



HOMELESS ACTION NETWORK OF DETROIT

Detroit CoC Homeless Management Information System (HMIS)

Policies and Procedures

(Including MSHMIS Policies and Procedures)

Provided by

Homeless Action Network of Detroit

2019

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Policy: Roles and Responsibilities

Participation in an HMIS system has been mandated for all programs receiving McKinney-Vento/Hearth Act and/or ESG Funding, State ESP, RHYMIS, HOPWA, PATH, City ESG and CDBG, and some VA funding. HUD, in turn, is mandated to provide ongoing reports to Congress.

System Administrator Responsibilities

HMIS Administrators (SAs) report to the Homeless Action Network of Detroit (HAND). They are the lead entity in coordinating and implementing the HMIS technology for Detroit, Highland Park and Hamtramck agencies.

- a. Convene and lead local Agency Administrator Meetings (approximately every 6 weeks).
- b. Provide local support to partnering agencies according to HAND guidelines.
- c. Provide training, coaching, technical assistance and webinars on various HMIS-related topics
- d. Add assessments to customize the implementation locally. All assessments must be coordinated with MSHMIS and built very carefully.
- e. Help ensure data quality among all agencies participating in HMIS.
- f. Submit AHAR, Point-In-Time (PIT) Count, and Housing Inventory Count (HIC) reports to HUD.
- g. Help ensure the agency provider pages are complete by generating helpful reports.
- h. Conduct on-site monitoring of the agency.
- i. Complete Privacy training annually.
- j. Support the CAM lead agency with HMIS implementation.
- k. Provide a Security Officer for the CoC and provide Security Officer training.
- l. Generate CoC reports based on HUD and other funding needs

Agency Administrator Responsibilities

Each agency will designate a staff member to be the Agency Administrator (lead contact) for the agency. The Agency Administrator will receive additional training and will be responsible for the following:

- a. Maintain and create end user passwords, have full reporting access and be able to view agency level data.
- b. The Agency Administrator will submit a HelpDesk ticket to the System Administrator when an end user is no longer using the system.

- c. Maintain the security of the system and assist end users with system problems and serve as level-1 Help Desk for all users at the agency.
- d. Attend meetings approximately every 6 weeks facilitated by the Systems Administrator.
- e. Assist in determining what functionalities of the system the agency will utilize and work closely with the Systems Administrator on data quality issues.
- f. Run various ART and ServicePoint reports at least monthly and provide them to program managers and end users.
- g. Ensure that all HMIS-related information is disseminated to all agency end users.
- h. Complete privacy training annually.
- i. Log all service requests via www.handetroit.org/helpdesk
- j. Serve as Security Officer for the Agency or appoint a Security Officer.
- k. Prepare for HMIS audits.
- l. Oversee all HMIS responsibilities for the agency and ensure that the agency is compliant with the HMIS Administrator's guidelines.
- m. Create a succession plan for the agency regarding all HMIS procedures to help new staff come onboard to HMIS efficiently in the event of turnover.

End User Responsibilities

HMIS End Users will be responsible for the following:

- a. Enter client data according to Data Quality and Data Entry standards.
- b. Follow the guidelines and procedures in the Privacy Policy.
- c. Work with the Agency Administrator to clean up data.
- d. Complete privacy training annually.
- e. Communicate all HMIS service requests to the Agency Administrator.

Policy: Updating and Maintaining the Provider Site

Maintenance of provider pages is typically managed by the Detroit System Administrators on behalf of each agency. Agency administrators are encouraged to review the content noted below and communicate back to HAND via the helpdesk at www.handetroit.org/helpdesk should any updates need to be made.

1. Services the Agency provides are to be clearly identified, as well as the services the agency refers to other agencies, and must be obtained from the Airs Taxonomy List, along with the Services Quick List
2. Complete information for each Agency / Program / Project Provider Site
 - a. Designate who will receive referrals in the Agency; and establish a separate email address to receive referrals, in order to delineate between referrals and other emails to that designee.

- b. Utilize the service terms identified in the Services provided on the Provider Description field.
- c. Complete HUD standards on all provider pages.
- d. Accurate and Up To Date Provider and Services Quicklists on each of the Agency's provider sites using the codes identified in number "1." Above.
 - i. Services Quicklists are the services the agency provides and refers for.
 - ii. Provider Specific Services-are populated with those services you provide that are not listed in the AIRS Taxonomy.
 - iii. "Services Provided" is a list of services the Agency provides with corresponding AIRS Taxonomy codes.
 - iv. Referral Quicklists are the programs that the Agency refers to.

Policy: Determining Your Workflow

1. Decide how your agency plans to use the database. Does the agency plan to simply use the database to report to funders or does the agency plan to implement multiple functionalities of the database using it as the agency's automated record system or a portion of its automated record system?
2. Define what screens the agency intends to include in its implementation within each program.
 - a. An assessment that includes all of the HUD Universal Data Elements is recommended for all agencies regardless of their funding sources as the assessment includes most of the information organizations will need to plan and write grants.
 - b. Agencies will provide instruction to staff on any issues related to how questions should be asked.
 - c. Agencies will provide instruction on how clients should be assigned to the various programs.
 - d. Agencies will define how paper forms will be used to support data collection or storage. *It is recommended that agencies continue to maintain paper records by either printing screens or storing the forms on which the data is initially documented.*
3. Define who will complete entry and when that entry will occur. Entry should be as close to "real time" as possible, especially if the agency intends to share records.
 - a. Agencies may have staff enter data as they interview clients.
 - b. Agencies may have staff interview using paper and enter the data after the session is over.
 - c. Agencies may have staff interview using paper and have a delegated data entry person for multiple clients.
4. Define what paper will be used to support the automated file. Forms are used to collect information that is subsequently entered and/or screens are printed from real-time entry.

5. Intake and Exit forms are available for download here: <http://mihomeless.org/index.php/user-resources/michigan-users/mshmis-assessment-forms>

Policy: User Licenses & HMIS Fee Schedule

1. A User License will be required for all those given access to the database whether their function is to complete data entry or to generate reports. Licenses within a particular organization may be transferred as staff members leave and replacements are hired.
 - a. The total number of licenses allocated to each agency within a CoC are documented by the Lead Agency in the Agency License Reconciliation Log. The number of user licenses allocated to an agency is determined by that agency and HMIS staff. Monthly support fees are covered under the HUD grant. Additional user licenses may be purchased at \$175 per license. **Note: These costs are subject to change.**

MSHMIS / Bowman License Costs as of 1/1/2015

One Time Charges:			
SP License	\$ 175.00		
Encryption License	<u>\$ 0.00</u>		
	\$175.00		

ART Licenses:

1. View Licenses are available to end users appointed by the Agency Administrator and System Administrator.
2. The URL to the MSHMIS site should never be sent via email with the User ID and Temporary Password. Send the information in two emails to maintain security. The User will sign onto the site and change the password upon receiving his/her temporary password.
3. To access the database, end users must have completed all trainings outlined in the [HMIS Training Grid](#) at the Michigan Training Site www.hmislearningcenter.org .
4. The Agency Administrator will submit a HelpDesk ticket to the System Administrator to delete any end users from HMIS.
5. User Profile Issues:
 - a. The System Administrator will issue a License to all Agency Administrators.
 - b. After the Provider Site(s) are completed, the System Administrators will add the users to the site according to their workflow plan.
 - i. The Access Level is defined for the User and the System Administrator determines what other functionalities the user may have access to such as backdating ROIs or SkanPoint.
 - ii. The System Administrator completes the User Screen that defines where the User may enter data.
6. End users may also be required to attend specific workflow training.

HMIS Fee Schedule

REVISED BASED ON COC BOARD FEEDBACK

<u>Fee</u>	<u>Task</u>
BASIC SERVICES	
\$950	New agency or new program BASIC set-up. Basic setup includes orientation; new user training/webinars; helpdesk support; standard system configuration (provider page, workflow setup, sharing configuration, bin creation, and assessment setup); and one (1) HMIS User License. Additional licenses may be purchased
\$425*	Annual agency maintenance fee includes annual/refresher training/webinars, helpdesk support; maintenance of agency HMIS setup; and annual fees for one (1) HMIS User License. *Fee does not apply to existing agencies or programs.
\$175/User	Additional HMIS User Licenses (one-time fee)
\$100/Annually/User	Annual HMIS User License fee. **Fee does not apply to existing user.
\$100/User**	HMIS Report License
CUSTOM SERVICES	
\$70/Hr	Customization to integrate ServicePoint into agency's workflow; custom reports; on-site training; transfer of agency's database to ServicePoint or vice-versa; data clean-up; consultation services
\$250	Agency-request HMIS Compliance Review
\$40/Hr	Data entry

Policy: Sharing Protocol

Required Sharing of HMIS Data

In order to maximize the use of the HMIS, and to improve the coordination of care for the clients served by providers, to the Detroit CoC requires all agencies using HMIS to share client data related to services. Sharing client data may not be appropriate for all agencies; therefore, if there is a reason why your agency (or a particular program within your agency) should not be required

to share data, your organization may apply for a waiver of the sharing requirement. This process is described below.

Action Step:

- If your agency believes it has valid cause for why the agency (or a project within the agency) should be exempt from these data sharing requirements, you may apply for a waiver from the HMIS data sharing requirements. A “Data Sharing Requirement Waiver Request” form must be completed and returned to HAND. Please note this Data Sharing Requirement Waiver Request also details what client data will be shared.
- If you do not apply for or receive a required data sharing waiver, you will receive an updated Sharing Agreement (called a QSOBAA – Qualified Service Organization Business Associate Agreement). Upon receiving this Agreement, you will also receive instructions as to when it needs to be signed and returned.
- After all the necessary Sharing Agreements are in place, HMIS staff will take the appropriate steps to set up the system for sharing of service information. Your HMIS Agency Administrators will receive further instructions regarding sharing during their regular meetings.
- New agencies implementing HMIS will automatically join the sharing QSOBAA and will share data with all other agencies. A new Release of Information will be created twice annually and will include the name of the new agencies.

Best Practices:

- The sharing of data is only possible when the project enters a Release of Information (ROI) in ServicePoint. Also, we strongly recommend a 2-year ROI. If the client agrees to the sharing release, the end user should always enter the ROI in ServicePoint. This allows subsequent programs to see what services have been provided and by whom.
- The HMIS Match Assessment should be updated frequently so that other agencies can see the progress of each client as they move toward their housing goal.
- End users should not edit or delete a service entered by another agency.
- Data quality is vital to data sharing; make sure you are entering all required fields.
- If the client does not want to share his or her data, be sure to close the record.

- The agency agrees to place all Client Authorization for Release of Information forms related to the MSHMIS in a file to be located at its business address and that such forms are made available to the MSHMIS for periodic audits. The agency will retain these MSHMIS related Authorization for Release of Information forms for a period of seven years upon expiration, after which time the forms will be discarded in a manner ensuring un-compromised client confidentiality.

- The agency may restrict a client’s information when the client refuses to allow his/her name, year of birth, gender or other personally identifiable information to be shared in the database.

- The agency cannot refuse to provide services if the consumer elects not to participate in the Sharing Protocol.

- The agency will uphold relevant federal and state confidentiality regulations and laws that protect client records and will only release confidential client records with written consent by the client, or the client's guardian, unless otherwise provided for in regulations or laws.

Policy: Information Security Protocols

User Access Privileges to MSHMIS Database

- User accounts will be created and deleted by the System Administrator. The Agency Administrator will submit a HelpDesk ticket to the System Administrator when an end user is no longer using the system.
- The Agency Administrator will enter email address, title and phone number of the end user on the User Admin tab in ServicePoint.
- The Agency Administrator will manage the proper designation of user accounts and will monitor account usage.
- The Agency Administrator will reset passwords within the Administrative function of the MSHMIS. The URL address will be sent separately from the temporary username/password for security purposes.
 - Passwords are automatically generated from the system when a user is created. Agency Administrators can customize a temporary password. Agency Administrators will communicate the temporary password to the user.
 - The user will be required to change the password the first time they log onto the system. The password must be between 8 and 50 characters and be alphanumeric. Passwords should not be able to be easily guessed or found in a dictionary.
 - Any passwords written down should be securely stored and inaccessible to other persons. Users should not store passwords on a personal computer for easier log on.
 - Passwords expire every 45 days. Users may not use the same password consecutively and cannot be re-used until 2 password selections have expired.
 - The Agency Administrator should contact the System Administrator to terminate the rights of a user immediately upon termination from their current position.
 - The Agency Administrator must have users sign the End User Agreement. The Agency Administrator will keep the End User Agreements on file and include a copy with the HelpDesk request to set up a new user.
 - If a user unsuccessfully attempts to login 3 times, the user id will be “locked out”, access permission revoked and unable to gain access until their password is reset in the manner stated above.
 - Passwords are the individual’s responsibility, and users cannot share user accounts.
- Agency staff will not engage in electronic transmission of user IDs and passwords, except for first-time, temporary passwords or encryption keys.
- The Agency Administrator will inform Systems Administrator of any changes in personnel to ensure training of new personnel.

- The Agency is responsible for authorizing computers used to access the system within the agency. Access to the software system will only be allowed from computers specifically identified by the Executive Director and Agency Administrator.
- The Agency Administrator must establish internal access to data protocols. These policies will include who has access, for what purpose, and how they can transmit this information. A formal white paper must be created and filed on site. Issues to be addressed include storage, transmission and disposal of data.
- Users who have been granted access to the Advanced Reporting Tool and Report Writer/Query Function have the ability to download and save client level data onto their local computer. Once this information has been downloaded, this data becomes the responsibility of the agency and all proper handling policies must be followed.
- Each agency understands that all client records containing identifying information that are stored within local computers are the responsibility of the agency.

Policy: Training and Help Desk Support

This training guide outlines courses that must be completed at the Michigan HMIS training site www.hmislearningcenter.org . New users should look for the row that aligns with the role they will fulfill at their agency. Each page outlines which of the trainings HAND HMIS staff will need to see documentation for before licensing credentials will be released.

Staff that transition from one role to another within or between agencies should plan to share a screenshot of their quiz results with their agency administrator when license requests are submitted through the helpdesk at www.handetroit.org/helpdesk

Most trainings will require that participants review a video and then pass a short quiz.

Once new staff complete their trainings, a screenshot of the new staff's completed courses section from www.hmislearningcenter.org should be included OR each certificate should be downloaded and attached with their user agreement when the helpdesk request for their new license is submitted via www.handetroit.org/helpdesk .

Once login credentials are provided by HAND's HMIS team, a 1 hour in person check in at HAND's HMIS lab can be arranged upon request. This appointment will be scheduled 1-2 weeks after the user is added to the system to allow them a chance to gain familiarity with the site and have the chance to be assigned cases by their agency. Users may find it helpful to bring a selection of client files with them to this check in, typically with the System Administrator assigned to their agency. A listing of System Administrator assignments is included on page 15 of this document and is also posted on the right hand side of www.handetroit.org/hmis .

	User Policy, Responsibility, & Code of Ethics	1. Prerequisites (All Users)				2. Core Trainings (All HMIS Users)						
		Using the Training Site	Basic Privacy and Security	Release of Information (ROI)	Chronic Homeless Definition	Informed Consent Using the ROI	Collecting and Entering Identifiers	Navigating ServicePoint	Navigating ClientPoint	Securing Client Records	Creating & Managing Households	Client Entry & Assessment
Emergency Shelter Staff	X	X	X	X	X	X	X	X	X	X	If applicable	X
SSVF, RRH, Diversion, and Prevention Program Staff	X	X	X	X	X	X	X	X	X	X	X	X
Permanent Supportive Housing, Transitional Housing, and GPD Staff	X	X	X	X	X	X	X	X	X	X	If applicable	X
Street Outreach and CAM Staff	X	X	X	X	X	X	X	X	X	X	If applicable	X
Agency Administrators	X	X	X	X	X	X	X	X	X	X	X	X
Staff with ART access	X	X	X	X	X	X	X	X	X	X	X	X
CoC and HMIS Lead Staff	X	X	X	X	X	X	X	X	X	X	X	X
Read Only License	X	X	X	X	X			X	X			

	2. Core Trainings (All HMIS Users)			Required Annual Updates
	Service Transactions	Case Plans	Basic ART Orientation	Basic Privacy and Security
Emergency Shelter Staff	If applicable	If applicable		X
SSVF, RRH, Diversion, and Prevention Program Staff	X	X		X
Permanent Supportive Housing, Transitional Housing, and GPD Staff	If applicable	X		X
Street Outreach and CAM Staff	X	X		X
Agency Administrators	X	X	X	X
Staff with ART access	X	X	X	X
CoC and HMIS Lead Staff	X	X	X	X
Read Only License			If applicable	X

HMIS Helpdesk

All requests for HMIS technical assistance, including trainings, management of user licenses, creation or adjustment of provider pages, assistance analyzing, running, or creating reports, client record issues, should be submitted to the Detroit HMIS using the HMIS helpdesk at www.handetroit.org/hmis .

End users should always speak first with their agency administrator to attempt to resolve HMIS challenges they experience. In the event that the agency administrator is unable to resolve the issue or is unavailable, end users can also reach out via the helpdesk. All end users are encouraged to submit requests for duplicate profiles to be merged as well as HMIS verifications through the Helpdesk.

The helpdesk is monitored Monday-Friday during normal business hours. Unless otherwise alerted, submissions should receive acknowledgement within 1 business day. Requests for HMIS technical assistance received through the helpdesk receive priority. Requesting assistance outside of the helpdesk will result in users being asked to submit a helpdesk ticket.

Requests for One on One HMIS Training

Agency administrators are able to make requests for additional training for themselves or individual end users via the helpdesk at any time. New users will be asked to complete the HMIS trainings noted earlier as well as spend some time using the system for 1-2 weeks before one on one training can be scheduled.

Agency Administrators are encouraged to recommend topics that might benefit from being reviewed in CoC wide HMIS trainings and/or HMIS Agency Administrator meetings at any time. Requests for job aids other than those posted here <http://www.handetroit.org/traininganddocumentation> can also be made via the helpdesk.

Kiana Harrison	Selwin O’Neal	Alexis Alexander
Black Family Development	Alternatives for Girls	Blue Water CIL
Cass Community Social Services	Development Centers	Central City Integrated Health
City of Detroit – HRD + ESG (SO)	Faith Love N Kindness	Community Social Services
Covenant House	Love Outreach	Community & Home Supports
CSH	Michigan Veterans Foundation	COTS
DRMM	NSO	Covenant Community Care
Emmanuel House	Operation Get Down	Freedom House
Legal Aid & Defender	Ruth Ellis	Henry Ford Health Systems
Mariners Inn	The Salvation Army	Pope Francis Center
NOAH	SWCS	SHAR Inc.
Positive Images	Traveler’s Aid Society	UCHC
THAW		Veteran’s Administration Medical Center
St. John		Volunteers of America
Wayne County Neighborhood Legal Services		
Wayne Metro Community Action Agency		
Special Project Leads		
CAM	LSA-AHAR	HealthCare Agencies
Chronic By Name List	Moving Up	HOPWA
City CDBG	Policies & Procedures	PIT
City & MSHDA ESG	Privacy & Security	Project Plan Management
HIC	Youth	Provider Page Maintenance
HUD Funded- Agencies		Veterans (By Name List, GPD, SSVF)

Policy: Grievance Policy

Program participants have the right to express their dissatisfaction relating to:

- Client not informed of MSHMIS
- Client not informed/provided a Privacy Notice
- No verbal/written Release of information from client
- Sharing client information without informed consent
- Client denied services due to refusal to participate in MSHMIS project
- Client Release of Information form has no end date associated with sharing
- Client put at personal risk or harmed due to personal information shared on the MSHMIS site

Every reasonable effort will be made by program staff to resolve any questions or concerns at the time they arise by initiating discussion. If the problem cannot be resolved to the participant's satisfaction, she/he may initiate a grievance.

An individual will not be criticized for filing a grievance, nor will any punitive action be taken against her/him as a result of the grievance. Grievance information must be treated in the most discreet and confidential manner.

Grievance Procedure

Program staff ensures that participants know and understand these grievance procedures. A copy of the grievance procedure will be posted within the program. The grievance procedure will be explained after acceptance into the program and a copy will be given to each participant.

If a participant has a complaint or grievance that cannot be resolved directly, the participant should report it to the Agency Administrator. It is the responsibility of the supervisor to speak to all parties involved and try to settle the matter to the satisfaction of all parties involved in a timely manner.

In the event that the matter is not resolved to the satisfaction of the participant, the participant may inform the Agency Administrator of his/her desire to take the complaint to the Executive Director or a staff member designated by the Executive Director. The Executive Director will fill out a Grievance Form and will schedule a meeting with the participant and the Agency Administrator. The participant may request the presence of a supportive staff member, friend or other advocate at the meeting. The Executive Director will meet with the program participant and the Agency Administrator within thirty days of the initial grievance date.

If the grievance is not resolved by the Executive Director, the participant or his/her representative should contact Homeless Action Network of Detroit (HAND). The Agency Administrator will provide the program participant with the information to contact HAND and will assist the participant, if required, with this part of the grievance process. The participant may request the presence of a supportive staff member, friend or other advocate at any HUD meetings. All parties should meet in a timely matter to resolve the grievance, per HAND procedures.

The Agency is required to forward a copy of any formal Client Grievances to the Homeless Action Network of Detroit. A description of the organizations planned response to the grievance should be included with the copy of the Grievance.

Policy: Client Intake/Interview Policies and Procedures

The agency is responsible for ensuring that all clients are asked a minimal set of questions for use in aggregate analysis. The agency commits to work with the local HMIS Administrator to develop a customized agency Interview Protocol or like format. AGENCY also agrees to minimally enter this level of information into the MSHMIS software system.

Intake/Client Consent Procedure

- The agency staff member will use a script to use as a guide for intake of client to include the explanation of the Privacy Notice, Release of Information, Grievance Policy and
 1. Post the Agency's Public Notice.
 2. Agency staff member must inform the client of the HMIS project using the Summary of Privacy Notice script.
 3. After explanation, agency staff member must provide the client with the MSHMIS Privacy Notice or Agency Privacy Notice that includes information on the MSHMIS project including what HMIS is, what ServicePoint is, why the agency is using it, security precautions, privacy protection and benefits and risk for the clients.
 4. Agency staff member will inform the client that name, age, last 4 digits of SSN and gender will be shared statewide and does not compromise confidentiality as it does not link with any particular agency or service. Profile can be closed if client is being threatened, has family/friends/enemies who work in the MSHMIS participating agency or if the client is famous/has relationship with agency. Client determines if she/he wants information shared.
 5. Agency staff member will document, via a signed MSHMIS Release of Information (ROI) form, a client's (or guardian's when appropriate) understanding and consent to enter client information into a central database and the reasons for this entry and to consent to the sharing protocol set up by AGENCY. The completed ROI provides:
 - Assurance that the consumer knows that his/her information has been entered into the MSHMIS.
 - Assurance that the MSHMIS has been fully explained to the Consumer and he/she has received a copy of the Agency's Privacy Notice.
 - Informed client consent regarding basic profile information to be entered and shared.
 - Release of non-confidential service transaction information to be shared with select agencies included under a negotiated Coordination of Service Agreements (Inter-Agency Sharing Agreement).
 - The length of time the release will be effective. The HMIS Administrator's recommend a 2-year ROI.
 6. If profile is not shared, the agency staff member will close the profile.
 7. If a sharing agreement is in place, the agency staff member will provide the client with the list of agencies it is sharing information with including the shared assessments. Client will approve the sharing program and will document via a signed Detroit CoC Release of Information form, a

client's (or guardian's when appropriate) understanding and consent to enter client information into a central database and the reasons for this entry and to consent to the sharing protocol set up by the agency.

Policy: Data Entry Procedure

- Data should be entered into HMIS as close to real time as possible, but if not, within 48 hours of entry or exit. Emergency shelters should attempt to have data entered on the same day of entry or exit.
 - Agency should ensure that all users support data quality.
 - The agency administrator will review the organization's data entry and ensure that data errors are corrected at the minimum monthly.
 - During intake, agency staff members will complete the minimum required data elements live in ServicePoint or by using the Client Intake Form. Up to date intake forms are available here, organized by project type: <http://mihomeless.org/index.php/user-resources/michigan-users/mshmis-assessment-forms>
1. Users should switch to the appropriate program using the "enter data as" feature.
 2. Users should always search to see if the client is already in the system. If so, the user should click on the existing client record, not create a new client record.
 3. Users should also use the backdate feature to enter clients who came into the program prior to the current date.
 4. The Client Name will be entered first.
 - The "First Name", "Last Name", "Date of Birth", and "Gender" fields must be collected in order to create the client's **unique identifier**.
 - Do not use spaces, apostrophes, commas or hyphens, e.g., La Tisha O'Malley would be LaTisha OMalley.
 - Jr. or Sr. designation must follow the last name, e.g., John Smith, Jr. would be John Smith Jr
 - Use initial capital letters on the First Name and Last Name. Do not use all caps or all lower-case letters. Incorrect: mary m jones Incorrect: MARY M JONES
Correct: Mary M. Jones
 - If "date of birth" is unknown, use January 1st of the estimated year. If no birthdate is entered, the client will be counted as an adult.
 5. If needed, a household will be created next. To create a household, choose one client as "head of household" and add family members as needed. Users should not create a household for singles.
 6. Enter the Release of Information.
 7. If required, complete a program entry.
 8. Enter Case Manager Name under the Case Manager tab.
 9. Enter Services.
 10. Enter Referrals if referring the client to another project.
 11. If required, complete Case Plan.
 12. Ensure that a VI-SPDAT, VI-F-SPDAT, or TAY-VI-SPDAT has been recorded for all clients entering emergency shelter programs by checking assessments tab.

13. Remember to use the Interim Assessment to update client data, such as income, employment, education, and disability at least annually.
14. When clients leave the program, complete a program exit.
15. Enter data into the Match Assessment on the Home Page in HMIS and remember to update as needed.

Note: MDHHS-funded projects including PATH, ESP-TANF and MDHHS S+C, should contact Jayne or David Youngs for specific data entry policies, procedures and technical assistance.

RHYMIS-funded projects should contact MCAH for specific data entry policies, procedures and technical/program assistance.

Required Data Elements for All Projects Except PATH (contact MDHHS for Information) and RHYMIS

All programs are required to complete the Universal Data Elements (UDEs). Missing UDEs will be flagged by the system in a pop-up window when saving a client's entry, appear as null values on 252 Data Completeness Report in ART, and flag as DQ errors on the CoC APR.

Universal Data Element	Required for Adults	Required for Children	Update at Exit	Update Annually Using Interim Assessment
Name	X	X		
SS Number	X	X		
SSN Data Quality	X	X		
Gender	X	X		
Race	X	X		
Ethnicity	X	X		
Date of Birth	X	X		
Date of Birth Type	X	X		
Residence Prior to Project Entry	X			
Project Start Date	X	X		
Project Exit Date	X	X	X	
Destination	X	X		
Relationship to HoH	X	X		
Client Location	X			
Length of time on street, in shelter or Safe Haven	X			
Number of times on the streets, in ES, or SH over the past 3 years	X			
Total Number of Months homeless on the street, in ES, or SH over the past 3 years	X			
Disability	X	X		
Military Veteran	X			
Income and Sources	X	X	X	X
Domestic Violence	X			

Services	X			
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Required – Discharge Destination

All programs are required to select the appropriate destination when a client exits a program. Follow the guidance below when determining the best option for the client.

Permanent Destinations	Explanation
Owned by Client, no ongoing housing subsidy	The unit the client is living in is owned by him or her and has no ongoing housing subsidy attached to it.
Owned by client, with ongoing housing subsidy	The unit the client is living in is owned by him or her and has an ongoing housing subsidy (mortgage payment support) attached to it. Includes USDA Rural Development Loan/Recovery Act Supports.
Rental by client, no ongoing housing subsidy	The unit the client is renting is not supported by any government or private subsidy.
Rental by client, VASH Subsidy	The unit the client is renting is being supported by a VASH subsidy. VASH (Veterans Affairs Supportive Housing)
Rental by client, GPD TIP housing subsidy	The unit the client is renting is being supported by a GPD TIP subsidy. GPD TIP (Grant and Per Diem Program – Transition in Place)
Rental by client, other ongoing housing subsidy	The unit the client is renting is being supported by a subsidy – either government or private, either site-based or voucher. Includes Section 8, HARP, HCV, State Rental Assistance (SER) and HPRP.
Permanent housing (other than RRH) for formerly homeless persons	The unit the client is renting is being subsidized by any homeless funding source. This could be a scattered-site or site-based supportive housing where the rental subsidy is from Shelter Plus Care, Supportive Housing Program, or a local source of subsidy restricted strictly for homeless persons.
Moved from one HOPWA funded project to HOPWA PH	Client exited one HOPWA funded project into HOPWA PH
Staying or Living with Family – Permanent Tenure	The client has moved into a room, apartment or house occupied by a family member and is intending on living there. Use “permanent” if the client has NOT been given a specific time limit in which he/she needs to leave or if exit destination is short term

	but leads to a permanent destination such as doubled up for two weeks until an apartment is ready.
Staying or Living with Friends – Permanent Tenure	The client has moved into a room, apartment or house occupied by a friend and is intending on living there. Use “permanent” if the client has NOT been given a specific time limit in which he/she needs to leave or if exit destination is short term but leads to a permanent destination such as doubled up for two weeks until an apartment is ready. Includes clients who leave for Job Corps, college, Military or National Guard training.
Rental by client, with RRH or equivalent subsidy	

Temporary Destinations	Explanation
Emergency shelter, including hotel or motel paid for with voucher	The client has exited to an Emergency Shelter, including a hotel or motel paid for with an emergency shelter voucher. Includes Domestic Violence shelter, Basic Center shelters/host home for youth and Missions.
Hotel or motel paid for without emergency shelter voucher	The client has exited to a hotel or motel that is not paid for with emergency shelter voucher
Safe Haven	HUD specific program for those who are unwilling or unable to participate in supportive services. Must be formally designated as a Safe Haven.
Transitional Housing for homeless persons (including youth)	The client has exited to a Transitional Housing program for the homeless which is housing with supports that is time limited up to 24 months. Includes TBRA, Youth SHP and Youth transitional housing programs. Doesn't include an exit to substance abuse treatment facility.
Moved from one HOPWA funded project to HOPWA TH	The client exited one HOPWA funded project to enter HOPWA TH
Staying or Living with Family – Temporary Tenure	The client has exited to a room, apartment or house occupied by a family member and is intending on staying there only a short time. Use "temporary" if client is given a time limit in which he/she needs to leave or if the Case Manager has knowledge that the destination is meant to be very short term and/or is lacking stability, such as overcrowding (more than 1.5 persons per room).
Staying or Living with Friends – Temporary Tenure	The client has exited to a room, apartment or house occupied by a friend and is intending on staying there only a short time. Use "temporary" if client is given a time limit in which he/she needs to leave or if the Case Manager has knowledge that the destination is meant to be very short term and/or is lacking stability, such as overcrowding (more than 1.5 persons per room).
Place Not Meant for Habitation	The client has returned to the streets or any place not meant for human habitation (e.g. a vehicle, abandoned building, bus/train/subway/airport station, chicken coop, campsite, or anywhere outside).

Institutional Settings	Explanation
Foster Care Home or Foster Care Group Home	The client has exited to an adult or child foster care home or foster care group home.
Psychiatric hospital or other psychiatric facility	The client has exited to a psychiatric facility or psychiatric hospital, or psychiatric unit of a local hospital.
Substance Abuse Treatment facility or Detox center	The client has exited to a substance abuse treatment program, detox program or other substance abuse residential facility.
Hospital or other non-psychiatric medical facility	The client has exited to a hospital for any reason other than psychiatric. Includes any residential care involving a medical need that is not long-term.
Long-term care facility or nursing home	The client has exited to a long-term care facility or nursing home.
Jail, prison or juvenile detention facility	The client has been arrested and is residing in a local jail, prison (state or federal) or juvenile detention facility.

Other Destinations	Explanation
Deceased	The client died while in the program.
No Exit Interview Completed	An exit interview was not completed for this client
Other	Some place other than what is able to be recorded in any of the above fields. (Must specify if Other is chosen)
Client Doesn't Know/ Client Refused	The client exited the program without telling program staff where he or she was going or refused to disclose this information at exit.
Data Not Collected (no exit interview completed)	
Residential project or halfway house with no homeless criteria	The client has exited to a halfway house or residential project that does not require homeless status for entry.

Policy: Data Quality Assurance

Agency administrators are responsible for monitoring data quality a monthly basis and encouraged to connect with the HMIS for support in developing a plan for carrying this out successfully at their agency.

Following are data quality measures for the HMIS project.

a) End users should always search to see if the client is already in the system; if the client is in the system, click on the name and use that client record. Do not create a new client if the client already exists. If multiple profiles are identified, a merge request form should be downloaded from and submitted via the helpdesk at www.handetroit.org/hmis
b) <u>Programs should complete all the universal data elements</u> for clients. This is extremely important; especially when sharing data. The standard for UDE completion is at least 90%.
c) When sharing with internal and/or external programs, end users must complete a Release of Information (ROI) in HMIS ; otherwise the data that has been entered will not be shared. The current ROI is available at www.handetroit.org/hmis
d) Clients who have been entered into HMIS should have an associated project start date .
e) When exiting clients, less than 25% of clients should have an “unknown” destination when being exited from a ES, TH or SSO program.
f) Ensure that all household members are included in program entries/exits and services.
g) If clients are in a program longer than one year, end users should use the Interim Review feature to complete an annual assessment.
h) The number of active clients in HMIS programs (per the APR) should not be more than 105% or less than 65% of the number of clients on the Housing Inventory Chart for the AHAR Point-In-Time dates of the last Wednesday of October, January, April and July.
i) Residential programs must participate in the Point-in-Time and Housing Inventory Chart counts (PIT and HIC) as required.
j) Agency Administrator meetings are required; if the Agency Administrator cannot attend, he/she should send a representative. Agency Administrators should attend the majority of HMIS meetings that are scheduled.
k) Agency Administrators are required to generate data quality reports monthly and provide them to the end users.
l) Agency Administrators generate various reports as required by funders.
m) All requests for HAND letters of support will be based on the guidelines set in HAND’s request for letter of support document. [See Appendix F for HAND’s sample letter of support]

Agency administrators may find it helpful to develop an internal performance improvement team that meets quarterly to review the following issues

- *Coverage* – What client information is being entered into the database from what programs? What percent of the homeless consumers served by the organization are being entered into the system?
- *Data Quality* – are interviews/forms generating complete, consistent, high quality information? Are definitions being applied uniformly? Are all required fields being completed? Are outcome measures being reviewed (income, employment, positive destination)?
- *Security/Privacy/Confidentiality* – Are there concerns regarding the organizations practice around privacy issues. A plan should be developed to correct any problems that are identified.
- *Reporting issues* – are staff able to access and use the data from the system? Are their problems with reporting? Are there opportunities to use the data to support improvement of program operations?
- *Outcomes* – is the data accurately reflecting client and program outcomes according to measurement criteria for improving performance

Policy: Right to Deny User and Agency Access

- If HMIS staff has an issue with an agency's data quality, staff will contact the Agency Administrator. If no significant progress is made within two calendar weeks, HMIS staff will contact Agency Management. If no significant progress is made within one calendar week, HMIS staff will contact funder. If no significant progress is made within one calendar week, HMIS staff will deny access to the agency end users and Agency Administrator.
- Agency may request an Exception to the security and privacy standards. However, in lieu of an approved Exception, the agency or a user's access may be suspended or revoked for suspected or actual violation of the security protocols. Serious or repeated violation by users of the system may result in the suspension or revocation of an agency's access.
- All exceptions of these standards are to be requested in writing by the Executive Director of the agency and approved by the Detroit CoC Board after submission to the Detroit Data Committee as appropriate. MSHMIS staff will be notified of the request. Any exception to the data security policies and standards not approved by the Detroit CoC Board is a violation.
- All potential violations of any security protocols will be investigated.
- Any user found to be in violation of security protocols will be sanctioned accordingly. Sanctions may include but are not limited to; a formal letter of reprimand, suspension of system privileges, revocation of system privileges, termination of user license and criminal prosecution.
- Any agency that is found to have consistently and/or flagrantly violated security protocols may have their access privileges suspended or revoked.
- All sanctions are imposed by the Detroit Data Committee and Detroit CoC Board of Directors.
- All sanctions can be appealed to the Detroit Data Committee and Detroit CoC Board of Directors.

Policy: Release of data by the Homeless Action Network of Detroit:

1. Only de-identified aggregate data will be released.
2. Aggregate data will be available in the form of an aggregate report or as a raw data set.

3. Aggregate data may be made directly available to the public.
4. Parameters of the aggregate data, that is, where the data comes from, what it includes and what it does not include will be presented with each report.
5. Requests for aggregated data must be documented on an HMIS Report Request Form through the HelpDesk and approved by HAND. Approval will be based on guidelines established by HAND. HAND reserves the right to deny any request for aggregated data.
6. No client identified may be released without informed consent unless otherwise specified by Michigan State and Federal confidentiality laws. All requests for such information must be addressed to the owner/participating organization where the data was collected.

APPENDIX A: HMIS Data Quality Plan

Overview

To provide accurate and relevant data to the Detroit Continuum of Care, it is imperative that the HMIS Project maintains an on-going process of quality improvement.

The data quality improvement process will include participation from HAND Staff including HMIS staff, Agency Administrators, and end users. To ensure the success of the data quality plan, HMIS staff and Agency Administrators will be required to run reports as outlined in the attached ART Reports Tables.

Roles and Responsibilities

HAND Executive Director

- Review and approve plan for data monitoring by HMIS Staff, Agency Administrators and end users.
- Review current status of Detroit CoC HMIS data with existing data quality measures.
- Provide oversight for HMIS Data Quality Plan.

System Administrator Responsibilities

- Provide training to Agency Administrators on Reports that they are required to run according to the ART Reports Table for Agency Administrators.
- Send out reminders quarterly to Agency Administrators to run reports.
- Provide training to all end users on HMIS Policies and Procedures, including data quality procedures.
- Generate reports as documented in the ART Reports Table for HMIS staff.
- Generate APRs with Detail for each assigned HUD funded program at least twice a year.
- Convene and lead local Agency Administrator Meetings.
- Provide training, coaching, technical assistance and webinars on various HMIS-related topics.
- Help ensure data quality among all agencies participating in HMIS.
- Help the agency set up an HMIS Performance Improvement team.
- Conduct an audit of the agency when required.

Agency Administrator Responsibilities

Each agency will designate a staff member to be the Agency Administrator (lead contact) for the agency. The Agency Administrator will receive additional training and will be responsible for the following:

- Run an AHAR report for each emergency shelter, transitional housing and permanent supportive housing program quarterly and submit to HMIS staff. The report will be due by the 15th of the month following the end of the quarter (April 15th, July 15th, October 15th and January 15th.) This new requirement will begin on April 15, 2014. (If the agency administrator has several programs, he or she can ask end users to run the AHAR for some of the programs.) By running the AHAR, end users will be able to quickly identify and complete missing data. This will be one of the scoring components for the 2015 NOFA. The score will be based on the AHAR reports submitted for all three types of programs that the agency has (not only the HUD-funded programs.)
- Attend training on how to run ART reports and other reports that address data quality.
- Attend meetings approximately every 6 weeks facilitated by the Systems Administrator.

- Run various ART and ServicePoint reports according to the Reports Table for Agency Administrators and provide them to Executive Directors, program managers and end users.
- Ensure that HMIS-related information is disseminated to all agency end users.

End User Responsibilities

- End users should always search to see if the client is already in the system; if the client is in the system, click on the name and use that client record. Do not create a new client if the client already exists.
- End users should complete all the universal data elements for clients. This is extremely important; especially when sharing data.
- When sharing with internal and/or external programs, end users must complete a Release of Information (ROI) in HMIS; otherwise the data that has been entered will not be shared.
- Clients who have been entered into HMIS should have an associated program entry unless the program is using a “services only” workflow.
- Ensure that all household members are included in program entries/exits and services.
- If clients are in a program longer than one year, end users should use the Interim Review feature to update income annually.
- Be sure to update the Housing Status at exit; this is required. Also, update Education and Employment at exit. Do not update the Homeless question.

APPENDIX B: Sample Privacy Policy

DATE: August 1, 2012

SUBJECT: HMIS Privacy and Confidentiality

APPROVAL LEVEL: Agency Board of Directors

REASONS FOR POLICY:

1. To protect the privacy of agency clients
2. To comply with applicable laws and regulations
3. To ensure fair information practices as to:
 - a. Openness
 - b. Accountability
 - c. Collection limitations
 - d. Purpose and use limitations
 - e. Access and correction
 - f. Data Quality
 - g. Security

STATEMENT OF POLICY:

- 1) **Compliance** Agency privacy practices will comply with all applicable laws governing HMIS client privacy/confidentiality. Applicable standards include, but are not limited to the following.
 - a) Federal Register Vol. 69, No. 146 (HMIS FR 4848-N-02) - Federal statute governing HMIS information.
 - b) HIPAA - the Health Insurance Portability Act.
 - c) 42 CFR Part 2. - Federal statute governing drug and alcohol treatment.
 - d) Detroit HMIS Collaborative Policy and Procedures
 - e) Negotiated QSOBAA(s) - Inter-agency sharing agreement(s).

NOTE: HIPAA statutes are more restrictive than the HMIS FR 4848-N-02 standards and in cases where both apply; HIPAA over-rides the HMIS FR 4848-N-02 standards. In cases where an agency already has a confidentiality policy designed around the HIPAA standards, that policy can be modified to include the HMIS data collection, or can be amended to create one set of standards for clients covered under HIPAA, and a second set of standards for those covered only under HMIS FR 4848-N-02. Agencies should indicate in their Privacy Notice which standards apply to their situation.

- 2) **Use of Information** PPI (protected personal information, that is information which can be used to identify a specific client) can be used only for the following purposes:
 - a) To provide or coordinate services to a client.
 - b) For functions related to payment or reimbursement for services.
 - c) To carry out administrative functions such as legal, audit, personnel, planning, oversight and management functions.
 - d) For creating de-personalized client identification for unduplicated counting.
 - e) Where disclosure is required by law.
 - f) To prevent or lessen a serious and imminent threat to the health or safety of an individual or the public.
 - g) To report abuse, neglect, or domestic violence as required or allowed by law.
 - h) Contractual research where privacy conditions are met (including a written agreement).
 - i) To report criminal activity on agency premises.
 - j) For law enforcement purposes in response to a properly authorized request for information from a properly authorized source.

NOTE: HMIS FR 4848-N-02 standards list items a-d above as allowable reasons for disclosing PPI but make provisions for additional uses to meet individual agency obligations. In some cases these uses (e-j above) have additional conditions, and HMIS FR 4848-N-02 4.1.3 should be consulted if any of these optional items are to be included in an agency's policy. It also states that "except for first party access to information and required disclosures for oversight and compliance auditing, all uses and disclosures are permissive and not mandatory."

NOTE: if a client refuses to release PPI, and such information is needed/required in order to provide services, the client's refusal may necessitate denial of service. Agencies may choose to make provisions for such denial of services in their policy.

3) **Collection and Notification** Information will be collected only by fair and lawful means with the knowledge or consent of the client.

- a) PPI will be collected only for the purposes listed above.
- b) Clients will be made aware that personal information is being collected and recorded.
- c) A written sign will be posted in locations where PPI is collected. This written notice will read:

“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.”

“The collection and use of all personal information is guided by strict standards of confidentiality. Our Privacy Notice is posted. A copy of our Privacy Notice is available to all clients upon request.”

- d) This sign will be explained in cases where the client is unable to read and/or understand it.

NOTE: Under HMIS FR 4848-N-02, agencies are permitted to require a client to express consent to collect PPI verbally or in writing, however this is optional and not a requirement of the statute.

4) **Data Quality** PPI data will be accurate, complete, timely, and relevant.

- a) All PPI collected will be relevant to the purposes for which it is to be used.
- b) Identifiers will be removed from data that is not in current use after 7 years (from date of creation or last edit) unless other requirements mandate longer retention.
- c) Data will be entered in a consistent manner by authorized users.
- d) Data will be entered in as close to real-time data entry as possible.
- e) Measures will be developed to monitor data for accuracy and completeness and for the correction of errors.
 - i) The agency runs reports and queries monthly to help identify incomplete or inaccurate information.
 - ii) The agency monitors the correction of incomplete or inaccurate information.
 - iii) By the 15th of the following month all monitoring reports will reflect corrected data.
- f) Data quality is subject to routine audit by System Administrators who have administrative responsibilities for the database.

5) **Privacy Notice, Purpose Specification and Use Limitations** The purposes for collecting PPI data, as well as its uses and disclosures will be specified and limited.

- a) The purposes, uses, disclosures, policies, and practices relative to PPI data will be outlined in an agency Privacy Notice (copy attached).
- b) The agency Privacy Notice will comply with all applicable regulatory and contractual limitations.
- c) The agency Privacy Notice will be made available to agency clients, or their representative, upon request and explained/interpreted as needed.
- d) Reasonable accommodations will be made with regards to the Privacy Notice for persons with disabilities and non-English speaking clients as required by law.
- e) PPI will be used and disclosed only as specified in the Privacy Notice, and only for the purposes specified therein,
- f) Uses and disclosures not specified in the Privacy Notice can be made only with the consent of the client.
- g) The Privacy Notice will be posted on the agency web site.
- h) The Privacy Notice will reviewed and amended as needed.
- i) Amendments to or revisions of the Privacy Notice will address the retroactivity of any changes.
- j) Permanent documentation will be maintained of all Privacy Notice amendments/revisions.
- k) All access to, and editing of PPI data will be tracked by an automated audit trail, and will be monitored for violations use/disclosure limitations.

NOTE: Items above are required by HMIS FR 4848-N-02, and/or MSHMIS policy, but agencies can restrict and limit the use of PPI data further by requiring express client consent for various types of uses/disclosures, and/or by putting restriction or limits on various kinds of uses/disclosures.

- 6) **Record Access and Correction** Provisions will be maintained for the access to and corrections of PPI records.
- a) Clients will be allowed to review their MSHMIS record within 5 working days of a request to do so.
 - b) During a client review of their record, an agency staff person must be available to explain any entries the client does not understand.
 - c) The client may request to have their record corrected so that information is up-to-date and accurate to ensure fairness in its use.
 - d) When a correction is requested by a client, the request will be documented, and the staff makes a corrective entry if the request is valid.
 - e) A client may be denied access to their personal information for the following reasons:
 - i) Information is compiled in reasonable anticipation of litigation or comparable proceedings;
 - ii) Information about another individual other than the agency staff would be disclosed,
 - iii) Information was obtained under a promise of confidentiality other than a promise from this provider and disclosure would reveal the source of the information
 - iv) Information, the disclosure of which would be reasonably likely to endanger the life or physical safety of any individual.
 - f) A client may be denied access to their personal information in the case of repeated or harassing requests for access or correction. However, if denied, documentation will be provided regarding the request and reason for denial to the individual and be made a part of the client's record.

- g) A grievance process may be initiated if a client feels that their confidentiality rights have been violated, if access has been denied to their personal records, or if they have been put at personal risk, or harmed.
 - h) Any client grievances relative to HMIS will be processed/resolved according to agency grievance policy.
 - i) A copy of any client grievances relative to HMIS data or other privacy/confidentiality issues and agency response are forwarded to MCAH.
- 7) **Accountability** Processes will be maintained to ensure that the privacy and confidentiality of client information is protected, and staff is properly prepared and accountable to carry out agency policies and procedure that govern the use of PPI data.
- a) Grievances may be initiated through the agency grievance process for considering questions or complaints regarding privacy and security policies and practices. All users of the MSHMIS must sign a User Agreement that specifies each staff persons obligations with regard to protecting the privacy of PPI and indicates that they have received a copy of the agency's Privacy Notice and that they will comply with its guidelines.
 - b) All users of the MSHMIS must complete formal privacy training.
 - c) A process will be maintained to document and verify completion of training requirements.
 - d) A process will be maintained to monitor and audit compliance with basic privacy requirements including but not limited to auditing clients entered against signed MSHMIS Releases.
 - e) A copy of any staff grievances initiated relative to privacy, confidentiality, or MSHMIS data will be forwarded to MCAH.
 - f) Regular user meetings will be held and issues concerning data security, client confidentiality, and information privacy will be discussed and solutions will be developed. Minutes of user meetings will be forwarded to MCAH as required by the MSHMIS participation agreement.
- 8) **Sharing of Information** Client data may be shared with partnering agencies only with client approval
- a) All routine data sharing practices with partnering agencies will be documented and governed by a Qualified Service Organization Business Associate Agreement, (QSOBAA) that defines the agency-determined sharing practice.
 - b) Agency defaults within the MSHMIS system will be set to "closed," open for planned exception guided by sharing agreements negotiated between agencies (QSOBAAs).
 - c) A completed MSHMIS Client Release of Information (ROI) Form is needed before information may share electronically according to QSOBAA(s).
 - i) The MSHMIS release is customized to inform the client about what is shared and with whom it is shared. The customization reflects the agency's QSOBAA(s).
 - ii) The client accepts or rejects the sharing plan.
 - iii) If the client rejects the sharing plan, staff clicks the Security Button, which closes the record.
 - d) Clients will be informed about and understand the benefits, risks, and available alternatives to sharing your information prior to signing an ROI, and their decision to sign or not sign shall be voluntary.

- e) Clients who choose not to authorize sharing of information cannot be denied services for which they would otherwise be eligible.
 - f) All Client Authorization for ROI forms related to the MSHMIS will be placed in a file to be located on premises and will be made available to the MCAH for periodic audits.
 - g) MSHMIS-related Authorization for ROI forms will be retained for a period of 7 years, after which time the forms will be discarded in a manner that ensures client confidentiality is not compromised.
 - h) No confidential/restricted information received from the MSHMIS will be shared with any organization or individual without proper written consent by the client, unless otherwise permitted by applicable regulations or laws.
 - i) Restricted information, including progress notes and psychotherapy notes, about the diagnosis, treatment, or referrals related to a mental health disorder, drug or alcohol disorder, HIV/AIDS, and domestic violence concerns shall not be shared with other participating Agencies without the client's written, informed consent as documented on the Agency-modified Authorization for Release of Confidential Form.
 - i) Sharing of restricted information is not covered under the general MSHMIS Client ROI.
 - ii) Sharing of restricted information must also be planned and documented through a fully executed QSOBAA.
 - iii) If a field that normally contain non-confidential information discloses confidential information.
 - (1) The staff completes an Authorization to release Confidential Information.
 - (2) If the client refuses to authorize the release, the staff closes the Assessment/Screen by clicking the lock on the screen and removing any exceptions.
 - j) If a client has previously given permission to share information with multiple agencies, beyond basic identifying information and non-restricted service transactions, and then chooses to revoke that permission with regard to one or more of these agencies, the affected agency/ agencies will be contacted accordingly, and those portions of the record, impacted by the revocation, to will be locked from further sharing.
 - k) All client ROI forms will include an expiration date, and once a Client ROI expires, any new information entered will be closed to sharing unless a new ROI is issued.
- 9) **System Security** System security provisions will apply to all systems where PPI is stored, agency's networks, desktops, laptops, mini-computers, mainframes and servers.
- a) Password Access:
 - i) Only individuals who have completed Privacy and System Training may be given access to the MSHMIS through User IDs and Passwords.
 - ii) Temporary/default passwords will be changed on first use.
 - iii) Access to PPI requires a user name and password at least 8 characters long and using at least one number and one letter.
 - iv) Passwords will not use or include the users name or the vendor name, and will not consist entirely of any word found in the common dictionary or any of the above words spelled backwards.
 - v) User Name and password may not be stored or displayed in any publicly accessible location
 - vi) Passwords must be changed routinely.
 - vii) Users must not be able to log onto more than one workstation or location at a time.

- viii) Individuals with User IDs and Passwords will not give or share assigned User ID and Passwords to access the MSHMIS with any other organization, governmental entity, business, or individual. There will be one license per user and it can't be shared.
- b) Virus Protection and Firewalls:
 - i) Commercial virus protection software will be maintained to protect HMIS system from virus attack.
 - ii) Virus protection will include automated scanning of files as they are accessed by users.
 - iii) Virus Definitions will be updated regularly.
 - iv) All workstations will be protected by a firewall either through a workstation firewall or a server firewall.
- c) Physical Access to Systems where HMIS Data is Stored
 - i) Computers stationed in public places must be secured when workstations are not in use and staff is not present.
 - ii) After a short period of time a password protected screen saver will be activated during time that the system is temporarily not in use.
 - iii) For extended absence, staff must log off the computer
- d) Stored Data Security and Disposal:
 - i) All HMIS data downloaded onto a data storage medium must be maintained and stored in a secure location.
 - ii) Data downloaded for purposes of statistical analysis will exclude PPI whenever possible.
 - iii) HMIS data downloaded onto a data storage medium must be disposed of by reformatting as opposed to erasing or deleting.
 - iv) A data storage medium will be reformatted a second time before the medium is reused or disposed of.
- e) System Monitoring
 - i) User access to the MSHMIS Live Web Site will be monitored using the computer access logs located on each computer's explorer "history" button, or via a central server report.
- f) Hard Copy Security:
 - i) Any paper or other hard copy containing PPI that is either generated by or for HMIS, including, but not limited to report, data entry forms and signed consent forms will be secured.
 - ii) Agency staff will supervise at all times hard copy with identifying information generated by or for the HMIS when the hard copy is in a public area. If the staff leaves the area, the hard copy must be secured in areas not accessible by the public.
 - iii) All written information pertaining to the user name and password must not be stored or displayed in any publicly accessible location.

NOTE :Various important aspects of system security are the contracted responsibility of Bowman Systems and are therefore not covered in agency policy. These involve procedures and protections that take place at the site of the central server and include data backup, disaster recovery, data encryption, binary storage requirements, physical storage security, public access controls, location authentication etc.

APPENDIX C: Homeless Definition Cross-walk

Category	Title	Description See Interim CoC Rule / 24CFR Part 578 for complete wording.	Housing Status Question	“Is Client Homeless?” Question (Michigan Def.)	Program Qualifications & Funding Rules
1	Literally Homeless	<p>(1) An individual or family who lacks a fixed, regular, and adequate nighttime residence, meaning:</p> <p>(i) An individual or family with a primary nighttime residence that is a public or private place not designed for or ordinarily used as a regular sleeping accommodation for human beings, including a car, park, abandoned building, bus or train station, airport, or camping ground;</p> <p>(ii) An individual or family living in a supervised publicly or privately operated shelter designated to provide temporary living arrangements (including congregate shelters, transitional housing, and hotels and motels paid for by charitable organizations or by federal, state, or local government programs for low-income individuals); or</p> <p>(iii) An individual who is exiting an institution where he or she resided for 90 days or less and who resided in an emergency shelter or place not meant for human habitation immediately before entering that institution;</p>	<p>“1- Literally Homeless ”</p>	<p>“Yes” For All</p> <p>Includes persons in existing TH (shelter) under grandfather clause. (New TH is only considered “shelter” if its primary purpose is sheltering and it does not require signed leases or occupancy agreements.)</p>	<p>ESG Rapid Rehousing Homeless</p>

2	Imminent Risk	<p>An individual or family who will imminently lose their primary nighttime residence provided that:</p> <ul style="list-style-type: none"> (i) The primary nighttime <u>residence will be lost within 14 days</u> of the date of application for homeless assistance; (ii) No subsequent residence has been identified; and (iii) The individual or family lacks the resources or support networks, e.g., family, friends, faith-based or other social networks, needed to obtain other permanent housing; 	<p style="text-align: center;">“2- Imminent Risk”</p>	<p style="text-align: center;">“Yes” only if meets i, ii, and iii.</p>	<p style="text-align: center;"><u>Qualifies</u> for ES, TH & SSO</p> <p style="text-align: center;">ESG Homeless Prevention</p>
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3	Homeless under other statutes	<p>Unaccompanied youth under 25 years of age, or families with children and youth, who do not otherwise qualify as homeless under this definition, but who:</p> <p>(i) Are defined as homeless under section 387 of the Runaway and Homeless Youth Act (42 U.S.C. 5732a), section 637 of the Head Start Act (42 U.S.C. 9832), section 41403 of the Violence Against Women Act of 1994 (42 U.S.C. 14043e-2), section 330(h) of the Public Health Service Act (42 U.S.C. 254b(h)), section 3 of the Food and Nutrition Act of 2008 (7 U.S.C. 2012), section 17(b) of the Child Nutrition Act of 1966 (42 U.S.C. 1786(b)), or section 725 of the McKinney-Vento Homeless Assistance Act (42 U.S.C. 11434a);</p> <p>(ii) Have not had a lease, ownership interest, or occupancy agreement in permanent housing at any time during the 60 days immediately preceding the date of application for homeless assistance;</p> <p>(iii) Have experienced persistent instability as measured by two moves or more during the 60-day period immediately preceding the date of applying for homeless assistance; and</p> <p>(iv) Can be expected to continue in such status for an extended period of time because of chronic disabilities, chronic physical health or mental health conditions, substance addiction, histories of domestic violence or childhood abuse (including neglect), the presence of a child or youth with a disability, or two or more barriers to employment, which include the lack of a high school degree or General Education Development (GED), illiteracy, low English proficiency, a history of incarceration or detention for criminal activity, and a history of unstable employment.</p>	<p>“2-At Imminent Risk”</p> <p>Or</p> <p>3-At Risk”</p>	<p>“Yes” only if meets i thru iv otherwise “No”.</p>	<p>ESG Homeless Prevention</p> <p><u>Qualifies</u> for ES, *TH, *SSO</p> <p>*HUD approval see 578.89 (aligned with plan with 10% limit unless homeless PIT < .01% of population).</p>
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4	Fleeing / Attempting to Flee DV	<p>Any individual or family who:</p> <ul style="list-style-type: none"> (i) Is fleeing, or is attempting to flee, domestic violence, dating violence, sexual assault, stalking, or other dangerous or life-threatening conditions that relate to violence against the individual or a family member, including a child, that has either taken place within the individual's or family's primary nighttime residence or has made the individual or family afraid to return to their primary nighttime residence; (ii) Has no other residence; and (iii) Lacks the resources or support networks, e.g., family, friends, and faith-based or other social networks, to obtain other permanent housing. 	<p>“1-Literally Homeless if shelter or street”</p> <p>“2-Imminent Risk if doubled-up”</p>	<p>“Yes” for All if meets i, ii, and iii.</p>	<p>ESG Rapid Rehousing if also Category 1 (street/vehicle or shelter),</p> <p>otherwise</p> <p>Homeless Prevention</p>
	Chronically Homeless	<p>1. An individual who:</p> <ul style="list-style-type: none"> (i) Is homeless and lives in a place not meant for human habitation, a safe haven, or in an emergency shelter; and (ii) Has been homeless and living or residing in a place not meant for human habitation, a safe haven, or in an emergency shelter continuously <u>for at least one year or on at least four separate occasions in the last three years that total 12 or more months.</u> (iii) Can be diagnosed with one or more of the following conditions; substance use disorder, serious mental illness, developmentally disability, PTSD, cognitive impairments resulting from brain injury, or chronic physical illness or disability. <p>2. An individual who has been residing in an institutional care facility, including a jail, substance abuse or mental health treatment facility, hospital, or other similar facility for fewer than 90 days and met all of the criteria in paragraph 1 of this definition, before entering that facility; or</p> <p>3. A family with an adult HoH (or if there is no adult in the family, a minor HoH) who meets all of the criteria in paragraph 1 of this</p>	<p>“1-Literally Homeless”</p>	<p>“Yes”</p> <p>For Families the HoH must meet iii (disability).</p>	

		definition, including a family whose composition has fluctuated while the HoH has been homeless.			
	At Risk of Homelessness	<p>An individual or family who:</p> <ul style="list-style-type: none"> (i) Has an annual income below 30% of median family income for the area, as determined by HUD; (ii) does not have sufficient resources or support networks, e.g., family, friends, faith-based or other social networks, immediately available to prevent them from moving to an emergency shelter or another place described in category paragraph 1 of the homeless definition. (iii) Meets one of the following conditions: <ul style="list-style-type: none"> a. Has moved because of economic reasons 2 or more times during the 60 days immediately preceding the application for homelessness prevention assistance; b. Is living in the home of another because of economic hardship; c. Has been notified in writing that their right to occupy their current housing or living situation <u>will be terminated within 21 days</u> of the date of application for assistance; d. Lives in a hotel or motel and the cost of the hotel or motel stay is not paid by charitable organizations or federal, State, or local government programs for low-income individuals; e. Lives in a SRO or efficiency apartment unit in which there reside more than 2 persons, or lives in a larger 	<p>“2-Imminent Risk” if eviction is 15 to 21 days and i and ii, or i, ii, and at least one iii.</p> <p>3-Unstably Housed (eviction > 21 days) and no other condition under iii.</p> <p>or 4-Stably Housed if does not meet i, ii, and iii.</p>	<p>“No”</p>	<p>For ESG all category 2 and 3 are Homeless Prevention</p>

		<p>housing unit in which there reside more than 1.5 people/room, as defined by the US Census bureau;</p> <p>f. Is exiting a publically funded institution or system of care (such as health-care facility, a mental health facility, foster care or other youth facility, or correction program or institution); or</p> <p>g. Otherwise lives in housing that has characteristics associated with instability and increased risk of “homelessness”, as identified in the recipient’s approved consolidated plan;</p> <p>2. A child or youth who does not qualify as “homeless” under this section, but qualifies as homeless under sections 387(3) see rule page 53 (Runaway and Homeless Youth, Head Start, Public Health, VAWA, Food & Nutrition, or Child Nutrition Acts); or</p> <p>3. A child or youth who does not qualify a homeless under this section, but qualifies a homeless under section 725(2) of the McKinney-Vento Homeless Assistance Act, and the parent(s) or guardian(s) of that child or youth if living with her or him.</p>	<p>If child or youth meets definition under 2 or 3 then “2-Imminent Risk”</p>		
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Appendix D

2017 MSHMIS Operating Policies and Procedures

rev. 2017.11.08 DRAFT



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Revision History:

Revision Date	
November, 2016	First Release of Policy Rewrite
November, 2017	Second Release, Edits for Compliance with the 2017 HUD Data Standards Revisions and Coordinated Assessment Requirements. Replaced all references to Bowman Systems with Mediware Information Systems

2017 Michigan Statewide Homeless Management Information System (MSHMIS) Operating Policies and Procedures

The purpose of an HMIS project is to:

- Record and store client-level information about the numbers, characteristics and needs of persons who use homeless housing and supportive services.
- To produce an unduplicated count of persons experiencing homelessness for each Continuum of Care
- To understand the extent and nature of homelessness locally, regionally and nationally
- To understand patterns of service usage and measure the effectiveness of projects and systems of care.

These are the minimum standards of operation for the MSHMIS Project. CoCs may elect to implement more rigorous standards as agreed upon by their local CoC. **The following operating policies and procedures apply to all designated HMIS Lead Agencies and participating agencies in Michigan. (Contributing HMIS Organizations – CHOs).**

Key Terms and Acronyms:

Term	Acronym (if used)	Brief Definition
42 CFR Part 2 Administrative Qualified Services Organization Business Associates Agreement	Part 2 Admin QSOBAA	42 CFR Part 2 is the federal regulation governing the confidentiality of drug and alcohol use treatment and prevention records. The regulations are applicable to certain federally assisted substance use treatment programs limiting the use and disclosure of substance use patient records and identifying information. The agreement signed by each CHO, the local HMIS Lead Agency, MCAH and MSHDA that governs the privacy standards for participants that can see data from multiple organizations.
Balance of State CoC	BOS	MSHDA/MHAAB have organized local planning bodies/jurisdictions throughout Michigan that make up the “Balance of State” IJ. These groups have historically been called Balance of State CoCs as they are organized like Independent Jurisdictions with many of the same rules, however they have no legal status with HUD.
By-Name List	BNL	A By-Name List is a list of persons experiencing homelessness within a specific jurisdiction. By-Name Lists can be comprehensive, meaning they include all homeless persons, or focused, meaning they contain persons with certain subpopulation, (ex. chronic or veteran), or prioritization characteristics. By-Name Lists are frequently used within collaborative multi-partner meetings known as case conferencing sessions to link appropriate homeless persons with housing opportunities that best meet their needs. ⁱ
Continuum of Care Contributing HMIS Organizations	CoC	Planning body charged with guiding the local response to homelessness.
Coverage Rate	CHO	An organization that participates on the HMIS. Coverage rate refers to the percentage of the homeless population in a geographic area that is measured on the HMIS, divided by the total number

Department of Health and Human Services Emergency Services Project	DHHS ESP	of homeless persons in that geographic area. Coverage estimates are used to project a total homeless count if there are homeless service providers in a jurisdiction that do not participate in MSHMIS. (These may include persons served in Domestic Violence Providers or other non-participating Shelters or Outreach Projects.) See the MSHMIS Coverage Memo for guidance. The ESP project combines DHHS general fund funds and TANF dollars designated for homeless services, primarily sheltering. The dollars are managed through the Salvation Army and require HMIS participation.
Family and Youth Services Bureau	FYSB	A division of the Department of Health and Human Services, the Family and Youth Services Bureau provides federal resources to address homelessness among youth. ⁱⁱ
The Health Insurance Portability and Accountability Act of 1996	HIPAA	The Health Insurance Portability and Accountability Act of 1996, particularly the Privacy Rule under Title II, regulates the use and disclosure of Protected Health Information (PHI) held by covered entities and business associates. HIPAA is the base operational privacy rule on which the MSHMIS privacy rule is structured.
Housing Assessment and Resource Agencies	HARAs	Michigan has implemented HARAs across the state to serve as coordinated points of entry for homeless persons. HARAs work with other service providers to ensure that access to homeless resources is optimized and based on assessment of need.
Homeless Definition		<p>See Homeless Definition Crosswalk.</p> <p>The HEARTH Act defines 4 categories of homelessness. Not all projects can serve all categories and some may utilize a different definition when delivering services. MSHMIS has adopted the HUD definition for counting persons experiencing homelessness.</p> <ul style="list-style-type: none"> • Category 1: Literally Homeless • Category 2: Imminent Risk of Homelessness • Category 3: Homeless under other Federal Statutes • Category 4: Fleeing/Attempting to Flee DV
Homeless Management Information System	HMIS	A data system that meets HUD’s HMIS requirements and is used to measure homelessness and the effectiveness of related service delivery systems. The HMIS is also the primary reporting tool for HUD homeless service grants as well as for other public streams of funding related to homelessness.
Housing Inventory Chart	HIC	The HIC Chart is where all residential projects (both HMIS participating and non-participating) specify the number of beds and units available to homeless persons within a jurisdiction. The numbers are recorded in the agency’s HMIS provider pages, (for MSHMIS participating projects), or in “shell” provider pages for non-HMIS participating agencies.
Housing Opportunities for Persons with AIDS Independent Jurisdiction CoCs	HOPWA	Lead by the Michigan Department of Health and Human Services, HOPWA provides housing assistance and related supportive services for persons with HIV/AIDS, and family members who are homeless or at risk of homelessness. This project has different project reporting requirements than the other HUD funded projects in this document.
Joint Governance Charter	IJs	CoCs that are recognized by HUD and are usually organized around higher population counties.
Length of Stay	LOS	The Agreement between Michigan’s IJ CoCs and MSHMIS that supports a statewide HMIS operating in a single system environment. The number of days between the beginning of services and the end of services. It is calculated using entry and exit dates or shelter stay dates. MSHMIS offers calculations for discrete stays as well as the total stays across multiple sheltering events.

Local Planning Body	<p>Within the Balance of State CoC (MI-500), there are further subdivisions of leadership responsibility at local levels. While these groups were traditionally called “CoCs” within the Michigan Campaign to End Homelessness, they are not “true” CoCs from a HUD perspective. Therefore, these local partnerships that are responsible for overseeing many of the same tasks that a CoC board/collaborative body are now called Local Planning Bodies.</p>
Local Planning Jurisdiction	<p>A Local Planning Jurisdiction is the geography covered by a Local Planning Body in the Balance of State. Local Planning Jurisdictions usually consist of one or more counties from a regional perspective, and are designed to provide a local presence for Balance of State work.</p>
The Michigan Campaign to End Homelessness	<p>CTEH</p> <p>The Michigan Campaign to End Homelessness is a statewide partnership between MSHDA, MDHHS, MCAH, MDVA, the Salvation Army, and a broad coalition of regional and local partners. The CTEH exists to provide coordinated leadership for initiatives to prevent and end homelessness within the State of Michigan.</p>
Michigan Department of Health and Human Services Michigan Homeless Assistance Advisory Board	<p>MDHHS</p> <p>The Michigan Department of Health and Human Services oversees a wide range of health, public welfare and resource initiatives throughout the State of Michigan. It was formed in 2015 from the merger of the Department of Community Health (DCH) and the Department of Human Services (DHS). The BOS CoC Governance Board. The Statewide HMIS project reports to MHAAB.</p>
Michigan State Housing Development Authority	<p>MSHDA</p> <p>MSHDA is the grantee for the Statewide HMIS and subcontracts with MCAH for administration of the system.</p>
Participation Agreement	<p>The agreement between MSHMIS participating agencies and MCAH that specifies the rights and responsibilities of MCAH and participating agencies. An annual count, usually in the last week in January that is required for all CoCs. Every other year, the PIT Count must include an “unsheltered” or street count.</p>
Point in Time Count	<p>PIT</p> <p>PATH is funded by the Substance Abuse and Mental Health Services Administration (SAMHSA) and administered by the Michigan Department of Health and Human Services. It provides services to mentally ill homeless people, primarily through street outreach, to link them to permanent community housing. This project has different reporting requirements than HUD funded projects and uses HMIS to collect this information.</p>
Projects for Assistance in Transition from Homelessness	<p>PATH</p> <p>HUD defines 12 Project Types in HMIS:</p> <ul style="list-style-type: none"> • Coordinated Assessment – A CoC project that coordinates assessment and referrals of persons seeking housing and/or services, and may include the use of a comprehensive and standardized assessment tool. • Day Shelter – A facility/center for persons experiencing homelessness that does not provide overnight accommodations. • ES: Emergency Shelter- Overnight shelters or shelters with a planned length of stay of less than 3 months. • HP: Homeless Prevention- A project that helps those are at imminent risk of losing housing, to retain their housing. • PH: Permanent Supportive Housing- Permanent Supportive Housing is for formerly homeless persons and includes both services and housing. Permanent Supportive Housing requires a disability for entry and often serves persons who are chronically homeless. • PH: Housing Only - Permanent housing that may be supported by a voucher but does not have services attached to the housing.
Project Types	

- PH: Housing with Services (no disability required) – Permanent Housing with services provides both housing and supportive services, but does not require a disability to be served by the project.
- PH: RRH Rapid Rehousing- A project that rapidly rehouses those that are identified as literally homeless.
- SH: Safe Haven - A project that provides low-demand shelter for hard-to-serve persons with severe disabilities. The clients have often failed in other sheltering environments.
- SO: Street Outreach Project- A project that serves homeless persons that are living on the street or other places not meant for habitation.
- SSO: Services Only Project- A project that serves persons only with no residential component. These projects often provide case management and other forms of support and meet with clients in an office, at the client’s home, or in a shelter.
- TH: Transitional Housing- Transitional environments with a planned LOS of not more than 2 years that provide supportive servicesⁱⁱⁱ

Protected Personal Information is a category of sensitive information that is associated with an individual person, and should be accessed only on a strict need-to-know basis and handled and stored with care. In HMIS, all portions of a client record outside of the Client Profile require a Sharing QSOBAA be in place and a client signed release of information before information can be shared.

Protected Personal Information	PPI	A Release of Information comes in two forms, a paper ROI and an electronic ROI. A signed (paper) ROI giving informed client consent for sharing is also required to share data between agencies. An electronic ROI must be completed to share a client’s data on the HMIS.
Release of Information	ROI	Overseen by FSYB, the Runaway and Homeless Youth programs support street outreach, emergency shelter, transitional living and maternity group homes for youth experiencing homelessness ^{iv}
Runaway and Homeless Youth	RHY	Sharing refers to the exchange of client data between agencies. External data sharing requires a Sharing QSOBAA be established between two or more agencies, and a client signed Release of Information authorizing the sharing of that client’s information. Basic data entry does not require an ROI as there is implied consent for the agency to keep records when a client provides information.
Sharing Sharing Qualified Services Organization Business Associates Agreement	Sharing QSOBAA	The Agreement between agencies that elect to share information using the HMIS. The Agreement prevents the re-release of data and, in combination with the Participation Agreement, defines the rules of sharing. Lead by the Michigan Department of Health and Human Services, Shelter + Care provides Permanent Supportive Housing to disabled persons in the State of Michigan and reports on the HMIS.
Shelter Plus Care	S+C	Using the national “best practice” curriculum, the SOAR project, led by Department of Health and Human Services, reduces barriers and supports the application for Social Security Benefits for Michigan’s disabled homeless population.
SSI/SSDI Outreach, Access and Recovery User Agreement & Code of Ethics	SOAR	The document each HMIS user signs that defines the HMIS standards of conduct.
Visibility		Refers to whether or not a provider page can see client data if it has been entered into another provider page. Visibility is configured on the HMIS system in each provider page. Visibility can be configured by individual provider pages or by Visibility Groups.

Visibility Group

A Visibility Group is a defined group of Provider Pages where data is shared to. Internal Visibility Groups control internal sharing within an organization. Internal Visibility is governed by an agency's internal privacy rule. External Visibility Groups control sharing with other agencies and are defined by a Sharing QSOBAA.

Youth (Homeless Youth)

Homeless Youth are youth who lack a fixed, regular or adequate nighttime residence. Depending on the program and funder, the age and definition of youth homelessness varies. Some youth programs serve persons up to 18 years of age, while other definitions consider youth up to the age of 21 or 24. Additionally, the US Department of Education considers youth that are sharing housing due to loss of housing or economic hardship to be homeless for purposes of their programs. ^v

I. POLICIES AND PROCEDURES SUMMARY:

A. Policy Disclaimers and Updates

Operating Procedures defined in this document represent the minimum standards of participation on the MSHMIS project and represent general "best practice" operational procedures. Local HMIS Lead Agencies in coordination with their CoCs may add additional standards to this base document, which govern MSHMIS participation for their local CoC.

Operational standards in this document are not intended to supersede grant specific requirements and operating procedures as required by funding entities. PATH, HOPWA and VA providers have operating rules specific to HHS and VA.

The MSHMIS Operating Policies and Procedures are updated routinely as HUD publishes additional guidance or as part of an annual review. Updates will be reviewed at the MSHMIS monthly System Administrator Call-In and included in the meeting minutes' distribution email. To allow for evolution of compliance standards without re-issuing core agreements, updated policies supersede related policies in any previously published Policies and Procedures document or agreements. Any changes from the previous year will be highlighted. A current copy of the MSHMIS Policies and Procedures may also be found on the MSHMIS website www.mihomeless.org

II. AGREEMENTS, CERTIFICATIONS, LICENSES AND DISCLAIMERS:

CoCs, agencies and users are required to uphold specific rules and responsibilities as participants in the MSHMIS project.

A. Required Agency Agreements, Certifications and Policies

Participating CHOs or other partners on the MSHMIS project must have the following contracts, agreements, policies and procedures available for review:

- 1) All CoCs participating on the MSHMIS must sign a **Joint Governance Charter** that designates the Michigan Statewide HMIS Vendor and identifies the Michigan Coalition Against Homelessness as the Statewide Lead Agency for administration of the statewide database. Each jurisdiction will identify a local Lead Agency that coordinates with the Statewide Agency and is responsible for specific tasks. The Charter supports the ability for multiple jurisdictions to participate on a single HMIS information system.
- 2) All agencies must have the following fully executed documents on file and be in compliance with the policies and directives contained therein:
 - i) An **Administrative QSOBAA** governing administrative access to the system.
 - ii) A **Participation Agreement** governing the basic operating principals of the system and rules of membership.
 - iii) **Sharing QSOBAA's** (if applicable) governing the nature of the sharing and the re-release of data.
 - iv) A board certified **Confidentiality Policy** governing the privacy and security standards for the Agency.
 - v) A board certified **Grievance Policy** outlining a structured process for resolving complaints or grievances within or filed against the organization

B. HMIS User Requirements:

All agencies must have the following documents on file for all active users licensed in the MSHMIS project.

1. A fully executed User Agreement and Code of Ethics document governing the individual's participation in the system.
2. All agencies will have training certificates for active users on file.
 - a. All users are required to take full privacy training when they are first licensed, and take privacy update training at least annually. Successful completion of the certification questionnaire is required for both the full privacy training and the privacy update. Documentation of completion of these trainings are to be available for review.
 - b. All users will complete workflow training, related workflow updates and have documentation of the training completion for all workflows they work with. If local CoCs or Agency Administrators have additional training requirements or offerings, they should have a method for documenting successful completion and have that documentation available at their local agencies for review as needed.
 - c. All users are trained in the HUD Data Standards Universal Data Elements and any Program Specific Elements that apply to the programs they work with. This includes training on both the Homeless Definition and the Chronic Homeless Definition.

4) Agency Administrator Requirements

All agencies participating on the system must have an assigned Agency Administrator.

- a) Training Requirements - Agency Administrators must complete and maintain documentation of the following:
 - a. All trainings required for standard users on the system.
 - b. Provider Page training.

- c. Workflow Training for all workflows used in their agency. This training will be developed by the MSHMIS Project, the funding agency or an agency authorized to train on behalf of the funding agency or MSHMIS.
 - d. Reports Training (agency users and leadership are tasked with supporting data quality as well as monitoring outcome and other performance issues).
 - e. Other training as specified by the CoC.
2. Agency Administrator Participation Requirements – Agency Administrators should participate in the following CoC or agency meetings:
- a. CoC HMIS Agency Administrator meetings and trainings
 - b. Agency specific HMIS user meetings or preside over an HMIS specific topic during routine staff meetings.
 - c. A local Reports Committee that reviews and governs the publication of CoC information.

III. PRIVACY:

A. Privacy Statement

MSHMIS is committed to making the project safe for participating agencies and the clients whose information is recorded on the system.

Toward that end:

- Sharing is a planned activity guided by sharing agreements between agencies (Sharing QSOBAAs). Agencies may elect to keep private some or all of the client record including all identifying data.
- All organizations will screen for safety issues related to the use of automation.
- MSHMIS has systematized the risk assessment related to clients through the standard MSHMIS release. The standardized release offers options for the use of a client’s Social Security number. It also provides guidance on using unnamed records and how the Privacy Notice is explained to clients.
- MSHMIS has adopted a Privacy Notice (with minor modifications) that was developed in close collaboration with providers that manage information that may put a client at risk.
- The MSHMIS system is compliant with HIPAA, and all Federal and State laws and codes. All privacy procedures are designed to ensure that the broadest range of providers may participate in the project.
- Privacy Training is a requirement for all agencies and users on the MSHMIS system.
- We view our privacy training as an opportunity for all participating organizations to revisit and improve their overall privacy practices. Many agencies choose to have all of their staff complete the MSHMIS training curricula – not just those with user access to the system.
- All users issued access to the system must sign a User Agreement & Code of Ethics form, and agencies must sign a MSHMIS Participation Agreement. Taken together, these documents obligate participants to core privacy procedures. If agencies decide to share information, they must sign an agreement that defines their sharing and prevents re-release of information to unauthorized third parties (the Sharing QSOBAA).

- Policies have been developed that protect not only a client’s privacy, but also an agency’s privacy. Privacy practice principles around the use and publication of agency or CoC specific data have been developed and included in both the Participation Agreement and this HMIS Policies and Procedures document.
- The MSHMIS System allows projects with multiple components/locations that serve the same client to operate on a single case plan. This reduces the amount of staff and client time spent in documentation of activities and ensuring that care is coordinated and messages to clients are reinforced and consistent.
- MSHMIS has incorporated continuous quality improvement training designed to help agency administrators use the information collected in the HMIS to stabilize and improve project processes, measure outcomes, report to funders, and be more competitive in funding requests.

B. Privacy and Security Plan:

All records entered into and downloaded from the HMIS are required to be kept in a confidential and secure manner.

Oversight:

- 1) All Agency Administrators with support of agency leadership must¹:
 - a) Ensure that all staff using the system complete annual privacy and security training. Training must be provided by MSHMIS Certified Trainers and based on the MSHMIS Privacy/Security Training curricula.
 - b) Conduct a quarterly review of their provider page visibility, ensuring that it properly reflects any signed Sharing QSOBAAs.
 - c) Modify their adapted Release of Information, and script used to explain privacy to all clients, for any privacy changes made. These documents should also be audited quarterly to ensure they are compliant with current sharing agreements.
 - d) Ensure user accounts are removed from the HMIS when a staff member leaves the organization, or when changes to a staff member’s job responsibilities eliminate their need to access the system.
 - e) Report any security or privacy incidents immediately to the CoC’s HMIS Local System Administrator. The Local System Administrator must investigate the incident within one business day, by running applicable audit reports, and by contacting MCAH staff for assistance with the investigation. If the System Administrator determines that a breach has occurred, and/or the staff involved violated privacy or security guidelines, the client record(s) in question must be immediately locked down and the Local System Administrator will submit a written report to the MSHMIS Project Director and CoC Chair within two business days. A preliminary Corrective Action Plan will be developed and implemented within five business days. Components of the plan must include at minimum supervision and retraining. It may also include removal of HMIS license, client notification if a breach has occurred, and any appropriate legal action.^{vi}

¹ In lieu of revised Technical Standards, in 2015 the requirement for a privacy officer was removed. However, the function of data security has been assigned to the Agency Administrator. Reflecting Participation Agreement language, the quarterly review of Provider Visibility has been expressly added to this document.

- 2) Criminal background checks must be completed on all Local System Administrators by the Local Lead Agency. All agencies should be aware of the risks associated with any person given access to the system and limit access as necessary. System access levels should be used to support this activity.
- 3) The CoC HMIS Lead Agency will conduct routine audits of participating agencies to ensure compliance with the Operating Policies and Procedures. The audit will include a mix of system and on-site reviews. The CoC HMIS Lead Agency will document the inspection and any recommendations made, as well as schedule follow-up activities to identify any changes made to document compliance with the Operating Policies and Procedures.

Privacy:

- 1) Any agency that is subject to the Violence Against Women Act restrictions on entering data into an HMIS are not permitted to participate in the MSHMIS project. These providers will maintain a comparable database to respond to grant contracts and reporting requirements.^{vii}
- 2) All agencies are required to have the **HUD Public Notice** posted and visible to clients in locations where information is collected.
- 3) All Agencies must have a **Privacy Notice**. They may adopt the MSHMIS sample notice or integrate MSHMIS language into their existing notice. All Privacy Notices must define the uses and disclosures of data collected on HMIS including:
 - a) The purpose for collection of client information.
 - b) A brief description of policies & procedures governing privacy including protections for vulnerable populations.
 - c) Data collection, use and purpose limitations. The Uses of Data must include de-identified data.
 - d) The client right to copy/inspect/correct their record. Agencies may establish reasonable norms for the time and cost related to producing any copy from the record. The agency may say “no” to a request to correct information, but the agency must inform the client of its reasons in writing within 60 days of the request.²
 - e) The client complaint procedure
 - f) Notice to the consumer that the Privacy Notice may be updated over time and applies to all client information held by the Agency.
- 4) All Notices must be posted on the Agency’s website.
- 5) All Agencies are required to have a **Privacy Policy**. Agencies may elect to use the Sample Privacy Policy provided by the MSHMIS project. All Privacy Policies must include:
 - a) Procedures defined in the Agencies Privacy Notice
 - b) Protections afforded those with increased privacy risks such as protections for victims of domestic violence, dating violence, sexual assault, and stalking. Protections include at minimum:
 - i) Closing of the profile search screen so that only the serving agency may see the record.
 - ii) The right to refuse sharing if the agency has established an external sharing plan.
 - iii) The right to be entered as an unnamed record, where identifying information is not recorded in the system and the record is located through a randomly generated number

² Language was added to clarify the HIPAA rule.

(note: this interface does allow for unduplication because the components of the unique Client ID are generated)

- iv) The right to have a record marked as inactive.
- v) The right to remove their record from the system.
- c) Security of hard copy files: Agencies may create a paper record by printing the assessment screens located within the HMIS. These records must be kept in accordance with the procedures that govern all hard copy information (see below).
- d) Client Information storage and disposal: Users may not store information from the system on personal portable storage devices. The Agency will retain the client record for a period of seven years, after which time the forms will be discarded in a manner that ensures client confidentiality is not compromised.
- e) Remote Access and Usage: The Agency must establish a policy that governs use of the system when access is approved from remote locations. The policy must address:
 - i) The use of portable storage devices with client identifying information is strictly controlled.
 - ii) The environments where use is approved. These environments are not open to public access and all paper and/or electronic records that include client identified information are secured in locked spaces or are password controlled.
 - iii) All browsers used to connect to the system must be secure. If accessing through a wireless network, that network must be encrypted and secured. **No user is allowed to access the database from a public or none-secured private network such as an airport, hotel, library, or internet café.**
 - iv) Access via a cellular network using 4G LTE or similar access is permitted if the connection is protected and encrypted. This permits users to access MSHMIS from cell phones, tablet devices or personal hotspots. If broadcasting a hotspot signal, the device must have a passcode or other security measures to restrict general access.
 - v) All computers accessing the system are owned by the agency.
- 6) Agencies must protect **hard copy data** that includes client identifying information from unauthorized viewing or access.
 - a) Client files are locked in a drawer/file cabinet.
 - b) Offices that contain files are locked when not occupied.
 - c) Files are not left visible to unauthorized individuals.
- 7) The agency provides a **Privacy Script** to all staff charged with explaining privacy rights to clients which standardize the privacy presentation. The script must:
 - a) Be developed with agency leadership to reflect the agency's sharing agreements and the level of risk associated with the type of data the agency collects and shares.
 - b) The script should be appropriate to the general education/literacy level of the agency's clients.
 - c) A copy of the script should be available to clients as they complete the intake interview.
 - d) All agency staff responsible for client interaction will be trained in use of the Privacy Script.
- 8) Agencies that plan to share information through the system must sign a **Sharing QSOBAA** (Qualified Services Organization Business Associates Agreement).
 - a) The Sharing QSOBAA prescribes the re-release of information shared under the terms of the agreement.
 - b) The Sharing QSOBAA specifies what is shared with whom.

- c) Agencies may share different portions of a client record with different partners, and may sign multiple Sharing QSOBAAs to define a layered sharing practice.
 - d) The signatories on the Sharing QSOBAA must be representatives who are authorized to sign such an agreement by senior agency leadership and/or the Agency Board of Directors.
 - e) All members of a Sharing QSOBAA are informed that by sharing, they are creating a common electronic record that can impact data reflected in reports. Members of the sharing group agree to communicate and negotiate data conflicts.
 - f) No agency may be added to the agreement without the approval of all other participating agencies.
 - i) Documentation of that approval must be available for review and may include such items as meeting minutes, email response or other written documentation.
 - ii) Agency approval of additions or changes to a Sharing QSOBAA must be approved by a staff member with authorization to make such decisions on behalf of their agency.
 - g) When a new member is added to the Sharing QSOBAA, the related Visibility Group in the system is end-dated and a new Visibility Group is begun. **A new member may not be added to an existing Visibility Group.**
- 9) Agencies must have appropriate **Release(s) of Information** that are consistent with the type of data the agency plans to share.
- a) The agency has adopted the appropriate MSHMIS Basic Release of Information that is applicable to their sharing practice to share basic demographic and transactional information.
 - b) If the agency integrates the MSHMIS Release into their existing releases, the release must include the following components:
 - i) A brief description of MSHMIS including a summary of the HUD Public Notice.
 - ii) A specific description of the Client Profile Search Screen and an opportunity for the client to request that the screen be closed.
 - iii) A listing of the Agencies sharing partners (if any) and a description of what is shared. These sections must reflect items negotiated in the agency's Sharing QSOBAA.
 - iv) A defined term of the Agreement³.
 - v) Interagency sharing must be accompanied by a negotiated and executed Sharing QSOBAA.
 - vi) If an agency is subject to stricter privacy laws (ex. 42 CFR Part 2), that only permit external sharing between a subset of their provider pages, all provider pages within that agency that will be sharing must be listed on any Sharing QSOBAAs that agency is a party of. Visibility cannot be added to new projects within such an agency without adding those provider page(s) to the sharing QSOBAA.
 - c) A HIPAA compliant **Authorization to Release Confidential Information** is also required if the planned sharing includes any of the following:
 - i) Case notes/progress notes

³ The change reflects changes in the HIPAA rule that allow for Releases the cover a term – rather than a specific date. The date in the electronic ROI will reflect the specific date defined by the term. The term should not be arbitrary but reflect the anticipated term of the agencies planned coordinating activities.

- ii) Information or referral for health, mental health, HIV/AIDS, substance use disorders, or domestic violence.
- iii) To streamline paper, the basic HMIS Release may be adapted to include the language necessary for a HIPAA compliant release if sharing practice is likely to include the items above in ii.⁴

10) An **automated ROI** is required to enable sharing of any particular client's information between any provider pages on the system.

- a) Agencies should establish **Internal Visibility**^{viii} or sharing between only their agency's provider pages, by creating visibility group(s) that include all the agency's provider pages where sharing is planned and allowed by law.
 - (1) Internal Visibility does not require a signed Client Release of Information unless otherwise specified by law. (However, an electronic release must still be entered in the system to permit Internal Visibility.)
 - (2) Unless otherwise specified by law, when new provider pages are added to the Agency tree, they may be included in the existing internal visibility group. The information available to that Provider Page will include all information covered by the visibility group from the beginning date of the Group – sharing will be retroactive.
- b) Agencies may elect to share information with other agencies, a practice known as **External Sharing**, by negotiating a Sharing QSOBAA (see 8 above).
 - (1) A signed and dated Client Release of Information must be stored in the Client Record (paper or scanned onto the system) for all Automated ROIs that release data between different agencies.
 - (2) Retroactive Sharing, or sharing historic information between two or more agencies without client consent is not permitted on the system. To prevent retroactive sharing, a new visibility group is constructed whenever a new sharing partner is added to the agency's existing sharing plan/Sharing QSOBAA.
- c) MCAH has defined a procedure for pulling a client's housing history across the entire database to verify a client's eligibility for specific housing options. This procedure requires that:
 - i) Consent for obtaining the client's housing history is written into the agency's Outreach Sharing Plan of their Release of Information, and the client has agreed to permit this activity by initialing this section.
 - ii) An electronic copy of the signed Release of Information including the client authorization to release the housing history has been attached to the client record on the system.
- d) Client information entered in HMIS may be used to create **By-Name Lists** and in **Prioritization Meetings** provided that:^{ix}
 - i) The client provides written consent to participate in a By-Name List and/or Prioritization process. Consent for participating in this process is built into the current version of MCAH Release of Information, under the Outreach Sharing Plan.

⁴ Recognizes existing practice by participating CoCs.

- ii) Information that a client authorizes to be discussed within the Prioritization/By-Name List process may only be discussed directly at those meetings, and not re-released back to agencies, unless a separate release/Sharing QSOBAA exists releasing that information.
- 11) The Agency must have a procedure to assist clients that are hearing impaired or do not speak English as a primary language. For example:
- a) Provisions for Braille or audio
 - b) Available in multiple languages
 - c) Available in large print
- 12) **Agencies are required to maintain a culture that supports privacy.**
- a) Staff do not discuss client information in the presence of others without a need to know.
 - b) Staff eliminate unique client identifiers before releasing data to the public.
 - c) The Agency configures workspaces for intake that supports the privacy of client interaction and data entry.
 - d) User accounts and passwords are not shared between users, or visible for others to see.
 - e) Project staff are educated to not save reports with client identifying data on portable media as evidenced through written training procedures or meeting minutes.
 - f) Staff are trained regarding use of email communication, texting, file sharing and other electronic means of transferring data related to client services.
 - i) By-name housing lists may not be printed with client identifying information without written client consent.

Data Security:

- 1) All licensed Users of the System must be assigned **Access Levels** that are consistent with their job responsibilities and their business “need to know”.
- 2) All computers have **network threat protection software with automatic updates.**
 - a) Agency Administrators or designated staff are responsible for monitoring all computers that connect to the HMIS to insure:
 - i) The threat protection software is up-to-date.
 - ii) That various system updates are automatic, unless a specific, documented reason exists to maintain an older version of the software.
 - iii) Operating System updates are run regularly.
- 3) All computers are protected by a firewall.
 - a) Agency Administrators or designated staff are responsible for monitoring all computers that connect to the HMIS to ensure:
 - i) For single computers, the software and versions are current.
 - ii) For networked computers, the firewall firmware is current.
- 4) Physical access to computers that connect to the HMIS is controlled.
 - a) All workstations are in secured locations (locked offices).
 - b) Workstations are logged off when not manned.
 - c) All workstations are password protected.
 - d) **All HMIS Users are prohibited from using a computer that is available to the public.**
- 5) A **Plan for Remote Access** must exist if staff will be using the MSHMIS System outside of the office such as working from home. Concerns addressed in this plan should include the privacy surrounding off-site access.

- a) The computer and environment of entry must meet all the standards defined above.
- b) Downloads to the computer may not include client identifying information.
- c) Staff must use an agency-owned computer.

Remember that your information security is never better than the trustworthiness of the staff you license to use the system. The data at risk is your own and that of your sharing partners. If an accidental or purposeful breach occurs, you are required to notify MCAH. A full accounting of access to the record can be completed.

IV. DATA BACKUP AND DISASTER RECOVERY PLAN:

The HMIS is a critically important tool in responding to catastrophic events. The HMIS data is housed in a secure server bank in Shreveport, Louisiana with nightly off-site backup. In case of a significant system failure at the main data center, MSHMIS can be brought back online within approximately four hours.

1) Backup Details for MSHMIS

See “Mediware Information Systems Securing Client Data” for a detailed description of data security and Mediware’s Disaster Response Plan

- a) The MSHMIS Project is required to maintain the highest level disaster recovery service by contracting with Mediware Information Systems for Premium Disaster Recovery that includes:
 - i) Off site, out-of state backup on a different Internet provider, and a separate electrical grid.
 - ii) Backups of the application server occur on a regular basis, and align with the current version of the live MSHMIS site.
 - iii) Near-instantaneous backups of the MSHMIS database (information is backed up within 5 minutes of entry.)
 - iv) Additional nightly off site replication to protect in case of a primary data center failure.
 - v) Priority level response (ensures downtime will not exceed 4 hours).

2) MSHMIS Project Disaster Recovery Plan:

In the event of a major system failure:

- a) The MSHMIS Project Director or designee will notify all participating CoCs and Local System Administrators should a disaster occur at Mediware Information Systems which affects the functionality and availability of ServicePoint. When appropriate, MCAH will notify Local System Administrators/CoC Leadership of the planned recovery activities and related time lines.
- b) Local/assigned System Administrators are responsible for notifying their local agencies and users.
 - i) If a failure occurs after normal business hours, MSHMIS staff will report the system failure to Mediware Information Systems using their emergency contact line. An email will also be sent to local System Administrators no later than one hour following identification of the failure.

- c) The MSHMIS Project Director or designated staff will notify Mediuware Information Systems if additional database services are required.
- d) The MSHMIS Project will always have one staff member on-call 24/7/365 so agencies and users can report system outages.

3) Local HMIS Lead Agencies:

Local HMIS Lead Agencies within CoCs have an obligation, to secure and backup key information necessary for the administration and functioning of the MSHMIS Project within their own jurisdiction.

- a) HMIS Lead Agencies are required to back-up their internal data system nightly.
- b) Data back-ups will include a solution for maintaining at least one copy of key internal data off-site for their internal data systems. This location will be secure with controlled access.
- c) Local HMIS Lead Agencies must have a disaster recovery plan documented which outlines the policies and procedures for the CoC in case of a major system disaster.
 - i) **Agency Emergency Protocols must include:**
 - (1) Emergency contact information including the names/organizations and numbers of local responders and key internal organization staff, designated representative of the CoCs, local HMIS Lead Agency, and the MSHMIS Project Director.
 - (2) Delegation of key responsibilities. The plan should outline which persons will be responsible for notification and the timeline of notification.
- d) In the event of a local disaster:
 - i) MSHMIS in partnership with the local Lead Agency will work to fill all reasonable requests to provide access to additional hardware and user licenses to allow the CHO(s) to reconnect to the database as soon as possible.
 - ii) MSHMIS in collaboration with the local Lead Agencies will also provide information to local responders as required by law and within best practice guidelines.
- e) MSHMIS in collaboration with the local Lead Agencies will also provide access to organizations charged with crisis response within the privacy guidelines of the system and as allowed by law.

V. SYSTEM ADMINISTRATION:

The position of the Local System Administrator/System Administrator I is key to the success of the CoC. This individual is responsible for overseeing the operation of the MSHMIS project in either a local CoC or a local Planning Body/Jurisdiction. This position will be referred to in this section as a Local System Administrator. The following describes the typical list of responsibilities for a Local System Administrator within a local CoC.

A. Training Requirements for a Local System Administrator:

- a) All trainings required for standard users on the system.
- b) Provider Page training and Workflow Training for all workflows used in their CoC.
- c) Reports Training (Local System Administrators are tasked with supporting data quality as well as monitoring outcome and other performance issues).

- d) System Administrator Training – This training usually takes place several weeks after a new Local System Administrator has been in their position.
- e) Continuous Quality Improvement Training
- f) All System Administrators are required to read and understand the HUD Data Standards that underpin the rules of the HMIS.
- g) HUD Initiative Training (AHAR, PIT, APR, etc.)

B. Meetings Local System Administrators Are Required to Participate In:

- 1. Regular CoC Meetings and/or workgroups as determined by the CoC
- 2. The CoC Reports Committee or meetings where data use and release is discussed.
- 3. The Monthly System Administrator Call-In (3rd Wednesday of every Month at 1pm).
- 4. Regular Agency Administrator/User Meetings within the CoC
- 5. Michigan’s Campaign to End Homelessness work groups and Regional Meetings as assigned.

C. Local System Administrator Responsibilities:

1. Help Desk and Local Technical Support

- a. The Local System Administrator provides front-line technical support/technical assistance for users and agencies within the CoCs they support. This support includes resetting passwords and troubleshooting/problem solving for users and agencies within their CoCs. Where applicable, the Local System Administrator may train Agency Administrators to do fundamental system support activities, minimizing the burden for support on the Local System Administrator.
- b. The Local System Administrator builds relationships within the agencies they serve, working to understand the business practices of these agencies, and assisting them with mapping these business practices onto the system. The HMIS lead staff will be available, on request, to provide advanced technical if requested by the Local System Administrator/Local CoC.

2. User and Provider Page Setup

- a. Local System Administrators will setup new users in NC HMIS, or delegate the task to their Agency Administrators. In the case of delegating this task, they will train Agency Administrators on proper setup of user accounts.
- b. Local System Administrators will supervise license allocation for users and agencies within the CoC they serve. When necessary or requested, the Local System Administrator will purchase additional licenses directly for the CoC.
- c. The Local System Administrator will work in partnership with agencies and Agency Administrators in the CoC they serve to ensure that agency provider pages are setup correctly per the HUD Data Standards.
- d. The Local System Administrator will work directly with Agency Administrators and agencies, through a collaborative process to ensure proper visibility is established for the provider pages in the CoC they serve. The agency, at all times will be directly involved in the visibility process, and will sign off on any visibility changes made.

3. Communication

- a. The Local System Administrator will host regular User/Agency Administrator meetings for users of the system in the CoC they serve. These meetings will cover important news on changes in the system, items of local interest within the CoC, and issues identified by the Local System Administrator within the CoC.
- b. The Local System Administrator will share any key news items of local impact, interest, or relevance to the users and Agency Administrators in the CoC they serve.

4. Training

- a. The Local System Administrator will inform Agency Administrators and local users of required and recommended system trainings that are available through the HMIS Lead training website
- b. The Local System Administrator will provide localized training to CoC users and agencies for issues or items of importance related to the local community. These may include local PIT/HIC training, guidance on local data cleanup, or specific guidance on proper workflow and system usage that are identified through an audit process
- c. The Local System Administrator will provide training for local users on initiatives identified and agreed upon between the the Local System Administrator and the local CoC.

5. HUD Projects and Activities (Including AHAR, PIT/HIC, HMIS APR, SPMs, HUD NOFA):

- a. The Local System Administrator will work directly with CoC leadership to complete CoC wide HUD activities such as the AHAR, PIT/HIC, System Performance Measures and the CoC HUD NOFA submission. The Local System Administrator will also assist the CoC with work surrounding state and local funding initiatives which require data from the HMIS.
- b. The Local System Administrator will assist with completing the HMIS APR for the CoC they serve in.
- c. The Local System Administrator will provide support/technical assistance for agencies completing the CoC APR within their jurisdiction. This will include providing technical assistance with problem solving data quality issues, reporting issues, etc.

6. Local CoC Reporting

- a. The Local System Administrator will be responsible for providing reports to the CoC it serves as the HMIS Lead for regarding requests made by the local CoC for data. These include, but are not limited to:
 - i. CoC wide demographics, performance outcomes, and data quality reports that are used for informational and evaluation purposes
 - ii. Final reports on submissions made to HUD for various HUD mandated activities such as the AHAR, PIT/HIC, SPMs,^x and HMIS APR
 - iii. General requests for data of interest to the local CoC
 - iv. Any additional reporting requirements initiated by HUD that are required of the local CoC.
- b. The Local System Administrator will train local Agency Administrators and users on how to run reports at the agency level for the purpose of monitoring data quality and outcomes on a regular basis in the agencies that it serves.

- c. The Local System Administrator will be responsible for reporting out on activities and expenditures to the Local CoC in which it serves, as directed by the CoC.

7. CoC/Agency/Project Auditing and Monitoring

- a. The Local System Administrator will work with the local CoC to establish local HMIS policies and procedures using the systemwide Policies and Procedures document as a frame. The Local System Administrator will work with local CoC leadership and Agency Leadership/Administrators to update this document as needed.
- b. The Local System Administrator, collaborating with the Agency Administrators in the CoC they serve, will audit agencies and projects to ensure compliance. Audit activities may include, but not be limited to:
 - i. Ensuring the agency has all required contracts, agreements and policies in place for participation on the HMIS
 - ii. Verifying system users have completed all required training for system participation
 - iii. Ensuring provider pages are correctly setup per HUD Standards Guidance
 - iv. Ensuring agencies are following appropriate data entry protocol per the funding sources they receive funding from
 - v. Monitoring implementation of privacy, to ensure client rights are being protected
 - vi. Regularly monitoring data quality, completeness and outcomes to ensure projects are maintaining a high level of compliance with HUD and CoC requirements.

8. Option 1 Balance of State Planning Jurisdictions where MCAH is the Local System Administrator

In Planning Jurisdictions where MCAH serves as the Local System Administrator, MCAH will serve as the key agency performing the technical tasks of the Local System Administrator.

However, the local Planning Body is responsible for:

- a. The Local Planning Body will designate a local person within the community to serve as the lead point of contact for HMIS initiatives in the Local Planning Jurisdiction
- b. The Local Planning Body is responsible for performing an annual PIT Count as specified by MHAAB. This count will be conducted on the ground by local leadership. Additionally, data entry of all PIT/HIC information into MSHMIS is the responsibility of the Local Planning Body.
- c. Leadership within the Local Planning Body is responsible for all federal, state and local level grant applications and reporting. The LSA assigned to the community from the MCAH staff will assist with any data/reporting pulls as needed.

9. Option 2 Balance of State Planning Jurisdictions with their own Local System Administrator
Local System Administrators in a Local Planning Jurisdiction are responsible for the same duties of a Local System Administrator in a HUD CoC.

(Note: Completion of these tasks are the responsibility of both the HMIS Lead (the Local System Administrator) and the agencies which participate on the system in the local CoC. The Local System Administrator can create a policy under which local agencies are responsible for monitoring themselves, and instructing them on application of that policy. The Local System Administrator can then assist

agencies with implementing the policy locally to ensure compliance. The HMIS Lead has released a series of tools to help local HMIS Leads with the process of developing compliance tools.)

VI. DATA QUALITY PLAN AND WORKFLOWS:

D. Provider Page Set-Up:

1. Provider Page are appropriately named per the MSHMIS naming standards **Agency Name – Location (CoC Name) – Project Name – Project Funding Descriptors**.
For example: The Salvation Army – Marquette Alger CoC – Hotel Voucher Project – ESP. Identification of funding stream is critical to completing required reporting to funding organization.
2. Operating Start Dates are appropriately entered on provider pages and reflect when the project began offering housing and/or services. If the project began operating before October 1, 2012 and the exact start date is not known, the start date may be estimated (set to a date prior to October 1, 2012)^{xi}
3. Inactive Provider Pages are properly identified with “XXX Closed” followed by the year of the last project exit >Provider Page Name. For example XXXClosed2017.
 - a. Close all clients in inactive/closed provider pages. Audit of inactive pages includes closing all open services and incomes and exiting all unexited clients.
4. The primary provider contact information reflects where the services are being delivered.
5. HUD Data Standards are fully completed on all Provider Pages:
 - a. CoC code is correctly set. If a project stops functioning in the CoC, the appropriate end date will be added to the CoC Code Entry.
 - b. Project type codes are correctly set
 - c. If a project is an Emergency Shelter, the Method for Tracking Emergency Shelter Utilization field is correctly set. If a project is not an Emergency Shelter, this field is left null or “-Select-“
 - d. Geocodes are set correctly
 - e. The Continuum Project field is properly completed.
 - f. If a project is HOPWA, RHY, PATH or SSVF, the Provider Grant Type is correctly filled out.
 - g. Bed and Unit Inventories are set for applicable residential projects. Bed and Unit Inventories for all projects should be reviewed at least annually, and updated as needed.
 - h. Federal Partner Funding Source values are selected if a project is funded by one of the Federal Partners. Federal Partner Funding Sources are to be updated at least annually. If a project is not funded by a Federal Partner Funding Source, the option selected is NA.
 - i. Assessments with the appropriate 3.917 Living Situation question are assigned based on Program Type
 - i. Emergency Shelter, Street Outreach or Safe Haven projects use 3.917a.
 - ii. All other project types use 3.917b.

E. Data Quality Plan:

1. Agencies must require documentation at intake of the homeless status of consumers according to the reporting and eligibility guidelines issued by HUD. The “order of priority” for obtaining evidence of homeless status are (1) third party documentation, (2) worker observations, and certification from the person. Lack of third party documentation may not be used to refuse emergency shelter, outreach or domestic violence services. Local CoCs may designate the local HARA’s to establish the homeless designation and maintain related documentation.
2. 100% of the clients must be entered into the System within 15 days of data collection. If the information is not entered on the same day it is collected, the agency must assure that the date associated with the information is the date on which the data was collected by:
 - a. Data is entered into the system using the Enter Data As function.
 - b. Entering the entry/exit data including the UDEs on the Entry/Exit Tab of ServicePoint or
 - c. Backdating the information into the System⁵
3. All staff are required to be trained on the definition of Homelessness.⁶
 - a. MSHMIS provides a homeless definition crosswalk and 3.917 flowchart to support agency level training.
 - b. There is congruity between the following MSHMIS case record responses, based on the applicable homeless definition. (Elements to HUD Data Standard Element 3.917a or 3.917b are being properly completed).
4. The agency has a process to ensure the First and Last Names are spelled properly and the DOB is accurate.
 - a. An ID is requested at intake to support proper spelling of the client’s name as well as the recording of the DOB.
 - b. If no ID is available, staff request the legal spelling of the person’s name. **Staff should not assume they know the spelling of the name.**
 - c. Projects that serve the chronic and higher risk populations are encouraged to use the scan card process within ServicePoint to improve un-duplication and to improve the efficiency of recording services.
 - d. Data for clients with significant privacy needs may be entered under the “unnamed record” feature of the system. However, while identifiers are not stored using this feature, great care should be taken in creating the unnamed algorithm by carefully entering the first and last name and the DOB. Names and ServicePoint ID number crosswalks (that are required to find the record again) must be maintained off-line in a secure location.
5. Income, non-cash benefits and health insurance information are being updated at least annually and at exit, or at the frequency specified by program requirements.^{xii}
 - a. For Permanent Housing Projects, the Housing Move-In Date is completed on an update when the client moves into housing.^{xiii}
 - b. Annual Reviews will be completed in the 30 days prior to the anniversary of the client’s entry into services.

⁵ Clarification of existing policy.

⁶ Specific instruction is available for PATH and HOPWA projects at www.dyns-services.com

- c. For PH projects with long stays, at the annual review, incomes over two years old must be updated by closing the existing income and entering a new income record (even if the income has not changed). This assures that the income has been reconfirmed and will pull properly into reports.
 - d. For all other projects, any income(s) no longer available to the client should be closed for the day before intake (shared data from another provider), annual review and exit. If the income is over two years old please follow the procedure defined above.⁷
6. Agencies have an organized exit process that includes:
- a. Clients and staff are educated on the importance of planning and communicating regarding discharge. This is evidenced through staff meeting minutes or other training logs and records.
 - b. Discharge Destinations are properly mapped to the HUD Destination Categories.
 - i. MSHMIS provides a Destination Definition document to support proper completion of exits. All new staff must have training on this document.
 - ii. Projects must have defined processes for collecting this information from as many households as possible.⁸
 - c. There is a procedure for communicating exit information to the person responsible for data entry if not entering real time.
7. Agency Administrators/staff regularly run data quality reports.
- a. Report frequency should reflect the volume of data entered into the System. Frequency for funded projects will be governed by Grant Agreements, HUD reporting cycles, and local CoC Standards. However, higher volume projects such as shelters and services only projects must review and correct data at least monthly. Lower volume projects such as Transitional and Permanent Housing must run following all intakes and exits and quarterly to monitor the recording of services and other required data elements including annual updates of income and employment.⁹
 - b. The project entry and exit dates should be recorded upon project entry or exit of all participants. Entry dates should record the first day of service or project entry with a new project entry date for each period/episode of service. Exit dates should record the last day of residence before the participant leaves the shelter/housing project or the last day a service was provided.
 - c. Data quality screening and correction activities must include the following:
 - i. Missing or inaccurate information in (red) Universal Data Element Fields.
 - ii. The Relationship to Household assessment questions is completed.
 - iii. The 3.917 Living Situation series of questions are completed.
 - iv. The 3.16 Client Location question is completed
 - v. The Domestic Violence questions are completed

⁷ Reflecting the 2015 data quality review of client income, staff are being asked to close any incomes that are more than two years old and to enter a new income with the income review process and to prevent the further accumulation of open old incomes to add closing of the income to the routine discharge processes.

⁸ Data indicates that some providers have regressed in completing discharge destination in the last year and accurately completing this field is vitally important to succeeding. Beyond data entry issues, projects must define processes that collect this information from as many households as possible.

⁹ Additional detail was added for low volume environments that are required to annually update income and employment.

- vi. HUD Verifications are completed on all Income, Non Cash Benefits, Health Insurance and Disability sub-assessments.
- vii. The Residential move-in-date is completed for all PH: RRH projects.
- viii. All project specific data elements are completed as required by the various funding sources supporting the project.
- d. Providers are auditing unexited clients in the system using the Length of Stay and unexited Client Data Quality Reports.
- 8. CoCs and Agencies are required to review Outcome Performance Reports/System Performance Measures reports defined by HUD and other funding organizations. Measures are based on Project Type. The CoC Lead Agency, in collaboration with the CoC Reports Committee or other designated CQI Committee, establishes local benchmark targets for performance improvement on shared measures.
- 9. MSHMIS publishes regional benchmarks on all defined measures annually.
- 10. Agencies are expected to participate in the CoCs Continuous Quality Improvement Plan. See CQI materials designed to support Data Quality through Continuous Quality Improvement.

C. Workflow Requirements:

- 1. Assessments set in the Provider Page Configuration are appropriate for the funding stream.
- 2. Users performing data entry have latest copies of the workflow guidance documents.
- 3. If using paper, the intake data collection forms correctly align with the workflow.
- 4. 100% of clients are entered into the system within 15 days of intake.
- 5. Agencies are actively monitoring project participation and exiting clients. Clients are exited within 30 days of last contact unless project guidelines specify otherwise.
- 6. All required project information is being collected.¹⁰
 - a. All HMIS participants are required to enter at minimum the Universal Data Elements.
 - b. Projects that serve clients over time are required to complete additional updates as defined by the funding stream. If the Agency is not reporting to a funding stream, they are encouraged to use the Michigan Update form.

VII. RESEARCH AND ELECTRONIC DATA EXCHANGES

F. Electronic Data Exchanges:

- 1. Agencies electing to either import or export data from the MSHMIS must assure:
 - a. **Data Import** - The quality of data being loaded onto the System meets all the data quality standards listed in this policy including timeliness, completeness, and accuracy. In all cases, the importing organization must be able to successfully generate all required reports including but not limited to the CoC APR, the ESG CAPER, or other required reports as specified by the funder.
 - b. **Data Export** - Agencies exporting data from MSHMIS must certify the privacy and security rights promised participants on the HMIS are met on the destination system. If

¹⁰ PATH, HOPWA and VA projects use project entry forms that correspond to the data collection requirements of those projects. For PATH and HOPWA, please contact www.dyns-services.com

- the destination System operates under less restrictive rules, the client must be fully informed and approve the transfer during the intake process. The agency must have the ability to restrict transfers to those clients that approve the exchange.
2. MSHDA/MCAH or your local CoC may elect to participate in de-identified research data sets to support research and planning.
 - a. De-identification will involve the masking or removal of all identifying or potential identifying information such as the name, Unique Client ID, SS#, DOB, address, agency name, and agency location.
 - b. Geographic analysis will be restricted to prevent any data pools that are small enough to inadvertently identify a client by other characteristics or combination of characteristics.
 - c. Projects used to match and/or remove identifying information will not allow a re-identification process to occur. If retention of identifying information is maintained by a “trusted party” to allow for updates of an otherwise de-identified data set, the organization/person charged with retaining that data set will certify that they meet medical/behavioral health security standards and that all identifiers are kept strictly confidential and separate from the de-identified data set.
 - d. CoCs will be provided a description of each study being implemented. Agencies or CoCs may opt out of the Study through a written notice to MCAH or the study owner.
 3. MSHDA/ MCAH or your local CoC may elect to participate in identified research data sets to support research and planning.
 - a. All identified research must be governed through an Institutional Research Board including requirements for client informed consent.
 - b. CoCs will be provided a description of each Study being implemented. Agencies may opt out of the study through a written notice to MCAH or the study owner.

APPENDIX A: DOCUMENT CHECKLIST FOR MSHMIS AGENCIES

All agencies that participate on the MSHMIS project are required to keep either a physical or electronic binder containing each of the following fully executed documents.

Contracts, Agreements, Policies and Procedures

- Fully Executed Joint Governance Charter:** (Only the HMIS and/or CoC Lead Agency is required to maintain this document.)
- HMIS Policies and Procedures Document for the CoC:** (Only the HMIS and/or CoC Lead Agency is required to maintain this document. It must have been formally approved by the CoC as evidenced by CoC meeting minutes.)
- Administrative QSOBAA:** Fully signed and executed
- Participation Agreement:** Fully signed and executed
- Sharing QSOBAAs:** (Only necessary if the agency has engaged in external sharing). Document should be fully signed and executed. If any changes have been made to a Sharing QSOBAA written documentation and approval of those changes by all parties must be included also.
- Confidentiality Policy:** (Approved by Agency Board)
- Grievance Policy:** (Approved by Agency Board)

MSHMIS User Documentation

- User Agreement and Code of Ethics Document:** Fully initialed and signed. A User Agreement and Code of Ethics document must be on file for all users currently licensed on MSHMIS. It is recommended that the User Agreement and Code of Ethics documents for employees no longer at the agency be kept with their separated employee file
- User Training Documentation/Certification:** Documentation of all MSHMIS trainings completed by active users are to be kept in the MSHMIS binder. These trainings are to be certified by either MCAH, a certified MCAH trainer, other identified statewide trainers or CoC identified trainers for CoC initiatives. Evidence of training include training completion certificates, successfully passed training quizzes, training logs, etc.

Agency Privacy Documents

- HUD Posted Public Notice:** HUD Public Notices should be posted in locations where clients are seen.
- Agency Privacy Notice:** Agencies can adopt the sample MCAH Notice or customize to address agency needs.
- Agency Privacy Policy:** Agencies can adopt the sample MCAH Policy or customize to address agency needs.
- Current Agency Privacy Script:** That's been developed and approved by agency leadership.
- Current Agency Release of Information:** Including all sharing partners and sharing outreach plan as applicable.

APPENDIX B: End Notes of Key Changes for 2017

The following reflects changes to the 2017 MSHMIS Operating Policies and Procedures document

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- ⁱ Added definition for 2017
 - ⁱⁱ Added definition for 2017
 - ⁱⁱⁱ Updated list of project types
 - ^{iv} Added definition for 2017
 - ^v Added definition for 2017
 - ^{vi} Added specific language and timetables defining the length of time for conducting an investigation and who is responsible for what elements.
 - ^{vii} Numbering was continued from the previous section to maintain sectional integrity.
 - ^{viii} Updated language from Internal Sharing to Internal Visibility throughout Article IIIB Section 10a which better describes the relationship of internal agency data.
 - ^{ix} Section III.B.13.d was added to provide a baseline for By-Name Lists and Prioritization processes for CoCs, in implementing their Coordinated Entry Plans.
 - ^x Added to reflect the addition of System Performance Measures to the list of CoC required reports
 - ^{xi} Added to reflect changes to the 2017 HUD Data Standards.
 - ^{xii} Added Health Insurance and Disabilities to items included on the update
 - ^{xiii} Added to reflect changes to the 2017 HUD Data Standards

Appendix E: HMIS Comparable Database

This section provides that the purpose of HMIS is to record and store client-level information about the numbers, characteristics, and needs of homeless persons and those at risk of homelessness. This section also clarifies the scope of homeless assistance and prevention programs that must utilize HMIS.

With respect to scope, this rule clarifies that all recipients of financial assistance under the Continuum of Care program, the Emergency Solutions Grant program, the Rural Housing Stability Assistance (RHS) program, as well as HUD programs previously funded under the McKinney-Vento Act (the Supportive Housing Program, the Shelter Plus Care program, and the Section 8 Single Room Occupancy Moderate Rehabilitation program) are required to use HMIS to collect client-level data on persons served. Homeless and non-homeless projects not funded under the McKinney-Vento Act may participate in the local HMIS, and must follow HMIS regulations and any additional requirements as may be issued by notice, in accordance with the Paperwork Reduction Act.

Under this rule, a comparable database means a database used by a victim service provider or a legal service provider that collects client-level data over time and generates unduplicated aggregate reports based on the data, in accordance with the requirements of this part. Information entered into a comparable database must not be entered directly into or provided to an HMIS.

Consistent with section 401(32) of the McKinney-Vento Act, this rule defines the term *victim service provider* as a private nonprofit organization whose primary mission is to provide services to victims of domestic violence, dating violence, sexual assault, or stalking. This term includes rape crisis centers, battered women's shelters, domestic violence transitional housing programs, and other programs.

This section establishes that the Continuum of Care is responsible for making decisions about HMIS management and administration. As provided in the Definition section of this rule, Continuum of Care means the group composed of representatives of organizations, including nonprofit homeless providers, faith-based organizations, governments, businesses, advocates, public housing agencies, school districts, social service providers, mental health agencies, hospitals, universities, affordable housing developers, and law enforcement, that serve homeless and formerly homeless veterans, and homeless and formerly homeless persons that carry out the responsibilities delegated to a Continuum of Care under HUD's regulations in 24 CFR part 578. The Continuum of Care is responsible for ensuring that the HMIS for the Continuum of Care is operated in accordance with the provisions of the new regulations and other applicable laws.

Duties of the Continuum of Care

This section provides that the Continuum of Care must designate a single information system as the official HMIS software for the geographic area. A single information system reduces administrative burden, is more economical for Continuums and, most importantly, allows for Continuum-wide collaboration between organizations serving homeless persons and persons at risk of homelessness. The Continuum must also designate the HMIS Lead. Homeless Action Network of Detroit (HAND) has been designated as the HMIS Lead. The HMIS Lead must be an instrumentality of state or local government, or a private nonprofit organization. The Continuum must review, revise, and approve all policies and plans the HMIS Lead is required to develop. Finally, the Continuum must develop a governance charter and document all assignments and designations consistent with the governance charter.

This section also provides that a Continuum of Care may choose to participate in HMIS with one or more other Continuums of Care. To create a multi-Continuum HMIS, each Continuum must designate the same HMIS software and the same HMIS Lead and must adopt a joint governance charter. The HMIS must be capable of reporting unduplicated data for each Continuum of Care separately.

Duties of the HMIS Lead

This section lists the duties of the HMIS Lead. These duties include developing written policies and procedures for all Covered Homeless Organizations (CHOs), executing an HMIS participation agreement with each CHO, serving as the applicant to HUD for any HMIS grants that will cover the Continuum of Care geographic area, and monitoring compliance by all CHOs of the Continuum of Care.

Carrying Out HMIS Activities

This section requires recipients and subrecipients of McKinney-Vento Act program funds to participate in the HMIS established by the Continuum of Care for their geographic area and specifies the parameters in which recipients and subrecipients of funds carry out eligible HMIS activities. Participation in HMIS by recipients and subrecipients of Emergency Solutions Grants program funds is statutorily required.

This section also provides that victim service providers must not directly enter or provide data into an HMIS if they are legally prohibited from participating in HMIS and that legal service providers may choose not to use HMIS if it is necessary to protect attorney-client privileges. Victim service providers and legal service providers that are recipients of funds requiring participation in HMIS, but which do not directly enter data into an HMIS, must use a comparable database. This section specifies the standards for a comparable database. Victim service providers have been prohibited from entering data into HMIS since the passage of the Violence Against Women Act and Department of Justice Reauthorization Act of 2005 (42 U.S.C. 13925). The *Notice of Allocation, Application Procedures, and Requirements for Homelessness Prevention and Rapid Re-Housing Program Recipients and subrecipients under the American Recovery and Reinvestment Act of 2009* (HPRP Notice) established, for the first time, standards for a comparable database and required victim service providers to enter data into a comparable database. Entering data into a comparable database was necessary to produce

the reports required by the Homelessness Prevention and Rapid Re-Housing Program (HPRP). The HPRP Notice also established the ability for legal service providers to use a comparable database instead of directly entering data into the HMIS where it is necessary to protect attorney-client privileges. HUD is proposing to adopt above requirements in this rule because without information from victim service providers and legal service providers, the collaborative applicant cannot effectively carry out its required duties and the Continuum of Care cannot evaluate the system-wide performance of the Continuum. A comparable database allows the collaborative applicant and Continuum to obtain the aggregate data needed while respecting the sensitive nature of the client-level information if it complies with all HMIS data, technical, and security standards as established in this part or by notice.

Appendix F: HAND Letter of Support Policy

Policy Title	Policy for Providing a Letter of Support for Projects (excluding Low Income Housing Tax Credits (LIHTC) Projects)
Date Developed/Revised	February 19, 2015/April 9, 2015/November 20, 2016
Date Adopted by Detroit CoC Board of Directors	January 9, 2017
Signed (Detroit CoC Board Chair)	Meghan Takashima

Purpose

The purpose of the Detroit Continuum of Care (CoC)'s Letter of Support Policy is to set the policy and guidelines the Detroit CoC will use regarding writing letters of support for existing or new projects which provide housing and/or services to individuals or families who are experiencing homelessness or at-risk of homelessness in the Detroit Continuum of Care (cities of Detroit, Highland Park, and Hamtramck).

Background

Each year, the Detroit CoC receives numerous requests for letters of support from agencies that provide housing and/or services to people experiencing homelessness in the cities of Detroit, Highland Park, and Hamtramck. The Detroit CoC is establishing this policy for providing a letter of support to ensure it has the necessary information about the agency and project to evaluate whether the project meets the objectives of the Detroit Continuum of Care and to ensure it has the appropriate amount of time to compose an effective letter of support for the proposed project. As the CoC Lead Agency, the Homeless Action Network of Detroit (HAND) has been authorized by the Detroit CoC to carry out the following:

- Receive the requested letter of support
- Review submitted materials for letter of support
- Produce the letter of support on the CoC Lead Agency letterhead, signed by the CoC Lead Agency Executive Director

Process to Request a Letter of Support

The agency requesting the letter should provide the following materials at least 7 business days prior to the date that they need the letter (letters of support will not be provided if 7 business days' notice is not given) to the Homeless Action Network of Detroit:

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- **Cover Letter:** A cover letter, which may be in the form of an email, from the agency's Executive Director (*or other applicable staff*) requesting the letter of support which includes the amount funding being applied for as well as the funding source;
 - **One-Page Project Description:** A brief one-page description of the project which includes:
 - explanation of the need for the project,
 - a description of how the project anticipates participating in the Coordinated Assessment Model (if applicable),
 - project details including the program and service delivery model being used, the location of the project, target population and the number of persons to be served, the number, type (i.e. PSH units), and configuration (i.e. 1 bedroom apartment) of housing units or beds
 - expected project outcomes
 - expected operation date of the project;
 - **Project Budget:** A budget which includes the amount and sources for all supportive services;
 - **Sample Letter of Support:** A sample letter of support for the project, for the CoC to use at its discretion. The sample letter should be in the form of a Word document

Please include the contact information for the person who should be contacted in case HAND staff has questions about the project or the requested letter of support. A decision about the letter of support requests will be sent to the contact indicated.

If an agency is requesting an updated letter of support within six months of the original letter and there are no significant changes to the project, the agency may proceed to step two. Significant changes include changes to partners, population, unit mix (type, configuration, amount), location, services provided, and funding sources.

Additional Considerations

- **HMIS Certification:** The Homeless Management Information System (HMIS) is a critical component of our Continuum of Care. Therefore, HAND strives to ensure accurate and complete data quality. If the agency and/or its partner(s) enter data into HMIS, the following data quality standards must be met for all programs/projects within the agency at the time of request in order to receive the letter of support:
 - At least 90% of **universal data elements** is completed for all clients.
 - Less than 25% of clients have an unknown destination when being exited from emergency shelters, transitional housing programs, supportive service only programs, and rapid rehousing programs. (This standard is not applicable for seasonal warming centers.)
 - The number of active clients in HMIS programs (per the APR) is not more than 105% of the number of clients on the Housing Inventory Chart for the AHAR Point-In-Time dates for October, January, April and July. Exceptions to this standard, when appropriate, may be granted at the discretion of HAND staff.

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- Agency Administrators attend the majority of Agency Administrator meetings.
 - **Written Standards:** Projects receiving a letter of support are expected to align with the [Detroit Homeless System Written Standards](#).
 - **HMIS:** Data will be entered into the Homeless Management Information System (HMIS) in accordance with the HMIS Policies & Procedures and as applicable to your type of project
 - **Coordinated Assessment Model (CAM):** Tenants experiencing homelessness will be selected via the Coordinated Assessment Model (CAM) process ONLY and homelessness and chronicity (if applicable) will be verified by the Detroit CoC HARA.
 - Receipt of a letter indicates the agency's commitment to following up with the Detroit CoC via the CoC Lead Agency (HAND) within 10 business days of award notice. For residential projects, an agency should also follow up at least 90 calendar days prior to leasing up. Such communication should be directed to the Homeless Action Network of Detroit.