Meeting of the Los Angeles Continuum of Care Coordinating Council

Wednesday, June 14, 2017
2:00 pm – 4:00 pm
Los Angeles Homeless Services Authority – Conference Room 1 & 2 (5th Floor)
811 Wilshire Boulevard, Los Angeles, CA 90017

Agenda

I. Welcome & Roll-Call  
   Veronica Lewis

II. Approval of Coordinating Council Minutes  
    Coordinating Council
    a. Minutes of the Coordinating Council Meeting dated Wednesday, May 10, 2017

III. Review and approve Federal Law Enforcement Policy  
     Maggie Potthoff

IV. Continuum of Care Governance Transition Update  
    Clementina Verjan
    a. LA CoC Board Update
    b. Review of LA CoC Board Training

V. 2017 Continuum of Care Program Competition Update  
    Ian Costello
    a. Discussion on LA CoC Program Performance Evaluation Methodology
    b. Discussion on LA CoC Program Priority List Ranking
    c. Discussion on LA CoC Program Reallocation Policy
    d. Discussion on Updating Order of Priority for Chronically Homeless Policy
    e. Discussion on Updating ESG Written Standards for the LA CoC
    f. Discussion on HMIS Policies and Procedures

VI. Discussion on Department of Housing and Urban Development (HUD) Proposed Changes to the Methodology Used for Estimating Fair Market Rents  
    Erin Cox

VII. Update on Federal Budget  
     Will Lehman

VIII. Discuss Agenda Items for Next Meeting  
      Veronica Lewis

IX. Adjournment

Supporting Documents
1. Meeting Agenda of the Los Angeles Continuum of Care Coordinating Council
2. Meeting Minutes of the Coordinating Council dated Wednesday, May 10, 2017
3. Response to Law Enforcement Activities in the LA CoC
4. Establishing & Operating a Continuum of Care Board Presentation
5. 2017 Los Angeles Continuum of Care Program Performance Evaluation Process and Methodology
8. 2017 CoC NOFA Program Evaluation Appeal Communication
10. FY 2017 Continuum of Care Program Reallocation Policy
11. Reallocation Recommendation
12. Final Reallocation Recommendation
13. 2017 HMIS Policies and Procedures
14. Proposed Changes to HUD Methodology for Estimating Fair Market Rents Presentation
15. Fiscal Year 2017 Federal Appropriations Bill & Fiscal Year 2018 Budget Proposal
Meeting of the Los Angeles Continuum of Care Coordinating Council

Wednesday, May 10, 2017
2:00 pm – 4:00 pm
Los Angeles Homeless Services Authority – Conference Room 1& 2 (5th Floor)
811 Wilshire Boulevard, Los Angeles, CA 90017

Meeting Minutes

Attendance
Los Angeles Coordinating Council Members:
- SPA 1 – Antelope Valley: Patti Rivetti
- SPA 2 – San Fernando Valley: Bonnie Roth
- SPA 3 – San Gabriel Valley: Jan Cicco
- SPA 4 – Hollywood: Antquan Washington
- SPA 4 – Metro ELA/Boyle Heights: Andrea Marchetti
- SPA 4 – Skid Row:
- SPA 5 – West Los Angeles: Va Lecia Adams Kellum
- SPA 6 – South Los Angeles: Veronica Lewis
- SPA 7 – East LA County: Steve Lytle
- SPA 8 – South Bay/Harbor: Tahia Hayslet; Elizabeth Eastlund

LAHSA Staff:
Clementina Verjan, Stuart Jackson, Josh Decell, JuHyun Sakota, Jonathan Hans, Phyllis Lozano, Alison Korte, Julia Vittore

I. Welcome & Roll-Call  
Veronica Lewis

II. Approval of Meeting Minutes  
Coordinating Council

   Motion: A. Washington moved to approve the minutes. T. Hayslet seconded.
   Action: Motion approved unanimously.

III. Continuum of Care Governance Transition Update  
Sarah Mahin
LAHSA provided an update on the CoC governance transition. The LA CoC Board Nominating Committee has been meeting bi-weekly since March. The primary focus of the sessions has been to review the bylaws and HUD governance requirements for the LA CoC Board, and specifically the composition of the Board.
Discussion:
Council inquired as to whether the joint meeting of Coordinating Council and the LA CoC Board has been scheduled yet. Staff responded that it has been tentatively scheduled for Wednesday, July 12th. Council inquired as to whether an alternate may become a member. LAHSA responded yes, but they would have to apply for the seat. If the current seat holder resigns, the designated alternate would assume the seat. Council asked if the final composition of the Board has been finalized. Staff responded that there will be eight (8) SPA representative seats and nine (9) At-large seats. Council recommended that LAHSA oversee the nominee vetting process. Council suggested that LAHSA design and convene a training for the incoming Board members.

IV. 2017 Continuum of Care Program Competition Update

a. 2017 CoC NOFA Recommendations
   
   LAHSA provided recommendations to Council regarding modifications to the approved 2016 NOFA Performance Evaluation, Reallocation, and Ranking Policies.

   Discussion:
   Council asked whether LAHSA will experience a net loss in funds as a result of the Mayor’s budget for FY 2017-18. Staff responded that LAHSA is projecting a net gain in funds due to Measure H funding.

b. Discussion on LA CoC Program Performance Evaluation
   
   LAHSA presented on the updated LA CoC program performance measures for Permanent Supportive Housing, Rapid Re-housing, and Transitional Housing programs. LAHSA is currently working on long-term performance measures for Transitional Housing programs that serve the domestic violence population.

   Discussion:
   Council was opposed to extra five (5) points for HMIS Participation and asked if LAHSA is open to reallocating those points to Housing Stability, instead. Council expressed concern that the Median Length of Stay is too short for certain populations, e.g., domestic violence survivors. Council expressed concern that the shifts in HUD funding requests may result in a decrease in Permanent Supportive Housing units in the Continuum.

c. Coordinating Council Recommendation for CoC Program Priority List Ranking
   
   LAHSA presented on the 2017 CoC program priority list ranking strategy and asked Councilmembers for input.

   Discussion:
   Council expressed concern that the questions in the RFP application are not detailed enough. Council asked if LAHSA has policies and procedures in place to vet RFP application responses, e.g. whether the organization abides by the Housing First approach.

d. 2016 Program Reallocation Policy
   
   LAHSA presented on the LA CoC performance evaluation for the following programs: permanent supportive housing, rapid re-housing, transitional housing for both single adult and youth populations, and transitional housing for domestic violence survivors.
Discussion:
Council asked for clarification around proposed Strategy E14: Enhanced Services for TAY, specifically whether there is Measure H funding proposed to expand the range and depth of supportive services available to the TAY population. LAHSA responded that Strategy E14 includes a variety of enhancements to service offerings for the TAY population.

V. Greater Los Angeles Homeless Count
   a. Update on 2017 Greater Los Angeles Homeless Count  
      JuHyun Sakota
      LAHSA provided an update on the 2017 Greater Los Angeles Homeless Count, specifically planning for the Homeless Count release event on Wednesday, May 31, 2017.
      Discussion:
      Council expressed concern that the LAHSA conference room space is too small to accommodate the Homeless Count debrief event. Council suggested that LAHSA choose a space independent from another agency to make clear that LAHSA is the sole convener. Council suggested that LAHSA take the opportunity to highlight the positive outcomes and make clear what has been accomplished.
   
   b. Update on Planning for 2018 Greater Los Angeles Homeless Count  
      Jonathan Hans
      LAHSA provided an update on planning timeline for the 2018 Greater Los Angeles Homeless Count.
      Discussion: None

VI. Discuss Agenda Items for Next Meeting
   • LA CoC Board Training Curriculum
   • 2017 NOFA Recommendations
   • Program Reallocation Policy
   • Program Priority List Ranking
   • Update on the final composition of the LA CoC Board

VII. Adjourn
    Motion: S. Lytle moved to adjourn. V. Lewis seconded.
    Action: Motion approved unanimously.

The meeting adjourned at 4:03pm.
Response to Law Enforcement Activities in Programs Operating in the LA Continuum of Care

Purpose: LAHSA affirms the right of all individuals experiencing homelessness in the Los Angeles Continuum of Care (LA CoC) to access services and housing for which they are eligible by promoting welcoming, non-discriminatory environments that protect client privacy and safety. To ensure the provision of welcoming, non-discriminatory environments this policy requires that service providers have a documented plan for responding to situations related to law enforcement matters, including immigration enforcement activities.

Policy: Service providers in the LA CoC shall develop policies and procedures on how their agency responds to law enforcement in civil and criminal law matters. These matters may include a range of activities, including requests for information about specific individuals or groups and/or access to facilities. Agency responses to all activities should prioritize and protect client privacy and safety whenever possible.

Procedure:

Agencies shall:

1. Seek legal counsel for guidance on how to respond to law enforcement activities and requests.
2. Develop agency policies and procedures that incorporate guidance from legal counsel. Relevant areas for policy development may include but are not limited to:
   a. Front line staff responses to law enforcement requests,
   b. Staff training on constitutional rights and protections, and
   c. Guidelines around assessment for, and development of, Family Preparedness Plans when applicable.
3. Inform program participants of these policies, procedures, and their rights.
4. Notify LAHSA within 72 hours of significant encounters and/or incidents with law enforcement by contacting your Integrated Agency Support Team member from the Systems Integration Division.
Establishing & Operating a Continuum of Care Board

June 2017
Welcome and Introductions

Workshop Presenter
- Matt White

Session Logistics
- Approximately four hours
- Board members invited to ask questions and make comments
Workshop Objectives

By the end of the training, Board members will…

• Be familiar with CoC Board framework in relation to RHAC, LAHSA, LAHSA Commission
• Understand CoC Board requirements and responsibilities (review Bylaws)
• Learn about CoC Board functions (annual planning calendar)
Training Structure

- CoC Board Requirements
  - Hearth Act, CoC Program, City & County Plans
- CoC Board Functions
  - Membership, roles, participation expectations, duties
- CoC Board Planning Activities
  - CoC NOFA, HMIS, SPA planning, CES, HIC, PIT
The HEARTH Act and the CoC Program
HEARTH Legislation

• HEARTH Act amended McKinney-Vento Homeless Assistance Act in 2009

• CoC Program interim rule implements the HEARTH Act:
  – Establishes regulations for CoC Program
  – Applies to all new/renewal projects in the FY2012 funding competition and thereafter

• Timeline:
  – Published July 31, 2012; Effective August 30, 2012
CoC Program is designed to...

- Promote a communitywide commitment to the goal of ending homelessness
- Provide funding for efforts to quickly rehouse homeless individuals and families
- Promote access to and effective use of mainstream programs
- Optimize self-sufficiency among individuals and families experiencing homelessness
Key Terms and Relationships

- CoC
- CoC Board
- HMIS Lead
- Collaborative Applicant
  - Unified funding agency (UFA)
- Recipients/Subrecipients
Establishing a CoC

- CoC Program interim rule requires communities to establish a CoC in order to receive CoC Program funding:
  - Must meet minimum requirements for CoC structure, governance and responsibilities
  - Requires collaboration between CoC Program and ESG recipients on certain responsibilities
  - Evidence must be maintained in Collaborative Applicant records (578.103)
The CoC Program interim rule (578.5) says:
Representatives from relevant organizations within a geographic area shall establish a CoC for the geographic area to carry out the duties of this part.
CoC Board

- Must be established by CoC to act on behalf of the CoC membership (RHAC)
- What the CoC means by “on its behalf” must be specified in the CoC governance charter
  - Provide advice and council
- **NOT the same as a CoC Collaborative Applicant**
CoC Board Requirements

• Must be representative of relevant organizations and of projects serving homeless subpopulations
• Must include at least one homeless or formerly homeless individual
• Members must be selected using a process defined in writing
  – Written process must be reviewed, updated and approved by the CoC at least once every 5 years
• Members must follow code of conduct, conflict of interest, and recusal process
CoC Responsibilities
CoC Operating Duties

1. Operate the CoC:
   - CoC governance and management
   - Overall and project-level performance
   - Coordinated assessment system
   - Written standards

2. Designate an HMIS for the CoC

3. Plan for the CoC geographic area:
   - Coordinated system of care
CoC Responsibilities:  
CoC Governance and Management
CoC Governance and Management

• Hold semiannual meetings, with published agendas, of the full membership
• Invite new members at least annually
• Appoint additional committees
• Adopt and follow a written board selection process
• Develop a governance charter
• The CoC must develop and follow a governance charter that details the functions of:
  – CoC Board
  – CoC’s committee structure and roles
  – staff roles
  – process for amending the charter

• Some CoCs may have already have bylaws that are similar to a governance charter
• Governance charter must include:
  - Policies and procedures to carry out CoC responsibilities (directly or by reference).
  - Code of conduct
  - Recusal process for Board members

• Governance charter must be:
  – Reviewed and updated annually
  – Developed in consultation with the Collaborative Applicant and HMIS Lead
CoC Responsibilities: Performance
Performance and Monitoring

- Establish performance targets:
  - In consultation with recipients/subrecipients
  - Varies by population and program type, as appropriate

- Monitor recipient/subrecipient performance

- Evaluate outcomes and report to HUD:
  - For both ESG and CoC Program projects

- Take action against poor performers
The CoC has responsibility for measuring performance at the system level AND project level:

- Requirement is for project-level targets.
- Encouraged to set system targets and regularly measure performance.
- Consider how project-level performance contributes to system-level performance when taking action against poor performers.
HEARTH establishes clear system-level performance measures:
- Length of time homeless
- Recidivism (subsequent return to homelessness)
- Access/coverage (thoroughness in reaching homeless persons)
- Overall reduction in number of persons who experience homelessness
- Job and income growth for homeless persons
- Reduction in first time homelessness
- Other accomplishments related to reducing homelessness
CoC Responsibilities: Coordinated Assessment
Coordinated Assessment

- CoC must establish and operate a coordinated assessment system, in consultation with ESG recipient(s):
  - Must provide an initial, comprehensive assessment of needs of individuals/families requesting assistance
  - Must cover the full CoC geographic area
  - Must be accessible and well-advertised to individuals/families seeking assistance
CoC Responsibilities: Written standards
CoC must work with the ESG recipient(s) to develop written standards for providing CoC assistance:

- Eligibility policies and procedures
- Determining and prioritizing eligible persons for TH, RRH, and PSH resources (consistent with coordinated assessment protocols)
- Determining levels of RRH assistance and participant rent contribution (across projects)
- Additional standards for designated HPC
CoC Responsibilities: Designating and Operating an HMIS
Designating and Operating HMIS

- The CoC must designate:
  - A single HMIS system for geographic area
  - An HMIS Lead
    - single eligible applicant to manage the HMIS
CoC Responsibilities:
CoC Planning
CoC Planning

• The CoC must coordinate the implementation of a housing and service system that meets the needs of homeless persons throughout its geography

• Minimally, the system should encompass:
  – Outreach, engagement, and assessment
  – Shelter, housing, and supportive services
  – Homelessness prevention strategies
CoC Planning

• Plan and conduct point-in-time count
  – Sheltered (annual) and unsheltered (biennial)
• Conduct annual gaps analysis of homeless needs and services
• Participate in the Consolidated Plan
• Consult with ESG recipients
  – Plan for allocation of ESG program funds
  – Report on and evaluate performance of ESG recipients/subrecipients
CoC and ESG Coordination

• Key Elements of coordination:
  – Centralized/coordinated assessment
  – Consolidated Plan homelessness strategy and goals
  – Allocation of ESG funding
  – ESG performance standards
  – ESG subrecipient participation in HMIS
  – ESG and CoC Program written standards
CoC Responsibilities: Preparing an Annual Application to HUD
Each year, HUD makes CoC Program funds available through a Notice of Funding Availability (NOFA):
- Funding for eligible housing and service projects.
- Funding for CoC planning

Collaborative Applicant submits CoC Consolidated Application as part of the competition
CoC responsibilities:

• Set funding priorities
• Facilitate collaborative process for development of applications
• Approve annual submission of applications
• Designate an eligible applicant as the Collaborative Applicant to apply on the CoC’s behalf
Los Angeles CoC Framework
Strategy E17: Create a Coordinated System

- Regional Homelessness Advisory Council and Implementation Coordination
  - Provide strategic leadership
  - Support best practices
  - Promote funding alignment
  - Coordinate programs
  - Support strategic response
  - Identify barriers
Strategy 5E: Create a Regional Homelessness Advisory Council

- Regional Homelessness Advisory Council
  - Provide strategic leadership
  - Support best practices
  - Promote funding alignment
  - Coordinate programs
  - Support a regional strategic response
  - Identify barriers
  - Track progress
### CoC Framework in Los Angeles

<table>
<thead>
<tr>
<th>CoC Role</th>
<th>CoC Entity</th>
</tr>
</thead>
<tbody>
<tr>
<td>LA CoC Membership</td>
<td>Regional Homelessness Advisory Council</td>
</tr>
<tr>
<td>CoC Board</td>
<td>CoC Board</td>
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<tr>
<td>CoC Collaborative Applicant</td>
<td>LAHSA</td>
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<tr>
<td>HMIS Lead Agency</td>
<td>LAHSA</td>
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<tr>
<td>LAHSA Oversight</td>
<td>LAHSA Commission</td>
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<tr>
<td>Community Leadership</td>
<td>United Way of Greater LA</td>
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</tbody>
</table>
Membership-based council whose mission is to provide a framework for board-based, collaborative and strategic leadership on homelessness planning and service coordination throughout the greater Los Angeles metro region
1. Provide strategic leadership
2. Support dissemination of knowledge
3. Promote funding alignment
4. Promote program coordination
5. Support a regional strategic response
6. Identify barriers
7. Influence mainstream systems
8. Synthesize data
9. Function as CoC membership
RHAC Membership

58 seats

- 24 public sector
- 12 providers
- 5 education sector
- 3 business community
- 2 health systems
- 2 formerly homeless
- 2 philanthropy

- 5 Council of Governments
- 2 advocacy organizations
- 1 LAHSA Commission
- 1 LAHSA ED
- 1 United Way of Greater LA
LA CoC Board Duties

Council of elected SPA and at-large members, providing **advice and counsel** to RHAC, Home for Good, LAHSA Commission on matters related to CoC operations:

- CoC project performance targets
- CES operations
- Provision of CoC assistance
- Coordination of CoC system
- Funding priorities for HUD-funded projects
- CoC application for HUD funding (NOFA)
8 elected SPA representatives

- May elect alternates to ensure continuity and serve as proxy for member

9 selected At-Large representatives

- Faith-based organizations
- Public Housing Agencies
- Mental health agencies
- School districts
- Universities
- Law enforcement
- Business interests
- Private foundations
- Affordable housing developers
- Hospitals or other federally qualified health centers
- Rental property managers
- Victim service providers
LA CoC Board Participation Expectations

1. Members are expected to be present and active participants in Board meetings.

2. Members are expected to actively participate in Board discussions, activities, correspondence, sub-committees, or ad hoc committees.

3. Members are expected to follow *Conflict of Interest* and *Code of Conduct* provisions.
CoC Board Requirements

- No more than 8 homeless assistance provider representatives shall be members of the CoC Board at one time.
- Board shall include at least 2 persons with lived experience (persons formerly homeless or experiencing homelessness currently)
- Board shall include a balanced representation from governmental sectors, subpopulation groups, CoC component types, and SPAs.
- Members serve 2-year terms. Can serve multiple terms but only 2 consecutively.
Board member attendance

- Attendance will be recorded at Board meetings
- Members are expected to have at least an 80%, in-person, annual attendance rate
- Less than 80% annual attendance rate may be grounds for dismissal
Board meetings

• Monthly meetings with possibility for more frequent ad hoc meetings
• Simple majority (9 members) is required for quorum
CoC Board leadership

- Board may select two (2) co-chairs to serve two-year terms
- Co-chairs selected by simple majority vote of Board membership
- Co-chairs may represent Board in all matters not requiring a quorum
- Co-chair may call meetings, preside over meetings, set agendas
• LAHSA will provide administrative support to Board
  - Manage day-to-day operations, communications, member selection process, and other functions as assigned
  - LAHSA will make public, via email, announcements of all meeting dates, agendas, location, and any supporting documentation
Conflict of Interest

Board members must conduct themselves at all times with highest ethical standards

• Disclose any conflict or appearance of conflict which may or could be reasonably known

• Recuse from voting on any item that would create a conflict or appearance of conflict

• Recuse from any discussions or influence of discussions concerning the award of a grant or other financial benefit to the organization that the member represents

• Refrain from lobbying or seeking information from any other member of the Board if such action would create a conflict or the appearance of conflict.
1. Comply with by-laws and policies
2. Execute Conflict of Interest agreement
3. Maintain confidentiality of Board deliberations
4. Act impartially and with integrity
5. Do not commit fraud
6. Do not offer or accept gifts in exchange for Board action
7. Refrain from unwelcome contact or actions understood as offensive, intimidating, humiliating
8. Adhere to all local, state and federal laws
Annual CoC Planning Calendar
CoC NOFA

- Project evaluation
- Project rating and ranking
- Project selection criteria
• Participation expectations for individuals, for programs, for agencies
• Privacy and Security policies
• Data quality policies
• Client Consent Protocols
SPA Planning

- CES
- System Performance Measures
- HIC
- PIT
- Gaps Analysis
Questions?
Appeal Process for 2017 Continuum of Care (CoC)

Evaluation Reports for Renewal Projects

Los Angeles Homeless Service Authority (LAHSA) staff will review and respond to appeals of the 2017 CoC Evaluation Reports subject to the following:

(1) Persons who can appeal.
   The following persons may request an appeal after receiving the evaluation report: Authorized official of grantee agency (non-LAHSA projects) or authorized agency official (LAHSA projects) that submitted the Annual Performance Report (APR) to LAHSA.

(2) Deadline for Filing an Appeal.
   Request for an appeal may be made by filing a Notice of Appeal with LAHSA no later than 5pm PST on [[Month]] [[Day]], 2017. No waiver of the appeal period shall be permitted.

(3) Grounds for Appeal:
   Score appeals will only be heard on basis of a data or calculation error. Refer to 2017 Los Angeles Continuum of Care Program Performance Evaluation Process and Methodology in order to assess the accuracy of the report.

   Grantees may also appeal if the project was reclassified in the FY 2014 or FY 2015 registration process, or if the grant changed operating agencies during the evaluation period (7/1/2015-6/30/2016).

(4) To submit an appeal:
   Fully complete the Notice of Appeal (attached), including all necessary supporting documentation and original signature of Authorized Official. Submit appeal via email to appeal@lahsa.org no later than 5pm PST on [[Month]] [[Day]], 2017.
NOTICE OF APPEAL
2017 Continuum of Care Application Evaluation Report

Instructions

- One appeal form must be submitted for each project evaluation report appealed.
- Fill out this form with required attachments and make a copy of the completed form for your records.
- Scan and Email the completed form and attachments to appeal@lahsa.org.
- If you have any questions in regard to completing the notice of appeal, email appeal@lahsa.org.

1. Appellant Information (Party filing appeal):
   i. Name of Authorized Official: _____________________________________________
   ii. Name of Agency: ______________________________________________________
   iii. Grant Award Number: ________________________________________________
   iv. Contact Information:
      1) Address of Administrative Office ______________________________________
      2) Mailing Address (if different) __________________________________________
      3) Contact Person (if different than signatory): _____________________________
      4) Phone: ( ) ___________________ Contact e-mail: __________________________

2. Please indicate item(s) in the report that you are appealing on the basis of a data or calculation error.
   Score Appeals
   - ☐ Performance
   - ☐ Bed/Unit Utilization
   - ☐ HMIS Participation
   - ☐ Spend-Down
   Other Appeals
   - ☐ Reclassification
   - ☐ Change in Operating Agency

3. The following information must be attached to this Written Appeal (check off attached documentation):
   - ☐ A copy of the Evaluation Report in dispute
   - ☐ For Score Appeals: A copy of the relevant portion Annual Performance Report (APR) submitted to HUD, for operating year ending between July 1, 2015 and June 30, 2016. Please circle the specific data points in dispute AND attach a brief statement of the discrepancies between the attached APR and evaluation report
   - ☐ For the dedication of turnover measurement (PSH only), data was sourced directly from HMIS for the period of 1/1/2016-12/31/2016. No appeals will be accepted.
   - ☐ For Other Appeals (See Above); Documentation of project reclassification or change in operator.
   - ☐ I certify that I have verified the data or calculation error(s) subject to appeal of the above-referenced CoC Evaluation Report based upon the evidence attached.

_________________________________________  __________________________
Signature of Authorized Official                  Date
# 2017 Los Angeles CoC Evaluation Report

## Project Information

**Grant Number (APR Grant #):**

**Grantee Name:**

**Operating Agency:**

**Project Name:**

**Project Type:**

**Target Population**

**FileShare ID:**

## Scoring Area

### Cost Effectiveness

<table>
<thead>
<tr>
<th>Performance</th>
<th>APR Result</th>
<th>Points Earned</th>
<th>Points Possible</th>
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</thead>
<tbody>
<tr>
<td>Housing Stability (APR Q29)</td>
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<tr>
<td>Dedication of Turnover to Chronically Homeless Households (HMIS)</td>
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<td>Minimize Negative Turnover (Returns to Homelessness) (APR 29)</td>
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<td>Maintain or Increase Income Overall (APR Q24b3)</td>
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<td>Bed/Unit Utilization (APR Q8-11)</td>
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<td>Commitment to Policy Priorities: Housing First and Low Barrier Programs</td>
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<td>Spend Down (APR Q31a4)</td>
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<td>Data Quality: Missing Data Rate (APR Q7)</td>
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<td>HMIS Participation: HMIS Participation (APR Q7)</td>
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## Score Results

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<tr>
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<th>Total Points Earned</th>
<th>Total Points Possible</th>
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</thead>
<tbody>
<tr>
<td>Project Final Score</td>
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<tr>
<td>Project Final Score %</td>
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2017 Los Angeles Continuum of Care Program Performance Evaluation Process & Methodology

For Continuum of Care (CoC) Program renewal projects in Los Angeles Continuum of Care
Overview

The CoC Program Interim Rule requires local Continuums of Care to establish performance targets appropriate for population and program type, monitor recipient and subrecipient performance, evaluate outcomes, and take action against poor performers. (24 CFR 578.7a.6) As the collaborative applicant for the LA CoC, LAHSA has established an annual performance evaluation for CoC Program renewal projects to align with performance measurement and funding priorities that are scored as part of the annual CoC Program Consolidated Application. Results of the evaluation are then used to inform performance targets and promote continuous quality improvement. This annual cycle of performance appraisal is not only required by HUD, but it also enables the Los Angeles Continuum of Care to work towards locally defined housing stability and client self-determination goals for all CoC projects. The evaluation design and methodological approach considers the diversity of projects across the CoC and accommodates these differences by establishing measurements that provide as much equity and transparency as possible.

Evaluation Data Sources

The data used to conduct the performance evaluation is derived from project-level Annual Performance Reports (APRs) submitted to HUD for operating years ending July 1, 2015 - June 30, 2016. Supplemental data is gathered from past CoC applications, LAHSA fiscal records, and the LA CoC Homeless Management Information System (HMIS).

New projects that have not yet filed an APR during the review period are exempt from evaluation. Renewal projects that have recently changed project type (e.g. supportive services projects that reclassified as housing projects) and have not filed an APR under the updated project component are exempt from evaluation.

Dissemination of Results

Each individual CoC project will receive a report of the project’s score. Agencies will then have an opportunity following the release of individual project scores to appeal the results. After the appeals process is completed the final results of this evaluation will be released in the following manner:

- Each CoC grantee will receive their final individual score report.
- A complete listing of detailed project scores will be presented to the LAHSA Commission and Coordinating Council

Overall project scores will be used to inform the 2017 CoC Program Priority Ranking.

Scoring Methodology by Project Type

The following pages detail the scoring methodology for each project type.
<table>
<thead>
<tr>
<th>Scoring Area</th>
<th>Description</th>
<th>Pts Possible</th>
<th>Scoring Rubric</th>
<th>Source</th>
</tr>
</thead>
<tbody>
<tr>
<td>HMIS Participation</td>
<td>Measures whether the project participates in HMIS and the completeness of HUD-required data (DV Projects Exempt)</td>
<td>510</td>
<td>2.5 points for participation 2.5 points for missing data rate &lt;10%</td>
<td>APR Q7</td>
</tr>
<tr>
<td>Bed Utilization</td>
<td>Measures occupancy rates beds/units supported by the project</td>
<td>10</td>
<td>90% &gt;= 10 points 80%-89% = 5pts 80% &lt;= 0pts</td>
<td>APR Q8-10</td>
</tr>
<tr>
<td>Spend-Down</td>
<td>Measures percent of available funds that are utilized by the project</td>
<td>10</td>
<td>90% &gt;=10 points</td>
<td>APR Q31a4</td>
</tr>
<tr>
<td>Dedication of Turnover to Chronically Homeless Households</td>
<td>Measures the percentage of new program participants (or households) who are chronically homeless</td>
<td>1520</td>
<td>Proportional (Sliding Scale): 50% &lt;= 0 pts 100% = 20 pts</td>
<td>HMIS</td>
</tr>
<tr>
<td>Commitment to Policy Priorities: Housing First and Low Barrier Programs</td>
<td>Evaluates project commitment to housing first and low barrier programming</td>
<td>10</td>
<td>10 points for “Yes” response in Section 3B, Question 4.d. of FY 2016 CoC Project App.</td>
<td>FY 2016 CoC Project App.</td>
</tr>
<tr>
<td>Performance</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Housing Stability</td>
<td>Measures the percentage of project participants who remain housed or move on to other permanent housing</td>
<td>30</td>
<td>Proportional (Sliding Scale): 70% = 0 pts 90% &gt;= 30 pts</td>
<td>APR Q27-29</td>
</tr>
<tr>
<td>Minimize Negative Turnover (Returns to Homelessness)</td>
<td>Measures the percentage of persons who leave the program for reasons other than permanent housing (excludes deceased)</td>
<td>10</td>
<td>Proportional (Sliding Scale): 0% = 10 pts 10% &lt;= 0 pts</td>
<td>APR Q29</td>
</tr>
<tr>
<td>Maintain or Increase Income</td>
<td>Measures the percentage of adults participant who maintain or increase their income level over the program year</td>
<td>10</td>
<td>Proportional (Sliding Scale): 50% &gt;= 10 pts 20% &lt;= 0 pts</td>
<td>APR Q24b3</td>
</tr>
</tbody>
</table>
## Rapid Re-Housing

<table>
<thead>
<tr>
<th>Scoring Area</th>
<th>Description</th>
<th>Pts Possible</th>
<th>Scale</th>
<th>Source</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>HMIS Participation</strong></td>
<td>Measures whether the project participates in HMIS and the completeness of HUD-required data (DV Projects Exempt)</td>
<td>10</td>
<td>5 points for participation</td>
<td>APR Q7</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>5 points missing data rate &lt;10%</td>
<td></td>
</tr>
<tr>
<td><strong>Spend-Down</strong></td>
<td>Measures percent of available funds that are utilized by the project</td>
<td>10</td>
<td>90% &gt;= 10 points</td>
<td>APR Q31a4</td>
</tr>
<tr>
<td><strong>Commitment to Policy Priorities: Housing First and Low Barrier Programs</strong></td>
<td>Evaluates project commitment to housing first and low barrier programming</td>
<td>10</td>
<td>10 points for “Yes” response in Section 3B, Question 4.d. of FY 2015-6</td>
<td>FY 2015-6 CoC Project App.</td>
</tr>
<tr>
<td><strong>Performance</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Housing Stability</strong></td>
<td>Measures the percentage of project participants who remain housed or move on to other permanent housing are placed into permanent housing</td>
<td>50-30</td>
<td>Proportional (Sliding Scale): 70% = 0 pts</td>
<td>APR Q27-29</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>90% &gt;= 350 pts</td>
<td></td>
</tr>
<tr>
<td><strong>Minimize Negative Turnover (Returns to Homelessness)</strong></td>
<td>Measures the percentage of persons who leave the program for reasons other than permanent housing (excludes deceased)</td>
<td>20</td>
<td>Proportional (Sliding Scale): 0% = 2010 pts</td>
<td>APR Q29</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>10% &lt;= 0 pts</td>
<td></td>
</tr>
<tr>
<td><strong>Median Length of Stay</strong></td>
<td>Measures median length of time participants remain in the project</td>
<td>10</td>
<td>Proportional (Sliding Scale): 270 days &lt;= 10 pts</td>
<td>APR Q27</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>450 days &gt;= 0 pts</td>
<td></td>
</tr>
<tr>
<td><strong>Increase Income Overall</strong></td>
<td>Measures the percentage of adult participants who increase their overall income level over the program year</td>
<td>20</td>
<td>Proportional (Sliding Scale): 40% &gt;= 2010 pts</td>
<td>APR Q24b3</td>
</tr>
<tr>
<td>Scoring Area</td>
<td>Description</td>
<td>Pts Possible</td>
<td>Scale</td>
<td>Source</td>
</tr>
<tr>
<td>----------------------------------------------------------</td>
<td>--------------------------------------------------------------------------------------------------</td>
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<td>---------------------------------</td>
<td>-----------------------------</td>
</tr>
<tr>
<td>HMIS Participation</td>
<td>Measures whether the project participates in HMIS and the completeness of HUD-required data (DV Projects Exempt)</td>
<td><strong>510</strong></td>
<td>2.5 points for participation</td>
<td>APR Q7</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>2.5 points missing data rate</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>&lt;10%</td>
<td></td>
</tr>
<tr>
<td>Bed Utilization</td>
<td>Measures occupancy rates beds/units supported by the project</td>
<td><strong>20</strong></td>
<td>90% &lt;= 20 points</td>
<td>APR Q8-11</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>80%-89% = 10pts</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>80% &lt;= 0pts</td>
<td></td>
</tr>
<tr>
<td>Spend-Down</td>
<td>Measures percent of available funds that are utilized by the project</td>
<td><strong>10</strong></td>
<td>90% &gt;=10 points</td>
<td>APR Q31a4</td>
</tr>
<tr>
<td>Commitment to Policy Priorities: Housing First and Low Barrier Programs</td>
<td>Evaluates project commitment to housing first and low barrier programming</td>
<td><strong>10</strong></td>
<td>10 points for “Yes” response in</td>
<td>FY 2015-16 CoC Project Application</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Section 3B, Question 4.d. of FY 2016 CoC Project Application</td>
<td></td>
</tr>
<tr>
<td>Performance</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Exits to Permanent Housing</td>
<td>Measures the percentage of project participants who exit to permanent housing</td>
<td><strong>30</strong></td>
<td>Proportional (Sliding Scale):</td>
<td>APR Q29</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>80% &gt;= 30pts</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>0% = 0 pts</td>
<td></td>
</tr>
<tr>
<td>Median Length of Stay</td>
<td>Measures median length of time participants remain in the project</td>
<td><strong>540</strong></td>
<td>Proportional (Sliding Scale):</td>
<td>APR Q27</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>270 days &lt;= 540 pts</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>450 days &gt;= 0 pts</td>
<td></td>
</tr>
<tr>
<td>Increase Employment Income</td>
<td>Measures the percentage of adult participants who increase their earned income level over the program year</td>
<td><strong>10</strong></td>
<td>Proportional (Sliding Scale):</td>
<td>APR Q24b3</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>10% &gt;= 10 pts</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>0% = 0 pts</td>
<td></td>
</tr>
<tr>
<td>Increase Income Overall</td>
<td>Measures the percentage of adult participants who increase their overall income level over the program year</td>
<td><strong>10</strong></td>
<td>Proportional (Sliding Scale):</td>
<td>APR Q24b3</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>40% &gt;= 10 pts</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>0% = 0 pts</td>
<td></td>
</tr>
</tbody>
</table>
# Transitional Housing for Youth

<table>
<thead>
<tr>
<th>Scoring Area</th>
<th>Description</th>
<th>Pts Possible</th>
<th>Scale</th>
<th>Source</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>HMIS Participation</strong></td>
<td>Measures whether the project participates in HMIS and the completeness of HUD-required data (DV Projects Exempt)</td>
<td>5</td>
<td>2.5 points for participation, 2.5 points missing data rate &lt;10%</td>
<td>APR Q7</td>
</tr>
<tr>
<td><strong>Bed Utilization</strong></td>
<td>Measures occupancy rates beds/units supported by the project</td>
<td>10</td>
<td>90% &gt;= 120 points, 80%-89% = 510pts, 80% &lt;= 0pts</td>
<td>APR Q8-11</td>
</tr>
<tr>
<td><strong>Spend-Down</strong></td>
<td>Measures percent of available funds that are utilized by the project</td>
<td>10</td>
<td>90% &gt;=10 points</td>
<td>APR Q31a4</td>
</tr>
<tr>
<td><strong>Commitment to Policy Priorities: Housing First and Low Barrier Programs</strong></td>
<td>Evaluates project commitment to housing first and low barrier programming</td>
<td>10</td>
<td>10 points for “Yes” response in Section 3B, Question 4.d. of FY 2016 CoC Project Application</td>
<td>FY 2015 CoC Project App</td>
</tr>
<tr>
<td><strong>Performance</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Exits to Permanent Housing</strong></td>
<td>Measures the percentage of project participants who exit to permanent housing</td>
<td>30</td>
<td>Proportional (Sliding Scale): 65% &gt;= 30pts, 0% = 0 pts</td>
<td>APR Q29</td>
</tr>
<tr>
<td><strong>Exits to Successful Destination</strong></td>
<td>Measures the percentage of project participants who exit to permanent housing</td>
<td>20</td>
<td>Proportional (Sliding Scale): 85% &gt;= 240pts, 0% = 0 pts</td>
<td>APR Q27</td>
</tr>
<tr>
<td><strong>Median Length of Stay</strong></td>
<td>Measures median length of time participants remain in the project</td>
<td>510</td>
<td>Proportional (Sliding Scale): 275 &gt;= 510 pts, 540 days &gt;= 0 pts</td>
<td>APR Q27</td>
</tr>
<tr>
<td><strong>Increase Income Overall</strong></td>
<td>Measures the percentage of adult participants who increase their overall income level over the program year</td>
<td>10</td>
<td>Proportional (Sliding Scale): 40% &gt;= 10 pts, 0% = 0 pts</td>
<td>APR Q24b3</td>
</tr>
</tbody>
</table>

*See chart on page 8.*
### Transitional Housing for Survivors of Domestic Violence

<table>
<thead>
<tr>
<th>Scoring Area</th>
<th>Description</th>
<th>Pts Possible</th>
<th>Scale</th>
<th>Source</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Bed Utilization</strong></td>
<td>Measures occupancy rates beds/units supported by the project</td>
<td>520</td>
<td>90% &gt;= 520 points</td>
<td>APR Q8-11</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>80%-89% = 2.5 points</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>80% &lt;= 0 pts</td>
<td></td>
</tr>
<tr>
<td><strong>Spend-Down</strong></td>
<td>Measures percent of available funds that are utilized by the project</td>
<td>10</td>
<td>90% &gt;=10 points</td>
<td>APR Q31a4</td>
</tr>
<tr>
<td><strong>Commitment to Policy Priorities: Housing First and Low Barrier Programs</strong></td>
<td>Evaluates project commitment to housing first and low barrier programming</td>
<td>10</td>
<td>10 points for “Yes” response in Section 3B, Question 4.d. of FY 2016 CoC Project Application</td>
<td>FY 2016 CoC Project App.</td>
</tr>
<tr>
<td><strong>Performance</strong></td>
<td><strong>Exits to Permanent Housing</strong></td>
<td>30</td>
<td>Proportional (Sliding Scale): 65% &gt;= 30pts 0% = 0 pts</td>
<td>APR Q29</td>
</tr>
<tr>
<td></td>
<td>Measures the percentage of project participants who exit to permanent housing</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Exits to Successful Destination</strong></td>
<td><strong>Measures the percentage of project participants who exit to successful housing</strong></td>
<td>250</td>
<td>Proportional (Sliding Scale): 85% &gt;= 250 points 0% = 0 pts</td>
<td>APR Q27</td>
</tr>
<tr>
<td><strong>Median Length of Stay</strong></td>
<td>Measures median length of time participants remain in the project</td>
<td>10</td>
<td>Proportional (Sliding Scale): 270 days &lt;= 10 pts 450 days &gt;= 0 pts</td>
<td>APR Q27</td>
</tr>
<tr>
<td><strong>Increase Income Overall</strong></td>
<td><strong>Measures the percentage of adult participants who increase their overall income level over the program year</strong></td>
<td>10</td>
<td>Proportional (Sliding Scale): 40% &gt;= 10 pts 0% = 0 pts</td>
<td>APR Q24b3</td>
</tr>
</tbody>
</table>

*See chart on page 8.*
## Successful Destinations:

<table>
<thead>
<tr>
<th>Destination</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Emergency shelter, including hotel or motel paid for with emergency shelter voucher</td>
<td><em>Domestic Violence Transitional Housing Only</em></td>
</tr>
<tr>
<td>Foster care home or foster care group home</td>
<td></td>
</tr>
<tr>
<td>Owned by client, no ongoing housing subsidy</td>
<td></td>
</tr>
<tr>
<td>Owned by client, with ongoing housing subsidy</td>
<td></td>
</tr>
<tr>
<td>Permanent housing for formerly homeless persons (such as: CoC project; or HUD legacy programs; or HOPWA PH)</td>
<td></td>
</tr>
<tr>
<td>Psychiatric hospital or other psychiatric facility</td>
<td></td>
</tr>
<tr>
<td>Rental by client, no ongoing housing subsidy</td>
<td></td>
</tr>
<tr>
<td>Rental by client, with VASH housing subsidy</td>
<td></td>
</tr>
<tr>
<td>Rental by client, with GPD TIP housing subsidy</td>
<td></td>
</tr>
<tr>
<td>Rental by client, with other ongoing housing subsidy</td>
<td></td>
</tr>
<tr>
<td>Staying or living with family, permanent tenure</td>
<td></td>
</tr>
<tr>
<td>Staying or living with friends, permanent tenure</td>
<td></td>
</tr>
<tr>
<td>Substance abuse treatment facility or detox center</td>
<td></td>
</tr>
<tr>
<td>Transitional housing for homeless persons (including homeless youth)</td>
<td></td>
</tr>
</tbody>
</table>
Dear [[Name of Executive Director]],

Thank you for your diligence in reviewing your organization’s performance and submitting an appeal for the FY 2017 CoC NOFA project evaluation process.

LAHSA has completed its review of all submitted appeals and its disposition is summarized above. Both preliminary and final evaluation reports are attached for your review. If you have further questions or concerns, you may contact us at snofa@lahsa.org.

Appeals will be reviewed and decided on at the LAHSA Commission meeting held at LAHSA’s offices [[DATE]] at [[TIME]]

Sincerely,

Ian Costello  
Manager, Outcomes  
icostello@lahsa.org  
(213) 225-6561

<table>
<thead>
<tr>
<th>Re: Program Name</th>
<th>Grant Prefix</th>
<th>Appeal Disposition</th>
</tr>
</thead>
</table>

Enclosures as stated.
To: LA CoC Coordinating Council
From: Ian Costello, Manager, Outcomes
Date: June 7, 2017
CC: Sarah Mahin, Director, Policy and Planning Department
     Chris Callandrillo, Director, Programs Department
Re: Review Coordinating Council Recommendations for Continuum of Care (CoC) Program Priority List Ranking Strategy

Recommendation

Review the LA Continuum of Care Coordinating Council recommendation to prioritize CoC Program Projects in the following order:

1. Continuum-Wide Activities (HMIS, Coordinated Assessment, Planning), Projects Exempt from Evaluation (new projects, reclassified projects, projects that have changed operator or undergone a similar, substantial programmatic change)
2. Permanent Supportive Housing Renewal Projects (by evaluation score)
3. Rapid Re-housing Renewal Projects (by evaluation score)
4. Transitional Housing Renewal Projects (by evaluation score)
5. New Permanent Housing Projects (by proposal score)

Background

Each year HUD updates its funding priorities and communicates the order in which eligible projects will be selected for funding, based upon ranking tier and project type.

HUD will continue the Tier 1/Tier 2 approach to project selection. For the LA Continuum of Care, we have recommended approaches that have put the CoC in a much more competitive position for funding, which has resulted in high scores in project evaluation and retention of funding.

Measure H has created a unique opportunity for the Continuum this year. It will fund, among other things, rapid re-housing, housing and services for youth, as well as services for permanent supportive housing projects. Measure H resources can be used to shift programs from CoC program dollars to local dollars, allowing for more CoC resources going toward rental assistance in permanent supportive housing.
Goal

Implement a ranking strategy that will have the highest likelihood of receiving the full award amount available to the Los Angeles CoC. The recommendation above both prioritizes the existing infrastructure of the LA CoC and aligns new projects according to the HUD selection criteria.

**Leverage resources from Measure H to shift from CoC dollars to local dollars of existing CoC Rapid Re-Housing and Transitional Housing for Youth programs. Use CoC dollars from that shift to fund more rental assistance in permanent supportive housing projects.**
Policy: FY 2017 Continuum of Care Program Reallocation Policy

Submitted By: Ian Costello, Manager, Outcomes Unit

Continuum of Care Policies

Approved Commission Meeting:
Revised:
Revised:

General:
As the Continuum of Care (CoC) lead agency, LAHSA annually submits the CoC Program application to the U.S. Department of Housing and Urban Development (HUD) on the behalf of the Los Angeles Continuum of Care. In recent years, HUD has created an opportunity for CoCs to apply for new project funding by partially or fully reallocating funds that were previously allocated to renew existing grants within the CoC. Reallocation presents an opportunity for CoCs to move funding from projects that are underutilized, not cost effective, underperforming, or obsolete to create new permanent housing projects.

Procedure:
The Continuum of Care has established the following reallocation policies in the 2017 Continuum of Care Program Competition:

1) Recapture CoC Grant funds from former Supportive Housing Program grants, including Supportive Service Only, Transitional Housing Programs and Permanent Supportive Housing Programs from grants that demonstrate at least three years of underspending of at least 5% of the total annual grant amount, based on lowest amount of underspent funds incurred over the three year period and make such amounts available under reallocation for new permanent supportive housing projects in the 2017 CoC Program Application.

2) Recapture CoC Grant funds from former Shelter Plus Care Program Grants based on Public Housing Authorities identifying funds for reallocation and make such amounts available for new permanent supportive housing projects in the 2017 CoC Program Application.

3) Measuring permanent housing retention and placement against expenditures
   a. Single Adults: $20,000/permanent housing outcome
   b. Families: $30,000/permanent housing outcome
   c. Domestic Violence: $50,000/permanent housing outcome (including safety transfers)
   d. Transition Age Youth: $50,000/permanent housing outcome

4) Establish Performance Thresholds for CoC Program Renewal projects based upon approved 2017 Renewal Evaluation Methodology:
   a. 50% of points possible for Permanent Housing and Transitional Housing for Transition Age Youth (TAY)
   b. 70% of points possible for Transitional Housing projects for persons fleeing domestic violence
   c. 80% of points possible for Transitional Housing projects serving other populations (single adults and/or families)

For FY 2016, reallocate CoC Grant funds from TH Projects where the 2016 renewal evaluation score falls below the proposed thresholds with the exception of projects that exclusively serve households fleeing domestic violence with the understanding that LAHSA will provide technical assistance to improve project performance over the next twelve (12) months.
5) Commitment to Policy Priorities: Housing First and Low Barrier Programming (HF/LBP) 
a) Projects are ranked using approved CoC ranking structure 
b) Projects ranked into Tier 2 of the CoC Priority Listing will be evaluated on Housing First and Low Barrier Programming models 
   i. For reallocation purposes, HF/LBP is scored according to the response in Section 3B Project Description, Question 3a of the CoC Project Application (formerly exhibit II) 
      1) “Yes” response means meeting HF/LBP 
      2) “No” response means not meeting HF/LBP 
   ii. Projects ranked into Tier 1 of the CoC Priority Listing not meeting the minimum standard for these models will be contacted by LAHSA to receive a focused review and technical assistance to adopt HF/LBP for the following CoC Program NOFA cycle 
   iii. Projects ranked into Tier 2 of the CoC Priority Listing not meeting the minimum standard for these models, and unwilling or unable to adopt them for the current application, will be reallocated 

6) Apply up to $500,000 in reallocated funding to a new LA CoC HMIS project application based upon a projected increase in on-going cost
Notice of Projects Recommended for Reallocation

Re: Program Name | Grant Prefix | Reallocation Basis

Dear [[Name of Executive Director]],

This letter is to inform you that the above referenced project is being recommended for reallocation according to the reallocation policy set to be reviewed and decided on by the LAHSA Commission.

Please review the attached reallocation policy for additional details. Projects at risk on the basis of Housing First have indicated on their FY 2017 CoC NOFA application that the project does not follow Housing First model.

If you have not done so, contact LAHSA immediately to determine if this is an error, or if your project would be interested in taking steps to adopt Housing First for the 2018 – 2019 program year. Either a correction or commitment to implement Housing First would allow the project to change its Housing First status in the FY 2017 CoC Project Application. An updated project application, if applicable, is due in eSNAPS immediately and an updated PDF export sent to LAHSA. If you have questions, please contact us at snofa@lahsa.org

Reallocation recommendations will be reviewed and decided on at the LASHA Commission meeting held at LAHSA’s offices [[DATE]] at [[TIME]].

Sincerely,

Ian Costello
Manager, Outcomes
icostello@lahsa.org
(213) 225-6561

Enclosure:
Notice of Projects Recommended for Reallocation

Re:  
Program Name | Grant Prefix | Reallocation Basis

Dear [[Name of Executive Director]],

This letter is to inform you that the above referenced project has been reallocated according to the reallocation policy amended and adopted by the LAHSA Commission on [[DATE]]. Please review the attached reallocation policy for additional details regarding cost effectiveness and performance thresholds.

The above referenced project will therefore not be included in the FY 2017 CoC NOFA competition priority ranking and will not be renewed for the 2018 – 2019 program year.

Please note that projects being reallocated this year should continue operations through the current FY 2016 grant period. Projects being reallocated will not immediately close, and must continue serving participants, in accordance with their contracts through their grant periods.

Future Funding Opportunities:

We encourage you to apply for future funding with LAHSA. Funding opportunities from LAHSA will be shared via email from the LAHSA mailing lists and posted to the funding unit webpage, at www.lahsa.org/funding/home.

Grant Close Out Process:

- All efforts should be made to place participants into permanent housing, and other appropriate destinations prior to the end of the grant period, using the Coordinated Entry System (CES) for each population served. Additional guidance on this matter may be obtained from LAHSA. Please contact Paul Duncan, Assistant Director of Systems Integration, at pduncan@lahsa.org.
- Additional guidance on procedures related to financial close out of the CoC grant, as well as options for No Cost Extensions of grants beyond the FY2015 period, will be available by autumn of 2017.
If you have any questions or concerns on this, or other matters, please contact snofa@lahsa.org.

Sincerely,

Christopher Callandrillo
Director of Programs
Homeless Management Information System (HMIS) Policies and Procedures

Los Angeles HMIS Collaborative

Continuum of Care HMIS Leads:
Los Angeles Homeless Services Authority
City of Pasadena
City of Glendale
HMIS LEAD AGENCIES CONTACT INFORMATION

City of Glendale

City of Glendale Continuum of Care

141 North Glendale Avenue, Glendale, CA 91206

Tel:   (818) 548-3720
Fax: (818) 548-3724

<table>
<thead>
<tr>
<th>Team</th>
<th>Contact Email</th>
<th>Reason</th>
</tr>
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<tbody>
<tr>
<td>HMIS Program Assistant</td>
<td><a href="mailto:isamvelyan@ci.glendale.ca.us">isamvelyan@ci.glendale.ca.us</a></td>
<td>Requests for support related to data quality and management.</td>
</tr>
<tr>
<td>HMIS Administrator</td>
<td><a href="mailto:isamvelyan@ci.glendale.ca.us">isamvelyan@ci.glendale.ca.us</a></td>
<td>▪ General technical support for HMIS issues related to user access,</td>
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<td>troubleshooting, information requests, system functionality errors,</td>
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<td>mandated reports, report failure, etc.</td>
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<td></td>
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<td>▪ Requests for issues related mandated reports, report failure, etc.</td>
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</tbody>
</table>
City of Pasadena

City of Pasadena Continuum of Care

649 North Fair Oaks Avenue, Pasadena, CA 91103

Tel: (626) 744 - 6701
Fax: (626) 744 - 8340

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<tr>
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<tr>
<td>HMIS Program Assistant</td>
<td><a href="mailto:alansing@CityofPasadena.net">alansing@CityofPasadena.net</a></td>
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</tr>
<tr>
<td>HMIS Administrator</td>
<td><a href="mailto:onazarian@CityofPasadena.net">onazarian@CityofPasadena.net</a></td>
<td>▪ General technical support for HMIS issues related to user access, troubleshooting, information requests, system functionality errors, etc.</td>
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Los Angeles Homeless Services Authority (LAHSA)

LAHSA is the HMIS lead for the Los Angeles Continuum of Care, comprised of the County of Los Angeles except for the cities of Pasadena, Glendale, and Long Beach.

811 Wilshire Boulevard, Los Angeles, CA 90017

Tel: (213) 683-3333
Fax: (213) 892-0093
TTY: (213) 553-8434

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<thead>
<tr>
<th>Team</th>
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<tbody>
<tr>
<td>HMIS Support</td>
<td><a href="mailto:HMISSupport@lahsa.org">HMISSupport@lahsa.org</a></td>
<td>General technical support for HMIS matters related to user access, troubleshooting, information requests, system functionality errors, etc.</td>
</tr>
<tr>
<td>IT Hardware Support</td>
<td><a href="mailto:ITSupport@lahsa.org">ITSupport@lahsa.org</a></td>
<td>General technical support for hardware failures, connectivity issues, etc.</td>
</tr>
</tbody>
</table>

LAHSA HMIS Website
http://hmis.lahsa.org/

LAHSA HMIS Training Website
http://training.lahsa.org/

Clarity HMIS Website
https://la.clarityhs.com/
PROJECT SUMMARY

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. Reliable 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 unduplicated 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. Through that effort, other federal programs that serve people experiencing homelessness populations are now required to coordinate their efforts with HUD.

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

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

Programs that receive other sources of funding are not required to participate in the HMIS, but they are strongly encouraged to participate to contribute to a more comprehensive understanding of homelessness in the region.

The HMIS Data Standards (published in the 2017 HMIS Data Dictionary - 2017 HMIS Data Dictionary and HMIS Data Manual) provide communities with baseline data collection requirements developed by each of these federal partners.

LA HMIS is a response to the HUD mandated implementation of a Homeless Management Information System (HMIS) database. The LA HMIS is an online database.

Last updated on: 5/17/2017
used by organizations that provide services to persons experiencing homelessness or are at-risk of homelessness. It records demographic and service usage data and produces an unduplicated count of the people using those services.

The LA HMIS implementation is led by the LA HMIS Collaborative.

**LA HMIS Collaborative**
Under the guidance of the LA HMIS Collaborative, service providers are expected to participate in the LA HMIS to support local data collection, service, and planning functions within its jurisdiction. The LA Collaborative is comprised of three Continuums of Care (CoC):

- In Los Angeles County, there are four CoCs: (1) City of Glendale, (2) City of Pasadena, the (3) Los Angeles City/County, and (4) City of Long Beach. The LA HMIS Collaborative, includes Glendale, Pasadena and LAHSA, which is responsible for the City of Los Angeles and the balance of Los Angeles County. The City of Long Beach CoC administers a separate HMIS.

The LA Collaborative brings the following advantages:

- Comprehensive, consistent, coordinated provision of services between CoCs to meet the specific needs of the persons experiencing homelessness.

- Enhanced understanding of needs, service usage, and effectiveness using regional data and reports.

**Mission Statement**
The LA HMIS Collaborative will use the LA HMIS to advance the provision of quality services for persons who are homeless or at-risk of homelessness, to improve data collection and promote more responsive policies to prevent and end homelessness in Los Angeles County.

**Vision**
The LA HMIS Collaborative is dedicated to providing the best possible, highest quality regional HMIS to enhance the delivery of services for persons experiencing homelessness or at risk of homelessness. Specifically, the LA HMIS will:

- Facilitate the coordination of service delivery.
- Enable agencies to track referrals and services provided, report outcomes, and manage client data using an accessible, user-friendly and secure technology.
- Enhance the ability of policy makers and advocates to gauge the extent of homelessness and plan services appropriately throughout Los Angeles.
LA HMIS Software
LA HMIS is a comprehensive case management system that allows the LA Collaborative and Users to use the collected information to make informed policy and programmatic decisions. It also includes a focus on outcomes management, allowing the user to set and measure client and program milestones and achievements.

LA HMIS includes the following components:

- Advanced security features
- Bed tracking and assignment feature
- Client demographic data collection
- Comprehensive client case management
- Coordinated entry
- Customized assessment capability
- Customized reporting capability
- Employment, education, and housing history tracking
- Group case notes/services management
- Information and referral capabilities
- Outcome management
- Outreach
- Real-time data collection and reporting
- Swipe technology
1. ROLES AND RESPONSIBILITIES

1.1 LA HMIS Collaborative Responsibilities

Policy:
The Collaborative will be responsible for the organization and management of the LA HMIS.

Responsibilities:
The Collaborative is responsible for all system-wide policies, procedures, communication, and coordination. It is also the primary contact with HMIS vendor, and with its help, will implement all necessary system-wide changes and updates.

Procedure:
- HMIS Administrators are the primary positions at the LA Collaborative for HMIS management.

1.2 HMIS Administrator Responsibilities

Policy:
HMIS Administrators will provide training and technical support to Participating Organizations.

Responsibilities:
The HMIS Administrator is responsible for:

- Providing training support to Participating Organizations by determining training needs of Users, developing training materials, and training Users in equipment and software;
- Providing technical support to Participating Organizations;
- Managing user accounts and access control;
- Identifying and developing system enhancements and communicating changes to Participating Organizations;
- Communicating system-related information to Participating Organizations; and
- Developing and modifying reports for Users

Procedure:
- Each CoC will have a designated HMIS Administrator(s).
1.3 Organization Administrator Responsibilities

Policy:
Each Participating Organization must designate an Organization Administrator and a backup Organization Administrator responsible for the oversight of all personnel that generate or have access to client data in the LA HMIS to ensure adherence to the Policies & Procedures described in this document.

Responsibilities:
The Organization Administrator is responsible for:

- Serving as the primary contact between Users and HMIS Administrator;
- Providing technical support and escalating unresolved issues to the HMIS Administrator;
- Notifying all members of their organization of any system-wide changes and other relevant information;
- Conduct training for Users, based on local region policies;
- Notifying the HMIS Administrator of personnel changes within ten (10) business days;
- Monitoring compliance with standards of confidentiality and data collection, entry, and retrieval;
- Ensuring that all authorized Users complete training before being granted access to the system, including adherence and understanding of the HMIS User Agreement;
- Ensuring organizational adherence to the Policies and Procedures; and
- Detecting and responding to violations of the Policies and Procedures.

Procedure:
- Participating Organizations must provide their local HMIS Lead Agency the name and contact information of the Organization Administrator and backup Organization Administrator.
- Any changes to that information must be reported to the HMIS Administrator within ten (10) business days.

1.4 HMIS Lead Agency Communication with Participating Organizations

Policy:
The HMIS Administrator is responsible for communicating any system-related information to participating organizations in a timely manner.

Procedure:
- HMIS Administrators will communicate system-related updates to the Organization Administrator through various communication channels, which includes but is not limited to email, website, or newsletter.
Organization Administrators are responsible for distributing information and ensuring that all members of their organization are informed of appropriate HMIS related communication.
- Specific communications will be addressed to the person or parties involved.
- Each HMIS Lead Agency will also distribute HMIS information on their designated website.

1.5 Participating Organization Communication with HMIS Lead Agency

Policy:
The Participating Organization is responsible for communicating needs and questions regarding the LA HMIS to the HMIS Administrator in a timely manner.

Procedure:
- Participating Organization will send email communication to the HMIS Administrator.
- Specific communications will be addressed to the person or parties involved.
2. IMPLEMENTATION POLICIES AND PROCEDURES

2.1 HMIS Organization Agreement Requirement

Policy:
The Executive Director of each Participating Organization shall follow, comply, and enforce the HMIS Organization Agreement (Appendix A). The Executive Director must sign the HMIS Participating Organization Agreement in advance of Users before granted access to the LA HMIS.

Procedure:

- An original, scanned, or a digitally signed HMIS Participating Organizations Agreement must be presented to the HMIS Administrator before program implementation or user training on the LA HMIS.
- After HMIS Participating Organizations Agreement is signed, the HMIS Administrator will train Users to use the LA HMIS.
- A username and password will be granted to Users after required training is completed.

2.2 HMIS User Agreement Requirement

Policy:
Users of any Participating Organizations shall follow, comply, and enforce the HMIS User Agreement (Appendix B). The User must sign an HMIS User Agreement before being granted access to the LA HMIS.

Procedure:

- The HMIS Administrator will provide the User a HMIS User Agreement for signature after required training is completed.
- The HMIS Administrator will collect and maintain HMIS User Agreements of all Users.
2.3 Data Collection Requirements

Policy:
Participating Organizations will collect and verify the minimum set of data elements for all clients served by their programs.

Procedure:
- Participating Organizations must enter data into the system within 3 days of collecting the information.
- Users must collect all the universal data elements set forth in the 2017 HMIS Data Standards Manual.

The universal data elements include:

- Name
- Social Security Number
- Date of Birth
- Race
- Ethnicity
- Gender
- Veteran Status
- Disabling Condition
- Project Entry Date
- Project Exit Date
- Destination
- Relationship to Head of Household
- Client Location
- Housing Move-In Date
- Living Situation

Users must also collect all the program-specific data elements at project entry and exit set forth in the 2017 HMIS Data Standards. The program-specific data elements include:

- Income and Sources
- Non-Cash Benefits
- Health Insurance
- Physical Disability
- Developmental Disability
- Chronic Health Condition
- HIV/AIDS
- Mental Health Problem
- Substance Abuse
- Domestic Violence
- Contact
- Date of Engagement
- Bed-night Date
- Housing Assessment Disposition

These standards are already required fields in the LA HMIS. For other funder-specific program data elements refer to the 2017 HMIS Data Standards Manual.

Disclaimer: while these are the minimal standard per HUD, each CoC may have additional data collection requirements.
2.4 Technical and Security Standards

Policy:
Participating Organizations must meet the technical standards outlined below to participate in the LA HMIS.

Procedure:
The Clarity Human Services software takes advantage of the latest in web technologies. For both security and compatibility, your local IT Staff should ensure all workstations are outfitted with the latest version of the Web Browser you use.

The following web browsers are supported by Clarity:

- Microsoft
- Mozilla
- Google
- Apple
- Mac

- Connection to the internet is the sole responsibility of the Participating Organizations and is a requirement to participate in the LA HMIS.

- All Operating systems should have the latest Service Pack applied. Network design should allow for uninterrupted communication between Application, Database, Report, and Batch servers. Communication should be capable using the following standard protocols TCP/IP, WIN, DNS, Named Pipes, and NetBIOS. All communication between servers should be designed to be performed on Local Area Network.

For security purposes, all computers must have the following:

- An updated and adequate firewall protection.
- Virus protection software in which virus definition must be updated regularly.
2.5 Maintenance of Onsite Computer Equipment

Policy:
Participating Organizations will commit to a reasonable program of equipment maintenance to sustain an efficient level of system operation.

Procedure:
- The Executive Director (or other empowered officer) 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 Operating System.
  - Workstation access system must have locking, password-protected screen saver.
  - All workstations and computer hardware (including organization network equipment) must be stored in a secure location (locked office area).

2.6 HMIS Technical Support Protocol

Policy:
Each HMIS Lead Agency will provide technical support to all Participating Organizations as needed.

Procedure:
1. Users should first seek technical support from the Organization Administrator.
2. If more expertise is required to further troubleshoot the issue, Organization Administrator will contact the HMIS Help Desk.
3. The HMIS Administrator support Hours are Monday through Friday (excluding holidays) from 9:00 am to 5:00 pm.
4. The Organization Administrator will provide sufficient issue details where possible (or help recreate the problem by providing all information, screenshots, reports, etc.) for the HMIS Administrator to recreate the problem.
5. The HMIS Administrator will try to respond to all email inquiries and issues within 3 business days, but support load, holidays, and other events may impact response time.
6. The HMIS Administrator will submit a ticket to vendor if the issue cannot be resolved by the HMIS Administrator.

- For LAHSA HMIS/IT Technical Support, see the Supplemental Policies for LAHSA Only.

Last updated on: 5/17/2017
2.7 System Availability

Policy:
The LA HMIS will be available to Users at a minimum of 97.5% of the year. The vendor and the HMIS Lead Agency will inform Users in advance of any unplanned interruption in service.

Procedure:
- The vendor will communicate to the Collaborative Lead Member and backup of any necessary downtime for system upgrades and patches. These will be performed outside of business hours when possible.
- If it is determined that the LA HMIS accessibility is disabled system-wide, the HMIS Administrators will analyze and determine the problem.
- The HMIS Administrator will work with the software vendor to repair the problem.
- The HMIS Administrators will send email communication to the Organization Administrator within 2 hours of issue discovery and inform them of anticipated interruptions to system availability.

2.8 Participation Fees

Policy:
Each Continuum of Care reserves the right to charge a participation fee to use the system.

Procedure:
- Consult local HMIS Lead Agency regarding fees.

2.9 Computer Equipment and Supplies

Policy:
Each Continuum of Care may provide computer equipment and supplies at the HMIS Lead Agency’s discretion.

Procedure:
- Consult local HMIS Lead Agency regarding computer equipment and supplies policies.
3. SECURITY POLICIES AND PROCEDURES

3.1 User Authentication

Policy:
LA HMIS can only be accessed with a valid username and password combination. The HMIS Administrator will provide unique username and initial password for eligible individuals after completion of required training and signing of the HMIS User Agreement and receipt of these Policies and Procedures.

Procedure:
- The Participating Organization will determine which of their employees will have access to the LA HMIS. User access will be granted only to those individuals whose job functions require legitimate access to the system.
- Proposed User must complete the required training and demonstrate proficiency in use of system.
- Proposed User must sign the HMIS User Agreement stating that he or she has received training, will abide by the Policies and Procedures, will appropriately maintain the confidentiality of client data, and will only collect, enter and retrieve data in the system relevant to the delivery of services to people.
- HMIS Administrators will be responsible for the distribution, collection, and storage of the signed HMIS User Agreements and receipts of these Policies and Procedures.
- The HMIS Administrator will assign new user with a username and an initial password.
- Sharing of usernames and passwords will be considered a breach of the HMIS User Agreement as it compromises the security to clients.
- Organization Administrator is required to notify the HMIS Administrator immediately when a User leaves employment with the organization or no longer needs access.
- HMIS Administrator will terminate access upon notification of the Organization Administrator within 1 week of receiving the Revocation Form.

3.2 Passwords

Policy:
User will have access to the LA HMIS via a username and password. Passwords will be reset every 180 days. User will maintain passwords confidential.

Procedure:
- The HMIS Administrator will provide new User a unique username and temporary password after required training is completed.
- User will be required to create a permanent password that is between eight and sixteen characters in length. It must also contain characters from the following four categories: (1) uppercase characters (A through Z), (2) lower case characters (a through z), (3) numbers (0 through 9), and (4) non-alphabetic characters (for example, $, #, %).

Last updated on: 5/17/2017
For security purposes, the Forced Password Change (FPC) will occur every 180 consecutive days and the User will be prompted to enter a new password. Users may not use the same password consecutively, but may use the same password more than once.

After 60 minutes of inactivity, User will get a session timeout warning popup that will allow Users to continue their session or will automatically log the user off after 60 minutes of inactivity.

User can reset his or her own password from the log-in screen.

Access permission will be revoked after the User unsuccessfully attempts to log on three times. The User will be unable to gain access until they reset their password or after one hour.

3.3 Extracted Data

Policy:
Users will maintain the security of any client data extracted from the LA HMIS and stored locally, including all data contained in custom reports. Users may not electronically transmit unencrypted client data across a public network.

Procedure:

- Data extracted from the LA HMIS and stored locally will be stored in a secure location and will not be transmitted outside of the private local area network unless it is properly protected.
- Personal identifiable client data will not be distributed through email.
- Any security questions can be addressed to the HMIS Administrator.

3.4 Encryption Management

Policy:
Client data stored on the central server will always be encrypted except during specific procedures.

Procedure:

- Client data will only be decrypted when the LA HMIS server becomes obsolete and necessitates an upgrade in technology. Should the necessity arise, the HMIS Administrator, on behalf of the vendor, will obtain the written permission of the Executive Management of each Participating Organizations to perform the decryption and subsequent database conversion to a new technology.

3.5 Hardware Security Measures

Policy:
All computers and networks used to access LA HMIS must have virus protection software and firewall installed. Virus definitions and firewall must be regularly updated.

Last updated on: 5/17/2017
Procedure:
- HMIS Lead Agency must confirm that Participating Organizations has virus protection software and firewall installed prior to granting LA HMIS access.
- Virus definition must be updated regularly.
- Firewall must be placed between any computer and internet connection for the entire network, be protected with at minimum Wired Equivalent Privacy (WEP), use Network Address Translation (NAT), and maintain the most recent virus security updates.
- The Organization Administrator will ensure that computers maintain security specifications.

3.6 Backup and Recovery Procedures

Policy:
The vendor will perform regular schedule backups of the system to prevent the loss of data. Multiple levels of backup and storage will be used for key data and files within the LA HMIS.

Procedure:
- The vendor’s designated hosting company will perform data backup procedures in the following manner:
  1. Daily – resulting in a seven (7) day backup;
  2. Weekly – resulting in a four (4) or five (5) week backup; and
  3. Monthly – during the term of contract with the vendor.

- The vendor shall maintain an off-site storage of tapes in fire proof containers.
- The vendor recovery procedures will be undertaken on a best efforts basis to achieve the following response times:
  1. Data Loss – confirmation response and recovery implementation within 4 hours of reported data loss by the local HMIS Administrator
  2. LA HMIS source code corruption and/or user functionality loss – confirmation response within 4 hours and full initiation of recovery procedures within 24 hours of reported disruption by the local HMIS Administrator.
  3. Disaster – notification within 4 hours and recovery implementation to fully re-establish operations within 5 business days.

3.7 Security Review

Policy:
Each HMIS Lead Agency will complete an annual security review to ensure the implementation of the security requirements for itself and Participating Organizations.
Procedure:
- The HMIS Lead Agency will conduct a security review that includes the completion of a security checklist ensuring that each security standard is implemented.

3.8 Security Violations and Sanctions

Policy:
Any User found to be in violation of security protocols of the organization procedures or Policies and Procedures will be sanctioned accordingly. All Users must report potential violations of any security protocols described in the Policies and Procedures.

Procedure:
- Users are obligated to report suspected instances of noncompliance and/or security violations to the Organization Administrator or HMIS Administrator as soon as possible.
- The Organization Administrator or HMIS Administrator will investigate potential violations.
- Any User found to be in violation of security protocols will be sanctioned accordingly. Sanction may include but are not limited to suspension of system privileges and revocation of system privileges.
4. **OPERATIONAL POLICIES AND PROCEDURES**

4.1 **User Access Levels**

**Policy:**
User will be designated a user access level that controls the level and type of access the user has to data and functionality within the LA HMIS.

**Procedure:**
- HMIS Administrator, in consultation with the Participating Organization, will assign the level and type of access the user will have in the system.
- Organization Administrator is required to communicate to HMIS Administrator when User’s need for access changes.
- HMIS Administrator will terminate access upon notification and receipt of Termination of Employee Form from the Organization Administrator.
- HMIS Administrator will revoke user access to anyone suspected or found to be in violation of the policies outlined in this document or the HMIS User Agreement.

Please see Clarity Access Roles Matrix on Appendix J that lists the levels of access tied to existing user roles across the LA Collaborative. This might include a role not available within local continuum. Consult local HMIS Lead Agency to learn which user access levels are available, as well as other customizable roles, such as Coordinated Entry, that may be offered after consultation with and approval from the HMIS Administrator (See HMIS Lead Agencies Contact Information).

4.2 **Training**

**Policy:**
Each User must complete the required training and any additional training relevant to their position prior to gaining access to the LA HMIS. HMIS Administrators will provide training to all Users.

**Procedure:**
- HMIS Administrator will provide Basic User Training to proposed Users. Organization Administrator may be trained to provide Basic User Training to support organization personnel or personnel of the other organization’s in LA County, if applicable. Consult local HMIS Lead Agency (See HMIS Lead Agencies Contact Information).
- User must successfully complete the Basic User Training to demonstrate proficiency in the system and understanding of the Policies and Procedures.
- HMIS Administrator will provide new User with a copy of the Policies and Procedures and HMIS Users Guide.
- HMIS Basic Training completed in one region will satisfy the training requirements in any other region in the Collaborative.

Last updated on: 5/17/2017
For LAHSA Participating Organizations, see the Supplemental Policies for LAHSA Only: LAHSA Training Requirements.

4.3 User Guide

Policy:
Each User will receive a copy of the LA HMIS User Training Manual.

Procedure:
- The HMIS Administrator will create and update the user training manual as needed.
- The user training manual will contain instructions on how to use the system.
- Each User will be given a user training manual after completing training.

4.4 Client Consent to Share Information and Confidentiality

Policy:
Participating Organizations must obtain informed, signed consent prior to either entering or accessing any client protected personal information (PPI) into the LA HMIS. Services will not be denied if client chooses not to include personal information. Personal information collected about the client should be protected. Each Participating Organization and User must abide by the terms in the HMIS Participating Organizations Agreement and HMIS User Agreement.

Procedure:
- Client must sign Consent to Share Protected Personal Information (Appendix C).
- Clients that provide permission to enter personal information allow for Participating Organizations within the region to share client and household demographic data.
- Participating Organizations must store signed Consent to Share Protected Personal Information Agreement in client record for auditing purposes.
- Participating Organizations must post a Notice Regarding Collection of Personal Information (Appendix E) that explains the uses and disclosures of information.
- Participating Organizations must provide a copy of the Privacy Notice upon request.
- If a client refuses to provide consent, the User should not include any personal identifiers (such as first name, last name, social security number, date of birth, etc.) in the client record. Instead, User should include a client identifier to recognize the record in the system.
- Participating Organizations shall comply with Federal and State confidentiality laws and regulations that protect client records.

HIPAA-Covered Entities:

Last updated on: 5/17/2017
An organization that is covered under the HIPAA standards is not required to comply with the HMIS privacy or security standards, so long as the organization determines that a substantial portion of its protected information about homeless clients or homeless individuals is indeed protected health information as defined in the HIPAA rules.

HIPAA standards take precedence over HMIS because HIPAA standards are finely attuned to the requirements of the health care system; they provide important privacy and security protections for protected health information; and it would be an unreasonable burden for providers to comply with and/or reconcile both the HIPAA and HMIS rules. This spares organizations from having to deal with the conflicts between the two sets of rules.

4.5 Revocation of Consent

Policy:
In the event that a client previously gave consent to share their PPI in the LA HMIS and chooses at a later date to revoke consent, a Revocation of Consent (Appendix G) must be signed by client.

Procedure:
- Upon request, the Participating Organization must modify the client information by removing any personal identifiers (First Name, Last Name, Social Security Number, and Date of Birth) from the client record.
- Users should include a client identifier to recognize the record in the system.
- Participating Organization’s that have previously provided services will still have access to client protected personal information.

4.6 Data Sharing

Policy:
Client data (with consent) contained in LA HMIS will be shared with other Participating Organizations.

Procedure:
- Data sharing refers to the sharing of information between Participating Organizations for the coordination of case management and client service delivery.
- Users found to be sharing program level client data without consent will have their access terminated.

4.7 Client Record Access

Policy:
Client may obtain and inspect a copy of their client information. The Participating Organization, as the custodian of the client data, has the responsibility to provide the client with the requested information except where exempted by state and federal law.
Procedure:

- Client information contained in the universal data elements can be provided at any organization the client requests it from, if the client has previously given the other organization consent to share and that consent is still in force. The Participating Organization may not share any client information entered by other agencies beyond the universal data elements.
- The Organization Administrator will review client information with client if he or she requests to view their HMIS data.
- No client shall have access to another client record in the system.
- Client may request that PPI be removed from the system. In response, the Organization Administrator will remove such data from record within 5 business days.
- A copy of the requested data will be provided to client within a reasonable time frame.
- Parental or guardian access will be decided based upon existing organization guidelines.

4.8 Client Grievance

Policy:
Clients will file grievances with Participating Organizations. Participating Organizations must have written grievance procedures that can be provided to client upon request. Any unresolved grievances may be escalated to the local HMIS Lead Agency.

Procedure:

- Clients will submit grievance directly to Participating Organizations with which they have a grievance.
- Upon client request, Participating Organizations will provide a copy of their grievance procedure and the LA HMIS Policies and Procedures.
- The Participating Organization will be responsible to answer any questions and complaints regarding the LA HMIS. A record of all grievance and any attempts made to resolve the issue must be kept in file. If the grievance is resolved, Participating Organizations will include the date and a brief description of the resolution. For any written complaint, Participating Organizations must send a copy to the local HMIS Lead Agency.
- If the Participating Organization is unable to resolve the problem, the client must complete the Grievance Form (Appendix H) outlining the date of incident, name of parties involved, description of the incident, and their contact information for follow-up. Participating Organizations must forward a copy of the completed Grievance Form to the local HMIS Lead Agency.
- The local HMIS Lead Agency will review and determine the need for further action.
5. DATA POLICIES AND PROCEDURES

5.1 Data Quality

Policy:
All data entered into the LA HMIS must meet data quality standards. Users will be responsible for the quality of their data entry.

- **Definition:**
  Data quality refers to the timeliness, completeness, and accuracy of information collected and reported in the LA HMIS.

**Data Timeliness:**
Users must enter all universal data elements and program-specific data elements within 3 days of collection.

**Data Completeness:**
All data entered into the system must be complete, unless otherwise authorized by the HMIS Lead, following data collection standards set by the 2017 HUD HMIS Data Standards.

**Data Accuracy:**
All data entered shall be collected and entered in a common and consistent manner across all programs.

**Procedure:**
- Participating Organizations must sign the Participating Organization Agreement to ensure that all participating projects are aware and have agreed to the data quality standards.
- Upon agreement, Participating Organizations will collect and enter as much relevant client data as possible for the purposes of providing services to that client.
- All data will be input into the system within 3 days of collection.
- The HMIS Administrator will conduct regular checks for data quality. Any patterns of error or missing data will be reported to the Organization Administrator.
- Users will be required to correct the identified data error and will be monitor for compliance by the Organization Administrator and the HMIS Administrator.
- Users may be required to attend additional training as needed.
5.2 Data Use and Disclosure

Policy:
All Users will follow the data use Policies and Procedures to guide the data use of client information stored in the LA HMIS.

Definitions:
Client data may be used or disclosed for system administration, technical support, program compliance, analytical use, and other purposes as required by law, and as outlined by the Privacy Notice, HMIS Participating Organization Agreement and HMIS User Agreement. Uses involve sharing parts of client information with persons within an organization. Disclosures involve sharing parts of client information with persons or organizations outside an organization.

Procedure:
- Participating Organizations may use and disclose data contained in the system to support the delivery of services to clients experiencing homelessness or at-risk of homelessness in Los Angeles.
- Each of the continuums within the LA HMIS Collaborative shall have access to their respective agencies' client data stored in the system. The Collaborative will use the data for various purposes including; administrative functions, technical support, program compliance, and analytical use. Unless restricted by other laws, the information collected can be shared and disclosed under the circumstances outlined in the Privacy Notice. Upon signing the client consent form, protected personal information may be disclosed for service provision purposes.
- The vendor and any authorized subcontractor shall not use or disclose data stored in the LA HMIS without expressed written permission in order to enforce information security protocols. If granted permission, the data will only be used in the context of interpreting data for research and system troubleshooting purposes. The Service and License Agreement signed individually by each Continuum and vendor contain language that prohibits access to the data stored in the software except under the conditions noted above.
5.3 Data Release

Policy:
All LA HMIS stakeholders will follow the data release Policies and Procedures to guide the data release of client information stored in the LA HMIS.

Definition:
Data release refers to the dissemination of aggregate or anonymous client-level data for the purposes of system administration, technical support, program compliance, and analytical use.

Procedure:
- No identifiable client data will be released by Participating Organizations to any person, agency, or organization for any purpose without written permission from the client.
- Each Participating Organization owns all data that is stored in the system. The organization may not release personal identifiable client data without written permission from the client. Organizations may release program and/or aggregate level or de-identified data for all clients to whom the organization provided services.
- Each of the continuums within the LA HMIS Collaborative may release aggregate or de-identified data about its own continuum at the program, sub-regional, and regional level. Aggregate or de-identified data may be released without organization permission at the discretion of the Continuum. The Collaborative may develop an annual release of aggregate data in a summary report format.

5.4 Data Migration

Policy:
Data migration or uploads from legacy systems is not allowed, unless approved by the HMIS Administrators.

Definition:
Data migration (or conversion): a one-time process of transferring data from any existing system to the LA HMIS. Upon transfer, the organization abandons its existing system and uses the LA HMIS for recording all client-related data.

Data uploads (transfers): ongoing, periodic process of transferring data from an existing system to the LA HMIS. Data uploads follow the same procedures as above, but the organization continues to use its existing system for recording all client-related data.

Procedure:
- Migrated data must be non-duplicated and an exact match to the existing field type of the LA HMIS. The Participating Organizations will be responsible for the accuracy, completeness, and quality of the migrated data.
Only data that is matched using agreed upon methods with LA HMIS data fields may be migrated. Data must be unduplicated prior to data migration. All required fields in the LA HMIS are required for migration. A data dictionary will be provided upon request.

The HMIS Administrator will decide the appropriate data migration candidates. If approved, a Memorandum of Understanding or other agreement must be completed and the Organization will provide current data in the agreed upon format to the HMIS Administrator.

If the data cannot be migrated, manual conversion (data entry by the organization's personnel) may be necessary to move data from legacy systems into the LA HMIS.
6. TERMINOLOGY

**Aggregate Data:** Data with identifying elements removed and concentrated at a central server. Aggregate data are used for analytical purposes and reporting.

**Anti-Virus Software:** Programs to detect and remove computer viruses. The anti-virus software should always include a regular update service allowing it to keep up with the latest viruses as they are released.

**Audit Trail:** A history of all access to the system, including viewing, additions and updates made to a client record.

**Authentication:** The process of identifying a user in order to grant access to a system or resource usually based on a username and password.

**BitFocus:** Software developer of the Clarity Human Services for the LA HMIS.

**Client:** The person receiving services whose information is entered into the LA HMIS.

**Continuum of Care (CoC):** Refers to the range of services (outreach, emergency transitional and permanent housing and supportive services) available to assist people out of homelessness.

**Database:** An electronic system for organizing data so it can easily be searched and retrieved. The data within the LA HMIS is accessible through the web-based interface.

**Decryption:** Conversion of scrambled text back into understandable, plain text form. Decryption uses an algorithm that reverses the process used during encryption.

**Encryption:** Conversion of plain text into encrypted data by scrambling it using a code that masks the meaning of the data to any unauthorized viewer. Encrypted data are not readable unless they are converted back into plain text via decryption.

**Firewall:** A method of controlling access to a private network, to provide security of data. Firewalls can use software, hardware, or a combination of both to control access.

**HMIS:** Homeless Management Information System. This is a generic term for any system used to manage data about the use of homeless services.

**HMIS Administrator:** The person(s) with the highest level of user access in each CoC. This user has full access to all user and administrative functions in the CoC and will serve as the liaison between Participating Organizations and the vendor. There is at least one HMIS Administrator in each CoC.

**HMIS User:** An individual who has unique user identification (ID) and directly accesses the LA HMIS to assist in data collection, reporting or administration as part of their job function in homeless service delivery. Users are classified as either system Users who perform administration functions at the system or aggregate level or organization Users that perform functions at the organization level.

**Internet Protocol Address (IP Address):** A unique address assigned to a user’s connection based on the TCP/IP network. The Internet address is usually expressed in dot notation, e.g.: 128.121.4.5.

**Internet Service Provider (ISP):** A company that provides individuals or organization with access to the internet.

Last updated on: 5/17/2017
**Local Area Network (LAN):** A network that is geographically limited, allowing easy interconnection of computers within offices or buildings.

**LA HMIS:** The Los Angeles Homeless Management Information System provided by the vendor and tailored for use in the LA region.

**LA HMIS Collaborative Steering Committee:** Comprised of at least one representative from each of the LA HMIS Collaborative governing bodies. It is responsible for setting and overseeing policy for the regional implementation of the LA HMIS.

**Network:** Several computers connected to each other.

**Organization Administrator:** The person responsible for system administration at the organization level. Responsibilities include informing HMIS System Administration of the need to add and delete Users, basic trouble-shooting, and escalation of issues to their HMIS Administrator. This person is the organization user’s first line of contact for LA HMIS issues.

**Participating Organizations:** An organization that operates a project that either contributes data to an HMIS or has direct access to PPI in HMIS.

**Server:** A computer that provides a service for other computers connected to it via a network. Servers can host and send files, data or programs to client computers.

**User ID:** The unique identifier assigned to an authorized HMIS User.
## 7. APPENDICES

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Appendix A: HMIS Participating Organizations Agreement

GREATER LOS ANGELES

HOMELESS MANAGEMENT INFORMATION SYSTEM (LA HMIS)

PARTICIPATING ORGANIZATIONS AGREEMENT

I. Purpose
The HMIS is a HUD-mandated information technology system that is designed to capture client-level information over time, on the characteristics and service needs of homeless persons. Client data is maintained on a central server, which will contain all client information in an encrypted state. HMIS integrates data from all homeless service providers and organizations in the community and captures basic descriptive information on every person served. Participation in LA HMIS allows organizations to share information with other Participating Organizations to create a more coordinated and effective delivery system.

The LA HMIS is the secured electronic database for Greater Los Angeles and is a valuable resource for local communities. The LA HMIS Collaborative consists of four separate Continuums of Care (CoC). The continuums are: Los Angeles City and County; Glendale; and Pasadena.

The LA HMIS Collaborative’s goal is to provide a comprehensive case management system to advance the provision of quality services for homeless persons, improve data collection, and promote more responsive policies to end homelessness in the Greater Los Angeles.

II. Agreement and Understanding
This Agreement authorizes this Participating Organizations (Organization) to designate HMIS Users (User). A User is a staff person entrusted to enter Protected Personal Information (PPI) into the LA HMIS, on behalf of this Organization. To allow a User to access the LA HMIS, a User Agreement must be signed by the User, the HMIS Administrator, and this Organization’s Authorized Representative.

III. Confidentiality and Informed Consent

Confidentiality: This Organization must require all Users to abide by its organization’s policies and procedures; uphold all privacy protection standards established by the LA HMIS Collaborative Policies and Procedures; and comply with all relevant federal and State of California confidentiality laws and regulations that protect client records. Except where otherwise provided for by law, this Organization shall ensure that confidential client records are released with the client’s written consent.

Written Consent: To obtain written consent, prior to each client’s assessment, each client must be informed that the client’s information will be entered into an electronic database called HMIS. The terms of the Consent to Share Protected Personal Information form must also be explained to each client. Clients who agree to have their PPI entered into the LA HMIS must sign the Consent to Share Protected Personal Information form.

Verbal Consent: Verbal consent to enter PPI into the LA HMIS may be obtained during circumstances such as phone screenings, street outreach, or community access center sign-ins. Each client must be informed that his or her information will be entered into the HMIS database. The terms of the Consent to Share Protected Personal Information form must also be explained to each client. The client’s written consent must be obtained once the client appears for his or her initial assessment.

IV. Client’s Rights
The client has a right to receive a copy of this notice at the time of request.

Last updated on: 5/17/2017
Each client has the right to receive the following, no later than five (5) business days of a written request:

- A correction of inaccurate or incomplete PPI
- A copy of his or her consent form
- A copy of his or her HMIS records
- A current list of Participating Organizations that have access to HMIS data

V. Data Use
This Organization must protect HMIS data by ensuring that:

- A link to the Privacy Notice is accessed from the Organization’s website.
- LA HMIS is not accessible to unauthorized Users
- LA HMIS is only accessed by computers approved by the Organization
- HMIS Users are trained regarding user responsibilities and conduct
- HMIS Users sign and comply with the LA HMIS User Agreement

1. HMIS Users forward a copy of a client’s Revocation of Consent to the HMIS Administrator within 24 hours of receipt.

VI. Responsibilities
This Organization is responsible to ensure that:

- The Notice Regarding Collection of Personal Information is posted at each intake desk or comparable location.
- HMIS Users do not misuse the system
- Clients are notified if a breach of their PPI is discovered
- Any HMIS User who finds a possible security lapse on the system is obligated to immediately report it to the HMIS Administrator.
- A signed copy of the Consent to Share Protected Personal Information is retained for a period of seven (7) years after the PPI was created or last changed.

VII. System Use
Computer equipment and services provided by a CoC are intended only for LA HMIS-related activities. Prohibited uses include, but are not limited to: malicious or illegal activities; unauthorized access; the creation, sending and/or storing of fraudulent, threatening, harassing, or obscene messages; inappropriate mass mailing (spamming, flooding, bombing); denial of service attacks; and the creation or intentional distribution of computer viruses, worms, and/or Trojan horses.

**Equipment, if applicable:** All CoC-provided computer equipment including, but not limited to, printers, scanners, laptops and monitors, were provided through grant funds from HUD. The maintenance and upgrades of these devices are subject to the requirements and funding limitations of the HUD grant. Maintenance and/or upgrade costs to equipment, incurred after the HUD grant funds have been exhausted, become the sole responsibility of this Organization.

**Software, Licenses, and/or Services, if applicable:** CoC-provided services to each organization may include, but are not limited to, purchasing and installing Anti-Virus Software and licenses, Firewall software and licenses, Windows software updates and High-Speed Internet Connections. The software and/or services are provided for HMIS purposes through HUD grant funds. The maintenance, upgrades and license purchases are subject to the requirements and funding limitations of the HUD grant. Additional maintenance, upgrades and license purchases, incurred after the grant funds have been exhausted, become the sole responsibility of this Organization.

Last updated on: 5/17/2017
VIII. Rights and Privileges
LA HMIS data is stored in one central database and is owned by the LA HMIS Collaborative. The LA HMIS Collaborative reserves all rights to the HMIS data. Use of the LA HMIS equipment, software, licenses, and/or services is a privilege and is assigned and managed by each HMIS Administrator.

IX. Copyright
The LA HMIS and other CoC-provided software are protected by copyright and are not to be copied, except as permitted by law or by contract with the owner of the copyright. The number and distribution of copies of any CoC-provided software are at the sole discretion of the HMIS Administrator.

X. Violations
Any violations or suspected violations of any of the terms and conditions of this agreement, the HMIS User Agreement, and/or the HMIS Policies and Procedures, must be immediately and confidentially reported to the HMIS Administrator and the Executive Director or other authorized representative of this Organization.

XI. Term
This Participating Organizations Agreement becomes effective on the date of final execution and shall remain in effect unless terminated pursuant to paragraph XI. Termination, below.

XII. Amendment and Termination
- The LA CoC reserves the right to amend this agreement by providing a 3-day notice to this Organization.
- Either party has the right to terminate this agreement, with or without cause, by providing a 3-day written notice to the other party.
- If this agreement is terminated, this Organization shall no longer have access to HMIS or any information therein. The remaining LA HMIS Participating Organizations shall retain the right to use all client data previously entered by this Organization, subject to any restrictions requested by the client.

All organizations that sign this agreement and are granted access to the LA HMIS agree to abide by LA’s HMIS Collaborative Policies and Procedures. The signature of the Executive Director or other authorized representative of this Organization indicates acceptance of all terms and conditions set forth in this agreement.

This Agreement is executed between the CoC and the Participating Organizations. Upon final execution, this Organization will be given access to the LA HMIS.

Organization Name
CoC Name
Organization Administrator/Authorized Representative (Print Name)
HMIS Administrator Name (Print Name)
Signature
Signature
Date of Signature
Date of Signature

Last updated on: 5/17/2017
B: HMIS User Agreement  

GREATER LOS ANGELES & ORANGE COUNTY  
HOMELESS MANAGEMENT INFORMATION SYSTEM (LA HMIS)  
USER AGREEMENT

I. Purpose

The LA HMIS is the secured electronic database for the Greater Los Angeles and is a valuable resource for local communities. The LA HMIS Collaborative consists of four separate Continuums of Care (CoC). The continuums are: Los Angeles City and County; Glendale; and Pasadena.

The LA HMIS Collaborative’s goal is to provide a comprehensive case management system to advance the provision of quality services for homeless persons, improve data collection, and promote more responsive policies to end homelessness in the Greater Los Angeles.

II. Agreement and Understanding

This Agreement authorizes you, an HMIS User (User), to enter Protected Personal Information (PPI) into the LA HMIS, as authorized by your organization and the CoC HMIS Administrator. You must complete the necessary training(s) prior to receiving a unique HMIS User Identification (User ID) and password.

II. Client Confidentiality and Informed Consent

Confidentiality: This User must abide by its organization’s policies and procedures; uphold all privacy protection standards established by the LA HMIS Collaborative Policies and Procedures; and comply with all relevant federal and State of California confidentiality laws and regulations that protect client records.

Written Consent: To obtain written consent, prior to each client’s assessment, Users must inform each client that the client’s information will be entered into an electronic database called HMIS. Users must also explain the terms of the Consent to Share Protected Personal Information form. Each client who agrees to have his or her PPI entered into the LA HMIS must sign the Consent to Share Protected Personal Information form.

Verbal Consent: Verbal consent to enter PPI into the LA HMIS may be obtained during circumstances such as phone screenings, street outreach, or community access center sign-ins. Users must inform each client that the client’s information will be entered into the HMIS database. Users must also explain the terms of the Consent to Share Protected Personal Information form. The client’s written consent must be obtained once the client appears for his or her initial assessment.

III. Client Rights

• A client may not be denied services for failure to provide consent for LA HMIS data collection.
• A client has the right to inspect, copy, and request changes in their LA HMIS records.
• A client’s consent may be revoked by that client at any time through a written notice or by completing the Revocation of Consent form.
• A copy of the Privacy Notice must be provided at the time the client requests.
• Each client has the right to receive the following, no later than five (5) business days of a written request:
  o A correction of inaccurate or incomplete PPI
  o A copy of his or her consent form;

Last updated on: 5/17/2017
Homeless Management Information System (HMIS) Policies and Procedures

IV. User Responsibilities and Conduct

I understand and agree that:

- I have an ethical and a legal obligation to ensure that the data I collect and enter into HMIS is accurate and does not misrepresent the client’s information.
- I will not reveal or release PPI to unauthorized organizations, individuals or entities.
- I will use the data within the HMIS only for the purposes of homeless service delivery.
- I am not permitted to access the HMIS from any computer that has not been designated or approved by my organization.
- I will never use the HMIS to perform an illegal or malicious act.
- I will not attempt to increase the level of access to which I am authorized, or attempt to deprive other HMIS Users of access to the HMIS.
- My HMIS User ID and password shall be kept secure and will not be shared.
- I will refrain from leaving my computer unattended while logged into the system.
- I will protect and store client information printed from HMIS in a secure location.
- I will dispose of PPI printed from HMIS, when it is no longer needed, in a manner that maintains client confidentiality.
- If I suspect or encounter a security breach, I will immediately notify my organization’s HMIS administrator.
- If my relationship with my organization changes or terminates, any client information that I entered into or obtained from the HMIS must remain confidential.
- Discriminatory comments based on race, color, religion, national origin, ancestry, handicap, age, sex and sexual orientation are not permitted in the HMIS. Profanity and offensive language are also not permitted in the HMIS.
- PPI that is transmitted electronically must be password protected to maintain confidentiality.
- I will comply with my organization’s policies and procedures and the LA HMIS Collaborative Policies and Procedures in my use of HMIS. The LA HMIS Collaborative Policies and Procedures can be access from your CoC HMIS website.
- Any violation of this User Agreement is grounds for immediate suspension or revocation of my access to the HMIS.

My signature below confirms my agreement to comply with all the provisions of this Greater Los Angeles HMIS User Agreement.

______________________________________________
Organization Name

______________________________________________
Organization Administrator/Authorized Representative (Print Name)

______________________________________________
User First and Last Name (Print Name)

______________________________________________
Signature

______________________________________________
Signature

______________________________________________
Date of Signature

______________________________________________
Date of Signature

DO NOT WRITE IN THIS SECTION. (FOR HMIS ADMINISTRATOR STAFF ONLY.)

HMIS Staff Name: ___________________________ Date: ___________________________

Date of Training: ___________________________ Trainer: ___________________________

HMIS User ID: ___________________________ Date User ID Issued: ___________________________
Appendix C: Consent to Share Protected Personal Information

GREATER LOS ANGELES

HOMELESS MANAGEMENT INFORMATION SYSTEM (LA HMIS)

CONSENT TO SHARE PROTECTED PERSONAL INFORMATION

The LA HMIS is a local electronic database that securely record information (data) about clients accessing housing and homeless services within the Greater Los Angeles. This organization participates in the HMIS database and shares information with other organizations that use this database. This information is utilized to provide supportive services to you and your household members.

What information is shared in the HMIS database?

We share both Protected Personal Information (PPI) and general information obtained during your intake and assessment, which may include but is not limited to:

- Your name and your contact information
- Your social security number
- Your birthdate
- Your basic demographic information such as gender and race/ethnicity
- Your history of homelessness and housing (including your current housing status, and where and when you have accessed services)
- Your self-reported medical history, including any mental health and substance abuse issues
- Your case notes and services
- Your case manager's contact information
- Your income sources and amounts; and non-cash benefits
- Your veteran status
- Your disability status
- Your household composition
- Your emergency contact information
- Any history of domestic violence
- Your photo (optional)

How do you benefit from providing your information?

The information you provide for the HMIS database helps us coordinate the most effective services for you and your household members. By sharing your information, you may be able to avoid being screened more than once, get faster services, and minimize how many times you tell your ‘story.’ Collecting this information also gives us a better understanding of homelessness and the effectiveness of services in your local area.

Who can have access to your information?

Last updated on: 5/17/2017
Organizations that participate in the HMIS database can have access to your data. These organizations may include homeless service providers, housing groups, healthcare providers, and other appropriate service providers.

**How is your personal information protected?**

Your information is protected by the federal HMIS Privacy Standards and is secured by passwords and encryption technology. In addition, each Participating Organizations has signed an agreement to maintain the security and confidentiality of the information. In some instances, when the Participating Organizations is a health care organization, your information may be protected by the privacy standards of the Health Insurance Portability and Accountability Act (HIPAA).

**By signing below, you understand and agree that:**

- You have the right to receive services, even if you do not sign this consent form.
- You have the right to receive a copy of this consent form.
- Your consent permits any Participating Organizations to add to or update your information in HMIS, without asking you to sign another consent form.
- This consent is valid for seven (7) years from the date the PPI was created or last changed.
- You may revoke your consent at any time, but your revocation must be provided either in writing or by completing the *Revocation of Consent* form. Upon receipt of your revocation, we will remove your PPI from the shared HMIS database and prevent further PPI from being added. The PPI that you previously authorized to be shared cannot be entirely removed from the HMIS database and will remain accessible to the limited number of organization(s) that provided you with direct services.
- The Privacy Notice for the LA HMIS contains more detailed information about how your information may be used and disclosed. A copy of this notice is available upon request.
- No later than five (5) business days of your written request, we will provide you with:
  - A correction of inaccurate or incomplete PPI
  - A copy of your consent form
  - A copy of your HMIS records; and
  - A current list of Participating Organizations that have access to your HMIS data.
- Aggregate or statistical data that is released from the HMIS database will not disclose any of your PPI.
- You have the right to file a grievance against any organization whether or not you sign this consent.
- You are not waiving any rights protected under Federal and/or California law.
SIGNATURE AND ACKNOWLEDGEMENT

Your signature below indicates that you have read (or been read) this client consent form, have received answers to your questions, and you freely consent to have your information, and that of your minor children (if any), entered into the HMIS database. You also consent to share your information with other Participating Organizations as described in this consent form.

☐ I consent to sharing my photograph. (Check here)

Client Name: ________________________________________ DOB: ___________ Last 4 digits of SS________

Signature ____________________________________________________________ Date _____________________

☐ Head of Household (Check here)

Minor Children (if any):

Client Name: _____________________ DOB: ___________ Last 4 digits of SS ________ Living with you? (Y/N)

Client Name: _____________________ DOB: ___________ Last 4 digits of SS ________ Living with you? (Y/N)

Client Name: _____________________ DOB: ___________ Last 4 digits of SS ________ Living with you? (Y/N)

___________________________________________ ______________________________
Print Name of Organization Staff Print Name of Organization

___________________________________________ ______________________________
Signature of Organization Staff Date
Appendix D: Privacy Notice

GREATER LOS ANGELES
HOMELESS MANAGEMENT INFORMATION SYSTEM (LA HMIS)
PRIVACY NOTICE

This privacy notice explains under what circumstances we may share and disclose your information from the LA HMIS. This notice also explains your rights regarding your confidential information.

Please read it carefully.

(Organization Name Here) collects and shares information about individuals who access our services. The information is confidentially stored in a local electronic database called the Greater Los Angeles Homeless Management Information System (LA HMIS). The LA HMIS securely records information (data) about persons accessing housing and homeless services within Los Angeles.

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

Why We Collect and Share Information

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

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

The Type of Information We Collect and Share in the HMIS

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

- Name and contact information
- Social security number
- Birthdate
- Demographic information such as gender and race/ethnicity

Last updated on: 5/17/2017
- History of homelessness and housing (including current housing status and where and when services have been accessed)
- Self-reported medical history including any mental health and substance abuse issues
- Case notes and services
- Case manager's contact information
- Income sources and amounts; and non-cash benefits
- Veteran status
- Disability status
- Household composition
- Emergency contact information
- Domestic violence history
- Photo (optional)

How Your Personal Information Is Protected in the HMIS
Your information is protected by passwords and encryption technology. Each HMIS user and Participating Organizations must sign an agreement to maintain the security and privacy of your information. Each HMIS user or Participating Organizations that violates the agreement may have access rights terminated and may be subject to further penalties.

How PPI May Be Shared and Disclosed
Unless restricted by other laws, the information we collect can be shared and disclosed under the following circumstances:

- To provide or coordinate services.
- For payment or reimbursement of services for the Participating Organizations.
- For administrative purposes, including but not limited to HMIS Administrator(s) and developer(s), and for legal, audit personnel, and oversight and management functions.
- For creating de-identified PPI.
- When required by law or for law enforcement purposes.
- To prevent a serious threat to health or safety.
- As authorized by law, for victims of abuse, neglect, or domestic violence.
- For academic research purposes.
- Other uses and disclosures of your PPI can be made with your written consent.

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

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

Last updated on: 5/17/2017
How to Revoke Your Consent for Sharing Information in the HMIS

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

Your Rights to Your Information in the HMIS

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

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

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

Your Privacy Rights Regarding Your Information in the HMIS

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

If your grievance is not resolved to your satisfaction, you may send a written grievance appeal to your CoC Lead.

Amendments to this Privacy Notice

The policies in this notice may be amended at any time. These amendments may affect information obtained by this organization before the date of the change. Amendments regarding use or disclosure of PPI will apply to information (data) previously entered in HMIS, unless otherwise stated. All amendments to this privacy notice must be consistent with the requirements of the federal HMIS privacy standards. This organization must keep permanent documentation of all privacy notice amendments.
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 by law or by organizations that give us money to operate this program. Other personal information that we collect is important to run our programs, to improve services for homeless persons, and to better understand the needs of homeless persons. We only collect information that we consider to be appropriate.

A Privacy Notice is available upon request.
Appendix F: Revocation of Consent

GREATER LOS ANGELES
HOMELESS MANAGEMENT INFORMATION SYSTEM (LA HMIS)
REVOCATION OF CONSENT

By signing below, I revoke my consent to share my Protected Personal Information (PPI) in the LA HMIS.

I understand that this revocation authorizes the removal of my PPI from the shared HMIS database and will prevent further PPI from being added. I understand that the PPI that I previously authorized to be shared cannot be entirely removed from the HMIS database and will remain accessible to the limited number of organization(s) that provided me with direct services.

Client Name: ______________________ DOB: _____________ Last 4 digits of SS_________

Signature _________________________________________ Date ______________________

Head of Household (Check here) □

Minor Children (if any):

Client Name: ______________________ DOB: _____________ Last 4 digits of SS_________
Client Name: ______________________ DOB: _____________ Last 4 digits of SS_________
Client Name: ______________________ DOB: _____________ Last 4 digits of SS_________
Client Name: ______________________ DOB: _____________ Last 4 digits of SS_________

_______________________________ __________________________
Print Name of Organization Print Name of Organization Staff

_______________________________ __________________________
Signature of Organization Staff Date
Appendix G: Interagency Data Sharing Consent Form

GREATER LOS ANGELES

HOMELESS MANAGEMENT INFORMATION SYSTEM (LA HMIS)

INTERAGENCY DATA SHARING CONSENT FORM

LA

Client Name:______________________________________________________________

SSN/Client ID:____________________________________________________________

Date of Birth:____________________________________________________________

Name of Originating Organization:__________________________________________

Name of Organization with which to extend Client Data Sharing:

______________________________________________________________

Client Information to Share (Client: please INITIAL all forms you want to share):

____ Program Entry Required Questions
____ Services Provided
____ Case Notes
____ Assessment (Client Profile)
____ Savings Record
____ Program Exit Information
____ Group Meetings
____ Any information as necessary

_____________________________________________________________________

Client Signature ___________________________ Date ________________________
Appendix H: Grievance Form

GREATER LOS ANGELES
HOMELESS MANAGEMENT INFORMATION SYSTEM (LA HMIS)
GRIEVANCE FORM

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

**Grievances must be submitted in writing to:**
[Enter Address]

Date of offense: __________________________________________________________

Name of Individual who violated your privacy rights. ____________________________

Name of Organization who violated your privacy rights. _________________________

Brief description of grievance (what happened): ______________________________

Best way to contact you: ___________________________________________________

Your name: __________________________________________________________________

Your phone: __________________________________________________________________

Your mailing address: __________________________________________________________________

CoC response date: __________________________________________________________________

**Recommendation to Organization:**

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 by law or by organizations that give us money to operate this program. Other personal information that we collect is important to run our programs, to improve services for homeless persons, and to better understand the needs of homeless persons. We only collect information that we consider to be appropriate.
Mission: Leveraging technology in a respectful and appropriate manner, HMIS will assist homeless providers, persons experiencing a housing crisis, and policy advocates to end homelessness in the Greater Los Angeles and Orange counties.

Vision: The LA Collaborative is dedicated to providing the best possible, highest quality Homeless Management Information System (HMIS) to enhance the Continuum of Care for persons experiencing homelessness. Specifically, HMIS will:

- Enable providers to **track services, report outcomes, and manage** client data using accessible and user-friendly technology.
- Enhance the ability of policy makers and advocates **to gauge the extent of homelessness and plan services** appropriately throughout the Greater Los Angeles and Orange counties.
- Ensure persons experiencing a housing crisis receive **streamlined referral, coordinated services, and speedy access** to essential services and housing.

For more information, contact the HMIS Administrative Office.
Client Rights

HMIS

What Is HMIS?

The Homeless Management Information System (HMIS) is a web-based information system that allows administrative responsibilities to at-risk individuals or households to be compiled in the Greater Los Angeles region. HMIS helps to understand client needs, help organizations plan appropriate services for the clients they serve, inform public policy in an attempt to end homelessness, streamline and coordinate services and intake procedures to save client's valuable time, and so much more.

Why Gather and Maintain Data?

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

Written Client Consent

Each client must complete a Client Consent to Share Information Agreement allowing release of demographic information to the HMIS. Clients will be required to complete a signed form to be kept on file with the service provider. A copy will be provided to the client.

Client Rights

Common Client Questions:

Who can access my information?

Only staff who work directly with clients or have administrative responsibilities can look at, enter, or edit client information. Anyone can look at demographic information, Angeles cities, and compile information about organizations participating in the LA Continuum of Care.

Who will receive my information?

No information will be released to another individual without your consent. Information is stored in an encrypted central database. HMIS will also help us understand client needs, help organizations plan appropriate resources for the clients they serve, inform public policy in an attempt to end homelessness, streamline and coordinate services and intake procedures to save client's valuable time, and so much more.

What if I don't want to provide information?

Clients have the right not to answer any questions, unless entry into a program requires it.

What if I believe my rights have been violated?

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

Grievance

If you feel a violation of your rights as a client has occurred, please contact your organization's HMIS Administrator.

The Continuum of Care HMIS Administrative Office can be notified of violations through written notice. All participating organizations are responsible for ensuring that security procedures are followed and client rights are respected throughout the organization's HMIS participation.
Acknowledgement

I acknowledge that I have received a written copy of the LA HMIS Collaborative Policies and Procedures Manual. I understand the terms of the LA HMIS Policies and Procedures and I agree to abide by them. I understand that any violation of the policies or procedures could lead to my HMIS account being locked or even criminal prosecution.

Organization Name: ______________________________________________________

Printed Name: ____________________________________________________________

Signature: ______________________________________________________________

Date: ____________________________________________________________________
## Appendix J: Clarity Access Roles Matrix

<table>
<thead>
<tr>
<th>Client Profile Pages</th>
<th>Description</th>
<th>Limited Read</th>
<th>Basic User</th>
<th>Agency Admin</th>
<th>CES Lead/Matcher</th>
<th>System Administrator</th>
</tr>
</thead>
<tbody>
<tr>
<td>History</td>
<td>History of the Client's service, enrollment, assessment history from anywhere.</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Services</td>
<td>Provide Services not connected to programs</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Programs</td>
<td>Enroll into programs and see history of enrollments (Depending on access level)</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Public Alerts and Client Notes</td>
<td>See general notes for the client and any alerts (Depending on access level)</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Files</td>
<td>See files/documents associated to the client (Depending on access level)</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Household Management</td>
<td>Manage members of the household</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Location</td>
<td>Add and see history of locations of the client (Depending on access level)</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Assessments</td>
<td>Add and see history of assessments of the client (Depending on access level)</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Referrals</td>
<td>Refer clients to a program for services</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td></td>
</tr>
</tbody>
</table>

### Access Level

<table>
<thead>
<tr>
<th>Description</th>
<th>Limited Read</th>
<th>Basic User</th>
<th>Agency Admin</th>
<th>CES Lead/Matcher</th>
<th>System Administrator</th>
</tr>
</thead>
<tbody>
<tr>
<td>Attendance</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>Manage Agency</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>Report Library</td>
<td></td>
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<td>X</td>
<td>X</td>
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<td>Analysis</td>
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<td>X</td>
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<td>X</td>
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<tr>
<td>Function</td>
<td>Description</td>
<td>Access</td>
<td>Update</td>
<td>Delete</td>
<td>Share</td>
</tr>
<tr>
<td>----------------------------------------------</td>
<td>-----------------------------------------------------------------------------</td>
<td>--------</td>
<td>--------</td>
<td>--------</td>
<td>-------</td>
</tr>
<tr>
<td>Agency Sensitive Data</td>
<td>Access to sensitive data, including SSN.</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Any Agency Sensitive Data</td>
<td>Access to sensitive data, including SSN that was entered by any agency.</td>
<td></td>
<td>X</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Client Reports</td>
<td>Client-specific Reports such as ID Card for Printing, History, Notes, Summary</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Caseload</td>
<td>List of clients associated to the user's account.</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
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<tr>
<td>Attendance Standalone Module</td>
<td>For Swipe (TBD)</td>
<td></td>
<td></td>
<td></td>
<td>X</td>
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<tr>
<td>Aggregate Data Analysis</td>
<td>Data Analysis Tool through Looker</td>
<td>X</td>
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<td>Referral Match Maker</td>
<td>Matching Functions</td>
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<td></td>
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<td>Restore Deleted Data</td>
<td>Restore Deleted Client Information</td>
<td></td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Navigator</td>
<td>Assigning</td>
<td></td>
<td></td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>Data Import</td>
<td>Data Import Tool</td>
<td></td>
<td></td>
<td></td>
<td>X</td>
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<tr>
<td>Create New Clients</td>
<td>Create new client records</td>
<td>X</td>
<td>X</td>
<td>X</td>
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<tr>
<td>Create Service Placements</td>
<td>Record new services onto a client's record</td>
<td>X</td>
<td>X</td>
<td>X</td>
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<tr>
<td>Create Program Placements</td>
<td>Record new enrollments into a program onto a client's record</td>
<td>X</td>
<td>X</td>
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<tr>
<td>Create Public Alerts and Client Notes</td>
<td>Create notes and alerts on a client's record</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
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<tr>
<td>Create Files</td>
<td>Add new files (scanned files, documents, etc.) onto a client's record</td>
<td>X</td>
<td>X</td>
<td>X</td>
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<tr>
<td>Operation</td>
<td>Description</td>
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<td>-----------------------------------------------------------------------------</td>
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<tr>
<td>Create Location</td>
<td>Record a location for a client (whether for outreach, for permanent housing placements, etc.)</td>
<td>X X X X X</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Create Assessment(s)</td>
<td>Record a new assessment onto a client’s record (Coordinated Assessment, Screening Tools, etc.)</td>
<td>X X X X X</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Create Referral</td>
<td>Refer a client to a program</td>
<td>X X X X X</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Edit Agency Services</td>
<td>Edit a service that was previously recorded by the user’s organization on a client’s record</td>
<td>X X X X X</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Edit Any Agency Services</td>
<td>Edit a service that was previously recorded by any organization on a client’s record</td>
<td>X X X X X</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Edit Agency Program</td>
<td>Edit program enrollment information that was previously recorded by the user’s organization on a client’s record</td>
<td>X X X X X</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Edit Any Agency Programs</td>
<td>Edit program enrollment information that was previously recorded by any organization on a client’s record</td>
<td>X X X X X</td>
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<td></td>
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<tr>
<td>Edit Agency Public Alerts and Client Notes</td>
<td>Edit a note or alert that was previously recorded by the user's organization on a client's record</td>
<td>X X X X X</td>
<td></td>
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<tr>
<td>Edit Any Agency Public Alerts and Client Notes</td>
<td>Edit a note or alert that was previously recorded by any organization on a client's record</td>
<td>X X X X X</td>
<td></td>
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<tr>
<td>Edit Agency Files</td>
<td>Edit files (scanned files, documents, etc.) that was previously uploaded by the user's organization on a client's record</td>
<td>X X X X X</td>
<td></td>
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<tr>
<td>Edit Any Agency Files</td>
<td>Edit files (scanned files, documents, etc.) that was previously recorded by any organization on a client's record</td>
<td>X X X X X</td>
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<tr>
<td>Edit Agency Location</td>
<td>Edit location information for a client that was previously recorded by the user's organization on a client's record</td>
<td>X X X X X</td>
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<tr>
<td>Edit Any Agency Location</td>
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<td>X X X X X</td>
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<td>Edit Any Agency Assessment</td>
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<td>X</td>
<td>X</td>
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<td>X</td>
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<td>Delete Agency Public Alerts and Client Notes</td>
<td>Delete a note or alert that was previously recorded by the user's organization on a client's record</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Delete Any Agency Public Alerts and Client Notes</td>
<td>Delete a note or alert that was previously recorded by any organization on a client's record</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
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<td>Delete Agency Files</td>
<td>Delete files (scanned files, documents, etc.) that was previously uploaded by the user's organization on a client's record</td>
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<tr>
<td>Delete Any Agency Files</td>
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<tr>
<td>Delete Location</td>
<td>Delete location information for a client that was previously recorded by the user's organization on a client's record</td>
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<td>Delete Any Agency Location</td>
<td>Delete location information for a client that was previously recorded by any organization on a client's record</td>
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<td>Delete Any Client</td>
<td>Delete any client records</td>
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<td>Delete Any Agency Referral</td>
<td>Delete a referral that was previously recorded by any organization on a client's record</td>
<td></td>
<td></td>
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</tr>
</tbody>
</table>

*Last Revision By: Pada Lee*

*Last Revision on: 4/21/2017*
Report and Discussion on Proposed Changes to HUD Methodology for Estimating Fair Market Rents

Prepared for the Los Angeles Continuum of Care Coordinating Council

June 14, 2017

Erin Cox
Senior Analyst, Policy and Planning
Overview

• **Background:**
  - The Department of Housing and Urban Development (HUD) establishes and annually updates Fair Market Rent (FMR) values.
  - FMRs impact rent ceilings and funding levels for HUD-funded programs.
  - Concerns have been raised about extreme year-to-year fluctuations and need for more localized estimates.
  - In response, HUD has proposed changes to the methodology used to estimate FMRs and has invited public comment on those changes.

• **Purpose:**
  - To provide feedback to HUD on the local impact of proposed methodological changes to annual FMR calculations.
## Summary: Current Methodology

| **Base Estimate** | • Based on 5-year American Community Survey (ACS) data  
|                   | • 2-bedroom standard quality base rent |
| **Recent Mover Adjustment** | • Calculated from most recent 1-year ACS data  
|                   | • Adjusted to current-year values  
|                   | • Only used if it increases base estimate |
| **Small Area FMRs** | • Estimates by zip code within larger metropolitan area  
|                   | • Calculated using rent ratio |
| **Determining Statistical Validity** | • ACS data only used if margin of error is < 50% |
Proposed Changes

**Choosing ACS Estimates**
- Add statistical validity test requiring 100 survey responses

**Recent Mover Factor**
- Use all-bedroom recent mover rents if needed for statistical significance before using larger geographical area

**Small Area FMRs**
- Use gross rent estimates calculated by zip code rather than ratio method
Impact of Proposed Changes

- Impact of FMR Changes
  - No change to LA County FMR as of 2017 estimates

- Impact of Small Area FMR Changes
  - No immediate impact to CoC programs
  - Consulting with Housing Authorities to assess impact on their programs
Staff Recommendations

- **Feedback on Proposed Methodological Changes**
  - Affirm that proposed changes are generally positive in that they:
    - Seek to minimize fluctuations by requiring a higher sample size, and
    - Keep estimates as local as possible.

- **Additional Feedback**
  - Seeking input on additional FMR-related feedback to include in LAHSA’s response
**Fiscal Year 2017 Federal Appropriations Bill & Fiscal Year 2018 Budget Proposal**

Congress reached agreement on budget appropriations for the remainder of Fiscal Year 2017 (FY17) on April 30th, which subsequently passed the House and Senate and was signed by the President on May 5th. FY17 runs through September 30th, 2017. Most programs that serve low-income and homeless individuals and families are funded at flat or increased levels over Fiscal Year 2016 (FY16). However, most of the funding levels for these programs fall short of the FY17 funding request made by the previous Administration. The bill funds the U.S. Interagency Council on Homelessness (USICH) for an additional year, extending the agency’s funding through Fiscal Year 2018 (FY18).

Additionally, the Administration released its proposed FY18 Budget, which makes large scale cuts to non-defense discretionary and social safety net programs to offset increases in defense spending. The FY18 budget proposal is grounded on a series of widely disputed assumptions. These assumptions include: 1) Economic growth will increase to 3 percent by 2021; and 2) The Administration’s proposed tax cuts will have no impact on revenues (the proposed cuts will cost approximately $5 trillion, however, contradicting this assumption). The following document provides a summary of the provisions for specific departments and programs that impact individuals and families who are low-income or experiencing homelessness.

**Transportation, Housing and Urban Development**

The FY17 appropriations bill provides $38.8 billion for U.S. Department of Housing and Urban Development (HUD), which is $513 million over 2016 funding levels, but is $824 million below the FY17 request. The Administration’s FY18 budget proposal reduces HUD funding by $6.2 billion below FY17 levels. The table below summarizes enacted FY17 funding levels, and the Administration’s FY18 approximate proposed funding levels, for key HUD programs that serve homeless and low-income individuals and families.

<table>
<thead>
<tr>
<th>HUD Program</th>
<th>(1) FY 2016 (in billions)</th>
<th>(2) FY 2017 (in billions)</th>
<th>(3) FY16/FY17 Change</th>
<th>(4) FY18 Proposed (Δ of 2 and 4) (in millions)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Housing Choice Vouchers (HCV)</td>
<td>$17.69</td>
<td>$18.36</td>
<td>+$674 M</td>
<td>-$780 M</td>
</tr>
<tr>
<td>McKinney-Vento Homeless Assistance Grants</td>
<td>$2.25</td>
<td>$2.38</td>
<td>+$133 M</td>
<td>-$133 M</td>
</tr>
<tr>
<td>Project-Based Rental Assistance</td>
<td>$10.63</td>
<td>$10.82</td>
<td>+$186 M</td>
<td>-$69 M</td>
</tr>
<tr>
<td>Housing for Persons with HIV/AIDS</td>
<td>$330</td>
<td>$356</td>
<td>+$26 M</td>
<td>-$26 M</td>
</tr>
</tbody>
</table>

The Center on Budget and Policy Priorities (CBPP) estimates that only 97.5% of HCVs will be renewed in FY17. Homeless Assistance Grants include Emergency Solutions Grants (ESG) and Continuums of Care (CoC) funding. This funding is to renew project-based rental assistance contracts for the remainder of calendar year 2017. FY17 funding is awarded to communities through grants to serve low-income persons living with HIV/AIDS and their families. The City of Los Angeles received over $13 million in FY16.
### HUD Program (Cont.)

<table>
<thead>
<tr>
<th>HUD Program</th>
<th>FY 2016</th>
<th>FY 2017</th>
<th>Change</th>
<th>FY18 Proposed</th>
</tr>
</thead>
<tbody>
<tr>
<td>Choice Neighborhood Initiative</td>
<td>$125 M</td>
<td>$138 M</td>
<td>$+13 M</td>
<td>$-138 M</td>
</tr>
<tr>
<td>This initiative targets neighborhoods with distressed public or HUD-assisted housing, and no less than $50 million of FY17 funding will be made directly available to PHAs.</td>
<td></td>
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</tr>
<tr>
<td>Section 811 Permanent Housing for Persons with Disabilities</td>
<td>$108 M</td>
<td>$120 M</td>
<td>$+12 M</td>
<td>$-13 M</td>
</tr>
<tr>
<td>FY17 funding is sufficient to create 700-800 new vouchers in FY17 and renew all FY16 vouchers.</td>
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</tr>
<tr>
<td>Section 202 Housing for the Elderly</td>
<td>$420 M</td>
<td>$502 M</td>
<td>$+82 M</td>
<td>$+8 M</td>
</tr>
<tr>
<td>FY17 funding is sufficient to renew all FY16 contracts and provides $10 million in FY17 to build new units or provide additional rental assistance.</td>
<td></td>
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</tr>
<tr>
<td>PHA Capital Fund</td>
<td>$1.74 B</td>
<td>$1.94 B</td>
<td>$+200 M</td>
<td>$-1.3 B</td>
</tr>
<tr>
<td>This fund is utilized by PHAs for the development, financing, and modernization of public housing developments and for management improvements.</td>
<td></td>
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</tr>
<tr>
<td>Community Development Block Grant</td>
<td>$3 B</td>
<td>$3 B</td>
<td>No Change</td>
<td>$-3.0 B</td>
</tr>
<tr>
<td>A total of $109 million in CDBG funds was awarded throughout Los Angeles County in FY16. The FY18 budget proposal seeks to eliminate the CDBG program.</td>
<td></td>
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</tr>
<tr>
<td>HOME Investment Partnerships</td>
<td>$950 M</td>
<td>$950 M</td>
<td>No Change</td>
<td>$-950 M</td>
</tr>
<tr>
<td>A total of $38 million in HOME funds was awarded throughout Los Angeles County in FY16. The FY18 budget proposal seeks to eliminate the HOME Investment Partnerships program.</td>
<td></td>
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</tr>
<tr>
<td>PHA Operating Fund</td>
<td>$4.5 B</td>
<td>$4.4 B</td>
<td>$-100 M</td>
<td>$-500 M</td>
</tr>
<tr>
<td>HACoLA/HACLA report that if there are not offsets to the 2.2% cut in FY17, it will hurt their ability to properly administer the public housing and Section 8 programs. The FY18 budget proposal includes deeper cuts, which would exacerbate this challenge.</td>
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</tbody>
</table>

### Other Departments

The FY17 appropriations bill funds the U.S. Department of Education (DOE) and U.S. Department of Labor (DOL) at $1.2 billion and $83 million below FY16 levels, respectively. The U.S. Department of Health and Human Services (HHS) is funded at $73.5 billion, $2.8 billion above FY16 levels. Most programs under DOE, DOL, HHS, and the U.S. Department of Veterans Affairs (VA) that serve homeless and low-income individuals and families were provided flat or increased funding over FY16 levels.

The Administration’s FY18 budget proposal requests funding cuts to five of the eight programs listed below administered by departments other than HUD. This includes proposed large scale cuts to DOL employment and training programs and the Administration for Children and Families, under HHS. The FY18 budget proposal also includes a more than 25 percent cut to the Supplemental Nutrition Assistance Program (SNAP) over the next ten years, placing the burden on states to replace these cuts. This would result in $12.6 billion over ten years in cuts to SNAP allotments for California. The below table summarizes enacted FY17 funding levels and the Administration’s approximate proposed FY18 funding levels, for key programs outside of HUD that regularly serve homeless and low-income individuals and families.
<table>
<thead>
<tr>
<th>Program</th>
<th>FY 2016</th>
<th>FY 2017</th>
<th>FY16/FY17 Change</th>
<th>FY18 Proposed (Δ of 2 and 4)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Administration for Children and Families</td>
<td>$19.1 B</td>
<td>$19.5 B</td>
<td>+$385 M</td>
<td>-$5.0 B</td>
</tr>
<tr>
<td>Within this HHS program, the Head Start, Promoting Safe and Stable Families, and Child Care Development Block Grant are each provided increased funding over FY16 in the FY17 bill.</td>
<td></td>
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</tr>
<tr>
<td>Education for Homeless Children and Youth</td>
<td>$70 M</td>
<td>$77 M</td>
<td>+$7 M</td>
<td>-$7 M</td>
</tr>
<tr>
<td>This DOE formula grant funds Local Education Agencies (LEA) to coordinate services to homeless children and youth and their families.</td>
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</tr>
<tr>
<td>Veterans Homelessness Programs</td>
<td>$1.5 B</td>
<td>$1.6 B</td>
<td>+124 M</td>
<td>+$100 M</td>
</tr>
<tr>
<td>Under VA, these programs include Supportive Services for Veteran Families, the Grant and Per Diem Program, and Case Management for the HUD-VASH Program.</td>
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</tr>
<tr>
<td>Runaway and Homeless Youth Act (RHYA)</td>
<td>$102 M</td>
<td>$102 M</td>
<td>No Change</td>
<td>No Change</td>
</tr>
<tr>
<td>Programs within RHYA include Basic Centers, Transitional Living, and Educational Grants.</td>
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<tr>
<td>Administration for Community Living (ACL)</td>
<td>$1.9 B</td>
<td>$1.9 B</td>
<td>No Change</td>
<td>-$109 M</td>
</tr>
<tr>
<td>Under HHS, ACL includes programs supporting senior nutrition including Meals on Wheels.</td>
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<td></td>
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</tr>
<tr>
<td>Emergency Food and Shelter Program</td>
<td>$120 M</td>
<td>$120 M</td>
<td>No Change</td>
<td>N/A</td>
</tr>
<tr>
<td>This program provides funds to supplement and expand ongoing efforts to provide shelter, food and supportive services for hungry and homeless people.</td>
<td></td>
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</tr>
<tr>
<td>DOL Employment and Training Programs</td>
<td>$9.2 B</td>
<td>$9.2 B</td>
<td>No Change</td>
<td>-$2.3 B</td>
</tr>
<tr>
<td>DOL administers federal government job training and worker dislocation programs, federal grants to states for public employment service programs, and unemployment insurance benefits.</td>
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</tr>
<tr>
<td>SAMHSA Homeless Programs</td>
<td>$64 M</td>
<td>$69 M</td>
<td>+$5 M</td>
<td>-$5 M</td>
</tr>
<tr>
<td>SAMHSA programs overall received an increase of $130 million over FY16 levels in the FY17 bill.</td>
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</tbody>
</table>