

**ORANGE COUNTY CONTINUUM OF CARE
LIVED EXPERIENCE ADVISORY COMMITTEE**

Wednesday, April 2, 2025
10:00 a.m. – 11:30 a.m.

Location:

**County Administration South (CAS) Building
County Conference Center, Room 104
425 W. Santa Ana Blvd., Santa Ana, CA 92701**

[Click here](#) for parking instructions.

Virtual Meeting Option:

Zoom Meeting Link: [Click here for meeting link](#)

Join by phone: +1 669 444 9171

Webinar ID: 923 4439 7221

****Listen-in option only****

Committee Chair: Robert “Santa Bob” Morse, Individual

Committee Vice Chair: Paul Kaiser, Individual

Committee Members:

Reha Agar, Individual

Elizabeth Flores, Individual

Nichole Gideon, Individual

Deborah Kraft, Individual

Miranda Mears, Individual

Jason Mercado, Individual

Larry “Smitty” Smith, Individual

Vinny Zarrella, Individual

AGENDA

Welcome and Meeting Overview – Robert “Santa Bob” Morse, Chair

Public Comments – Members of the public may address the Lived Experience Advisory Committee (LEAC) on items listed within this agenda or matters not appearing on the agenda so long as the subject matter is within the jurisdiction of the LEAC. Public comments will be limited to three minutes. If there are more than five public speakers, this time will be reduced to two minutes. Members of the public utilizing interpreter services will be given double the amount of time to provide public comment

To address the LEAC during the Public Comment period, members of the public are to complete a Request to Address the Committee form prior to the beginning of each agenda item and submit it to Continuum

of Care (CoC) staff. Staff will call your name in the order received. Members of the public may also submit public comment by emailing CareCoordination@ocgov.com. All comments submitted via email at least 24 hours before the start of the meeting will be distributed to the LEAC members, and all comments will be added to the administrative records of the meeting. Please include "LEAC Meeting Comment" in the email subject line.

LEAC Member Comments – Members of the LEAC may provide comments on matters not appearing on the agenda so long as the subject matter is within the jurisdiction of the LEAC. Comments will be limited to three minutes. If there are more than five members wishing to speak, this time will be reduced to two minutes.

CONSENT CALENDAR

1. Approve the LEAC Meeting Minutes from March 5, 2025.

BUSINESS CALENDAR

1. **CoC Updates** – Felicia Boehringer, CoC Administrator, Office of Care Coordination
 - a. March 26, 2025, CoC Board Meeting Recap.
2. **Homeless Management Information System (HMIS) Policies and Procedures Recommended Changes** – Erin DeRycke, Director, Data Analytics, 2-1-1 Orange County (211OC), Orange County United Way and Felicia Boehringer, CoC Administrator, Office of Care Coordination
 - a. Approve the recommended revisions to the HMIS Policies and Procedures, inclusive of the Client Record Requests, Data Use and Disclosure, Data Integration, and Data Release policies, as well as updates to the Client Consent Form, Grievance Form, and Privacy Notice, as recommend by the Orange County HMIS Policies and Procedures Working Group, for review and approval by the Policies, Procedures and Standards Committee.

Next Meeting: Wednesday, May 7, 2025, 10:00 a.m. to 11:30 a.m., at the County Administrative North (CAN) Multipurpose Rooms 103/105, 400 W. Civic Center Drive, Santa Ana, CA 92701

**ORANGE COUNTY CONTINUUM OF CARE
LIVED EXPERIENCE ADVISORY COMMITTEE**

Wednesday, March 5, 2025

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Location:

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Multi-Purpose Room 101
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Committee Vice Chair: Paul Kaiser, Individual

Committee Members:

Reha Agar, Individual

Elizabeth Flores, Individual

Nichole Gideon, Individual

Deborah Kraft, Individual

Miranda Mears, Individual

Jason Mercado, Individual

Larry “Smitty” Smith, Individual

Vinny Zarrella, Individual

MINUTES

Welcome and Meeting Overview – Robert “Santa Bob” Morse, Chair

Chair Robert “Santa Bob” Morse called the meeting to order at 10:00 a.m.

Present: Reha Agar, Elizabeth Flores, Nichole Gideon, Paul Kaiser, Miranda Mears, Jason Mercado, Robert “Santa Bob” Morse, Larry “Smitty” Smith, and Vinny Zarrella

Absent Excused: Deborah Kraft

Public Comments – Members of the public may address the Lived Experience Advisory Committee (LEAC) on items listed within this agenda or matters not appearing on the agenda so long as the subject matter is within the jurisdiction of the LEAC. Public comments will be limited to three minutes. If there are more than five public speakers, this time will be reduced to two minutes. Members of the public utilizing interpreter services will be given double the amount of time to provide public comment

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- Vinny Zarrella raised concerns about Santa Ana Housing Authority’s (SAHA) relationship and coordination with both youth and case management staff at Orangewood. Additionally, Vinny Zarrella noted that communication strategies have caused stress, confusion and uncertainty among youth receiving or working towards housing with SAHA.
- Nichole Gideon asked for County staff to clarify whether voting done as a CoC Board member was meant to be on behalf of the LEAC or solely based on Nichole Gideon’s own insight as a CoC Board member with lived experience of homelessness. In response to Reha Agar’s request to receive a record of all CoC Board voting from the past two years, Nichole Gideon requested this question be entered into the record of the meeting.
- Chair Robert “Santa Bob” Morse shared receipt of an email from Doug Becht, Director of the Office of Care Coordination, requesting LEAC participation in the upcoming Same Day Solutions Fair and requested for staff to explain more about the event. Chair Robert “Santa Bob” Morse expressed interest in having LEAC members serve as prime examples of people who have improved their situation and prove that there is “light at the end of the tunnel”. Chair Robert “Santa Bob” Morse asked LEAC members about willingness to participate in the Same Day Solutions Fair and inquired about a flyer for the event.

CONSENT CALENDAR

1. Approve the LEAC Meeting Minutes from February 5, 2025.

Paul Kaiser motioned to approve Consent Calendar Item 1. Nichole Gideon seconded the motion. Motion passed unanimously.

BUSINESS CALENDAR

1. **CoC Strategic Plan** – Felicia Boehringer, CoC Administrator, and Cameron Pastrano, CoC Staff Specialist, Office of Care Coordination

Felicia Boehringer and Cameron Pastrano provided a brief overview of the CoC Strategic Plan and shared a debrief of the February 5, 2025, LEAC meeting discussion. The Office of Care Coordination integrated feedback from the February 5, 2025, LEAC meeting into the Strategic Plan and outlined Aims, Objectives, and Strategies for the committee to consider.

Felicia Boehringer and Cameron Pastrano facilitated discussion for committee members to share what Strategic Aims or Objectives stand out and/or feel relevant to the work of the LEAC, if any updates are requested, and if any additional Strategies or Actions should be included. The Office of Care Coordination will compile feedback and notes from the discussion, and insights will be prepared for presentation at a future LEAC meeting and/or CoC Board meeting as CoC Strategic Plan implementation planning continues.

Committee Discussion:

- Nichole Gideon appreciated the inclusion of past discussions in the presentation according to which points best connected to each Objective, and noted significant feedback on Objective 1A. The goal is to compile key points for the CoC Board chair, recognizing areas for improvement. The Coordinated Entry System (CES) falls under the committee's purview, and if the LEAC strongly supports prioritizing its marketing or operations, that should be emphasized. The CoC Strategic Plan will help support the CoC Board Officers to develop a forward-looking plan. Collaboration, such as securing bus passes through Orange County agencies, could greatly support access to services. While not directly within the committee's control, advocating for provider partnerships could be a starting point to more effective collaboration.
- Elizabeth Flores also appreciated the presentation and asked if there is a navigation center in Orange County, noting that American Family Housing (AFH) has a navigation center in Whittier where people can access resources and information. A navigation center could help people without phones or computers navigate resources, including calling 2-1-1. Elizabeth Flores expressed interest in understanding how the CoC Strategic Plan works and agreed with Vice Chair Paul Kaiser's points. Elizabeth Flores recalled lived experience receiving hotel vouchers and bus passes from the Social Services Agency, emphasizing the importance of having a clear starting point for those in need.
- Chair Robert "Santa Bob" Morse supported the Strategies and Actions laid out, noting that the committee's focus is clear, and encouraged members to email Felicia Boehringer and Cameron Pastrano with any additional thoughts. Chair Robert "Santa Bob" Morse highlighted Orange County Transportation Authority (OCTA)'s changes to bus payment methods and suggested inviting someone from OCTA's board of directors to an LEAC meeting for discussion.
- Vinny Zarrella emphasized the need for improved access to CES, noting that many people in need, even those familiar with housing services, are unaware of CES. Vinny Zarrella highlighted Strategic Aim 1A, pointing out concerns with service provider grievance processes and the opportunity to provide further transparency and accountability for people accessing the homeless service system. Vinny Zarrella advocated for expanding public transit access for those experiencing homelessness, suggesting discussions with OCTA about buses transporting individuals to shelters, similar to existing safe-space initiatives for victims and survivors of human trafficking.
- Larry "Smitty" Smith expressed frustration with the lack of coordination in CES, noting that while the system has changed over time, there has been little explanation of how it currently works. The gap in understanding between those who were present when CES was first introduced and newer participants accessing CES has led to confusion, with case managers and outreach workers often unaware of CES's intended function. Larry "Smitty" Smith emphasized the need for training and policy changes to bridge this gap and align with strategic aims. Additionally, Larry "Smitty" Smith questioned the effectiveness of outreach efforts, highlighting concerns about the

distribution of information regarding specific programs and events in Orange County, stressing that collaboration and transparency need significant improvement.

- Vice Chair Paul Kaiser emphasized the need for better education and outreach about CES and housing programs, noting that many individuals remain unaware of CES eligibility or how to navigate the homeless service system. Vice Chair Paul Kaiser shared personal experience struggling to find resources, highlighting challenges with 2-1-1 referrals and lack of follow-up from street outreach agencies. Vice Chair Paul Kaiser stressed that people experiencing homelessness are motivated to change their situation but lack clear guidance and access points for resources. The upcoming Same Day Solutions Fair presents an opportunity for resource access, if proper outreach and marketing is facilitated to increase turnout and impact for people experiencing homelessness. Vice Chair Paul Kaiser suggested the County of Orange further collaborate with the Social Services Agency and other County agencies, similar to LA County, to create centralized navigation centers that efficiently connect individuals with housing, benefits, and essential resources.
- Reha Agar echoed concerns about CES inefficiencies, highlighting issues with service provider intake coordinators lacking knowledge about CES and individuals experiencing long waiting periods without follow-up. Reha Agar shared an example of an individual who experienced challenges with service providers when working towards housing. Reha Agar emphasized that the burden of case management should not fall on individuals in crisis, advocating for clearer roles and responsibilities for service providers and case managers as it relates to CES enrollment. Reha Agar questioned the purpose of CES and suggested a one-stop resource center for comprehensive support, noting issues with existing navigation centers, such as long wait times and understaffing.
- Jason Mercado inquired about what defines a navigation center.

2. CES Frequently Asked Questions (FAQ) Resource – James Bacon, CES Staff Specialist, Office of Care Coordination

James Bacon presented an update regarding the CES FAQ resource document, sharing that feedback provided by the LEAC in Fall 2024 was incorporated into the document and implementation planning process. Additionally, CES-specific training is being developed as a response to past recommendations from the LEAC to provide regular training on CES policies, procedures and processes to homeless service providers, Access Points and community partners. James Bacon requested feedback and thoughts from the LEAC regarding the CES FAQ resource.

Committee Discussion:

- Vinny Zarrella asked whether CES resources would be publicly accessible or limited to internal use, and expressed interest in sharing the information with the community. Vinny Zarrella inquired about the availability of the Coordinated Entry training site as a public resource. Additionally, Vinny Zarrella inquired how individuals can file grievances or seek direct assistance when Access Points fail to help.
- Vice Chair Paul Kaiser asked whether CES-referring agencies, which take applications but do not enter them into CES, would also receive training on CES. Since clients often ask questions at this stage, Vice Chair Paul Kaiser emphasized the need for referring agencies to have clear information to reassure them about CES processes. Vice Chair Paul Kaiser also questioned the messaging around CES "not being a waitlist," pointing out that while it prioritizes referrals, it still functions similarly to a waitlist with shifting preferences.

- Reha Agar stated that the first paragraph describing CES is well-worded, making it clear that CES is a way to prioritize the most vulnerable people to limited opportunities.
- Larry "Smitty" Smith asked if completion of CES training would be mandatory across the CoC and its agencies. Larry "Smitty" Smith emphasized that training should be mandatory, as too many individual policies within the system contradict the intended function of CES. Larry "Smitty" Smith argued that if CES is being changed, all service providers involved and accessing CES should receive training. Larry "Smitty" Smith also suggested removing the term "waitlist" entirely from the document, noting that the term "community queue" is used and its function is well explained in the first paragraph of the documentation.
- Nichole Gideon expressed appreciation for the opportunity to provide feedback and see it incorporated in the CES FAQ resource document. Nichole Gideon mentioned that advocating for CES can feel like a mystery, especially regarding how it will work and the length of time it may take. The goal, however, remains focused on helping clients. Nichole Gideon thanked the Office of Care Coordination and CES staff for their efforts and asked if CES has a grievance policy in place. Nichole Gideon also inquired about the impact grievances could have on agencies and whether it would affect the CES process. Finally, Nichole Gideon acknowledged that while it is difficult to predict what it would look like, exploring the possibility of a CES-specific grievance process might be worth considering.

3. CoC Updates – Felicia Boehringer, CoC Administrator, Office of Care Coordination

Felicia Boehringer shared an overview of key entities involved amidst the federal updates and provided a timeline of actions that took place in January. Felicia Boehringer also shared that Scott Turner was confirmed as U.S. Department of Housing and Urban Development (HUD) Secretary and reviewed actions taken since that appointment. Felicia Boehringer provided resources for staying up to date on information and advocacy opportunities as it relates to CoC Program and other federal funding for homeless services. Additionally, Felicia Boehringer provided updates on the Homeless Housing, Assistance and Prevention (HHAP) Program Round 5 award announcement and Round 6 funding availability announcement.

Nichole Gideon shared updates from the February 26, 2025, CoC Board meeting and Felicia Boehringer shared information about upcoming CoC Board and Committee meetings.

Committee Discussion:

- Nichole Gideon suggested moving CoC updates to the beginning of the meeting and inquired about having a grievance process that CoC committee members can utilize.
- Chair Robert "Santa Bob" Morse suggested that Miranda Mears and Elizabeth Flores speak with the Office of Care Coordination about the Same Day Solutions Fair update.

Meeting adjourned at 11:33 a.m.

Next Meeting: Wednesday, April 2, 2025, 10:00 a.m. to 11:30 a.m., at the County Administrative South (CAS) County Conference Center, 425 W. Santa Ana Blvd. Room 104, Santa Ana, CA 92701

Date: April 2, 2025

Subject: Homeless Management Information System (HMIS) Policies and Procedures Recommended Changes

Recommended Action:

- a. Approve the recommended revisions to the HMIS Policies and Procedures, inclusive of the Client Record Requests, Data Use and Disclosure, Data Integration, and Data Release policies, as well as updates to the Client Consent Form, Grievance Form, and Privacy Notice, as recommend by the Orange County HMIS Policies and Procedures Working Group, for review and approval by the Policies, Procedures and Standards Committee.

Background

At the August 2024, Continuum of Care (CoC) Meeting of the Board, the HMIS Policies and Procedures were approved, except for the Client Record Request policy. The CoC Board requested additional research be done to determine if the Client Record Request policy should be updated to allow clients to request their full record in HMIS. In addition to this Client Record Request policy, other policies and forms are being revised to reflect new guidance, update internal processes, or to provide clarity to users and clients.

2-1-1 Orange County (211OC), a key service of Orange County United Way, as the HMIS Lead for the Orange County CoC, convened the HMIS Working Group in November 2024 to propose revisions to the HMIS Policies and Procedures. These revisions were also shared with HMIS users and the CoC Board members during a feedback period from November 15, 2024, through December 1, 2024. On December 4, 2024, the HMIS Lead presented the proposed changes to the LEAC and received feedback. As the LEAC was only able to discuss the Client Record Request portion of the HMIS Policies and Procedures, the HMIS Lead and Office of Care Coordination committed to return to the LEAC to present on the remaining draft policies and forms.

Since December 2024, the HMIS Lead received feedback from various entities which is reflected in **Attachment A**. The LEAC is being asked to review and approve the additional recommended changes to the HMIS Policies and Procedures (**Attachment B**), as well as the HMIS Client Consent Form (**Attachment C**), Grievance Form (**Attachment D**), and the Privacy Notice (**Attachment E**). Changes to the HMIS Policies and Procedures and its connected forms are summarized below.

Attachment B: HMIS Policies and Procedures

- Agency Access Policy (Attachment B, page 13)
 - Agency Access HMIS Access Working Group membership updated to three to *five* members.
- Client Record Requests (Attachment B, page 24)
 - Clients requesting specific information from their HMIS record may work directly with an agency currently participating in HMIS to obtain that information

- Case notes can only be released by the agency that entered them, and may be released at the discretion of each agency
 - Clients that want to receive their full HMIS record can submit the request to any agency currently participating in HMIS
 - Case notes will not be included in these requests
 - Clients may request edits to data they contributed to HMIS (ex. responses to enrollment and assessment questions, documentation provided by the client)
 - Clients that wish to edit data for a specific project must contact the agency directly to request the edit
 - Clients cannot request edits for a specific project if the project is closed or the agency administering the project is no longer participating in HMIS
 - Data contributed by a participating agency (enrollment history, services, case notes, etc.) cannot be edited at a client's request
- Data Use and Disclosure (Attachment B, page 26)
 - Clarify that data may be used or disclosed without client consent for system administration, technical support, program compliance, analytical use, and other purposes as outlined in the Privacy Notice or required by law.
 - Note: the LEAC was unable to discuss this policy at the December 4, 2024, meeting.
- Data Release (Attachment B, page 26)
 - Clarify that client data will not be shared without consent except for uses and disclosures outlined in the Policies and Procedures or otherwise required by law.
 - The HMIS Lead, CoC Collaborative Applicant, and CES Administrators may release aggregate data about the CoC without organization or CoC Board permission
 - Note: the LEAC was unable to discuss this policy at the December 4, 2024, meeting.
- Data Integration (Attachment B, page 29)
 - Agencies must be approved for HMIS access before submitting any data integration requests.
 - Agencies requesting to integrate their own HMIS data with a case management software will be reviewed and approved by the HMIS Lead
 - Agencies requesting to integrate HMIS data from other agencies that they do not manage will be reviewed and approved by the CoC Board
 - Requests to integrate Coordinated Entry System data will be reviewed and approved by the HMIS Lead and the CES Lead
 - Updated language around new API process
 - Data normalization tasks added
 - Note: the LEAC was unable to discuss this policy at the December 4, 2024, meeting.

Attachment C: Client Consent Form

- Clarify that the client is consenting for their data to be shared with other service providers/organizations in HMIS
- Signing the consent form also means that the client's data may be included in data requests approved by the CoC Board
- Note: the LEAC was unable to discuss this policy at the December 4, 2024, meeting.

Attachment D: Grievance Form

- Directed grievances with the Coordinated Entry System to the Office of Care Coordination
- Provided additional details on what is considered an HMIS grievance
- Note: the LEAC was unable to discuss this policy at the December 4, 2024, meeting.

Attachment E: Privacy Notice

- Clarifies that there are situations where client data may be disclosed without the client's consent
- Clients that submit a Client Record Request will have their full record sent to the agency that submitted the request on their behalf
- Note: the LEAC was unable to discuss this policy at the December 4, 2024, meeting.

Should the LEAC approve the recommended changes to the HMIS Policies and Procedures, as well as its subsequent revised forms, the item will go to the April 8, 2025, Policies, Procedures and Standards (PPS) Committee meeting for review and recommendation, and then to the CoC Board for final approval.

Attachments

Attachment A – HMIS Policies and Procedures Feedback Received

Attachment B – HMIS Policies and Procedures (Redlined Version)

Attachment C – HMIS Client Consent Form (Redlined Version)

Attachment D – HMIS Grievance Form (Redlined Version)

Attachment E – HMIS Privacy Notice (Redlined Version)

Homeless Management Information System (HMIS) Policies and Procedures
 Feedback Received from December 2024 – March 2025

Lived Experience Advisory Committee (LEAC) Feedback Received

Policy	Feedback	Response	Additional Details
Client Record Requests	Client Record Requests should include all data in the client’s file.	Revised policy: Clients that want to receive their full HMIS record may submit a record request by contacting a Service Provider currently participating in HMIS.	Clients will be able to select the types of data they would like to review. Case notes are not included in the full record request submitted to the HMIS Lead.
Client Record Requests	The process to request records should be a single step, and streamlined to make the process easy for the client.	Revised policy: Creation of Client Record Request Form	N/A
Client Record Requests	Case notes are a common request by clients; however, it is important to balance the potential impact to the system and service providers if case notes are provided.	Revised policy: Clients requesting specific information in their HMIS record may work directly with an agency participating in HMIS.	Case notes may be shared by the agency that entered them at the agency’s discretion. Case notes are not included in the full record request submitted to the HMIS Lead
Client Record Requests	Clients need to be made aware that it’s possible to request their HMIS record.	211OC will update training materials and provide regular reminders to agencies that clients should be made aware of this right.	N/A
Client Record Requests	Service Providers need to be trained on how to help the client get the information they want.	Revised policy: Clients requesting specific information in their HMIS record may work directly with an agency participating in HMIS.	211OC will update training materials to provide guidance on how to find information that a client may request from their record.
Client Record Requests	Clients are interested in checking their Coordinated Entry System (CES) status.	Revised policy: Clients requesting specific information in their HMIS record may work directly with an agency participating in HMIS.	N/A

Item 2. Attachment A

Additional Feedback Received

HMIS Policies and Procedures Working Group Feedback

- Concern around liability for agencies if case notes are released to clients
- More accessible data could improve client relationship
- HMIS Users would like more guidance around case notes, data entry, and how to talk to clients about their data, and suggested limiting case notes in client record requests to those entered after the training was completed
- Sharing location data may be a safety concern if the client doesn't properly dispose of that information
- Full HMIS record may be too much information for clients
- Allow clients to select what data they would like to see

HMIS User Feedback

- Edit Client Consent Form to change "agencies contributing data to HMIS" to "agencies with access to HMIS"
- More guidance for agencies on how to process client record requests

Policies, Procedures and Standards (PPS) Committee Feedback

- Train staff to assist clients with simple requests that don't require their full HMIS record
- Find out how agencies are currently handling record requests, and how many record requests agencies are receiving
- The record request process should be client-focused

Client Record Request Survey Feedback

- Most agencies are sending HMIS record requests to the HMIS team
- Some agencies provide clients with copies of their paper files if asked
- Agencies receive very few HMIS client record requests
- The client record request process should be as efficient as possible

Orange County HMIS Policies and Procedures

~~AUGUST 2024~~ MARCH 2025

Orange County United Way/2-1-1 Orange County
WWW.OCHMIS.ORG | WWW.UNITEDWAYOC.ORG | WWW.211OC.ORG

Orange County HMIS Policies and Procedures

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Item 2. Attachment B

Orange County HMIS Policies and Procedures

Key Terms and Acronyms

All documents referenced in the HMIS Policies and Procedures can be found on the HMIS Documents page of the OC HMIS Information website unless otherwise noted.

Term	Acronym (if applicable)	Definition
Orange County United Way/2-1-1 Orange County	OCUW/211OC	Homeless Management Information System (HMIS) Lead Agency for Orange County Continuum of Care (CoC)
Agency Administrator	AA	The HMIS User designated by their agency to serve as Agency Administrator is responsible for training new HMIS Users and overseeing data quality management, among other duties described in the Policies and Procedures
Agency Agreement		The agreement form between OC HMIS participating agencies and the HMIS Lead Agency that specifies the rights and responsibilities of each party regarding the use of HMIS.
Annual Homeless Assessment Report	AHAR	The AHAR is a national-level report that provides information about homeless service providers, people and households experiencing homelessness, and various characteristics of that population. It informs strategic planning for federal, state, and local initiatives designed to prevent and end homelessness. The AHAR is submitted to Congress on an annual basis.
Chronically Homeless	CH	<p>In order to be eligible for housing restricted to chronically homeless individuals or families under the CoC program, participants must meet the definition of chronically homeless. The definition of chronically homeless is:</p> <ul style="list-style-type: none"> • A homeless individual with a disability as defined in section 401(9) of the McKinney-Vento Assistance Act (42 U.S.C. 11360(9)), who: <ul style="list-style-type: none"> ○ Lives in a place not meant for human habitation, a safe haven, or in an emergency shelter, and ○ Has been homeless and living as described for at least 12 months* or on at least 4 separate occasions in the last 3 years, as long as the combined occasions equal at least 12 months and each break in homelessness separating the occasions included at least 7 consecutive nights of not living as described. • An individual who has been residing in an institutional care facility for less, including jail, substance abuse or mental health treatment facility, hospital, or other similar facility, for fewer than 90 days and met all of the criteria of this definition before entering that facility**; • A family with an adult head of household (or, if there is no adult in the family, a minor head of household) who meets all of the criteria of this definition, including a family whose

Orange County HMIS Policies and Procedures

		composition has fluctuated while the head of household has been homeless.
Client Identifying Information	CII	Client Identifying Information, also known as Personal Protected Information (PPI), is a category of sensitive information that is associated with an individual person. This information should be accessed only on a strict need-to-know basis, handled and stored with care. This category includes but is not limited to: First names, last names, dates of birth, and Social Security Numbers.
Continuum of Care	CoC	The Continuum of Care is a collection of nonprofits and agencies that come together to promote community wide commitment to the goal of ending homelessness; promote access to and affect utilization of mainstream programs by homeless individuals and families; and optimize self-sufficiency among individuals and families experiencing homelessness.
Continuum of Care Board	CoC Board	The Orange County Continuum of Care Board is the governing body for the Orange County CoC. They are committed to the goal of ending homelessness and are organized to carry out the responsibilities required under the CoC Program regulations, 24 CFR Part 578.
Continuum of Care Collaborative Applicant	CoC Collaborative Applicant	The Orange County CoC designated the County of Orange as the Collaborative Applicant. The CoC Collaborative Applicant is tasked with coordinating the development of the CoC system, its planning, and supporting the various functions and activities as required by the HEARTH Act.
Continuum of Care Program	CoC Program	The CoC Program is designed to assist individuals (including unaccompanied youth) and families experiencing homelessness and to provide the services needed to help such individuals move into transitional and permanent housing, with the goal of long-term stability. More broadly, the program is designed to promote community-wide planning and strategic use of resources to address homelessness; improve coordination and integration with mainstream resources and other programs targeted to people experiencing homelessness; improve data collection and performance measurement; and allow each community to tailor its program to the particular strengths and challenges within that community.
Coordinated Entry System	CES	A project that administers the continuum’s centralized or coordinated process to coordinate assessment and referral of individuals and families seeking housing or services, including the use of a comprehensive and standardized assessment tool.
Coverage Rate		Coverage rate refers to the percentage of beds targeted to serve homeless clients in a geographic area that are captured in the Homeless Management Information System (HMIS) divided by the total number of beds targeted to serve homeless clients in the geographic area (excluding beds targeted to serve domestic violence clients). Coverage rate estimates are used to project a total homeless count if there are homeless service providers in the jurisdiction that do not participate in HMIS.

Orange County HMIS Policies and Procedures

Day Shelter	DS	A project that offers daytime facilities and services (no overnight lodging) for persons who are experiencing homelessness.
Department of Health and Human Services	HHS	The U.S. Department of Health and Human Services (HHS), also known as the Health Department, is a cabinet-level department of the U.S. Federal government. The Health Department's goal is to protect the health of all Americans and provide essential human services.
Department of Housing and Urban Development	HUD	The U.S. Department of Housing and Urban Development (HUD) is a Cabinet department in the Executive branch of the US. Federal government. HUD's goal is to create strong, sustainable, inclusive communities and quality affordable homes for all.
Emergency Shelter – Entry Exit	ES - EE	A project that offers temporary shelter (lodging) for people experiencing homelessness in general or for specific populations of people experiencing homelessness. Requirements and limitations may vary by program and will be specified by the funder. The EE shelter project type should be used for all shelters that collect Universal Data Elements (UDEs) and certain Program-Specific Data Elements (PSDEs) at project start and project exit, including projects that require or strongly encourage a continuous stay while a client resolves their experience of homelessness. In EE shelters, length of stay is calculated based on the number of nights between project start and project exit, and performance measures will include changes from project start and project exit Data Collection Stages.
Emergency Shelter – Night-by-Night	ES - NbN	The NbN emergency shelter type may be used by some high-volume shelters and shelters where a significant proportion of clients spend a night at the shelter as needed on an irregular basis. This project type relies on creating a separate record of each individual date on which a client is present in the shelter as a means for calculating length of stay and implies that the emergency shelter is generally unable to collect as much client data at project exit as an EE emergency shelter for tracking utilization. In NbN shelter:(1) entry information is collected the first time that a client stays at the shelter (2) the project records every discrete date (or series of dates) that the client resides in the shelter; (3) the HMIS maintains historical data on the nights a client is sheltered; (4) the client may be exited when shelter staff has information that indicates that the client is unlikely to return to the shelter or the system may be designed to automatically generate an exit (dating back to the day after the last bed night) after an extended absence; and (5) for reporting purposes, a client's length of stay in the project will be based on the actual number of bed nights and not on the period of time from entry to exit.
Emergency Solutions Grants Program	ESG	The ESG program provides funding to: <ul style="list-style-type: none"> • Engage homeless individuals and families living on the street; • Improve the number and quality of emergency shelters for homeless individuals and families; • Help operate these shelters; • Provide essential services to shelter residents; • Rapidly re-house homeless individuals and families; and

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		<ul style="list-style-type: none"> Prevent families and individuals from becoming homeless.
Health Insurance Portability and Accountability Act of 1996	HIPAA	The Health Insurance Portability and Accountability Act of 1996, particularly the Privacy Rule under Title II, regulates the use and disclosure of Protected Health Information (PHI) held by covered entities and business associates. HIPAA is the base operational privacy rule on which the Orange County HMIS privacy rule is structured.
HMIS Lead Agency		The HMIS Lead Agency is an agency, organization, or government department designated by the CoC Board to administer and manage the HMIS for the CoC jurisdiction.
Homeless Management Information System	HMIS	A data system that meets U.S. Department of Housing and Urban Development's requirements and is used to collect client-level data and data on the provision of housing and services to homeless individuals and families and persons at risk of homelessness. The HMIS is also the primary reporting tool for HUD homeless service grants as well as for other Federal, State and local government streams of funding related to homelessness. HMIS data is used to better inform homeless policy and analyze program and system impact in addressing homelessness.
Homelessness Prevention	HP	A project that offers services and/or financial assistance necessary to prevent individuals and families from experiencing homelessness, including moving into an emergency shelter or place not meant for human habitation.
Housing Inventory Count	HIC	The Housing Inventory Count (HIC) is a point-in-time inventory of housing programs within a CoC that provide beds and units dedicated to serve people experiencing homelessness (or for permanent housing projects, were experiencing homelessness at entry). The project types included in the HIC are Emergency Shelter, Transitional Housing, Rapid Re-housing, Safe Haven, and Permanent Supportive Housing. The US Department of Housing and Urban Development (HUD) requires the submission of the HIC on an annual basis.
Housing Opportunities for Persons with AIDS Program	HOPWA	HOPWA provides housing assistance and related supportive services for persons with HIV/AIDS, and family members who are homeless or at risk of homelessness. This project has different project reporting requirements than the other HUD funded projects described in the Policies and Procedures.
Interagency Data Sharing Consent Form		Allows client-level data and enrollment data to be shared among OC HMIS Participating Agencies. HOPWA funded projects are exempt from the data sharing mandate due to privacy laws protecting clients' HIV status.
Length of Stay	LOS	The number of days between the beginning of services and the end of services. It is calculated using entry and exit dates or shelter stay dates, depending on the project's method of tracking bed nights.

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Longitudinal Systems Analysis	LSA	The LSA is a report submitted by each CoC on an annual basis, and includes demographic, performance, and household composition information, as well as patterns of system use. The LSA from each CoC is consolidated to create the AHAR that is submitted to Congress.
Other (project type)		A project that offers services, but does not provide lodging, and cannot otherwise be categorized as another project type, per above. Any project that provides only stand-alone supportive services (other than outreach) and has no associated housing outcomes should be categorized as 'Other.' For example, a project funded to provide child care for persons in permanent housing or a dental care project funded to serve homeless clients should be typed 'Other.' A project funded to provide ongoing case management with associated housing outcomes should be typed 'Services Only.'
Participating Agencies		Agencies, organizations or local government departments that actively participate in HMIS through input of client-level data and project information.
PH - Housing Only	OPH	A project that offers permanent housing for persons who are experiencing homelessness, but does not make supportive services available as part of the project.
PH – Housing with Services (no disability required for entry)	OPH	A project that offers permanent housing and supportive services to assist homeless persons to live independently, but does not limit eligibility to individuals with disabilities or families in which one adult or child has a disability.
PH - Permanent Supportive Housing (disability required for entry)	PSH	A project that offers permanent housing and supportive services to assist chronic homeless persons with a disability (individuals with disabilities or families in which one adult or child has a disability) to live independently.
PH - Rapid Re-Housing	RRH	A permanent housing project that provides housing relocation and stabilization services and short- and/or medium-term rental assistance as necessary to help a homeless individual or family move as quickly as possible into permanent housing and achieve stability in that housing.
PH - Rapid Re-Housing Subtypes		RRH: Services Only - A RRH project that provides services only and does not provide ongoing rental assistance or support any inventory for participants. RRH: Housing with or without services - A RRH project that offers ongoing rental assistance that may or may not be accompanied by financial or other supportive services to participants.
Point in Time Count	PIT	A point-in-time count is an unduplicated count on a single night during the last ten days of January of the people in a community who are experiencing homelessness that includes both sheltered and unsheltered populations. An annual sheltered PIT count is conducted using HMIS data and other sources. A biannual unsheltered PIT is conducted on odd years.

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Policies, Procedures, and Standards Committee	PPS Committee	The PPS Committee will function as an advisory group to the CoC Board. This committee aligns with the intent of ensuring that the CoC has clearly documented policies and standards for process review, policy formation, assessment of current policies and procedures and formation and conduct of committees in the service of the CoC, Coordinated Entry System (CES) and Homeless Management Information System (HMIS). The PPS Committee will support with creating a clear structure for policy development and subsequent revisions, monitoring and vetting work done through committees, work groups and ad hoc groups will create efficiencies and improve the amount of work that the CoC Board can accomplish.
Project Types		<p>A project is to be assigned a 'Project Type' based on the lodging or service it is providing. The project type selected directly impacts data collection and reporting requirements. The U.S. Department of Housing and Urban Development defines these Project Types in HMIS:</p> <ul style="list-style-type: none"> • Homelessness Prevention • Street Outreach • Emergency Shelter - Entry Exit • Emergency Shelter - Night-by-Night • Day Shelter • Transitional Housing • Safe Haven • PH - Rapid Re-Housing • PH - Permanent Supportive Housing (disability required for entry) • PH – Housing with Services (no disability required for entry) • PH - Housing Only • Coordinated Entry • Services Only • Other
Projects for Assistance in Transition from Homelessness	PATH	PATH is funded by the Substance Abuse and Mental Health Services Administration (SAMHSA). It provides services to mentally ill homeless people, primarily through street outreach, to link them to permanent community housing. This project has different reporting requirements than HUD funded projects and uses HMIS to collect this information.
Runaway Homeless Youth program	RHY	The Runaway and Homeless Youth Program (RHY) supports street outreach, emergency shelters and longer-term transitional living and maternity group home programs to serve homeless youth (up to age 25). The program is managed by the Family and Youth Services Bureau (FYSB).
Safe Haven	SH	A project that offers supportive housing that (1) serves hard to reach homeless persons with severe mental illness who came from the streets and have been unwilling or unable to participate in supportive services; (2) provides 24-hour residence for eligible persons for an unspecified period; (3) has an overnight capacity limited to 25 or fewer persons; and (4) provides low demand services and referrals for the residents.

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Services Only	SSO	A project that offers only stand-alone supportive services (other than outreach) to address the special needs of participants (such as child care, employment assistance, and transportation services) and has associated housing outcomes.
Street Outreach	SO	A project that offers services necessary to reach out to unsheltered homeless people, connect them with emergency shelter, housing, or critical services, and provide urgent, non-facility-based care to unsheltered homeless people who are unwilling or unable to access emergency shelter, housing, or an appropriate health facility. Only persons who are “street homeless” should be entered into a street outreach project. Projects that also serve persons other than “street homeless” must have two separate projects to be set up in an HMIS – one ‘Street Outreach’ and the other ‘Services Only.’
Supportive Services for Veteran Families Program	SSVF	This program is overseen by the VA, and the purpose is to provide supportive services grants to private non-profit organizations and consumer cooperatives who will coordinate or provide supportive services to very low-income veteran families who are residing in permanent housing, are homeless and scheduled to become residents of permanent housing within a specified time period, or after exiting permanent housing, are seeking other housing that is responsive to such very low-income veteran family’s needs and preferences.
System Performance Measures	SPM	The HUD System Performance Report measures the performance of a CoC as a whole as mandated by the 2009 HEARTH Act. The System Performance Report analyzes the performance of Safe Haven, Street Outreach, Emergency Shelter, Transitional Housing, and Permanent Housing (including Permanent Supportive Housing, Rapid Re-Housing, and Other Permanent Housing) project types in the Orange County CoC that participate in HMIS.
Transitional Housing	TH	A project that provides temporary lodging and is designed to facilitate the movement of homeless individuals and families into permanent housing within a specified period of time, but no longer than 24 months. Requirements and limitations may vary by program and may be specified by the funder.
U.S. Department of Veterans Affairs	VA	The U.S. Department of Veterans Affairs provides patient care and federal benefits to veterans and their dependents.
User Agreement		The agreement form between individual users and the HMIS Lead Agency that outlines a user’s responsibilities when using HMIS. This form is signed on the user’s first log-in to HMIS, and again every year the user’s account is active.
Veteran Affairs Supportive Housing	VASH	The HUD-Veterans Affairs Supportive Housing (HUD-VASH) program combines Housing Choice Voucher (HCV) rental assistance for homeless Veterans with case management and clinical services provided by the U.S. Department of Veterans Affairs (VA). VA provides these services for participating Veterans at VA medical centers (VAMCs) and community-based outreach clinics.

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Orange County United Way: HMIS Lead Agency

The Orange County CoC has designated Orange County United Way as the Homeless Management Information System (HMIS) Lead Agency. Orange County United Way's key service, 2-1-1 Orange County (211OC), connects thousands of OC residents with health and human service resources, and administers the Homeless Management Information System (HMIS) for the Orange County CoC. As such, 211OC is tasked with assisting the Orange County CoC with:

- Developing and implementing a privacy plan, security plan and data quality plan for the CoC HMIS
- Ensuring consistent participation of State, Federal and local government funded recipients and sub recipients in HMIS
- Ensuring HMIS is administered in compliance with requirements prescribed by the U.S. Department of Housing and Urban Development (HUD)
- Ensuring the HMIS operates efficiently and effectively to promote agency participation and system coordination
- Providing system, agency, and project-level analysis of utilization and performance across the CoC

HMIS Lead Agency Contact Information:

OC HMIS Information Website	http://ochmis.org/
OC HMIS Training Website	http://training.ochmis.org/
OC HMIS Login	https://oc.clarityhs.com/login
HMIS Helpdesk	http://ochmis-211oc.happyfox.com/home

I. Background & Purpose

The Homeless Management Information System (HMIS) is the electronic data collection system utilized by the Orange County CoC to comply with the responsibilities outlined in 24 CFR 578.7(b) for designating and operating an HMIS. HMIS is the local information technology system requirements that U.S. Department of Housing and Urban Development (HUD) funding recipients and subrecipients use for homeless assistance programs as authorized by the McKinney-Vento Homeless Assistance Act. The Homeless Emergency Assistance and Rapid Transition to Housing (HEARTH) Act codifies in law certain data collection requirements integral to HMIS. The HEARTH Act requires that HUD ensure operation of and consistent participation by recipients and sub-recipients in an HMIS compliant software. Current HMIS standards are included in the 2004 Technical Standards and the 2010 Data Standards.

HUD and other planners and policymakers use aggregate HMIS data to better inform homeless policy and decision making at the federal, state and local government levels. HMIS enables HUD to collect aggregate data at the national-level on the extent and nature of homelessness over time. Specifically, an HMIS can be used to produce an unduplicated count of homeless persons, understand patterns of service use, and measure the effectiveness of homeless programs. Data on homeless persons is collected and

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maintained at the local level. HMIS implementations can encompass geographic areas ranging from a single city to an entire state.

The HEARTH Act also requires that all communities have an HMIS with the capacity to collect unduplicated counts of individuals and families experiencing homelessness. Through HMIS, a community should be able to collect information from projects serving homeless families and individuals to use as part of their needs analyses and to establish funding priorities. The HEARTH Act also codified into law certain data collection requirements integral to HMIS. With enactment of the HEARTH Act, HMIS participation became a statutory requirement for recipients and subrecipients of CoC Program and Emergency Solutions Grants (ESG) funds.

An HMIS can be used to:

- Produce an unduplicated count of persons experiencing homelessness for each CoC
- Describe the extent and nature of homelessness locally, regionally, and nationally
- Identify patterns of service use
- Measure program effectiveness

The ensuing set of HMIS Policies and Procedures documents the Orange County CoC's operation of its HMIS and acts as a guide to its continuing operation in compliance with the CoC and ESG Regulations and Interim Rules. The HMIS Policies and Procedures have been developed in mind to further the following HMIS Goals:

- Assist in facilitating the coordination of care for homeless and at risk of homelessness populations.
- Ensure accurate data about the nature of homeless services and clients in the Orange County CoC.
- Ensure accurate data about the nature and extent of prevention and diversion services provided to households at risk of homelessness in the Orange County CoC.
- Collect data that fulfills federal, state and local requirements for homeless reporting and inform system gaps and resource development

II. Policies and Procedures Summary

This document serves as the minimum standards of participation in the Orange County HMIS and represents general best practices. Operational standards in this document are not intended to supersede grant specific requirements and operating procedures as required by funding entities. PATH, HOPWA, and VA providers have operating rules specific to the U.S. Departments of Health and Human Services (HHS) and Veterans Affairs (VA).

The HMIS Lead Agency will update this document at any time when necessary due to HUD or local CoC changes. [The latest versions of the HUD HMIS Data Standards Manual and Data Dictionary](#) are the basis for all programming specifications and requirements of HMIS. Updates will be brought to the Policies, Procedures and Standards Committee and the CoC Board for approval. Upon approval, updates to this

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document will be announced to all Agency Administrators via email and posted on the OC HMIS website. The most recently updated version of this document is the only version that is considered valid and supersedes all previous versions.

III. HMIS Lead Agency Responsibilities

- a. Provide HMIS User training as needed.
- b. Develop and maintain training materials for all HMIS training.
- c. Develop and maintain client forms, including client and privacy forms.
- d. Create HMIS User accounts and control access to HMIS.
- e. Communicate all system-wide changes to Agency Administrators via direct emails, announcements on ochmis.org and/or User Meetings.
- f. Resolve HMIS-related grievances that cannot be resolved by the agency working with the client. Clients can submit a grievance by completing the [Grievance Form](#) or calling 714-589-2360.
- g. Host HMIS User Meetings open to all HMIS Users to discuss the use and implementation of HMIS. Please refer to the [OC HMIS calendar](#) for additional meeting details.
- h. Host the Data and Performance Management meetings, which are open to all HMIS Agency Administrators, and focus on performance and policies related to HMIS. Please refer to the [OC HMIS calendar](#) for additional meeting details.
- i. Provide technical support to Agency Administrators via the HMIS Help Desk.
- j. Serve as intermediary between Participating Agencies and the HMIS vendor.
- k. Alert the HMIS vendor to all HUD deadlines for data standards changes, required reporting specifications, etc.
- l. Complete HMIS software testing, as needed.
- m. Submit tickets on behalf of Participating Agencies when HMIS Lead Agency is not able to resolve a technical issue.
- n. Ensure OC HMIS will be available to HMIS Users at a minimum of 99.95 percent of the monthly billing cycle. The HMIS Lead Agency will inform all HMIS Users of any planned or unplanned service outages via direct email or announcement on ochmis.org.
- o. Facilitate access to system level data.
- p. Establish HMIS participation fees based on appropriate criteria in collaboration with the CoC Collaborative Applicant and as approved by the CoC Board.
- q. Serve as Lead for all HUD-required reporting involving HMIS data (HIC and Sheltered PIT, System Performance Measures, Longitudinal Systems Analysis, etc.).
- r. Publish system, agency, and project level reports from HMIS as needed.

IV. Help Desk Policies

- a. HMIS Help Desk hours are Monday through Friday from 9AM to 5PM, excluding holidays.
- b. Only designated Agency Administrators may submit requests for technical support to the HMIS Help Desk. The methods of contacting the HMIS Help Desk are below. Agency Administrators should not directly contact individual members of the HMIS team.
 - a. HMIS Help Desk phone number 714-589-2360
 - b. HMIS Help Desk website <http://ochmis-211oc.happyfox.com/home>

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- c. HMIS Staff strives to answer all technical support tickets within three (3) business days, but workload, holidays and number of available staff may delay response. Agency Administrators are responsible for raising technical issues in a timely manner, keeping in mind that their request may not be solved same day.
- d. Client identifying information should never be sent to the [HMIS Help Desk](#). This includes but is not limited to: First Names, Last Names, Dates of Birth, or Social Security Numbers. If you need to discuss a specific client only the client's HMIS unique ID should be sent. Agency Administrators who repeatedly submit client identifying information to the [HMIS Help Desk](#) may be subject to corrective action.

V. Agency Access

- a. In order to be granted HMIS Access, an organization must be able to meaningfully contribute information related to homeless assistance projects and/or homelessness prevention projects to the Orange County CoC. Homeless assistance projects include Emergency Shelter, Transitional Housing, Permanent Housing, and Street Outreach projects. These projects offer assistance to clients who are entering from a literal homeless situation. Homelessness prevention projects provide assistance to clients who are at risk of homelessness.
- b. An organization that at minimum meets one of the following criteria will be granted access to HMIS:
 - a. Manage at least one homeless assistance housing project, including Emergency Shelter, Transitional Housing, and Permanent Housing projects, that will be contributing data to HMIS. Adding these project types to HMIS will increase the CoC's bed coverage which is a priority for the CoC.
 - b. Receive federal and/or state funding for the implementation and operations of a homeless assistance project and/or homelessness prevention project that requires HMIS participation.
 - i. Organizations receiving funding that requires HMIS participation will be given data entry access, but this does not necessarily include data sharing with other agencies. Law enforcement agencies and legal service providers receiving funding that requires HMIS participation will be given data entry access only.
 - ii. Victim Service Providers and legal service providers that are recipients of funds requiring participation in HMIS, but do not directly enter data into an HMIS, must use a comparable database. A comparable database allows the collection of the aggregate data needed for reporting while respecting the sensitive nature of the client-level information if it complies with all HMIS data, technical and security standards.
 - iii. Victim Service Providers receiving CoC Program funds or ESG Program funds may request up to five licenses for read-only access in HMIS for the purpose of care coordination. The provider will be required to pay the User Fee for 1 – 5 users as outlined in the Participating Agency Requirements section.
- c. Organizations that do not meet the above listed criteria will be required to complete the HMIS 101 online course and submit an [HMIS Access Application](#) for review and consideration by the HMIS Access Working Group to further evaluate the request.

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- a. The HMIS Access Working Group will be comprised of three to ~~four~~ five CoC General members recommended by the current HMIS Access Working Group members, the CoC Collaborative Applicant and the HMIS Lead Agency, and appointed by the CoC Board. The HMIS Access Working Group will meet monthly or on an as-needed basis for the purposes of evaluating HMIS Access Applications.
- b. When vacancies occur, the Office of Care Coordination as the CoC Collaborative Applicant will send an email via the CoC distribution list notifying CoC General Membership of vacancies in the HMIS Access Working Group and soliciting interested participants. Additionally, as needed, the HMIS Access Working Group, CoC Collaborative Applicant and the HMIS Lead Agency will outreach to qualified CoC General Members individually to solicit interested participants. The CoC will confirm interest from CoC General Members to be considered for the HMIS Access Working Group. The HMIS Access Working Group, the CoC Collaborative Applicant and the HMIS Lead Agency will then review all interested candidates to select the most qualified member(s) for the working group to be recommended to the CoC Board for appointment.
 - i. Qualifications:
 1. Individual must belong to an agency that is an Orange County CoC General Member or be an Individual General Member
 2. At least two (2) years of experience with the Homeless Management Information System (HMIS) preferred
 3. At least two (2) years of experience with the Orange County homeless service system preferred
 4. Works collaboratively with team members and can provide constructive feedback
 5. Ability to make informed decisions based on objective analysis of available information
 6. Desire to positively impact the Orange County homeless system
 7. Understanding of the Orange County CoC's responsibility of promoting access and effective utilization of mainstream programs
 8. Have the availability to commit to serve a minimum term of one year
- d. The HMIS Access Application requires organizations to detail how their organization's participation in HMIS will be able to meaningfully contribute information related to homeless assistance projects or homelessness prevention projects to the Orange County CoC and how the HMIS access will improve the provision of homeless services in the Orange County CoC. The HMIS Access Application will also assist the HMIS Access Working Group to evaluate the organization's HMIS Data Sharing capabilities.
- e. Organizations that meet the requirements for HMIS Access must be in compliance with all other aspects of the HMIS Policies and Procedures, including the HMIS Participating Agency Agreement and the Data Sharing Agreement.
- f. Agencies approved for HMIS access must begin entering data into HMIS within 90 days of approval. After this time the agency's approval will expire and the agency will need to resubmit their application to gain HMIS access.

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- g. Agencies that are denied access to HMIS by the HMIS Access Working Group may request an appeal. The purpose of the appeal is to ensure the integrity of the review process for the agency's application. Appeals must be submitted to the HMIS Help Desk.
 - a. Upon receipt of the request, the HMIS Lead Agency will complete the Agency Access Process Review, and determine whether the review process was followed appropriately. If all steps of the review process were followed, the decision by the Agency Access Working Group stands. If all steps in the review process were not followed, a sub-set of the Policies, Procedures, and Standards Committee will provide a secondary review and make a final determination regarding the agency's application. This decision cannot be appealed, but agencies denied access to HMIS may re-apply in the future if they can effectively address the reasons their initial application was denied.
- h. The HMIS Access Working Group and the HMIS Lead Agency reserve the right to remove HMIS Access if the access is not being used to improve service provision for clients or contributing meaningful data to the Orange County CoC. Examples of unacceptable uses of HMIS include but are not limited to:
 - a. Using HMIS data to monitor the whereabouts or service utilization of participants for purposes outside of housing-focused case management
 - b. Using HMIS data outside of a business need
 - c. Using data in HMIS as a reason to not serve a client that is not related to eligibility criteria (ie. substance use history, mental health issues, etc.)
 - d. Sharing client identifying data with persons or groups that don't have access HMIS

VI. Participating Agency Requirements

- a. Submit an HMIS Participating Agency Agreement
 - a. Participating agencies must submit an HMIS Participating Agency Agreement, signed by the agency's Executive Director or equivalent leadership before the agency and/or projects can be set up in HMIS.
 - b. This document must be renewed annually with new agreements being signed during the annual HMIS Agency Audit.
- b. Executive leadership must confirm the designation of two staff to be assigned the Agency Administrator role at the time of agency setup.
 - a. If Agency Administrators must be designated after initial agency setup, executive leadership must contact the HMIS Lead Agency (via the online HMIS Help Desk) to notify the HMIS Lead Agency of the new Agency Administrators.
 - b. The following information is required of all Agency Administrators:
 - i. Full name.
 - ii. Work email address that includes the staff name. Personal emails will not be allowed. Shared email accounts or general agency email are also not allowed.
 - iii. Work phone number.
- c. Comply with all federal, state and local government laws and regulations regarding non-profit data collection, and with all HMIS policies and procedures including the latest versions of the

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HMIS Data and Technical Standards Final Notice and the HMIS Data Standards Manual relating to the collection, storage, retrieval, and dissemination of client information.

- d. When applicable, participating agencies may be obligated to comply with the Health Insurance Portability and Accountability Act (“HIPAA”), and/or with 42 CFR Part 2, regarding the confidentiality of substance use disorder patient records. Where possible, these agencies should comply with HIPAA, with 42 CFR Part 2, and with the HMIS Privacy Plan. If it is not possible to reconcile all of the applicable rules, then agencies should comply with the more stringent regulations. Agencies and programs are responsible for ensuring HIPAA and 42 CFR Part 2 compliance.
- e. Abide by the Violence Against Women and Department of Justice Reauthorization Act of 2005 (VAWA).
- f. Participate in an annual HMIS Agency Audit to ensure compliance with the HMIS Policies and Procedures. Review the [Agency Audit Form](#) for an overview of the items included in the audit. Please note that the audit form may change to accommodate changes in requirements.
 - a. The HMIS Lead Agency will audit all HMIS Participating Agencies on a yearly basis, regardless of funding source. The CoC Collaborative Applicant may also attend audits.
 - b. The HMIS Lead Agency will include the audit checklist in the scheduling email sent to the Agency Administrator two (2) weeks prior to the audit.
 - c. Agencies are expected to be prepared for the audit by completing all items included in the scheduling email.
 - d. An Agency Administrator must be present during the audit.
 - e. Agencies and the HMIS Lead Agency can request to reschedule the Agency Audit up to one (1) business day before the audit is scheduled. For example, the agency will notify the HMIS Lead Agency by end of day Monday that the agency will need to reschedule an audit for Tuesday. Requests to reschedule or cancellations that occur after that window has passed are considered unsuccessful attempts to contact the agency. Failing to attend the scheduled audit is also considered an unsuccessful attempt to contact the agency.
 - i. After 2 unsuccessful attempts to contact the agency the HMIS Lead Agency will reach out to the agency’s Executive Director or other leadership.
 - f. If the agency remains unresponsive after attempting to contact the agency’s leadership twice the agency will fail the audit for that year.
 - g. If any deficiencies are found in the audit, the Agency Administrator and the HMIS Lead Agency staff person will agree upon a date that the issue should be resolved by. The Agency Administrator and HMIS Lead may revise the due date if needed. If the corrections are not made by the agreed upon date, the agency will fail the audit for that year.
 - h. Agencies that fail their audit will be reviewed by the HMIS Access Ad Hoc to determine the appropriateness of the agency’s continued participation in the OC HMIS, and the agency may have HMIS Access revoked.
 - i. Agencies that pass their HMIS Annual Audit will be recognized on the OC HMIS Website.
- g. Pay HMIS participation fees based upon CoC board approved fee structure.
 - a. The HMIS User License Fee Policy is applicable to all agencies participating in the Orange County HMIS.

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- b. Agencies that receive state and/or federal funding that require HMIS participation will be charged for the number of licenses the agency has active at the end of the calendar year, based on the fee structure detailed below:
 - i. 1 – 5 users: \$750 annually
 - ii. 6 – 24 users: \$2,750 annually
 - iii. 25 or more users: \$3,500 annually
- c. Agencies that are Coordinated Entry Access Points will be charged an annual fee of \$200 in addition to any user fees they may incur. This applies to all Access Points, whether or not they are required to participate in HMIS. The \$200 fee will apply to agencies regardless of the number of Coordinated Entry Systems they are participants in.
- d. Agencies are allowed up to two active Agency Administrators at a time. Agencies will be allowed an additional Agency Administrator for every 700 active enrollments at the end of the calendar year. Agencies that require additional Agency Administrators in addition to those outlined in this policy must pay the set-up and ongoing user fees for those accounts, and can contact the HMIS Lead Agency for an invoice. The additional Agency Administrators license fee is \$759.28 per license annually. This fee is subject to change per vendor licensing fee.
- e. Agencies may request standalone Looker licenses for the purposes of scheduling ad hoc reports to be sent to a secure location outside of HMIS. The fee for these licenses is \$1,236 per license annually, and is subject to change per vendor licensing fee. This functionality is optional, and not necessary to access the agency's data in HMIS.
- f. If a user has access to multiple agencies in HMIS, only the user's primary agency in HMIS will be charged.
- g. Agencies that are newly awarded funding that requires HMIS participation during the calendar year will be required to pay \$500 prior to the awarded funding being implemented in HMIS.
- h. Complete any reporting, data quality, data entry, or other requirements outlined by the U.S. Department of Housing and Urban Development (HUD), the Coordinated Entry System (CES) Lead, or the HMIS Lead. Agencies can work collaboratively with other HMIS participating agencies to complete reporting, data quality, data entry, other requirements. The CES Lead and HMIS Lead Agency will only request the minimum necessary data and reports.
 - a. All agencies participating in HMIS are included in the HMIS Data Quality Report Cards published on a quarterly basis. The HMIS Data Quality Report Cards are created and posted by the HMIS Lead. Review the Data Quality Monitoring and Reporting Process section of the Data Quality Plan for details regarding this process.
 - b. Agencies with Street Outreach, Emergency Shelter, Transitional Housing, Rapid Re-Housing, Homelessness Prevention, or Permanent Supportive Housing/Other Permanent Housing projects are included in the Project Performance reports published on a monthly basis. Review the Orange County CoC Project Performance Overview document for more details on this process.
 - c. Emergency Shelter, Transitional Housing, Rapid Re-Housing, Permanent Supportive Housing, and Other Permanent Housing projects are required to participate in the Housing Inventory Count (HIC) that occurs annually on one day during the last 10 days of January.

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- d. Emergency Shelter and Transitional Housing projects are required to participate in the Sheltered Point in Time Count (PIT) that occurs annually on one day during the last 10 days of January.
- e. The System Performance Measures report (SPM) is submitted to HUD on an annual basis, and includes Street Outreach, Emergency Shelter, Transitional Housing, Rapid Re-Housing, Permanent Supportive Housing, and Other Permanent Housing projects. The reporting period for this report is October 1st through September 30th.
- f. The Longitudinal Systems Analysis (LSA) is submitted to HUD on an annual basis, and includes Emergency Shelter, Transitional Housing, Rapid Re-Housing, and Permanent Supportive Housing projects. The reporting period for this report is October 1st through September 30th.
- g. Review the [HMIS Participating Agencies Schedule](#) for an estimated timeline of activities that HMIS participating agencies may be required to participate in during the course of the year. Exact dates will be shared by the HMIS Lead.
- i. Comply with Orange County's minimum participation requirements for HMIS usage. The HMIS Lead Agency will conduct a quarterly review to ensure all agencies are meeting the minimum participation requirements. If any of the following are true at the time of the review, the agency will have one month to rectify the issue. If the issue is not resolved after one month the HMIS Agency Access Working Group will be notified to determine whether or not the agency should continue to have access to HMIS. If the agency is found to not meet the minimum participation requirements during the quarterly review at least three times in a year the HMIS Agency Access Working Group will also be notified.
 - a. Agency does not have at least one active user.
 - b. Agency does not have at least one active enrollment.
 - c. Agency does not have activity in HMIS in the past 30 days. Activity includes enrollments, services, assessments, files, or exits. (This minimum participation is not applicable to Public Housing Authorities)
 - d. Agency did not submit the HIC and/or PIT for appropriate project types.
 - e. Agency does not have at least one Agency Administrator that is an active HMIS user.
 - f. Agency has not had staff representation for at least one User Meeting during the previous quarter.
- j. Organizations found to not meet one or more of the guidelines above may be contacted by the HMIS Lead Agency to discuss the appropriateness of the agency's continued participation in the OC HMIS, the HMIS Lead Agency may inform the HMIS Access Ad Hoc to determine the appropriateness of the agency's continued participation in the OC HMIS, and the organization may have HMIS Access revoked.

VII. Agreements and Certifications

- a. All OC HMIS Participating Agencies must have updated versions of the documents below on file with the HMIS Lead Agency in order to gain and retain access to the OC HMIS. The forms are available on the OC HMIS website: [HMIS Data & Set Up Forms](#)
 - a. **Interagency Data Sharing Consent Form** – Allows client-level data and enrollment data to be shared among OC HMIS Participating Agencies. HOPWA funded projects are exempt

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from the data sharing mandate due to privacy laws protecting clients' HIV status. The Interagency Data Sharing Consent Form must be signed by the participating agency's Executive Director or equivalent.

- b. **HMIS Participating Agency Agreement** – Outlines the participating agency's responsibilities in protecting client privacy, properly obtaining client consent to share data, monitoring the use of HMIS and reporting any breaches of security by agency staff and improper system use of HMIS. Must be signed by Executive Director or equivalent.
- c. **User Agreement** – Outlines the HMIS User's responsibilities in protecting client privacy, proper system use and abiding of the HMIS Policies and Procedures. Must be signed during each user's first log-in to HMIS, and must be renewed annually.

VIII. HMIS User Access Roles

- b. Users with access to HMIS will be assigned one of the following access roles. Access roles control the level and type of access the user has to functionality within the OC HMIS.
 - a. **Agency Staff:** Users with this access have the ability to add and edit client profiles, enrollments, services, and exits, as well as the ability to run client-level, canned, and ad hoc reports. This level of access is the most common in OC HMIS.
 - b. **Agency Administrator:** Users with this access have the same abilities as Agency Staff users, as well as the ability to delete enrollments, services, files, and location data at the user's Primary Agency. The Agency Administrator is responsible to be the first tier of technical support to their agency HMIS Users. After all resources are exhausted, the Agency Administrator will submit an HMIS helpdesk support ticket. Only Agency Administrator are permitted to submit tickets to ensure the request has been reviewed by the responsible parties.
 - c. **Read Only:** Users with this access can view client profiles, enrollments, services, and exits, but cannot add or edit data, and they cannot run canned or ad hoc reports.
 - d. **CES Access:** Agency Staff or Agency Administrator users can also be given CES access. Users with CES access have access to the Referrals page, which includes adding clients to the Community Queue, adding and editing housing opportunities, and reviewing or denying matches to housing opportunities.

IX. HMIS User Requirements

- a. Agency Staff and Agency Administrator users must complete the following trainings:
 - a. **HMIS Part 1 Training** – Covers the history and purpose of HMIS and the contents of the OC HMIS Policies and Procedures handbook.
 - b. **HMIS Part 2 Training** – Covers HMIS functionality, HUD definitions, key terms, and data quality best practices.
 - c. **HMIS Task List** – A list of tasks to be completed by the user in the Clarity Training Site to assess what the user has learned.
 - d. **HMIS Recertification** – OC HMIS Users are required to complete an annual HMIS Recertification Training to reinforce HMIS data entry functionality.
- b. Read Only users must complete the following training:

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- a. HMIS Part 1 Training – Covers the history and purpose of HMIS and the contents of the OC HMIS Policies and Procedures handbook.
- c. Users requesting CES access must complete the following training in addition to the trainings mentioned in part A of this section.
 - a. HMIS Coordinated Entry Training – Includes an overview of the different roles involved in the Coordinated Entry process, and a review of the HMIS functionality needed for each role.
- d. All HMIS Users must provide the following information in order to receive an HMIS account:
 - a. The HMIS User’s first and last name.
 - b. The HMIS User’s *work* email. Personal emails will not be allowed. Shared email accounts are also not allowed.
- e. All HMIS Users must be able to clearly explain the purpose and benefit of HMIS and the related HMIS Consent Form to the homeless and at-risk of homelessness populations as detailed in the Client Privacy section. This includes providing an overview of:
 - a. What is HMIS?
 - b. What personal identifying data will be collected and how it will be used
 - c. Privacy and confidentiality standards
 - d. Revocation of consent and how to do it

X. Agency Administrator Requirements

- a. Agency Administrators are the designated point of contact for the agency regarding HMIS related requests and updates. Agency Administrators must complete the Agency Administrator training before they can be certified as Agency Administrators. This training covers the responsibilities of the Agency Administrator, as well as training on HMIS functionality specific to Agency Administrators.
- b. Agency Administrators are responsible for training all staff at their agency as needed.
 - a. Identify staff members who need access to HMIS and ensure they complete any required HMIS User trainings in a timely fashion.
 - b. Inform the HMIS Help Desk of HMIS Trainings completed by any users at the agency by submitting the [HMIS Account Update and Testing Form](#).
- c. Agency Administrators are the primary technical support for their HMIS Users.
 - a. All HMIS User technical questions should be directed first to the Agency Administrator. If the Agency Administrator cannot solve the problem, they can then contact the [HMIS Help Desk](#). HMIS Users who are not certified Agency Administrators are not allowed to contact the HMIS Help Desk. See the Help Desk Policies section for more details.
- d. Agency Administrators are responsible for sharing system-wide changes and other relevant information with all users at their agency.
 - a. Agency Administrators periodically receive emails from the HMIS Lead Agency regarding HMIS. Agency Administrators are responsible for reading these emails and communicating the relevant information in them to their staff who are HMIS Users.
 - b. Agency Administrators should attend the monthly User Meetings. These webinars are announced via direct email to all Agency Administrators.
- e. Agency Administrators must notify the HMIS Lead Agency of all personnel changes.

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- a. When an HMIS User no longer needs access to HMIS, whether due to changing job responsibilities or departure from the agency, Agency Administrators must complete the [HMIS Account Update & Testing Form](#).
- b. When an Agency Administrator no longer needs access to HMIS, whether due to changing job responsibilities or departure from the agency, another Agency Administrator at the agency or executive leadership is required to submit the contact information of the replacement Agency Administrator via the [HMIS Help Desk](#).
- f. Agency Administrators must monitor compliance with standards of confidentiality and data collection, entry, and retrieval outlined in the OC HMIS Policies and Procedures.
 - a. Inform your users that they are obligated to report suspected instances of noncompliance and/or security violations to the Agency Administrator as soon as possible.
 - b. Escalate any security violations that your agency's HMIS Users report to you to the HMIS Agency Administrator via the [HMIS Help Desk](#).
 - c. Ensure that all staff at your agency are aware that HMIS usernames and passwords are NOT to be shared with anyone under any circumstances. HMIS Users should not share their HMIS login information with other staff at their agency, their Agency Administrator, their executive leadership, their IT Staff, etc.
 - d. Ensure all HMIS users at the agency are able to clearly explain the purpose and benefit of HMIS and the related HMIS Consent Form to clients as included in the HMIS User Requirements section.
- g. Agency Administrators are responsible for ensuring that agency equipment meets the specifications outlined in the Technical Standards section of this document.
- h. Agency Administrators must ensure that agency data quality either meets data quality thresholds for each relevant project type, or is on track to meet said thresholds.
 - a. Agency Administrators should be able to describe their agency's regular data quality monitoring procedure. For example, "We run x, y, and z reports each month. I identify data quality errors and fix them myself or delegate them to Users x, y, and z." Please review the OC HMIS Data Quality Plan for guidance. The HMIS Lead Agency is available to help develop an agency's data quality monitoring procedure as needed.
 - b. Agency Administrators must work with the HMIS Lead Agency to ensure the agency is collecting all relevant Universal and Program Specific Data Elements dependent on project type and funding source.
 - c. All data entered into the OC HMIS must meet applicable Data Quality and Data Timeliness standards based on project type as agreed by the CoC in partnership with the CoC Board and the CoC Collaborative Applicant.
 - d. Agency Administrators are responsible for ensuring the agency is in compliance with the Orange County HMIS Data Quality Plan.
- i. Agency Administrators must ensure all projects in the HMIS database are set-up correctly, and notify the HMIS Lead Agency when a project is no longer serving clients.
 - a. Agencies should notify the HMIS Helpdesk when they would like any of their projects to start participation in the OC HMIS. The HMIS Lead Agency and/or the CoC Collaborative Applicant reserves the right to deny access to agencies and/or projects that do not serve the homeless population.

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- b. Agency Administrators are required to notify the HMIS Lead Agency when project changes have occurred, including changes in funding sources and bed inventory.
- c. The HMIS Lead Agency and/or the CoC Collaborative Applicant will provide technical assistance and recommendations to the agency on how to best set up the project in HMIS to ensure adequate reporting and benefit to the Orange County CoC and its System Performance Report. Projects whose performance or data quality negatively affects the CoC as a whole may be subject to corrective action. Corrective action discussed in the [Data Quality Plan](#) around performance will be done in conjunction with the CoC Collaborative applicant.
- d. Agency Administrators are required to submit a [Project Close Out Form](#) when projects are no longer active. The HMIS Lead Agency will deactivate the project in HMIS so no new enrollments can be added to the project. Data from deactivated projects will remain available in HMIS for 7 years per HUD requirements.

XI. Technical Standards

- a. HMIS Participating Agencies must adhere to the following technical standards with regards to all technical equipment used to access HMIS. HMIS Participating Agencies must also adhere to the [HUD HMIS Technical Standards](#). The HMIS Lead Agency is not responsible for providing proper technical equipment or for providing IT services unrelated to HMIS.
- b. The most recent version of the following web browsers are supported for accessing HMIS:
 - a. Google Chrome
 - b. Microsoft Edge
 - c. Mozilla Firefox
 - d. Apple Safari
- c. An internet connection is required to access HMIS, and is the sole responsibility of the participating agency.
- d. All screens must lock within 5 minutes of inactivity and point to the computer terminal or mobile device login page upon subsequent activity. Users should manually lock their screen when they leave their device unattended.
 - a. Windows: Press the Windows + L keys on the keyboard
 - b. Mobile device: Briefly press the Power button
 - c. Mac: Press Control + Command + Q keys on the keyboard
- e. Computers, Tablets, or Other Mobile Devices that Access HMIS OR share a network with computers or mobile devices that access HMIS (iPads and other devices that run on iOS are exempt from these requirements)
 - a. Must have virus protection software that has been updated in the past week and performs scans daily and automatically updates to the most current version.
 - b. Must have a firewall in place between any computer and internet connection for the entire network, be protected with at minimum Wired Equivalent Privacy (WEP), use Network Address Translation (NAT), and maintain the most recent virus security updates.

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- f. All computer terminals and mobile devices used to access HMIS (including organization network equipment) must be stored in a secure location (ie. a locked office area that is not accessible to the public).
 - a. Agency must adhere and be consistent with the agency's expectations of information security for staff working at the office full-time. Staff who work remotely will be expected to ensure the protection of proprietary agency and client information accessible from their remote office. Steps include, but are not limited to, the use of locked file cabinets, computers and desks; the regular maintenance of passwords; and any other steps appropriate for the job and the environment. Agency should be at a minimum in compliance with OC HMIS Technical Standards policies and the policies outlined in this document.
- g. The executive leadership or other empowered officer within the HMIS participating agency will be responsible for the maintenance and disposal of onsite computer and mobile device equipment. This includes:
 - a. Purchase of and upgrades to all existing and new computer and mobile device equipment for utilization in the system.
 - b. Provision of computer terminals or mobile device to all HMIS Users for accessing HMIS that have a unique username/password to log onto the operating system.

XII. Privacy

- a. HMIS Account Passwords
 - a. The HMIS vendor will enforce a password change for all HMIS accounts every 180 days.
 - b. HMIS Users will never share passwords or HMIS accounts for any reason. The sharing of HMIS accounts and/or passwords directly endangers the privacy of clients who entrust their personal identifying information to the OC HMIS. HMIS users found to be sharing HMIS accounts and/or passwords will be subject to corrective action.
 - c. After 30 minutes of inactivity in the OC HMIS, the system will automatically lock the user out and the user will need to enter their password again to gain access to HMIS.
 - d. If an HMIS User attempts to log in four (4) times with an incorrect password, the HMIS will automatically lock their account. The HMIS user will be unable to access HMIS for two hours unless their Agency Administrator contacts the HMIS Helpdesk to unlock the account.
- b. Access to HMIS
 - a. As discussed in the Agency Administrator Responsibilities section, agency staff who no longer need access to HMIS will have their HMIS account access revoked. In the event that HMIS account access is not revoked for any reason, the former HMIS User is required to act with integrity and not attempt to access HMIS if their job duties no longer include HMIS or if they leave their HMIS participating agency.
 - b. The HMIS Lead Agency reserves the right to lock the account of an HMIS User who has not completed required trainings. The HMIS Lead Agency will unlock the account once the required trainings have been completed.
 - c. If an HMIS User does not log into HMIS for 60 days, the HMIS account will be locked automatically. The user will receive a notification two (2) calendar days prior to the

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account being locked. If an account is locked due to inactivity, the user will be required to complete the trainings outlined in the HMIS User Requirements section as well as any other trainings required by the HMIS Lead Agency to regain access to HMIS.

c. HMIS Data

a. Participating Agencies

- i. All HMIS Users are required to ensure that client identifying information is never sent across an unencrypted network, saved in an unprotected folder on a computer, or, in the case of hard copies of client identifying information, stored anywhere other than a locked file cabinet or office.
- ii. Client Identifying Information CANNOT be sent over unencrypted email either between a participating agency and the HMIS Lead Agency or between staff at a participating agency. The only permissible way to discuss an individual client over unencrypted email is using the client's ID number.
- iii. Agencies must have a formal policy for intra-agency communication regarding clients that protects client privacy.

b. HMIS Vendor

- i. The vendor will perform daily and weekly backups to prevent loss of data.
- ii. Backups will be stored both onsite and offsite. All standard security and privacy precautions apply to offsite storage. The offsite storage facility is equipped with surge protectors and natural disaster protective measures.

d. Client Privacy

a. In order for client records to be shared in HMIS, clients must consent to share their data with other agencies participating in HMIS.

- i. If the agency's first interaction with the client is over the phone, or otherwise not in person, clients can verbally consent to share their data. However, during the first in person meeting with the client the agency must ask the client to sign the **Client Consent to Share Protected Personal Information form** to continue sharing their data in HMIS.
- ii. Agency staff must explain the form to clients and how their information is used and viewed.
- iii. The form can be digitally signed in HMIS, or the agency can print a physical copy of the form for the client to sign. If the client signs a physical copy, the agency is required to upload the signed consent form to HMIS. If the agency chooses to keep physical files, they must be stored in a secure location.

b. Protected Personal Information (PPI) is defined in this manual and the Consent to Share Personal Protected Information form as:

- i. [Clients'] name and [Clients'] contact information
- ii. [Clients'] social security number and date of birth
- iii. [Clients'] basic demographic information such as gender and race/ethnicity
- iv. [Clients'] history of homelessness and housing (including [Clients'] current housing status, and where and when [Clients] have accessed services)
- v. [Clients'] self-reported medical history and disability status, including mental and physical health concerns, substance abuse history, and HIV/AIDS status
- vi. [Clients'] case notes and services

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- vii. [Clients'] income sources and amounts; and non-cash benefits
 - viii. [Clients'] veteran status
 - ix. Information about other members of [Clients'] household
 - x. [Clients'] self-reported history of domestic violence
 - xi. [Clients'] photo (optional)
- c. If clients refuse to sign the **Client Consent to Share Protected Personal Information form** they cannot be pressured into signing the form or denied services on the basis of their refusal to sign. Participating agencies should follow the procedure outlined [Client Privacy section](#) within the Accessing and Completing Release of Information (ROI) Page Knowledge Base Article for entering client information into HMIS when clients refuse to sign the Client Consent to Share Protected Personal Information form. Refusal to sign the consent form means that all of that client's data is only visible by the agency serving the client, HMIS System Administrators, and the HMIS Vendor.
- d. Upon signing the **Client Consent to Share Protected Personal Information form** clients must be made aware of their right to revoke their consent to share protected information at any time.
- e. Participating agencies must have copies of the **Revocation of Consent form** available in areas accessible to clients at all times. Clients should NOT have to request this form from participating agency staff.
- i. If a client submits a **Revocation of Consent form**, participating agency staff must follow the most current procedure for removing sharing access to the client's protected personal information in HMIS. Review the [Refusing/Revoking Consent to Share Personal Information](#) knowledge base article for more information.
- f. Participating agencies must post the **Note Regarding Collection of Personal Information** in all areas where HMIS data entry occurs. Participating agencies should direct outreach teams to give a copy of the Note to each outreach worker.
- g. Participating agencies [that maintain a public website](#) must post the **Privacy Notice** on their website.
- h. Participating agencies must have copies of the **HMIS Client Grievance form** available in areas accessible to clients at all times in the event of an HMIS related grievance. Clients should NOT have to request this form from participating agency staff.
- i. In the event that the participating agency's in house grievance policy was not able to resolve the grievance, clients will submit the grievance form directly to the HMIS Lead Agency.
- e. Client Record Requests
- a. [Clients requesting specific information in their HMIS record may work directly with an agency currently participating in HMIS to obtain that information. The agency is responsible for verifying the client's identity prior to releasing any information.](#)
 - i. [Any case notes entered into a client's record may only be shared by the agency that entered them, and may be released at the discretion of each participating agency.](#)
 - ii. [Participating agencies do not have access to a client's complete record in HMIS, and will only be able to provide the client with information that they have access to.](#)

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- a. ~~Clients may inspect and obtain a copy of the following data entered in HMIS by requesting the Client Record Request Dashboard, which is inclusive of:~~
- ~~i. Data on the client's Profile screen~~
 - ~~ii. The client's Release of Information~~
 - ~~iii. The client's enrollment history in any projects that participate in HMIS~~
 - ~~iv. All client documents uploaded into HMIS~~
- b. ~~Clients that want to receive their full HMIS record may submit a Client Record Request to any agency currently participating in HMIS. Agency Administrators are responsible for submitting the Client Record Request Form to the HMIS Lead on the client's behalf within five (5) business days of the request except when exempted by state and federal law. Case notes can only be released by the agency that entered them into HMIS, and will not be included in Client Record Requests submitted to the HMIS Lead.~~
- b. Clients may submit the request to any agency participating in OC HMIS that they have been served by in the past.
- i. The agency is responsible for verifying the client's identity prior to submitting the form.
 - ii. Agency Administrators must work with the client to determine what type of data they would like to see from their HMIS record:
 - 1. Client Record Request Dashboard - Demographics, Release of Information, Enrollment History, and Uploaded Documents
 - 2. Client responses to assessments completed at entry, exit, or at anytime during their enrollment
 - 3. Data collected by a Service Provider regarding the client, including Services, Public Alerts, and Locations
 - 4. Coordinated Entry data, including status, history, and events
 - ~~i. An Agency Administrator at the agency is responsible for submitting a ticket to the HMIS Help Desk to request the Client Record Request Dashboard for the client within five (5) business days of the request except where exempted by state and federal law.~~
 - ~~ii.iii. At the time of the request, the Agency Administrator must decide with the client an appropriate method for the client to receive their dashboard data that does not violate the privacy of the client's data.~~
 - ~~iii.iv. The HMIS Help Desk will respond to the request as outlined in the HMIS Help Desk Policies section.~~
 - ~~iv.v. An Agency Administrator at the agency is required to review the dashboard data with the client upon request.~~
- c. No client shall have access to another client's data for any reason, except for parents or guardians of a minor requesting their minor child's records.
- d. Clients may request edits to data that they contributed to HMIS. Examples of data contributed by clients include responses to enrollment and assessment questions, and documentation contributed by the client. Data contributed by a participating agency, including but not limited to services, case notes, and enrollment history, cannot be edited at a client's request.

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- i. Clients that wish to edit data for a specific project must contact the agency that administers the project directly to request the edit.
- e-ii. Clients cannot request edits for a specific project if the project has closed or the agency that administered the project is no longer participating in HMIS.

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XIII. Data Use and Disclosure

- a. Client data may be used or disclosed for system administration, technical support, program compliance, analytical use, and other purposes as outlined in the Privacy Notice or required by law. Client consent is not required for these uses and disclosures. Uses involve sharing parts of client information with persons within an organization. Disclosures involve sharing parts of client information with persons or organizations outside an organization.
- b. Participating Agencies may use data contained in the system to support the delivery of services to clients experiencing homelessness in Orange County. Organizations may use or disclose client information for administrative functions, technical support, and management purposes. Participating Organizations may also use client information for internal analysis, such as analyzing client outcomes to evaluate programs.
- c. The vendor and any authorized subcontractor shall not use or disclose data stored in the OCHMIS without expressed written permission in order to enforce information security protocols. If granted permission, the data will only be used in the context of interpreting data for research and system troubleshooting purposes. The Service and License Agreement signed individually by each Continuum and vendor contain language that prohibits access to the data stored in the software except under the conditions noted above.

XIV. Data Release

- a. Data release refers to the dissemination of aggregate or ~~anonymous~~ client-level data for the purposes of system administration, technical support, program compliance, and analytical use.
- b. No identifiable client data, including but not limited to name, Social Security Number, or Date of Birth, will be released by the HMIS Lead Agency or any Participating Organizations to any person, agency, or organization not participating in HMIS for any purpose without written permission from the client, with the exception of the uses and disclosures outlined in this document, subpoenas, ~~academic research purposes~~ or other circumstances as required by law.
- c. Each Participating Agency owns ~~their own data that is stored in the system~~ the data that is entered and managed by their agency in HMIS. The agency may not release personal identifiable client data without written permission from the client. Agencies may release aggregate data for all clients to whom the agency provided services. Aggregate data is data that has been collected from different clients and compiled into sums. Agencies may share this data for their agency as a whole, or for each of their projects.
- d. Coordinated Entry data is owned by the CES Lead.
- e. The ~~Orange County Co~~ CHMIS Lead, CoC Collaborative Applicant, and CES Administrators may release aggregate data about ~~its own~~ the continuum at the program, sub-regional, and regional level. Aggregate data may be released without organization or CoC Board permission ~~at the discretion of the CoC~~.

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- f. Requests for regional or sub-regional data, including data for ~~Academic-academic Research research~~ ~~Purposespurposes~~, must be reviewed and approved by the CoC Board prior to the data being released if the request has not been pre-approved according to the Data Request Matrix below. If the request is pre-approved, the CoC Board will be notified that data has been shared.
- g. Requests for data must be submitted to the HMIS Lead Agency by submitting the [Data Request Form](#), which includes the information below.
 - a. Requestor's Name
 - b. Requestor's Organization
 - c. Description of the data needed, including reporting period and specific data elements
 - d. Description of what the data will be used for (research, media use, etc)
 - e. Will this data be published? If yes, where?
 - f. When is the data needed by?
 - g. How often is this data needed?
- h. Data Requests for ~~Academic-academic Research-research~~ ~~Purposes-purposes~~ may include personal protected information if the research is being conducted by:
 - a. An individual employed by or affiliated with an HMIS participating agency for use in a research project conducted under a written research agreement approved in writing by the CoC Collaborative Applicant; or
 - b. By an institution for use in a research project conducted under a written research agreement approved in writing by the CoC Collaborative Applicant.
 - c. A research agreement must:
 - i. Establish rules and limitations for the processing and security of personal protected information in the course of the research;
 - ii. Provide for the return or proper disposal of all personal protected information at the conclusion of the research;
 - iii. Restrict additional use or disclosure of personal protected information, except where required by law; and
 - iv. Require that the recipient of data formally agree to comply with all terms and conditions of the agreement.
- i. Data Requests that seek clarification or require a subset of data that has already been published in the form of a dashboard or as part of another data request as approved by the CoC Board may be provided by the HMIS Lead Agency in consultation with the CoC Collaborative Applicant.

Data Request Matrix

Updated ~~0308/2025~~4

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Data Request Criteria	HMIS Participating Agency		Entity Does not Participate in HMIS		CoC Board Sub-Committee/Work Group		CES Administrators ¹	
	Approved	Needs Approval	Approved	Needs Approval	Approved	Needs Approval	Approved	Needs Approval
Aggregate system level data	X			X	X		X	
Program Descriptor data ²		X		X	X		X	
Client-level data ³		X		X		X		X
Ongoing data requests	X			X		X	X	
For use as research		X		X	X			X
For media release		X		X		X		X
For other public use		X		X		X		X

XV. Data Breach

- a. A data breach is the unauthorized access or acquisition of data that compromises the security, confidentiality, or integrity of data in HMIS. Data may be in any format (electronic, hardcopy or verbal) and may range from a single piece of data and/or an entire data system.
- b. Breaches to the HMIS servers are managed by the HMIS vendor. If a breach to the HMIS servers occurs, the HMIS vendor will notify the HMIS Lead, and the HMIS Lead Agency will notify the participating agencies as appropriate.
- c. Breaches may also occur at participating agencies. The participating agency is responsible for immediately mitigating the data breach to the extent possible as soon as the breach is identified, including notifying clients who may have been impacted by this breach. Data breaches could include but are not limited to:
 - a. HMIS users sharing HMIS account and/or passwords with others.
 - b. Sharing client identifying information with anyone that doesn't have access to HMIS or hasn't been approved to access that data.
 - c. Sharing client identifying information over an unencrypted network.
 - d. Leaving printed documents with client identifying information in an unsecured location.
- d. Any suspected data breach must be reported to the HMIS Lead Agency by submitting the [Data Breach Incident Report](#). The HMIS Lead Agency will review the breach and the mitigating actions taken by the agency, and will assist with any additional action that may be needed.
- e. The HMIS Lead Agency will report all data breaches to the Agency Access Working Group, and that group will determine if any corrective action is needed. Corrective action may include but

¹ CES Administrators include the Agency Administrators at agencies that have been contracted by the CES Lead to manage and facilitate the Coordinated Entry System in HMIS.

² Project descriptor data elements (PDDE) are intended to identify the organization, specific project, and project details for each project participating in HMIS. Approved entities may request PDDE for any projects in HMIS.

³ Client-level data requests from CES Administrators and CoC Board Sub-Committees or Work Groups should be submitted through the HMIS Help Desk, and will be reviewed and approved by the CoC Manager, the CES Lead, and the HMIS Lead.

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Orange County HMIS Policies and Procedures

is not limited to notifying the CoC Board, CoC ~~Lead~~Collaborative Applicant, and funders of the agency, and revoking HMIS access.

XVI. Data Integration

a. Data integration is the process of exporting data from one data system and importing it into another. For the purposes of this policy, data import is the process of taking data from an outside case management database and importing it into HMIS, and data export is the process of taking data out of HMIS and importing it into an outside case management database.

~~b. Agencies must be approved for HMIS access before submitting any data integration requests.~~
Requests for data import or export must be submitted through the [Data Integration Request Form](#).

~~a. Agencies requesting to integrate their own HMIS data with a case management software will be reviewed and approved by the HMIS Lead.~~

~~b. Agencies requesting to integrate HMIS data from other agencies that they do not manage will be reviewed and approved by the CoC Board.~~

~~b-c. Requests to integrate Coordinated Entry System data will be reviewed and approved by the HMIS Lead and the CES Lead. Agencies requesting exports of their own data do not require approval from the CoC Board. All other requests are decided by the CoC Board in conjunction with the CoC Lead and the HMIS Lead. Requests must demonstrate how the data integration will improve care coordination for clients in order to be considered.~~

~~c. Consult the current HUD Data Dictionary and HUD Data Standards Manual for HUD standard fields collected in HMIS. All imports must be in HUD CSV Format unless otherwise approved by the HMIS Lead.~~

~~c. All approved data integrations will occur through an Application Programming Interface (API) or other approved integration/systems connector methods. The data integration process ensures that external case management software is securely connected to HMIS through a structured pathway. Data from outside systems is first transmitted to Journey DB, an intermediate database, where it is encrypted using TLS during transmission and AES 256-bit encryption for storage of source code, data, and logs. From there, the data is securely transferred to HMIS, ensuring consistency and compliance with data governance standards.~~

~~a. If the systems integration approach will be utilizing a Connector that is not an API, the method will need to be investigated and approved by the HMIS Lead to ensure that the proper security and data integrity protocols are met, and that the integration workflow can accommodate this method. There is no guarantee that all systems connection methods and/or API's can be accommodated.~~

~~d. Agencies wishing to request any data integration with OC HMIS must agree to the following policies. The Requesting Agency and/or Outside Database Vendor must sign an MOU prior to any work being completed.~~

~~a-d. Prior to transferring any data, the HMIS Lead Agency will conduct an Agency/Vendor Review which may include but is not limited to privacy, security, data sharing, data storage, data timeliness, data completeness, and data collection practices.~~

~~b-e. All approved data integrations are subject to an annual review by the HMIS Lead, CoC Lead, and CoC Board. This review will include a certification to ensure the data integration is in~~

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compliance with the HMIS Policies and Procedures, and that the items included in the Agency/Vendor Review are still in effect. ~~The review will also consider if the data integration is still necessary and favorable for the Continuum of Care. If the data integration is no longer considered necessary or if the audit review~~ is failed, the data integration will be terminated.

~~Data integrations are subject to all policies and procedures outlined in this document. Imported data is owned by the agency responsible for managing the data in HMIS.~~

~~f.~~

~~e.g.~~ Violation of any of the policies and procedures in this document may be grounds for termination of the data integration at any time, and is at the discretion of the HMIS Lead. The CoC Board will be notified of any data integrations that have been terminated.

~~d.h.~~ The HMIS Lead Agency will provide an estimate for implementation and maintenance fees upon receiving the appropriate data integration request form. If the CoC chooses not to cover these fees, they will become the responsibility of the agency requesting the data integration. Fees will be updated annually by the HMIS Lead Agency, and an annual invoice will be sent for costs of the continuation of data integrations services and support.

~~e.i.~~ The Requesting Agency and Outside Database Vendor must agree to the Roles and Responsibilities outlined in this policy as applicable.

~~f.a.~~ ~~Data integrations are subject to all policies and procedures outlined in this document. Imported data is owned by the agency responsible for managing the data in HMIS.~~

~~g.i.~~ Approved data integration projects ~~approved by the CoC Board~~ will be scheduled to accommodate the current workload of the HMIS Lead. Scheduling is at the discretion of the HMIS Lead.

~~e.k.~~ A critical component of data integration is understanding the responsibilities of those involved in the process. The following participants may be involved in the data integration process. Please review the tables below for the expected responsibilities for each participant. The responsibilities are subject to change and will be finalized when the project plan for the data integration is developed.

- a. HMIS Lead: HMIS administrator for the Orange County CoC
- b. Requesting Agency: The Provider that is serving clients directly, and is the responsible party for the data. If the Requesting Agency is requesting a data import, the agency must be participating in HMIS, and must be in compliance with all policies and procedures outlined in this document. If the agency is not already participating in HMIS and does not meet the criteria outlined in the Agency Access section, the agency must submit the Agency Access Application and be approved to access HMIS prior to submitting the Data Import/Export Request Form.
- c. Outside Database Vendor: The entity that provides the technical and administrative support for the outside database. This entity will not be given direct access to HMIS.

Importing Data into HMIS	
Task	Responsibility
Submit Data Integration Request Form	Requesting Agency
Determine specifications of import into HMIS (frequency, report parameters, data elements, report -format, etc.)	HMIS Lead Agency/Requesting Agency

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Orange County HMIS Policies and Procedures

Develop project plan	HMIS Lead Agency
Review privacy/consent practices for outside database to ensure client consent to share data in HMIS	HMIS Lead Agency
Review outside database for proper collection of HUD required data and/or custom data	HMIS Lead Agency
<u>Data mapping normalization meeting</u>	<u>HMIS Lead Agency/Requesting Agency</u>
<u>Data normalized and mapped to operational elements in HMIS</u>	<u>Requesting Agency</u>
<u>Data mapping review</u>	<u>HMIS Lead Agency/Requesting Agency</u>
Format/prepare data in approved format	Requesting Agency
Review prepared data for accuracy and completeness	Requesting Agency
Submit prepared data in approved submission process	Requesting Agency
Review data from agency for proper format and completeness	HMIS Lead Agency
Complete import of data into HMIS	HMIS Lead Agency
Review imported data in HMIS and review accuracy/completeness	Requesting Agency
Report any data imported incorrectly to HMIS Lead	Requesting Agency
Resolve any issues with import file or requesting database and resend data as needed	Requesting Agency
Resolve any issues with HMIS import and re-upload data as needed	HMIS Lead Agency

Exporting Data from HMIS	
Task	Responsibility
Submit Data Integration Request Form	Requesting Agency
Determine specifications of export from HMIS (frequency, report parameters, data elements, report format, etc.)	Outside Database Vendor/HMIS Lead/Requesting Agency
Develop project plan	HMIS Lead Agency
Represent and warrant software is in compliance with best practice policies for privacy and security practices	Outside Database Vendor
Represent and warrant software is in compliance with best practice policies for access roles and data sharing	Outside Database Vendor
Represent and warrant software is in compliance with best practice policies for data storage and security infrastructure	Outside Database Vendor
Review agencies/users that will have access to data to ensure compliance with HMIS Policies and Procedures	HMIS Lead Agency
Ensure HMIS Consent Form and related documents name outside database/vendor for transparency	HMIS Lead Agency
Create export file and/or export data from HMIS as needed	HMIS Lead Agency

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Import data into outside database	Outside Database Vendor
Review imported data in outside database for accuracy/completeness	Outside Database Vendor/Requesting Agency
Notify HMIS Lead Agency of any errors with export data	Outside Database Vendor/Requesting Agency
Resolve any issues with HMIS export and resend data as needed	HMIS Lead Agency
Resolve any issues with outside database import as needed	Outside Database Vendor

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Orange County Continuum of Care Homeless Management Information System Client Consent form

Welcome to the Orange County Continuum of Care (CoC).

You are currently accessing services from a service provider/organization participating in the Orange County Homeless Management Information System (HMIS). HMIS is the secure database used to collect and store information about clients served through this service provider/organization. It also allows the sharing of information among HMIS participating service providers/organizations to streamline access to services and help them understand a client's history of homelessness or housing instability. HMIS is managed and operated by Orange County United Way's 2-1-1 Orange County (211OC).

In Orange County, ~~all~~ service providers/organizations that participate in HMIS share data with each other to coordinate care and improve program outcomes. If you ~~agree to participate in HMIS~~ sign this consent form, this means you agree to allow information gathered by a participating service provider/organization to be ~~entered into~~ shared in HMIS with other service providers/organizations that have access to HMIS. This ~~and~~ allows all other participating service providers/organizations to view and use your data to provide services to you. Additionally, the service provider/organization will also be able to see what kind of services in Orange County you have received in the past. Signing this consent form also means that your data may be included in data requests approved by the CoC Board for academic research purposes, analysis of the homeless system of care, or other purposes as deemed appropriate by the Board.

A complete list of all service providers/organizations that participate in the HMIS is maintained at <http://ochmis.org/about-hmis/contributing-agencies/>. You can also ask the service provider/organization you are receiving services from for a list of HMIS participating service providers/organizations. Please note that the list of service providers/organizations contributing data with access to HMIS can change frequently and without notice, and therefore the website should be consulted for the most recent list.

HMIS contains sensitive health and personal data. The Orange County CoC and HMIS participating service providers/organizations take your privacy very seriously and have implemented **the following protections to safeguard your data:**

- Individual client data is only viewable by trained staff at each participating service provider/organization.
- In order to participate in the HMIS, leaders at each agency must sign an Agency Agreement that includes a commitment to protecting client data and maintaining confidentiality.
- In order to use HMIS, service provider/organization staff must complete multiple trainings that examines privacy laws and the importance of client privacy.
- The HMIS is hosted on a secure server and data is encrypted.

What information is shared in the HMIS database?

We share Protected Personal Information (PPI), Protected Health Information (PHI), and general information obtained during your intake, assessment, and enrollment in the program. This may include, without limitation, the following:

- Your name and your contact information
- Your social security number and date of birth
- Your basic demographic information such as gender, race and ethnicity
- Your history of homelessness and housing (including your current housing status, and where and when you have accessed services)
- Your medical history and disabling conditions, including mental and physical health concerns, substance abuse history, and HIV/AIDS status
- Your case notes and services
- Your income sources and amounts
- Your non-cash benefits
- Your veteran status, service history and discharge status
- Information about other members of your household

If you feel any of your rights outlined in this document have been violated, please contact (714) 589-2360.

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- Your self-reported history of domestic violence
- Verification of history of homelessness and/or disabling conditions (including third-party verifications and/or self-attestations)
- Your photo (optional)

By signing this form, you understand the following:

- You have the right to receive services even if you do not sign this consent form. Providers may not refuse to provide you with services based on your refusal to sign this form.
- You have the right to receive a copy of this consent form for your records.
- Your consent permits your data to be entered—shared in HMIS and allows any—participating service providers/organizations to view your history of homelessness and service utilization. Service providers/organizations can also add to or update your information in HMIS without asking you to sign another consent form. Your consent also permits your data to be included in data requests approved by the CoC Board for academic research purposes, analysis of the homeless system of care, or other purposes deemed appropriate by the Board.
- This consent form expires seven (7) years after the signature or at any time you choose to revoke your consent. Please note, the Orange County CoC is required to retain all data stored in HMIS for seven (7) years after the data was created or last changed. However, data stored in HMIS will not no longer be further-shared in HMIS or data requests upon the expiration of your consent, or if you revoke your consent.
- You may revoke your consent to share your information with other HMIS participating service providers/organizations at any time. Your revocation must be provided either in writing or by completing the Revocation of Consent form. The service provider/organization you are receiving services from must make this form available to you if you ask; it—and should be readily available to you and conspicuously posted at all participating service provider/organization locations. it should be out and available for you to take from the office or facility you receive services from. Upon receipt of your revocation, 211OC will remove your PPI and PHI from the shared HMIS database and prevent further PPI and PHI from being added ensure your record is no longer shared with service providers/organizations in the HMIS database. However, the PPI and PHI that you previously authorized to be shared cannot be entirely removed from the HMIS database. This information, as described previously, will remain accessible to the service providers/organizations that provided you with direct services.
- There are some situations where your data may be shared without consent. Participating agencies are required to post a Privacy Notice at each location where intakes are completed. The Privacy Notice contains more detailed information about how your information may be used and disclosed; it—and should be readily available to you and conspicuously posted at all participating service provider/organization locations. You have the right to receive a copy of this notice for your records.
- You have the right to request, in writing, the following pieces of information. This information is to be provided to you within five (5) business days of your request.
 - A correction of inaccurate or incomplete PPI and/or PHI
 - A copy of your consent form
 - A copy of your HMIS record (agency staff must review this information with you if you request such a review so that you can fully understand the information presented to you and how it is used visit the Client Record Request page <https://ochmis.org/hmis-client-record-requests/> for more information about this process)
- Aggregate or statistical data that is released from the HMIS database will not disclose any of your PPI or PHI
- You are not waiving any rights protected under Federal and/or California law.

SIGNATURE AND ACKNOWLEDGEMENT

Your signature indicates that you have read (or been read) this consent form, have received answers to your questions, and you freely consent to have your information, and that of your minor children (if applicable and/or if you choose to include them), entered into the HMIS database. You also consent to share your information with other participating organizations as described in this consent form.

Client Name: _____ Date Of Birth (DOB): / /

Signature: _____ Date Signed: / /

If you feel any of your rights outlined in this document have been violated, please contact (714) 589-2360.

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Minor Children (if applicable and/or if you choose to include them):

Name: _____ DOB: __/__/____ Name: _____ DOB: __/__/____

Name: _____ DOB: __/__/____ Name: _____ DOB: __/__/____

Agency Staff Signature:

Agency Staff Name: _____ Agency Staff Signature: _____

Agency Name: _____ Date: __/__/____

If you feel any of your rights outlined in this document have been violated, please contact (714) 589-2360.

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Orange County Continuum of Care Homeless Management Information System Participating Service Providers/Organizations

Please note that the list of service providers/organizations ~~contributing data to~~ with access to HMIS can change frequently and without notice, and therefore the website should be consulted for the most recent list – <http://ochmis.org/about-hmis/contributing-agencies/>.

The following service providers/organizations are participating in the Homeless Management Information System (HMIS). These service providers/organizations have the ability to enter data into HMIS and or also view the client's information previously entered by other HMIS participating service providers/organizations, including utilization of homeless services in Orange County.

1736 Family Crisis Center	Health Care Agency – Behavioral Health Services
211OC	Health Care Agency OC Outreach & Engagement
A Community of Friends	Healthcare In Action
Advanced Healthcare Administration	Helping HandUps
American Family Housing	HIS-OC
Anaheim Housing Authority	Hope Center of Orange County
APAIT	Housing for Health Orange County
Asian American Senior Citizens Service Center	Hub Resource Center
Be Well OC	Illumination Foundation
CalOptima	Jamboree
Casa Teresa	JMh – Anaheim Foundation
Casa Youth Shelter	Last Is First Philanthropies
Celebrating Life Community Health Center	Leading Purpose
City Net	Lutheran Social Services of Southern California
City of Brea	Mariposa Women & Family Center
City of Buena Park	Mental Health Association
City of Costa Mesa	Mercy House
City of Dana Point	Moving Forward Psychological Institute, Inc.
City of Fullerton	New Directions for Veterans
City of Garden Grove	Nurturing Care LLC
City of Huntington Beach	OC Rescue Mission
City of Irvine	Orange County Asian and Pacific Islander Community Alliance
City of La Habra	Orange County Housing Authority
City of Lake Forest	Orange County United Way
City of Mission Viejo	People Assisting the Homeless (PATH)
City of San Clemente	Pathways of Hope
City of San Juan Capistrano	Project Kinship
City of Stanton	Radiant Health Centers
City of Westminster	Salvation Army
Colette's Children's Home	Santa Ana Housing Authority
Community Action Partnership of Orange County	Share Our Selves
County of Orange/Office of Care Coordination	South County Outreach
Covenant House California	Serving People In Need (SPIN)
Encompass Housing	StandUp for Kids
Families Forward	The Orangewood Foundation
Families Together of Orange County	Thomas House
Family Assistance Ministries	US Veterans Initiative
Family Health Matters - North Orange County Regional Health Foundation	Volunteers of America Los Angeles (VOALA)
Family Promise of Orange County	Waymakers
Family Solutions Collaborative	We Care Los Alamitos
Friendship Shelter	WISEPlace
Grandma's House of Hope	

The following service providers/organizations have restricted access in HMIS. This means that the service providers/organizations are limited to only entering data into HMIS are not able to view client's history, files, project enrollments, etc.

Santa Ana Police Department

If you feel any of your rights outlined in this document have been violated, please contact (714) 589-2360.

Orange County Continuum of Care Homeless Management Information System (OC HMIS)

HMIS Grievance Form

If you feel a violation of your rights as an HMIS client has occurred or you disagree with a decision made about your "Protected HMIS Information" you may complete this form. Complete this form only after you have exhausted the grievance procedures at the agency you have a grievance with. For grievances related to care provided through the Coordinated Entry System, contact the Office of Care Coordination at CoordinatedEntry@ocgov.com. It is against the law for any agency to take retaliatory action against you if you file this grievance. You can expect a response within 30 days via the method of your choice.

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Grievances may be submitted to the OC HMIS team by either of the following methods:

- Call the HMIS team at (714) 589-2360
- Send this form to:

[Orange County United Way](#)
Attn: HMIS Department
18012 Mitchell South
Irvine, CA 92614

Your Name: _____ Date of Grievance: _____

Best Way to Contact You: Phone Mailing Address

Email Case Manager/Advocate

Your Phone Number: _____ Your Email Address: _____

Your Mailing Address: _____

Case Manager/Advocate Contact Information (optional)

Name: _____ Email Address: _____

Phone Number: _____ Agency: _____

Grievance Information

Name of Individual who violated your privacy rights Name of Agency who violated your privacy rights

Brief description of grievance (what happened):

Last Updated: [09/2023](#)
[11/2024](#)

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What Is HMIS?

The Homeless Management Information System (HMIS) is a web-based information system used by organizations that serve homeless and at-risk individuals in Orange County in order to compile information about the persons they serve.

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Why Gather and Maintain Data?

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

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Written Client Consent

Each client must complete a **Consent to Share Protected Personal Information** in order for their identifying information to be shared with other agencies participating in HMIS. If the client refuses to provide consent, only the agency serving the client will have access to his or her information. Clients cannot be denied services for refusing to provide consent. A copy of the form will be provided to the client upon request.

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Common Questions

What violations are considered HMIS grievances?

Client should complete the HMIS Grievance Form if they feel their privacy and security regarding data stored in HMIS was violated, or if their HMIS rights were violated. Examples of violations could include the client's HMIS record being shared with someone who is not authorized to access their record, or a client being denied access to review their client record as outlined in the HMIS Policies and Procedures.

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Who can access my information?

Only staff who work directly with clients or who have administrative responsibilities can look at, enter, or edit client information. Please visit our website for a list of the Agencies Contributing Data to HMIS (ochmis.org > About HMIS > Contributing Agencies). Please note that this list can change frequently and without notice; therefore the website should be consulted for the most recent list.

Who will receive my information?

No client identifying information (names, dates of birth, etc.) will be released to entities not participating in HMIS without your consent. Information is stored in an encrypted central database. Only organizations that are contributing data to HMIS and have agreed to abide by the HMIS Policies and Procedures will have access to HMIS data.

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Don't I have a right to privacy?

Clients do have the right to privacy, and also the right to confidentiality. You are entitled to a copy of the privacy notice upon request. Clients have the right to know who has modified their HMIS record. You also have the right to request access to your HMIS client record. Review the HMIS Client Record Requests page (https://ochmis.org/hmis-client-record-requests/) for more information about this process, and a printed copy of this data. You have the right to review this data with agency staff. You may not see other clients' records, nor may they see your information.

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What if I don't want to provide information?

Clients have the right not to answer any questions, unless entry into a program requires it. You may not be denied services based on your refusal to sign a **Consent to Share Protected Personal Information**.

What if I believe my rights have been violated?

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Last Updated: 09/2023

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Clients have the right to file a grievance with the agency or with the HMIS Administrative Office at 211OC. Grievances must be filed through written notice. Clients will not be retaliated against for filing a complaint.

Last Updated: ~~09/2023~~
11/2024

Last Revision: 01/2022

Orange County Continuum of Care Homeless Management Information System (OC HMIS)

Privacy Notice

THIS PRIVACY NOTICE EXPLAINS UNDER WHAT CIRCUMSTANCES WE MAY SHARE AND DISCLOSE YOUR INFORMATION FROM THE OC HMIS. THIS NOTICE ALSO EXPLAINS YOUR RIGHTS REGARDING YOUR CONFIDENTIAL INFORMATION.

PLEASE READ IT CAREFULLY.

Our organization collects and shares information about individuals who access our services. The information is confidentially stored in a local electronic database called the Orange County Homeless Management Information System (OC HMIS). The OC HMIS securely records information (data) about persons accessing housing and homeless services in Orange County.

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

Why We Collect and Share Information

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

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

The Type of Information We Collect and Share in the HMIS

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

- Name and contact information
- Social security number
- Birthdate
- Demographic information such as gender and race/ethnicity
- History of homelessness and housing (including current housing status and where and when services have been accessed)
- Self-reported medical history including any mental health and substance abuse issues
- Case notes and services

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- Case manager's contact information
- Income sources and amounts; and non-cash benefits
- Veteran status
- Disability status
- Household composition
- Emergency contact information
- Domestic violence history
- Photo (optional)

How Your Personal Information Is Protected in the HMIS

Your information is protected by passwords and encryption technology. Each HMIS user and participating organization must sign an agreement to maintain the security and privacy of your information. Each HMIS user or participating organization that violates the agreement may have access rights terminated and may be subject to further penalties.

How PPI May Be Shared and Disclosed

Unless restricted by other laws, the information we collect can be shared and disclosed [without your consent](#) under the following circumstances:

- To provide or coordinate services.
- For payment or reimbursement of services for the participating organization.
- For administrative purposes, including but not limited to HMIS system administrator(s) and developer(s), and for legal, audit personnel, and oversight and management functions.
- For creating de-identified PPI.
- When required by law or for law enforcement purposes.
- To prevent a serious threat to health or safety.
- As authorized by law, for victims of abuse, neglect, or domestic violence.
- For academic research purposes.
- ~~In a situation where you have properly-requested access to your HMIS records through the Client Record Request process, and an agency will be providing you such access with those records, your PPI data will be provided to such agency.~~
- Other uses and disclosures of your PPI can be made with your written consent.

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Providing Your Consent for Sharing PPI in the HMIS

~~Generally, if you choose~~ to share your PPI in the OC HMIS, we must have your written consent.

Exception:

- In a situation where we are gathering PPI from you during a phone screening, street outreach, or community access center sign-in, your verbal consent can be used to share your information in HMIS. If we obtain your verbal consent, you will be requested to provide written consent during your initial assessment. If you do not appear for your initial assessment, your information

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will remain in HMIS until you revoke your consent in writing.

- ~~In a situation where you have properly requested access to your HMIS records and an agency will be providing you such access, your PPI data will be provided to such agency.~~

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

How to Revoke Your Consent for Sharing Information in the HMIS

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

Your Rights to Your Information in the HMIS

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

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

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

Your Privacy Rights Regarding Your Information in the HMIS

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

If your grievance is not resolved to your satisfaction, you may send a written grievance appeal to the HMIS [System Administrator/Lead, Orange County United Way, 211 Orange County \(211OC\)](#).

Amendments to this Privacy Notice

The policies in this notice may be amended at any time. These amendments may affect information obtained by this organization before the date of the change. Amendments regarding use or disclosure of PPI will apply to information (data) previously entered in HMIS, unless otherwise stated. All amendments to this privacy notice must be consistent with the requirements of the federal HMIS privacy standards. This organization must keep permanent documentation of all privacy notice amendments.