

**Alameda County Continuum of Care/
EveryOne Home Governance Charter**

*Approved by the EveryOne Home Leadership Board on
10/26/2018 and ratified by the EveryOne Home membership
on 10/29/2018*

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I. Overview and Purpose

EveryOne Home is a [collective impact](#) initiative founded in 2007 to facilitate the implementation of Alameda County, California’s plan to end homelessness, known as the *EveryOne Home Plan*. In 2018, EveryOne Home updated that Plan now known as the Strategic Plan Update: Ending Homelessness in Alameda County. This Update recommends strategies and actions to reduce homelessness so that in five years no person without a permanent home would need to sleep outside. To reach our goal we will need an engagement of stakeholders well beyond the homeless and housing service delivery system.

We will not change the trajectory of homelessness in our community with the current pace and scale of our response. It will take bold, coordinated action and significantly increased investment to reduce the number of people becoming homeless each year and increase the number of people returning to a home. By greatly increasing and focusing our investments and aligning our public policies, we have the best chance of achieving our goal.

We are building a future in which there are sufficient resources, political leadership, and community involvement to erase homelessness as a permanent fixture in our social landscape. The vision focuses on

- 1) Preventing Homelessness;
- 2) Ensuring Safer and more dignified conditions for those experiencing homelessness; and
- 3) Increasing Permanent Homes

This Governance Charter memorializes how stakeholders will govern the collective impact initiative to end homelessness, meet the federally-defined responsibilities of operating a HUD Continuum of Care as found in the [Continuum of Care Program Rule at §578 and its related HUD rules, regulations and notices](#) (see under Section XI), direct the work of the backbone organization, and promote partnership and accountability among the various leadership bodies. This Governance Charter replaces two documents previously adopted by the EveryOne Home Leadership Board: first, the “*Leadership Board Governance Policies*” adopted December 4, 2008, and second, the “*Alameda County Continuum of Care Interim Governance Charter*” adopted on August 28, 2014. An organizational chart depicting the relationships amongst the various leadership bodies in the collective impact initiative may be found in **Appendix A**.

II. Continuum of Care Membership/Collective Impact Initiative

Summary: Continuum of Care members are persons who have joined in the collective impact initiative to end homelessness in Alameda County. They are members of EveryOne Home and provide

input and vote as individuals, not as representatives of a particular organization, geography or constituency. Membership meetings and activities are staffed by EveryOne Home organizational staff.

A. Continuum of Care Membership Roles and Responsibilities

The Governance Charter assigns the following roles and responsibilities to the Continuum of Care Membership:

1. Hold a minimum of two meetings per year of the full membership, one of which will be the Annual Meeting.
2. Extend an open public invitation for new members to join. Ensure that an updated membership roster is maintained.
3. Adopt and follow the written process for selecting one (1) member to the EveryOne Home Leadership Board.
4. Adopt and follow the written process for selecting three (3) members of the HUD CoC Committee, who will act on behalf of the Continuum as outlined by this Governance Charter.
5. Hold annual elections to fill vacant seats on the Leadership Board and on the HUD CoC Committee.
6. Update the Leadership Board and HUD CoC Committee selection policies no less than every five years.
7. Ratify the initial Governance Charter and approve the annual updates as developed and recommended by the HUD Continuum of Care Committee and approved by the Leadership Board.
8. Utilize the Governance Charter to delegate certain responsibilities (detailed below) for operating the Continuum of Care, designating and operating an HMIS, and Continuum of Care planning to the HUD Continuum of Care Committee, its sub-committees and workgroups, the Continuum of Care Lead Agency (EveryOne Home), the HMIS Lead and the collaborative applicant.
9. Generate ideas and provide strategic input to Leadership Board, HUD Continuum of Care Committee, other committees, workgroups and staff for the annual work plan; systems change and improvements to be explored, designed or implemented; and updates needed to the Governance Charter.

B. Continuum of Care Membership

Membership will be open to any individual interested in and committed to ending homelessness in Alameda County, California. Persons will join, provide input, and vote as individuals, not as representatives of a particular organization, geography or constituency. Persons can attend meetings and provide input but must become members to vote.

To become a member an individual will complete a brief application (available on-line or on paper) with contact information and the opportunity to indicate their experience/relationship to the collective impact initiative's work (i.e. person with lived experience, advocate, non-profit or local government employee, geographic area of the county, type of organization, local government, etc.). This information will be collected by the Continuum of Care Lead to understand who is joining the Initiative/CoC.

EveryOne Home, the backbone organization, will maintain and update the roster.

C. Continuum of Care Membership Meetings

The Continuum of Care will host no less than two community meetings for the full membership. One will serve as the Annual Meeting and the second will serve to update the membership on work plan implementation, system change initiatives and system performance. Additional meetings may be convened as needed throughout the year.

During the Annual Meeting, the following actions will be taken:

1. Invite new members to join the Continuum.
2. Hold elections to fill one (1) CoC membership representative seat on the EveryOne Home Leadership Board.
3. Hold elections to fill open CoC membership representative seats on the HUD CoC Committee. Initially elections will be held for all three seats and then staggered so that one seat per year is up for election. If a representative leave before the end of his/her term that seat will also be filled through election at the annual meeting.
4. Vote on recommended changes to the Governance Charter.
5. Generate ideas and provide strategic input for the Leadership Board and the CoC Committee.

D. Membership Voting

Decisions will be passed by the majority present at a meeting.

E. Continuum of Care Membership Committees

Committees and workgroups can be established as needed. Membership and selection process will be determined at the time a workgroup is established.

F. Procedure for Selection of Members to the EveryOne Home Leadership Board and the HUD CoC Committee

Elections for seats on the EveryOne Home Leadership Board and the HUD CoC Committee will be held at the Annual Meeting.

Nominations will be invited through a public notice at least thirty (30) days prior to the Annual Meeting. Candidates for the elected seats (one to the Leadership Board and one of the three to the HUD CoC Committee) can be nominated by other CoC members, board members or themselves. Nominees will complete a brief application from which the EveryOne Home staff will produce a ballot of all nominees. Candidates can be nominated from the floor of the Annual Meeting and the ballot will include a space for write-in candidates. If not already a CoC member at the time of nomination, nominees must join the CoC to be elected to the Leadership Board and the HUD CoC Committee.

Open elected seats will be filled by the top vote getters and results will be tabulated at the Annual Meeting. In the case of a tie, the membership will vote again to determine the electee.

III. Leadership Board

Summary: The body leading the EveryOne Home collective impact initiative. It is staffed by EveryOne Home organizational staff.

A. Leadership Board Roles and Responsibilities

The Governance Charter assigns the following responsibilities to the Leadership Board and/or its committees and work groups.

1. Determine desired population results; adopt and promote broad strategies to end homelessness in Alameda County.
2. Adopt population indicators and system performance measures and benchmarks.
3. Adopt standards of care and guiding principles.
4. Adopt an annual work plan for implementing the Strategic Plan Update and achieving its benchmarks and track progress.
5. Collaborate to find resources and expand partnerships to achieve results.
6. Establish guidelines and resource recommendations for a coordinated housing crisis resolution system that meets HUD CES expectations and ensure it is contributing to desired results.
7. Seek strategic input and ongoing involvement from the EveryOne Home membership.
8. Adopt communications strategies to inform and engage stakeholders on collective impact efforts.
9. Adopt Governance Charter changes for ratification by EveryOne Home membership.

10. Recruit and approve committee members with set membership; members proposed by ad-hoc nominating committee.

B. Leadership Board Membership

The Leadership Board will include high-level staff members (e.g. agency or department heads or organizational directors) who are also members of the larger Continuum of Care Membership. The Leadership Board will have a range of 17 to 25 members; three (3) appointed by the HUD CoC Committee, one (1) elected directly by the CoC Membership annually, and the remaining members appointed/recruited by the Leadership Board itself.

In addition to the four seats representing the Continuum of Care general membership and the HUD CoC Committee, the Leadership Board will have representation from organizations as identified in the Interim Final Rule as well as consumers. The Leadership will designate a nominating committee responsible for recruiting remaining open positions. There will be active recruitment if there are gaps needing to be filled.

The Leadership Board will invite the following entities to appoint representatives to serve:

1. Alameda County Community Development Agency (appointed seat)
2. Alameda County Health Care Services Agency (appointed seat)
3. Alameda County Social Services Agency (appointed seat)
4. City of Berkeley (appointed seat)
5. City of Oakland (appointed seat)
6. Veterans Affairs (appointed seat)

The appointed representatives can select a single alternate to attend meetings and vote in their place. Multiple delegates are not allowed.

The nominating committee will recruit members broadly from, but not limited to, the following stakeholder groups.

- Jurisdictions within Alameda County
- School districts
- Law enforcement
- Housing Authorities
- Persons with lived experience of homelessness
- University or other researcher
- Provider organizations

- Housing developers
- Business, philanthropic and faith leaders

The membership of the Leadership Board is intended to represent the geographic, programmatic, and racial diversity of the continuum. Getting the Leadership Board and Committees' membership to more closely reflect the racial make-up of those experiencing homelessness is a priority for recruitment and filling vacancies.

Collective Impact works best when leadership is broadly shared and new leaders are developed within the governance. It is anticipated that different levels of leadership from the same stakeholder groups will want to participate in the collective impact initiative. Therefore, an entity can have representatives participate on separate bodies; for example, an agency may have one person serving as a Leadership Board member while another from that same agency could serve on a committee such as the HUD CoC Committee or the Advocacy Committee. Having multiple individuals participate in the collective impact from partner agencies is preferred to a single individual on multiple committees.

C. Leadership Board Terms

Terms shall be three years and will be staggered such that approximately one-third of seats shall be filled each year. There are no term limits.

D. Leadership Board Officers

The Leadership Board will have two Co-Chairs to serve as its officers. They will be elected by Board members and serve for a term of one year. They are responsible for facilitating the Leadership Board meetings. At least one Chair will serve as Chair of the Organizational Health Committee and one as the convener of the full membership meetings.

E. Leadership Board Meetings

Board meetings will happen no fewer than six times per year and will be open to the CoC members should they wish to observe. Only board members can vote at board meetings with the exception of alternates described under Leadership Board membership. EveryOne Home staff will provide public notice of meeting times and locations.

A quorum is established when at least 50% +1 of the membership attends a Board meeting. Members must attend 75% percent of the meetings annually to be considered members in good standing, which shall be verified by EveryOne Home staff.

F. Leadership Board Voting

For voting matters at the Leadership Board meetings, decisions will be passed by a majority of the members present (50% plus 1).

G. Leadership Board Committees

Committees and workgroups to the Leadership Board will be established as needed. Each committee will develop its own set of annual activities for implementing the Strategic Plan Update and relevant regulatory requirements. Each committee will select a chair(s) to facilitate meeting and ensure progress is reported to the Leadership Board. Membership and selection process will be determined at the time a workgroup is established. Committees will determine whether they will be led by a single Chair or Co-chairs. Committee quorums will be established as follows unless otherwise specified in committee's charter: decisions will be passed by the majority present at a meeting when the membership is open otherwise vote carries at 50% + 1 at meetings with selected memberships. In addition:

- Each committee will develop its own set of annual activities for implementing the broad strategic work plan
- Each committee will select a chair to facilitate meeting and ensure progress is reported to the Leadership Board

Vacancies of selected membership committees will be filled, upon recommendation of a qualified candidate by the Committee Chair(s) and/or Executive Director, and by the affirmative vote of the majority of that committee. A Committee member elected to fill the vacancy shall be elected for the unexpired term of his/her predecessor in office.

Committees with selected memberships, meaning they are seated through election or appointment

1. Organizational Health Committee
2. HUD Continuum of Care Committee and its Sub-Committees
3. Funders Collaborative Committee
4. System Coordination Committee

Committees with open membership, meaning interested persons can join at any time.

5. Advocacy/Policy Committee
6. Results Based Accountability Committee

IV. HUD Continuum of Care Committee

Summary: The Alameda County CoC has designated the HUD Continuum of Care Committee to function as the Continuum of Care Board required by the Interim Rule at [§578.7\(b\)](#) to act on behalf of the membership to ensure the Continuum of Care responsibilities are fulfilled. Those responsibilities include operating a Continuum of Care ([§578.7\(a\)](#)), including, in coordination with recipients of ESG, establishing and operating either a centralized or coordinated assessment system that provides an initial, comprehensive assessment of the needs of individuals and families for housing and services ([§578.\(a\)\(8\)](#)), designating and operating an HMIS ([§578.7\(b\)](#)), Continuum of Care planning ([§578.7\(c\)](#)), including coordinating the implementation of a housing and service system within its geographic area that meets the needs of the homeless individuals (including unaccompanied youth and families ([§578.7\(c\)\(1\)](#)), and preparing an application for Continuum of Care funds ([§578.9](#)). In addition, the HUD CoC Committee is responsible for making decisions about HMIS management and administration under [§580](#), a separate rule establishing regulations for HMIS issued by HUD in the implementation of the HEARTH Act of 2009. For Coordinated Entry, the HUD CoC Committee must also follow the requirements of [HUD Notice: CPD-17-01](#), which establishes additional requirements for a Continuum of Care Coordinated Assessment System.

A. HUD Continuum of Care Committee Roles and Responsibilities

The Governance Charter assigns the following responsibilities to the HUD Continuum of Care Committee:

1. Acts on behalf of the membership to ensure compliance with HUD CoC regulations.
2. Appoint committee/sub-committees or working groups under its purview.
3. Determine costs of complying with HUD mandates.
4. Designate and operate an HMIS system; ensures it meets system performance needs.
5. Facilitates CoC planning to meet regulatory obligations.
6. Recommend annual updates to the Governance Charter.
7. Recommend guiding principles and strategic direction to CoC NOFA Committee based on HUD NOFA guidelines.
8. Design, operate and follow a collaborative process for submitting the CoC application to HUD.
9. Monitor, evaluate, and take action to improve poor performance of CoC funded projects.
10. Evaluate outcomes of ESG and CoC projects and report to HUD.
11. Consult with local government recipients on allocations of ESG funds.
12. Adopt written standards for CoC assistance and ensure compliance.
13. Direct Homeless Count; approve methodology; submit results.
14. Direct an annual gaps analysis.
15. Ensure CoC lead provides information to jurisdictions that submit Con Plans.

The HUD Continuum of Care Committee will delegate a number of these responsibilities to Committees and Workgroups as specified in Section IX.D.

The HUD Continuum of Care Committee will seek and utilize input from the CoC membership to:

1. Develop and recommend annual updates to the Governance Charter when needed.
2. Generate ideas and provide strategic input for the implementation of an annual work plan.
3. Conduct an annual gaps analysis
4. Set annual Strategic Direction to the NOFA Committee for funding projects with Continuum of Care funds.

B. HUD Continuum of Care Committee Membership

This Committee meets the definition of the Board required to be established per the Interim Rule at [§578.5\(b\)](#); and must follow conflict of interest requirements outlined in the Interim Rule at [§578.95\(b\)](#). This Committee could have crossover with the Leadership Board in terms of agencies represented but may include different levels of participation from organizational staff. It is staffed by EveryOne Home and supported by the Collaborative Applicant and HMIS Lead staff as needed.

The HUD CoC Committee will have nine (9) members including six (6) appointed/recruited positions and three (3) elected by the CoC membership.

- The Leadership Board will seat the six members who are not elected by the CoC membership. Interested parties will be invited to submit a written statement indicating their interest in being considered for the Committee; this shall be considered by the Nominating Committee first, then approved by the Leadership Board.
- The CoC membership will seat the three remaining positions on the Committee pursuant to the written policy noted in Section III.C.
- Once the nine-member committee is established, the Committee will designate three of its members to serve on the Leadership Board for a term of 1 year.

The 9 seats will represent the following entities:

1. Two representatives from Alameda County Departments
2. Two representatives from Cities.
3. Two representatives from homeless assistance providers.
4. Two persons with lived experience.
5. One at-large representative.

C. HUD CoC Committee Terms

Terms shall be for three (3) years. There are no term limits and terms are staggered. Members of the committee shall be selected annually by the Leadership Board per the recommendation of the nominating committee.

D. Subcommittees to the HUD CoC Committee

Sub-committees and workgroups will be established as needed. Membership and selection process will be determined at the time a workgroup is established. Committee quorums will be established as follows unless otherwise specified in committee's charter: decisions will be passed by the majority present at a meeting when the membership is open otherwise vote carries at 50% + 1 at meetings with appointed memberships.

1. The NOFA Committee conducts the annual HUD Competition local rating and ranking process for projects seeking Continuum of Care funds. Integrates funding priorities and strategic direction from the HUD CoC. Approves projects for submission to HUD. Members cannot be employed by or related to someone who is employed by a non-profit or government department who is a recipient of CoC or Emergency Solutions Grants (ESG) funds. Members are selected through an application process and approved by the HUD CoC Committee.
2. The Appeals Panel reviews appeals made by CoC Project applicants to the local competition's rating and ranking list following the Alameda County HUD CoC Appeals Process established in 2017. Appeals submitted to EveryOne Home are reviewed by a non-conflicted panel consisting of members from each of the following three bodies: Leadership Board, HUD CoC Committee, and NOFA Sub-Committee. Panel members are seated by the HUD CoC Committee for each NOFA round. Panel decisions on appeals are final.
3. HMIS Oversight Sub-committee acts as liaison between the HUD CoC Committee and the HMIS Lead Agency, with the following responsibilities: Reviews data quality reports and recommends a quality improvement program to the HUD COC Committee, and takes appropriate action to ensure accountability and improved performance per approved program. Ensures compliance with federal requirements. Supports and protects the rights and privacy of service users. Collaborate with the HMIS Lead on all policies the HMIS Lead is required to develop including Privacy, Security, and Data Quality Plans as required by federal regulation. Conducts an annual review of HMIS performance and functionality, using the HMIS work plan to measure progress.

V. Organizational Health Committee

Summary: EveryOne Home is a project of Tides, which serves as EveryOne Home’s fiscal agent. Per Tides’ requirements, EveryOne Home is required to have an Advisory Board that interfaces with Tides on behalf of the organization.

A. Organizational Health Committee Roles and Responsibilities

1. Approve the EveryOne Home staff activities that support the collective impact work plan including ensuring adequate funding and staffing to implement annual work plan established by the Leadership Board.
2. Ensure EveryOne Home the organization meets its contractual and financial obligations.
3. Monitor the fiscal health and operations of EveryOne Home the organization.
4. Serve as Advisory Board for Tides Center.
5. Determine resource development strategies for EveryOne Home the organization.
6. Conduct performance reviews of the Executive Director and succession planning.

B. Organizational Health Committee Membership

Summary: The committee is small in size (3-5 members); at least 50% of the members would serve on the Leadership Board to encourage cross-representation from this body to the Leadership Board, but all members of this committee do not necessarily need to serve on the Leadership Board. Individuals who bring some experience and interest in organizational management, financial planning, legal, human resources, etc. would be encouraged to participate. At least one of Leadership Board Co-Chairs will serve on the Organizational Health Committee.

C. Organizational Health Committee Terms

Members of the committee shall be elected annually by the Leadership Board per the recommendation of the nominating committee. Terms shall be for one (1) year and there are no term limits.

VI. System Coordination Committee

Summary: Reviews the performance and operations of the Alameda County Housing Crisis Response System and adopts and recommends improvements.

A. System Coordination Committee Roles and Responsibilities

System Coordination Committee is delegated certain responsibilities of the HUD COC Committee that require the coordination and implementation of a housing and service system within its geographic area, including the responsibility to:

1. Convene system-wide stakeholders for coordinated planning and improvement of the Housing Crisis Response System
2. Review the performance and operations of the Housing Crisis Response System to determine if they are:
 - Consistent with approved principles, policies, and standards
 - Fair and transparent
 - Compliant with funding regulations
 - Working well and meeting performance benchmarks
3. Adopt and recommend changes to policies, standards, procedures, resources, and tools in order to improve the Housing Crisis Response System
4. Fulfill designated responsibilities of the HUD CoC Committee, including the annual submission of the Housing Crisis Response System Manual and the HUD CE Compliance Review to the HUD CoC Committee for approval
5. Establish and convene subcommittees and working groups to facilitate coordination, effective operations, and on-going improvement

B. System Coordination Committee Membership and Selection

Membership will include up to 17 seats with appropriate representation from users of the coordinated entry system, Continuum of Care Committee, County and City departments, non-profit service providers, community-wide partners of the coordinated system, people with lived experience, and experts in housing crisis systems or related expertise.

C. System Coordination Committee Terms

Members of the committee shall be selected annually by the Leadership Board per the recommendation of the nominating committee. Terms shall be for three (3) years. There are no term limits. In order to establish this system in calendar year 2018, one-third of the committee members will serve a twelve-month term (January-December 2018), one-third will serve a twenty-four month term (January 2018-December 2019), and the remaining third will serve a full three-year term (January 2018-December 2020).

D. Subcommittees to the System Coordination Committee

Sub-committees, ILCs, and Working Groups will be established as needed. Membership and selection process will be determined at the time a group is established. Active groups include: Home Stretch, Operation Vets Home, ILC-Ops, and Communications Working Group.

VII. Results Based Accountability Committee

A. Results Based Accountability Committee Roles and Responsibilities

1. Recommend performance measures and benchmarks.
2. Track, analyze, and report population indicators and system performance measures
3. Recommend dashboard design to Leadership Board.
4. Publish dashboard and other published performance reports, use these tools to engage EveryOne Home membership and committees in turn-the-curve conversations and action planning.
5. Work to integrate data from mainstream systems of care.

B. Results Based Accountability Committee Membership

This committee has an open membership. Interested stakeholders can join at any time. An invitation to join the committee will be issued a minimum of once per year at the annual meeting.

C. Results Based Accountability Committee Terms

The committee does not have terms or term limits.

VIII. Advocacy Committee

Summary: This committee is open to any interested stakeholders. It develops, comments on and advocates for public policies at state federal and local levels that enhance the initiative's ability to end homelessness, particularly by adding funding resources to the effort.

A. Advocacy Committee Roles and Responsibilities

1. Develop an annual advocacy work plan for the Leadership to adopt, including policy development and public education at the local, state and federal levels.
2. Review requests to EveryOne Home to endorse or oppose policies and legislation. Ensure the endorsement policy is followed with regard to items that can be resolved at the Committee level and those requiring a Leadership Board decision.
3. Craft and implement advocacy campaign strategies including outreach to EveryOne Home Stakeholders

B. Advocacy Committee Membership

This committee has an open membership. Interested stakeholders can join at any time. An invitation to join the committee will be issued a minimum of once per year at the annual meeting.

C. Advocacy Committee Terms

The committee does not have terms or term limits.

IX. Funders Collaborative

A. Funders Collaborative Roles and Responsibilities

1. Recommend ways to align local RFPs and contracts with adopted systems standards of care, performance measures and benchmarks
2. Recommend ways to braid funding for common activities in joint or coordinated RFPs
3. Implement joint monitoring protocols
4. Implement joint training/TA for providers
5. Recommend ways to expand available resources to implement strategies

B. Funders Collaborative Membership

This committee has representation from each county department that funds housing and homelessness services. Also, all direct ESG grantees and other cities that fund homeless services.

C. Funders Collaborative Terms

There are no terms for this committee.

X. Standards for Providing Continuum of Care Assistance with the Alameda County Housing Crisis Response System

The Housing Crisis Response System is Alameda County’s overall system of housing services and programs that are coordinated to prevent and end homelessness, including but not limited to:

<ul style="list-style-type: none">▪ Information & Referral▪ Coordinated Entry▪ Homelessness Prevention Services▪ Street Outreach▪ Drop-In Centers	<ul style="list-style-type: none">▪ One-Time Financial Assistance▪ Time-Limited Rental Assistance▪ Tenant Support Services▪ Permanent Subsidized Housing▪ Permanent Supportive Housing
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<ul style="list-style-type: none"> ▪ Housing Resource Centers ▪ Housing Problem Solving Services ▪ Housing Navigation Services ▪ Warming and Seasonal Shelters ▪ Year-Round Shelters ▪ Navigation Centers ▪ Transitional Housing 	<ul style="list-style-type: none"> ▪ Landlord Liaison Services and Incentive Programs ▪ Flexible Housing Subsidies ▪ Housing-Focused Health, Human, Social, and Legal Services ▪ Homeless Management Information System
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The standards of care for the overall Housing Crisis Response System are outlined in the Alameda County Housing Crisis Response System Manual. The purpose of the System Manual is to provide a general overview and description of Alameda County’s system for responding to homelessness and to outline the governance, principles, performance measures, and policies that guide the system. The System Manual is consistent with the EveryOne Home Governance Charter and establishes standards within which funders, participating programs, and other stakeholders conduct planning and oversight, operate services, and evaluate and improve the system. The System Manual also ensures that the Housing Crisis Response System operates in accordance with all Local, State and Federal requirements, including all HUD requirements for Continuums of Care.

The principles guiding the Housing Crisis Response System are:

- Housing First and Low Barrier
- Accessible, Consistent, Transparent, Standardized and Equitable
- Safety, Confidentiality, Resiliency and Choice
- Prioritize the Most Vulnerable
- Commitment to Housing Problem Solving to Prevent and End Homelessness
- Data and Stakeholder Experience to Drive Continuous Improvement

In accordance with Local, State, and Federal requirements and documented in the System Manual, are the standards that the Housing Crisis Response System uses for its Coordinated Entry process. As the front door to Housing Crisis Response System, Coordinated Entry serves the geographic entirety of Alameda County through a network of 2-1-1, Housing Resource Centers, and Outreach Teams to provide an accessible, fair, and transparent way for people experiencing a housing crisis to be connected to housing support. Since there is not enough housing or services for everyone in need, the Coordinated Entry process uses screening, housing problem solving, assessment, and prioritization to match people to any available resources for which they are eligible, and to ensure that the people with the highest needs are prioritized.

Anyone experiencing homelessness or at-risk of homelessness in Alameda County must be able to access Coordinated Entry, be screened, and referred in a timely manner. Coordinated Entry uses the

HUD definitions of literal homelessness and at-risk of homelessness to appropriately screen, prioritize, and refer people to services. This includes specific policies for provision of services for adults without children, families, unaccompanied and transition-aged youth, households fleeing domestic violence, dating violence, sexual assault, stalking, or other dangerous or life-threatening conditions (including human trafficking), Veterans, and households at-risk of homelessness seeking prevention services.

The System Manual includes required policies for determining eligibility and prioritizing which households receive services, as well as, outlines which housing programs and services are accessed through Coordinated Entry prioritization and which are available on an emergency basis. The System Manual also documents established standards for housing services and programs in the Housing Crisis Response System such as outreach, housing navigation, shelter, transitional housing, rapid rehousing, and permanent supportive housing.

All programs must adhere to all non-discrimination and fair housing laws intended to ensure universal and equitable access to Coordinated Entry and the Housing Crisis Response System for all people experiencing homelessness in the County, regardless of race, color, national origin, religion, sex, age, familial status, disability, actual or perceived sexual identity, or gender identity.

Other Standards for Providing Assistance

- Families seeking emergency shelter, transitional housing, and permanent housing from the Continuum will not be denied admission to services or required to separate any from other members based on age, sex or gender when entering shelter or housing.
- All school aged children residing in Continuum programs will be required to register for school within 5 business days during the school year.
- All individuals, families, and youth exiting from Continuum programs to permanent housing, with or without ongoing services, will be encouraged by the current provider to contact them and/or the regional Rapid Rehousing provider should the household's housing become at risk in order to avoid future episodes of homelessness.
- Continuum of providers will screen service users for all mainstream benefits to which they may be entitled and assist them in applying for and securing such benefits, including but not limited to health care, income supports and food assistance.
- Per the 2017 Alameda County CoC LGBT Housing Access Anti-Discrimination Policy, all HUD-funded Homeless Assistance Programs, including but not limited to rental assistance to prevent homelessness, street outreach, emergency, transitional, rapid rehousing and permanent supportive housing, shall not discriminate based upon actual or perceived sexual

orientation, actual or perceived gender identity, or marital status. Programs must determine eligibility for housing regardless of an individual sexual orientation or gender identity, grant equal access to programs or facilities consistent with a person's gender identity, and not require anatomical, documentary, physical, or medical evidence of gender identity. In addition, all HUD-funded Homeless Assistance Programs must take non-discriminatory steps to address privacy concerns based on actual or perceived LGBT status.

XI. Homeless Management Information System (HMIS)

A. Roles and Responsibilities of the Continuum of Care with regards to HMIS

As indicated under Section XI, the CoC must designate a single information system as the official HMIS software for the geographic area, and an HMIS Lead, an entity designated to operate the HMIS. In addition, the CoC is responsible for making decisions about HMIS management and administration as required under [§580](#), a separate rule establishing regulations for HMIS issued by HUD as part of the implementation of the [HEARTH Act of 2009](#). The CoC is responsible for ensuring that the HMIS is operated in accordance with the provisions of these regulations and other applicable laws. While the CoC must review, revise and approve all policies and plans the HMIS Lead is required to develop, the HMIS Lead must develop written policies and procedures for all Covered Homeless Organizations (CHOs), serve as the applicant to HUD for any HMIS grants, and monitor compliance by all CHOs of the CoC. The HUD CoC Committee, acting as the CoC Board, must ensure that the HMIS for the Continuum is operated in accordance with these provisions.

B. Designated HMIS

The Alameda County Continuum of Care establishes and maintains a database system that collects and reports on the universal data elements as required by HUD. The CoC relies upon data collected in the HMIS to understand the extent of homelessness, how well the system is working to address it, and to report CoC performance to HUD. The HMIS also supports the operation of the housing and service system, including the CoC's coordinated entry. HMIS is designed and intended to benefit multiple stakeholders, including persons using homeless and/or at-risk of homelessness-targeted services, provider agencies, jurisdictions, other systems of care, funders and the community. Improved knowledge gained from HMIS about various communities with special needs and their service usage aides with providing a more effective and efficient service delivery system. By community partner agreement, the HMIS database operates as a shared system: permission granted by an individual-served allows for all HMIS-entering Covered Homeless Organizations (CHOs) to have viewership of client level data.

C. Designated HMIS Lead

The HUD CoC Committee has designated the Alameda County Department of Housing and Community Development as the HMIS Lead to operate the HMIS as required under [§580.7](#), assuring the CoC is compliant with all applicable HUD rules and regulations. Because managing the HMIS is a shared responsibility between the CoC and the HMIS Lead, expectations around each entity's role must be agreed and clearly documented, along with any role envisioned for the CoC Board and CoC Lead agency in its relationship to the HMIS. In June of 2018, the HUD CoC Committee and the Alameda County Department of Housing and Community Development have signed a Memorandum of Understanding (Appendix E) that articulates in detail the roles, responsibilities, and accountability that guide this collaboration consistent with this Governance Charter and [§578 and §580](#)).

D. HMIS Lead Roles and Responsibilities

Under the executed Memorandum of Understanding, some of the HMIS Lead agency roles and responsibilities include developing written HMIS policies and procedures for all Covered Homeless Organizations (CHOs); submitting a security plan, a data quality plan, and a privacy policy for CoC approval; provide staffing for HMIS and provide standard and customized reports and technical support to participating agencies in accordance with the mutually adopted customization policies.

The solicitation of user feedback is also a responsibility of the HMIS Lead as it is used to provide recommendations on use of software and software enhancements, trouble-shoot frequent data quality errors, recommend modifications to HMIS staff created reports, and improve CES workflow. Feedback collection is performed using a variety of mechanisms such as online response forms and user groups like the *HMIS User Group*.

In addition, the HMIS Lead and the HUD CoC Committee share several joint responsibilities, including collaborating to design and modify the configuration of HMIS projects to meet program reporting and system analysis needs; analyze system and programmatic data trends; work collaborative to analyze annual reports from HMIS, and establish the HMIS Oversight Sub-Committee, that makes recommendations to the HUD CoC Committee and acts as a liaison between the HUD CoC Committee and the HMIS Lead.

For a more detailed elaboration of the roles and responsibilities of the HMIS Lead, the roles and responsibilities of the HUD Continuum of Care Committee with respect to HMIS, and their Joint Responsibilities, please refer to Appendix E.

XII. Process for responding to the Continuum of Care Notice of Funding Availability

A. The HUD CoC Committee

This Committee, as described under Section IX, functions as the Continuum of Care Board required by the Interim Rule to act on behalf of the membership to ensure the CoC responsibilities are fulfilled, including preparing an application for Continuum of Care funds (Interim Rule [§578.7](#) and [§578.9](#)). Under these Roles and Responsibilities, this Committee will:

1. Recommend guiding principles and strategic direction to CoC NOFA Committee based on HUD NOFA guidelines.
2. Design, operate and follow a collaborative process for submitting the CoC application to HUD.

The HUD Continuum of Care Committee will delegate some of these responsibilities to Committees and Workgroups as specified in Section XII.D. and XII.E.

B. The NOFA Committee

As noted above, the NOFA Committee oversees the local rating and ranking process and approves the projects' applications to be submitted for funding. The Committee will:

1. Integrate funding priorities and strategic direction from HUD CoC Committee.
2. Develop local applications for existing and new projects and scoring criteria in compliance with HUD requirements.
3. Read and score proposals.
4. Approve the final priority list of projects to be included in the CoC application package.

C. The Continuum of Care Lead Agency

According to the HUD-funded Continuum of Care Planning Grant Agreement FY 2018/2019 signed by the Alameda County Board of Supervisors, under Exhibit A, EveryOne Home serves as the Continuum of Care Lead Agency and will:

1. Provide analysis of HUD NOFA, scoring feedback, and other guidance on HUD's funding priorities.
2. Support development of the CoC Committee's strategic direction to the NOFA committee, include requesting and compiling stakeholder input.
3. Support the recruitment, seating and convening of the NOFA Committee and Appeals Panel

4. Develop and refine the local application and scoring criteria, hold bidders' conferences, and manage FAQ's from applicants
5. Score objective elements of the application and support the NOFA Committee and appeals process as needed.
6. Issue Local Rating and Ranking list and manage the writing and submission of the Consolidated Application.
7. Approve all requests for amendments and/or changes to CoC projects that occur outside of the annual review process.

D. The Collaborative Applicant

The Continuum of Care designates Alameda County Department of Housing and Community Development (HCD) as the Collaborative Applicant for Continuum of Care funding. The Collaborative Applicant will:

1. Review, verify and submit the Grants Inventory Worksheet.
2. Register the Continuum of Care following HUD's Registration process
3. Review the budgets and narratives of all Project Applications and facilitate the submission of all Project Applications after they have been rated, ranked and approved by the NOFA Committee.
4. Work with EveryOne Home to complete the Continuum of Care's Consolidated Application.
5. Approve and assist projects with making amendments to their project budgets and other assistance they may need in working with the local HUD field office.
6. Consult the Continuum of Care Lead Agency regarding negotiations with HUD on behalf of projects.

E. The Appeals Panel

The Appeals Panel reviews appeals made by CoC Project applicants to the local competition's rating and ranking list, following Alameda County HUD CoC Appeals Process established in 2017. Panel members are seated for each NOFA round, and the Panel decisions on appeals are final.

XIII. Conflict of Interest Requirements

All Continuum, Leadership Board, and Committee members will abide by [§578.95](#) (Conflicts of Interest) in the Interim Rule. Members of the Organizational Health Committee, Leadership Board and all Selected membership committees will be required annually to sign the Tides Conflict of Interest form. General Continuum Membership, Leadership Board, and all Committee members (both selected and open membership) will disclose potential conflicts when the topics

of funding awards or other financial benefits that could be gained or lost by an organization which they represent as an employee, agent, consultant or board member or their spouse represents are under consideration by the group in which they are participating. If a conflict of interest exists, the member(s) will recuse themselves from the discussion and any related votes that take place.

The Continuum desires that it, and those entities to which it has delegated authority, make informed as well as non-conflicted decisions. The annual gaps analysis, eligibility criteria for who gets served by what resources in the Continuum, prioritization of who gets served, performance targets, etc. are best developed and refined with broad stakeholder input. Funded projects and jurisdictions will not be deemed conflicted in discussions on these topics nor in providing input on local priorities for Continuum of Care Funding and refinements the scoring criteria for projects or the application process. The NOFA Committee will evaluate the merits of the input and will make the final determination on the scoring criteria and application process.

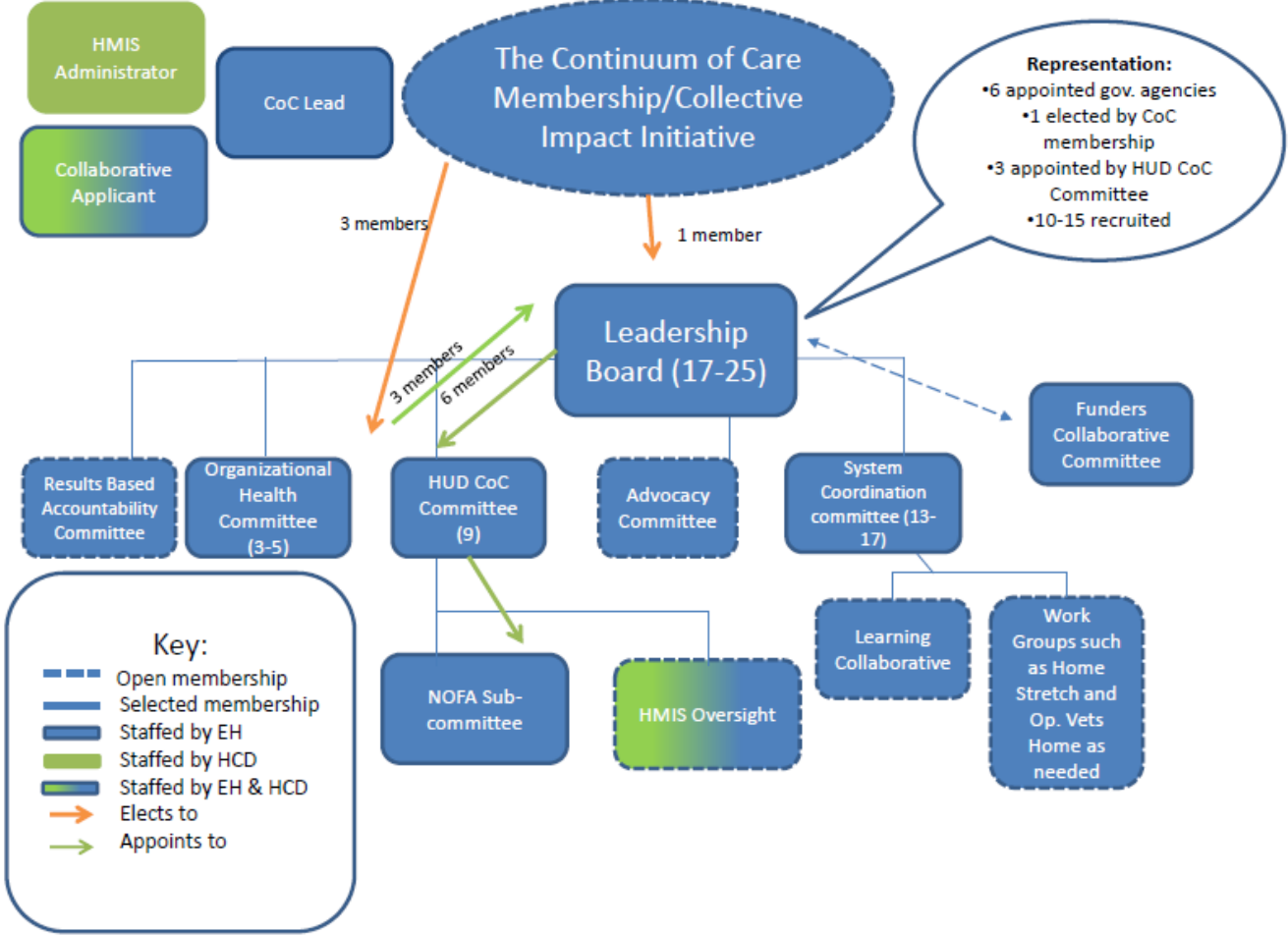
As noted above members of the NOFA Committee cannot be an employee, agent and consultant or board member of or married to someone who is, any non-profit or government department that is a recipient or sub-recipient of Continuum of Care Funding. The same restriction applies to any involvement in the CoC.

XIV. Code of Conduct

Members of the Leadership Board and seated committees are expected to abide by the following code of conduct:

1. Commit to the collective impact mission and the successful implementation of the EveryOne Home Plan, the 2018 Strategic Plan Update, and EveryOne projects and initiatives by working to ensure the collaboration/engagement of your own agency or constituency. This can include marshaling resources and changing policies and practices.
2. Communicate the needs, requirements and hopes of the agency/constituency you represent while building toward consensus and activities that strengthen the entire collective impact effort
3. Express concerns and offer amendments during the discussion and/or public comment period of a proposal/analysis/policy.
4. Appreciate the efforts of partners and staff, and remain open-minded about differing views.
5. Prepare for meetings by reviewing materials in advance.
6. Respond to emails and other requests from staff and colleagues in a timely manner
7. Be an ambassador in the community on behalf of the collective impact effort to end homelessness in Alameda County.

APPENDIX A – Organizational Chart



APPENDIX B --Definition of Terms

NOTE: Some of the terms used in this Governance Charter are from The Homeless Emergency Assistance and Rapid Transition to Housing Continuum of Care Program Interim Final Rule at [24 CFR Part 578](#) (the “Interim Rule”). Those terms are denoted with an asterisk (*). Definitions in the Interim Rule can be found at [§578.3. Subpart B-Establishing and Operating a Continuum of Care](#) of the Interim Rule. The full Interim Rule may be found at [HUD CoC Interim Rule](#).

Additional terms used in this Charter are also noted below.

As used in this Governance Charter:

Backbone Organization means the separate organization and staff that manages the [collective impact](#) initiative through ongoing facilitation, technology and communications support, data collection and reporting, and handling the myriad logistical and administrative details needed for the initiative to function smoothly. EveryOne Home, the organization, is the backbone organization for Alameda County’s initiative to end homelessness. It is also the *Continuum of Care Lead* (defined below).

Centralized or coordinated assessment system means a centralized and/or coordinated process designed to coordinate program participant intake assessment and provision of referrals. A centralized and/or coordinated assessment system covers the geographic area, is easily accessed by individuals and families seeking housing or services, is well advertised, and includes a comprehensive and standardized assessment tool.

Collaborative applicant means the eligible applicant that has been designated by the Continuum of Care to apply for a grant for Continuum of Care planning funds on behalf of the Continuum.

Collective impact means the commitment of a group of important actors from different sectors to a common agenda for solving a specific social problem. Unlike most collaborations, collective impact initiatives involve a centralized infrastructure, a dedicated staff, and a structured process that leads to a common agenda, shared measurement, continuous communication, and mutually reinforcing activities among all participants. EveryOne Home is the name of the collective impact initiative to end homelessness in Alameda County. [Click here to read more on collective impact.](#)

Continuum of Care and Continuum (CoC) means the group organized to carry out the responsibilities required under Interim Rule. In Alameda County the CoC is part of a collective impact effort to end homelessness. It is composed of representatives of organizations including nonprofit homeless providers, victim service providers, faith-based organizations, governments, businesses, advocates, public housing agencies, school districts, social service providers, mental health agencies, hospitals,

universities, affordable housing developers, law enforcement, organizations that serve homeless and formerly homeless veterans, and homeless and formerly homeless persons to the extent these groups are represented within the geographic area and are available to participate. The CoC can delegate its responsibilities to a board/council, and organizations including the CoC Lead, the Collaborative Applicant, and the HMIS Lead to act on its behalf in fulfilling these responsibilities. (*text partially from [§578.3](#).)

Continuum of Care Lead (CoC Lead) is the entity designated by the CoC to coordinate its operations and planning functions, including the submission of the CoC funding application. EveryOne Home, the organization, is both the CoC Lead and the backbone organization (as defined above).

Continuum of Care Members are persons who have joined in the collective impact initiative to end homelessness in Alameda County. They are members of EveryOne Home.

Eligible applicant means a private nonprofit organization, State, local government, or instrumentality of State and local government.

Geographic Area identifies the region(s) within a Continuum of Care. Alameda County's CoC encompasses all 14 cities and the unincorporated County.

Homeless Management Information System (HMIS) means the information system designated by the Continuum of Care to comply with the HMIS requirements prescribed by HUD.

HMIS Lead means the entity designated by the Continuum of Care in accordance with the Interim Rule to operate the Continuum's HMIS on its behalf.

HUD Continuum of Care Committee (HUD CoC Committee)/CoC Board is the name given to the board which the Interim Rule requires the CoC establish to act on its behalf. The Continuum of Care Committee of EveryOne Home is a part of the collective impact effort to end homelessness in Alameda County.

Interim Rule means the Continuum of Care Program Rule [§578](#), published July 31, 2012, which details the requirements for establishing and operating a Continuum of Care. Where needed, this Governance Charter provides citations from the Interim Rule.

Leadership Board means the body leading the EveryOne Home collective impact initiative.

Program participant means an individual (including an unaccompanied youth) or family who is assisted with Continuum of Care program funds.

Project means a group of eligible activities, such as HMIS costs, identified as a project in an application to HUD for Continuum of Care funds and includes a structure (or structures) that is (are) acquired, rehabilitated, constructed, or leased with assistance provided under [the Interim Rule] or with respect to which HUD provides rental assistance or annual payments for operating costs, or supportive services under [the Interim Rule].

Recipient means an applicant that signs a grant agreement with HUD.

Subrecipient means a private nonprofit organization, State, local government, or instrumentality of State or local government that receives a subgrant from the recipient to carry out a project.

APPENDIX C--Applications for Membership to Continuum; Leadership Board; HUD CoC Committee

Application for Leadership Board/Selected Membership Committees

Name _____

Phone 1 _____ Phone 2 _____

Address _____

Email _____

Committee(s) you are interested in joining (includes Leadership Board, HUD CoC Committee, Organizational Health Committee, and HUD NOFA Committee) _____

Relevant Experience and/or Employment (may attach a resume) _____

Why are you interested in EveryOne Home? _____

Area of expertise/contribution you feel you can make? _____

Other volunteer commitments _____

Can be completed and returned by email to Elaine de Coligny at info@everyonehome.org or by fax (510) 670-6378.

Project Conflict of Interest Policy

For Tides Center project directors, project senior staff, and project advisory board members

The 2001 Enron scandal brought about a decline of public trust in accounting and reporting practices. In response, the federal government passed the Sarbanes-Oxley Act to curb corporate abuses; several of the Act's stipulations also pertain to nonprofits. Following the passage of Sarbanes-Oxley, California enacted the Nonprofit Integrity Act, which, among many requirements, mandates signed conflict of interest statements from key employees and board members. Versions of California's act are being considered by a majority of states across the country.

In 2005, Tides Center's auditors' report to management recommended that each of Tides Center's project directors, key management staff, and advisory board members fill out and sign conflict of interest forms annually. Tides Center adheres to this policy to continue our history of transparency and compliance with government regulations, and to help ensure the protection of all projects.

Conflicts of interest arise whenever the personal or professional interests of a project director or an advisory board member are potentially at odds with the best interests of a nonprofit. These conflicts are common, for example, when a board member performs paid, professional services for an organization, or proposes that a relative or friend be considered for a staff position. Such situations are generally acceptable if the transactions benefit the organization and if the advisory board approves the decisions in an objective and informed manner. Even if they do not meet these standards, such transactions are usually not illegal. They are, however, vulnerable to legal challenges, and to public misunderstanding. Loss of public confidence and a damaged reputation are the most likely results of a poorly managed conflict of interest. Advisory boards should take steps to avoid even the appearance of impropriety.

More difficult conflicts can arise when an advisory board member sits on the board or works for a competing or similarly-focused organization. The advisory board member's organization may apply for funding from the same sources as the project. The "duty of loyalty" for board service requires project advisory board members to place loyalty to the project above other conflicting loyalties. If a project advisory board member works for an organization that is a competitor in some way with the project, this member may not use information gained through that project advisory board role to aid his/her employer. Conflict of interest situations can be difficult to manage, so it is recommended that projects keep this in mind when selecting advisory board members.

Potential conflicts can occur when advisory board members have a direct personal financial interest in a business or economic transaction with a project. Examples include situations where advisory board members:

- buy or sell goods and services to or from the project
- lease property and equipment to or from the project
- receive a gift, grant or other financial benefit from the project
- purchase or sell real estate, securities, or other property to or from the project
- borrow money from the project or receive advances of money

- are board members or employees of a competing or affinity organization of the project
- are primary donors or others supporting the project

Conflicts can also occur when the board member has an indirect relationship to an economic or business transaction, as outlined above. The same transactions as are outlined above fall within this policy if the transaction involves the friends, family members or employees of the advisory board member, or if the advisory board member has a material financial interest in an entity which is involved in the transaction.

Tides Center requires each of our project advisory board members and project directors to agree to the following Conflict of Interest Policy:

- Each project director and advisory board member will complete annually a Conflict of Interest Disclosure Statement annually, and provide updated information whenever a conflict arises, and agree to fully disclose potential conflicts to the Advisory Board and to the Tides Project Advisor when they occur so that advisory board members who are voting on an issue are aware that another member's interests may be affected.
- Advisory board members will be required to withdraw—meaning they should not be part of the discussion nor vote—on decisions that present a potential conflict for him or her.
- The advisory board will establish procedures, such as competitive bids, comparability surveys, or similar due diligence to ensure that the project and Tides Center are receiving fair value in a transaction.
- The advisory board in consultation with Tides Governance Advisor and Project Advisor will determine whether a conflict exists and is material, and in the presence of an existing material conflict, determine whether the contemplated transaction may be authorized as just, fair, and reasonable to the project.
- The advisory board will record in their meeting minutes the potential conflict of interest, and will document that in making a decision they have used the procedures and criteria provided in this policy, and they will forward a copy of the minutes to Tides Center.

Project Name:

Tides Center Project Conflict of Interest Disclosure Statement

Please check one box:

Advisory Board Member

Project Staff

Please check only one box (and please add the Project name):

I have no Conflicts of Interest as defined in the Project Conflict of Interest Policy to report regarding

Project Name

(Check the box, sign and date this statement.)

APPENDIX E—HMIS MOU

MEMORANDUM OF UNDERSTANDING
BETWEEN
ALAMEDA COUNTY HUD CONTINUUM OF CARE
COMMITTEE, (ACTING AS THE CONTINUUM OF CARE
BOARD) AND
ALAMEDA COUNTY DEPARTMENT OF HOUSING AND
COMMUNITY DEVELOPMENT, (ACTING AS THE
HOMELESS MANAGEMENT INFORMATION SYSTEM
(HMIS) LEAD

I. Introduction and Purpose

The Alameda County Continuum of Care (the "CoC") is the governing body organized to carry out the responsibilities required under HUD's *Homeless Emergency Assistance and Rapid Transition to Housing Continuum of Care Program Interim Final Rule* at 24 CFR Part 578.7(b) (the "Interim Rule"), including designating a Homeless Management Information System (HMIS) lead to operate HMIS. In addition, the CoC is responsible for making decisions about HMIS management and administration as required under 24 CFR Part 580, a separate rule establishing regulations for HMIS issued by HUD as part of the implementation of the HEARTH Act of 2009. The CoC is responsible for ensuring that the HMIS is operated in accordance with the provisions of the new regulations and other applicable laws (24 CFR Part 580.5).

The Alameda CoC is part of EveryOne Home, a collective impact effort to end homelessness. It is composed of representatives of organizations including nonprofit homeless providers, victim service providers, faith-based organizations, governments, businesses, advocates, public housing agencies, school districts, social service providers, mental health agencies, hospitals, universities, affordable housing developers, law enforcement, organizations that serve homeless and formerly homeless veterans, and homeless and formerly homeless persons. The HUD Continuum of Care Committee (the "CoC Board") functions as the Alameda County CoC Board, required by the Interim Rule to act on behalf of the membership to ensure the CoC responsibilities are fulfilled.

The CoC relies upon data collected in the HMIS to understand the extent and nature of homelessness, and how well the system is working to address it, and to report system and project performance to HUD. If implemented well, the HMIS should also support the operation of the housing and service system, including the CoC's coordinated entry. Under HUD mandates, the CoC must designate a single information system as the official HMIS software for the geographic area, and an HMIS Lead, an entity designated to operate the HMIS (24 CFR Part 580.7). While the CoC must review, revise and approve all policies and plans the HMIS Lead is required to develop, the HMIS Lead must develop written policies and procedures for all Covered Homeless Organizations (CHOs), serve as the applicant to HUD for any HMIS grants, and monitor compliance by all CHOs of the CoC (24 CFR Part 580.9)

Because managing the HMIS is a shared responsibility between the CoC and the HMIS Lead, expectations around each entity's role must be agreed to and clearly documented, along with any role envisioned for the CoC Board and CoC Lead agency in its relationship to the HMIS.

This MOU describes in detail the roles, responsibilities, and accountability that guide the collaboration for the Alameda County Homeless Management Information System (HMIS) among

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the Parties described below, consistent with the Alameda County Continuum of Care/EveryOne Home Governance Charter approved in October of 2017 and 24 CFR Parts 578 and 580.

II. Parties to this Memorandum of Understanding:

1. The Continuum of Care Board ("CoC Board"): HUD Continuum of Care Committee

The Alameda County CoC has designated the HUD Continuum of Care Committee (HUD CoC) to function as the CoC Board. The CoC Board is required by the Interim Rule, and acts on behalf of the membership to ensure the CoC responsibilities are fulfilled. The CoC 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. (24 CFR Part 580.5).

The CoC Committee, acting as the CoC Board, may designate an organization to act on its behalf and/or provide staff support. That entity, identified as the CoC Lead, may undertake the activities of the CoC specified in this MOU.

2. The Homeless Management Information System Lead ("HMIS Lead"): Alameda County Department of Housing and Community Development (HCD)

The Alameda County CoC has designated the Alameda County Department of Housing and Community Development Department as the HMIS Lead to operate the HMIS as required under 24 CFR Part 580.7, for assuring the CoC is compliant with all applicable HUD rules and regulations. HCD administers the HMIS funds provided by the CoC funding as well as the local match.

III. Roles and Responsibilities of Parties

A. Roles and responsibilities of the HUD Continuum of Care Committee (CoC Board) with respect to HMIS:

1. Act on behalf of the membership to ensure HMIS is administered in compliance with HUD CoC regulations.
2. Designate a single Homeless Management Information System (HMIS) for the geographical area (24 CFR Part 578.7(b)(1) and 24 CFR Part 580.5
3. "Designate an eligible applicant to manage the Continuum's HMIS, which will be known as the HMIS Lead." (24 CFR Part 578.7(b)(2).
4. "Review, revise and approve the policies and plans required by this part and by any notices issued from time to time (24 CFR Part 580.7)," including but not limited to a privacy plan, security plan, and data quality plan for the HMIS (24 CFR Part 578.7(b)(3).
5. "Ensure consistent participation of recipients and subrecipients in the HMIS." (24 CFR Part 578.7(b)(4).
6. Analyze and approve the annual review of the HMIS system's performance and functionality, using HMIS work-plan to measure progress.

B. Roles and Responsibilities of Alameda County Housing and Community Development as HMIS Lead Agency (HMIS Lead):

1. As per 24 CFR 580.9(a), the HMIS lead must ensure the operation of and consistent participation by recipients of funds from the Emergency Solutions Grants Program and from the other programs authorized by Title IV of the McKinney-Vento Act. Duties include

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establishing the HMIS; conducting oversight of the HMIS; and taking corrective action, if needed, to ensure that the HMIS is compliant with the requirements of this part.

2. Develop written HMIS policies and procedures in accordance with § 580.31 for all Covered Homeless Organizations (CHOs) (24 CFR Part 580.9).
3. Execute a written HMIS Participation Agreement with each CHO, which includes the obligations and authority of the HMIS Lead and CHO (24 CFR Part 580.9), the requirements of the security plan with which the CHO must abide (24 CFR Parts 580.31), the requirements of the privacy policy with which the CHO must abide, the sanctions for violating the HMIS Participation Agreement (e.g., imposing a financial penalty, requiring completion of standardized or specialized training, suspending or revoking user licenses, suspending or revoking system privileges, or pursuing criminal prosecution), and an agreement that the HMIS Lead and the CHO will process Protected Identifying Information consistent with the agreement. The HMIS Participation Agreement may address other activities to meet local needs. (24 CFR Part 580.9).
4. Serve as the applicant to HUD for grant funds to be used for HMIS activities for the Continuum of Care's geographic area (24 CFR Part 580.9), as directed by the Continuum, and, if selected for an award by HUD, enter into a grant agreement with HUD to carry out the HUD-approved activities.
5. Monitor and enforce compliance by all CHOs with the requirements of this part and report on compliance to the Continuum of Care and HUD.
6. The HMIS Lead must submit a security plan (see § 580.35), a data quality plan (see § 580.37), and a privacy policy (see § 580.31[g]) to the Continuum of Care for approval within [the date that is 6 months after the effective date of the final rule to be inserted at final rule stage] and within 6 months after the date that any change is made to the local HMIS. The HMIS Lead must review and update the plans and policy at least annually. During this process, the HMIS Lead must seek and incorporate feedback from the Continuum of Care and CHO. The HMIS Lead must implement the plans and policy within 6 months of the date of approval by the Continuum of Care.
7. Provide staffing for HMIS.
8. Provide standard and customized reports, and technical support, as applicable and requested by participating agencies in accordance with the mutually adopted customization policy.
9. Develop and implement HMIS-related training for end users, including regular Privacy and Security training and software training. Develop written procedures and job aides for users.
10. Review data quality monthly and take necessary actions per mutually adopted data quality assurance policy to maintain input of high-quality data from all HMIS-utilizing agencies. Report to the CoC Committee on data quality and quality assurance activities on a quarterly basis.
11. Solicit HMIS user feedback through using a variety of mechanisms, such as on-line forums, surveys and user groups, such as the HMIS User Group. The User Group will work with the HMIS Lead to: 1) Provide recommendations on use of software and software enhancements; 2) Trouble-shoot frequent data quality errors; 3) Recommend modifications to HMIS staff created reports; and 4) Improve-coordinated entry workflow.
12. To the extent possible, ensure that CoC projects using an alternate data collection system (such as Domestic Violence providers) are compliant with maintaining a "comparable database" and collecting the necessary HMIS data elements.

13. Generate reports on HMIS data and additional data available to present results to HUD CoC Committee for gap analysis. Configure and maintain the HMIS to be an effective performance management system that is capable of measuring progress in meeting the system and project performance measures established through the EveryOne Home's Results Based Accountability (RBA) Committee.
 14. Develop an effective communication plan to reach all HMIS participants to communicate changes to policy and procedures.
 15. Develop an annual work plan for the HMIS System for review and final approval by HUD CoC. The annual work plan will be presented along with the HMIS budget proposal to the Board of Supervisors, including costs and funding sources.
- C. Joint Responsibilities of the HUD CoC Committee (CoC Board) and Alameda County Housing and Community Development (HMIS Lead)**
1. Participate in the HUD Continuum of Care Committee, and its HMIS-related sub-committees, including the HMIS Oversight Subcommittee.
 2. Support the implementation of, and compliance with local HMIS policies such as, data quality and security, participation, and customization.
 3. Collaborate to design and modify the configuration of HMIS projects, such that it meets program reporting and system analysis needs.
 4. Participate in the EveryOne Home Results Based Accountability (RBA) Committee in using the HMIS to develop system performance measures, data dashboards, and other analytical tools that follow HUD HMIS standards and meet community needs.
 5. Analyze system and programmatic data for trends, costs, performance, compliance, and progress on the Alameda CoC Plan to End Homelessness.
 6. Work collaboratively with other committees in analyzing annual reports from HMIS, including the Longitudinal Analysis report (formerly AHAR), System Performance Measures, PIT Count, and HIC chart.
 7. Establish the HMIS Oversight Subcommittee, that will act as a liaison between the HUD CoC Committee and the HMIS Lead Agency, with the following responsibilities:
 - a. Review data quality reports and recommend a quality improvement program to the HUD CoC.
 - b. Ensure compliance with federal requirements.
 - c. Support and protect the rights and privacy of service users.
 - d. Recommend to the HUD CoC a policy and set of procedures that will guide decisions about customization including establishing: A) a process through which a Contributing HMIS Organization (CHO) may request that project configuration, custom data collection fields, and/or assessments be built into the HMIS; B) the criteria upon which those requests are evaluated; and C) guidance for CHOs to appropriately manage requests for custom data collection fields and assessments.
 - e. Collaborate with the HMIS lead on all HMIS policies the HMIS Lead is required to develop, including Privacy, Security, and Data Quality Plans as required by federal

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regulation.

8. Review data quality reports and take appropriate action to ensure accountability and improved performance of CHOs and system per approved policies.
9. Conduct an annual review of the HMIS system's performance and functionality, using HMIS work-plan to measure progress. Criteria will be discussed with HMIS Lead.
10. Revisit license users' policies and collaborate when additional funding is needed to expand programs and users.

IV. DURATION AND RENEWAL

1. Except as provided in the TERMINATION section, the duration of the MOU shall be for an initial five- year term from June 6, 2018, through June 6, 2023.
2. This agreement may be renewed by written agreement of both parties.

V. AMENDMENTS/NOTICES

The MOU may be amended in writing by the parties and is in effect upon signature of all parties. Notices shall be mailed, emailed or delivered to:

1. Chair of the HUD CoC Committee
2. Director of Alameda County Department of Housing and Community Development

VI. TERMINATION

Any party may terminate this MOU at a date prior to the renewal date specified in the MOU by giving 120 days written notice to the other party. The termination shall be effective on the date specified in the notice of termination.

In addition, if any of the Parties to this Memorandum of Understanding shall fail to fulfill in a timely and proper manner its obligations under this agreement, or if the Parties shall violate any of the covenants, agreements, or stipulations of this agreement, any of the Parties shall thereupon have the right to terminate this agreement by giving written notice of such termination and specifying the effective date thereof, which shall be at least 120 days before the effective date of such termination.

Signatures:



Chair, HUD CoC Committee, on behalf of the
Alameda County Continuum of Care (CoC Board)



Date



Director, Alameda County of Housing and
Community Development (HMIS Lead)



Date

APPENDIX F—Systems Manual: Coordinated Entry Chapter of Alameda County’s Housing Crisis Response System Manual

Manual is being updated by staff and new version to be included in final Charter.

APPENDIX G—Links to relevant Federal Regulations and Notices

[DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT 24 CFR Part 578 Homeless Emergency Assistance and Rapid Transition to Housing: Continuum of Care Program](#)

[DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT 24 CFR Parts 91, 576, 580, and 583 Homeless Management Information Systems Requirements](#)

[U.S. Department of Housing and Urban Development Office of Community Planning and Development Notice: CPD-17-01](#)