (for all valid sources)	Adults/HoH	<5%	<7%	<10%	<12%
Non-Cash Source	Adults/HoH Rec Inc = Y	<5%	<7%	<10%	<12%
Health Insurance Type	Adults/HoH	<5%	<7%	<10%	<12%
<b>Other Federally Mandated Data Elements: (Based on Funding Source, as Applicable)</b>					
Various Data Elements (as outlined in the most recently published HMIS Data Standards)	As Applicable	<5%	<7%	<10%	<12%

### **Bed/Unit Utilization Rates**

Acceptable range of bed/unit utilization rates for established projects:

- Emergency Shelters (ES): 75%-105%;
- Transitional Housing (TH): 80%-105%; and
- Permanent Supportive Housing (PSH): 85%-105%.

Projects outside of this acceptable range may provide a brief explanation to the HMIS Lead Agency.

New projects may require time to reach the projected occupancy numbers and will not be expected them to meet the utilization rate requirement during the project's first operating year.

### **Timeliness**

Participating Agencies are expected to enter data into the HMIS in real-time or within three (3) business days of collection.

- Changes for clients active in the HMIS should occur at point of service or within thirty (30) business days a Participating Agency learns of a material change.

### **Accuracy**

All data entered into the HMIS shall be a reflection of information provided by the client. Intentionally recording inaccurate information is strictly prohibited, unless in cases when a client refuses to provide correct personal information (see below). All data in HMIS shall be collected and entered in a common and consistent manner across all projects.

Only when a client refuses to provide personal information and the program funder does not prohibit it, is it permissible to enter client data under an alias.

- The Participating Agency is responsible to the funding source for any duplication of services that results from knowingly entering false information (i.e., hiding the actual name under an alias).

### **Monitoring**

The HMIS Lead Agency shall conduct annual reviews and upon request of the DAC and/or RCCC Board provide project-level monitoring reports to the DAC, Evaluation Committee, or the general public for transparency and for the purpose of ensuring projects comply with standards outlined by local, state, and federal partners.

Unless a more accurate method is available (e.g., client interview, third party verification, etc), a sampling of client source documentation can be used to measure the data accuracy rate. The HMIS Lead Agency may request client files or intake forms during the annual HMIS Security Certification

Checklist process and compare the source information to the information in the HMIS. Only those parts of the client file containing the required information will be reviewed, excluding any non-relevant, personal, or Participating Agency-specific information.

The HMIS Lead Agency shall provide Participating Agencies the training and tools necessary for Participating Agencies to self-monitor project performance.

## **4.3 Technical and Security Standards**

### ***Policy***

Participating Agencies must meet the technical standards outlined below to participate in the HMIS.

### ***Procedure***

#### **Supported Browser Brands**

Microsoft Internet Explorer versions 8, 9, 10
Google Chrome (recommended)
Mozilla Firefox
Apple Safari

#### **Java**

<b>Required</b>	<b>Recommended</b>
Any version of Java	Version 7 release 76 (32 bit)

#### **Mobile Devices**

Apple iPad with latest version of IOS; version 8.1.2
--

#### **Operating Systems**

<b>Operating System</b>	<b>Required</b>	<b>Recommended</b>
Windows Vista	Any version of Internet Explorer 2 GB of RAM	Any version of Internet Explorer other than version 9. 4 GB of RAM
Windows 7	Version 32bit 2GB of RAM	Windows 7 version 64bit 4 GB of RAM
Windows 8	Run with most version of Java (version Java 7 release 76), with “Modern” version of Internet Explorer	Run with most version of Java (version Java 7 release 76), with “Desktop” version of Internet Explorer
Windows XP, Windows 8 RT, and Windows 10	Not recommended operating systems due to a lack of compatibility and support with ServicePoint.	

Connection to the Internet is the sole responsibility of the Participating Agency and is a requirement to participate in the HMIS.

Participating Agency network design should allow for uninterrupted communication between workstations and the internet. All communication between servers should be designed to be performed on Local Area Network (LAN).

For security purposes, all computers must have the following:

- An updated and adequate firewall protection; and
- Virus protection software in which virus definition must be updated regularly.

Similarly, Participating Agencies are required to establish a policy for disposal of or anonymization of information not in current use seven (7) years after the information was created or last changed unless prohibited.

### ***Maintenance of Onsite Computer Equipment Policy***

Participating Agencies will commit to a reasonable schedule of equipment maintenance to sustain an efficient level of system operation.

#### ***Procedure***

The Executive Director (and/or designee) of Participating Agencies will be responsible for the maintenance and disposal of onsite computer equipment. This includes:

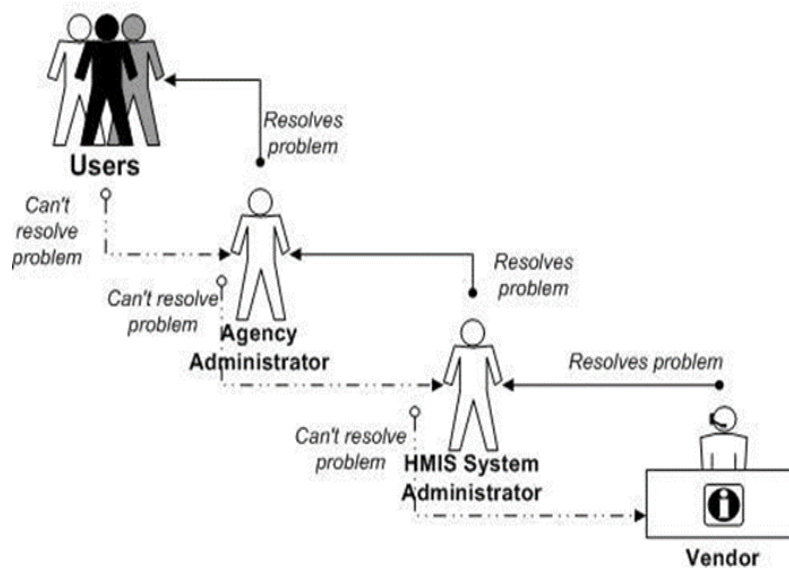
- Purchase of and upgrades to all existing and new computer equipment for utilization in the system;
- Workstations accessing the system must have a username/password to log onto Microsoft Windows and/or Mac Operating System(s);
- Workstation accessing system must have locking, password-protected screen saver; and
- All workstations and computer hardware (including Participating Agency network equipment) must be stored in a secure location (locked office area).

### ***HMIS Technical Support Protocol Policy***

The HMIS Lead Agency will provide technical support to all Participating Agencies as needed.

#### ***Procedure***

- Participating Agency end-users should first seek technical support from the Participating Agency Administrator;
- If more expertise is required to troubleshoot the issue, the Participating Agency Administrator or end-user will contact the HMIS Lead Agency's Technical Team;
- Technical support hours are Monday through Friday (excluding holidays) from 8:00 am to 5:00 pm;
- The Participating Agency Administrator will work closely with the HMIS Lead Agency to identify details of technical problems experienced;
- The HMIS System Administrator or Technical Team will respond to all email inquiries and issues within one (1) business day but no more than three (3) business days.



## System Availability Policy

The HMIS will make all attempts to be available to Participating Agency end-users Monday – Friday during normal business hours, holidays excluded. The HMIS Vendor or the HMIS Lead Agency will inform Participating Agency end-users of any interruption in service as soon as reasonable.

### Procedure

- The HMIS Vendor will communicate to the HMIS Lead Agency any necessary downtime for system upgrades and patches;
- In the event it is determined the HMIS accessibility is disabled system-wide, the HMIS Lead Agency will work closely with the HMIS Vendor to resolve any issues; and
- The HMIS Lead Agency will send communication to the Participating Agency Administrators within two (2) hours of problem awareness and provide an estimated time of system availability.

## 4.4 HMIS Participation Fees

### Policy

HMIS participation fees include the cost of Participating Agency end-user licenses as required by the HMIS Vendor. In addition to costs associated with licensing, the HMIS Lead Agency may charge reasonable technical support fees. Depending on funding availability, the HMIS Lead Agency may, at its discretion, waive or reduce fees to encourage HMIS participation for Participating Agencies.

### Procedure

The HMIS Fee Schedule will be included as an attachment to the HMIS Participation Agreement (Appendix A). The HMIS fee structure will be reviewed by the DAC annually. Changes to the HMIS Fee Structure must be approved by the RCCC Governance Board.

## 4.5 Training, Ethics, and Sanctions

### Policy

All Participating Agency end-users shall receive privacy, security, ethics, and sanctions policies training related to the HMIS prior to accessing the system.

Each Participating Agency end-user must complete the required trainings relevant to their user role prior to receiving access to the HMIS.

### Training Procedure

The HMIS Lead Agency will provide Participating Agency end-users a copy of the HMIS Policies and Procedures. Additionally, the HMIS Lead Agency will provide:

- Basic User Training to new Participating Agency end-users;
- Basic User Training to Participating Agency Administrators for support of agency personnel, if applicable; and
- Training in security-related requirements such as:
  - Prohibition on sharing usernames or passwords;
  - Allowing others to occupy their work station (use their computer) when logged into the HMIS; and
  - Writing/Posting user IDs and/or password where other may access them.

Participating Agency End-users must successfully complete the Basic User Training and pass the exam to demonstrate proficiency in the system and understanding of the HMIS Policies and Procedures.

### Trainings

Course Description	Course Detail	Required
HMIS Basic User	Policies and Procedures, review of HMIS Data and Technical Standards, Privacy and Mandatory Collection Notices and consents, navigating the HMIS.	All new Participating Agency end-users, one time.
HMIS Refresher	Review of navigating the HMIS, review of HMIS Data and Technical Standards	All existing Participating Agency end-users, annually.
Ethics and Confidentiality	HMIS ethics and confidentiality	All new and existing Participating Agency end-users, one time.
Privacy and Security *Mandatory new course	Role-based HMIS Privacy and Security standards, policies, and procedures.	All new and existing Participating Agency end-users, one time.
Participating Agency Administrator	Navigating client-level and administrative level data	Participating Agency Administrators and backup Participating Agency Administrators, one time.
Reports	Running and understanding management reports, such as Advanced Reporting Tool (ART) reports	All Participating Agency end-users who run ART reports, one time.

The HMIS System Administrator shall maintain documentation that each Participating Agency end-user has completed training prior to gaining system access and annually thereafter.

### **Sanctions Procedure**

The HMIS Lead Agency will apply progressive discipline to HMIS Lead Agency workforce members who violate HMIS Policies and Procedures, or law.

Participating Agency staff who violate HMIS Policies and Procedures are subject to revocation of HMIS access and may be subject to criminal investigation.

Regardless of the Participating Agency end-user's position, discipline shall be based on:

- The severity of the incident;
- The asset value;
- Impact on funding;
- Mitigating circumstances;
- Repetitive nature of the incident; and
- Previous behavior.

#### **Progressive Discipline Severity Groups**

##### **Group 1**

- Not signing off HMIS when leaving a work area;
- Inadvertent disclosure of HMIS information to wrong individual; and
- Failure to follow appropriate guidelines for use of fax, mailing, email, computer or other transmission of client information causing a disclosure to an unintended recipient.

##### **Group 2**

- Sharing password; and
- Accessing confidential information such as medical, billing or demographic information on a client the Participating Agency end-user has no job-related responsibility for, including friends, family, and the Participating Agency end-user's own record.

##### **Group 3 - Any offense results in termination from the HMIS**

- Using a coworkers password without their knowledge;
- Releasing information for personal gain;
- Releasing information with intent to harm the reputation of the individual or agency; and
- Unauthorized or impermissible disclosure or access of:
  - Mental Health or Alcohol Drug information;
  - HIV test results; and
  - Records of sexual assault or any condition with special protection from the state or federal government.

### ***Ethics Procedure***

These general principles form the ethical or professional standards of conduct necessary for access to the HMIS. Each Participating Agency end-user shall adhere to the delivery of services with the highest standards of professionalism, integrity, and competence. This set of principles applies to all HMIS Participating Agency end-users including employees, temporary workers, and volunteers.

- Perform all duties in compliance with the spirit and letter of federal, state, and local laws, and avoid any involvement in illegal, unethical, or improper conduct;
- Conduct duties in conformance with all Participating Agency policies and procedures;
- Create a work environment that promotes open and honest communication, and encourages raising ethical concerns without fear of retribution or retaliation; and
- Assume responsibility for knowing, understanding, and having a practical working knowledge of the laws and regulations applicable to the job.

### ***Participating Agency Procedure***

Participating Agencies shall follow their own policies regarding background checks and hiring individuals (including volunteers) with criminal histories, as long as they comply with all relevant laws.

Participating Agencies that request access for individuals who have not been subject to a background check or where the Participating Agency allows individuals with criminal histories related to identity theft or fraud assume all liabilities resulting from those actions.

The Participating Agency Security Officer will document each Participating Agency end-user has completed security training prior to requesting system credentials and annually thereafter.

Participating Agencies are required to have a Code of Conduct or Ethics Policy that aligns with the HMIS Lead Agency's Code of Ethic. Annual ethics training is required and written confirmation that each HMIS end-user has acknowledged and agrees to the policy.

Each Participating Agency is required to have a Progressive Discipline Policy.



## 5. SECURITY AND PRIVACY

### *Policy*

The HMIS Privacy and Security Policies and Procedures apply to any person accessing HMIS data, however, Participating Agencies subject to more restrictive regulations will be honored. In order to incorporate any Participating Agency's more restrictive regulations, additional implementation elements may be utilized to provide a cohesive framework for policies and procedures.

### *Procedure*

All HMIS Lead Agency assets (e.g., workstations, laptops, and other systems or devices that process and/or store HMIS information) must be protected by commercial anti-virus and Internet Security Software solutions.

- HMIS Lead Agency devices used to access HMIS shall utilize a firewall between the workstation and any external system including the Internet;
- Security solutions must be updated when new versions or releases become available;
- Security software and operating system patches shall be applied within a reasonable time when they become available; and
- Any HMIS information stored on media shall be encrypted.

Participating Agency End-users are advised that these policies do not allow any use that is unlawful or other applicable rules and regulations, or is specifically prohibited by this policy or another applicable agency policy.

Under no circumstances will end-users store Personally Identifiable Information (PII) on any personally owned media; end-users may not place PII on a work-owned USB drive for personal use.

PII and removable data devices (e.g., USB drives, CDs, and external drives) must be protected by appropriate physical means from modification, theft, or unauthorized access. Such records and confidential information contained therein remain subject to the HMIS Policies and Procedures. When these media have reached the end of their useful life, the data will be disposed of in a manner consistent with the procedures outlined in this policy.

### 5.1 Risk Analysis Management

#### *HMIS Lead Agency Risk Analysis*

The HMIS Security Officer, in conjunction with executive management, and the HMIS Lead Agency Privacy Officer, will perform a modified Security Risk Analysis (RA) in accordance with the National Institute of Standards and Technology (NIST). The minimum content of the RA shall consist of:

- List of assets (i.e. hardware, software, data, physical sites);
- Threats to each of the listed assets (ex.: hacking, malware, misuse of data, burglary);
- Likelihood threats and impact of threat exploitation; and



- Heat map of likelihood versus impact.

Any decisions on selection of security measures to reduce risk must be documented and based on the RA.

Lack of funds to support security measures may be a mitigating factor for the current fiscal term, however lack of funds should be addressed in a Short Term Security Mitigation Plan that is three (3) to five (5) years in implementation length and addresses funding.

### **HMIS Vendor**

The RCCC is responsible for the process and selection of the region's HMIS Vendor.

The HMIS Lead Agency is responsible for ensuring HMIS is operated in accordance with HMIS standards via the HMIS Vendor Contract.

The HMIS Lead Agency will include provisions in the HMIS Vendor contract requiring the physical security of the facilities and media storing the data is protected.

- The HMIS Vendor is required to take steps, consistent with the most current HMIS technical and security standards, to prevent unauthorized access to the data and the software (See Section 5.2 "Access Controls");
- The HMIS Lead Agency, through the HMIS Vendor contract, will take measures to ensure the system is protected from intrusion and risks to data loss is minimized;
- The HMIS Vendor will maintain software consistent with the most up-to-date HMIS technical and security standards:
  - The HMIS Vendor must retain a log of system changes and/or software version changes;
  - Security gaps or issues, identified by the HMIS Vendor or HMIS Lead Agency, shall be resolved in an expedient manner; and
  - The HMIS Lead Agency is responsible for ensuring all vendor-released enhancements, upgrades and bug fixes are applied promptly.

Participating Agencies shall be notified of changes by HMIS Lead Agency where appropriate.

### **Data Backup**

HMIS Vendor shall store and maintain backup versions of the data in a separate physical location consistent with the most up-to-date HMIS technical and security standards. Examples include:

- HMIS Vendor servers on which the HMIS data is stored shall utilize firewalls;
- HMIS Vendor will also perform daily, weekly and monthly data backups;
  - Backups will be held offsite at a secondary (hot) data center;
    - Intra-day and day-end backups will be held on a local server as well as offsite at the secondary data center;
    - The failover function will be tested at least once per year and after each major system upgrade to ensure accurate continuous backup.

The HMIS Vendor shall:

- Maintain an accessible audit trail of the system;
  - Audit trail must capture user activity;
    - Activity will be monitored by the HMIS Lead Agency and the HMIS Lead Agency Security Officer will monitor audit reports monthly for security breaches or behavior inconsistent with this HMIS Privacy Policy and Procedure.

### ***Participating Agency Procedure***

- Conducting annual HMIS Privacy and Security Policy and Procedure reviews;
- Certifying each participating project is in compliance with the minimum standard of the HMIS Privacy and Security Policy and HMIS guidelines;
  - The HMIS Lead Agency retains the right to conduct at least annual site visits to ensure compliance;
    - Annual site visits will be announced and the HMIS Lead Agency may conduct unannounced site monitoring visits at its discretion; the HMIS Lead Agency will provide Participating Agencies 24 hours' notice for unannounced visits.
- Developing and maintaining Privacy and Security Policies and Procedures consistent with the most recently published HMIS Data Standards, and at minimum:
  - Mandate Participating Agency devices, used to access or store HMIS data, maintain a firewall between the device and any external system, including the Internet;
  - Mandate anti-virus software for Participating Agency end-users; and
  - Install, maintain, and update anti-virus software and internet security solutions such as firewalls, malware detection, and system intrusion detection for Participating Agency devices used to access HMIS;
    - Security solutions, and operating systems must be updated when new versions, patches or releases become available.
- Specify the Participating Agency Security Officer who is responsible for managing the security of Participating Agency hardware and software;
- Specify the frequency with which the software will be updated; and frequency of portable and desktop device security scanning; and
- Notify the HMIS Lead Agency of security issues within three (3) business days.

### ***Physical Safeguards***

Participating Agencies are contractually required to maintain procedures ensuring the physical security of facilities and media in which HMIS data is stored.

### ***Technical Safeguards***

Participating Agencies shall maintain and follow procedures to ensure a unique Participating Agency end-user nomenclature (one system-user per system-username).

Participating Agencies shall provide a procedure for password reset and a schema that prevents reuse or transfer of previously issued system credentials.

Participating Agencies shall develop, maintain, and follow procedures for accessing HMIS, regardless of the network or device ownership, which support data confidentiality and HMIS security.

Procedures must state:

- Individual Participating Agency end-users do not have exclusive rights to HMIS data;
- Participating Agency end-user access will be monitored;
- Participating Agencies shall maintain a current list of Participating Agency end-users; and
- How HMIS security will be ensured and the confidentiality of the data during collection, use, and transmission.

## **5.2 Access Controls**

### ***Policy***

The HMIS Lead Agency will develop and implement an integrated set of access controls to establish, monitor, audit, and terminate account access in supporting the confidentiality, availability, and integrity principles of information security. The HMIS Vendor is required to maintain access control mechanisms designed to reduce the risk of access to the system by unauthorized users. Access to the HMIS is governed by multiple layers of securities – passwords, user group assignment, and permissions as well as Public Key Infrastructure (PKI). Additionally, the HMIS will be structured in such a way as to prevent users from logging on to the system from more than one workstation at a time.

All connections to the HMIS shall be made over Secure Socket Layer (SSL) connections. Other connections to HMIS shall be limited to secure, direct, encrypted connections.

### ***Procedure***

Each Participating Agency end-user shall be granted a user access level in accordance with the type of information required for the Participating Agency user role.

- Participating Agencies are required to communicate to the HMIS System Administrator when a Participating Agency end-user's data needs change;
- HMIS System Administrator shall terminate access upon notification of termination of employee via direct contact from the Participating Agency;
- Anyone suspected of violating, or found to be in violation of HMIS Policies and Procedures shall have their access revoked;
  - Reestablishment of access may be granted after investigation or at the discretion of HMIS Lead Agency.

### ***Role Based Access***

The table below lists the levels of access tied to existing user roles across the HMIS. Customization of roles may be offered in consultation with, and approval of, the HMIS System Administrator.

### **HMIS Roles**

<b>HMIS User Role</b>	<b>Level of Access</b>	<b>Description</b>
HMIS System Administrator	Access to <u>all</u> levels of visibility within the HMIS.	This role will grant access to system-wide data in order to support all Participating Agencies, meet reporting requests, and other system administration responsibilities.
Agency Administrator	Access to Participating Agency-Level and Client- Level Data; Administration	This role will grant access to data collected by its own agency
Case Manager II & III	Access to Client Level Data	This role will grant access to data collected by its own agency.

### **Passwords**

Participating Agency HMIS end-users shall be issued a unique username and password. Default passwords must be changed upon initial log-in; passwords must have required rotation period and format enforcement, and must be 8-50 characters long with at least two numbers or symbols. Participating Agency end-users shall not compose passwords consisting of:

- Participating Agency end-user's own user ID;
- Proper names such as the Participating Agency end-user, application, or vendor name;
- Solely words from any dictionary; or
- Personally identifiable numbers such as phone extension, SSN, or zip code.

Passwords shall not be shared. Writing down passwords is only permitted if it can be stored where no one else, including managers and supervisors, can see or access it. Written passwords shall not also reference the user ID, the system, or the account where the data is stored.

### **5.3 Data/Information Classification and Handling, Collection, Maintenance, Assistance, and System Availability**

#### **Policy**

This policy and set of procedures is to standardize expectations and provide guidance to Participating Agencies on the data entered into the HMIS, in order for the RCCC to draw data-driven conclusions about and report on homelessness, the impact of homeless services, and other social issues affecting the San Diego region.

#### **Procedure**

All projects receiving Continuum of Care (CoC), Emergency Shelter Grant (ESG), and other federal funding sources outlined in the most recently published HMIS Data Standards Manual are contractually required to participate in the HMIS and must comply with expectations outlined by federal funding sources.

The HMIS Lead Agency is responsible for ensuring the HMIS is operated in accordance with HMIS Data and Technical standards. The HMIS Lead Agency is responsible for monitoring the HMIS to ensure projects are in compliance with the standards been set forth in these Policies and Procedures. The HMIS Lead Agency will work with Participating Agencies on ensuring compliance with the Policies

and Procedures, and will demonstrate a reasonable level of discretion and will not make automatic determinations of agencies and/or projects being out of compliance.

The HMIS Lead Agency shall provide statistics and outcome measures for reports to the U.S. Department of Housing and Urban Development (HUD) and the RCCC Governance Board. The HMIS Lead Agency may produce HUD and Federal Partner required reports, such as the Housing Inventory Chart (HIC), the Annual Point in Time Count (PITC), and the Annual Homeless Assessment Report (AHAR).

The HMIS Lead Agency shall maintain a listing of all RCCC beds and service projects participating in HMIS and provide reports as required by the DAC.

The RCCC, through the HMIS Lead Agency, retains the right to conduct site visits to check compliance with Privacy and Security Policies and Procedures and verify self-certification of Participating Agencies.

### **Media Sanitization and Reuse**

Proper disposal of electronic and hard copy information in accordance with the following:

- When disposing of media (e.g., servers, workstations, mobile devices, and removable storage) which contain HMIS information, options include:
  - Final disposition of hardware, such as disk drives, shall be sanitized through crushing, shredding, incineration, or melting;
  - Use of a Certified Destruction Vendor.
- Hardware, such as desktop computers and servers, for reuse shall be sanitized by utilizing the DOD 5220.22-M standard.

### **Data Availability**

The HMIS Lead Agency shall make every effort to have the HMIS available to Participating Agency end-users 98% of the year.

The HMIS Lead Agency shall inform end-users as soon as reasonable of any interruption in service.

Internet connection, a requirement of HMIS participation, is the sole responsibility of the Participating Agency.

The HMIS Vendor shall be required contractually to communicate with the HMIS Lead Agency any necessary downtime for system upgrades and patches.

- In the event it is determined that HMIS accessibility is disabled system-wide, the HMIS Lead Agency will work closely with the HMIS Vendor to resolve any issues;
- The HMIS Lead Agency shall email, or use other expedient means, to communicate disruptions of the HMIS to the Participating Agency Administrators within two (2) hours of problem awareness and provide an estimated time of system availability.

Access to information must be in timely manner, including temporary disruptions of business services or regional catastrophic interruption of services.

- The HMIS Lead Agency will grant access to information in relation to the HMIS' and the referring Participating Agency's business need via the process outlined in Access Controls;

- The HMIS Lead Agency shall develop, test, and implement a Contingency Plan and a Disaster Recovery Plan for operations to address interruption of HMIS services.

### ***Maintenance and Disposal***

The HMIS Lead Agency Executive Director (or other empowered officer) will be responsible for the maintenance and disposal of HMIS Lead Agency onsite computer equipment. This includes:

- Purchase of, and upgrades to, all computer equipment;
- HMIS Lead Agency systems credential issuance for workstations accessing HMIS including:
  - Unique username/password for operating system;
  - Enforcement of electronic controls such as auto-time out and password-protected screen saver.

All workstations and computer hardware (including Participating Agency network equipment) must be stored in a secure location (locked office area).

### ***Retention***

HMIS client data must be maintained for a minimum of seven (7) years. HMIS information may be kept for a longer period by the HMIS Lead Agency if required to do so by an applicable statute, regulation, contract or other requirement.

The HMIS Lead Agency may dispose of or anonymize information:

- Not accessed in the previous seven (7) years;
- Seven (7) years since last changed or amended.
- Anonymized information may be retained in alignment with the purposeful life of the information.

The HMIS Lead Agency shall coordinate with the HMIS Vendor to ensure data is retained and/or disposed of according to HMIS Policies and Procedures.

## **5.4 Privacy Policy and Disclosures**

### ***Use and Disclosures***

#### ***Policy***

In order to properly fulfill the responsibilities as the HMIS Lead Agency, all persons who have access to data must be informed on how they must, may, and may not, use or disclose information.

### ***Procedure***

The HMIS Lead Agency will list and define all uses and disclosures it performs via its Notice of Privacy Practices (NPP) (Appendix D).

The HMIS Lead Agency and staff have access to retrieve all data in the HMIS, however, the HMIS Lead Agency will protect client confidentiality in all reporting by limiting it to the minimum necessary to accomplish the reporting purpose.

The following data elements shall be collected by Participating Agencies and made available to those Participating Agencies who share common clients. The default minimum elements are:

- Client Profile;



- Universal Data Elements (UDEs) as outlined in the most recently published HMIS Data Standards;
- Program Specific Data Elements (PSDEs) as outlined in the most recently published HMIS Data Standards;
- Vulnerability Index and Service Prioritization Decision Assistance Tool (VI-SDPAT) assessment and score;
- Coordinated Assessment and Housing Placement (CAHP) assessments;
- File Attachments needed for coordinated assessment and housing placement;
- Program Case Manager and Contact Information;
- Emergency Contact Information; and
- Program Entry and Program Exit.

Participating Agencies who are also sub-recipients of federal funds shall comply with federal Title VI requirements as they apply to language accessibility.

Participating Agencies may use data they collect for any legal purpose, however, data accessed through the HMIS may only be used or disclosed for the purpose of coordination of client housing and services.

Entities providing funding to Participating Agencies, or projects required to use HMIS, will not have automatic access to the HMIS.

- Access to HMIS will only be granted according to the Access Controls;
- Funders requesting access to HMIS data, or summary reports, must submit through their contracted Participating Agency;

Any requests for reports or information from an individual or group who have not been explicitly granted access to the HMIS will be directed to the HMIS Lead Agency.

- No individual client data will be provided to meet these requests without DAC review of the data request.

### **Verbal Consent for Services**

In an effort to more efficiently serve the client, the HMIS Lead Agency may authorize the use of a verbal process for assessment and documentation by 2-1-1 San Diego. The verbal process does not replace in person enrollment.

- The verbal process to collect information shall replace a written signature on the MultiParty Authorization (Authorization) with a telephonic signature which will allow for authorized access to the client's data, and shall collect relevant identifiers to ensure unique identification of the individual and record of the Authorization;
- Authorized Participating Agencies shall certify in the HMIS they have talked to the individual, and to the best of their ability, collected the required unique identifiers and have indicated such by including a telephone reference number on the electronic file in the HMIS;
- "Data Not Collected" for identifier fields shall require physical corroboration prior to delivery of services;

- Verbal Consent process shall be monitored on an ongoing basis and should be used sparingly when a written signature is not possible;
- The HMIS Lead Agency must provide written authorization to Participating Agencies wishing to use the verbal consent process.

### **Research Projects**

Request for research projects must be approved by the HMIS Lead Agency. Should the HMIS Lead Agency determine that additional review is required, the request will be forwarded to the DAC for a final determination.

Research that is approved by the Institutional Review Board (IRB) must meet the Office for Human Research Protections (OHRP) requirements for use of individual client data. Waiver of Informed Consent by an IRB does not constitute a waiver of individual privacy rights under other federal or state laws.

Requirement of an IRB for research is exempt at 45 CFR 46.101 where:

- Unless otherwise required by the research entity or Participating Agency heads, research activities in which the only involvement of human subjects will be in one or more of the following categories are exempt from this policy:
  - Research and demonstration projects which are conducted by or subject to the approval of the research entity or Participating Agency, and which are designed to study, evaluate, or otherwise examine:
    - Public benefit or service programs;
    - Procedures for obtaining benefits or services under those programs;
    - Possible changes in or alternatives to those programs or procedures; or
    - Possible changes in methods or levels of payment for benefits or services under those programs.

Access to client-level data for uses or disclosures not described here must be done only utilizing the Multiparty Authorization.

### **HMIS Reporting and Publication**

The HMIS Lead Agency may utilize data in the HMIS for federal reporting, local evaluation, analysis, and publication.

To foster full transparency, identifiable program-level data pertaining to CoC and/or federally, state, or locally funded program performance may be published by the HMIS Lead Agency upon request by the RCCC Governance Board, Full Membership, and/or its subcommittees. Identifiable client-level data may only be released within the HMIS with client Authorization solely for coordination of housing and services. Clients may authorize the HMIS to release their information outside of the HMIS (ex.: Community Information Exchange (CIE)).

### **Participating Agency Procedure**

#### **Notification**

At minimum, the HMIS Lead Agency requires Participating Agencies to post signs (Appendix F) where data collection occurs. The sign will include the following language:



*“We collect personal information directly from you for reasons that are discussed in our privacy statement. We may be required to collect some personal information as mandated by law or as requested from entities that fund this program. Other personal information we collect is necessary to operate programs, improve services, and better understand homelessness. We collect appropriate information only. A Privacy Notice is available upon request.”*

Participating Agencies must notify individuals seeking their assistance of data collection, use, and that disclosure will occur for the purposes of:

- Coordination of individual referrals, case management, housing, or other services; and
- Sharing with other organizations that may have separate privacy policies and that may allow different uses and disclosures of the information.

### **Data Standard Compliance**

Participating Agencies and the HMIS Lead Agency are jointly responsible for ensuring project data in the HMIS meets the thresholds outlined in this policy:

- Participating Agencies will develop and implement a policy and procedure requiring that all client data be entered into the HMIS at point of service or within three (3) business days of a client interaction;
- Data required to be collected at entry and/or exit according to the most recently published HMIS Data Standards will be entered at point of service or within three (3) business days of a client's entry or exit date;
- Data required to be collected at least once every three (3) months or annually during program participation at least annually during enrollment, according to the most recently published HMIS Data Standards, will be entered at point of service or within three (3) business days of the client reaching those respective deadlines;
- Data required to be collected at every contact or service provision according to the most recently published HMIS Data Standards will be entered at point of service or within three (3) business days of the contact/service.

The HMIS Lead Agency assumes that client information in the HMIS has been entered with the consent of the client through the Multiparty Authorization (Appendix C) process and in accordance with these HMIS Policies and Procedures. Participating Agencies shall maintain copies of the signed Multiparty Authorization.

### **Updates and Corrections Requests**

Client requests to update information in the HMIS shall come from the Participating Agency.

If a Participating Agency agrees the information is inaccurate or incomplete, they may delete it or they may choose to mark it as inaccurate or incomplete and to supplement it with additional information.

Such corrections applicable to the data stored in the HMIS will be corrected within five (5) days of the determination that the request is accepted.

Clients who request to view data in the HMIS shall be documented by the Participating Agency.

- Agency Administrators or Case Managers may provide a copy of the requested data within a reasonable timeframe to the client;

- Participating Agencies with medical information are legally limited in establishing reasons for denying client requests for inspection of HMIS records and must, if applicable, follow either:
  - 45 CFR 164.524(d)(i through iii); or
  - Health & Safety Code 123.115(d).
- Partial releases may be permitted where the record contains information about another client or individual (other than a healthcare provider or homeless provider) and the denial is limited to the section of the record containing such information;
- Participating Agencies, after investigation, may reject repeated or harassing requests for access to or correction of an HMIS record;
- Participating Agencies who deny requests for access or correction will document the request and the reason for the denial.

The HMIS Lead Agency must ensure that Participating Agencies seek Authorization from the client prior to releasing client level HMIS data that do not fall within the scope of the purposes listed above.

Participating Agencies may only disclose HMIS data for the specific purposes and reasons defined on the Authorization form.

Participating Agencies may retrieve HMIS data entered to produce statistical reports for internal purposes and other required reports within the parameters established by the HMIS Lead Agency.

HMIS data download should be limited to the minimum necessary to accomplish the purpose.



SAN DIEGO  
HOUSING  
COMMISSION

# San Diego Housing Commission Administrative Plan for the Section 8 Rental Assistance Programs

Approved June 17, 2016

San Diego Housing Commission  
Rental Assistance Division  
1122 Broadway, Suite 300  
San Diego, CA 92101  
[www.sdhc.org](http://www.sdhc.org)





Which of the new families has custody of the dependent child(ren).

The composition of the new families, and whether they include elderly or disabled members.

Whether domestic violence was involved in the breakup.

Recommendations of reliable, knowledgeable third-party professionals.

Upon request of SDHC, documentation of these factors will be the responsibility of the family. If documentation is not provided, SDHC will deny eligibility based on failure to provide information necessary for the eligibility determination.

### **G. WAITING LIST ORDER** [24 CFR 982.204]

Except for Special Admissions, applicants will be selected from SDHC waiting list in accordance with policies and preferences and income targeting requirements defined in this Administrative Plan. SDHC will maintain information that permits proper selection from the waiting list.

### **H. SPECIAL ADMISSIONS** [24 CFR 982.54(d), 982.203]

If HUD awards SDHC program funding that is targeted for specifically named families, SDHC will admit these families under a Special Admission procedure.

Special admissions families will be admitted outside of the regular waiting list process. They do not necessarily have to qualify for any preferences, nor are they required to be on the program waiting list. SDHC maintains separate records of these admissions.

The Opt Out Conversions are examples of such special admissions.

### **I. RANKING LOCAL PREFERENCES**

Within each of the following numbered categories, applicants will be served by date and time of application.

1. Applicants who live and/or work in the City of San Diego and who are families of two or more people that include a dependent, or individuals who are disabled or age 62 or older, or veterans, or active U.S. Service Person, or **a homeless person with a disability**, or a non-elderly person (under the age of 62) with a disability..
2. Other applicants who live and/or work in the City of San Diego.



3. Applicants who do not live and/or work in the City of San Diego and who are families of two or more people that include a dependent, or individuals who are disabled or age 62 or older, or veterans, or active U.S. Service Person, or a homeless person with a disability, or a non-elderly person (under the age of 62) with a disability..
4. Other applicants who do not live and/or work in the City San Diego.

### J. INITIAL DETERMINATION OF LOCAL PREFERENCE

An applicant's certification that they qualify for a preference will be accepted without verification at the initial application. When the family is selected from the waiting list for the final determination of eligibility, the preference will be verified.

If the preference verification indicates that an applicant does not qualify for the preference, the applicant will be returned to the waiting list without the local preference, with his/her original date and time of application.

### K. CHANGE OF PREFERENCE [24 CFR 982.207]

Changes in an applicant's circumstances while on the waiting list may affect the family's entitlement to a preference. Applicants are required to notify SDHC using the Waiting List Applicant Portal when his/her circumstances change.

### L. CROSS LISTING OF PUBLIC HOUSING AND SECTION 8

SDHC will not merge the waiting lists for Public Housing and Section 8.

### M. PREFERENCE DENIAL

If SDHC denies a preference, SDHC will notify the applicant in writing of the reason(s) why the preference was denied and offer the applicant an opportunity for a review with a staff member other than the one who made the decision. If the preference denial is upheld because of the review, or the applicant does not request a review, the applicant will be placed on the waiting list without benefit of the preference, with his/her original date and time of application.

If the applicant falsifies documents or makes false statements in order to qualify for any preference, he/she will be removed from the associated waiting list.



Where the calculation on the HUD 50058 results in a utility reimbursement payment due the family, SDHC will provide a Utility Reimbursement Payment for the family each month. The check will be payable directly to the tenant.

### H. NON-MOVING FORWARD PROJECT BASED UNITS

#### 1. Program Description

This is a Federal Section 8 housing subsidy program that ties rental assistance directly to a specific unit or project for an aggregate term up to 15 years. SDHC will fund the Project-Based Voucher Program through its Housing Choice Voucher Program (Section 8), using funds provided by the U.S. Department of Housing and Urban Development (HUD).

The Project-Based Voucher Program (PBV) consists of existing housing, new construction, or rehabilitation project comprised of multifamily or single-family units. The Program is targeted to homeless persons or families that receive supportive services in addition to housing. These populations may include, but are not limited to:

- Victims of Domestic Violence

- Persons with Disabilities-Mentally Ill, Developmentally Disabled, Physically Disabled

- Persons with HIV/AIDS

- Youth

- Persons with Alcohol/Drug Addiction

- Veterans

- Elderly

The program may also be used for projects serving specialized populations, the elderly or persons with disabilities, whether they are homeless or not.

The PBV program provides housing assistance to qualified low income individuals and families. Project-Based Voucher Participants do not locate their own unit but must move into a unit already in the Project-Based Voucher Program.

#### 2. HAP Contract Expiration

Upon expiration of a HAP contract, the owner will enter into a new HAP contract under the MTW program.

#### 3. Program Goals

Expand and stabilize the housing opportunities of homeless persons/families and increase their economic opportunities by providing supportive services and teaching independent living skills.

#### 4. Owner Proposal Selection

The owner proposal selection shall adhere to the same policies and procedures described previously in this Chapter.



Which of the new families has custody of the dependent child(ren).

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2. Other applicants who live and/or work in the City of San Diego.



3. Applicants who do not live and/or work in the City of San Diego and who are families of two or more people that include a dependent, or individuals who are disabled or age 62 or older, or veterans, or active U.S. Service Person, or a homeless person with a disability, or a non-elderly person (under the age of 62) with a disability..
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The Project-Based Voucher Program (PBV) consists of existing housing, new construction, or rehabilitation project comprised of multifamily or single-family units. The Program is targeted to homeless persons or families that receive supportive services in addition to housing. These populations may include, but are not limited to:

- Victims of Domestic Violence

- Persons with Disabilities-Mentally Ill, Developmentally Disabled, Physically Disabled

- Persons with HIV/AIDS

- Youth

- Persons with Alcohol/Drug Addiction

- Veterans

- Elderly

The program may also be used for projects serving specialized populations, the elderly or persons with disabilities, whether they are homeless or not.

The PBV program provides housing assistance to qualified low income individuals and families. Project-Based Voucher Participants do not locate their own unit but must move into a unit already in the Project-Based Voucher Program.

#### 2. HAP Contract Expiration

Upon expiration of a HAP contract, the owner will enter into a new HAP contract under the MTW program.

#### 3. Program Goals

Expand and stabilize the housing opportunities of homeless persons/families and increase their economic opportunities by providing supportive services and teaching independent living skills.

#### 4. Owner Proposal Selection

The owner proposal selection shall adhere to the same policies and procedures described previously in this Chapter.



### 5. Waiting List and Lease Up

Complexes providing supportive services are permitted to self-refer applicants. The nonprofit or for-profit owner must provide supportive services to specified population. A specified population is defined as a group of people who must meet such specific criteria they could not be easily identified using the established SDHC waiting list. Such populations may include, but are not limited to Homeless individuals with AIDS or HIV, Victims of Domestic Violence, former Foster Care youth and/or recovering drug addictions with more than one additional disability.

Complexes that do not self-refer are required to utilize SDHC's project based waitlist. When the owner notifies SDHC of a vacant unit, the computer will randomly select the next 20 applicants from SDHC's waiting list. If the owner is unable to find a suitable tenant from the initial referral list, SDHC will select the next 20 applicants within the preference category from the waiting list. SDHC (or designee) will conduct an interview to determine eligibility for the program.

### 6. PBV Waiting List Preferences

SDHC PBV Waiting List will give a preference to homeless persons/families, the elderly, and persons with disabilities:

Homeless persons will receive a preference over non-homeless.

An applicant is considered homeless if the applicant lacks a fixed, regular, and adequate nighttime residence and can provide verification that their nighttime residence is:

A supervised publicly or privately operated shelter designed to provide temporary living accommodation; or

A public or private place that provides temporary residence for individuals intended to be institutionalized (not incarcerated); or

A public or private place not designed for, or ordinarily used as, regular sleeping accommodations for human beings.

Homeless applicants who meet the criteria described above must provide proof of homelessness. Examples of such proof include certification of homeless status from a public or private facility, including Transitional Housing, that provides shelter for such households; a copy of an arrest record for vagrancy or illegal lodging from the local police department; or other documentation that can be obtained from any social service agency that provides services to the homeless.

Within each of the following categories, applicants will be served by the date and time of application based on the availability of site-specific supportive services:

Homeless Families

Victims of Domestic Violence

Homeless Persons with Disabilities

Homeless Veterans



year (January 1 – December 31), and no more than 10% in any given month, would be allowed to move from the PBV assisted complex. A waiting list will be maintained for those wishing to move but who exceed the threshold.

The family must submit their request for a tenant-based voucher in writing prior to vacating the PBV unit.

The family must locate a program eligible unit to which it can relocate with continued rental assistance by the expiration of the voucher term.

SDHC will provide a tenant-based voucher when funding is available. When funding is not available, the tenant will be given priority once vouchers become available.

Households who leave the project-based voucher program before residing in the unit for 24 months and/or do not meet the requirements or agreements of the program are not eligible for continued assistance.

### **16. Rent Calculation Methodology and Minimum Rent for Tenant**

The Path to Success rent calculation is used in the MTW PBV program. Refer to the applicable chapters where the Path to Success calculation and minimum rents are defined. All project-based voucher families will be recertified on an annual basis.

### **17. Hardship Policy**

Families who present a compelling reason to move from the PBV unit and receive a tenant-based voucher prior to fulfilling the 24-month occupancy requirement will be reviewed on a case-by-case basis. The case will go before the Vice President of Rental Assistance or designee and approval to move with a tenant-based voucher may be granted. Circumstances surrounding the request to move, such as VAWA requirements, employment opportunities in other PHA jurisdictions and availability of tenant-based vouchers will be considered as part of the determination.

## **SECTION 3: VETERANS AFFAIRS SUPPORTIVE HOUSING (VASH)**

The 2008 Consolidated Appropriations Act (the Act) enacted in 12/26/07, provided millions of dollars of funding for the HUD-Veterans Affairs Supportive Housing (HUD-VASH) voucher program.

HUD awarded funding for HUD-VASH vouchers and the funding was made available to public housing agencies (PHAs) that partner with eligible VA Medical Centers (VAMC) or other entities as designated by the Secretary of the Department of Veterans Affairs, based on geographical need for such assistance as identified by the Secretary of the Department of Veterans Affairs.

The HUD-VASH program combines HUD HCV rental assistance for homeless veterans with case management and clinical services provided by the Veterans Affairs at its medical centers and in the community.

Generally, the HUD-VASH HCV program will be administered in accordance with regular HCV program requirements (24 CFR Section 982). However, the Act allows HUD to waive or specify alternative requirements for any provision of any statute or regulation that HUD administers in connection with this program in order to effectively deliver and administer HUD-VASH voucher assistance. In 2010 SDHC



received a HUD waiver to administer the HUD-VASH vouchers similarly to MTW vouchers. The HUD-approved MTW fiscal year 2013 Annual Plan included the following policies designed specifically for the HUD-VASH vouchers:

Any adults the VASH applicant/participant requests to add to his or her household will have a modified initial requirement for criminal history: no violent or drug-related criminal activity in the two years preceding application.

Minimum rent may be set at zero for the first 12 months of program participation. After the first 12 months, minimum rent shall be set at \$50.

Income garnishments that VASH participants experience may not be counted as income for the first 12 months of program participation.

To coincide with SDHC's rental assistance program administration, utility reimbursements will not be a part of the SDHC VASH program.

To coincide with SDHC's rental assistance program administration, VASH participants will be eligible for the biennial inspection cycle. The same criteria by which the general rental assistance program participants gain admission to the cycle must also be met.

The Moving Forward full time student definition, as described in Chapter 3 – Verifications, Assets, Income and Allowances of this document will be applicable.

While SDHC is required to waive some eligibility factors, all household members (including the veteran) will be held to the same standard as any other Housing Choice Voucher program participant once on the program.

VASH households are subject to the biennial recertification cycle. SDHC will conduct a full recertification of household income and family composition every two years.

The affordability cap for veteran families is 40% of their adjusted income. Families who move into targeted low-poverty neighborhoods will be allowed to pay up to 50% of their adjusted income. In order to qualify for this benefit, the family must demonstrate the ability to pay the higher rent burden.

For all other policies, the SDHC has adopted the published guidelines and has developed separate policy documents for VASH.

If VASH are Project Based, guidelines from PIH 20-11-50 (HA) will be applied. Competitive process will be conducted per HUD requirements as outlined in the PBV section.

### **SECTION 4: SPONSOR-BASE SUBSIDIES (SBS) FOR THE HOMELESS**

SDHC provides subsidies to house homeless persons while sponsor organizations provide the necessary services. A typical sponsor is an organization providing supportive services to disabled individuals and/or individuals with substance abuse issues and requires additional housing resources to serve more clients. Sponsors may be both non-profit and for-profit agencies. Developers may also qualify as a sponsor if a service provider is contracted to render appropriate supportive services.



**Sponsor Selection:** SDHC engages in a competitive solicitation processes to select prospective non-profit and for-profit sponsors. If the process does not solicit an adequate response, SDHC will select sponsors without a competitive process. Additionally, SDHC may award sponsor-based subsidies to SDHC-owned developments using a non-competitive process.

In the event SDHC intends to serve a highly specialized population wherein only one service provider possesses the capability, expertise, and resources to serve the target population, SDHC may award sponsor-based subsidies without a competitive process.

**Populations Served:** The program serves homeless populations, and other designated populations as determined by SDHC. Subsidies will also be used to create assisted living housing for individuals/families requiring direct medical care or recently released from a medical institution.

**Waiting Lists:** Utilization of the Coordinated Assessment and Housing Placement (CAHP) system is required for homeless populations. With SDHC permission, a sponsor agency may create and maintain a site-based waiting list under unique circumstances to serve specialized populations.

**Inspections:** SDHC conducts Housing Quality Standards (HQS) inspections for each unit leased by a SBS program participant.

**Administration:** Sponsors provide program administration, including all eligibility and income determinations, rent calculations, interim and annual certifications. Generally, the rent calculation method uses 28.5 percent of gross monthly income to generate the client's rent portion and resulting subsidy payment. A minimum rent of \$25 applies to the program. As determined appropriate, SDHC may apply the Path to Success calculation to ensure work-able participants are incentivized to progress towards self-sufficiency.

When a subsidy provides rental assistance for an individual bed rather than a unit, the maximum assistance for the bed will be determined according to the unit size, number of participants, and rent reasonableness determinations. The overall per bed subsidy in a given unit will not exceed the current SDHC payment standards for the unit size.

The sponsors will be required to create a program plan defining eligibility factors, leasing requirements, and termination policies and procedures. Sponsors will develop written service protocols and define methods of client management. A written service plan will be maintained for each participant in the SBS program.

**Unit and Development Structures:** Sponsor-based subsidies allow the rental assistance to be attached to a sponsoring agency. In the SBS program, the sponsor may utilize a tenant-based or project-based approach. A sponsor may also utilize sponsor-owned units for purposes of the program. Master leasing units within a development remains an option.

**Monitoring:** SDHC provides program oversight and evaluation and monitors the sponsor for compliance with program requirements. Monitoring includes full audits of CAHP utilization or waitlists, rent calculation, tenant files, the administration of supportive service requirements, and any other items as determined necessary by SDHC.



SAN DIEGO  
HOUSING  
COMMISSION

# San Diego Housing Commission Admissions and Continued Occupancy Policy for Public Housing

San Diego Housing Commission  
1122 Broadway, Suite 300  
San Diego, CA 92101  
[www.sdhc.org](http://www.sdhc.org)





#### 4-III.B. SELECTION METHOD

PHAs must describe the method for selecting applicant families from the waiting list, including the system of admission preferences that the PHA will use.

##### **Local Preferences [24 CFR 960.206]**

PHAs are permitted to establish local preferences and to give priority to serving families that meet those criteria. HUD specifically authorizes and places restrictions on certain types of local preferences. HUD also permits the PHA to establish other local preferences, at its discretion. Any local preferences established must be consistent with the PHA plan and the consolidated plan, and must be based on local housing needs and priorities that can be documented by generally accepted data sources [24 CFR 960.206(a)].

##### **Verification Requirement for Preference: Homeless**

Homeless applicants who meet the Homeless criteria must provide certification of homeless status from a public or private facility that provides shelter for such households, or from the local police department, or any social service agency that provides services for homeless people.

Applicants who are homeless due to residing in a transitional housing program must provide a letter from the transitional program's sponsoring agency documenting the applicant's participation and readiness to maintain an independent tenancy.

##### PHA Policy

**The SDHC will use the following local preference:**

**WITHIN EACH OF THE BELOW NUMBERED CATEGORIES, APPLICANTS WILL BE SERVED ON A *FIRST COME/FIRST SERVED BASIS***

\* Throughout this document "Veteran" is defined as the head or spouse being a veteran or family of a veteran; also, active U.S. servicepersons qualify as veterans. (*See II. Glossary of Housing Terms: "Family of Veteran"*)

Within each of the following numbered categories, applicants will be served by date and time of application.

1. Applicants who live/work/or are hired to work in the City of San Diego and who are veterans or active U.S. Servicepersons.
2. Applicants who live/work/or are hired to work in the City of San Diego and who are families with children or head of house, spouse/cohead who are disabled or age 62 or older, or **a homeless person with a disability.**
3. Other applicants who live/work/are hired to work in the City of San Diego.
4. Applicants who do not live/work/or are hired to work in the City of San Diego and who are veterans or active U.S. Servicepersons.



5. Applicants who do not live/work/or are hired to work in the City of San Diego and who are families with dependents or head of house, spouse/cohead who are disabled or age 62 or older, or **a homeless person with a disability.**
6. Other applicants who do not live/work/are hired to work in the City of San Diego.
7. Other applicants who do not live and/or work in the City San Diego.

When a family has been selected from the waiting list, they must be prepared at that time to begin the eligibility process. If the family is unable, they will be dropped from the waiting list.

### **Income Targeting Requirement [24 CFR 960.202(b)]**

HUD requires that extremely low-income (ELI) families make up at least 40% of the families admitted to public housing during the PHA's fiscal year. ELI families are those with annual incomes at or below 30% of the area median income. To ensure this requirement is met, the PHA may skip non-ELI families on the waiting list in order to select an ELI family.

If a PHA also operates a housing choice voucher (HCV) program, admissions of extremely low-income families to the PHA's HCV program during a PHA fiscal year that exceed the 75% minimum target requirement for the voucher program, shall be credited against the PHA's basic targeting requirement in the public housing program for the same fiscal year. However, under these circumstances the fiscal year credit to the public housing program must not exceed the lower of: (1) ten percent of public housing waiting list admissions during the PHA fiscal year; (2) ten percent of waiting list admissions to the PHA's housing choice voucher program during the PHA fiscal year; or (3) the number of qualifying low-income families who commence occupancy during the fiscal year of PHA public housing units located in census tracts with a poverty rate of 30 percent or more. For this purpose, qualifying low-income family means a low-income family other than an extremely low-income family.

An extremely low income family has been defined as a family whose annual income does not exceed 30 percent of the median income for the area, as determined by HUD, with adjustments for smaller and larger families. The Omnibus changes this definition of ELI. ELI will now be the higher of up to 30% of HUD's published adjusted area median income (AMI) or the federal poverty line.

PHAs located in higher income areas may experience no change because 30% of AMI will be higher than the poverty area.

#### **PHA Policy**

The SDHC will monitor progress in meeting the ELI requirement throughout the fiscal year. ELI families will be selected ahead of other eligible families on an as-needed basis to ensure that the income targeting requirement is met.

### **Deconcentration of Poverty and Income-Mixing [24 CFR 903.1 and 903.2]**

The PHA's admission policy must be designed to provide for deconcentration of poverty and income-mixing by bringing higher income tenants into lower income projects and lower income tenants into higher income projects. A statement of the PHA's deconcentration policies must be included in its annual plan [24 CFR 903.7(b)].

The PHA's deconcentration policy must comply with its obligation to meet the income targeting requirement [24 CFR 903.2(c)(5)].

Developments subject to the deconcentration requirement are referred to as 'covered developments' and include general occupancy (family) public housing developments. The following developments



order on the waiting list for the purpose of selecting lower-cost families for admission to the program.

Families will be selected from the waiting list based on the targeted funding or selection preference(s) for which they qualify, and in accordance with the HACSD's hierarchy of preferences. Within each targeted funding or preference category, families will be selected according to the date and time their waiting list application is received.

## **LOCAL PREFERENCES**

[24 CFR982.202 and 982.207]

The following local preferences are established. When determining equally ranked preferences, the date and time of application is the final deciding factor.

### **Special Local Preferences**

The HACSD has established special local preferences for three groups: (1) HACSD Public Housing residents referred by the Public Housing administrator who must move due to being the victim of domestic violence, dating violence, or stalking; (2) HACSD Public Housing residents referred by the Public Housing administrator who must move out of their units for a significant period of time, as determined by the Public Housing Administrator, in order for repairs to be made to their HACSD Public Housing units; (3) Eligible homeless applicants who have been referred by the San Diego County Continuum of Care or Coordinated Assessment and Housing Placement (CAHP) system who either meet the definition of homeless or who are exiting federally-assisted housing programs with no other permanent housing placement options.\* These selection preferences are superior to the following ranking preferences. The HACSD will not process waiting list applications in a subordinate category before all waiting list applications in a superior category have been processed. \***Note:** Special local preference (3) will have a maximum of 500 vouchers available to those who meet the criteria.

### **Category One**

The HACSD uses equally weighted local preferences for applicants, with priorities for those **who live or work** (see definition of working families on page 2-3) **in the HACSD jurisdiction** and are in one or more of the following categories:

Families with dependent children

Working Families - (The Head of household , spouse or sole household member must have worked an average of at least 32+ hours per week with no more than a two-week break for the previous 12 months. Applicants may combine job training or academic program participation as part of the

previous 12-month requirement. Applicants receiving unemployment, disability, or worker's compensation benefits will be considered qualifying under this preference if those benefits were the result of 12 continuous months of employment at 32+ hours per week up to the start of the above referenced benefits.)

Elderly families (The Head of household or spouse is 62 years of age or older.)

Disabled families (At least one household member is disabled.)

Veterans or surviving spouses of veterans (A veteran with a dishonorable discharge does not qualify for this preference.)

Homeless- "homeless individual," "homeless person," or "homeless family" per HUD's Definition of Homeless for the Continuum of Care (CoC) Program (previously Shelter Plus Care)

### **Category Two**

Applicants who live or work in the HACSD jurisdiction, but who do not fit in Category One

### **Category Three**

Applicants who *do not live or work within the HACSD jurisdiction*, but are one or more of the following:

Families with dependent children

Working Families - (The Head of household, spouse or sole household member must have worked an average of at least 32+ hours per week with no more than a two-week break for the previous 12 months. Applicants may combine job training or academic program participation as part of the previous 12-month requirement. Applicants receiving unemployment, disability, or worker's compensation benefits will be considered qualifying under this preference if those benefits were the result of 12 continuous months of employment at 32+ hours per week up to the start of the above referenced benefits.)

Elderly families (The Head of household or spouse is 62 years of age or older.)

Disabled families (At least one household member is disabled.)

Veterans or surviving spouses of veterans (A veteran with a dishonorable discharge does not qualify for this preference.)

Homeless "homeless individual," "homeless person," or "homeless family" per HUD's Definition of Homeless for the Continuum of Care (CoC) Program (previously Shelter Plus Care)

#### **Category Four**

All other applicants not indicated above.

### **GENERAL WAITING LIST MANAGEMENT**

[24 CFR 982.204]

The HACSD uses a single waiting list for admission to its Section 8 tenant-based assistance program. The HACSD will not merge its waiting lists [24 CFR 982.205]. However, if the Section 8 waiting list is open when the applicant is placed on the Public Housing Program, another project-based voucher program, or the Moderate Rehabilitation Program waiting lists, the HACSD must offer to place the family on the tenant-based assistance list.

Moderate Rehabilitation Program applicants may be taken from the Section 8 waiting list. Mainstream Program applicants are taken from the Section 8 waiting list.

A family who lives in the jurisdiction of another cooperative housing authority, named below, will be advised of the benefit of being placed on the appropriate housing authority's waiting list, and the information will be forwarded to the appropriate cooperative housing authority upon verbal permission of the family.

#### **COOPERATIVE AGREEMENT**

The HACSD and the PHAs of the cities of San Diego, Oceanside, National City, Encinitas, and Carlsbad have a cooperative agreement to accept application transfers from a cooperating PHA of like-program, providing the applicant resides or works in the receiving PHA's jurisdiction.

The PHAs will transfer, upon request, to the appropriate cooperating PHA, the waiting list applications of applicants who are residing or working in the jurisdiction of the cooperating PHA. Upon receipt of the application, the receiving PHA will preserve the original date, time, and requested program, providing the receiving PHA has an open waiting list and the applicant has not been removed and/or denied from the HACSD waiting list after the original date. If the receiving PHA's waiting list is closed when the application is transferred, the application will reflect the earliest date that the waiting list is reopened.

**D. Admission Preferences for Selection of Applicants**

**Single Elderly, Disabled, Displaced Person.** A single person who is elderly, disabled or displaced is selected or assisted before a single person who is not elderly, disabled or displaced.

**Local Preferences.** The City of Oceanside has established local preferences. An applicant who is a resident of or employed within Oceanside will have preference over an applicant who is not a resident or is not employed in Oceanside. Applicants may also be eligible for the following local preferences in the following order:

1. **Homeless preference.** Veteran families (including single persons or two or more persons who share residency) and chronically homeless single persons referred through the San Diego Regional Continuum of Care Coordinated Assessment and Housing Placement (CAHP) system. The definition of veteran and chronically homeless will be the same as that used in the CAHP system. A maximum of 30 veteran or chronically homeless single applicant households may qualify for this preference. This preference is restricted to referrals through the CAHP system and is intended to assist applicants who are homeless in Oceanside, living in a shelter in Oceanside, or living in a shelter in North San Diego County Coastal or Inland (as defined by San Diego Health and Human Services Agency) and can provide documentation of residing in Oceanside in the last six months.
2. Project One for All (POFA). **Severely mentally ill homeless persons** referred through the San Diego Regional Continuum of Care Coordinated (RCCC) Assessment and Housing Placement (CAHP) system and connected to POFA. A maximum of 96 vouchers will be available for this preference. This preference is restricted to referrals through the CAHP system and is intended to assist applicants who are homeless in Oceanside, living in a shelter in Oceanside, or living in a shelter in North San Diego County Coastal or Inland (as defined by San Diego Health and Human Services Agency) and can provide documentation of residing in Oceanside in the last six months.
3. Displaced by government action or Natural Disaster.
4. Veteran's preference. A head of household or spouse who has been discharged from military service under honorable or general (except dishonorable) conditions, or a spouse of a deceased veteran will have preference over non-veterans who submitted applications during the same calendar year (January-December).

**Income Targeting.** In accordance with HUD's mandate to admit 75% of applicants at 30% of median income, the HA will give a preference to applicants with incomes at or below 30% of the county median income (by household size) when the admit percentage falls below an acceptable level. Applicants with incomes above 30% of the county median income will be placed back on the waiting list until the percentage of admissions reaches the acceptable level.

**E. Order of Waiting List Selection**

Applicants will be selected from the waiting list in accordance with the date and time of application and taking into consideration the preferences that they are entitled to. Selection of applicants will be made in the following order:

Applicant resides or is employed in Oceanside:

1. VETERAN FAMILIES AND CHRONICALLY HOMELESS SINGLE PERSONS REFERRED THROUGH THE RCCC CAHP SYSTEM.
2. SEVERELY MENTALLY ILL HOMELESS PESONS REFERRED THROUGH THE RCCC CAHP SYSTEM

3. DISPLACED BY GOVERNMENT ACTION OR NATURAL DISASTER
4. HEAD OF HOUSEHOLD OR SPOUSE IS A VETERAN
5. ALL OTHER APPLICANTS

Applicant does not reside or is not employed in Oceanside:

1. DISPLACED BY GOVERNMENT ACTION OR NATURAL DISASTER
2. HEAD OF HOUSEHOLD OR SPOUSE IS A VETERAN
3. ALL OTHER APPLICANTS

#### **F. Verification of Preferences**

All preferences must be verified

1. Live in or work in the City of Oceanside
  - Copy of Lease Agreement and three most recent rent receipts, canceled checks or money order receipts.
  - A California driver's license or California ID in conjunction with copies of recent bills sent to the address.
  - Copy of paycheck stubs that indicate the location of the place of employment for third party verification that indicates the place of employment.
2. Homeless
  - An applicant is considered homeless if the applicant lacks a fixed, regular and adequate nighttime residence and can provide verification that their nighttime residence is:
  - A supervised publicly or privately operated shelter designed to provide temporary living accommodations; or,
  - An institution that provides temporary residence for individuals intended to be institutionalized (not incarcerated); or
  - A public or private place not designed for, or ordinarily used as, a regular place for human beings.

Homeless applicants who meet the criteria described above must provide certification of homeless status from a public or private facility that provides shelter for such households, or from the local police department, or any social service agency that provides services for homeless people.

Applicants who are homeless due to residing in a transitional housing program must provide a letter from the transitional housing program's sponsoring agency documenting the applicant's participation and readiness to maintain an independent tenancy.

### **IV. DETERMINATION OF APPLICANT ELIGIBILITY**

#### **A. Income Limits**

The HA will not admit families whose income exceeds 50 percent of the area median income, except for those families included in 24 CFR 982.201(b) as described below .

To be income eligible, the family may be under the low-income limit in any of the following categories:



# City of Carlsbad Housing Agency - CA077

3. Housing representatives will attend local agency and community fairs to increase awareness of the program and benefits for owners. Housing representatives will also participate in Owner seminars/workshops, which are organized in coordination of with other local housing agencies, San Diego County Apartment Association, North County Apartment Managers Association, and local property management companies.
4. Owner information packets describing the benefits of the rental assistance program will be available upon request.
5. The PHA will market the Section 8 program by conducting Rental Owner workshops for prospective owners periodically to explain the program benefits, especially during periods of low voucher utilization and low vacancy rates.
6. The PHA will utilize the media, including newspapers, magazines, internet, television, and radio to market the Section 8 program as determined necessary.

The PHA will periodically evaluate the distribution of assisted families to identify areas within the jurisdiction where owner outreach should be targeted.

## **Family Outreach**

Outreach will inform all eligible segments of Carlsbad's population of the availability of the Section 8 Rental Assistance program. If applicant groups are not reflective of the eligible population, additional outreach aimed at targeted groups will be increased. The PHA will publicize the availability of rental assistance for very low-income families in newspapers of general circulation, minority media, and by other suitable means. Notices will also be provided in Spanish.

In addition, the PHA will distribute fact sheets to the broadcasting media, and initiate personal contact with members of the news media and community service agencies to utilize public service announcements.

Liaisons have been established with a variety of city and county agencies, private social service agencies, non-profit agencies and special interest groups. The PHA will communicate the status of rental assistance availability to the service providers in the community, advising them of eligibility factors and guidelines so that they can make appropriate referrals.

## **Payment Standards**

Payment Standards are currently set above 100% but at or below 110% of the Fair Market Rent (FMR). Traditionally FMRs have not been adequate to ensure success among assisted families in Carlsbad's segment of the FMR area. The higher payment standards reflect the higher rents in Carlsbad and increase the housing options for families in Carlsbad; therefore, furthering the PHA's efforts for fair housing and deconcentration.

(c) If the PHA answered yes for any element, describe the revisions for each element below:

## **Deconcentration and Other Policies that Govern Eligibility, Selection, and Admissions**

In cooperation with the efforts to house Homeless Veterans and the Chronically Homeless, the Carlsbad PHA has set aside 10 vouchers that are specifically targeted to homeless individuals.

# FY2016 - Performance Measurement Module (Sys PM)

## Summary Report for CA-601 - San Diego City and County CoC

For each measure enter results in each table from the System Performance Measures report generated out of your CoCs HMIS System. There are seven performance measures. Each measure may have one or more “metrics” used to measure the system performance. Click through each tab above to enter FY2016 data for each measure and associated metrics.

RESUBMITTING FY2015 DATA: If you provided revised FY 2015 data, the original FY2015 submissions will be displayed for reference on each of the following screens, but will not be retained for analysis or review by HUD.

ERRORS AND WARNINGS: If data are uploaded that creates selected fatal errors, the HDX will prevent the CoC from submitting the System Performance Measures report. The CoC will need to review and correct the original HMIS data and generate a new HMIS report for submission.

Some validation checks will result in warnings that require explanation, but will not prevent submission. Users should enter a note of explanation for each validation warning received. To enter a note of explanation, move the cursor over the data entry field and click on the note box. Enter a note of explanation and “save” before closing.

## Measure 1: Length of Time Persons Remain Homeless

This measures the number of clients active in the report date range across ES, SH (Metric 1.1) and then ES, SH and TH (Metric 1.2) along with their average and median length of time homeless. This includes time homeless during the report date range as well as prior to the report start date, going back no further than October, 1, 2012.

***Metric 1.1: Change in the average and median length of time persons are homeless in ES and SH projects.***

***Metric 1.2: Change in the average and median length of time persons are homeless in ES, SH, and TH projects.***

a. This measure is of the client's entry, exit, and bed night dates strictly as entered in the HMIS system.

## FY2016 - Performance Measurement Module (Sys PM)

	Universe (Persons)			Average LOT Homeless (bed nights)				Median LOT Homeless (bed nights)			
	Submitted FY2015	Revised FY2015	Current FY	Submitted FY2015	Revised FY2015	Current FY	Difference	Submitted FY2015	Revised FY2015	Current FY	Difference
1.1 Persons in ES and SH	6822	6669	6729	59	61	70	9	28	30	33	3
1.2 Persons in ES, SH, and TH	10637	10271	9621	146	148	151	3	72	74	77	3

b.

This measure includes data from each client's "Length of Time on Street, in an Emergency Shelter, or Safe Haven" (Data Standards element 3.17) response and prepends this answer to the client's entry date effectively extending the client's entry date backward in time. This "adjusted entry date" is then used in the calculations just as if it were the client's actual entry date.

NOTE: Due to the data collection period for this year's submission, the calculations for this metric are based on the data element 3.17 that was active in HMIS from 10/1/2015 to 9/30/2016. This measure and the calculation in the SPM specifications will be updated to reflect data element 3.917 in time for next year's submission.

	Universe (Persons)		Average LOT Homeless (bed nights)			Median LOT Homeless (bed nights)		
	Previous FY	Current FY	Previous FY	Current FY	Difference	Previous FY	Current FY	Difference
1.1 Persons in ES and SH	-	7048	-	236		-	75	
1.2 Persons in ES, SH, and TH	-	10735	-	355		-	200	



## FY2016 - Performance Measurement Module (Sys PM)

### Measure 2: The Extent to which Persons who Exit Homelessness to Permanent Housing Destinations Return to Homelessness

This measures clients who exited SO, ES, TH, SH or PH to a permanent housing destination in the date range two years prior to the report date range. Of those clients, the measure reports on how many of them returned to homelessness as indicated in the HMIS for up to two years after their initial exit.

	Total # of Persons who Exited to a Permanent Housing Destination (2 Years Prior)		Returns to Homelessness in Less than 6 Months			Returns to Homelessness from 6 to 12 Months			Returns to Homelessness from 13 to 24 Months			Number of Returns in 2 Years	
	Revised FY2015	# of Returns	Revised FY2015	# of Returns	% of Returns	Revised FY2015	# of Returns	% of Returns	Revised FY2015	# of Returns	% of Returns	# of Returns	% of Returns
Exit was from SO	1	37	0	17	46%	0	1	3%	0	3	8%	21	57%
Exit was from ES	1066	1300	214	271	21%	87	127	10%	66	120	9%	518	40%
Exit was from TH	2391	2442	279	336	14%	124	138	6%	164	144	6%	618	25%
Exit was from SH	28	41	6	1	2%	6	4	10%	2	3	7%	8	20%
Exit was from PH	830	1071	62	85	8%	59	25	2%	52	53	5%	163	15%
TOTAL Returns to Homelessness	4316	4891	561	710	15%	276	295	6%	284	323	7%	1328	27%

### Measure 3: Number of Homeless Persons

#### Metric 3.1 – Change in PIT Counts

## FY2016 - Performance Measurement Module (Sys PM)

This measures the change in PIT counts of sheltered and unsheltered homeless person as reported on the PIT (not from HMIS).

	2015 PIT Count	Most Recent PIT Count	Difference
Universe: Total PIT Count of sheltered and unsheltered persons	8742	8669	-73
Emergency Shelter Total	1493	1250	-243
Safe Haven Total	52	52	0
Transitional Housing Total	3041	2427	-614
Total Sheltered Count	4586	3729	-857
Unsheltered Count	4156	4940	784

### Metric 3.2 – Change in Annual Counts

This measures the change in annual counts of sheltered homeless persons in HMIS.

	Submitted FY2015	Revised FY2015	Current FY	Difference
Universe: Unduplicated Total sheltered homeless persons	12304	12200	10905	-1295
Emergency Shelter Total	7052	6917	6753	-164
Safe Haven Total	120	120	121	1
Transitional Housing Total	7368	7884	6294	-1590

## FY2016 - Performance Measurement Module (Sys PM)

### Measure 4: Employment and Income Growth for Homeless Persons in CoC Program-funded Projects

Metric 4.1 – Change in earned income for adult system stayers during the reporting period

	Submitted FY2015	Revised FY2015	Current FY	Difference
Universe: Number of adults (system stayers)	642	671	597	-74
Number of adults with increased earned income	14	11	23	12
Percentage of adults who increased earned income	2%	2%	4%	2%

Metric 4.2 – Change in non-employment cash income for adult system stayers during the reporting period

	Submitted FY2015	Revised FY2015	Current FY	Difference
Universe: Number of adults (system stayers)	642	671	597	-74
Number of adults with increased non-employment cash income	53	56	69	13
Percentage of adults who increased non-employment cash income	8%	8%	12%	3%

Metric 4.3 – Change in total income for adult system stayers during the reporting period

	Submitted FY2015	Revised FY2015	Current FY	Difference
Universe: Number of adults (system stayers)	642	671	597	-74
Number of adults with increased total income	60	61	81	20
Percentage of adults who increased total income	9%	9%	14%	4%

## FY2016 - Performance Measurement Module (Sys PM)

### Metric 4.4 – Change in earned income for adult system leavers

	Submitted FY2015	Revised FY2015	Current FY	Difference
Universe: Number of adults who exited (system leavers)	3442	3358	2352	-1006
Number of adults who exited with increased earned income	474	433	294	-139
Percentage of adults who increased earned income	14%	13%	13%	0%

### Metric 4.5 – Change in non-employment cash income for adult system leavers

	Submitted FY2015	Revised FY2015	Current FY	Difference
Universe: Number of adults who exited (system leavers)	3442	3358	2352	-1006
Number of adults who exited with increased non-employment cash income	299	282	246	-36
Percentage of adults who increased non-employment cash income	9%	8%	10%	2%

### Metric 4.6 – Change in total income for adult system leavers

	Submitted FY2015	Revised FY2015	Current FY	Difference
Universe: Number of adults who exited (system leavers)	3442	3358	2352	-1006
Number of adults who exited with increased total income	719	669	499	-170
Percentage of adults who increased total income	21%	20%	21%	1%

## FY2016 - Performance Measurement Module (Sys PM)

### Measure 5: Number of persons who become homeless for the 1st time

Metric 5.1 – Change in the number of persons entering ES, SH, and TH projects with no prior enrollments in HMIS

	Submitted FY 2015	Revised FY2015	Current FY	Difference
Universe: Person with entries into ES, SH or TH during the reporting period.	10131	10329	9139	-1190
Of persons above, count those who were in ES, SH, TH or any PH within 24 months prior to their entry during the reporting year.	3082	3428	2914	-514
Of persons above, count those who did not have entries in ES, SH, TH or PH in the previous 24 months. (i.e. Number of persons experiencing homelessness for the first time)	7049	6901	6225	-676

Metric 5.2 – Change in the number of persons entering ES, SH, TH, and PH projects with no prior enrollments in HMIS

	Submitted FY 2015	Revised FY2015	Current FY	Difference
Universe: Person with entries into ES, SH, TH or PH during the reporting period.	12397	12492	12875	383
Of persons above, count those who were in ES, SH, TH or any PH within 24 months prior to their entry during the reporting year.	3845	4134	3891	-243
Of persons above, count those who did not have entries in ES, SH, TH or PH in the previous 24 months. (i.e. Number of persons experiencing homelessness for the first time.)	8552	8358	8984	626

## FY2016 - Performance Measurement Module (Sys PM)

### Measure 6: Homeless Prevention and Housing Placement of Persons defined by category 3 of HUD's Homeless Definition in CoC Program-funded Projects

This Measure is not applicable to CoCs in the FY2016 Resubmission reporting period.

### Measure 7: Successful Placement from Street Outreach and Successful Placement in or Retention of Permanent Housing

Metric 7a.1 – Change in exits to permanent housing destinations

	Submitted FY 2015	Revised FY2015	Current FY	Difference
Universe: Persons who exit Street Outreach	2436	1505	1156	-349
Of persons above, those who exited to temporary & some institutional destinations	1075	405	289	-116
Of the persons above, those who exited to permanent housing destinations	194	189	50	-139
% Successful exits	52%	39%	29%	-10%

Metric 7b.1 – Change in exits to permanent housing destinations

## FY2016 - Performance Measurement Module (Sys PM)

	Submitted FY 2015	Revised FY2015	Current FY	Difference
Universe: Persons in ES, SH, TH and PH-RRH who exited	9968	10100	10714	614
Of the persons above, those who exited to permanent housing destinations	4284	4241	4599	358
% Successful exits	43%	42%	43%	1%

### Metric 7b.2 – Change in exit to or retention of permanent housing

	Submitted FY 2015	Revised FY2015	Current FY	Difference
Universe: Persons in all PH projects except PH-RRH	3134	3153	3758	605
Of persons above, those who remained in applicable PH projects and those who exited to permanent housing destinations	2908	2915	3525	610
% Successful exits/retention	93%	92%	94%	1%

## **FY2016 - SysPM Data Quality**

### **CA-601 - San Diego City and County CoC**

This is a new tab for FY 2016 submissions only. Submission must be performed manually (data cannot be uploaded). Data coverage and quality will allow HUD to better interpret your Sys PM submissions.

Your bed coverage data has been imported from the HIC module. The remainder of the data quality points should be pulled from data quality reports made available by your vendor according to the specifications provided in the HMIS Standard Reporting Terminology Glossary. You may need to run multiple reports into order to get data for each combination of year and project type.

You may enter a note about any field if you wish to provide an explanation about your data quality results. This is not required.



## FY2016 - SysPM Data Quality

	All ES, SH				All TH				All PSH, OPH				All RRH				All Street Outreach			
	2012-2013	2013-2014	2014-2015	2015-2016	2012-2013	2013-2014	2014-2015	2015-2016	2012-2013	2013-2014	2014-2015	2015-2016	2012-2013	2013-2014	2014-2015	2015-2016	2012-2013	2013-2014	2014-2015	2015-2016
1. Number of non-DV Beds on HIC	303	415	666	1211	3408	3560	3400	2680	2503	3296	3501	4038		39	158	579				
2. Number of HMIS Beds	253	371	615	1211	3281	3393	3160	2581	2180	2952	2855	3936		39	158	579				
3. HMIS Participation Rate from HIC ( % )	83.50	89.40	92.34	100.00	96.27	95.31	92.94	96.31	87.10	89.56	81.55	97.47		100.00	100.00	100.00				
4. Unduplicated Persons Served (HMIS)	6760	7413	7105	7037	8427	8096	7899	6311	2671	2999	3252	3838	974	1746	2925	4943	5	162	910	755
5. Total Leavers (HMIS)	5806	6809	6143	5805	6132	5824	5910	4875	400	506	491	426	793	1313	1751	3605	0	53	380	215
6. Destination of Don't Know, Refused, or Missing (HMIS)	2703	2366	1710	1296	538	525	528	667	89	130	140	155	0	58	184	169	0	3	117	76
7. Destination Error Rate (%)	46.56	34.75	27.84	22.33	8.77	9.01	8.93	13.68	22.25	25.69	28.51	36.38	0.00	4.42	10.51	4.69		5.66	30.79	35.35