



HMIS Oversight Committee Agenda Wednesday June 10, 2020

[Link to Virtual Meeting](#)

1. **Welcome** **9:00-9:05AM**
 - Next Meeting on Wednesday August 12th from 9-11

2. **HMIS Oversight Public Comment** **9:05-9:15 AM**

3. **HMIS Online Training Update** **9:15-9:25 AM**

4. **HMIS ROI Update** **9:25-9:45AM**
 - Confirm ability to use electronic signatures in Clarity

5. **HMIS Governance and Monitoring** **9:45-10:15AM**
 - Materials: Memo and Proposed Monitoring Tool
 - Vote to adopt the pilot tool for first round of monitoring.
 - Determine timeframe to implement (between now and November)

6. **Onboarding Criteria and HMIS Access** **10:15-10:35AM**
 - Given various funders have access to HMIS for viewing and reporting purposes, consider adding criteria for onboarding funders.
 - Given staff from other agencies could benefit from access to HMIS, consider developing a special license for read-only access.

7. **2020 Work Plan and Committee Recruitment** **10:33-10:55AM**
 - Materials: 2019 Work Plan and Committee Roster
 - Review 2019 Work Plan and Outline Priorities for 2020
 - Review Committee Roster and discuss filling vacancies

8. **Next Steps with BitFocus** **10:55-11:00AM**

To: Continuum of Care Committee
 From: HMIS Oversight Committee
 Date: June 5, 2020
 Re: HMIS Governance

In June 2019, the Oakland-Berkeley-Alameda County Continuum of Care received an assessment of the HMIS from HUD Technical Assistance Provider ICF. The assessment recommended strengthening governance by clarifying roles and beginning to monitor the HMIS Lead’s activity and performance. Immediately the HMIS Oversight Committee sought to restructure itself to be more effective. The Continuum of Care Committee approved the restructuring of the HMIS Oversight Committee seats in June. The below chart reflects the seating structure approved in June 2019 and the representatives holding those seats as of May 2020.

HMIS Oversight Seating Structure and Roster			
Role	Name	Agency	Seat
Co-Chair, voting	Mike Keller	EOCP	Data Quality or HMIS End user
Co-Chair, voting	Andrew Wicker	City of Berkeley	Continuum of Care Committee
Voting			Continuum of Care Committee
Voting	Juliana Juarez	Abode Services	Coordinated Entry Lead
Voting		City of Berkeley	Coordinated Entry Lead
Voting	Nic Ming	City of Oakland	Coordinated Entry Lead
Voting	Robert Ratner	HCSA	Home Stretch and County Funding Partner
Voting			Data Quality or HMIS End user
Voting	Laurie Flores	City of Fremont	Data Quality or HMIS End user
Voting	Suzanne Warner	HCD	County Funding Partner
Staff	Jessica Shimmin	EveryOne Home	CoC Lead
Staff	Alexis Lozano	EveryOne Home	CoC Lead
Staff	Patrick Crosby	HCD	HMIS Lead
Staff	John Noe	HCD	HMIS Lead

Commented [JS1]: Needs to be revisited now that we have a CE Management Entity.

Commented [JS2R1]: Also, we need to fill these empty seats

In October 2019, the Continuum of Care Committee formally accepted the HMIS TA providers’ assessment of the local HMIS and directed the HMIS Oversight Committee and the HMIS Lead each to begin working to strengthen HMIS Governance and System Administration, respectively. The HMIS Oversight began working to improve governance with two “Common Agenda” sessions that were facilitated by Mike Lindsay and Leah Rainey of ICF. The goal of these conversations was to more clearly define roles and responsibilities and then establish a process for monitoring the HMIS Lead’s performance.

HMIS Onboarding

The first Common Agenda Session took place on Friday September 13, and focused on the decision making process around how organizations join the HMIS. This conversation became the starting point for refining and developing the onboarding criteria and materials. As of this memo:

- Criteria have been developed to evaluate requests for agency onboarding in a consistent way that meets the needs of the CoC. Onboarding criteria include:
 - Organizations interested in joining the HMIS as a CES assessment agency must provide an MOU with a CES Lead Operator, currently Abode Services, City of Berkeley, City of Oakland.
 - Organizations that are contractually required to participate in HMIS will be onboarded.

Commented [JS3]: Needs to be revisited in light of the CE Management Entity decision.

- Organizations that provide street outreach, emergency shelter, transitional housing for homeless persons, support services for homeless persons, rapid re-housing, and permanent supportive housing will be onboarded to improve coordination of services and HMIS coverage rate.
- To participate in HMIS, organizations must input information. To protect the privacy of client information, there is no “reference only” or “read only” access.
- The onboarding packet has been updated to gather the necessary information to determine whether an agency fulfills the criteria;
- The HMIS Lead maintains an onboarding tracking sheet that provides information about the onboarding agency’s request, the dates steps in the onboarding process were completed, and what steps in the onboarding process remain outstanding. This tracking sheet is provided to the HMIS Oversight Committee each month.
- The HMIS Lead reports to the HMIS Oversight Committee at minimum each quarter about the status of onboarding requests including which agencies were approved to join and on what basis and which agencies were denied and on what basis.

The HMIS Oversight Committee has requested that the HMIS Lead:

- Develop materials to inform organizations who have been approved to join the HMIS about the steps in the onboarding process, the typical timeline, and any materials required from the onboarding agency. The HMIS Oversight Committee also requested that these materials include the name and contact information for the staff person who will be supporting the agency through the onboarding process.

Common Agenda: Privacy Policy

The second Common Agenda session took place on Friday October 4, 2019 and focused on how decisions are made around the privacy policy. Although this conversation identified some next steps for working on the privacy policy, overall, the conversation emphasized a need to focus on building accountability to existing agreements. As related to the privacy policy, the committee looked to the existing MOU between the HMIS Lead and the CoC. The MOU requires that the HMIS Lead review and update the privacy policy on an annual basis, and then present the revised privacy policy to the CoC for approval. Since COVID-19, the HMIS Lead has made emergency changes to the privacy policy that have been reviewed in HMIS Oversight and approved by the CoC Committee. As well, the Committee and the HMIS Lead are working collaboratively to update the Privacy Policy. The work in progress will be presented to the CoC Committee in June.

Next Steps: HMIS Lead Monitoring

A next step toward strengthening governance by building accountability to existing agreements--and the next step in the TA plan to strengthen the HMIS--is developing an HMIS monitoring process. This process will bring the Continuum of Care into greater compliance with HUD regulations and expectations, elevating areas where the HMIS is performing well, and identify directions for further development. During their time with the Continuum of Care, ICF, the HMIS TA team, provided several examples of HMIS Lead monitoring tools. These include the tools used by CoCs in San Diego, CA; Maine HMIS; and Pennsylvania HMIS. The most straightforward belongs to the Tucson Pima County, Arizona Continuum of Care (TPCH). It is straightforward in part because the tool provides yes/no answer options. These answer options offer a level of objectivity and clarity that supports the early phase of HMIS Oversight in the CA-502 Continuum of Care. Using the TPCH Monitoring Tool as a template, what follows is a draft HMIS Lead Monitoring Tool for the Oakland-Berkeley-Alameda County Continuum of Care. The HMIS Oversight Committee should aim to finalize the tool and operationalize the first annual HMIS Lead Monitoring during calendar year 2020. Because the tool is designed to be completed by the HMIS Lead, reviewing the tool with the HMIS Oversight Committee could structure a conversation that would recognize areas of improvement in the past year and help the HMIS Lead prioritize work for the 2021 work plan.

**Oakland-Berkeley-Alameda County Continuum of Care
HMIS Lead Monitoring Form**

HMIS Lead & HMIS Grant

Instructions: Please complete this form. All forms and attachments must be received electronically by the HMIS Oversight Committee Co-Chairs and Continuum of Care Committee Chairperson. If you have questions about this form please contact the HMIS Oversight Committee Co-Chairs and the EveryOne Home staff to the HMIS Oversight Committee.

The HMIS Lead is responsible for collecting and submitting the information required to answer the questions below. The time period monitored is the previous fiscal year unless otherwise specified below.

Section I. General Information

1. Organization Name:	
2. Address:	
3. Contact Person:	
4. Phone Number:	
5. E-mail Address:	
6. Agency Authorized Representative:	
7. DUNS Number:	
8. Tax ID/EIN Number:	
9. Government or 501c3 nonprofit corporation (<i>attach documentation</i>)	<input type="checkbox"/> Yes <input type="checkbox"/> No

8. Briefly describe the organization serving as the HMIS Lead.

Section II. HMIS Governance Standards

<p>1. Has the HMIS Lead developed a Policies and Procedures Manual? (MOU section B.2)</p> <p><i>Please attach P&P Manual.</i></p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Explanation:</p>
<p>2. Has the updated HMIS Policies and Procedures Manual been approved by the CoC Committee? (MOU section B.2)</p> <p><i>Provide documentation of CoC Committee approval.</i></p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Date the revised HMIS P&P was approved by the CoC Committee:</p>

<p>3. Has the HMIS Lead developed a Data Privacy Plan? (MOU section B.6)</p> <p><i>Attach Data Privacy Plan.</i></p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Explanation:</p>
<p>4. Has the HMIS Lead reviewed and updated the Data Privacy Plan annually? (MOU section B.6)</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Date of revised Privacy Plan:</p>
<p>5. In updating the Data Privacy Plan, how did the HMIS Lead seek and incorporate feedback from Contributing HMIS Organizations (CHO) and the CoC? (MOU section B.6)</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Please Explain:</p>
<p>6. Has the Data Privacy Plan been approved by the Continuum of Care Committee? (MOU section B.6)</p> <p><i>Provide documentation of CoC Committee approval.</i></p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Date the Data Privacy Plan was approved by the CoC Committee:</p>
<p>7. How has the HMIS Lead ensured Data Privacy Plan compliance with federal, state, and local laws that require additional privacy or confidentiality protections including HIPAA and VAWA? (HUD requirement, MOU section B.1)</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Explanation (Required):</p>
<p>8. Does the Data Privacy Plan include all of the following: (HUD requirement, MOU section B.1)</p> <ul style="list-style-type: none"> • Data collection limitations • Data collection purpose • Limitations of the use of data collected in HMIS • Description of database openness. • Data access and correction standards • Accountability standards • Protections for victims of domestic violence, dating violence, sexual assault. 	<p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Explanation (Required):</p>
<p>9. How does HMIS Lead monitor Contributing HMIS Organizations compliance with the Data Privacy Plan? (MOU section B.5)</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Explanation (Required):</p>

Section III. HMIS Technical Standards

<p>1. Do client records in HMIS meet HUD unduplication requirements? (MOU section B.1)</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Explanation (Required):</p>
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<p>2. Do records in HMIS meet HUD data collection requirements and track all required data elements? (MOU section B.1)</p> <ul style="list-style-type: none"> • Project Descriptor Data Elements • Universal Data Elements • Program-Specific Data Elements • Metadata Elements <p><i>Attach a list of all data elements tracked in HMIS.</i></p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Explanation (Required):</p>
<p>3. Is the HMIS system is able to maintain historic data as required by HUD? (MOU section B.1)</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Explanation (Required):</p>
<p>4. Is the HMIS system is able to generate required HUD reports? (MOU section B.1)</p> <ul style="list-style-type: none"> • AHAR • System Performance Reports • CoC APR • ESG CAPER • GPD Reports • HIC/PIT Reports • HOPWA APR • HOPWA CAPER • PATH Reports • RHY Reports • SSVF Reports <p><i>Attach HMIS report template examples for all above reports.</i></p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Explanation (Required):</p>
<p>5. Is the HMIS system able to generate data quality reports? (MOU section B.1)</p> <p><i>Attach HMIS report template examples for data quality reports.</i></p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Explanation (Required):</p>

<p>6. Is the HMIS system able to generate audit reports to review audit logs on demand? (MOU section B.1)</p> <p><i>Attach HMIS report template examples for audit reports.</i></p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Explanation (Required):</p>
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Section IV. HMIS Data Security Standards

<p>10. Has the HMIS Lead developed a Data Security Plan? (MOU Section B.6)</p> <p><i>Please attach Data Security Plan.</i></p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Explanation:</p>
<p>11. Does the HMIS Lead ensure the Data Security Plan is reviewed and updated at least annually to ensure it meets community needs and is compliant with HUD requirements? (MOU Section B.6)</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Date during the monitoring period that the Data Security Plan review/update was completed:</p>
<p>12. Has the Data Security Plan been approved by Continuum of Care Committee? (MOU Section B.6)</p> <p><i>Provide documentation of Continuum of Care Committee approval.</i></p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Date during the monitoring period that the Data Security Plan review/update was completed:</p>
<p>13. Has the HMIS Lead conducted an annual security review that includes monitoring of Contributing HMIS Organizations and completion of a security checklist ensuring that each of the security standards is implemented in accordance with the Data Security Plan? (MOU Section B.5)</p> <p><i>Attach report of security review and/or completed security checklists.</i></p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Explanation (Required):</p>
<p>14. Has the HMIS Lead designated a security officer responsible for HMIS security? (MOU Section B.6)</p> <p><i>Attach supporting documentation and security officer contact information.</i></p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Explanation:</p>
<p>15. Has the HMIS Lead ensured that Contributing HMIS Organizations have designated a security officer? (MOU Section B.5)</p> <p><i>Attach supporting documentation and list of designated security officers in Contributing HMIS Organizations.</i></p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Explanation:</p>

<p>16. Does the HMIS Lead ensure that the designated security officer at each Contributing HMIS Organizations has undergone a criminal background check?</p> <p><i>Attach supporting documentation.</i></p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Explanation (Required):</p>
<p>17. Does the HMIS Lead conduct workforce security screening of its employees?</p> <p><i>Attach documentation of hiring and background check process for employees.</i></p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Explanation:</p>
<p>18. Does the HMIS Lead conduct criminal background checks for all administrative users?</p> <p><i>Attach documentation of criminal background check process for administrative users.</i></p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Explanation:</p>
<p>19. How does the HMIS Lead ensure Contributing HMIS Organizations conduct workforce security screenings of employees using HMIS?</p> <p><i>Attach supporting documentation that Contributing HMIS Organizations comply with security HMIS screening policy.</i></p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Explanation:</p>
<p>20. Has the HMIS Lead established security incident reporting procedures for HMIS and Contributing HMIS Organizations? (MOU section B.3)</p> <p><i>Attach security incident procedures.</i></p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Explanation:</p>
<p>21. How does HMIS Lead monitor Contributing HMIS Organizations compliance with the Data Security Plan? (MOU section B.5)</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Explanation:</p>
<p>22. Has the HMIS Lead developed a Hardware and Software Disaster Response and Recovery Plan?</p> <p><i>Attach Hardware and Software Disaster Response and Recovery Plan.</i></p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Explanation:</p>

Commented [JS1]: How deep into the background check (Q14-19) do we want to go? It is part of the HUD Regs. But Mike Lindsay seemed to think this isn't the starting place.

Commented [JS2]: This seems like a good idea, but it's not in the MOU. Is it standard to address disaster response in a Security Plan?

<p>23. Has the Hardware and Software Disaster Response and Recovery Plan been approved by CoC Committee?</p> <p><i>Provide documentation of TPCB approval.</i></p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Explanation:</p>
<p>24. Does the HMIS Lead ensure the Hardware and Software Disaster Response and Recovery Plan is reviewed at least annually and in compliance with HUD requirements?</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Explanation (Required):</p>
<p>25. How does HMIS Lead monitor outside organizations (ex. software vendor, IT support vendors, etc.) involved in disaster planning and data recovery?</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Explanation (Required):</p>

Section V. HMIS Data Quality Standards

<p>1. Has the HMIS Lead developed a Data Quality Plan? (MOU section B.6)</p> <p><i>Please attach Data Quality Plan.</i></p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Explanation:</p>
<p>2. Does the HMIS Lead ensure the Data Quality Plan is reviewed at least annually to ensure it meets community needs and is compliant with HUD requirements? (MOU section B.6)</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Explanation (Required):</p>
<p>3. Has the HMIS Lead set data quality benchmarks for bed coverage rates for Contributing HMIS Organizations for all project types?</p> <p><i>Attach bed coverage benchmarks.</i></p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Explanation (Required):</p>
<p>4. Has the HMIS Lead set data quality benchmarks for service volume coverage rates for Contributing HMIS Organizations?</p> <p><i>Attach service volume coverage benchmarks.</i></p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Explanation (Required):</p>
<p>5. How does HMIS Lead monitor Contributing HMIS Organizations compliance with the Data Quality Plan? (MOU Section B.10)</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Explanation (Required):</p>

Commented [JS3]: This isn't in our data quality plan, to my knowledge, but would be a good idea.

Commented [JS4]: Do we want to keep this?

<p>6. Has the HMIS Lead established length of time records must be maintained to be available for inspection or monitoring?</p> <p><i>Attach relevant policy documents.</i></p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Explanation:</p>
<p>7. Has the HMIS Lead established a policy for archiving HMIS data to storage from the active transactional database?</p> <p><i>Attach relevant policy documents.</i></p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Explanation:</p>

Section VI. HMIS Operations

<p>1. Has the HMIS Lead has designated a liaison to coordinate HMIS efforts with HUD and the CoC Committee?</p> <p><i>Provide liaison name, title, and role with HMIS Lead.</i></p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Explanation (Required):</p>
<p>2. How does the HMIS Lead respond to motions passed by the HMIS Oversight and CoC Committee?</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Explanation (Required):</p>
<p>3. Have directives to the HMIS Lead in motions passed by the CoC Committee been implemented or completed?</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Explanation (Required):</p>
<p>4. Does the HMIS Lead attend and participate in HMIS Oversight Committee meetings?</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Explanation:</p>
<p>5. Has HMIS Lead attested that it is in good standing with HUD and not subject to any compliance action and/or sanction (limited denials of participation, suspensions, debarments) by HUD?</p> <p><i>Attach signed attestation letter from authorized agency representative confirming good standing with HUD.</i></p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Explanation:</p>
<p>6. Has the HMIS Lead developed and updated the participation agreement for Contributing HMIS Organizations? (MOU section B.3)</p> <p>The participation agreement must minimally include:</p> <ul style="list-style-type: none"> • Obligations and authority of the HMIS Lead • General obligations of the Contributing HMIS Organizations 	<p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Implementation date of most current version: Explanation:</p>

Commented [JS5]: Do we want to keep this?

Commented [JS6]: Wow.

<ul style="list-style-type: none"> • Security requirements governing Contributing HMIS Organizations • Sanctions for violating the participation agreement • Agreement that the HMIS Lead and Contributing HMIS Organizations will process Protected Identifying Information consistent with the agreement <p><i>Attach template of agency participation agreement.</i></p>	
<p>7. Has the HMIS Lead ensured that all Contributing HMIS Organizations have completed a participating agency agreement with the HMIS Lead? (MOU section B.3)</p> <p><i>Attach list of participating agencies and copies of all executed participation agreements.</i></p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Explanation:</p>
<p>8. Has the HMIS Lead developed a data sharing policy and a data sharing agreement for Contributing HMIS Organizations wishing to share additional data in HMIS? (MOU section B.3)</p> <p><i>Attach template of data sharing agreement.</i></p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Explanation:</p>
<p>9. Has the HMIS Lead ensured that all Contributing HMIS Organizations sharing data above and beyond the standard shared data elements have data sharing agreements in place? (MOU section B.3)</p> <p><i>List all data sharing partnerships and agencies involved in each of the partnerships. Attach copies of all executed data sharing agreements for all listed partnerships.</i></p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Explanation:</p>
<p>10. Has the HMIS Lead ensured that all Contributing HMIS Organizations have identified an Agency Administrator? (MOU section B.3)</p> <p><i>Attach list of participating agencies and corresponding Agency Administrator.</i></p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Explanation:</p>
<p>11. Has the HMIS Lead ensured that all Agency Administrators have signed an Agency Administrator Agreement?</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Explanation:</p>

Commented [JS7]: Is this a thing in our system?

<p><i>Attach all executed agency administrator agreements.</i></p>	
<p>12. Has the HMIS Lead developed a user agreement for all HMIS users at Contributing HMIS Organizations using HMIS? _____</p> <p><i>Attach template of user agreement.</i></p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Explanation:</p>
<p>13. Has the HMIS Lead ensured that all users have signed a User Agreement? _____</p> <p><i>Attach a list of all current HMIS users and executed user agreements for users with last names beginning with A-D.</i></p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Explanation:</p>
<p>14. Does the HMIS Lead monitor user license utilization and ensures that all Contributing HMIS Organizations have the number of user licenses they require for their staff?</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Explanation (Required):</p>
<p>15. Does the HMIS Lead provide trained and qualified personnel to assist all users with HMIS support? (MOU section B.9)</p> <p><i>Attach job descriptions, resumes, and trainings attended by all staff employed by HMIS that provide HMIS support.</i></p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Explanation (Required)</p>
<p>16. What are the HMIS Lead's organizational capacity and plans to ensure ongoing ability to discharge the responsibilities of the HMIS Lead as directed by HUD and TPCH in the event of key staff turnover? MOU (Section B.7)</p> <p><i>Attach plans or policy in the event of staff turnover.</i></p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Explanation (Required)</p>
<p>17. Does the HMIS Lead promptly assist users with support requests and what is the HMIS Lead support policy? (MOU section B.8)</p> <p><i>Attach support policy.</i></p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Explanation (Required)</p>

Commented [JS8]: This isn't directly referenced in the MOU, but is a HUD requirement

Commented [JS9]: This isn't directly referenced in the MOU, but is a requirement.

<p>18. Was an opportunity provided by the HMIS Lead to receive feedback from HMIS users? (MOU section B.11)</p> <p><i>Attach materials showing HMIS Lead collected feedback from HMIS users. Examples can include a satisfaction survey, focus groups results, or other similar materials.</i></p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Explanation (Required)</p>
<p>19. If there were concerns identified in feedback received by the HMIS Lead how were these concerns addressed?</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Explanation (Required)</p>

Section VII. HMIS Reporting

This section applies to the required HUD reports submitted during the last federal fiscal year. If the submitted report is not yet accepted or not accepted by HUD note that in the explanation section and note whether the previous year's report was accepted.

<p>1. Did the HMIS Lead submit the Annual Homeless Assessment Report (AHAR) on or before the report submission deadline in the Homeless Data Exchange (HDX).</p> <p><i>Attach a copy of the AHAR and submission proof from HDX.</i></p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Explanation:</p>
<p>2. Were all tables in the AHAR accepted by HUD?</p> <p><i>Attach documentation demonstrating acceptance of the AHAR.</i></p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Explanation:</p>
<p>3. Did the HMIS Lead submit the AHAR to the HMIS Oversight Committee and CoC Committee for review prior to the HUD submission deadline?</p> <p><i>Attach documentation demonstrating TPCH review of report.</i></p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Explanation:</p>
<p>4. Did the HMIS Lead submit the Housing Inventory Count (HIC) on or before the report submission deadline in the Homeless Data Exchange (HDX).</p> <p><i>Attach a copy of the HIC and submission proof from HDX.</i></p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Explanation:</p>
<p>5. Was the HIC accepted by HUD?</p> <p><i>Attach documentation demonstrating acceptance of the HIC.</i></p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Explanation:</p>

<p>6. Did the HMIS Lead submit the Housing Inventory Count to the HMIS Oversight Committee and CoC Committee for review prior to the HUD submission deadline?</p> <p><i>Attach documentation demonstrating TPCH review of report.</i></p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Explanation:</p>
<p>7. Did the HMIS Lead submit the Point In Time Count (PIT) on or before the report submission deadline in the Homeless Data Exchange (HDX)?</p> <p><i>Attach a copy of the PIT and submission proof from HDX.</i></p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Explanation:</p>
<p>8. Was the PIT accepted by HUD?</p> <p><i>Attach documentation demonstrating acceptance of the PIT.</i></p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Explanation:</p>
<p>Did the HMIS Lead submit the PIT to the HMIS Oversight Committee and CoC Committee for review prior to the HUD submission deadline?</p> <p><i>Attach documentation demonstrating HMIS Oversight and CoC Committee review of report.</i></p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Explanation:</p>
<p>9. Did the HMIS Lead submit the System Performance Measures on or before the report submission deadline in the Homeless Data Exchange (HDX)?</p> <p><i>Attach a copy of the System Performance Measures report and submission proof from HDX.</i></p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Explanation:</p>
<p>10. Was the System Performance Measures report was accepted by HUD?</p> <p><i>Attach documentation demonstrating acceptance of the System Performance Measures report.</i></p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Explanation:</p>
<p>11. Did the HMIS Lead submit the System Performance Measures report to the HMIS Committee and CoC Committee for review prior to the HUD submission deadline?</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Explanation:</p>

Attach documentation demonstrating HMIS Oversight and CoC Committee review of report.	
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Section VIII. User Training (MOU section B.9)

1. How does the HMIS Lead provide training to new HMIS users? <i>Attach training sign in sheets or other documentation demonstrating training was provided to new users.</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A Explanation (Required):
2. How many trainings has the HMIS Lead provided in the past fiscal year?	Number of Trainings:
3. How many unduplicated users has the HMIS Lead trained in the past fiscal year?	Number of Users:
4. How does the HMIS Lead provide training to new HMIS Agency Administrators? <i>Attach training sign in sheets or other documentation demonstrating training was provided to new users.</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A Explanation (Required):
5. How does the HMIS Lead train new users on HMIS policies and procedures? <i>Attach a copy of training materials.</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A Explanation (Required):
6. Does the new user training provide security awareness training? <i>Attach a copy of security training materials.</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A Explanation (Required):
7. Does the HMIS Lead provide annual security training for all HMIS users? <i>Attach training sign in sheets or other documentation demonstrating training was provided to new users.</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A Explanation (Required):
8. Does the HMIS Lead train HMIS users on software changes or upgrades in HMIS prior to their implementation in HMIS?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A Explanation (Required):

Commented [JS10]: ?

Commented [JS11]: This is a HUD reg, but isn't in the MOU

<p>9. Does the HMIS Lead train HMIS users on data standards or reporting changes in HMIS prior to their implementation in HMIS?</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Explanation: (Required):</p>
<p>10. How does the HMIS Lead provide training on required project reports to HMIS users?</p> <p><i>Attach training sign in sheets or other documentation demonstrating training was provided to new users.</i></p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Explanation (Required):</p>
<p>11. Does the HMIS Lead provide a training manual to HMIS users?</p> <p><i>Attach a copy of the training manual.</i></p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Explanation:</p>
<p>12. How are training manuals and other training materials made available and accessible to HMIS users?</p>	<p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Explanation (Required):</p>

Section IX. HMIS Grant Management

For this section use the most recently ended HMIS grant project year.

<p>1. Has the Continuum of Care Committee designated the recipient as the HMIS Lead?</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Explanation:</p>
<p>2. Fiscal Year of HMIS Grant:</p>	
<p>3. Award Number:</p>	
<p>4. Total Award Amount:</p>	
<p>5. Total Funds Expended:</p>	
<p>6. If less than 100% of funds were expended provide an explanation of reason all grant funds were not spent.</p>	
<p>7. Project Budget</p> <p><i>Attach project budget.</i></p>	

8. Was Annual Performance Report (APR) submitted on time for the project? <i>Attach project APR.</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A Explanation:
9. How frequently do you draw down funds from the Line of Credit Control System (LOCCS) for the project? <i>Attach LOCCS draw down documentation.</i>	<input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Semi-annually <input type="checkbox"/> Annually
10. How does your project identify and track leverage?	
11. Project Match <i>Attach project match documentation.</i>	

Section X. Vendor Management

Where there any contracts executed with outside vendors to provide services to the CoC with funds administered by the HMIS Lead? This includes HMIS grant funds, fundraised dollars, and matching funds.

Yes No

If yes, please complete Appendix A: Contract Review Form, for each contract executed by the HMIS Lead Agency on behalf of the CoC. Attach all of these forms to your monitoring response.

Commented [JS12]: Our MOU doesn't include this, but since BitFocus is acting as the remedy for capacity shortfall, do we want to include this in the next mou? Suzanne has been sharing this kind of info with us...

Section XI. Certification of Monitoring Response

All information on this form is true and accurate to the best of my knowledge.

Prepared by: _____

Name and Job Title

Date

Agency Authorized Representative: _____

Name and Job Title

Signature

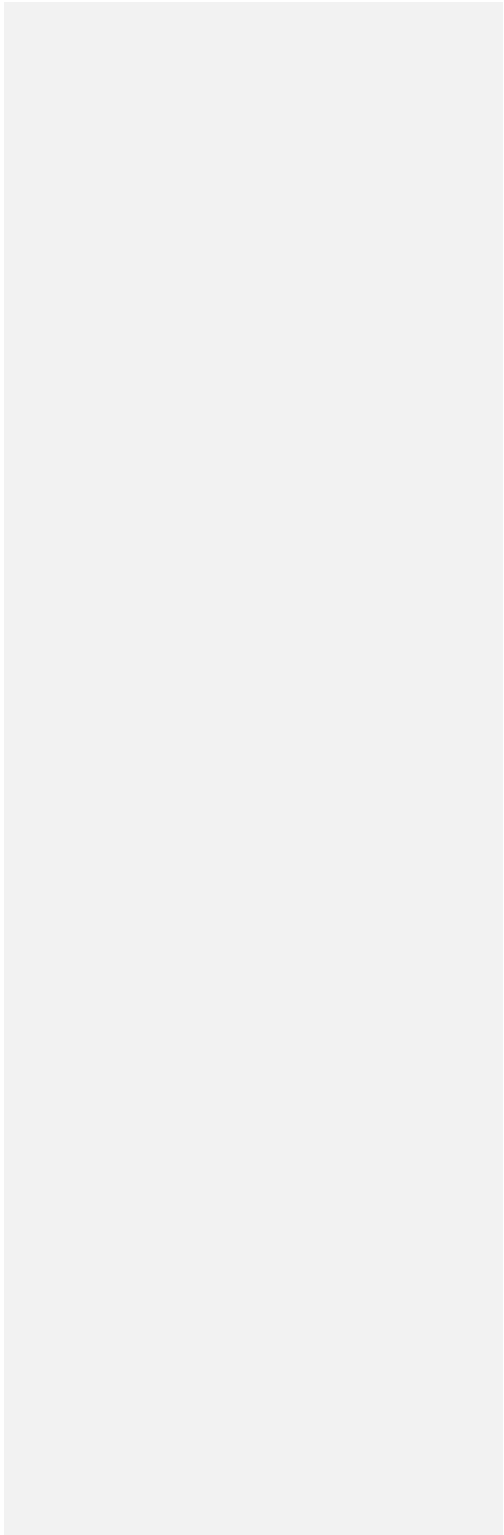
Date

Appendix A
Contract Review Form

Vendor:	
Contract Term:	
What was the purpose of this contract?	
What procurement process was used to select the vendor?	
Summary of the Scope of Work	
Does the vendor comply with HMIS standards issued by HUD and is this present in the contract with the vendor?	
Did the scope of work contain measurable outputs and/or outcomes?	
Did the TPCH Board of Directors approve the contract?	

How was the vendor monitored to ensure the completion of the scope of work?	
Was the work outlined in the contract successfully completed?	
Attach the following items: <ul style="list-style-type: none">• <i>Contract</i>• <i>Budget</i>• <i>Scope of work</i>	
Procurement Policy <i>Attach procurement rules established by your agency that apply in addition to TPCH rules.</i>	
Comments: <i>Attach any other items that are relevant to this contract.</i>	

DRAFT



HMIS Oversight Workplan 2019					
<i>What</i>	<i>Q1 Status</i>	<i>Q2 Status</i>	<i>Q3 Status</i>	<i>Q4 Status</i>	<i>Complete</i>
Coordinated Entry					
Evaluate whether CE Structure is meeting system and community needs: these goals are outlined in the 2019 HMIS Team Workplan	Discuss with Bitfocus, interviews with HUD TA				
Based on the evaluation, determine how to make HMIS work better for CES operations and reporting	HUD TA recommendations				
HMIS Lead					
Track progress on HMIS Lead's 2019 workplan					
Conduct performance review using 2019 workplan					
Develop performance review process					
Review HMIS Team QI plan and recommend to HUD CoC					
Review and recommend approval by HUD CoC of HMIS Lead's 2020 work plan					
Policies and Procedures					
Privacy and Security policy review and revision (electronic signatures, etc)					
Solicit user and funder input on Clarity structure/features through working groups	Working groups: document upload, services options				
Based on user input, provide oversight on the development of Clarity development	HMIS Lead's 2019 workplan, document upload, services options				
Training and Communication					
Review HMIS Lead's recommendation for defining and operationalizing the agency manager role to better support users					
Advocate for resources to support HMIS Lead's training plan	Recommendation to CoC in draft form				
Help HMIS Team develop a standard communication plan	See HMIS Team 2018 workplan				
HMIS Expansion and Data Sharing					
User license allocation policy	Developed 10/2018, Submitted to HMIS Lead 12/2018, 2/2019				
Review new agency on boarding policy and procedure	9/2018, Documentation of new agency onboarding appears in monthly meeting packet				
Learn about data sharing initiatives (SHIE, SSA)					
Review and update data sharing guides and policies					

