sarah
Alliance to House Everyone

Continuum of Care Board of Directors Meeting
Thursday, August 26, 2021
3:00 – 5:00PM

The following agenda items may not necessarily be considered in the order they appear.

1. **Call to Order**

2. **Public Comment**

SARAH NONPROFIT BUSINESS

3. **Welcome Tyler Shoesmith, Senior Director Northeast ISD**

4. **Board Member Recognition**

5. **Homelessness Updates Roundtable**

This is an opportunity to share your updates on housing and homelessness

6. **Consent Items**
   - Minutes from June 24, 2021 Board of Directors Meeting 📎 (p. 5-9)

   Motion _____ Second _____ Abstain _____ Passed _____

   - July 2021 Financial Reports 📎 (p. 10-15)

   Motion _____ Second _____ Abstain _____ Passed _____

7. **Nonprofit and Governance Bylaws Update – Eboni Jett and Chelsey Viger**
   - Coordinated Entry (CE) and Outreach Committee Bylaws 📎 (p. 16-19)

   Motion _____ Second _____ Abstain _____ Passed _____

   - Section 5.11-Action Without a Meeting 📎 (p. 20)

   Motion _____ Second _____ Abstain _____ Passed _____

   - Prior edits from June 24, 2021 Board Meeting

   Motion _____ Second _____ Abstain _____ Passed _____

8. **Approve 2021 Single Audit Update – Richard Huron 📎 (p. 21-44)**

   Motion _____ Second _____ Abstain _____ Passed _____

9. **Executive Director Report – Katie Vela**
   - Update on Strategic Plan
   - Housing Surge Update
   - Staffing Updates
   - Community Engagement & Awareness
   - Big Give: September 23rd

CONTINUUM OF CARE BUSINESS

10. **Membership Council Report – Scott Ackerson**

11. **Membership Council Application – Magdalena House 📎 (p. 45-48)**

   Motion _____ Second _____ Abstain _____ Passed _____

12. **Membership Council Application – San Antonio Legal Services Association (SALSA) 📎 (p. 49-51)**

   Motion _____ Second _____ Abstain _____ Passed _____

13. **Membership Council Application – Spirit Wolf Therapeutic Interventions/El Shaddia Ministry 📎 (p. 52-54)**

   Motion _____ Second _____ Abstain _____ Passed _____

14. **CoC Program Notice of Funding Opportunity Policy – Chelsey Viger 📎 (p. 55-89)**

   Motion _____ Second _____ Abstain _____ Passed _____

15. **Youth Action Board Report (YAB) Report – Kameron Rhys & Salena Santibáñez**

16. **Homeless Management Information System (HMIS) Advisory Committee Report – Phil Beckett**
   - HMIS Policies and Procedures (annual approval) 📎 (p. 90-140)

   Motion _____ Second _____ Abstain _____ Passed _____

   - HMIS Data Quality Monitoring Plan (annual approval) 📎 (p. 141-168)

   Motion _____ Second _____ Abstain _____ Passed _____

- HMIS Policies and Procedures Section 2.3.4 (HMIS Training Coordinator Job Description) 📎 (p. 169-172)

  Motion _____ Second _____ Abstain _____ Passed _____

- HMIS Policies and Procedures Section 3.5.2 (Training Procedures) 📎 (p.169-172)

  Motion _____ Second _____ Abstain _____ Passed _____

- HMIS Quarterly Self-Audit Proposed Changes 📎 (p. 173)

  Motion _____ Second _____ Abstain _____ Passed _____

17. Outreach and Coordinated Entry (CE) Advisory Committee Report – Melody Woosley
- Prevention Subcommittee
- Outreach Case Conferencing
- New Committee Structure and Updated Bylaws
- Prioritization Tool Update

18. Point-in-Time Count Committee Report – Leslie Komet
- Methodology Update

19. Upcoming SARAH Meetings and Events

Next CoC Board Meeting	Next CoC Membership Council Meeting
October 26, 2021 3:00 – 5:00 PM Virtual	September 30, 2021 2:30 – 4:00 PM Virtual

Committee Meetings & Working Groups

Title	Point of Contact	Event Details*
Youth Homelessness Workgroup	Dacey Werba daceywerba@sarahomeless.org	September 17, 2021 9:30 – 10:30AM
Housing Strategies Workgroup	Dacey Werba daceywerba@sarahomeless.org	September 10, 2021 1:00 – 2:00PM
HMIS Advisory Committee	Madeline Carrola MadelineCarrola@sarahomeless.org	September 29, 2021 10:30 – 11:15AM

Outreach & Coordinated Entry Advisory Committee	Eboni Jett Ebonijett@SARAHomeless.org	September 8, 2021 10:30 – 11:30AM
Point-in-Time Count Committee	Chelsey Viger ChelseyViger@SARAHomeless.org	September 9, 2021 10:00 – 11:00AM
Youth Action Board	Suyapa Munoz suyapamunoz@SARAHomeless.org	September 11, 2021 1:00 – 2:30PM

All meetings are currently being held virtually. Please email daceywerba@sarahomeless.org to be added to a meeting distribution list

20. Topics for August Board Meeting

21. Announcements

- Discuss September 23rd Board retreat meeting.

22. Adjournment

Continuum of Care Board of Directors Meeting Minutes
Thursday, June 24, 2021
3:00 – 5:00PM

The following agenda items may not necessarily be considered in the order they appear.

1.   Call to Order
President Powell called the meeting to order at 3:05 pm.

2.   Attendance
Present: Leilah Powell, Phil Beckett, Roy Fletcher, Melody Woosley, Robert Blanton, Kameron Rhys, Jack Tsai, Heather Summers, Salena Santibanez, Nikisha Baker, Scott Ackerson, and Greg Zlotnick.
Absent: Lori Stinson, Craig Hopkins, Leslie Komet, and Greg Matula.
Guests: Katherine Dillard Gonzalez, and Molly Biglari.
Staff: Katie Vela, Madeline Carrola, Dacey Werba, Billy Mahone, Harpreet Gill, Diana Truumees, and Richard Huron.

3.   Public Comment
There were no public comments.

SARAH NONPROFIT BUSINESS

4.   Welcome Membership Council Director At-Large Nikisha Baker, President and CEO of SAMMinistries

President Powell welcomed Nikisha Baker. Nikisha spoke on her passion for permanent supportive housing and is grateful to serve alongside everyone on the board.

5.   Welcome Board Member Dr. Jack Tsai, Campus Dean and Professor, UTHealth School of Public Health

President Powell welcomed Dr. Jack Tsai. Jack spoke on his excitement to be on the Board and to co-chair HMIS Advisory Committee.

6.   Board Member Recognition

President Powell thanked Kameron for their work with the City of San Antonio consolidated funding process meetings. These meetings are a huge commitment and Kameron is bringing a great perspective. Salena was also recognized for her healing session she led with the Youth Action Board and was thanked for the impact she has made. Craig and Lori were also recognized for meeting with applicants who would like to join Membership Council. President Powell went on to recognize Scott and Nikisha for bringing new energy to the Membership Council, raising issues that need to be addressed, and for their continuous improvement to the nonprofit bylaws. Leilah was thanked for connecting with Mario Bravo to speak about City Council District 1's homelessness concerns. He has already reached out to SARAH to do work in the community.

7. Homelessness Updates Roundtable

President Powell shared she is preparing a presentation on Permanent Supportive Housing (PSH) to increase interest and awareness in the community of this need. This would be scheduled towards the end of July and would be an accessible presentation that would lead to specialized training.

8. Consent Items 📎 **(p. 5 – 14)**
- Formal Approvals from April 29, 2021 Board Meeting:
    - Jack Tsai Board Member Application

        Motion __Greg Zlotnick__ Second __Roy Fletcher__ Abstain __None__ Passed __Yes__

    - Suenos Sin Fronteras Membership Council Application

        Motion: __Phil Beckett__ Second __Roy Fletcher__ Abstain __None__ Passed __Yes__

- Minutes from April 29, 2021 Board of Directors Meeting 📎 (p. 5 – 9)

    Motion __Roy Fletcher__ Second __Heather Summers__ Abstain __None__ Passed __Yes__

- May 2021 Financial Reports 📎 (p. 11 – 14)

    Motion __Phil Beckett__ Second __Greg Zlotnick__ Abstain __None__ Passed __Yes__

9. Board Member Application – Tyler Shoesmith, Senior Director, North East ISD 📎 **(p. 15 – 19)**

    Motion __Roy Fletcher__ Second __Greg Zlotnick__ Abstain __None__ Passed __Yes__

10. Nonprofit and Governance Bylaws – Madeline Carrola, Scott Ackerson, and Nikisha Baker 📎 **(p. 20 – 50)**

An overview of the changes recommended in the Nonprofit and Governance Bylaws was presented by SARAH staff member, Madeline Carrola. Scott spoke on behalf of the Membership Council and showed the minor changes recommended.

President Powell thanked everyone for paying close attention to our documents and making sure they reflect our practices.

11. Executive Director Report – Katie Vela
- Organizational Strategic Plan
- SHIP/Bexar County/SASH
- Housing Surge

- Office Update

CONTINUUM OF CARE BUSINESS

12. Homeless Management Information System (HMIS) Advisory Committee Report – Phil Beckett 📎 **(p. 51)**
- An update on Outreach Grid was presented by the City of San Antonio. This will remain a top priority for the committee.
- Committee Slate 📎 (p. 51)-

Motion __Greg Zlotnick__ Second __Roy Fletcher__ Abstain __None__ Passed __Yes__

13. Membership Council Report – Scott Ackerson
Scott thanked SARAH team member, Chelsey Viger, for keeping the group organized and on track. He was happy to see there is a lot of participation compared to the past, and great conversations. There was a report given from Texas Location Solutions on youth access points; bylaw edits were approved by the Council; SARAH staff presented on the American Rescue Plan; the Family Homelessness Workgroup will be dissolved; and workgroups and committees shared updates.

14. Membership Council Application – Pilot House 📎 **(p. 52 – 54)**

The Board invites Pilot House to meetings as an Associate Member and welcomes them to reapply when their programs are up and running.

15. Membership Council Application – Philanthropic Endeavors 📎 **(p. 55 – 58)**

The Board invite Philanthropic Endeavors to meetings as an Associate Member and welcomes them to reapply when their programs are up and running.

16. Membership Council Application – Christian Assistance Ministries 📎 **(p. 59 – 62)**

Motion __Greg Zlotnick__ Second __Phil Beckett__ Abstain __None__ Passed __Yes__

17. Membership Council Application – Alamo Colleges Northeast Lakeview 📎 **(p. 63 – 65)**

Motion __Salena Santibanez__ Second __Heather Summers__ Abstain __None__ Passed __Yes__

18. Approve HUD Report Submissions 📎 **(p. 66 – 76)**
- Point-in-Time (PIT) 📎 (p. 66 – 73)
- Housing Inventory Count (HIC) 📎 (p. 74 – 76)

Motion __Greg Zlotnick__ Second __Roy Fletcher__ Abstain __None__ Passed __Yes__

19. Youth Action Board Report (YAB) Report – Kameron Rhys & Salena Santibáñez
- The YAB will be having a Pride 2021 event at Pegasus. The event will be from 3-5 pm on Saturday, June 26th and the YAB hope to network and meet youth.
- The YAB hosted a volunteer event at the Gardopia Gardens and had a good turn out with great participation. The YAB will continue to do a monthly volunteer event to give back to the community.
- The YAB encourages other organizations to have youth on their boards.
- The YAB held a healing circle to work on communication and have open dialogue with YAB members.

20. Homeless Management Information System (HMIS) Lead Updates – Katherine Dillard Gonzalez
- Nina Gall is the new Interim HMIS Manager. She is working with ICF to make sure she has the support needed to be successful in the permanent role of HMIS Manager. The process will take 90 days.
- HMIS has signed an agreement with Case Worthy to start working on building the API. The goal is for the API to be fully built and functional by late August and running by September.

21. Outreach and Coordinated Entry (CE) Advisory Committee Report – Melody Woosley 📎 (p. 77)
- Homelink Vision and Goals 📎 (p. 77)
- The Prevention Subcommittee has partnered with 6 different ESG and ESG Cares Homeless Prevention projects. Seventy-six clients have been screened through the collaborative process, and 62 of them have been referred to partners. They are continuing to monitor funds and have some concerns for spending due to limitations.
- Outreach Case Conferencing will begin on July 1, 2021 and will meet weekly to help with coordination during the Housing Surge.
  - i There are 2 positions left to fill in outreach through the City of San Antonio, and will continue onboarding and training in outreach before they send into the field.

22. Point-in-Time Count Committee Report – Greg Zlotnick 📎 (p. 78)
- PIT Count 2022 Date: Tuesday, January 25, 2022

Motion _ Roy Fletcher _ Second _ Phil Beckett _ Abstain _ None _ Passed _ Yes _

- PIT Committee had a presentation on Outreach Grid at the last meeting. The committee will move forward with adopting Outreach Grid due to the number of advantages. PIT Committee will keep in mind equity and access for folks who do not have access to apps, and will explore alternatives.
- Committee Slate 📎 (p. 78)

Motion Melody Woosley Second Roy Fletcher   Abstain None Passed Yes

23. Upcoming SARAH Meetings and Events

Next CoC Board Meeting	Next CoC Membership Council Meeting
August 26, 2021 3:00 – 5:00 PM Virtual	July 29, 2021 2:30 – 4:00 PM Virtual

Committee Meetings & Working Groups

Title	Point of Contact	Event Details*
Youth Homelessness Workgroup	Tyler Shoesmith, North East Independent School District tshoes@neisd.net	July 16, 2021 9:30 – 10:30AM
Housing Strategies Workgroup	Sara Wamsley, Neighborhood and Housing Services Department Sara.Wamsley@sanantonio.gov	July 9, 2021 11:00 – 12:00PM
HMIS Advisory Committee	Madeline Carrola MadelineCarrola@sarahomeless.org	June 30, 2021 10:30 – 11:15AM
Outreach & Coordinated Entry Advisory Committee	Eboni Jett Ebonijett@SARAHomeless.org	July 7, 2021 10:30 – 11:30AM
Point-in-Time Count Committee	Chelsey Viger ChelseyViger@SARAHomeless.org	July 8, 2021 10:00 – 11:00AM
Youth Action Board	Suyapa Munoz suyapamunoz@SARAHomeless.org	July 3, 2021 1:00 – 2:30PM

All meetings are currently being held virtually. Please email daceywerba@sarahomeless.org to be added to a meeting distribution list

24. Topics for August Board Meeting

25. Announcements

- Happy Birthday to Salena.
- SARAH may request the Executive Committee look at our Notice of Funding Opportunity (NOFA) policies and procedures depending on the timeline given by HUD.

26. Adjournment

President Powell adjourned the meeting at 4:32 pm.

South Alamo Regional Alliance For The Homeless
Statement of Financial Position
As of July 31, 2021

		Total
ASSETS		
Current Assets		
Bank Accounts		
Checking-Broadway		650,139
Total Bank Accounts	$	**650,139**
Accounts Receivable		
11000 Accounts Receivable		190,393
A/R - Membership Dues		0
Total Accounts Receivable	$	**190,393**
Other Current Assets		
A/R - Other		0
Health Deduction Receivable		228
Prepaid Expenses		216
Prepaid Expenses - Insurance		4,269
Total Other Current Assets	$	**4,713**
Total Current Assets	$	**845,245**
Fixed Assets		
15000 Computers & Equipment		6,823
Furniture and Fixtures		29,057
Accumulated Depreciation		-19,760
Total Furniture and Fixtures	$	**9,297**
Total Fixed Assets	$	**16,120**
TOTAL ASSETS	$	**861,365**
LIABILITIES AND EQUITY		
Liabilities		
Current Liabilities		
Accounts Payable		
20000 Accounts Payable		3,946
Total Accounts Payable	$	**3,946**
Other Current Liabilities		
Accrued Expense		0
Payroll Liabilities		26,794
Payroll Tax Liability		7,607
Total Other Current Liabilities	$	**34,401**
Total Current Liabilities	$	**38,347**
Total Liabilities	$	**38,347**
Equity		
31500 Temp. Restricted Net Assets		271,803
32000 Unrestricted Net Assets		531,787
Change in Net Assets		19,428
Total Equity	$	**823,018**
TOTAL LIABILITIES AND EQUITY	$	**861,365**

South Alamo Regional Alliance For The Homeless
Statement of Activities Budget vs. Actuals: FY2021
January - July, 2021

	Jul 2021				Total YTD			
	Actual	Budget	over/under Budget	% of Budget	Actual	Budget	over/under Budget	% of Budget
Income								
City of San Antonio - Alt Give	86	0	86	0%	6,572	0	6,572	0%
City Of San Antonio Grant	18,801	15,333	3,468	123%	71,389	80,583	-9,194	89%
COSA NHSD	0	50,000	-50,000	0%	0	50,000	-50,000	0%
Donations	2,098	2,742	-644	76%	54,458	19,194	35,264	284%
Dues from HUD Awardees	0	0	0	0%	96,388	92,863	3,525	104%
ESG	0	1,363	-1,363	0%	0	2,275	-2,275	0%
Greehey Family Foundation	0	0	0	0%	50,000	0	50,000	0%
HUD - Planning Grant	44,361	45,104	-743	98%	192,640	197,039	-4,399	98%
HUD - YHDP Planning Grant 2	0	0	0	0%	34,352	40,000	-5,648	86%
HUD - YHDP Planning Grant 3	0	0	0	0%	42,854	44,000	-1,146	97%
HUD Coordinated Entry Grant	40,700	52,976	-12,276	77%	245,729	277,005	-31,276	89%
HUD Domestic Violence	6,825	6,814	11	100%	32,092	29,955	2,137	107%
HUD YHDP Coordinated Entry	0	5,628	-5,628	0%	0	16,887	-16,887	0%
USAA PIT Funds	0	0	0	0%	0	0	0	0%
Total Income	$ 112,872	$ 179,960	-$ 67,088	63%	$ 826,475	$ 849,801	-$ 23,326	97%
Expenses								
Advertising/Marketing/Public Relations	278	500	-222	56%	3,871	1,000	2,871	387%
Background Checks	0	0	0	0%	125	0	125	100%
Bank Fees	0	0	0	0%	5	0	5	0%
Computers	0	0	0	0%	1,284	7,200	-5,916	18%
Coordinated Entry Consulting	0	0	0	0%	0	5,000	-5,000	0%
Copier Lease	176	178	-2	99%	1,281	1,968	-687	65%
Depreciation Expense	0	0	0	0%	0	0	0	0%
Diversion/Prevention	1,675	30,000	-28,325	6%	49,533	190,000	-140,467	26%
Education/Training	0	0	0	0%	1,395	0	1,395	0%
Furniture	3,276	0	3,276	0%	6,124	1,500	4,624	408%
Identification Recovery Expense	0	1,000	-1,000	0%	6,071	7,000	-929	87%

South Alamo Regional Alliance For The Homeless
Statement of Activities Budget vs. Actuals: FY2021
January - July, 2021

	Jul 2021		over/under	% of	Total YTD		over/under	% of
	Actual	Budget	Budget	Budget	Actual	Budget	Budget	Budget
IT Support Services	1,528	1,508	20	101%	11,863	10,556	1,307	112%
Legal & Professional Fees	12,893	5,685	7,208	227%	34,533	38,395	-3,862	90%
Memberships and Subscriptions	550	0	550	0%	1,175	1,000	175	118%
Mileage	545	425	120	128%	1,207	1,675	-468	72%
NOFA/Planning Consultant		5,000	-5,000	0%	0	10,000	-10,000	0%
Office Supplies	95	600	-505	16%	2,265	2,450	-185	92%
Partner/Employee Relations	106	300	-194	35%	2,138	2,050	88	104%
Payroll Processing	635	736	-101	86%	3,477	3,676	-199	95%
Payroll Taxes and Fringe Benefits	15,396	18,523	-3,127	83%	79,592	103,437	-23,845	77%
Personnel Salaries and Wages	95,192	99,121	-3,929	96%	509,936	550,771	-40,835	93%
PIT Count Software Fee	0	0	0	0%	20,000	23,000	-3,000	87%
Postage	0	55	-55	0%	110	275	-165	40%
Printing	0	0	0	0%	0	1,500	-1,500	0%
Professional Insurance	381	379	2	100%	2,665	2,665	0	100%
Refreshments	59	350	-291	17%	137	950	-813	14%
Rent	4,460	4,460	0	100%	31,221	31,220	1	100%
Software	179	371	-192	48%	2,839	2,597	242	109%
Stipends/Program Distributions	2,490	1,250	1,240	199%	21,285	8,000	13,285	266%
Subsidy/Assurance Fund	0	5,000	-5,000	0%	1,500	15,000	-13,500	10%
Telecommunications	695	766	-71	91%	5,814	5,362	452	108%
Training/Continuing Education	70	1,350	-1,280	5%	660	4,050	-3,390	16%
Travel - Conferences & Continuing Ed	0	6,000	-6,000	0%	4,940	6,000	-1,060	82%
Total Expenses	$ 140,679	$ 183,557	-$ 42,878	77%	$ 807,047	$ 1,038,422	-$ 231,375	78%
Change in Net Assets	-$ 27,807	-$ 3,597	-$ 24,210	773%	-$ 19,428	-$ 188,621	$ 208,049	-10%

Tuesday, Aug 10, 2021 02:25:04 PM GMT-7 - Accrual Basis

South Alamo Regional Alliance For The Homeless
Statement of Activities by Class
January - July, 2021

	Alternative Giving	COSA 19-20	HUD Dues	CE Domestic Violence	Coordinated Entry Grant	COSA - NHSD	ESG Cares	Greehey Family Fundation	HUD Planning Grant	USAA	USAA Diversion Grant	YHDP Planning 2	YHDP Planning 3	Total Restricted	Unrestricted	Hixon Properties	Total Unrestricted	TOTAL
Income																		
City of San Antonio - Alt Give	6,572													0			0	6,572
City Of San Antonio Grant		71,389												0			0	71,389
Donations														0	54,458		54,458	54,458
Dues from HUD Awardees			96,388											0			0	96,388
Greehey Family Foundation								50,000						50,000				50,000
HUD - Planning Grant									192,640					192,640				192,640
HUD - YHDP Planning Grant 2												34,352		34,352				34,352
HUD - YHDP Planning Grant 3													42,854	42,854				42,854
HUD Coordinated Entry Grant					245,729									245,729				245,729
HUD Domestic Violence				32,092										32,092				32,092
Total Income	$ 6,572	$ 71,389	$ 96,388	$ 32,092	$ 245,729	$ 0	$ 0	$ 50,000	$ 192,640	$ 0	$ 0	$ 34,352	$ 42,854	$ 597,668	$ 54,458	$ 0	$ 54,458	$ 826,475
Expenses																		
Advertising/Marketing/Public Relations													2,856	2,856	1,015		1,015	3,871
Background Checks														0	125		125	125
Bank Fees														0	5		5	5
Computers																1,284	1,284	1,284
Copier Lease														0	1,281		1,281	1,281
Diversion/Prevention											49,533			49,533				49,533
Education/Training														0	1,395		1,395	1,395
Furniture																6,124	6,124	6,124
Identification Recovery Expense	4,000													0	2,071		2,071	6,071
IT Support Services														0	11,863		11,863	11,863
Legal & Professional Fees					329				10,000		349			10,678	23,855		23,855	34,533
Memberships and Subscriptions														0	1,175		1,175	1,175
Mileage														0	1,207		1,207	1,207
Office Supplies														0	2,265		2,265	2,265
Partner/Employee Relations														0	2,138		2,138	2,138
Payroll Processing														0	3,477		3,477	3,477
Payroll Taxes and Fringe Benefits		8,766		6,495	32,250				23,097			3,716	4,966	73,010	-2,184		-2,184	79,592
Personnel Salaries and Wages		52,241		25,465	199,171				157,509			24,896	33,282	457,185	510		510	509,936
PIT Count Software Fee										20,000				20,000			0	20,000
Postage														0	110		110	110
Professional Insurance														0	2,665		2,665	2,665
Refreshments														0	137		137	137

South Alamo Regional Alliance For The Homeless
Statement of Activities by Class
January - July, 2021

	Alternative Giving	COSA 19 - 20	HUD Dues	CE Domestic Violence	Coordinated Entry Grant	COSA - NHSD	ESG Cares	Greehey Family Fundation	HUD Planning Grant	USAA	USAA Diversion Grant	YHDP Planning 2	YHDP Planning 3	Total Restricted	Unrestricted	Total Unrestricted	Hixon Properties	Total Unrestricted	TOTAL
Rent		3,892			13,446									13,446	13,883	13,883		13,883	31,221
Software														0	2,839	2,839		2,839	2,839
Stipends/Program Distributions	9,805	2,490							1,500			5,740	1,750	8,990	0	0		0	21,285
Subsidy/Assurance Fund						1,500								1,500	0	0		0	1,500
Telecommunications														0	5,814	5,814		5,814	5,814
Training/Continuing Education														0	660	660		660	660
Travel - Conferences & Continuing Ed				133	533				533					1,200	3,741	3,741		3,741	4,940
Total Expenses	$ 9,805	$ 71,389	$ 0	$ 32,092	$ 245,729	$ 20,848	$ 0	$ 0	$ 192,640	$ 20,000	$ 49,882	$ 34,353	$ 42,854	$ 638,397	$ 80,047	$ 80,047	$ 7,408	$ 87,456	$ 807,047
Change in Net Assets	-$ 3,233	$ 0	$ 96,388	$ 0	$ 0	$ 20,848	$ 0	$ 50,000	$ 0	$ 20,000	$ 49,882	$ 0	$ 0	-$ 40,730	$ 25,590	$ 25,590	-$ 7,408	$ 32,998	$ 19,428

Tuesday, Aug 10, 2021 02:18:36 PM GMT-7 - Accrual Basis

South Alamo Regional Alliance for the Homeless
Restricted/Unrestricted Cash
September 2020 to March 2021

	Sep-20	Dec-20	Mar-21	Jun-21
Restricted Cash Balance				
COSA - Alternative Giving	$ 3,194	$ 4,113	$ 599	$ 905
Greehy Foundation	$ -	$ -	$ -	$ 50,000
Place/COSA NHSD	$ 198,584	$ 198,584	$ 194,879	$ 183,439
USAA PIT	$ 20,000	$ 20,000	$ -	$ -
USAA Diversion	$ 248,472	$ 150,905	$ 121,652	$ 102,748
Total Restricted Cash Balance	**$ 470,250**	**$ 373,602**	**$ 317,130**	**$ 337,092**
Unrestricted Cash Balance	**$ 248,887**	**$ 234,644**	**$ 299,609**	**$ 322,394**
Total Cash Balance	**$ 719,137**	**$ 608,246**	**$ 616,739**	**$ 659,486**
Days of Cash on Hand - Unrestricted Cash	**70**	**63**	**78**	**84**
Avg Daily Cost of Operations	$ 3,531	$ 3,705	$ 3,830	$ 3,829

Section 7.03: Coordinated Entry and Outreach Advisory Committee

Purpose and Vision

The purpose of the Coordinated Entry and Outreach Advisory Committee is to collaborate with program stakeholders to identify and discuss community efforts that will improve service and housing connection for people at-risk of and experiencing homelessness. Furthermore, this body will serve as the initial point of communication for policy and evaluation updates from the Coordinated Entry Lead, SARAH, to the CoC Board of Directors.

Responsibilities

- Review and approve community wide, universal definitions used for the Coordinated Entry referral system, which will be reflected in local CoC policies and procedures.
- Ensure local street outreach efforts are coordinated and ensure access for all people experiencing unsheltered homelessness.
- Revise local Street Outreach Protocols and Coordinated Entry policies as needed to improve system performance.
- Provide oversight to the implementation and subsequent monitoring of HUD-mandated Coordinated Entry requirements.
- Review and approve standard operating procedures at Coordinated Entry Access Points.
- Adopt policies and procedures that set baseline requirements for compliance with HUD Data Standards for the management and operation of Coordinated Entry, including but not limited to: Access, Assessment, Prioritization, Referral.
- Provide ongoing constructive feedback regarding the community priorities agreed upon to make system improvements.
- Making community and operational updates and recommendations to the CoC Board of Directors.
- Allow for public comment at meetings on a quarterly basis.

Representation

Any Agency, composed of one or more employees from such, which commits resources or whose activities encompass the spectrum of services housed within Coordinated Entry may be considered for active membership.

Current Committee Seat Structure	Proposed Seat Structure
Standing Seats - Continuum of Care-funded Agency (8 seats) - Emergency Solutions Grant-funded Agency (1 seat) - Haven for Hope (1 seat) - Consumer (1 seat)	Elected Seats - Permanent Supportive Housing (PSH) - Transitional Housing (TH) - Rapid Rehousing (RRH) - Homeless Prevention (HP) - Emergency Shetler (ES)

Elected Seats	• Street Outreach (SO) or Day Center
• Additional Community Representatives, Approved by CoC Board (5 Maximum) • City of San Antonio, Bexar County, Veteran's Affairs, Public Housing Authority, Healthcare, Jail, Foster Care Non-Voting Seats • Collaborative Applicant • HMIS Lead Agency	• Youth Homelessness Demonstration Program (YHDP) Steering Committee Liaison • Consumer Seat • Haven for Hope • Homeless Access Hub • Case Conferencing Chair • Case Conferencing Co-Chair • Community Partner (2) – VA, Public Housing Authority (PHA), Healthcare, Criminal Justice, etc. Non-Voting Seats • Coordinated Entry Lead Agency (SARAH) • HMIS Lead Agency

Section 7.04: Committee Composition

Requirements

Active Members are required to attend all meetings. To be considered participating, a member agency must attend at least 75% of Meetings in one year. Each agency must designate one person to represent and vote on behalf of their agency. Each agency may, with advance notice provided to the Chair, provide an alternate person to vote as proxy for the member in the event the original member cannot be present. The alternate must have the ability to speak on behalf of the organization and be of equal seniority within the agency.

To be considered, all applicants must have the following criteria met:

- Authorization/Signature of the Agency's Executive Director,
- Seniority with the agency to be able to vote and effectively speak on behalf of the participating agency,
- A working and high-level strategic knowledge of the committee's purpose and the role it plays with respect to the agency's operations.

Membership Registration

Potential members must fill out and return an application SARAH via Google Forms. SARAH will present a list of members to the Membership Council for recommendation. The CoC Board will approve the final slate of members. Active Members are required to keep the SARAH staff informed of the physical and e-mail address at which they will receive notices. More than one individual associated with an Active Agency may attend, and participate at all meetings,

however only those who hold an active committee seat and those officially designated as a proxy can vote.

Section 7.05: Committee Meetings

Meetings will be held at least quarterly and usually monthly. SARAH will publish the meeting agendas to committee members no later than one (1) business day prior to the meeting.

Special Meetings

Special meetings may be called by the Committee Chair, Board President, or SARAH Executive Director at any time that he or she deems that a vote of the Advisory Committee is required, by providing members with at least one (1) days' notice prior to such meeting by written notice delivered personally, or sent by mail, email, facsimile, or other appropriate electronic means to the address provided by each.

Informal Meetings

The Committee Chair, Board of Directors President, or SARAH Executive Director may from time to time call informal, nonvoting, non- required meetings for distributing information, or for specific training opportunities.

Section 7.06: Committee Voting

Each Agency who has met the requirements set out for Active Membership shall have one (1) vote through their specified delegates. In all items that require action, unless otherwise provided for in these Bylaws, a majority of the votes cast shall control. It is the intent that each member Agency has one vote, regardless of the number of participants from that Agency.

Section 7.07: Committee Officers

Chair (voting)

The committee Chair is responsible for overseeing the meetings, leading monthly agenda development, and ensuring, along with SARAH staff, that the process is community-led and inclusive. The Chair will report committee business to the CoC Board of Directors.

Co-chair (voting)

The committee Co-Chair is responsible for supporting the Chair and leading in their absence.

Section 7.08: Committee Term Limits

Chair/Co-Chair

The Chair, a member from the CoC Board, may not serve for more than two (2) consecutive one year terms before taking a minimum one term break before rejoining the committee. Only under a special vote by the CoC Board can this be over-ruled for special circumstance such as a lack of Board representation or expertise..

Voting Member

Each chosen agency may not hold their category seat for more than two (2) consecutive one (1) year terms before taking a minimum one (1) year break before rejoining the committee. This does not preclude the agency from applying and filling an alternative category during the break or for a new set of 2 years.

Section 7.09: Committee Resignation or Removal

Removal for Absence

Any voting member who misses more than two (2) consecutive Meetings during the year, and without providing a proxy, shall be automatically removed from their elected Committee position. An absence may be excused if related to illness and submitted to the Committee Chair or Collaborative Applicant Lead prior to the meeting.

Removal for Cause

Any committee elected Member may submit a request to the Chair or SARAH Executive Director for consideration of the removal of a Member for cause. Removal for cause requires a 2/3's vote of the Active Members of the Committee. Cause includes, but is not limited to: Fraud, Personal Conduct (as outlined in SARAH Code of Conduct Policy), Conflict of Interest (as outlined in SARAH Conflict of Interest Policy), and/or Failure to Perform Duties.

Section 5.11: Action Without a Meeting

Any action required or permitted to be taken by the CoC Board of Directors may be taken without a meeting, if members of the CoC Executive Committee individually consent in writing to such an action. Actions without a meeting will follow the same manner of acting described in Section 5.09. Such written consents shall be filed with the minutes of the proceedings of the CoC Board of Directors. Such action by written consent will have the same force and effect as the unanimous vote of such directors.

South Alamo Regional Alliance for the Homeless

**Financial Statements
and Compliance Report**

December 31, 2020 and 2019

SCHRIVER
CARMONA

Certified Public Accountants

South Alamo Regional Alliance for the Homeless

Table of Contents

Independent Auditor's Report

To the Board of Directors of
South Alamo Regional Alliance for the Homeless

Report on the Financial Statements

We have audited the accompanying financial statements of South Alamo Regional Alliance for the Homeless (SARAH) (a nonprofit organization), which comprise the statement of financial position as of December 31, 2020, and the related statements of activities, functional expenses, and cash flows for the year then ended, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

Auditor's Responsibility

Our responsibility is to express an opinion on these financial statements based on our audit. We conducted our audit in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Opinion

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of South Alamo Regional Alliance for the Homeless as of December 31, 2020, and the changes in its net assets and its cash flows for the year then ended in accordance with accounting principles generally accepted in the United States of America.

Report on Summarized Comparative Information

We have previously audited South Alamo Regional Alliance for the Homeless' 2019 financial statements, and we expressed an unmodified audit opinion on those audited financial statements in our report dated November 18, 2020. In our opinion, the summarized comparative information presented herein as of and for the year ended December 31, 2019, is consistent, in all material respects, with the audited financial statements from which it has been derived.

Other Matters

Other Information

Our audit was conducted for the purpose of forming an opinion on the financial statements as a whole. The accompanying schedule of expenditures of federal awards, as required by Title 2 U.S. *Code of Federal Regulations* Part 200, *Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards*, is presented for purposes of additional analysis and is not a required part of the financial statements. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, the information is fairly stated, in all material respects, in relation to the financial statements as a whole.

Other Reporting Required by Government Auditing Standards

In accordance with *Government Auditing Standards*, we have also issued our report dated August 5, 2021, on our consideration of SARAH's internal control over financial reporting and on our tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements and other matters. The purpose of that report is solely to describe the scope of our testing of internal control over financial reporting and compliance and the results of that testing, and not to provide an opinion on the effectiveness of SARAH's internal control over financial reporting or on compliance. That report is an integral part of an audit performed in accordance with *Government Auditing Standards* in considering SARAH's internal control over financial reporting and compliance.

Schriver, Carmona & Company, PLLC

San Antonio, Texas

August 5, 2021

Financial Statements

South Alamo Regional Alliance for the Homeless

Statements of Financial Position
December 31, 2020 and 2019

	2020	2019
Assets		
Cash	$ 608,245	$ 325,073
Accounts Receivable	210,817	169,425
Prepaid Expenses	5,369	3,833
Property and Equipment, Net of Accumulated Depreciation	14,983	22,909
Total Assets	$ 839,414	$ 521,240
Liabilities and Net Assets		
Liabilities:		
Accounts Payable	$ 37,366	$ 31,287
Payroll Liabilities	30,620	-
Total Liabilities	67,986	31,287
Net Assets:		
Without Donor Restrictions	401,939	428,954
With Donor Restrictions	369,489	60,999
Total Net Assets	771,428	489,953
Total Liabilities and Net Assets	$ 839,414	$ 521,240

The Accompanying Notes are an Integral Part of These Financial Statements.

South Alamo Regional Alliance for the Homeless

Statement of Activities
Year Ended December 31, 2020 (with Comparative Totals for the Year Ended December 31, 2019)

	2020 Without Donor Restrictions	2020 With Donor Restrictions	Totals	2019 Totals
Support and Revenues				
Grants	$ 7,567	$ 250,000	$ 257,567	$ 25,000
Contributions	51,761	20,000	71,761	65,391
HUD Planning Grant and Coordinated Entry Grant	1,076,834	-	1,076,834	513,678
HUD Grant Recipient Dues	118,525	-	118,525	146,066
Local Government Grants	115,057	150,000	265,057	193,167
In-Kind Contributions	6,093	-	6,093	26,228
Other Income	-	-	-	4,382
Net Assets Released from Restrictions	111,510	(111,510)	-	-
Total Support and Revenues	1,487,347	308,490	1,795,837	973,912
Expenses				
Program Services	1,235,790	-	1,235,790	781,767
Support Services:				
Management and General	258,114	-	258,114	139,695
Fundraising	20,458	-	20,458	13,425
Total Expenses	1,514,362	-	1,514,362	934,887
Change in Net Assets	(27,015)	308,490	281,475	39,025
Net Assets at Beginning of Year	428,954	60,999	489,953	450,928
Net Assets at End of Year	$ 401,939	$ 369,489	$ 771,428	$ 489,953

The Accompanying Notes are an Integral Part of These Financial Statements.

South Alamo Regional Alliance for the Homeless

Statement of Functional Expenses
Year Ended December 31, 2020 (with Comparative Totals for the Year Ended December 31, 2019)

	Program Services	Support Services: Management and General	Fundraising	2020 Totals	2019 Totals
Salaries and Wages	$ 751,506	$ 95,018	$ 17,276	$ 863,800	$ 537,289
Employee Benefits	56,858	7,189	1,307	65,354	43,519
Payroll Taxes	59,344	7,503	1,364	68,211	42,879
Total Salaries and Related Expenses	867,708	109,710	19,947	997,365	623,687
Advertising	-	191	-	191	-
Bank Fees and Service Charges	-	2	-	2	-
Bad Debt	-	26,103	-	26,103	16,320
Client Services	97,995	-	-	97,995	16,056
Dues and Subscriptions	-	799	-	799	1,494
Insurance	-	3,265	-	3,265	-
In-Kind Expenses	6,093	-	-	6,093	26,228
Miscellaneous	-	22,440	-	22,440	878
Occupancy and Rental	32,113	21,409	-	53,522	49,062
Office Supplies	3,044	4,566	-	7,610	15,726
Point in Time Count Expenses	13,328	-	-	13,328	36,266
Postage and Delivery	-	535	-	535	-
Printing and Reproduction	1,500	-	-	1,500	-
Professional Fees	159,449	50,352	-	209,801	62,139
Software, Furniture, and Equipment	21,320	2,369	-	23,689	13,299
Training and Development	-	-	-	-	1,000
Travel and Conferences	21,718	3,321	511	25,550	26,548
Utilities	3,418	5,126	-	8,544	5,172
Veteran Services	8,104	-	-	8,104	32,119
Website	-	-	-	-	2,104
Total Expenses before Depreciation	1,235,790	250,188	20,458	1,506,436	928,098
Depreciation	-	7,926	-	7,926	6,789
Total Expenses	$ 1,235,790	$ 258,114	$ 20,458	$ 1,514,362	$ 934,887

The Accompanying Notes are an Integral Part of These Financial Statements.

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South Alamo Regional Alliance for the Homeless

Statements of Cash Flows
Years Ended December 31, 2020 and 2019

	2020	2019
Cash Flows From Operating Activities:		
Change in Net Assets	$ **281,475**	$ 39,025
Adjustments to Reconcile Change in Net Assets		
to Net Cash Provided (Used) by Operating Activities:		
Depreciation	**7,926**	6,789
Bad Debt Expense	**26,103**	16,320
(Increase) in:		
Accounts Receivable	**(67,495)**	(159,022)
Prepaid Expenses	**(1,536)**	(1,533)
Increase in:		
Accounts Payable	**6,079**	31,287
Payroll Liabilities	**30,620**	-
Net Cash Provided (Used) by Operating Activities	**283,172**	(67,134)
Cash Flows From Investing Activities:		
Purchase of Property and Equipment	**-**	(6,823)
Net Cash Used by Investing Activities	**-**	(6,823)
Net Increase (Decrease) in Cash	**283,172**	(73,957)
Cash, Beginning of Year	**325,073**	399,030
Cash, End of Year	$ **608,245**	$ 325,073

The Accompanying Notes are an Integral Part of These Financial Statements.

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Note A: Nature of Organization

The South Alamo Regional Alliance for the Homeless (SARAH) was founded in 2001 to work with agencies across San Antonio, Texas and Bexar County to end homelessness. SARAH's mission is to help create integrated, community-wide strategies and plans to prevent and end homelessness and provide coordination among numerous regional organizations and initiatives that serve the homeless population. As the local Continuum of Care Lead Agency, SARAH is charged to create an improved service system that effectively provides support, coordination, and housing to all homeless populations within San Antonio and Bexar County, with a primary focus on moving individuals and families out of homelessness efficiently and permanently. SARAH's goal is for homelessness to be a rare, brief, and non-recurring event.

SARAH's main responsibility is to organize the Continuum of Care for San Antonio and Bexar County. One element unique to funding from the U.S. Department of Housing and Urban Development (HUD) is that communities bundle their applications and decide on projects they want funded that best fit their needs. This funding is competitive on two levels in that San Antonio competes with other cities nationally to determine the overall funding level and then SARAH organizes local competitions to reward high performing agencies.

SARAH also facilitates the annual Point in Time Count which is a massive volunteer event that covers Bexar County and incorporates engagement with those experiencing homelessness on the streets. Additionally, SARAH serves as subject matter experts on community homelessness in San Antonio. SARAH provides guidance to community leaders and initiates strategic planning around housing and services.

Note B: Summary of Accounting Principles

Basis of Accounting

The financial statements are prepared on the accrual basis of accounting in conformity with generally accepted accounting principles (GAAP). Net assets, support and revenue, and expenses are classified according to two classes of net assets:

- *Without Donor Restrictions* – net assets available for use in general operations and not subject to donor restrictions. Grant and contributions gifted for recurring programs of SARAH generally are not considered "restricted" under GAAP, though for internal reporting SARAH tracks such grants and contributions to verify the disbursement matches the intent. Assets restricted solely through the actions of the Board of Directors are reported as Net Assets Without Donor Restrictions, Board Designated.

- *With Donor Restrictions* – net assets subject to donor-imposed stipulations that are more restrictive than SARAH's mission and purpose. Some donor restrictions are temporary in nature, such as those that will be met by the passage of time. Donor imposed restrictions are released when a restriction expires, that is, when the stipulated time has elapsed, when the stipulated purpose for which the resource was restricted has been fulfilled, or both. Other donor imposed restrictions are perpetual in nature, where the donor stipulates that resources be maintained in perpetuity.

Methods Used for Allocation of Expenses among Program and Support Services

The costs of providing the various programs and other activities have been summarized on a functional basis in the Statement of Functional Expenses. Accordingly, certain costs have been allocated between the programs and supporting services benefited. Direct costs are allocated based upon the usage by each program. The allocation of all other expenses is calculated on the basis of a percentage of the total time spent in each functional program.

Note B: Summary of Accounting Principles (Continued)

Estimates

The preparation of financial statements in conformity with GAAP requires management to make estimates and assumptions that affect the reported amounts of assets, liabilities and disclosure of contingent liabilities at the date of the financial statements and the reported amounts of revenues and expenses during the reporting period. Actual results could differ from those estimates.

Accounts Receivable

Accounts receivable consists of membership dues and funding from local government agencies and is recorded based on amounts considered by management to be realizable. SARAH records bad debt using the allowance method of accounting. As of December 31, 2020 and 2019, an allowance was not required because all amounts are considered by management to be fully collectible.

Advertising Expenses

If needed, SARAH uses advertising to promote its programs among the community it serves. Advertising costs are expensed as incurred. During the years ended December 31, 2020 and 2019, **$191** and $0 of advertising expenses were incurred, respectively.

Cash and Cash Equivalents

For purposes of reporting cash flows, SARAH considers all highly liquid investments with original maturities of three months or less to be cash equivalents. At December 31, 2020 and 2019, there were no cash equivalents.

Property and Equipment

Property and equipment are stated at cost less accumulated depreciation. Depreciation is charged to expense using the straight-line method over the estimated useful life of each asset. Assets under capital lease obligations and leasehold improvements are depreciated over the shorter of the lease term or their respective estimated useful lives. SARAH capitalizes property and equipment expenditures over $5,000 for those assets whose estimated lives exceed one year. The estimated useful lives for each major depreciable classification of property and equipment are as follows:

Furniture and Equipment	3 - 5 years
Computers and Equipment	3 - 5 years

Revenue Recognition

Contributions received and unconditional promises to give are measured at their fair market values and are reported as an increase in net assets. SARAH reports gifts of cash and other assets as restricted support if they are received with donor stipulations that limit the use of the donated assets, or if they are designated as support for future periods. When a donor restriction expires, that is, when a stipulated time restriction ends or purpose restriction is accomplished, With Donor Restrictions are reclassified to Without Donor Restrictions and reported in the Statement of Activities as Net Assets Released from Restrictions. Donor-restricted contributions whose restrictions are met in the same reporting period are reported as Without Donor Restrictions.

Note B: Summary of Accounting Principles (Continued)

Fair Value of Financial Instruments

SARAH's financial instruments include cash, receivables, and payables. The carrying amount of these financial instruments as reflected in the Statements of Financial Position approximates fair value.

Federal Income Taxes

SARAH is exempt from federal income taxes under section 501(c)(3) of the Internal Revenue Code and therefore has made no provision for federal income taxes in the accompanying statements. In addition, SARAH has been determined by the Internal Revenue Service not to be a "private foundation" within the meaning of Section 509(a) for the Internal Revenue Code. There was no unrelated business income for the years ended December 31, 2020 and 2019. SARAH is not subject to the Texas margin tax. Management is not aware of any tax position that would have a significant impact on its financial position.

Fair Value Measurements

The Fair Value Measurements and Disclosures, ASC 820, defines fair value as the exchange price that would be received for an asset or paid to transfer a liability (an exit price) in the principal or most advantageous market, established a framework for measuring fair value in the principal or most advantageous market for the asset or liability in an orderly transaction between market participants at the measurement date.

In-Kind Contributions

Contributions of professional services are recognized as revenue at their estimated fair value only when the professional services received create or enhance non-financial assets or require specialized skills possessed by the individuals providing the service and the service would typically need to be purchased if not donated. For in-kind contributions during 2020 and 2019, refer to **Note I**.

New Accounting Pronouncements

Recently Issued Accounting Pronouncements

Adopted During 2020

In May 2014, The Financial Accounting Standards Board (FASB) issued Accounting Standards Update (ASU) 2014-09, *Revenue from Contracts with Customers*, Topic 606. For not-for-profit organizations that have issued, or are conduit bond obligors for, securities traded, listed, or quoted on an exchange or an over-the-counter market, the standard is currently in effect. For all other not-for-profit organizations, the standard takes effect in annual reporting periods beginning after December 15, 2018, and interim reporting periods within annual reporting periods beginning after December 31, 2019. On June 3, 2020, The FASB issued a one year delay for the effective date of this standard for entities that have not yet issued financial statements or made financial statements available for issuance as of June 3, 2020 reflecting adoption of ASC 606 The core principle of this pronouncement focuses on the contract between the organization and its customers for goods and services, and ultimately, the rights and obligations between the organization and the customer. SARAH adopted the new provisions of this standard during the year ended December 31, 2020. There were no significant effects on the financial statements and related disclosures.

South Alamo Regional Alliance for the Homeless

Notes to Financial Statements
December 31, 2020 and 2019

Note B: Summary of Accounting Principles (Continued)

New Accounting Pronouncements (Continued)

Future Adoption

In February 2016, The Financial Accounting Standards Board (FASB) issued Accounting Standards Update (ASU) 2016-02, *Leases*, effective for reporting periods beginning after December 15, 2021. Under this new pronouncement, generally, leases with terms of more than 12 months will be recognized in the Statements of Financial Position as an asset (right to use leased asset) and a liability (lease liability). Management expects the impact to operations to be minimal and is currently evaluating the effect this pronouncement will have on the financial statements and related disclosures.

Note C: Liquidity and Availability

The following represents the SARAH's financial assets at December 31, 2020 and 2019 available to meet general expenditures over the next twelve months:

	2020	2019
Financial assets at year end:		
Cash and cash equivalents	$ 608,245	$ 325,073
Accounts receivable	210,817	169,425
Total financial assets	819,062	494,498
Less those unavailable for general expenditures over the next twelve months due to:		
Net assets with Donor Restrictions	369,489	60,999
Less net assets with timing restrictions to be met in less than one year	(369,489)	(60,999)
	-	-
Financial assets available to meet general expenditures over the next twelve months	$ 819,062	$ 494,498

SARAH's goal is generally to maintain financial assets to meet 90 days of operating expenses. As part of its liquidity plan, excess cash reserves are set back each fiscal year.

South Alamo Regional Alliance for the Homeless

Notes to Financial Statements
December 31, 2020 and 2019

Note D: Property and Equipment

Property and Equipment, Net of Accumulated Depreciation at December 31 is summarized as follows:

	2020	2019
Furniture and Equipment	$ 29,057	$ 29,057
Computers and Equipment	6,823	6,823
Total Property and Equipment	35,880	35,880
Less: Accumulated Depreciation	(20,897)	(12,971)
Property and Equipment, Net of Accumulated Depreciation	$ 14,983	$ 22,909

Depreciation expense for the years ended December 31, 2020 and 2019 was **$7,926** and $6,789, respectively.

Note E: Net Assets With Donor Restrictions

Net Assets With Donor Restrictions at December 31 is summarized as follows:

	2020	2019
Subject to Expenditure for Specified Timing:		
USAA Diversion Grant	$ 150,905	$ -
USAA PIT Funds	20,000	11,000
City of San Antonio - NHSD	150,000	-
Place Liability Assurance for Community Empowerment	48,584	49,999
Total With Donor Restrictions	$ 369,489	$ 60,999

Note F: COVID-19 Risk and Uncertainty

The COVID-19 pandemic, whose effects first became known in January 2020, is having broad and negative impact on commerce and financial markets around the world. The United States and global markets experienced significant declines in value resulting from uncertainty caused by the pandemic. SARAH is closely monitoring its investment portfolio and its liquidity and is actively working to minimize the impact of these declines. The extent of the impact of COVID-19 on SARAH's operational and financial performance will depend on certain developments, including the duration and spread of the outbreak and its impacts on SARAH's customers, employees, and vendors, all of which at present cannot be determined. Accordingly, the extent to which COVID-19 may impact SARAH's financial position and changes in net assets and cash flows is uncertain and the accompanying financial statements include no adjustments relating to the effects of this pandemic.

Note G: Concentrations

Credit Risk of Financial Instruments

Financial instruments which potentially subject SARAH to a concentration of credit risk consist of its cash balance held at its financial institution if such balance exceeds the amount insured by the Federal Deposit Insurance Corporation (FDIC). The account at the institution is insured by the FDIC up to $250,000. SARAH maintains one account at one institution in San Antonio. At December 31, 2020 and 2019, SARAH's cash balance at its respective institution was in excess of the FDIC limit by **$416,117** and $75,651, respectively. SARAH has not experienced any losses in such accounts and management believes it is not exposed to a significant risk on its cash on deposit with the financial institution.

Support and Revenues

SARAH received approximately **60%** and 54% of total support and revenues from HUD related funding in 2020 and 2019, respectively. The loss of funding from this grantor could reduce SARAH's ability to achieve its objectives.

Note H: Operating Lease

In October 2018, SARAH modified an existing lease agreement for office space effective December 1, 2018 and expiring November 30, 2021. Lease expense related to this lease was **$53,522** and $49,062 for the years ended December 31, 2020 and 2019, respectively.

Future minimum lease payments at December 31, 2020 are summarized as follows:

2021	$	50,682
2022		1,215
2023		-
Thereafter		-
Total	$	51,897

Note I: In-Kind Contributions

San Antonio Police Department

The San Antonio Police Department provided sworn officers for the 2020 and 2019 Point in Time Count organized by SARAH. The value of this professional service was **$6,093** and $26,288 for the years ended December 31, 2020 and 2019, respectively, and is included as In-Kind Contributions in the Statement of Activities.

South Alamo Regional Alliance for the Homeless

Notes to Financial Statements
December 31, 2020 and 2019

Note J: HUD Planning Grant and Coordinated Entry Grant

SARAH receives funding from HUD through the Planning Grant and Coordinated Entry Grant. The Planning Grant and Coordinated Entry Grant are administered through HUD's Continuum of Care program which is designed to promote community-wide commitment to the goal of ending homelessness by providing funding for efforts by nonprofit providers and state and local governments. The main purpose of the Planning Grant is to create trainings through capacity building, project specific technical assistance to supportive housing project partners, development of project planning guidance, and identifying financial support resources to jumpstart supportive housing production. The main purpose of the Coordinated Entry Grant is to ensure that people with the most severe service needs and levels of vulnerability are prioritized for housing and homeless assistance. These grants operate as cost reimbursement grants where SARAH submits qualified expenses to HUD and is reimbursed when expenses are approved.

Note K: Reclassification

Certain amounts in the 2019 financial statements have been reclassified to conform to the 2020 presentation.

Note L: Subsequent Events

Subsequent events have been evaluated through August 5, 2021, which is the date the financial statements were available to be issued.

Compliance Report

**Independent Auditor's Report on Internal Control Over
Financial Reporting and on Compliance and Other Matters
Based on an Audit of Financial Statements Performed in
Accordance with *Government Auditing Standards***

To the Board of Directors of
South Alamo Regional Alliance for the Homeless

We have audited, in accordance with the auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in *Government Auditing Standards* issued by the Comptroller General of the United States, the financial statements of South Alamo Regional Alliance for the Homeless (SARAH) (a nonprofit organization), which comprise the statement of financial position as of December 31, 2020, and the related statements of activities, functional expenses, and cash flows for the year then ended, and the related notes to the financial statements, and have issued our report thereon dated August 5, 2021.

Internal Control over Financial Reporting

In planning and performing our audit of the financial statements, we considered SARAH's internal control over financial reporting (internal control) to determine the audit procedures that are appropriate in the circumstances for the purpose of expressing our opinion on the financial statements, but not for the purpose of expressing an opinion on the effectiveness of SARAH's internal control. Accordingly, we do not express an opinion on the effectiveness of SARAH's internal control.

A *deficiency in internal control* exists when the design or operation of a control does not allow management or employees, in the normal course of performing their assigned functions, to prevent, or detect and correct, misstatements on a timely basis. A *material weakness* is a deficiency, or a combination of deficiencies, in internal control, such that there is a reasonable possibility that a material misstatement of the entity's financial statements will not be prevented, or detected and corrected on a timely basis. A *significant deficiency* is a deficiency, or a combination of deficiencies, in internal control that is less severe than a material weakness, yet important enough to merit attention by those charged with governance.

Our consideration of internal control was for the limited purpose described in the first paragraph of this section and was not designed to identify all deficiencies in internal control that might be material weaknesses or significant deficiencies. Given these limitations, during our audit we did not identify any deficiencies in internal control that we consider to be material weaknesses. However, material weaknesses may exist that have not been identified.

Compliance and Other Matters

As part of obtaining reasonable assurance about whether SARAH's financial statements are free from material misstatement, we performed tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements, noncompliance with which could have a direct and material effect on the determination of financial statement amounts. However, providing an opinion on compliance with those provisions was not an objective of our audit, and accordingly, we do not express such an opinion. The results of our tests disclosed no instances of noncompliance or other matters that are required to be reported under *Government Auditing Standards.*

**Independent Auditor's Report on Internal Control Over
Financial Reporting and on Compliance and Other Matters
Based on an Audit of Financial Statements Performed in
Accordance with *Government Auditing Standards* (Continued)**

Purpose of this Report

The purpose of this report is solely to describe the scope of our testing of internal control and compliance and the results of that testing, and not to provide an opinion on the effectiveness of the organization's internal control or on compliance. This report is an integral part of an audit performed in accordance with *Government Auditing Standards* in considering the organization's internal control and compliance. Accordingly, this communication is not suitable for any other purpose.

Schriver, Carmona & Company, PLLC

San Antonio, Texas

August 5, 2021

**Independent Auditor's Report on Compliance for
Each Major Program and on Internal Control
Over Compliance Required by the Uniform Guidance**

To the Board of Directors of
South Alamo Regional Alliance for the Homeless

Report on Compliance for Each Major Federal Program

We have audited South Alamo Regional Alliance for the Homeless (SARAH) compliance with the types of compliance requirements described in the *OMB Compliance Supplement* that could have a direct and material effect on each of SARAH's major federal programs for the year ended December 31, 2020. SARAH's major federal programs are identified in the summary of auditor's results section of the accompanying schedule of findings and questioned costs.

Management's Responsibility

Management is responsible for compliance with federal statutes, regulations, and the terms and conditions of its federal awards applicable to its federal programs.

Auditor's Responsibility

Our responsibility is to express an opinion on compliance for each of South Alamo Regional Alliance for the Homeless major federal programs based on our audit of the types of compliance requirements referred to above. We conducted our audit of compliance in accordance with auditing standards generally accepted in the United States of America; the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States; and the audit requirements of Title 2 U.S. *Code of Federal Regulations* Part 200, *Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards* (Uniform Guidance). Those standards, the Uniform Guidance require that we plan and perform the audit to obtain reasonable assurance about whether noncompliance with the types of compliance requirements referred to above that could have a direct and material effect on a major federal program occurred. An audit includes examining, on a test basis, evidence about South Alamo Regional Alliance for the Homeless compliance with those requirements and performing such other procedures as we considered necessary in the circumstances.

We believe that our audit provides a reasonable basis for our opinion on compliance for each major federal program. However, our audit does not provide a legal determination of South Alamo Regional Alliance for the Homeless compliance.

Opinion on Each Major Federal Program

In our opinion, South Alamo Regional Alliance for the Homeless complied, in all material respects, with the types of compliance requirements referred to above that could have a direct and material effect on each of its major federal programs for the year ended December 31, 2020.

**Independent Auditor's Report on Compliance for
Each Major Program and on Internal Control
Over Compliance Required by the Uniform Guidance (Continued)**

Report on Internal Control Over Compliance

Management of South Alamo Regional Alliance for the Homeless is responsible for establishing and maintaining effective internal control over compliance with the types of compliance requirements referred to above. In planning and performing our audit of compliance, we considered SARAH's internal control over compliance with the types of requirements that could have a direct and material effect on each major federal program to determine the auditing procedures that are appropriate in the circumstances for the purpose of expressing an opinion on compliance for each major federal program and to test and report on internal control over compliance in accordance with the Uniform Guidance, but not for the purpose of expressing an opinion on the effectiveness of internal control over compliance. Accordingly, we do not express an opinion on the effectiveness of SARAH's internal control over compliance.

A *deficiency in internal control over compliance* exists when the design or operation of a control over compliance does not allow management or employees, in the normal course of performing their assigned functions, to prevent, or detect and correct, noncompliance with a type of compliance requirement of a federal program on a timely basis. A *material weakness in internal control over compliance* is a deficiency, or combination of deficiencies, in internal control over compliance, such that there is a reasonable possibility that material noncompliance with a type of compliance requirement of a federal program will not be prevented, or detected and corrected, on a timely basis. A *significant deficiency in internal control over compliance* is a deficiency, or a combination of deficiencies, in internal control over compliance with a type of compliance requirement of a federal program that is less severe than a material weakness in internal control over compliance, yet important enough to merit attention by those charged with governance.

Our consideration of internal control over compliance was for the limited purpose described in the first paragraph of this section and was not designed to identify all deficiencies in internal control over compliance that might be material weaknesses or significant deficiencies. We did not identify any deficiencies in internal control over compliance that we consider to be material weaknesses. However, material weaknesses may exist that have not been identified.

The purpose of this report on internal control over compliance is solely to describe the scope of our testing of internal control over compliance and the results of that testing based on the requirements of the Uniform Guidance. Accordingly, this report is not suitable for any other purpose.

Schriver, Carmona & Company, PLLC

San Antonio, Texas

August 5, 2021

South Alamo Regional Alliance for the Homeless

Schedule of Expenditures of Federal Awards
December 31, 2020

Federal Grantor/Pass through Grantor/Program Title	CFDA Number	Pass Through Grant ID Number	Federal Grant Expended During the Year
U.S. Department of Housing and Urban Development			
Continuum of Care Program	14.267		
CoC - Coordinate Assessment		TX0397L6J001803	$ 422,610
CoC - Coordinate Assessment (Domestic Violence)		TX0512D6J001800	52,622
CoC - Coordinate Assessment (Domestic Violence)		TX0512D6J001901	6,001
CoC - Planning Grant		TX0513L6J001800	284,405
CoC - Planning Grant		TX0542L6J001900	38,291
Youth Homelessness Demonstration Program	14.276		
YHDP Planning Grant		TX0540Y6J001800	205,652
YHDP Planning Grant		TX0572Y6J001800	60,898
Emergency Solutions Grants Program	14.231		
ESG Coordinator Services		332-20-5215	6,355
Total U.S. Department of Housing and Urban Development			1,076,834
U.S. Department of the Treasury			
Passed through the County of Bexar, Texas			
Coronavirus Relief Fund	21.019		
Social Services Agency Resiliency Program		Org. Resiliency for COVID-19	7,567
Total U.S. Department of the Treasury			7,567
TOTAL EXPENDITURES OF FEDERAL AWARDS			$ 1,084,401

South Alamo Regional Alliance for the Homeless

Notes to Schedule of Expenditures of Federal Awards
December 31, 2020

Note A: Basis of Presentation

The accompanying Schedule of Expenditures of Federal Awards (the Schedule) includes the federal grant activity of South Alamo Regional Alliance for the Homeless (SARAH) under programs of the federal government for the year ended December 31, 2020. The information in this Schedule is presented in accordance with the requirements of Title 2 U.S. *Code of Federal Regulations* Part 200, *Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards* (Uniform Guidance).

Because the Schedule presents only a selected portion of the operations of SARAH, it is not intended, and does not, present the financial position, changes in net assets or cash flows of SARAH. Therefore, some amounts presented in the Schedule may differ from amounts presented in the financial statements.

All of SARAH federal awards were in the form of cash assistance for the year ended December 31, 2020.

Note B: Summary of Significant Accounting Policies

(1)   Expenditures reported on the Schedule are reported on the basis of accounting using accounting principles generally accepted in the United States of America (GAAP). Such expenditures are recognized following the cost principles contained in 2 CFR Part 230, *Costs Principles for Non-Profit Organizations*, wherein certain types of expenditures are not allowable or are limited as to reimbursement.

(2)   SARAH has elected to not use the 10 percent de minimis indirect cost rate as allowed under the Uniform Guidance.

Note C: Reconciliation to Statement of Activities in Financial Statements

Total Expenditures of Federal Awards	$	1,084,401
Grants		(7,567)
Total HUD Planning Grant and Coordinated Entry Grant	$	1,076,834

South Alamo Regional Alliance for the Homeless

Schedule of Findings and Questioned Costs
Year Ended December 31, 2020

SECTION I - SUMMARY OF AUDITOR'S RESULTS

Financial Statements

Type of auditor's report issued	Unmodified

Internal Control Over Financial Reporting:

Material weakness(es) identified?	No
Significant deficiencies identified that are not considered to be material weakness(es)?	None reported
Noncompliance material to the financial statements?	No

Federal Awards

Internal Control Over Major Programs:

Material weakness(es) identified?	No
Significant deficiencies identified that are not considered to be material weakness(es)?	None reported
Type of auditor's report issued on compliance for major programs	Unmodified
Any audit findings disclosed that are required to be reported in accordance with 2 CFR Section 200.516?	No

Identification of Major Programs:

CFDA Number	Name of Federal Program or Cluster
14.267	Continuum of Care Program

Dollar threshold used to distinguish between Type A and Type B programs	$750,000
Auditee qualified as low-risk auditee?	No

SECTION II - FINANCIAL STATEMENT FINDINGS	None

SECTION III - FEDERAL AWARD FINDINGS	None

CoC Membership Council Application

The SARAH Membership Council serves as the primary source of expertise and program implementation for the
Board of Directors ("Board"). Responsibilities include providing input, expertise, and council-approved recommendations to SARAH staff and the Board regarding all matters relating to Continuum of Care ("COC") responsibilities, policies, and procedures, including but not limited to:

• Strategic planning for the COC
• Project compliance
• Data quality
• Training
• Community planning
• Resource planning and allocation
• Coordination of COC with other community resources
• Establishing workgroups as needed to perform COC functions

Active Membership
Any Agency, composed of one or more employees, which commits resources or whose activities encompass the
spectrum of services directed at the San Antonio/Bexar County homeless population may be considered for Active Membership. Each approved agency will have one vote on the Membership Council.

Once submitted, your application will be reviewed by the CoC Board of Directors at their next meeting. Our staff will contact you once you've submitted an application and keep you comprised of your application's approval.

Email *

dbarker@maghouse.org

Agency Name *

Magdalena House

Agency Physical Address *

Confidential

Please identify up to 1 (one) agency representatives who have permission to vote on Membership Council action items. *Include name, title and email address.* *

Denise Barker

Please select the category that best defines your agency type. *

- ☐ CoC/ESG
- ☐ Healthcare Services
- ☐ Mental Health
- ☐ Veterans
- ☐ Education
- ☐ Youth
- ☑ Domestic Violence
- ☐ Legal Assistance
- ☐ Government Agency
- ☐ Child and Family
- ☐ Substance Use Recovery
- ☐ Faith Based
- ☐ Elderly/Aging
- ☐ Community Partner
- ☐ Other:

Please provide the mission statement of the agency/organization *

Magdalena House is a neighborhood of transitional homes that serves mothers and children who have fled dangerous and abusive lives by providing transformation through education, nurturing community, and programming.

Describe the agency's/organization's experience working to end homelessness. *

Our vision is "Empowering families to eliminate cycles of abuse and neglect in our community." Violence in homes is a primary reason families become homeless or couch surf, at best. Our work reduces homelessness for those populations that experience violence and moves single mothers to self-sufficiency while interrupting generational violence and trauma. Safe housing, education towards an academic degree, wholistic healing and nurturing relationships form our quadratic approach. We have many, many success stories of mothers gradating from MH, leaving with Associate and/or Bachelor degrees (they can stay through a 4 year degree) to rent/own apartments and homes. Some have continued towards graduate degrees after leaving. Their children are college bound. Some have moved towards creating their own non-profits to fight the global epidemic of violence against women.

What does the agency/organization hope to contribute and gain by being a member of the Continuum of Care (CoC)? *

To become part of the city's conversation. To learn from the wisdom of other agencies and contribute what we have learned the past 15 years. To be in community with others so we might lift one another up when we are feeling tired or discouraged and celebrate victories families and individuals achieve when they determine what their fullest life might resemble! To join alongside those that advocate for the voiceless and invisible.

By typing your name, you acknowledge that your agency will send at least one representative to Membership Council meeting as well as participate in at least one special community initiative annually (i.e. work groups, committees, Point-in-Time Count, etc.) *

Denise Barker

CoC Membership Council Application

The SARAH Membership Council serves as the primary source of expertise and program implementation for the
Board of Directors ("Board"). Responsibilities include providing input, expertise, and council-approved recommendations to SARAH staff and the Board regarding all matters relating to Continuum of Care ("COC") responsibilities, policies, and procedures, including but not limited to:

• Strategic planning for the COC
• Project compliance
• Data quality
• Training
• Community planning
• Resource planning and allocation
• Coordination of COC with other community resources
• Establishing workgroups as needed to perform COC functions

Active Membership
Any Agency, composed of one or more employees, which commits resources or whose activities encompass the
spectrum of services directed at the San Antonio/Bexar County homeless population may be considered for Active Membership. Each approved agency will have one vote on the Membership Council.

Once submitted, your application will be reviewed by the CoC Board of Directors at their next meeting. Our staff will contact you once you've submitted an application and keep you comprised of your application's approval.

Email *

sarahd@sa-lsa.org

Agency Name *

San Antonio Legal Services Association

Agency Physical Address *

Haven for Hope Resource Center - 1231 W Martin St (Mail to: P.O. Box 12404, SATX 78212)

Please identify up to 1 (one) agency representatives who have permission to vote on Membership Council action items. *Include name, title and email address.* *

Sarah Dingivan, Executive Director (sarahd@sa-lsa.org); Kat Doucette, Staff Attorney (katd@sa-lsa.org); Rick Gonzalez, Housing Fellow (rickg@sa-lsa.org)

Please select the category that best defines your agency type. *

- [ ] CoC/ESG
- [ ] Healthcare Services
- [ ] Mental Health
- [ ] Veterans
- [ ] Education
- [ ] Youth
- [ ] Domestic Violence
- [x] Legal Assistance
- [ ] Government Agency
- [ ] Child and Family
- [ ] Substance Use Recovery
- [ ] Faith Based
- [ ] Elderly/Aging
- [ ] Community Partner
- [ ] Other:

Please provide the mission statement of the agency/organization *

Mobilizing legal volunteers to transform the lives of those in need.

Describe the agency's/organization's experience working to end homelessness. *

SALSA (through its staff and network of legal volunteers) operates multiple programs that assist homeless clients and clients on the verge of homelessness with civil legal services.

What does the agency/organization hope to contribute and gain by being a member of the Continuum of Care (CoC)? *

SALSA hopes that being a member of the CoC will provide opportunities for increased collaboration with community partners.

By typing your name, you acknowledge that your agency will send at least one representative to Membership Council meeting as well as participate in at least one special community initiative annually (i.e. work groups, committees, Point-in-Time Count, etc.) *

Sarah Dingivan

CoC Membership Council Application

The SARAH Membership Council serves as the primary source of expertise and program implementation for the
Board of Directors ("Board"). Responsibilities include providing input, expertise, and council-approved
recommendations to SARAH staff and the Board regarding all matters relating to Continuum of Care ("COC")
responsibilities, policies, and procedures, including but not limited to:

• Strategic planning for the COC
• Project compliance
• Data quality
• Training
• Community planning
• Resource planning and allocation
• Coordination of COC with other community resources
• Establishing workgroups as needed to perform COC functions

Active Membership
Any Agency, composed of one or more employees, which commits resources or whose activities encompass the
spectrum of services directed at the San Antonio/Bexar County homeless population may be considered for
Active Membership. Each approved agency will have one vote on the Membership Council.

Once submitted, your application will be reviewed by the CoC Board of Directors at their next meeting. Our
staff will contact you once you've submitted an application and keep you comprised of your application's
approval.

Email *

Admin@spiritwolfintervention.com

Agency Name *

Spirit Wolf therapeutic Interventions/El Shaddia Ministry

Agency Physical Address *

5645 S. Flores St., Ste. 108 San Antonio Texas 78214

Please identify up to 1 (one) agency representatives who have permission to vote on Membership Council action items. *Include name, title and email address.* *

Jeff Schnoor Owner/Minister/Interventionist, admin@spiritwolfintervention.com, Maria Balderas, Pastor, restoring73@gmail.com

Please select the category that best defines your agency type. *

- ☐ CoC/ESG
- ☐ Healthcare Services
- ☑ Mental Health
- ☑ Veterans
- ☐ Education
- ☑ Youth
- ☑ Domestic Violence
- ☐ Legal Assistance
- ☐ Government Agency
- ☑ Child and Family
- ☑ Substance Use Recovery
- ☑ Faith Based
- ☐ Elderly/Aging
- ☑ Community Partner
- ☐ Other:

Please provide the mission statement of the agency/organization *

To help restore families and hope tackling addiction and helping to end homelessness with serving those in need within our community and others 8n assisting in basic need resources, feeding, and referrals to community resources to fight against homelessness and addiction in the communities we serve.

Describe the agency's/organization's experience working to end homelessness. *

Jeff S. Worked as a prevention coordinator with AmeriCorps and VetCorps programs for several years across the US Identifying homeless needs, and implemented counts and services for the homeless.. Disaster response as a state prevention coordinator and VOAD VP through the Red Cross. Maria has been the Pastor of ELShaddia ministries and provides food, clothing, and basic need to the homeless and disadvantaged for years extending to Mexico. Both provide weekly feeding to the homeless.

What does the agency/organization hope to contribute and gain by being a member of the Continuum of Care (CoC)? *

Substance abuse Intervention classes, support groups, clothing, food pantry, street outreach, spiritual counseling, growth groups, weekly feeding program.

By typing your name, you acknowledge that your agency will send at least one representative to Membership Council meeting as well as participate in at least one special community initiative annually (i.e. work groups, committees, Point-in-Time Count, etc.) *

Jeff Schnoor

TX-500 San Antonio and Bexar County Continuum of Care Policies and Procedures

CONTINUUM OF CARE PROGRAM GRANT
SOUTH ALAMO REGIONAL ALLIANCE FOR THE HOMELESS

CoC Policies and Procedures: Continuum of Care Program Grant

Continuum of Care (CoC) Program Grant Overview

The South Alamo Regional Alliance for the Homeless (SARAH) is designated by the Continuum of Care (CoC) Board of Directors as the Collaborative Applicant for the TX-500 San Antonio and Bexar County community. Provisions at 24 CFR 578.9 require CoCs to design, operate and follow a collaborative process for the development of an application in response to a Notice of Funding Opportunity (NOFO) for the CoC Program Grant issued by HUD. CoCs must implement internal competition deadlines to ensure transparency and fairness at the local level. As the Collaborative Applicant, SARAH applies to the federal department of Housing and Urban Development (HUD) for CoC Program Grant funding on behalf of the community. Except for the amount of the HUD CoC allocation available to SARAH and cost eligibility, the CoC Board of Directors is the ultimate decision-maker in the review process.

For federal policies and procedures related to the CoC Program, refer to the HUD NOFO.

CoC Program Grant Priority Policy

Each year, the Continuum of Care Board of Directors approves priority projects for the CoC Program funding competition. Applicants that qualify as priority given their proposed project type will receive additional points on their application.

The following project types will be considered as highest priority for new, bonus, expansion, and reallocation funding in the 2021 CoC Program NOFO Competition:

- **Permanent Supportive Housing (PSH) –** Permanent housing of indefinite duration of rental assistance with intensive, supportive services offered to individuals who have a permanent disabling condition <u>and</u> who have experienced literal homelessness for 12 months continuously *or* experienced literal homelessness 4 times in the last 3 years for a total of 12 months. Site-based PSH will be further prioritized.
- **Long-term (18-24 months) Rapid Rehousing (RRH) –** Permanent housing of 18-24 months duration of rental assistance with a moderate level of supportive services offered to all populations with no specific eligibility requirements.
- **Rapid Rehousing (RRH) or Joint Transitional Housing-Rapid Rehousing (TH-RRH) projects for individuals and/or families fleeing Domestic Violence (includes reallocation from TH) –** Permanent housing of flexible duration of rental assistance with a moderate level of supportive services offered specifically to survivors of Domestic Violence <u>or</u> a joint component project type which allows survivors of domestic violence to be served in Transitional Housing and moved

swiftly into a Permanent Housing destination through Rapid Rehousing rental assistance of indefinite duration with a moderate level of supportive services.

- **Coordinated Entry and/or HMIS (expansion only) –** Expansion funds used to increase the capacity of Coordinated Entry and HMIS as core functions of the CoC.
- **Expansion of Renewal Projects –** Expansion funds used to increase the capacity of renewal projects, particularly those in need of increased case management to ensure manageable caseloads and an effective ratio of case manager to clients.

CoC Program Independent Review Team (IRT)

To ensure a fair and partial project ranking process, an Independent Review Team (IRT) is selected to systematically review and score applications and to recommend a final ranking to the CoC Board of Directors. SARAH will coordinate IRT meetings and act as the facilitator of the review process.

IRT MEMBER SELECTION AND CRITERIA

There will be a maximum of seven (7) and a minimum of three (3) IRT members selected annually by the CoC Board Executive Committee for the CoC Program Grant. SARAH staff, with recommendations from the CoC Board of Directors, will recruit participants, with a priority for those employed at Consolidated Plan Jurisdiction agencies and those with lived expertise of homelessness.

An agency can only have one (1) representative on the IRT. IRT members, including members of their immediate families, may not be employees, contractors, or serve in any representative capacity of an applicant, subrecipient agency, or other partner agency as established in a Memorandum of Understanding (MoU) party to a funding application.

The CoC Board Executive Committee will appoint an IRT Chair. The IRT Chair will be responsible for speaking on behalf of the IRT regarding the recommended final project ranking.

SARAH will provide a required training for IRT members that is open to the public. The IRT will conduct private meetings as needed, which will include SARAH staff, as part of the project review and selection process. IRT members are required to attend meetings and must coordinate with SARAH if an emergency arises. Signatures of IRT members are required to confirm project rankings and will be archived.

IRT VOTING PROCESS

The IRT will be expected to follow a majority vote process to determine final scores if there is not a consensus. In the event of a tie vote, the CoC Board Executive Committee will determine the outcome. The IRT is allowed to request more information from the applicant before making a final determination in accordance with the annual timeline.

CoC Program Application Review and Deficiency Process

In accordance with the CoC Program Request for Proposals (RFP) and Application Instructions, SARAH will accept applications until the given deadline. Applications submitted after the deadline will receive a two-point (2) deduction from the Application Submission and Threshold category of the scoring rubric and two (2) points at the start of every hour until the application is submitted or the final score is zero (0) in that category. Applications submitted more than 48 hours after the deadline will not be reviewed.

Prior to the first IRT meeting, SARAH staff will perform a deficiency check on submitted applications. Any applicants with a *deficiency* (defined as anything that would render the application ineligible from receiving funding) will be notified and given three (3) business days to correct the deficiency. An application will lose two (2) points for each deficiency found. If deficiencies are not resolved, the application will be considered ineligible and will not be reviewed by the IRT. Any rejected applications will be notified in writing. SARAH will inform the IRT of deficiencies and any misrepresentations or falsified information discovered in each application.

CoC Project Ranking Policy

SARAH will prepare the project priority ranking list and funding decisions as recommended by the IRT to the CoC Board of Directors for final approval. The Board of Directors may direct SARAH to make minor budgetary corrections, as needed, consistent with HUD application rules and funds allocated to the CoC. SARAH will be charged with communicating budget adjustments to individual applicants and instructing them to make changes before submitting the final CoC application to HUD.

SCORING PROCESS

IRT scores will determine where a project is ranked. The priority project ranking will be included in the Consolidated Application to HUD. Projects with equal scores are ranked by project component type. Projects with equal scores of the same component type will be ranked based on cost per client. Consolidated grant performance will be averaged from previous grants and consolidated into one (1) score for ranking.

Coordinated Entry (CE) and Homeless Management Information System (HMIS) projects will automatically be ranked in Tier 1 as they are essential functions of the CoC.

Domestic Violence (DV) projects are ranked separately as the CoC Program Collaboration requirements for DV projects differ in the following ways: must include specific method for evaluating projects submitted by victim services providers that utilizes data generated from a comparable database; and evaluated these projects on the degree they improve safety for the population served.

In accordance with the FY21 HUD NOFO, Youth Homelessness Demonstration Program (YHDP) renewals will be scored non-competitively.

There are twelve (12) types of applicant scoring rubrics:

- New Project (includes bonus, transition, reallocation, expansion)
- New Project – Domestic Violence (DV)
- New Project – Coordinated Entry (CE)
- New Project – Homeless Management Information System (HMIS)*
- First-Time Renewal Project
- First-Time Renewal Project – DV
- First-Time Renewal Project – CE
- First-Time Renewal Project – HMIS*
- Renewal Project (includes expansion)
- Renewal Project – DV
- Renewal Project – CE
- Renewal Project – HMIS*

*Only the HMIS Lead may apply for HMIS projects.

See **Attachment I** for scoring rubrics associated with each applicant type. Scoring rubrics focus on fiscal management, expenditure rates, policies and procedures, performance metrics, adherence to Written Standards, participation in CE and HMIS, and CoC participation. Bonus points are allocated for certain activities that are desirable for increasing system coordination and/or CoC performance.

Grievance and Appeals Process

The Appeals Process outlined below applies to eligible organizations. SARAH is committed to fairness and openness in the HUD CoC funding process.

- The IRT will review all applications and make project ranking recommendations to the CoC Board of Directors, who will approve the final ranking recommendations.
- SARAH will notify all project applicants no later than fifteen (15) calendar days before the CoC Consolidated Application deadline regarding whether their project applications would be included as part of the CoC Consolidated Application submission and the approved community ranking list.

- If the application was rejected, or if the applicant objects to their ranking position, applicants have three (3) calendar days from the ranking announcement to make a formal appeal. To do so, the applicant must notify the SARAH Executive Director in writing of the appeal with specific reasons why the applicant believes the project was unfairly rejected or ranked.
- The SARAH Executive Director will notify the CoC Board Executive Committee of the appeal and a conference call will be held to discuss if the appeal has merit based on the criteria in 24 CFR 578.35. At least two (2) CoC Board Executive Committee members must participate in the call, none of which have vested interest, financial or otherwise, in the rejected applicant or project. If it is determined that the appeal lacks merit, SARAH staff will notify the applicant in writing on behalf of the CoC Board of Directors.
- If the appeal has merit, the CoC Board President and an additional Board Director selected by the President will hear the appeal within three business (3) days and make a final determination. The applicant will be notified in writing within three business (3) days of the appeal decision.
- Project applicants whose project was rejected may appeal the local decision to HUD, if the project applicant believes it was denied the opportunity to participate in the local CoC planning process in a reasonable manner, by submitting a Solo Application in e-snaps directly to HUD prior to the application deadline.

Grant Reallocation Policy

VOLUNTARY REALLOCATION

Existing CoC project grantees of any project type may, in part or in whole, voluntarily reallocate a grant(s). Grants may be reallocated to a project type which meets the Funding Priorities established for the competition. SARAH staff offer technical support and approval letters for grantees reallocating to meet HUD and community priorities.

Existing CoC grantees of any project type may also voluntarily reallocate funds to the pool of new project dollars for which community members apply.

Additional points will be awarded to projects voluntarily reallocating to a project type listed in the Funding Priorities established for the competition.

INVOLUNTARY REALLOCATION

If significant deficiencies are found with a renewal project during the review process, the IRT may recommend a project be placed on a Project Quality Improvement Plan (QIP), monitored by SARAH. The agency may choose to participate in the QIP or agree not to renew the grant and reallocate their funding.

The QIP will be customized based on the specific issues of the project with deficiencies. The plan will be drafted by SARAH staff with recommendations from the IRT and

approved by the CoC Board of Directors. The renewal applicant will have seven (7) calendar days to appeal participation in the QIP by writing an appeal letter to the CoC Board of Directors, who will make the final determination.

The CoC Board of Directors will review the project's progress either at a regular Board meeting or a separate meeting six (6) months after the close of the CoC Program funding competition. If the project has not shown progress toward the targets outlined in their QIP at a level satisfactory to the CoC Board of Directors, the project will be involuntarily reallocated for the next funding cycle.

SIGNIFICANT DE-OBLIGATED FUNDS

All projects are expected to expend 100% of their project funds. Any project that de-obligates more than 10% of its funds or $25,000, whichever is greater, in any HUD contract year is considered to have incurred a de-obligation deficiency. Grantees with an unexpended balance that meets or exceeds the threshold specified above will be subject to a reduction in renewal grant amount with the unspent funds being added to the pool of funds available for reallocation.

Projects with a de-obligation deficiency will be required to submit a spending plan to SARAH. The CoC Board of Directors will require a quarterly update on the progress of meeting the spending plan. If, at the end of the grant, a project incurs a second de-obligation deficiency, the project will be reduced to the amount expended at the end of the 12 or 24-month review. An exception to this policy may be made for new projects that could not expend funds due to implementation barriers, as determined by the CoC Board Executive Committee. The CoC Board of Directors reserves the right to place a project on a spending plan at any time if funds are not being drawn down during routine financial monitoring.

CoC Program Project Performance Evaluation, Monitoring, and Reporting

CoCs are charged with designing a local system to assist sheltered and unsheltered people experiencing homelessness and providing the services necessary to help them access housing and obtain long-term stability. For the CoC's purposes, the system is defined as the City of San Antonio/Bexar County and the all the homelessness assistance projects therein.

SARAH uses HUD's annual System Performance Measures (SPM) Report to understand how the community's current system is functioning, and if the right combination of strategies and resources have been deployed to meet the community's needs. HUD uses the data in the System Performance Measures Report as selection criteria for awarding grants for the CoC program under future Notices of Funding Available (NOFO).

SARAH's CoC Performance Scorecards outline project specific goals for the CoC. Key measures include:

- Reducing the length of time people experience homelessness;
- Increasing exits to permanent housing;
- Reducing recidivism;
- Increasing participant noncash benefits and earned income

The CoC Performance Scorecards and the HMIS Data Quality Plan should provide the CoC and other key stakeholders charged with monitoring and improving system performance the necessary framework for monitoring the system's performance and data quality year-round. SARAH staff will review and update project performance measures annually.

PROJECT-LEVEL PERFORMANCE MANAGEMENT PLAN

SARAH has created a CoC Performance Scorecard report for CoC-funded projects that will be monitored throughout the year and serve as part of the selection criteria for awarding funding during the annual NOFO competition. The purpose of the scorecards is to serve as a tool that project staff can use to actively monitor the performance of their projects against the specific performance and data quality requirements established by the CoC and HUD.

There are six (6) different project-level scorecards:

Permanent Supportive Housing (PSH)
Rapid Re-Housing (RRH)
Rapid Rehousing – DV Specific
Transitional Housing (TH)
Transitional Housing – DV Specific
Joint TH-RRH – DV Specific

The metrics identified within the scorecards are specific to the different project component types, but all the projects are monitored on:

- HMIS Data Quality (or HMIS Comparable Database);
- Coordinated Entry Participation (Increase in DV survivor safety for DV-specific projects); and
- Ending Homelessness (System Performance Metrics)

The scorecards have a total combined value of 100 points and the data captured within the report aligns with the System Performance Measures report.

*E*LOCCS MONITORING

CoC-funded agencies are required to submit quarterly *e*LOCCs drawdown summary reports to SARAH. Grantees are responsible for informing SARAH of any changes made to the contract start or end dates and/or if the primary point of contact responsible for documenting the drawdowns for a project changes.

APPENDIX A – CoC Program Application Scoring Rubrics

NEW PROJECT

San Antonio/Bexar County 2021 CoC Program IRT Scoring Rubric
New Project

Agency Name:		Project Type:	
Project Name:		Funding Amount Requested:	
Notes from SARAH Staff on Application Review			

Category	Max Points	Final Score

Application Submission & Funding Priority
 	
• Applicant followed instructions to submit the application on time and with all required attachments
   o Applications submitted late will receive a deduction in accordance with the CoC Program Policy.
   o Applications with deficiencies will receive a deduction in accordance with the CoC Program Policy.
• Funding Priority
   o Applicant project is a funding priority. (5 points)
   o Applicant project is site based PSH. (8 points)
   o Applicant project demonstrates coordination with housing providers and healthcare organizations as described in the NOFO. (5 points)
• Applicant attended Bidders' Conference or completed online course. (2 point)
	20	

Applicant Experience (e-SNAPS Part 2, Applicant Experience Narrative)
 	
• Applicant has experience effectively utilizing federal funds:
   o No experience (0 points)
   o 1 – 3 years (1 point)
	7	

o 3 – 5 years (2 points) o 5+ years (3 points) • Applicant has not had grant funding returned or reallocated in the last two years. (2 points) • Applicant has at least 1 year of experience delivering homeless services. (2 points)		
Fiscal Management (e-SNAPS Part 6, Fiscal P&P Attachment, Audit Attachment, Staffing Attachment, Monitoring and Compliance Narrative, Case Management Fiscal Responsibility Narrative) • Applicant provides accurate budget. Budget's ratio of supportive services to operations and cost-per-client analysis is manageable. (2 points) • Applicant provides match documentation. (5 points) • Applicant provides comprehensive fiscal policies and procedures. (4 points) • Audit shows no findings or significant deficiencies. (5 points) o If no audit is available – applicant explanation is sufficient in addressing the lack of audit. • Applicant uploads relevant job descriptions which meet requirements for managing project. (2 points) • Direct services staffing ratio is within 8-15 for PSH and 15-30 for RRH and direct services staff salaries are, at minimum, consistent with a living wage as outlined by the U.S. Bureau of Labor. (2 points)	20	
Project Description (e-SNAPS Part 2, 3, 4, and 5, Racial Equity Narrative, Landlord Engagement Narrative) • Applicant provides thorough description of project to include need for program, how it aligns with the CoC's strategy to end homelessness, and specific outcomes. (10 points) • Applicant provides a realistic and comprehensive start-up plan with adequate milestones. (5 points) • Applicant describes barriers to participation faced by persons of different races or those who are over-represented in the local homeless population and identifies strategies to eliminate these barriers. (5 points) • Applicant's landlord engagement strategy articulates how the project will identify new landlords, retain landlords, and engage landlords to house higher-barrier clients. (5 points) • Applicant confirms participation or commitment to participate in Coordinated Entry, HMIS, CoC governance (Membership	29	

Council, workgroups, committees), and adherence to HUD Reporting requirements. (4 points)		
Policies and Procedures (P&P Attachment) • Applicant's Policies and Procedures include the following: intake, confidentiality, termination, and VAWA. (4 points) • Intake policies demonstrate low-barrier, housing first, and trauma-informed service orientation. (4 points) • Confidentiality policies and procedures are robust to ensure client confidentiality is a high priority. (4 points) • Termination policies clearly delineate types of termination and provide clear grounds for termination. These policies outline the process by which participants are notified and informed when termination is the only recourse. (4 points) • VAWA policy aligns with HUD standards outlined in 24 CFR 578.99(j). (4 points) • Policies and Procedures align with local CoC Written Standards and Coordinated Entry Policies and Procedures. (4 points)	24	
BONUS (Bonus Narratives) • Applicant is a current Homelink Network Partner and/or Homelink Hub. (1 points) • Applicant incorporates lived experience in in agency's policy and/or decision-making structure beyond the HUD requirements. Applicant must describe how lived experience is operationalized to receive points. (2 point) • Applicant actively engages in Point-in-Time Count, CoC Membership Council, workgroups, and/or committees. (1 point) • Applicant strategically engages with other homeless providers in a collaborative, effective way and prioritizes a community-wide focus on ending homelessness rather than agency-specific. (1 point)	5	
TOTAL	100	

IRT Member Notes	
IRT Member Name	
IRT Member Signature	
Date	

*Note – To reduce length of document, the IRT note and signature section will be left out from the remaining scorecards.

NEW PROJECT – DOMESTIC VIOLENCE

San Antonio/Bexar County 2021 CoC Program IRT Scoring Rubric
New Project – Domestic Violence

Agency Name:		**Project Type:**	
Project Name:		**Funding Amount Requested:**	
Notes from SARAH Staff on Application Review			

Category	**Max Points**	**Final Score**

Application Submission & Funding Priority
 	
• Applicant followed instructions to submit the application on time and with all required attachments
     ○ Applications submitted late will receive a deduction in accordance with the CoC Program Policy.
     ○ Applications with deficiencies will receive a deduction in accordance with the CoC Program Policy.
	20	

• Funding Priority
    o Applicant project is a funding priority. (5 points)
    o Applicant project is site based PSH. (8 points)
    o Applicant project demonstrates coordination with housing providers and healthcare organizations as described in the NOFO. (5 points)
• Applicant attended Bidders' Conference or completed online course. (2 point)		

Applicant Experience (e-SNAPS Part 2, Applicant Experience Narrative)
 	
• Applicant has experience effectively utilizing federal funds:
    o No experience (0 points)
    o 1 – 3 years (1 point)
    o 3 – 5 years (2 points)
    o 5+ years (3 points)
• Applicant has not had grant funding returned or reallocated in the last two years. (2 points)
• Applicant has at least 1 year of experience delivering homeless services. (2 points)
	7	

Fiscal Management (e-SNAPS Part 6, Fiscal P&P Attachment, Audit Attachment, Staffing Attachment, Monitoring and Compliance Narrative, Case Management Fiscal Responsibility Narrative) • Applicant provides accurate budget. Budget's ratio of supportive services to operations and cost-per-client analysis is manageable. (2 points) • Applicant provides match documentation. (5 points) • Applicant provides comprehensive fiscal policies and procedures. (4 points) • Audit shows no findings or significant deficiencies. (5 points) o If no audit is available – applicant explanation is sufficient in addressing the lack of audit. • Applicant uploads relevant job descriptions which meet requirements for managing project. (2 points) • Direct services staffing ratio is within 8-15 for PSH and 15-30 for RRH and direct services staff salaries are, at minimum, consistent with a living wage as outlined by the U.S. Bureau of Labor. (2 points)	20	
Project Description (e-SNAPS Part 2, 3, 4, and 5, Racial Equity Narrative, Population Safety Narrative, Landlord Engagement Narrative)	29	

• Applicant provides thorough description of project to include need for program, how it aligns with the CoC's strategy to end homelessness, and specific outcomes. (7 points) • Applicant provides a realistic and comprehensive start-up plan with adequate milestones. (5 points) • Applicant describes barriers to participation faced by persons of different races or those who are over-represented in the local homeless population and identifies strategies to eliminate these barriers. (5 points) • Applicant adequately explains how the project will improve safety for the population served. (5 points) • Applicant's landlord engagement strategy articulates how the project will identify new landlords, retain landlords, and engage landlords to house higher-barrier clients. (4 points) • Applicant confirms participation or commitment to participate in a comparable database, CoC governance (Membership Council, workgroups, committees), and adherence to HUD Reporting requirements. (3 points)		
Policies and Procedures (P&P Attachment) • Applicant's Policies and Procedures include the following: intake, confidentiality, termination, and VAWA. (4 points) • Intake policies demonstrate low-barrier, housing first, and trauma-informed service orientation. (4 points) • Confidentiality policies and procedures are robust to ensure client confidentiality is a high priority. (4 points) • Termination policies clearly delineate types of termination and provide clear grounds for termination. These policies outline the process by which participants are notified and informed when termination is the only recourse. (4 points) • VAWA policy aligns with HUD standards outlined in 24 CFR 578.99(j). (4 points) • Policies and Procedures align with local CoC Written Standards. (4 points)	24	
BONUS (Bonus Narratives) • Applicant is a current Homelink Network Partner and/or Homelink Hub. (1 points) • Applicant incorporates lived experience in in agency's policy and/or decision-making structure beyond the HUD requirements. Applicant must describe how lived experience is operationalized to receive points. (2 point)	5	

	Max Points	Final Score
• Applicant actively engages in Point-in-Time Count, CoC Membership Council, workgroups, and/or committees. (1 point) • Applicant strategically engages with other homeless providers in a collaborative, effective way and prioritizes a community-wide focus on ending homelessness rather than agency-specific. (1 point)		
TOTAL	**100**	

NEW PROJECT – COORDINATED ENTRY

San Antonio/Bexar County 2021 CoC Program IRT Scoring Rubric
New Project – Coordinated Entry

Agency Name:		Project Type:	
Project Name:		**Funding Amount Requested:**	
Notes from SARAH Staff on Application Review			

Category	Max Points	Final Score

Application Submission & Funding Priority
 	
• Applicant followed instructions to submit the application on time and with all required attachments
   o Applications submitted late will receive a deduction in accordance with the CoC Program Policy.
   o Applications with deficiencies will receive a deduction in accordance with the CoC Program Policy.
• Applicant project is a funding priority. (20 points)
• Applicant attended Bidders' Conference or completed online course. (5 point)
	25	

Applicant Experience (e-SNAPS Part 2, Applicant Experience Narrative)
 	
• Applicant has experience effectively utilizing federal funds:
   o No experience (0 points)
   o 1 – 3 years (1 point)
	10	

○ 3 – 5 years (2 points) ○ 5+ years (3 points) - Applicant has not had grant funding returned or reallocated in the last two years. (4 points) - Applicant has at least 1 year of experience delivering homeless services at the system level. (3 points)		
Fiscal Management (e-SNAPS Part 6, Fiscal P&P Attachment, Audit Attachment, Staffing Attachment, Monitoring and Compliance Narrative) - Applicant provides accurate budget. (5 points) - Applicant provides match documentation. (5 points) - Applicant provides comprehensive fiscal policies and procedures. (5 points) - Audit shows no findings or significant deficiencies. (5 points) ○ If no audit is available – applicant explanation is sufficient in addressing the lack of audit. - Applicant uploads relevant job descriptions which meet requirements for managing project. (5 points)	25	
Project Description (e-SNAPS Part 2, 3, 4, and 5, Racial Equity Narrative) - Applicant provides thorough description of project to include need for program, how it aligns with the CoC's strategy to end homelessness, and specific outcomes. (10 points) - Applicant provides a realistic and comprehensive start-up plan with adequate milestones. (10 points) - Applicant describes barriers to participation faced by persons of different races or those who are over-represented in the local homeless population and identifies strategies to eliminate these barriers. (10 points)	30	
Policies and Procedures (P&P Attachment) Applicant uploads Coordinated Entry Policies and Procedures. (10 points)	10	
TOTAL	100	

NEW PROJECT – HOMELESS MANAGEMENT INFORMATION SYSTEM

San Antonio/Bexar County 2021 CoC Program IRT Scoring Rubric
New Project – HMIS

Agency Name:		Project Type:	
Project Name:		**Funding Amount Requested:**	
Notes from SARAH Staff on Application Review			

Category	Max Points	Final Score

Application Submission & Funding Priority
 	
• Applicant followed instructions to submit the application on time and with all required attachments
  ○ Applications submitted late will receive a deduction in accordance with the CoC Program Policy.
  ○ Applications with deficiencies will receive a deduction in accordance with the CoC Program Policy.
• Applicant project is a funding priority. (20 points)
• Applicant attended Bidders' Conference or completed online course. (5 point)
	25	

Applicant Experience (e-SNAPS Part 2, Applicant Experience Narrative)
 	
• Applicant has experience effectively utilizing federal funds:
  ○ No experience (0 points)
  ○ 1 – 3 years (1 point)
  ○ 3 – 5 years (2 points)
  ○ 5+ years (3 points)
• Applicant has not had grant funding returned or reallocated in the last two years. (4 points)
• Applicant has at least 1 year of experience delivering homeless services at the system level. (3 points)
	10	

Fiscal Management (e-SNAPS Part 6, Fiscal P&P Attachment, Audit Attachment, Staffing Attachment, Monitoring and Compliance Narrative)	25	

	Max Points	Final Score
• Applicant provides accurate budget. (5 points) • Applicant provides match documentation. (5 points) • Applicant provides comprehensive fiscal policies and procedures. (5 points) • Audit shows no findings or significant deficiencies. (5 points) ○ If no audit is available – applicant explanation is sufficient in addressing the lack of audit. • Applicant uploads relevant job descriptions which meet requirements for managing project. (5 points)		
Project Description (e-SNAPS Part 2, 3, 4, and 5) • Applicant provides thorough description of project to include need for program, how it aligns with the CoC's strategy to end homelessness, and specific outcomes. (15 points) • Applicant provides a realistic and comprehensive start-up plan with adequate milestones. (15 points)	30	
Policies and Procedures (P&P Attachment) • Applicant uploads HMIS Policies and Procedures. (10 points)	10	
TOTAL	100	

FIRST-TIME RENEWAL PROJECT

San Antonio/Bexar County 2021 CoC Program IRT Scoring Rubric
First-Time Renewal Project

Agency Name:		Project Type:	
Project Name:		**Funding Amount Requested:**	
Notes from SARAH Staff on Application Review			

Category	Max Points	Final Score
Application Submission	1	

- Applicant followed instructions to submit the application on time and with all required attachments. - Applications submitted late will receive a deduction in accordance with the CoC Program Policy. - Applications with deficiencies will receive a deduction in accordance with the CoC Program Policy. - Applicant attended Bidders' Conference or completed online course. (1 point)		
Fiscal Management (e-SNAPS Part 6, Fiscal P&P Attachment, eLOCCS Draws Attachment, Audit Attachment, Monitoring and Compliance Narrative, Case Management Fiscal Responsibility Narrative) - Applicant provides accurate budget. Budget's ratio of supportive services to operations and cost-per-client analysis is manageable. (10 points) - Applicant provides match documentation. (10 points) - Applicant provides comprehensive fiscal policies and procedures. (10 points) - eLOCCS draws show appropriate grant spending. If no eLOCCS draws, applicant made adequate effort to draw down and re-authorize access, if applicable. (15 points) - HUD Monitoring and/or Audit show no significant deficiencies or findings. (10 points) - If no audit is available – applicant explanation is sufficient in addressing the lack of audit. - Direct services staffing ratio is within 8-15 for PSH and 15-30 for RRH and direct services staff salaries are, at minimum, consistent with a living wage as outlined by the <u>U.S. Bureau of Labor</u>. (10 points)	65	
Project Description (e-SNAPS Part 2, 3, 4, and 5; Racial Equity Narrative; Landlord Engagement Strategy) - Applicant provided thorough description of project to include need of the project and specific outcomes. (8 points) - Applicant provided realistic and comprehensive milestones. (8 points) - Applicant describes barriers to participation faced by persons of different races or those who are over-represented in the local homeless population and identifies strategies to eliminate these barriers. (8 points)	29	

• Applicant's landlord engagement strategy articulates how the project will identify new landlords, retain landlords, and engage landlords to house higher-barrier clients. (5 points)		
Policies and Procedures (P&P Attachment) • Applicant's Policies and Procedures include the following: intake, confidentiality, termination, and VAWA. (4 points) • Intake policies demonstrate low-barrier, housing first, and trauma-informed service orientation. (5 points) • Confidentiality policies and procedures are robust to ensure client confidentiality is a high priority. (5 points) • Termination policies clearly delineate types of termination and provide clear grounds for termination. These policies outline the process by which participants are notified and informed when termination is the only recourse. (5 points) • VAWA policy aligns with HUD standards outlined in 24 CFR 578.99(j). (5 points) • Policies and Procedures align with local CoC Written Standards and Coordinated Entry Policies and Procedures. (6 points)	30	
CoC Participation (CoC Participation Narrative) • Applicant adhered to local Coordinated Entry Policies and Procedures from last grant year or has a detailed plan to adhere. (10 points) • Applicant adhered to local HUD reporting deadlines from last grant year or has a detailed plan to adhere. (5 points) • Applicant adhered to local HMIS reporting from last grant year or has a detailed plan to adhere. (5 points) • Applicant participated in the CoC Membership Council, workgroups, or committees from last grant year or has a detailed plan to participate. (5 points)	25	
BONUS (Bonus Narratives) • Project is voluntarily reallocating to a project type listed as a funding priority. (1 point) • Applicant incorporates lived experience in in agency's policy and/or decision-making structure beyond the HUD requirements. (1 point) • Applicant is a Homelink Network Partner and/or Homelink Hub. (2 point)	5	

Category	Max Points	Final Score
• Applicant strategically engages with other homeless providers in a collaborative, effective way and prioritizes a community-wide focus on ending homelessness as opposed to agency-specific. (1 point)		
TOTAL	**150**	

FIRST-TIME RENEWAL PROJECT – DOMESTIC VIOLENCE

San Antonio/Bexar County 2021 CoC Program IRT Scoring Rubric
First-Time Renewal Project – Domestic Violence

Agency Name:		Project Type:	
Project Name:		**Funding Amount Requested:**	
Notes from SARAH Staff on Application Review			

Category	Max Points	Final Score
Application Submission • Applicant followed instructions to submit the application on time and with all required attachments. ○ Applications submitted late will receive a deduction in accordance with the CoC Program Policy. ○ Applications with deficiencies will receive a deduction in accordance with the CoC Program Policy. • Applicant attended Bidders' Conference or completed online course. (1 point)	1	
Fiscal Management (e-SNAPS Part 6, Fiscal P&P Attachment, eLOCCS Draws Attachment, Audit Attachment, Monitoring and Compliance Narrative, Case Management Fiscal Responsibility Narrative) • Applicant provides accurate budget. Budget's ratio of supportive services to operations and cost-per-client analysis is manageable. (10 points)	65	

- Applicant provides match documentation. (10 points) - Applicant provides comprehensive fiscal policies and procedures. (10 points) - eLOCCS draws show appropriate grant spending. If no eLOCCS draws, applicant made adequate effort to draw down and re-authorize access, if applicable. (15 points) - HUD Monitoring and/or Audit show no significant deficiencies or findings. (10 points) - If no audit is available – applicant explanation is sufficient in addressing the lack of audit. - Direct services staffing ratio is within 8-15 for PSH and 15-30 for RRH and direct services staff salaries are, at minimum, consistent with a living wage as outlined by the <u>U.S. Bureau of Labor</u>. (10 points)		
Project Description (e-SNAPS Part 2, 3, 4, and 5; Racial Equity Narrative; Population Safety Narrative; Landlord Engagement Narrative) - Applicant provided thorough description of project to include need of the project and specific outcomes. (6 points) - Applicant provided realistic and comprehensive milestones. (6 points) - Applicant describes barriers to participation faced by persons of different races or those who are over-represented in the local homeless population and identifies strategies to eliminate these barriers. (6 points) - Applicant adequately explains how the project will improve safety for the population served. (6 points) - Applicant's landlord engagement strategy articulates how the project will identify new landlords, retain landlords, and engage landlords to house higher-barrier clients. (5 points)	29	
Policies and Procedures (P&P Attachment) - Applicant's Policies and Procedures include the following: intake, confidentiality, termination, and VAWA. (4 points) - Intake policies demonstrate low-barrier, housing first, and trauma-informed service orientation. (5 points) - Confidentiality policies and procedures are robust to ensure client confidentiality is a high priority. (5 points) - Termination policies clearly delineate types of termination and provide clear grounds for termination. These policies	30	

outline the process by which participants are notified and informed when termination is the only recourse. (5 points) • VAWA policy aligns with HUD standards outlined in 24 CFR 578.99(j). (5 points) • Policies and Procedures align with local CoC Written Standards. (6 points)		
CoC Participation (CoC Participation Narrative) • Applicant adhered to local HUD reporting deadlines from last grant year or has a detailed plan to adhere. (8.5 points) • Applicant describes adequate comparable database to HMIS. (8.5 points) • Applicant participated in the CoC Membership Council, workgroups, or committees from last grant year or has a detailed plan to participate. (8 points)	25	
BONUS (Bonus Narratives) • Project is voluntarily reallocating to a project type listed as a funding priority. (1 point) • Applicant incorporates lived experience in in agency's policy and/or decision-making structure beyond the HUD requirements. (1 point) • Applicant is a Homelink Network Partner and/or Homelink Hub. (2 point) • Applicant strategically engages with other homeless providers in a collaborative, effective way and prioritizes a community-wide focus on ending homelessness as opposed to agency-specific. (1 point)	5	
TOTAL	150	

FIRST-TIME RENEWAL PROJECT – COORDINATED ENTRY

San Antonio/Bexar County 2021 CoC Program IRT Scoring Rubric
First-Time Renewal Project – Coordinated Entry

Agency Name:		**Project Type:**	
Project Name:		**Funding Amount Requested:**	

Notes from SARAH Staff on Application Review	

Category	Max Points	Final Score

Application Submission
 	
• Applicant followed instructions to submit the application on time and with all required attachments
    ○ Applications submitted late will receive a deduction in accordance with the CoC Program Policy.
    ○ Applications with deficiencies will receive a deduction in accordance with the CoC Program Policy.
• Applicant attended Bidders' Conference or completed online course. (5 point)
	5	

Fiscal Management (e-SNAPS Part 6, Fiscal P&P Attachment, eLOCCS Draws Attachment, Audit Attachment, Monitoring and Compliance Narrative) • Applicant provides accurate budget. (10 points) • Applicant provides match documentation. (10 points) • Applicant provides comprehensive fiscal policies and procedures. (10 points) • eLOCCS draws show appropriate grant spending. If no eLOCCS draws, applicant made adequate effort to draw down and re-authorize access, if applicable. (15 points) • HUD Monitoring and/or Audit show no significant deficiencies or findings. (10 points) ○ If no audit is available – applicant explanation is sufficient in addressing the lack of audit. • Applicant uploads relevant job descriptions which meet requirements for managing project. (10 points)	65	
Project Description (e-SNAPS Part 2, 3, 4, and 5, Racial Equity Narrative) • Applicant provided thorough description of project to include need of the project and specific outcomes. (15 points) • Applicant provided realistic and comprehensive milestones. (15 points) • Applicant describes barriers to participation faced by persons of different races or those who are over-represented	40	

Category	Max Points	Final Score
in the local homeless population and identifies strategies to eliminate these barriers. (10 points)		
Policies and Procedures (P&P Attachment) • Applicant uploads Coordinated Entry Policies and Procedures. (40 points)	40	
TOTAL	**150**	

FIRST-TIME RENEWAL PROJECT – HOMELESS MANAGEMENT INFORMATION SYSTEM

San Antonio/Bexar County 2021 CoC Program IRT Scoring Rubric
First-Time Renewal Project – HMIS

Agency Name:		Project Type:	
Project Name:		Funding Amount Requested:	
Notes from SARAH Staff on Application Review			

Category	Max Points	Final Score

Application Submission & Funding Priority
 	
• Applicant followed instructions to submit the application on time and with all required attachments
  ○ Applications submitted late will receive a deduction in accordance with the CoC Program Policy.
  ○ Applications with deficiencies will receive a deduction in accordance with the CoC Program Policy.
• Applicant attended Bidders' Conference or completed online course. (5 point)
	5	

Fiscal Management (e-SNAPS Part 6, Fiscal P&P Attachment, Audit Attachment, Staffing Attachment, Monitoring and Compliance Narrative) • Applicant provides accurate budget. (10 points) • Applicant provides match documentation. (10 points)	65	

Category	Max Points	Final Score
• Applicant provides comprehensive fiscal policies and procedures. (10 points) • *eLOCCS* draws show appropriate grant spending. If no *eLOCCS* draws, applicant made adequate effort to draw down and re-authorize access, if applicable. (15 points) • HUD Monitoring and/or Audit show no significant deficiencies or findings. (10 points) o If no audit is available – applicant explanation is sufficient in addressing the lack of audit. • Applicant uploads relevant job descriptions which meet requirements for managing project. (10 points)		
Project Description (e-SNAPS Part 2, 3, 4, and 5) • Applicant provided thorough description of project to include need of the project and specific outcomes. (20 points) • Applicant provided realistic and comprehensive milestones. (20 points)	40	
Policies and Procedures (P&P Attachment) • Applicant uploads HMIS Policies and Procedures. (40 points)	40	
TOTAL	150	

RENEWAL PROJECT

San Antonio/Bexar County 2021 CoC Program IRT Scoring Rubric
Renewal Project

Agency Name:		Project Type:	
Project Name:		**Funding Amount Requested:**	
Notes from SARAH Staff on Application Review			

Category	Max Points	Final Score
Application Submission	1	

- Applicant followed instructions to submit the application on time and with all required attachments. - Applications submitted late will receive a deduction in accordance with the CoC Program Policy. - Applications with deficiencies will receive a deduction in accordance with the CoC Program Policy. - Applicant attended Bidders' Conference or completed online course. (1 point)		
Fiscal Management (e-SNAPS Part 6, Fiscal P&P Attachment, Audit, *e*LOCCS Draws Attachment, Final Grant Close-Out Attachment, Case Management Fiscal Responsibility Narrative) - Applicant provides accurate budget. Budget's ratio of supportive services to operations and cost-per-client is manageable. (2 points) - Applicant provides match documentation. (1 points) - Applicant provides comprehensive fiscal policies and procedures. (2 points) - HUD Monitoring and/or Audit show no significant deficiencies or findings. (2 points) - If no audit is available – applicant explanation is sufficient in addressing the lack of audit. *e*LOCCS draws and Final Grant Close-Out show appropriate grant spending. (2 points) - Direct services staffing ratio is within 8-15 for PSH and 15-30 for RRH and direct services staff salaries are, at minimum, consistent with a living wage as outlined by the <u>U.S. Bureau of Labor</u>. (1 point)	10	
Project Description (e-SNAPS Part 2, 3, 4, and 5; Racial Equity; Landlord Engagement Strategy) - Applicant provided thorough description of project to include need of the project and specific outcomes. (2 points) - Applicant provided realistic and comprehensive milestones. (2 points) - Applicant describes barriers to participation faced by persons of different races or those who are over-represented in the local homeless population and identifies strategies to eliminate these barriers. (2 points) - Applicant's landlord engagement strategy articulates how the project will identify new landlords, retain landlords, and engage landlords to house higher-barrier clients. (2 points.)	8	

Policies and Procedures (P&P Attachment) • Applicant's Policies and Procedures include the following: intake, confidentiality, termination, and VAWA. (4 points) • Intake policies demonstrate low-barrier, housing first, and trauma-informed service orientation. (2 points) • Confidentiality policies and procedures are robust to ensure client confidentiality is a high priority. (2 points) • Termination policies clearly delineate types of termination and provide clear grounds for termination. These policies outline the process by which participants are notified and informed when termination is the only recourse. (2 points) • VAWA policy aligns with HUD standards outlined in 24 CFR 578.99(j). (1 points) • Policies and Procedures align with local CoC Written Standards and Coordinated Entry Policies and Procedures. (2 points)	13	
Project Performance (CoC Scorecard Attachment, Annual Performance Review Attachment, Project Performance Narrative) • CoC Scorecard Metrics (100 points) • Applicant can adequately describe project performance on scorecard and APR with plan to improve, if applicable. (5 points)	105	
CoC Participation (CoC Participation Narrative) • Applicant adhered to local Coordinated Entry Policies and Procedures from last grant year. (7 points) • Applicant adhered to local HUD reporting deadlines from last grant year. (2 point) • Applicant adhered to local HMIS reporting from last grant year. (2 point) • Applicant participated in the CoC Membership Council, workgroups, or committees from last grant year. (1 point) • Applicant participated in the 2019 Point-in-Time Count. (1 point)	13	
BONUS (Bonus Narratives) • Project is voluntarily reallocating to a project type listed as a funding priority. (1 point) • Applicant is a Homelink Network Partner and/or Homelink Hub. (2 points)	5	

	Max Points	Final Score
• Applicant incorporates lived experience in in agency's policy and/or decision-making structure beyond the HUD requirements. (1 point) • Applicant strategically engages with other homeless providers in a collaborative, effective way and prioritizes a community-wide focus on ending homelessness. (1 point)		
TOTAL	**150**	

RENEWAL PROJECT – DOMESTIC VIOLENCE

San Antonio/Bexar County 2021 CoC Program IRT Scoring Rubric
Renewal Project – Domestic Violence

Agency Name:		Project Type:	
Project Name:		**Funding Amount Requested:**	
Notes from SARAH Staff on Application Review			

Category	Max Points	Final Score

Application Submission
 	
• Applicant followed instructions to submit the application on time and with all required attachments.
    ○ Applications submitted late will receive a deduction in accordance with the CoC Program Policy.
    ○ Applications with deficiencies will receive a deduction in accordance with the CoC Program Policy.
• Applicant attended Bidders' Conference or completed online course. (1 point)
	1	

Fiscal Management (e-SNAPS Part 6, Fiscal P&P Attachment, Audit, eLOCCS Draws Attachment, Final Grant Close-Out Attachment, Case Management Fiscal Responsibility Narrative) • Applicant provides accurate budget. Budget's ratio of supportive services to operations and cost-per-client is manageable. (2 points)	10	

- Applicant provides match documentation. (1 points) - Applicant provides comprehensive fiscal policies and procedures. (2 points) - HUD Monitoring and/or Audit show no significant deficiencies or findings. (2 points) - If no audit is available – applicant explanation is sufficient in addressing the lack of audit. - eLOCCS draws and Final Grant Close-Out show appropriate grant spending. (2 points) - Direct services staffing ratio is within 8-15 for PSH and 15-30 for RRH and direct services staff salaries are, at minimum, consistent with a living wage as outlined by the <u>U.S. Bureau of Labor</u>. (1 point)		
Project Description (e-SNAPS Part 2, 3, 4, and 5; Racial Equity; Population Safety Narrative; Landlord Engagement Strategy) - Applicant provided thorough description of project to include need of the project and specific outcomes. (2 points) - Applicant provided realistic and comprehensive milestones. (2 points) - Applicant describes barriers to participation faced by persons of different races or those who are over-represented in the local homeless population and identifies strategies to eliminate these barriers. (2 points) - Applicant adequately explains how the project will improve safety for the population served. (2 points) - Applicant's landlord engagement strategy articulates how the project will identify new landlords, retain landlords, and engage landlords to house higher-barrier clients. (2 points.)	10	
Policies and Procedures (P&P Attachment) - Applicant's Policies and Procedures include the following: intake, confidentiality, termination, and VAWA. (4 points) - Intake policies demonstrate low-barrier, housing first, and trauma-informed service orientation. (2 points) - Confidentiality policies and procedures are robust to ensure client confidentiality is a high priority. (2 points) - Termination policies clearly delineate types of termination and provide clear grounds for termination. These policies outline the process by which participants are notified and informed when termination is the only recourse. (2 points) - VAWA policy aligns with HUD standards outlined in 24 CFR 578.99(j). (2 points)	14	

• Policies and Procedures align with local CoC Written Standards (2 points)		
Project Performance (CoC Scorecard Attachment, Annual Performance Review Attachment, Project Performance Narrative) • CoC Scorecard Metrics (100 points) • Applicant can adequately describe project performance on scorecard and APR with plan to improve, if applicable. (5 points)	105	
CoC Participation (CoC Participation Narrative) • Applicant adhered to local HUD reporting deadlines from last grant year. (3 points) • Applicant describes adequate comparable HMIS. (3 points) • Applicant participated in the CoC Membership Council, workgroups, or committees from last grant year. (2 point) • Applicant participated in the 2019 Point-in-Time Count. (2 point)	10	
BONUS (Bonus Narratives) • Project is voluntarily reallocating to a project type listed as a funding priority. (1 point) • Applicant is a Homelink Network Partner and/or Homelink Hub. (2 points) • Applicant incorporates lived experience in in agency's policy and/or decision-making structure beyond the HUD requirements. (1 point) • Applicant strategically engages with other homeless providers in a collaborative, effective way and prioritizes a community-wide focus on ending homelessness. (1 point)	5	
TOTAL	**150**	

RENEWAL PROJECT – COORDINATED ENTRY

San Antonio/Bexar County 2021 CoC Program IRT Scoring Rubric
Renewal Project – Coordinated Entry

Agency Name:		**Project Type:**	

Project Name:		Funding Amount Requested:	
Notes from SARAH Staff on Application Review			

Category	Max Points	Final Score

Application Submission
 	
• Applicant followed instructions to submit the application on time and with all required attachments.
    ○ Applications submitted late will receive a deduction in accordance with the CoC Program Policy.
    ○ Applications with deficiencies will receive a deduction in accordance with the CoC Program Policy.
• Applicant attended Bidders' Conference or completed online course. (5 points)
	5	

Fiscal Management (e-SNAPS Part 6, Fiscal P&P Attachment, Audit, eLOCCS Draws Attachment, Final Grant Close-Out Attachment, Case Management Fiscal Responsibility Narrative) • Applicant provides accurate budget. (10 points) • Applicant provides match documentation. (10 points) • Applicant provides comprehensive fiscal policies and procedures. (10 points) • HUD Monitoring and/or Audit show no significant deficiencies or findings. (10 points) ○ If no audit is available – applicant explanation is sufficient in addressing the lack of audit. • eLOCCS draws and Final Grant Close-Out show appropriate grant spending. (10 points)	50	
Project Description (e-SNAPS Part 2, 3, 4, and 5; Racial Equity Narrative) • Applicant provided thorough description of project to include need of the project and specific outcomes. (15 points) • Applicant provided realistic and comprehensive milestones. (15 points) • Applicant describes barriers to participation faced by persons of different races or those who are over-	40	

Category	Max Points	Final Score
represented in the local homeless population and identifies strategies to eliminate these barriers. (10 points)		
Policies and Procedures (P&P Attachment) • Applicant uploads Coordinated Entry Policies & Procedures. (30 points)	30	
Project Performance (Annual Performance Review Attachment, Project Performance Narrative) • Applicant uploads APR and can adequately describe project performance with plan to improve, if applicable. (25 points)	25	
TOTAL	150	

RENEWAL PROJECT – HOMELESS MANAGEMENT INFORMATION SYSTEM

San Antonio/Bexar County 2021 CoC Program IRT Scoring Rubric
Renewal Project – HMIS

Agency Name:		Project Type:	
Project Name:		**Funding Amount Requested:**	
Notes from SARAH Staff on Application Review			

Category	Max Points	Final Score

Application Submission
 	
• Applicant followed instructions to submit the application on time and with all required attachments.
    ○ Applications submitted late will receive a deduction in accordance with the CoC Program Policy.
    ○ Applications with deficiencies will receive a deduction in accordance with the CoC Program Policy.
• Applicant attended Bidders' Conference or completed online course. (5 points)
	5	

Fiscal Management (e-SNAPS Part 6, Fiscal P&P Attachment, Audit, *e*LOCCS Draws Attachment, Final Grant Close-Out Attachment, Case Management Fiscal Responsibility Narrative) • Applicant provides accurate budget. (10 points) • Applicant provides match documentation. (10 points) • Applicant provides comprehensive fiscal policies and procedures. (10 points) • HUD Monitoring and/or Audit show no significant deficiencies or findings. (10 points) o If no audit is available – applicant explanation is sufficient in addressing the lack of audit. • *e*LOCCS draws and Final Grant Close-Out show appropriate grant spending. (10 points)	50	
Project Description (e-SNAPS Part 2, 3, 4, and 5) • Applicant provided thorough description of project to include need of the project and specific outcomes. (20 points) • Applicant provided realistic and comprehensive milestones. (20 points)	40	
Policies and Procedures (P&P Attachment) • Applicant uploads HMIS Policies & Procedures. (30 points)	30	
Project Performance (Annual Performance Review Attachment, Project Performance Narrative) • Applicant uploads APR and can adequately describe project performance with plan to improve, if applicable. (25 points)	25	
TOTAL	150	

Homeless Management Information System (HMIS) Policies & Procedures

Approved: October 2020

Developed by: HMIS Lead Agency and SARAH

Approved by: CoC Board of Directors

TABLE OF CONTENTS

Date	Version	Description
12/29/2011	1.0	HMIS Policies & Procedures
08/11/2016	2.0	CoC Board of Directors approval date
02/2020	3.0	CoC Board of Directors approval date
06/2020	3.1	CoC Board of Directors approval date

1. OVERVIEW

1.1 PURPOSE OF HMIS

The McKinney-Vento Homeless Assistance Act, as amended by the Homeless Emergency Assistance and Rapid Transition to Housing Act of 2009 (HEARTH), requires that the U.S. Department of Housing and Urban Development (HUD) ensure operation of community-wide Homeless Management Information System (HMIS) with consistent participation by recipients and sub-recipients of applicable federal grants. The HMIS has many uses, including:

- Collecting unduplicated counts of individuals and families experiencing homelessness;

- Analyzing patterns of use of assistance provided in a community; and,

- Providing information to project sponsors and applicants for needs analyses and funding allocations.

Additionally, HMIS is essential to coordinate services, evaluate performance, ensure accountability in the use of public funds, and inform public policy. Ultimately, the HMIS serves as the foundation for all planning to prevent, reduce, and eliminate homelessness.

The HMIS Lead Agency for the San Antonio/Bexar County Continuum of Care (CoC) is Haven for Hope (H4H). In addition to administering the local HMIS, the HMIS Lead must develop written policies and procedures for all HMIS participating agencies in the CoC, execute participation agreements with each of these agencies and their system users, and monitor and enforce compliance by all participating agencies with the requirements set forth in the participation agreement. The HMIS Lead is responsible for maintaining the HMIS Policies and Procedures manual and all related documents, training system users, and providing technical assistance.

The HMIS software vendor for San Antonio/Bexar County CoC is CaseWorthy, Inc. Accordingly, the HMIS application may be referred to as "CaseWorthy" in operational manuals.

1.2 KEY TERMS

1. Continuum of Care: a community-based collaborative that oversees homeless system planning and coordination, including the HMIS implementation.

2. HMIS Lead Agency: the organization that administers and operates the HMIS.

3. Participating Agency: any agency that contributes data or uses the HMIS.

4. Exempt Agency: any agency that is explicitly exempt from entering data into the HMIS by federal regulations. This includes victim services providers.

5. Client: a person who receives services at an HMIS participating agency.

6. Personally Identifiable Information (PII): Defined in OMB M-07-16 as "...information which can be used to distinguish or trace an individual's identity, such as their name, social security number, biometric records, etc., alone, or when combined with other personal or identifying information which is linked or linkable to a specific individual, such as date and place of birth, mother's maiden name, etc.".

1.3 DATA OWNERSHIP

Policy: The participating agency retains ownership over all information it enters into the HMIS.

Procedures:

1. In the event that the HMIS system ceases to exist, participating agencies will be notified and provided reasonable time to access and save data on persons served by the participating agency. Thereafter, the information collected in the HMIS will be purged or appropriately stored.

2. In the event that H4H ceases to exist or is no longer the administrator of the HMIS, the CoC Board will select a new HMIS Lead and transfer the custodianship of the data within HMIS to another organization for continuing administration. In such event, participating agencies will be informed in a timely manner.

1.4 VOLUNTARY PARTICIPATION

The CoC Board strongly encourages agencies that serve persons who are homeless or at risk of homelessness and are not required to participate in HMIS to do so voluntarily.

Having more homeless service providers in the HMIS creates the potential for:

- More effective coordination of client services through case management and referral information sharing;

- More accurate tracking of client returns to the homelessness prevention and assistance system;

- More accurate counts of homeless persons and system resources, which could be used to understand the gaps in the service system;

- Better information about community-wide needs, which can help guide advocacy efforts, policymaking, and funding allocations; and

- Better information about system outcomes, which can be used to guide service targeting and performance improvement efforts.

1.5 HMIS DOCUMENTATION AMENDMENT PROCESS

1.5.1 POLICIES

The HMIS Lead and HMIS Advisory Committee will guide the amendment of HMIS Policies and Procedures and other related documentation.

The HMIS Advisory Committee will approve the HMIS Policies and Procedures and Data Quality Plan.

1.5.2 PROCEDURES

1. Proposed changes may originate from any participant in HMIS, including clients.

2. When proposed changes originate within a participating agency, they must be reviewed by the Executive Director/Program Director (or equivalent) and then submitted to the HMIS Manager.

3. The HMIS Manager will maintain a list of proposed changes.

4. The list of proposed changes will be discussed by the HMIS Advisory Committee at the next regularly scheduled meeting. At this meeting, the committee will determine if these changes require additional research and if so, they will create a plan for completing the necessary research.

5. If changes do not require additional research or once this research is complete, then the committee will vote on whether or not to propose these changes to the HMIS Lead.

6. Changes approved by the HMIS Advisory Committee will be made by the HMIS Manager and sent to all HMIS participating agencies.

7. The Executive Director/Program Director (or equivalent) from each of the agencies shall acknowledge receipt and acceptance of the revised HMIS Policies and Procedures (or other documents) within 10 working days of delivery of the amended document by notification in writing or email to the HMIS Manager. The agency's Executive Director/Program Director (or equivalent) shall also ensure the circulation and compliance of the revised policies and procedures within their agency.

8. Trainings on changes to HMIS documentation will be scheduled as needed.

2. STAKEHOLDER RESPONSIBILITIES

2.1 COC BOARD

1. Select and designate an HMIS Software for the CoC.

2. Select and designate an HMIS Lead for the CoC, among eligible applicants.

3. Work with the HMIS Lead to ensure consistent agency participation across the CoC.

4. Evaluate performance of the HMIS Software and HMIS Lead.

2.2 HMIS ADVISORY COMMITTEE

1. Review and approve HMIS Policies and Procedures.

2. Review and approve the Data Quality Plan.

3. Gather and incorporate user feedback into the HMIS Policies and Procedures.

4. Provide feedback on HMIS documentation.

5. Participate in efforts to promote HMIS operations, research, and analysis.

2.3 HMIS LEAD AGENCY

1. H4H is responsible for the administration of the HMIS project under the auspices of the CoC Board, which authorizes H4H to hold the HUD HMIS grant.

2. H4H shall maintain an HMIS Department with, at minimum, 5 full-time employees, or their equivalent, dedicated solely to those HMIS responsibilities set forth in this section. These responsibilities are grouped by function, though actual H4H job titles and descriptions may differ.

3. H4H shall establish an HMIS Ticketing System, enabling participating agencies and system users to receive professional technical assistance. Additional resources and contact information for the help desk can be found here: https://www.havenforhope.org/hmis-resources/.

2.3.1 HMIS MANAGER

1. Oversee the collection, analysis and presentation of HMIS data for reporting to federal, state, and local governments, and private entities.

2. Oversee HUD HMIS grant application and reporting process.

3. Oversee the overall administration of the HMIS software.

4. Oversee HMIS Department activities and staff as described in this section.

5. Oversee HMIS help desk and designate staff responsibility to manage, coordinate and support its operation.

6. Lead performance and staff evaluation activities.

7. Engage with new and current participating agencies to identify business needs; identifying opportunities for customization within the HMIS application.

8. Work with H4H's Senior Director of Transformational Services to develop and implement strategic plan for HMIS, evaluate priorities, and promote a continuous improvement environment to advance training and technical assistance.

9. Perform other duties as assigned.

2.3.2 HMIS LEAD SYSTEM ADMINISTRATOR

1. Leads team in maintaining system performance.

2. Maintains security, maintenance, backups, and capacity of the HMIS database.

3. Leads team in identifying data quality problems, developing remedies, suggesting and implementing corrective and/or preventative actions.

4. Leads team in system troubleshooting and continuous improvement efforts.

5. Establishes team standards and practices for monitoring timely and accurate completion of critical data elements and processes.

6. Provides technical guidance in identifying and defining data elements stored in the system.

7. Reviews data queries and reports for accuracy.

8. Leads team in implementing required HUD Federal Reports and Data Standards requirements.

9. Assists user organizations in requirements gathering, process documentation, and other business analysis.

10. Establishes and maintains documentation, change management, and testing, and development procedures for customization and enhancements.

11. Coordinates activities related to software updates and upgrades, including communication with HMIS manager and other organization staff, software testing, and implementation scheduling.

2.3.3 HMIS SECURITY AND COMPLIANCE COORDINATOR

1. Complete site visits at participating agencies to monitor compliance with HMIS Policies and Procedures.

2. Assist in developing the HMIS Security Plan.

3. Document reports of suspected violations of client privacy or data security policies, participating agency responses, and HMIS Lead responses.

4. Coordinate with HMIS Manager regarding HMIS Lead responses to suspected violations of client privacy and data security policies.

5. Coordinate with participating agencies regarding agencies policy of disposal of electronic devices where clients' Protected Health Information (PHI) was stored.

6. Serve as point of contact on HMIS Data Standards compliance, staying abreast of any changes.

7. Maintain the HMIS Policies and Procedures document, making updates and revisions as needed.

8. Ensure compliance with HUD HMIS Data and Technical Standards and H4H's HMIS Policies and Procedures.

2.3.4 HMIS TRAINING COORDINATOR

1. Conduct Training for all HMIS Users, which includes but is not limited to HMIS New User Training, Refresher Training, Program Specific Training, Report Training, Chronic Homeless Definition Training, System Performance Measures Training, Point in Time Training.

2. Responsible for providing and creating training materials, such as training guides.

3. Provide technical guidance on HMIS implementation to participating agencies.

4. Perform other duties as assigned.

5. Conduct annual security trainings for system users.

6. Conduct HMIS Training for new and existing HMIS Users.

7. Perform other duties as assigned.

2.3.5 HMIS SYSTEM ADMINISTRATOR

1. Oversee HMIS system performance; create database backups, triggers, and indexes.

2. Work closely with HUD and HMIS software vendor to ensure compliance.

3. Maintain contact with HMIS software vendor to ensure optimal performance.

4. Ensure the HMIS database is secure and not over capacity.

5. Identify problematic areas and conduct research to determine the best course of action to correct the data.

6. Analyze and solve issues with current and planned systems as they relate to the information and management of client data.

7. Analyze reports of data duplicates or other errors to provide ongoing appropriate interdepartmental communication and monthly or daily data reports.

8. Perform other duties as assigned.

2.3.6 HMIS DATA QUALITY ANALYST

1. Work with participating agencies to maintain accurate Housing Inventory Count within HMIS.

2. Work with HMIS Advisory Committee to devise and monitor quality benchmarks.

3. Assist in defining specifications for updates to data elements in the HMIS.

4. Assist participating agencies with performance evaluation activities.

5. Complete data analysis projects, as assigned by the HMIS Manager.

6. Fulfill external data requests as approved the HMIS Manager.

7. Provide support to system users in their use of HMIS data.

8. Perform other duties as assigned.

2.3.7 HMIS APPLICATION SUPPORT SPECIALIST

1. Manage, assign, and follow-up with tickets, using the HMIS ticketing system.

2. Provide technical assistance to system users.

3. Complete HMIS software customizations.

4. Activate and disable user accounts.

5. Assist with data monitoring within the HMIS.

6. Perform other duties as assigned.

2.4 PARTICIPATING AGENCY

2.4.1 AGENCY EXECUTIVE DIRECTOR/PROGRAM DIRECTOR

1. Sign the Contributory HMIS Organization (CHO) Agreement and submit it to the HMIS Security and Compliance Coordinator.

2. Ensure agency compliance with the terms and conditions of the CHO Agreement and HMIS Policies and Procedures.

3. Ensure personnel with access to the HMIS comply with the terms and conditions of the Security Awareness Agreement.

4. Designate one employee as the agency's HMIS Representative to serve as the primary point-of-contact on HMIS operations at the agency.

5. Designate one employee as the agency's HMIS Security Officer and notify the HMIS Security and Compliance Coordinator of this assignment.

6. Support the HMIS Leads effort to resolve HMIS data quality and compliance issues.

2.4.2 AGENCY HMIS REPRESENTATIVE

1. Ensure compliance with HMIS data collection, data entry and reporting requirements as outlined the HMIS Policies and Procedures.

2. Serve as primary point-of-contact for communication between the agency and HMIS Lead on HMIS operations.

3. Provide support on resolution of any data quality and reporting issues.

4. Identify agency personnel to access the system and receive HMIS training.

5. Sign Training Request Forms to authorize access.

6. Notify the HMIS help desk within 24 hours of relevant personnel changes to ensure system user accounts are deactivated.

2.4.3 AGENCY HMIS SECURITY OFFICER

1. Ensure compliance with the privacy and security standards as outlined in the HMIS Policies and Procedures.

2. Send a copy of the agency-specific data security policies and procedures to HMIS Security and Compliance Coordinator.

3. Send updated agency-specific data security policies and procedures to HMIS Security Officer within 30 days of any changes.

4. Ensure compliance with the agency-specific data security policies and procedures.

5. Document and investigate suspected violations of client privacy or data security policies.

6. Notify HMIS Security and Compliance Coordinator within 24 hours of receiving reports of suspected violations of client privacy and data security policies.

7. Notify HMIS Security and Compliance Coordinator of the agency's response to suspected violations of client privacy and data security policies.

2.4.4 SYSTEM END USER

1. Sign the Security Awareness Agreement electronically in HMIS.

2. Responsible for maintaining the electronic Security Awareness Agreement in HMIS.

3. Complete HMIS training and meet training objectives.

4. Comply with all HMIS agreements, policies and procedures.

5. Report suspected violations of client privacy and data security policies to the agency HMIS Security Officer.

6. Provide feedback to the HMIS Lead.

2.5 EXEMPT AGENCY

1. Utilize a comparable database to the HMIS.

2. Develop database policies and procedures that comply with federal HMIS regulations.

3. Submit policies and procedures to HMIS Security and Compliance Coordinator.

4. Ensure compliance with agency-level policies and procedures.

3. OPERATIONAL POLICIES AND PROCEDURES

3.1 HARDWARE, SOFTWARE, AND NETWORK REQUIREMENTS

Policy: The participating agency is responsible for meeting the minimum hardware, software, and network requirements to access the HMIS, and for providing the necessary maintenance for continued participation.

CaseWorthy is a web-based application that can be accessed from any desktop computer (PC or Mac). CaseWorthy does not work on mobile devices like smartphones, however does work on tablets and iPads. In order to access the HMIS, a computer must have one of the following browsers installed:

- Google Chrome 50.0 or above (Recommended)
- Firefox 40.0 or above
- Microsoft Edge

The device must also have a functioning internet connection.

3.2 SYSTEM ACCESS

3.2.1 POLICIES

•The participating agency is responsible for identifying personnel for system training and access.

•System users shall be assigned "roles" based on programmatic needs and considerations.

•The participating agency will notify H4H of any need to change "roles".

•The participating agency will notify H4H of the need to deactivate system users within 24 hours of termination of their service with the agency. Advance notification is preferred, especially in the case of agency-initiated terminations.

3.2.2 PROCEDURES TO DESIGNATE A NEW SYSTEM USER

1. The Executive Director, or the agency HMIS Representative, will submit a Training Request Form to the HMIS help desk, specifying the new user's name, email address, role and a description of HMIS-related job functions.

2. The new system user will complete the Security Awareness Agreement.

3. The HMIS help desk will coordinate new user training and system access.

Procedures (To Change User Role)

1. The Executive Director, or HMIS Representative, will submit a request to the HMIS ticketing system.

2. The HMIS Trainer will schedule the user for a Refresher Training prior to changing the user's role.

Procedures (To Deactivate a System User):

1. The Executive Director, or HMIS Representative, will submit a user deactivation request to the HMIS ticketing system.

2. The HMIS help desk will deactivate the system user.

3.3 DATA COLLECTION POLICIES

•The participating agency is responsible for understanding its HMIS compliance requirements as may be defined by various federal grant programs and funders, and fulfilling any contractual obligations, including but not limited to compliance reports.

•The participating agency is responsible for communicating these requirements to the HMIS Lead to ensure the system is properly configured to collect required data.

•The participating agency is required to collect and enter information into the HMIS as defined in the federal HMIS Data Standards Manual, specifically the Universal Data Elements (UDEs) and the Program Specific Data Elements (PDEs): https://www.hudexchange.info/resources/documents/HMIS-Data-Standards-Manual.pdf

•The participating agency will be required to collect Local Data Elements (LDEs) as defined as defined in the HMIS Data Quality Plan. Organizations and projects will be categorized into an A, B, C, or D category, which will define the required data needed to be entered into HMIS.

•The HMIS Lead must post information about LDEs and their applicability to participating agencies on H4H's HMIS support website.

•The HMIS Lead must provide training and technical assistance on Universal Data Elements (UDE)/ Project Descriptor Data Elements (PDDE).

3.4 DATA TRANSFER

3.4.1 POLICIES

•The participating agency is permitted to export data from HMIS to another system, once the agency has received approval from the HMIS Lead and CoC Lead to do so.

•The participating agency is responsible for adhering to federal, state and local privacy laws within their databases, if it transfers any client data outside of HMIS.

3.4.2 PROCEDURES

•The participating agency can request training from the HMIS Lead regarding data transfers by submitting a request to the HMIS help desk.

•The HMIS help desk will coordinate this training with the agencies.

3.5 TRAINING

3.5.1 POLICIES

•All new users are required to complete HMIS system training and security awareness training before being allowed access to the system.

•All active users are required to complete annual training on security awareness.

•All active users are required to participate in training on any updates to the system, policies or procedures, as needed.

•All users are required to sign the Security Awareness Agreement, acknowledging receipt of a copy of the privacy notice (see Section 5) and pledging to comply with the privacy notice and additional terms and conditions for HMIS access.

3.5.2 PROCEDURES

1. Only authorized agency personnel may request new user training using the following link: https://docs.google.com/forms/d/e/1FAIpQLSf9T0Yz7l54Xrwincl4LUVs1PtTNXe3-AxEYi1MmBadlCjnLg/viewform.

2. Optional and required trainings will be announced via email.

3.6 TECHNICAL ASSISTANCE

3.6.1 POLICIES

• The participating agency may request HMIS technical assistance from the HMIS Lead.

• Technical assistance is limited to the implementation and operation of HMIS for those authorized uses as defined in these HMIS Policies and Procedures.

3.6.2 PROCEDURE

• Requests for technical assistance can be submitted, through the online support ticketing system: HMIS.Support@havenforhope.org.

4. SECURITY POLICIES

4.1 PURPOSE

• These security policies are directed to ensure the confidentiality, integrity, and availability of all HMIS information; protect against any reasonably anticipated threats or hazards to security; and ensure compliance by end users.

• The Contributory HMIS Organization (CHO) Security Officer/Participating Agency Security Officer is responsible for preventing degradation of the HMIS resulting from viruses, intrusion, or other factors within the agency's control.

• The participating agency security officer is responsible for preventing inadvertent release of confidential client-specific information through physical, electronic or visual access to the workstation.

•Each participating agency security officer is responsible for ensuring it meets the Privacy and Security requirements detailed in the HUD HMIS Data and Technical Standards. Partner Agencies will conduct a thorough review of internal policies and procedures regarding HMIS.

•To promote the security of HMIS and the confidentiality of the data contained therein, access to HMIS will be available via a secure network.

•End Users shall commit to abide by the governing principles of HMIS and adhere to the terms and conditions of the HMIS Security Awareness Agreement.

•An appropriate level of HMIS access will be provided to those individuals that require access to perform their assigned duties on behalf of an HMIS Contributing Agency.

•User IDs are individual and passwords are confidential. No individual should ever use or allow use of a User ID that is not assigned to that individual, and user-specified passwords should never be shared or communicated in any format.

4.2 USER SECURITY REQUIREMENTS FOR HMIS CATEGORIES

4.2.1 CATEGORY A AND B AGENCIES

•Annual security presentation.

•Adhere to HUD 2004 data security standards.

•Designate a Security Officer for monitoring compliance. This must be updated at least annually or within 15 days of staff transition.

•Inform HMIS of deactivating accounts within 24 hours an employee leaves the agency.

4.2.2 CATEGORY C AND D AGENCIES

•Annual security presentation.

•Adhere to HUD 2004 data security standards.

•Designate a Security Officer for monitoring compliance. This must be updated at least annually or within 15 days of staff transition.

•Inform HMIS of deactivating accounts within 24 hours an employee leaves the agency.

•Must consistently login to HMIS. A user that has their HMIS Account deactivated more than 3 times or has not logged into HMIS within 30 days will have their HMIS access removed.

•Viewing only agencies will be limited to two HMIS Users.

4.3 SYSTEM APPLICABILITY

•The participating agency and HMIS Lead, including any authorized agents, must follow the security policies established in this section.

4.4 DISASTER RECOVERY PLAN

•Disaster Recovery for the San Antonio/Bexar County HMIS will be conducted by the HMIS Lead Agency, in collaboration with the HMIS vendor CaseWorthy and Haven for Hope IT department Topbox, as well as Azure.

•The Lead Security Officer should maintain ready access to the following information:

•Contact information – Phone number and email address of CaseWorthy and TopBox contacts responsible for recovering the agency's data after a disaster.

•Agency responsibilities – A thorough understanding of the agency's role in facilitating recovery from a disaster.

•All HMIS System Administrators should be aware of and trained to complete any tasks or procedures for which they are responsible in the event of a disaster.

•The HMIS System Administrator/TopBox must have a plan for restoring local computing capabilities and internet connectivity for the HMIS System Administrator's facilities. This plan should include the following provisions.

   o   Account information – Account numbers and contact information for support contracts.
   o   Minimum equipment needs – A list of the computer and network equipment required to restore minimal access to the HMIS service, and to continue providing services to HMIS participating agencies.
   o   Network and system configuration information – Documentation of the configuration settings required to restore local user accounts and internet access.

4.5 SECURITY MANAGEMENT AND COMPLIANCE, AND ANNUAL REVIEW

•The HMIS Lead is responsible for managing the selection, development, implementation, and maintenance of security measures to protect HMIS information.

•The HMIS Lead must retain copies of all contracts and agreements executed as part of the administration and management of the HMIS or otherwise required.

•The HMIS Lead must complete an annual security review to ensure the implementation of the security requirements for itself and the participating agency, using a checklist to ensure compliance with each requirement defined in this section.

4.6 SECURITY OFFICERS

•The participating agency and HMIS Lead must each designate an agency representative to serve as HMIS Security Officer to be responsible for compliance with applicable security policies (see Stakeholder Responsibilities).

4.7 HMIS LEAD SECURITY OFFICER

•May be an HMIS System Administrator or another employee, volunteer or contractor designated by the HMIS Lead Agency who has completed HMIS Privacy and Security training and is adequately skilled to assess HMIS security compliance, Assesses security measures in place prior to establishing access to HMIS for a new participating agency, Reviews and maintains file of participating agency annual compliance certification checklists, conducts annual security audit of all participating agencies. At this time, this role will be assumed by the HMIS Security and Compliance Coordinator.

4.8 CONTRIBUTORY SECURITY OFFICER/PARTICIPATING AGENCIES SECURITY OFFICER

•May be the agency's Technical Administrator or another employee within the agency, volunteer or contractor who has completed HMIS Privacy and Security training and is adequately skilled to assess HMIS security compliance,

•Conducts a security audit for any workstation that will be used for HMIS data collection or entry

•Continually ensures each workstation within the participating agency used for HMIS data collection or entry is adequately protected by a firewall and antivirus software (per Technical Safeguards – Workstation Security),

•Completes the Compliance Certification Checklist and forwards the Checklist to the HMIS Security & Compliance Coordinator.

4.9 SECURITY AUDIT

New HMIS Participating Agency Site Security Assessment

•Prior to establishing access to HMIS for a new agency, the HMIS Security & Compliance Coordinator will assess the security measures in place at the new participating agency to protect client data (see Technical Safeguards – Workstation Security). The HMIS Security & Compliance Coordinator will meet with the Agency Executive Director (or executive-level designee), agency's HMIS Technical Administrator and/or agency Security Officer to review the agency's information security protocols. This security review shall in no way reduce the agency's responsibility for information security, which is the full and complete responsibility of the Agency, its Executive Director, and its Technical Administrator/Security Officer.

4.10 PARTICIPATING AGENCY SELF-AUDIT

4.10.1 PARTICIPATING AGENCY SELF-AUDIT POLICIES

•The Participating Agency Security Officer will use the Compliance Certification Checklist to conduct security audits on their Agency workstations.

•The Participating Agency Security Officer can request HMIS logins to compare to employee time sheets during periods of remote access.

•If areas are identified that require action due to noncompliance with these standards or any element of the San Antonio/Bexar County HMIS Policies and Procedures, the participating agency security officer will note these on the Compliance Certification Checklist, and the Agency Security Officer and/or HMIS Technical Administrator will work to resolve the action item(s).

•Any Compliance Certification Checklist that includes findings of noncompliance and/or action items will not be considered valid until all action items have been resolved. The Checklist findings, action items, and resolution summary must be reviewed and signed by the participating agency Executive Director or other empowered officer prior to being forwarded to the HMIS Lead Security and Compliance Coordinator.

•The Participating Agency Security Officer must turn in a copy of the Compliance Certification Checklist to the HMIS Security & Compliance Coordinator on a quarterly basis.

4.10.2 QUARTERLY SELF-AUDIT WORKFLOW

1. HMIS Quarterly Self-Audit Sent

HMIS Security and Compliance Coordinator sends the quarterly self-audit information to the Agency Security Officer by the 3rd business day of the quarter. The Agency Security Officer will complete the Compliance Checklists and return them no later than last business day of the month.

2. HMIS Reminder

If no response by the 15th of the month, an email reminder will be sent to the Agency Security Officer on the following business day.

3. Final HMIS Reminder

If the checklists have not been returned by the deadline, the HMIS Security and Compliance Coordinator will send a follow-up email informing the Agency Security Officer of the past due self-audit. The agency will have 3 additional days to return the completed checklists.

4. SARAH Involvement

If still no response after 3 days, SARAH's Data Coordinator is notified at next HMIS Operations Meeting, which occurs every Wednesday. SARAH's Planning Manager will reach out to the project point of contact. The HMIS team is notified when this outreach takes place. If still no response, the CoC Contract will be evaluated, if one exists.

5. HMIS Advisory

As Category B, C, and D do not have CoC contracts, the decision at this point is whether the project should still be allowed HMIS access. This decision will be made by the HMIS Advisory Committee.

4.11 SECURITY AUDITS

1. The HMIS Security & Compliance Coordinator will schedule the security audit in advance with the participating agency Security Officer.

2. The HMIS Security & Compliance Coordinator will use the Compliance Certification Checklist to conduct security audits.

3. The HMIS Security & Compliance Coordinator must randomly audit workstations for each HMIS participating agency. In the event that an agency has more than 1 program site, each site must be audited.

4. Each compliance check for each computer should be noted in the compliance Checklist.

5. If areas are identified that require action due to noncompliance with these standards or any element of the San Antonio/Bexar County HMIS Policies and Procedures, the HMIS Security & Compliance Officer will note these on the Compliance Certification Checklist, and the participating agency security officer and/or technical administrator will work to resolve the action item(s).

6. Any Compliance Certification Checklist that includes 1 or more findings of noncompliance and/or action items will not be considered valid until all action items have been resolved and the Checklist findings, action items, and resolution summary has been reviewed and signed by the participating agency Executive Director or other empowered officer and forwarded to the HMIS Security & Compliance Coordinator.

4.12 SECURITY AWARENESS TRAINING

•The HMIS Lead must ensure that all system users receive security training before being given access to the system and at least annually thereafter. The HMIS Lead will maintain attendance records for all training events to assure compliance.

Physical Safeguards

In order to protect client privacy it is important that the following physical safeguards be put in place. For the purpose of this section, authorized persons will be considered only those individuals who have completed Privacy and Security training.

1. Computer Location – A computer used as an HMIS workstation must be in a secure location where only authorized persons have access. The HMIS workstation must not be accessible to clients, the public or other unauthorized participating agency's staff members or volunteers.

2. Printer location – Documents printed from HMIS must be sent to a printer in a secure location where only authorized persons have access.

3. PC Access (visual) — Non-authorized persons should not be able to see an HMIS workstation screen. Monitors should be turned away from the public or other unauthorized Partner Agency staff members or volunteers and utilize visibility filters to protect client privacy, such as privacy screens.

Technical Safeguards

Workstation Security

1. The participating agency security officer will confirm that any workstation accessing HMIS shall have antivirus software with current virus definitions and frequent full system scans. This may be verified through the agency's technical department.

2. The participating agency security officer will confirm that any workstation accessing HMIS has and uses a hardware or software firewall. This may be verified through the agency's technical department.

3. The participating agency must ensure that devices used to access the HMIS are password protected with automatic system lock out after user inactivity.

4. The participating agency must ensure that the internet connections used to access HMIS from their facilities are set up using network security protocols to prevent unauthorized access to the network and to HMIS data saved locally.

5. Due to the confidential nature of data stored within HMIS, the system must be accessed from a sufficiently private physical location so as to ensure that persons who are not authorized users of the HMIS are not able to view client level data.

Establishing HMIS User IDs and Access Levels

1. The participating agency Technical Administrator is responsible for ensuring that all agency End Users have completed mandatory trainings, including HMIS Privacy, Security training and End User Responsibilities and Workflow training, prior to being provided with a User ID to access HMIS.

2. The participating agency Technical Administrator will ensure all users are up to date with HMIS Security Awareness Agreements.

3. All End Users will be issued a unique User ID and temporary password to initially access the system, then they will need to create their own password. Sharing of User IDs and passwords by or among more than one End User is expressly prohibited. Each End User must be specifically identified as the sole holder of a User ID and password. User IDs and passwords may not be transferred from one user to another.

4. The HMIS Lead will always attempt to assign the most restrictive access that allows the End User to efficiently and effectively perform his/her assigned duties.

5. The HMIS Lead will create the new User ID and notify the User ID owner of the temporary password during HMIS New User Training.

6. When the participating agency Technical Administrator determines that it is necessary to change a user's access level, the contributory Agency Technical Administrator will notify the HMIS Team via ticketing system, so the HMIS Team may update user account as necessary.

Passwords

1. Temporary passwords must be changed on first use. User-specified passwords must be a minimum of 6 characters long and must contain at least one lowercase letter, at least one uppercase letter, at least one number, and at least one special character [!@#$%&*].

2. HMIS End users will be prompted by the software to change their password every 90 days.

3. HMIS End Users must immediately notify their participating agency technical administrator if they have reason to believe that someone else has gained access to their password as well as the HMIS Team Lead via the ticketing system.

4. Three consecutive unsuccessful attempts to login will disable the User ID for 30 minutes. For HMIS End Users, passwords should be reset by the End User by using the "Forgot Password" feature or the HMIS Lead Team via ticketing system.

5. HMIS End User must not allow their internet browser to save their HMIS password.

6. System users must not store their password in locations that are easily accessible to others (i.e. under the computer keyboard or posted near their workstation).

Rescinding User Access

1. End User access should be terminated by the HMIS Team Lead within 24 hours if an End User no longer requires access to perform his or her assigned duties due to a change of job duties or termination of employment. The contributory agency's security officer must notify the HMIS Team Lead immediately via ticketing system.

2. The HMIS System Administrator reserves the right to terminate End User licenses that are inactive for 90 days or more.

3. In the event of suspected or demonstrated noncompliance by an End User with the HMIS Security Awareness Agreement or any other HMIS plans, HMIS Policies and Procedures, HMIS Data Quality Plan the Agency Technical Administrator/Contributory Agency security officer should notify the HMIS Team Lead via ticketing system to deactivate the User ID for the End User in question until an internal agency investigation has been completed. The HMIS Lead Agency shall be notified of any substantiated incidents that may have resulted in a breach of HMIS system security and/or client confidentiality, whether or not a breach is definitively known to have occurred.

4. The HMIS System Administrator is empowered to deactivate User IDs pending further investigation if an End User's noncompliance with the HMIS End User Agreement is suspected or demonstrated.

5. The Continuum of Care is empowered to permanently revoke an Agency's access to HMIS for substantiated noncompliance with the provisions of these Security Standards, the San Antonio/Bexar County HMIS Policies and Procedures, or the Agency Privacy Statement that resulted in a release of Protected Health Information (PHI) which also encompasses Personally Identifiable Information (PII) and Personal Protected Information (PPI).

6. The HMIS Representative must submit and HMIS request to the HMIS ticketing system on behalf of a user whose account has been disabled due to inactivity, if the representative wishes to reactivate their account.

7. For accounts inactive for more than 180 days, the HMIS Representative may submit a refresher request to the HMIS help desk. These re-authorized users must attend and complete refresher training prior to reactivating their account.

8. For accounts inactive for more than 365 days, the HMIS Representative must submit a training request to the HMIS help desk. These re-authorized users must attend and complete new user training prior to reactivating their account.

Other Technical Safeguards

Most other technical safeguards for the San Antonio/Bexar County HMIS are currently implemented by the HMIS software vendor.

1. The HMIS Security and Compliance Coordinator shall develop and implement procedures for managing new, retired, and compromised HMIS account credentials.

2. The participating agency Security Officer shall develop and implement procedures that will prevent unauthorized users from connecting to private agency networks.

3. Unencrypted PPI may not be transmitted in any fashion—including sending file attachments by email or downloading reports including PPI to a personal flash drive

4. All physical documents containing PPI must be stored in a secure location.

4.13 SECURITY INCIDENTS

•The HMIS Lead must implement a policy and chain of communication for reporting and responding to security incidents.

•The participating agency and HMIS Lead will post the Privacy Notice anywhere HMIS data is collected or accessed that articulates the reporting mechanism for suspected breaches of client confidentiality. The notice will include contact information for the agency's HMIS Security Officer. The notice will include additional instructions for reporting anonymously.

•The participating agency and HMIS Lead will maintain records of all security incidents, responses and outcomes.

Reporting Security Incidents

These Security Standards and the associated San Antonio/Bexar County HMIS.

Policies and Procedures are intended to prevent—to the greatest degree possible—any security incidents. However, should a security incident occur, the following procedures should be followed in reporting:

1. Any HMIS End User who becomes aware of or suspects a compromise of HMIS system security and/or client privacy must immediately report that possible incident to their Agency Security Officer. The participating agency security officer shall inform the HMIS Security and Compliance Officer.

2. In the event of a suspected security compromise participating agency security officer should complete an internal investigation. If the suspected compromise resulted from an End User's suspected or demonstrated noncompliance with the HMIS End User Agreement, the Agency Security Officer should submit a request to the HMIS Lead to deactivate the End User's User ID until the internal investigation has been completed.

3. Following the internal investigation, the participating agency security officer shall notify the HMIS Security & Compliance Coordinator of any substantiated incidents that may have resulted in a breach of HMIS system security and/or client privacy whether or not a breach is definitively

known to have occurred. If the breach resulted from demonstrated noncompliance by an End User with the HMIS End User Agreement, the HMIS Security and Compliance Coordinator reserves the right to permanently deactivate the User ID for the End User in question.

4. Within 1 business day after the HMIS Security & Compliance Coordinator receives notice of the breach, the HMIS Security & Compliance Coordinator and participating agency security officer will jointly establish an action plan to analyze the source of the breach and actively prevent future breaches. The action plan shall be implemented as soon as possible, and the total term of the plan must not exceed 30-days.

5. If the Agency is not able to meet the terms of the action plan within the time allotted, the HMIS System Administrator, in consultation with the San Antonio/Bexar County Continuum of Care may elect to terminate the Agency's access to HMIS. The Agency may appeal to the HMIS Advisory Committee for reinstatement to HMIS following completion of the requirements of the action plan.

6. In the event of a substantiated breach of client privacy through a release of Personal Health Information (PHI) in noncompliance with the provisions of these Security Standards, the San Antonio HMIS Policies and Procedures, or the Partner Agency Privacy Statement, the Agency Security Officer will attempt to notify any impacted individual(s).

7. The HMIS Lead Agency will notify the appropriate body of the Continuum of Care of any substantiated release of PHI in noncompliance with the provisions of these Security Standards, the San Antonio/Bexar County HMIS Policies and Procedures, or the Agency Privacy Statement.

8. The HMIS Lead Agency will maintain a record of all substantiated releases of PHI in noncompliance with the provisions of these Security Standards, the San Antonio/Bexar County HMIS Policies and Procedures, or the Partner Agency Privacy Statement for 7 years.

9. The Continuum of Care reserves the right to permanently revoke an Agency's access to HMIS for substantiated noncompliance with the provisions of these Security Standards, the San Antonio/Bexar County HMIS Policies and Procedures, or the Agency Privacy Statement that resulted in a release of PHI.

4.14 SECURITY POLICY COMPLAINTS

• Complaints related to HMIS security policies and procedures will be considered using the same procedures for amending HMIS Documentation (see Section 1.5).

4.15 PROTECTED HEALTH INFORMATION STORAGE AND MANAGEMENT

• The safekeeping of clients' Personal Protected Information (PPI), which includes Protected Health Information (PHI), and Personally Identifiable Information (PII) and sensitive program information from unauthorized access, disclosure, use, or modification.

• Participating agencies and HMIS End Users are required to comply with federal, state and local confidentiality laws.

• Client information should only be searched and/or shared on a need-to-know basis.

4.15.1 ELECTRONIC DATA STORAGE AND MANAGEMENT

• System users may only store HMIS data containing PHI on devices owned by their agency.

• System users may not store HMIS data containing PHI on hard drives or removable media that can be accessed by non-system users.

• System users are responsible for safeguarding HMIS PHI that users store on agency-owned devices.

• Electronic transmission of HMIS data containing PHI will be limited to secure direct connections or, if transmitted over the internet, the data will be encrypted using a 128-bit key or transmitted using password protected files.

• The participating agency and HMIS Lead are responsible for developing additional policies and procedures for protecting electronic data from theft, loss, or unauthorized access.

• Before disposing of hard drives, USB drives, or other portable electronic media used to store PHI, the participating agency will consult with their agency HMIS Security Officer.

4.15.2 HARD COPY DATA STORAGE AND MANAGEMENT

•Hard copies of HMIS data containing PHI shall be kept in individual locked files or in rooms that are locked when not in use.

•When in use, hard copies of HMIS data containing PHI shall be maintained in such a manner as to prevent exposure of PHI to anyone other than the system user(s) directly utilizing the information.

•Employees shall not remove hard copies of HMIS data containing PHI from their agency's facilities without permission from appropriate supervisory staff unless the employee is performing a regular work function which requires the use of such records outside of the facility.

•Faxes or other printed documents containing PHI shall not be left unattended.

•Before disposing of hard copies of HMIS data containing PHI, they must be shredded.

•The participating agency is responsible for developing additional policies and procedures for protecting hard copies of HMIS data containing PHI from theft, loss, or unauthorized access.

4.15 AGENCY-SPECIFIC DATA SECURITY POLICIES AND PROCEDURES

•The participating agency may develop agency-specific data security policies and procedures that go beyond the standard polies included in this section.

•The participating agency is required to provide copies of agency-specific data security policies and procedures to the HMIS Security and Compliance Coordinator.

•The HMIS Security and Compliance Coordinator is responsible for reviewing agency-specific policies and procedures to determine if they conflict with the HMIS Policies and Procedures and resolving any conflicts.

•The participating agency is responsible for ensuring compliance with any agency-specific data security policies and procedures.

5. PRIVACY POLICIES

5.1 PURPOSE

•These privacy policies are meant to establish limitations on the collection, purpose, and use of data. It defines allowable uses and disclosures, including standards for openness, access, correction, and accountability. The policies provide protections for victims of domestic violence, dating violence, sexual assault, and stalking.

5.2 PRIVACY NOTICE

•The HMIS Lead will post a copy of the Privacy Notice on the HMIS website and will provide a copy of this document to any individual upon request.

•The participating agency must post a copy of the Privacy Notice at each workstation where client data is gathered and entered.

•The participating agency must also post a Spanish translation of the Privacy Notice, if it serves Spanish-speaking clients.

•Outreach workers inform clients about the Privacy Notice and provide a copy, if requested (including a copy of the Spanish translation, if applicable).

•The participating agency will post the Privacy Notice to its website, if one exists.

•The participating agency must state in the Privacy Notice that these privacy policies may be amended at any time and that amendments may affect information obtained by the agency before the date of the change.

•The participating agency should include in the Privacy Notice the contact information for their agency HMIS Security Officer for purposes of seeking additional information or submitting complaints.

•The participating agency must provide a copy of these Privacy Policies to anyone who requests it.

5.3 PURPOSE AND USE LIMITATIONS

•The participating agency and HMIS Lead may only collect and use HMIS data for the specific internal purposes relevant to the work of the Continuum of Care, as defined in this section. Every agency with access to Personally Identifiable Information (PII) must implement

procedures to ensure and monitor its compliance with privacy policies and may only collect information by lawful and fair means with the knowledge and consent of the individual.

Authorized Uses of HMIS Data:

•To provide or coordinate services;

•To locate programs that may be able to assist clients;

•To produce agency-level reports regarding use of services;

•To track agency-level and CoC system-level outcomes;

•For agency operational purposes, including administrative functions such as legal, audits, personnel, oversight, and management functions;

•To comply with government and other funding agency reporting requirements;

•To identify service needs in our community;

•To support CoC system-level planning;

•To conduct research for government and educational purposes;

•To monitor compliance with HMIS Policies and Procedures; and,

•To accomplish any and all other purposes deemed necessary by the CoC Board.

5.4 INTERAGENCY DATA SHARING

•All client information entered in HMIS by the participating agency is shared with the agency's system users and with the HMIS Lead.

•With client consent, all client information is shared with system users at other participating agencies for authorized uses.

•The participating agency's Executive Director/Program Director (or equivalent) is responsible for their agency's compliance with the Interagency Data Sharing policies.

5.5 CLIENT CONSENT

Policies:

•The participating agency may infer client consent to collect and enter information into HMIS from any person who seeks or receives assistance from the agency.

•All information entered into HMIS is shared between the agency's system users and with the H4H as the HMIS lead, based on this inferred client consent model.

•In order to share information with other participating agencies, the agency must seek and obtain informed client consent using the Client Release of Information (ROI) form.

•When clients consent to share information, system users at other participating agencies will have access to the client's record and case history for authorized uses.

•Informed client consent is valid until such time as the client revokes consent.

•Clients who have consented to share information with other participating agencies may revoke consent in writing at any time. This revocation may impact other agencies' access to the client record and data they have entered into the system.

•The participating agency must store physical copies of client consent documentation.

Procedures (Initial Consent):

1. Personnel from the participating agency will notify the client that the information they collect will be entered into the HMIS and will explain the purposes for collecting information in the HMIS.

2. At this time, personnel from the participating agency will explain the Release of Information form, and the clients' right to revoke data sharing in writing at any time.

3. For families, an adult client can provide consent on behalf of household members by listing them in the spaces provided on the form and initialing in front of each family member's name. Additionally, the participating agency may seek consent separately from each individual in the

household. A legal guardian (or another adult, if a guardian is not present) may sign on behalf of minors in the household.

4. The client will be provided the ROI form for review, will be explained its content, and will be asked to complete it.

5. The client must provide written consent using the ROI form as proof that they had an opportunity to review the form and have their questions answered. In the event that written consent is not feasible, a verbal or digital consent is permitted (i.e. on digital platforms, hotline, etc.), where the agency's personnel must read the privacy notice to the client before requesting the consent.

6. If the client signs the form and agrees to share information with all participating agencies, agency personnel must indicate their response in the HMIS.

7. If the client provides verbal consent, the agency personnel must indicate their response on the ROI "Verbal Consent Obtained" and retain a copy in the client's record.

8. If the client declines to share information with all participating agencies, agency personnel must ensure client indicts decision on the ROI, provide a copy to the HMIS Security and Compliance Coordinator and maintain a copy with client's documentation.

9. A copy of all completed consent forms will be kept in the client's paper file. These forms will be reviewed by the HMIS Security and Compliance Coordinator during security reviews.

Procedures (Revocation of Consent):

1. If a client presents a written request to revoke consent for information sharing in the HMIS, agency personnel must store the written request in the client's file, and must indicate their response in the HMIS.

2. If a client verbally requests to revoke consent for data sharing, agency personnel must ask the client to complete the ROI form and follow the process specified in (1) above.

3. A copy of all written ROI requests must be included in the client's paper file and uploaded in the individual's HMIS documents.

Procedure (Renewal of Consent):

If a client consents to share information after previously denying consent, agency personnel must follow the same procedures that were specified above involving the completion of the initial consent form.

5.6 ACCESS AND CORRECTION

• The participating agency must allow a client to inspect and to have a copy of any PHI about the client, and offer to explain information that the client may not understand.

• The participating agency must consider any request by a client for correction of inaccurate or incomplete PHI pertaining to that client. A participating agency is not required to remove any information but may, alternatively, mark information as inaccurate or incomplete and supplement it with additional information such as an indicator of data quality.

5.7 OTHER AUTHORIZED DATA DISCLOSURES

•Client data may be transmitted to reporting systems as mandated by agency funders.

•Other disclosures of client data to persons and organizations not authorized to view the information in the HMIS requires the client's written consent, unless the disclosure is required by law.

•Aggregated data that does not specifically identify any individual client or include PII may be shared with internal and external agents without specific permission.

5.8 ACCOUNTABILITY AND PRIVACY POLICY COMPLAINTS

•Complaints related to HMIS privacy policies and procedures will be considered using the same procedures for amending HMIS Documentation (described in Section 1.5).

•The participating agency must require each member of its staff to sign the Security Awareness Agreement.

6. QUALITY ASSURANCE POLICIES

6.1 PURPOSE

The purpose of quality assurance policies is to ensure reliable and useable data, establish expectations for participating agencies, and define quality standards.

6.2 POLICIES

•The HMIS Lead will develop a Data Quality Plan to assist participating agencies in maintaining and monitoring data quality.

•The HMIS Lead will define benchmarks and establish policies and procedures to monitor for compliance, including an enforcement mechanism for non-compliance.

•The HMIS Lead will include in the plan responsibilities for all parties.

•The participating agency must adhere to policies and procedures that ensure data meets standards for coverage, timeliness, completeness, accuracy, and consistency.

•The HMIS Lead will review the plan annually and update as needed.

6.3 STANDARDS

6.3.1 COVERAGE

The HMIS Lead seeks 100% participation in HMIS from all eligible homeless service providers and agencies within the CoC's geographic area, with a 60% minimum benchmark for both lodging (residential) and non-lodging (service-only) projects.

6.3.2 TIMELINESS

The participating agency is required to enter data into HMIS within 4 business days of client interview or interaction resulting in data collection.

6.3.3 COMPLETENESS

The participating agency is required to collect and enter data on 100% of those clients in participating projects.

6.3.4 ACCURACY

The participating agency is required to accurately represent in HMIS the information collected from clients and avoid entering misleading or knowingly false information. To accurately represent client information, the agency must follow data collection procedures.

6.3.5 CONSISTENCY

The participating agency must ensure personnel only use authorized data collection and entry procedures consistent with individual programmatic requirements.

Contributory HMIS Organization Agreement
("Agreement") For San Antonio / Bexar County
Continuum of Care
Homeless Information Management System Database
("HMIS")

HMIS is a client information system that provides a standardized assessment of the needs of those individuals that utilize social services related to homelessness ("**Clients**"), creates individualized service plans and records the use of housing and services which communities can use to determine the utilization of services of participating agencies, identify gaps in the local service continuum and develop outcome measurements. Agencies entering into HMIS must follow the HUD Data Standards, originally released in 2005 and last updated in 2019, and as revised from time to time ("**HUD Standards**") for entering in universal and program specific data elements. Haven for Hope ("**H4H**") is the HMIS lead agency and system administrator for the City of San Antonio and Bexar County.

Each agency that intends to access HMIS shall be considered a Contributory HMIS Organization ("**CHO**"). Prior to any representative of a CHO being given access to HMIS, the CHO shall sign and deliver this Agreement to H4H on an annual basis to indicate and reaffirm the CHO's responsibility to comply with the following provisions:

A. **Confidentiality.** In connection with its use of HMIS, the CHO shall comply with all relevant federal and state privacy and information security regulations and laws ("**Regulations**") that protect Clients' information ("**Client Information**") and shall only release Client Information in accordance with written consent of the Client, or as expressly permitted by the Regulations.

   1. Subject to the requirements of the Texas Public Information Act, the CHO shall comply with the HMIS Privacy and Security Standards promulgated by HUD on July 30, 2004 at 69 FR 45927 (as revised from time to time) ("**HMIS Privacy Standards**"), and also the federal confidentiality Regulations in 42 CFR Part 2 regarding disclosure of alcohol and/or drug abuse records. In general terms, these Regulations prohibit the disclosure of alcohol and/or drug abuse records unless disclosure is expressly permitted by written consent of the person to whom it pertains or is otherwise permitted by 42 CFR Part 2.

   2. The CHO shall not solicit or input information from Clients into HMIS unless it is essential to provide services; to conduct evaluations; for advocacy purposes, or as otherwise required or permitted by the HUD Standards. The CHO agrees not to release any Client Information received from HMIS to any organization or individual without the Client's express written consent (or as otherwise permitted by the Regulations). The CHO shall not enter into HMIS any data elements that are prohibited by law from being included in HMIS. However, for the purpose of avoiding duplication of individuals within HMIS, the CHO shall input universal data elements (e.g. name, date of birth, social security number) relevant to all service recipients regardless of whether information specific to the services is allowed to be input into HMIS.

3. The CHO shall ensure that all individuals affiliated with the CHO that are issued a User ID and password ("**Access Credentials**") for HMIS (each, a "**Representative**") receive basic user training provided by the H4H HMIS Department. The CHO shall ensure that its Representatives do not share Access Credentials with any other person or entity. The CHO shall inform the H4H HMIS Department as soon as possible, but no later than twenty-four (24) hours after the occurrence of any circumstances resulting in the need to deactivate a Representative's Access Credentials (e.g. if a user leaves the CHO's organization or otherwise no longer has a business need to access HMIS).

4. The CHO shall verbally explain to each Client the nature of the database prior to inputting any information into HMIS concerning the Client, and shall use reasonable efforts to obtain a written Release of Information in accordance with the HMIS Privacy Standards from each Client. The CHO will encourage Clients to participate in the collection of information.

5. The CHO shall be bound by all restrictions placed upon the data by any Client. The CHO shall diligently record in HMIS all restrictions requested. The CHO shall not knowingly enter false or misleading data under any circumstances, and shall correct any erroneous information upon becoming aware of the error.

6. If this Agreement is terminated, H4H and all other HMIS users shall continue to have the right to use all Client data previously entered into HMIS by the terminating CHO.

7. If a Client does not consent to sharing his or her information, only the Client's demographics should be entered into HMIS.

B. Use of Client Information and Data Entry.

1. The CHO shall only enter individuals in HMIS that exist as Clients within Bexar County or within other counties if required by the CHO, and the CHO has first obtained the written approval of the H4H HMIS Department.

2. The CHO shall use Client information in HMIS solely for the purpose of assisting the CHO in providing adequate and appropriate services to the Client.

3. The CHO shall consistently enter Client information into HMIS on a timely basis consistent with the HMIS Data Quality Plan as modified by the SARAH HMIS sub-committee from time to time.

C. Compliance; CHO's Indemnity; Limitation of Remedies.

1. The CHO shall ensure that its Representatives are bound by the same restrictions and conditions that apply to the CHO under this Agreement, and shall cause its Representatives to comply herewith.

2. The CHO shall use appropriate safeguards to prevent the unauthorized use or disclosure of Client Information in HMIS, and shall designate a security officer who implements information security

measures, ensures completion of Client Information privacy and security awareness training by Representatives annually, and conducts annual security reviews.

3. The CHO agrees to notify H4H as soon as possible upon becoming aware of any unauthorized access, use or disclosure of Client Information in HMIS, or any use of HMIS except as permitted by the HUD Standards.

4. **THE CHO HEREBY AGREES TO INDEMNIFY, DEFEND AND HOLD HARMLESS H4H AND ALL OTHER CHO'S (INCLUDING THEIR RESPECTIVE OFFICERS, DIRECTORS, EMPLOYEES, PROFESSIONAL ADVISORS, AND AGENTS) FROM AND AGAINST ALL DEMANDS, CLAIMS, SUITS, PROCEEDINGS, JUDGMENTS, SETTLEMENTS, ARBITRATION AWARDS, DAMAGES, LOSS, COST, EXPENSE (INCLUDING REASONABLE ATTORNEYS' FEES AND COSTS OF LITIGATION), SANCTIONS, FINES AND PENALTIES ARISING OUT OF OR RESULTING FROM ANY ACTS OR OMISSIONS OF THE CHO AND /OR ANY OF ITS REPRESENTATIVES IN VIOLATION OF THIS AGREEMENT.**

5. **NO PARTY SHALL BE LIABLE FOR ANY SPECIAL, INDIRECT, CONSEQUENTIAL OR PUNITIVE DAMAGES (INCLUDING LOSS OF PROFITS) UNDER OR IN CONNECTION WITH THIS AGREEMENT.**

D. TERMINATION; MISCELLANEOUS.

1. **EITHER PARTY MAY TERMINATE THIS AGREEMENT UPON THIRTY (30) DAYS WRITTEN NOTICE TO THE OTHER PARTY. IN ADDITION, EITHER PARTY MAY TERMINATE THIS AGREEMENT IF THE OTHER PARTY ("DEFAULTING PARTY") FAILS TO COMPLY WITH ANY OF ITS OBLIGATIONS UNDER THIS AGREEMENT AND SUCH FAILURE IS NOT CURED WITHIN SEVEN (7) DAYS AFTER THE DEFAULTING PARTY RECEIVES** a written notice of default from the other Party. Termination of this Agreement shall be without prejudice to any claims or obligations arising or accruing hereunder prior to the date of termination. Sanctions for violating this Agreement may include, in addition to any other remedies available at law or in equity, the requirement of additional training, the suspension/revocation of HMIS privileges, and the filing of criminal charges, if appropriate.

2. This Agreement may only be modified by a written amendment signed by both Parties. Waivers shall be express, written and signed by the Party bound thereby. There are no third party beneficiaries of this Agreement other than the indemnitees listed in paragraph C (4) above.

3. This Agreement shall be interpreted and enforced in accordance with the laws of the State of Texas without reference of conflicts of law's provisions. **Any dispute hereunder shall be brought exclusively in the state or federal courts located in Bexar County, Texas, and each Party agrees to waive its right to a trial by jury in any such proceeding**.

4. Notices shall be in writing and delivered by hand; facsimile, overnight courier, or certified or registered U.S. Mail, to the recipient's address below (or as modified in writing from time to time) and shall be deemed to be duly given when received on a business day (or the next following business day if the day of receipt is a non-business day).

IN WITNESS HEREOF, CHO has caused this Agreement to be executed by its duly authorized officer as of the Effective Date.

CHO Name: _____

Project Name(s): _____

By: _____

        [Signature – Must be by the CHO CEO or Executive Director]

Name: _____

Title: _____

Effective Date: _____

HMIS Contact Information:	**CHO Contact Information**:
Attn.: David Huete	Attn.: _____
1 Haven for Hope Way, TC Bldg. #3-Administration	Address: _____
San Antonio, TX 78207	_____
Facsimile: (210) 220-2122	Facsimile: _____
Email: david.huete@havenforhope.org	Email: _____
Phone: (210) 220-2352	Phone: _____
HMIS Security Officer: David Huete	Security Officer: _____
Phone: (210) 220-2352	Phone: _____

System Awareness Agreement
for the San Antonio / Bexar County Continuum of Care's Homeless Information Management System

HMIS is a client information system used to assess the needs of those individuals that utilize social services related to homelessness ("clients"), creates individualized service plans and records the use of housing and services, which communities can use to understand the utilization of services, identify gaps in the local service continuum and develop outcome measurements. Participating agencies and their system users must comply with the *HMIS Policies and Procedures*. Haven for Hope ("H4H") is the HMIS Lead Agency and serves as system administrator for San Antonio / Bexar County Continuum of Care ("CoC").

A. Confidentiality

I understand that I will be allowed access to confidential information and/or records in order to perform my specific job duties. I further understand and agree that I am not to disclose confidential information and/or records without the prior consent of the appropriate authority(s).

I understand that my User ID and Password to HMIS are issued for my use alone. I further understand that I am solely responsible for all information obtained, through system access, using my unique identification. At no time will I allow any other person to use of my account to access to HMIS. I understand that accessing or releasing confidential information and/or records, or causing confidential information and/or records to be accessed or released, on myself, other individuals, clients, relatives, etc., outside the scope of my assigned job duties would constitute a violation of this agreement. I understand my supervisor will be notified immediately of any violation and disciplinary action will be taken, up to termination of employment.

B. User Responsibilities
Users shall enter accurate, complete and timely data in accordance with the HMIS Policies and Procedures. **Please read each statement below and <u>sign your initials</u> to indicate you understand and accept the terms**.

____ My user ID and password are for my use only and must not be shared with anyone.

____ I will take reasonable measures to keep my password secure.

____ I understand that the only authorized users can view information in the system and the clients to whom the information pertains.

___ I will only access and use information that is necessary to perform my job.

___ If I am logged into the system and must leave my computer, I will first log out.

___ Any hard copies of electronic records will be kept in a secure file.

___ When hard copies are no longer needed, I will ensure they are properly destroyed.

___ If I notice or suspect a security breach or abuse of client confidentiality, I will immediately notify my HMIS Site Administrator or the HMIS System Administrator.

By affixing my signature to this document I acknowledge that I have been apprised of the relevant laws, concerning access, use, maintenance, and disclosure of confidential information and/or records which shall be made available to me through my use of the HMIS.

I further agree that it is my responsibility to assure the confidentiality of all information, which has been issued to me in confidence, even after my access to HMIS has ended. Pursuant to this agreement I certify that I have read and understand the laws concerning confidential information and/or records.

By signing the System Confidentiality and Use Agreement, you agree to comply with these terms and conditions. Failure to uphold these terms may result in loss of access or privileges.

USER NAME [PRINT]	DATE	AGENCY REPRESENTATIVE NAME [PRINT]	DATE

USER SIGNATURE	DATE	AGENCY REPRESENTATIVE SIGNATURE	DATE

Privacy Notice
for the San Antonio / Bexar County Continuum of Care's Homeless Information Management System

The U.S. Department of Housing and Urban Development (HUD) requires that each jurisdiction that receives funding from HUD have a Homeless Management Information System (HMIS) in place. This agency participates in the San Antonio / Bexar County HMIS administered by Haven for Hope (H4H), an electronic data collection system that stores information about the men, women, and children who access homeless and other human services in a community. The purpose of HMIS is to assist in determining your needs and to evaluate the effectiveness of services provided.

We only collect information that is needed to provide you services, or that we consider relevant to helping us understand the scope and dimensions of homelessness in order to design effective service delivery. We do not disclose your information without written consent, except when required by our funders or by law, or for specific administrative or research purposes outlined in our HMIS Privacy Policies. By requesting information and accepting services from this agency, you give consent for us to enter your information into the HMIS.

The collection and disclosure of all personal information is guided by strict security standards. You have the right to see your personal information collected by this partner agency and request changes if incorrect. A full copy of our agency's HMIS Privacy Policies is available upon request for your review.

Client Release of Information
for the San Antonio / Bexar County Continuum of Care's Homeless Information Management System

To provide you with the most effective and efficient service, we must collect relevant data for our Homeless Management Information System (HMIS). This secure and confidential database operated by trained representatives allows service providers to work together with you to make sure you are receiving the assistance you need in a timely manner. Beyond that, the HMIS allows the CoC to get an accurate count of all individuals experiencing homelessness or who are at risk of homelessness in San Antonio/Bexar County. To help us improve our current service system, coordinate services, and make plans for new services, we need to collect your personally identifiable information (PII). To better coordinate with other service providers, you have the right to consent to release your information to these other service providers.

Please review the information below and sign and date where indicated. *[Note to staff, if working with a family, please complete the back of this form as well].*

I understand and agree that this service provider will enter my information into the Homeless Management Information System (HMIS). The information I have provided is true and correct. I understand that my information may be shared among local service providers for the purpose of connecting me to services.

I understand that information about me that is in HMIS may be used by the service provider and the San Antonio / Bexar County Continuum of Care, including but not limited to, to conduct research and develop reports related to homelessness and housing programs, coordination of care, housing, service needs, income supports, education and employment, and program effectiveness. I authorize the collection of information, including PII, about the services provided to me and for this information to be included and shared with service providers in HMIS. I further understand that some of the information collected and shared may include records that are considered Protected Health Information under the Health Insurance Portability and Accountability Act (HIPAA). I understand that should I no longer want my information collected and shared, I may withdraw my consent in writing at any time by contacting: [Insert email address for Agency Security Officer]. Any information shared or collected prior to withdraw of consent cannot be revoked.

An agency representative has answered my questions about my privacy concerns. By signing this release form, I fully understand and agree to the above terms and conditions.

_____   _____
CLIENT NAME [PRINT]   DATE   CLIENT SIGNATURE   DATE

AUTHORIZED PERSONNEL NAME   DATE   AUTHORIZED SIGNATURE   DATE
[PRINT]

Client Consent on Behalf of Household Members
An adult head of household may provide consent on behalf of family members to share their information in the HMIS.

_____   _____
FAMILY MEMBER NAME 1   HEAD OF HOUSEHOLD
[PRINT]   [INITIALS]

_____   _____
FAMILY MEMBER NAME 1   HEAD OF HOUSEHOLD
[PRINT]   [INITIALS]

_____   _____
FAMILY MEMBER NAME 2   HEAD OF HOUSEHOLD
[PRINT]   [INITIALS]

_____   _____
FAMILY MEMBER NAME 3   HEAD OF HOUSEHOLD
[PRINT]   [INITIALS]

_____   _____
FAMILY MEMBER NAME 4   HEAD OF HOUSEHOLD
[PRINT]   [INITIALS]

_____   _____
FAMILY MEMBER NAME 5   HEAD OF HOUSEHOLD
[PRINT]   [INITIALS]

_____   _____
FAMILY MEMBER NAME 6   HEAD OF HOUSEHOLD
[PRINT]   [INITIALS]

_____   _____
FAMILY MEMBER NAME 7   HEAD OF HOUSEHOLD
[PRINT]   [INITIALS]

4100 E. Piedras Drive, San Antonio, Texas 78228

Homeless Management Information System (HMIS) Data Quality Plan

Approved: June 2020

San Antonio / Bexar County Continuum of Care

Developed by: HMIS Lead Agency and SARAH

Approved by: Continuum of Care Board of Directors and the

HMIS Advisory Committee

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INTRODUCTION

This document describes the Homeless Management System (HMIS) data quality plan for the South Alamo Regional Alliance for the Homeless (SARAH), San Antonio/Bexar County's Continuum of Care (CoC). HMIS is a locally administered electronic system that stores client-level information about persons who access homeless services in a community. This document includes a Data Quality Plan and protocols for ongoing data quality monitoring that meet requirements set forth by the Department of Housing and Urban Development (HUD). It is developed by the HMIS Administrator (Haven for Hope), the CoC in coordination with SARAH's HMIS Advisory Committee, and community service providers. This HMIS Data Quality Plan is to be updated annually, considering the latest HMIS data standards and locally developed Data Quality Thresholds.

HMIS DATA AND TECHNICAL STANDARDS

Each CoC receiving HUD funding is required to implement and participate in HMIS to capture standardized data about all persons accessing homeless assistance in the area. The HMIS complies with HUD's official data and technical standards published on HUD's Resource Exchange.

In 2010, the U.S. Interagency Council on Homelessness (USICH) affirmed HMIS as the official method of measuring outcomes for homelessness in *Opening Doors: Federal Strategic Plan to Prevent and End Homelessness*. Various federal partners use HMIS data for contract reporting, including:

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

The 2020 Data Standards were implemented in October 2019. The standards identify Universal Data Elements and Program-Specific Data Elements that are required of all homeless programs participating in the HMIS. For further reference, please review the requirements at: https://www.hudexchange.info/resource/3824/hmis-data-dictionary/

WHAT IS DATA QUALITY?

Data quality is the reliability and validity of client-level data collected. High quality data accurately reflects client information and helps case managers determine appropriate services. Data quality is measured by several factors such as **timeliness**, **completeness**, and **accuracy**. For System Performance Measurements, HUD's expectation is that HMIS data be complete and accurate dating back to October 1, 2012.

WHAT IS A DATA QUALITY PLAN?

A data quality plan is a community-level document that assists the CoC in achieving statistically valid and reliable data. The plan sets expectations for both the community and the end users, as well as:

→ Establishes specific data quality benchmarks for timeliness, completeness, accuracy, and consistency; Identifies the responsibilities of all parties within the CoC with respect to data quality;
→ Establishes a timeframe for monitoring data quality on a regular basis.

WHAT IS A DATA QUALITY MONITORING PLAN?

A data quality monitoring plan is a set of procedures that outlines a regular, on-going process for analyzing and reporting on the reliability and validity of the data entered into the HMIS at both the program and aggregate system levels. This plan includes roles and responsibilities for the CoC, the HMIS Administrator, and the HMIS Advisory Committee.

WHAT ARE THE HMIS ORGANIZATIONAL CATEGORIES AND CRITERIA?

The HMIS organizational categories and criteria chart identifies each project and organization as an A, B, C, or D category.

	A	B	C	D
Funding Source	Federally Funded	Not federally funded, but data is used for federal reporting	Not federally funded and data is not used for federal reporting	Not federally funded and data is not used for federal reporting
Project Participation	Participates in a HUD priority project type*	Participates in a HUD priority project type	Not participating in a HUD priority project type	Not participating in a HUD priority project type
Homeless Eligibility Criteria	Serve at least one of HUD's Homeless Categories**	Serve at least one of HUD's Homeless Categories	Does not need to serve HUD's Homeless Categories	Does not need to serve HUD's Homeless Categories
Data Access	Ability to Enter New Client Profiles and Edit Existing Information	Ability to Enter New Client Profiles and Edit Existing Information	Ability to Enter New Client Profiles and Edit Existing Information	View Only; Data View is Limited
Organizational Criteria	**Mission**: Serve persons experiencing homelessness or at risk of homelessness is identified as an organizational priority. **Services**: Housing, Supportive Services, Shelter, Healthcare, Access to Services through Coordinated Entry			

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- **Service Delivery**: Provide services or support for persons experiencing homelessness with the intent to improve continuity of care. Category C and D projects must be co-located with homeless services provider.
- **Status**: Non-profit 501(c)(3), government entity, or healthcare provider
- **Email**: Users must have an organizational email
- **Security/Privacy**: Organization must designate a security officer to protect client data
- **Data Quality**: All except Category D must identify at least one individual that will respond to data quality reports sent monthly by the HMIS team.

</td></tr>
</table>

* HUD's priority project types are: Prevention, Street Outreach, Shelter (Emergency Shelter and/or Transitional Housing, and Housing (Rapid Re-Housing, Voucher Programs, Permanent Supportive Housing)

** HUD's four categories of homelessness are: (1) Literally Homeless (2) Imminent Risk of Homelessness (3) Homeless Under other Federal Statute (4) Fleeing/attempting to flee domestic violence

DATA ENTRY EXPECTATIONS

UNIVERSAL DATA ELEMENTS (UDES)

The UDEs are baseline data collection elements required for **all** projects entering data into the HMIS. HMIS categories A, B, and C are required to input the following UDEs:

- → Name
- → Social Security Number
- → Date of Birth
- → Race
- → Ethnicity
- → Gender
- → Veteran Status

- → Universal Project Stay Elements (One or More Values per Client or Household Project Stay)
- → Disabling Condition
- → Project Start Date
- → Project Exit Date
- → Exit Destination

→ Relationship to Head of Household
→ Client Location

→ Housing Move-In Date
→ Prior Living Situation

PROGRAM SPECIFIC DATA ELEMENTS (PDES)

Program Specific Data Elements (PDEs) differ from the Universal Data Elements (UDEs) in that no one project must collect every single element in this section. Required data elements are dictated by the reporting requirements set forth by each Federal partner for the projects they fund. A Partner may require all or a selection of the fields or response categories. Data Quality Thresholds are included in Appendix C of the Data Quality Plan outlining required data elements and thresholds for each Federal partner. Category A and B projects are required to collect PDEs. HMIS PDEs include:

→ Income and Sources
→ Non-Cash Benefits
→ Health Insurance
→ Physical Disability
→ Developmental Disability
→ Chronic Health Condition
→ HIV/AIDS
→ Mental Health
→ Substance Abuse
→ Domestic Violence
→ Current living situation
→ Date of Engagement
→ Coordinated Entry Assessment
→ Coordinated Entry Event
→ Bed-night Date

4100 E. Piedras Drive, San Antonio, Texas 78228

BENCHMARKS AND GOALS

TIMELINESS

Timeliness refers to necessary client information being entered into HMIS within a reasonable period of time. When data is entered in a timely manner, it can reduce human error due to too much time between data collection and data entry. Relying on notes or memory of a conversation can lead to incorrect or incomplete data entry. Timely data entry also makes information more accessible for the entire CoC. There is a Timeliness Report that agencies can use under "Data Quality Reports" in the HMIS Administration section to monitor the timeliness of data entry for entry into a project and exit from a project.
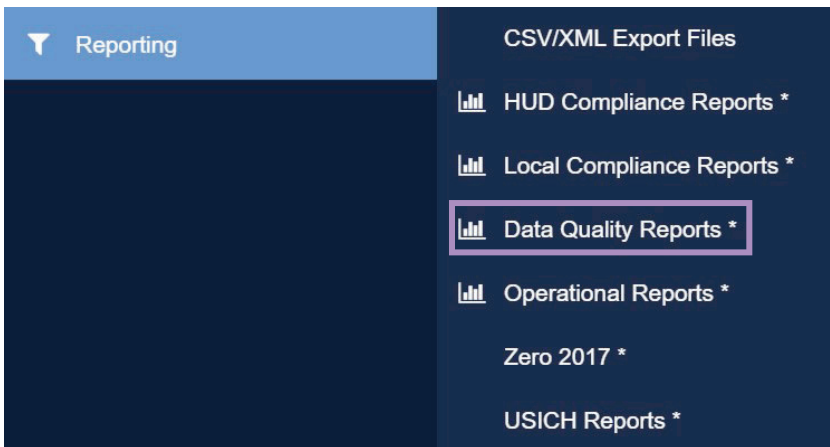
Timeliness is measured by comparing the enrollment member begin/end date to the assessment entry/exit created date. Timeliness cannot be edited, only improved going forward. Assessment information dates should match the date the client interview occurred. Each type of project has different expectations on timely data entry.

Data entry timeframe by project type:

- **Emergency Shelter**: Universal Data Elements and Housing Project Entry/Project Exit must be entered within **4** calendar days.

- **Transitional Housing:** Universal Data, Program-Specific Data, and Housing Check- In/Check-Out must be entered within **4** calendar days.
- **Permanent Housing:** Universal Data, Program-Specific Data, and Housing Check- In/Check-Out must be entered within **4** calendar days.
- **Rapid Re-Housing:** Universal and Program-Specific Data Elements must be entered within **4** calendar days.
- **Prevention projects**: Universal and Program-Specific Data Elements must be entered within **4** calendar days.
- **Supportive Services Only (including SSVF and safe sleeping) projects**: Universal and Program-Specific Data Elements must be entered within **4** calendar days.
- **Outreach Projects**: Limited data elements must be entered within **4** calendar days of the first outreach encounter. Universal Data Elements should be collected upon engagement in services.

HOUSING MOVE-IN DATE

The housing move-in date captures the move-in date at an "Occurrence Point." This was added as a one-time field to capture this date at the time of move-in. This means that the move-in date must be entered if/when a household moves into any type of permanent housing, regardless of funding source or whether the project is providing the rental assistance. The move-in date must be between the Project Start Date and Project Exit Date and may be the same date as Project Start if the client moves into housing on the date they were accepted into the program.

ANNUAL ASSESSMENT DATE

Annual assessments that are required for collection must be entered and completed with created date of no more than 30 days before or after the anniversary of the head of household's Project Start Date. Information must be accurate as of the created date and must be completed. The annual assessment must include updating both the head of household's information and any other family member associated with the enrollment at the same time.

The data included in these updates impact the CoC's System Performance Measures which contribute to HUD's scoring process to determine local funding levels. As such, organizations in the A Category are required to conduct these assessments and those in the B Category are strongly encouraged to do so as well.

COMPLETENESS

Completeness refers to entry of all clients served by an organization's project , as well as all necessary data elements.

Complete data is the key to assisting clients in finding the right services and benefits to end their homelessness. Incomplete data may hinder an organization's ability to provide comprehensive care to the clients it serves. Incomplete data can also negatively impact SARAH's ability to make generalizations of the population it serves, track patterns in client information and changes within the homeless population, and adapt strategies appropriately. HMIS data quality is also part of funding applications, including CoC and ESG funding. Low HMIS data quality scores may impact, and could result in denial of future funding requests.

SARAH's goal is to collect 100% of all universal data elements. Therefore, the HMIS Advisory Committee, with the CoC Board's approval, has established Data Quality Thresholds (see Table 1 through 7, Appendix C). The Data Quality Thresholds set an acceptable range of "null/not collected", and "client doesn't know/client refused" responses, depending on the data element. To determine compliance, percentages will be rounded (example: .04% becomes 0%).

All programs using the HMIS shall enter data on one hundred percent (100%) of the clients they serve. It is important to note that this includes all required elements and assessments for each member of a household. These standards will be reviewed and revised annually to make sure the thresholds are reasonable.

BED/UNIT UTILIZATION RATES

One of the primary features of an HMIS is the ability to record the number of client stays or bed nights at a homeless residential facility. Case managers or shelter staff enter a client into the HMIS and assign them to a bed and/or a unit. The client remains there until he or she exits the program. When the client exits the project, they are also exited from the bed or unit in the HMIS. All shelters and housing units funded by the CoC must use the bed check-in software in HMIS. Bed/unit utilization will be determined based on bed check-ins and by project enrollment dates.

A bed night record has indicated that the client has utilized a bed in a shelter on that date. "There must be a record of a bed night on the Project Start Date into a night-by-night shelter; any additional bed night dates must be after the Project Start Date and before the Project Exit Date." (HMIS Data Standards Manual, 2020

Acceptable range of bed/unit utilization rates for established projects:

→ Emergency Shelters: 65%-105%
→ Transitional Housing: 65%-105%
→ Permanent Supportive Housing: 65%-105%

The CoC recognizes that new projects may require time to reach the projected occupancy numbers and will not expect them to meet the utilization rate requirement during the first six months of operating.

ACCURACY

Accuracy refers to reflecting true client information and ensuring necessary data elements are consistently recorded.

The best way to measure accuracy of client data is to compare the HMIS information with more accurate sources, such as a social security card, birth certificate, or driver's license. To ensure the most up-to-date and complete data, data entry errors should be corrected on a monthly basis.

As a general rule, it is a better practice to select "client doesn't know/refused" than to misrepresent the population. Do not enter invalid data (such as "111-11-1111", or "123-45-6789" for SSN) to render data completeness as this will not be counted.

DATA CONSISTENCY

Consistent data collection helps promote accuracy. All data in HMIS should be collected and entered in a common and consistent manner across all programs. To that end, all intake and data entry workers will complete an initial training before accessing the live HMIS system, and access additional training opportunities offered by the HMIS Lead.

The HMIS staff may check data accuracy and consistency by running reports that check for entry errors such as duplicate files created, overlapping enrollments or inconsistent assessment responses. The HMIS team

also reserves the right to provide HMIS client identification numbers to the CoC for their program auditing or monitoring purposes.

All users are recommended to use the HMIS training environment to practice data entry or test any functionality. The training environment does not affect the live database and does not save any data that is inputted. The link to the training environment is as follows: https://hmis.havenforhope.org/HavenForHope_training.ecm

DATA QUALITY MONITORING PLAN

ROLES AND RESPONSIBILITIES

For a detailed outline of the roles and responsibilities of SARAH, the CoC Board of Directors, HMIS Lead (Haven for Hope), and HMIS Advisory Committee see the "HMIS Governance Charter" available at www.sarahomeless.org.

MONITORING WORKFLOWS

Category A Projects

1. HMIS Data Quality Reports
HMIS Data Quality Analyst sends monthly Data Quality Reports to project's point of contact by the 5th of the month. Project's point of contact must acknowledge recipt by the 10th. Data corrections must be made by the 15th and reported to HMIS.

2. HMIS Reminder
If no response by the 15th of the month, an email reminder sent will be sent on the following business day. Project staff have 3 additional business days after this reminder to make corrections.

3. SARAH Involvement
If still no response after 3 days, SARAH's Data Coordinator is notified at next HMIS Operations Meeting, which occurs every Wednesday. SARAH's Planning Manager will reach out to the project point of contact. The HMIS team is notified when this outreach takes place. If still no response, the information is referred to the Planning Manager's supervisor.

4. Leadership Involvement

If there is still no response, SARAH's Executive Director will reach out to the project agency's CEO/ED to evaluate CoC Contract.

Category B & C Projects

1. HMIS Data Quality Reports
HMIS Data Quality Analyst sends monthly Data Quality Reports to project's point of contact by the 5th of the month. Project's point of contact must acknowledge recipt by the 10th. Data corrections must be made by the 15th and reported to HMIS.

2. HMIS Reminder
If no response by the 15th of the month, an email reminder sent will be sent on the following business day. Project staff have 3 additional business days after this reminder to make corrections.

3. SARAH Involvement
If still no response after 3 days, SARAH's Data Coordinator is notified at next HMIS Operations Meeting, which occurs every Wednesday. SARAH's Planning Manager will reach out to the project point of contact. The HMIS team is notified when this outreach takes place. If still no response, the information is referred to the Planning Manager's supervisor.

4. Leadership Involvement
If there is still no response, SARAH's Executive Director will reach out to the project agency's CEO/ED to evaluate CoC Contract.

5. HMIS Advisory
As Category B and C agencies do not have CoC contracts, the decision at this point is whether the project should still be allowed HMIS access. This decision will be made by the HMIS Advisory Committee.

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APPENDICES

APPENDIX A: SUGGESTIONS FOR ACCURACY

→ Attend regular trainings sponsored by the Haven for Hope HMIS team.

  ✓ You may request training online through the virtual helpdesk at HMIS.support@havenforhope.org. See types of trainings below in the "HMIS Lead Agency" section of this plan.

→ Read through the training guide posted online as needed.

  ✓ An up-to-date training guide is available in HMIS under the "My Stuff" tab (see screenshot below. This guide covers most sections within HMIS and can be a helpful tool to ensure data is entered accurately.
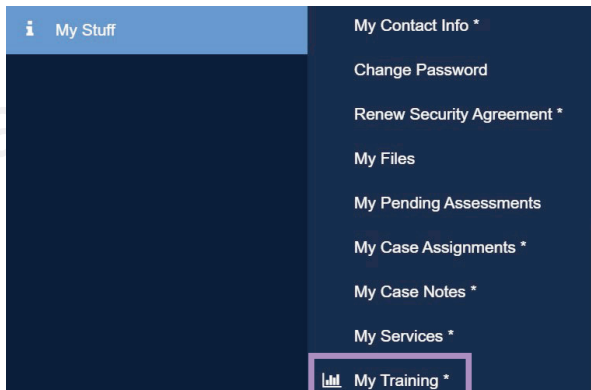
→ Maintain a personal Data Quality Log

  ✓ As you find data quality issues, keep a log of information. Issues might include duplicate files or incorrect demographic information. If you are not sure how to correct a data entry mistake, **please submit a service request online**. The virtual helpdesk can be accessed at HMIS.support@havenforhope.org.

→ Maintain uniform data collection techniques. Some examples include:

  ✓ No numerals in name fields (except Suffix)

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✓ Use age only if date of birth is unknown. Spot-check data entered monthly and compare to paper documents.

✓ If a copy of an official document is obtained, compare those with the responses within HMIS to perform data quality checks on intake staff.

✓ Only restrict client information if the client refuses to share information in HMIS. Please do not restrict all client profiles as this creates an influx of duplicate records.

✓ Have a document explaining your individual intake forms.

✓ Have a document available to all intake/data entry staff that includes explanations on all questions covered on intake forms. HUD offers examples on the HUD Exchange.

✓ Work with intake specialists on interviewing techniques and wording of questions.

✓ Regular training of intake staff to improve on interviewing techniques and wording of questions can assist in increasing consistency of data quality.

→ Review HUD's HMIS Data Standards.

✓ Version 1.5 of the 2020 HMIS Data Standards, Released October 2019 are available online at www.hudexchange.info. This resource includes information on required data elements, when they should be captured (at entry or exit), and which types of programs are responsible for capturing them. Make sure your programs are meeting HUD's baseline compliance requirements.

→ Ensure agency data is only updated for your organization's projects and enrollments.

✓ It is imperative that end users refrain from entering and altering existing data on enrollments or projects from other organizations. Only update or complete data entry corrections on your assigned HMIS project and enrollment.

APPENDIX B: RESOURCES

HMIS Data Dictionary: https://www.hudexchange.info/resource/3824/hmis-data-dictionary/

HMIS Data and Technical Standards: https://www.hudexchange.info/programs/hmis/hmis-guides/#hmis-data-and-technical-standards

HUD Data Quality Brief: https://www.hudexchange.info/resources/documents/coc-data-quality-brief.pdf

Data Quality and Analysis for System Performance Improvement Brief: https://www.hudexchange.info/resources/documents/Data-Quality-and-Analysis-for-System-Performance-Improvement-Brief.pdf

Homeless Definitions: https://www.hudexchange.info/resources/documents/HomelessDefinition_RecordkeepingRequirementsandCriteria.pdf

Homeless Resource Exchange. U.S. Department of Housing and Urban Development.https://www.hudexchange.info/resources/documents/DataQualityMonitoringPlan_Handout.pdf

Department of VA. U.S. Department of Veterans Affairs: http://www.va.gov/

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APPENDIX C: CLARIFYING DEFINTIONS

The following definitions come from the September 2020 HMIS Data Standards Manual

→ **Veteran Status:** Anyone who has ever been on active duty in the armed forces of the United States, regardless of discharge status or length of service. Army, Navy, Air Force, Marine Corps, and Coast Guard: active duty begins when a military member reports to a duty station after completion of training. Reserves and National Guard: active duty is any time spent activated or deployed, either in the United States or abroad. Or Anyone who was disabled in the line of duty during a period of active duty training. Or Anyone who was disabled from an injury incurred in the line of duty or from acute myocardial infarction, a cardiac arrest, or a cerebrovascular accident during a period of inactive duty training.. Please see further details as outlined in the HMIS Data Standards Manual.

→ **Disabling Condition:** A physical, mental, or emotional impairment, including an impairment caused by alcohol or drug abuse, post-traumatic stress disorder, or brain injury. Please see further details as outlined in the HMIS Data Standards Manual.

APPENDIX D: DATA COLLECTION INSTRUCTIONS

→ **Veteran Status:** An HMIS should only have one record of Veteran Status for each client, no matter how many enrollments they have. When enrolling a client who already has a record in the HMIS, verify that the veteran status recorded is accurate and correct it if it is not.

→ **Disabling Condition:** There should be one and only one value for Disabling Condition for each project stay. If the status changes over the course of the project stay, or the information was recorded incorrectly at the time of the project start, correct the record.

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APPENDIX E: DEFINING HOMELESSNESS

The below categories were obtained from the HUD Exchange resources and documents HomelessDefinition_RecordkeepingrequirementsandCriteria.pdf

CATEGORY 1 – LITERALLY HOMELESS

1. Individual or family who lacks a fixed, regular, and adequate nighttime residence, meaning:

    i.   Has a primary nighttime residence that is a public or private place not meant for human habitation;

    ii. Is living in a publicly or privately operated shelter designated to provide temporary living arrangements (including congregate shelters, transitional housing, and hotels and motels paid for by charitable organizations or by federal, state and local government programs); or

    iii. Is exiting an institution where (s)he has resided for 90 days or less and who resided in an emergency shelter or place not meant for habitation immediately before entering that institution

CATEGORY 2 – IMMINENT RISK OF HOMELESSNESS

2. Individual or family who will imminently lose their primary nighttime residence, provided that:

    i.   Residence will be lost within 14 days of the date of application for homeless assistance;

    ii. No subsequent residence has been identified; and

    iii. The individual or family lacks the resource or support networks needed to obtain other permanent housing

CATEGORY 3 – HOMELESS UNDER OTHER FEDERAL STATUTES

3. Unaccompanied youth under 25 years of age, or families with children and youth, who do not otherwise qualify as homeless under this definition, but who:

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i.   Are Defined as homeless under the other listed federal statutes;

ii. Have not had a lease, ownership interest, or occupancy agreement in permanent housing during the 60 days prior to the homeless assistance application;

iii. Have experienced persistent instability as measured by two moves or more during in the preceding 60 days; and

iv. Can be expected to continue in such status for an extended period of time due to special needs or barriers

CATEGORY 4 – FLEEING/ATTEMPTING TO FLEE DV

4. Any individual or family who:

i.   Is fleeing; or is attempting to flee, domestic violence;

ii. Has no other residence; and

iii. Lacks the resources or support networks to obtain other permanent housing

CHRONIC HOMELESSNESS

Chronic Homelessness is defined as some who has experience homelessness for a year or longer, or who has experienced at least four episodes of homeless in the last three years (must be cumulative of 12 months), and has a disability.

Remember: Occasions are separated by a break of a least seven nights. Stays in institutions of fewer than 90 days do not constitute a break. Breaks can be documented by self-report.

Below is a link of HUD's definition of Chronic Homelessness:

https://www.havenforhope.org/downloads/HMIS/HUDs-Definition-of-Chronic-Homelessness.pdf

South Alamo Regional Alliance for the Homeless

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APPENDIX F: UNIVERSAL DATA QUALITY THRESHOLDS FY 2020

Project Type	Universal Thresholds									
	Requirements	ES, Day Shelters		TH, PSH, SH, OPH		Prev/RRH		Street Outreach		SSO/Other Homeless Assistance Provider	
Universal Data Element	All Clients, Adults, or HoH	Acceptable % Null/Not Collected	Acceptable % Client Doesn't Know/Refused	Acceptable % Null/Not Collected	Acceptable % Client Doesn't Know/Refused	Acceptable % Null/Not Collected	Acceptable % Client Doesn't Know/Refused	Acceptable % Null/Not Collected	Acceptable % Client Doesn't Know/Refused	Acceptable % Null/Not Collected	Acceptable % Client Doesn't Know/Refused
Demographics											
Name	All	0%	0%	0%	0%	0%	0%	1%	10%	0%	0%
Social Security Number	All	0%	2%	0%	1%	0%	2%	1%	10%	0%	3%
Date of Birth	All	0%	0%	0%	0%	0%	0%	1%	10%	0%	0%
Race	All	0%	2%	0%	1%	0%	2%	1%	5%	0%	3%
Ethnicity	All	0%	2%	0%	1%	0%	2%	1%	5%	0%	3%
Gender	All	0%	0%	0%	0%	0%	0%	1%	5%	0%	0%
Veteran Status	Adults	0%	2%	0%	1%	0%	2%	1%	5%	0%	3%
Disabling Condition	All	0%	2%	0%	1%	0%	2%	1%	5%	0%	2%
Prior Living Situation	HoH & Adults	0%	2%	0%	1%	0%	0%	1%	5%	0%	2%
Living Situation A	HoH & Adults	0%	2%	0%	1%	0%	0%	1%	5%	0%	2%
Living Situation B	HoH & Adults	0%	2%	0%	1%	0%	0%	1%	5%	0%	2%
Project Start Date	All	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%
Project Exit Date	All	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%
Destination	All	0%	1%	2%	1%	5%	2%	5%	5%	0%	1%
Relationship to Head of Household	All	0%	0%	0%	0%	0%	0%	10%	10%	0%	1%
Client Location	HoH	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%
Housing Move-In Date	HoH	N/A	N/A	0%	0%	0%	0%	N/A	N/A	N/A	N/A

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APPENDIX G: PROGRAM SPECIFIC-RHY DATA QUALITY THRESHOLDS

Program Specific		RHY	
	Requirement	ES	TLP
Data Elements	All Clients, Adults, or HoH	Acceptable % Null/Not Collected/Client Doesn't Know/Refused	Acceptable % Null/Not Collected/Client Doesn't Know/Refused
Income and Sources	HoH and Adults	N/A	5%
Non-Cash Benefits	HoH and Adults	N/A	5%
Health Insurance	All	5%	5%
Physical Disability	All	5%	5%
Developmental Disability	All	5%	5%
Chronic Health Condition	All	5%	5%
Mental Health Problem	All	5%	5%
Substance Abuse	All	5%	5%
Provided- Referral Source	HoH and Adults	5%	5%
RHY: BCP Status	All	5%	N/A
Sexual Orientation	HoH and Adults	5%	5%
Last Grade Completed	HoH and Adults	5%	5%
School Status	HoH and Adults	5%	5%
Employment Status	HoH and Adults	5%	5%
General Health Status	HoH and Adults	5%	5%
Dental Health Status	HoH and Adults	5%	5%
Mental Health Status	HoH and Adults	5%	5%
Pregnancy Status	Female-HoH, Adults	5%	5%
Formerly a Ward of Child Warfare/Foster Care Agency	HoH and Adults	5%	5%
Formerly a Ward of Juvenile Justice System	HoH and Adults	5%	5%
Family Critical Issues	HoH and Adults	5%	5%
RHY Service Connections	HoH and Adults	5%	5%
Commercial Sexual Exploitation/Sex Trafficking	HoH and Adults	5%	5%
Labor Exploitation/Trafficking	HoH and Adults	5%	5%
Project Completion Status	HoH and Adults	5%	5%
Counseling	HoH and Adults	5%	5%
Safe & Appropriate Exit	HoH and Adults	5%	5%
Aftercare	HoH and Adults	5%	5%

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APPENDIX H: PROGRAM SPECIFIC-ESG DATA QUALITY THRESHOLDS

Program Specific		ESG		
Data Elements	Requirement All Clients, Adults, or HoH	Prevention Acceptable % Null/Not Collected/Client Doesn't Know/Refused	RRH Acceptable % Null/Not Collected/Client Doesn't Know/Refused	Street Outreach Acceptable % Null/Not Collected/Client Doesn't Know/Refused
Income and Sources	HoH and Adults	N/A	5%	5%
Non-Cash Benefits	HoH and Adults	N/A	5%	5%
Health Insurance	All	5%	5%	5%
Physical Disability	All	5%	5%	5%
Developmental Disability	All	5%	5%	5%
Chronic Health Condition	All	5%	5%	5%
HIV/AIDS	All	5%	5%	5%
Mental Health Problem	All	5%	5%	5%
Substance Abuse	All	5%	5%	5%
Domestic Violence	HoH and Adults	5%	5%	5%
Current Living Situation	HoH and Adults	N/A	N/A	5%
Date of Engagement	HoH and Adults	N/A	N/A	5%
Current Living Situation	HoH and Adults	N/A	N/A	5%
Coordinated Entry Event	HoH	2%	2%	2%

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APPENDIX I: PROGRAM SPECIFIC-PATH DATA QUALITY THRESHOLDS

Program Specific	PATH	
	Requirement	Street Outreach
Data Elements	All Clients, Adults, or HoH	Acceptable % Null/Not Collected/Client Doesn't Know/Refused
Housing Status at Entry	HoH and Adults	5%
Income and Sources	HoH and Adults	5%
Non-Cash Benefits	HoH and Adults	5%
Health Insurance	All	5%
Physical Disability	All	5%
Developmental Disability	All	5%
Chronic Health Condition	All	5%
HIV/AIDS	All	5%
Mental Health Problem	All	5%
Substance Abuse	All	5%
Current Living Situation	All	5%
Date of Engagement	HoH and Adults	5%
Service Provided-PATH Funded	HoH and Adults	5%
Referral Provided-PATH	HoH and Adults	5%
PATH Status	HoH and Adults	5%
Connection to SOAR	HoH and Adults	5%

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APPENDIX J: PROGRAM SPECIFIC-COC DATA QUALITY THRESHOLDS

Program Specific		CoC			
Data Elements	Requirement All Clients, Adults, or HoH	Prevention Acceptable % Null/Not Collected/Client Doesn't Know/Refused	PSH Acceptable % Null/Not Collected/Client Doesn't Know/Refused	RRH Acceptable % Null/Not Collected/Client Doesn't Know/Refused	TH Acceptable % Null/Not Collected/Client Doesn't Know/Refused
Income and Sources	HoH and Adults	5%	5%	5%	5%
Non-Cash Benefits	HoH and Adults	5%	5%	5%	5%
Health Insurance	All	5%	5%	5%	5%
Physical Disability	All	5%	5%	5%	5%
Developmental Disability	All	5%	5%	5%	5%
Chronic Health Condition	All	5%	5%	5%	5%
HIV/AIDS	All	5%	5%	5%	5%
Mental Health Problem	All	5%	5%	5%	5%
Substance Abuse	All	5%	5%	5%	5%
Domestic Violence	HoH and Adults	5%	5%	5%	5%
Coordinated Entry Event	HoH	2%	2%	2%	2%

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APPENDIX K: PROGRAM SPECIFIC-HOPWA DATA QUALITY THRESHOLDS

Program Specific	HOPWA		
	Requirement	PH	TH
Data Elements	All Clients, Adults, or HoH	Acceptable % Null/Not Collected/Client Doesn't Know/Refused	Acceptable % Null/Not Collected/Client Doesn't Know/Refused
Income and Sources	HoH and Adults	5%	5%
Non-Cash Benefits	HoH and Adults	5%	5%
Health Insurance	All	5%	5%
Physical Disability	All	5%	5%
Developmental Disability	All	5%	5%
Chronic Health Condition	All	5%	5%
HIV/AIDS	All	5%	5%
Mental Health Problem	All	5%	5%
Substance Abuse	All	5%	5%
Domestic Violence	HoH and Adults	5%	5%
Service Provided-HOPWA	All	5%	5%
Housing Assessment at Exit	All	5%	5%
Financial Assistance	HoH and Adults	5%	5%
Medical Assistance	All Household Members with HIV/AIDS	5%	5%
T-Cell and Viral Load	Only Clients funded in a HOPWA Project with HIV/AIDS	5%	5%

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APPENDIX L: PROGRAM SPECIFIC-VA DATA QUALITY THRESHOLDS

Program Specific	VA			
Data Elements	Requirement All Clients, Adults, or HoH	SSVF Acceptable % Null/Not Collected/Client Doesn't Know/Refused	VASH Acceptable % Null/Not Collected/Client Doesn't Know/Refused	GPD Acceptable % Null/Not Collected/Client Doesn't Know/Refused
Income and Sources	HoH and Adults	5%	5%	5%
Non-Cash Benefits	HoH and Adults	5%	5%	5%
Health Insurance	All	N/A	5%	5%
Physical Disability	All	N/A	5%	5%
Developmental Disability	All	N/A	5%	5%
Chronic Health Condition	All	N/A	5%	5%
HIV/AIDS	All	N/A	5%	5%
Substance Abuse	All	N/A	5%	5%
Domestic Violence	HoH and Adults	N/A	5%	5%
Services Provided-SSVF	All	5%	N/A	5%
Financial Assitance-SSVF	All *	5%	N/A	5%
Last Grade Completed	HoH and Adults	5%	5%	5%
Employment Staus	All	N/A	5%	5%
General Health Status	HoH and Adults	N/A	5%	5%
Veteran's Information	#	5%	N/A	5%
Precent of AMI	HoH	5%	N/A	5%
Last Permanent Address	HoH	5%	N/A	5%
VAMC Station Number	HoH	5%	5%	5%
SSVP HP Targeting	HoH	5% (HP Only)	N/A	5%
HUD-VASH Exit Information	HoH	N/A	5%	NA
HUD-VASH Voucher Tracking	HoH	N/A	5%	N/A

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Policies and Procedures: Section 2.3.4. HMIS Training Coordinator

Update Summary: Revise language on job functions for this position.

Current

1. Conduct Training for all HMIS Users, which includes but is not limited to HMIS New User Training, Refresher Training, Program Specific Training, Report Training, Chronic Homeless Definition Training, System Performance Measures Training, Point in Time Training.
2. Responsible for providing and creating training materials, such as training guides.
3. Provide technical guidance on HMIS implementation to participating agencies.
4. Perform other duties as assigned.
5. Conduct annual security trainings for system users.
6. Conduct HMIS Training for new and existing HMIS Users.
7. Perform other duties as assigned.

Recommendation

Remove Redundancies:
6. Conduct HMIS Training for new and existing HMIS Users.
7. Perform other duties as assigned (is #4).

Update:
1. Conduct Training for all HMIS Users, which includes but is not limited to HMIS Security Awareness Training, HMIS Fundamentals Training, Elements of Focus Training, Program Specific Training, Report Training, Chronic Homeless Definition Training, System Performance Measures Training, Point in Time Training.
2. Responsible for providing and creating training materials, including training guides, tutorial videos, and other resources as requested.

Policies and Procedures: Section 3.5.2 Training Procedures

Update Summary: Revise protocols to access training opportunities.

Current

1. Only authorized agency personnel may request new user training using the following link: https://docs.google.com/forms/d/e/1FAIpQLSf9T0Yz7l54Xrwincl4LUVs1PtTNXe3-AxEYi1MmBadlCjnLg/viewform.

2. Optional and required trainings will be announced via email.

Recommendation

1. HMIS training increases user's understanding, knowledge, and skills to effectively use the HMIS database. HMIS training increases user's understanding, knowledge, and skills to effectively use the HMIS database.

2. All training must be requested through our Training Request using the following link: https://docs.google.com/forms/d/e/1FAIpQLSfNXXjIxJmFSckPonnPo0LRp1JmbXXLPjTAogWddiw-abawKQ/viewform

3. Training is offered in a combination of online and live formats. Training may be requested for entire departments or individual one-on-one sessions.

4. Optional and required trainings will be announced via email.

Policies and Procedures: Section 3.2.2 Procedures to Designate a System User

Update Summary: Revise protocols related to HMIS access for users.

Current

3.2.2 Procedures to Designate a New System User

1. The Executive Director, or the agency HMIS Representative, will submit a Training Request Form to the HMIS help desk, specifying the new user's name, email address, role and a description of HMIS-related job functions.

2. The new system user will complete the Security Awareness Agreement.

3. The HMIS help desk will coordinate new user training and system access.

Procedures (To Change User Role)

1. The Executive Director, or HMIS Representative, will submit a request to the HMIS ticketing system.

2. The HMIS Trainer will schedule the user for a Refresher Training prior to changing the user's role.

Procedures (To Deactivate a System User):

1. The Executive Director, or HMIS Representative, will submit a user deactivation request to the HMIS ticketing system.

2. The HMIS help desk will deactivate the system user.

Recommendation

3.2.2 Procedures to Designate a New or Returning System User

1. The authorized contact will submit a Training Request Form to the HMIS ticketing system, specifying the user's first and last name, organization issued email address, role/title, and a description of HMIS-related job functions.

2. The authorized contact must ensure the user views the HMIS Security Awareness Training video and HMIS Fundamentals videos in their entirety before the user completes the Security Awareness Quiz and Fundamentals Quiz. Once the user receives a score of 80% or above on each quiz, they will be scheduled for HMIS Elements of Focus Training (if required for their position) and granted HMIS access.

3. The HMIS Training Coordinator will schedule the user for HMIS Elements of Focus Training (if required for their position), then provide the user the HMIS Login Information email which contains credentials and instructions for the user to login to HMIS, change the password, and complete the Security Awareness Agreement.

4. If HMIS Elements of Focus Training is required, the HMIS Training Coordinator must receive training session confirmation by 3:00 p.m. the day prior to the scheduled session.

5. If HMIS Report Training is required, the HMIS Training Coordinator must receive training session confirmation by 10:00 a.m. the day prior to the scheduled session.

6. Once the user completes the required items in step 3, they will be granted HMIS access.

3.2.3 Procedures to Change User Role

1. The authorized contact will submit a Training Request Form to the HMIS ticketing system, specifying the user's first and last name, organization issued email address, role/title, and a description of HMIS-related job functions.

2. The HMIS Training Coordinator will either provide the required Fundamentals Training and/or schedule the user for an Elements of Focus Training. The user must complete the required training(s) prior to being assigned a new role.

3.2.4 Procedures to Change User Agency

1. The authorized contact will submit a Training Request Form to the HMIS ticketing system, specifying the user's first and last name, organization issued email address, role/title, and a description of HMIS-related job functions.

2. The HMIS Training Coordinator will provide the HMIS Security Awareness Training and either provide the required Fundamentals Training and/or schedule the user for an Elements of Focus Training. The user must complete the required training(s) prior to gaining HMIS access with the new agency.

3. If HMIS Elements of Focus Training is required, the HMIS Training Coordinator must receive training session confirmation by 3:00 p.m. the day prior to the scheduled session.

4. If HMIS Report Training is required, the HMIS Training Coordinator must receive training session confirmation by 10:00 a.m. the day prior to the scheduled session.

5. Once the user completes the required items in step 3, they will be granted HMIS access.

3.2.5 Procedures to Deactivate a System User

1. The authorized contact will submit a user deactivation request to the HMIS ticketing system.

2. The HMIS help desk will deactivate the system user.

Add Section 4.10.3 Quarterly Self-Audit Procedures

Purpose: The HMIS Team is proposing a reduction in the percentage of users reviewed during the Quarterly Self-Audit for all agencies and the percentage of client records reviewed for high performing agencies.

Current Process:

Agencies review 10% of users or 20 total, whichever is less (Only one agency in our community reaches 20).

Agencies review 10% of total clients served during the last quarter or 50 total, whichever is less.

Proposed Procedures:

Agencies review 5% of users or 10 total, whichever is less.

Percentage of client data audit is based on performance on last audit:

       0-30% Accuracy Error Rate = 3% of client records audited.

       31-60% Accuracy Error Rate = 5% of client records audited.

       61-100% Accuracy Error Rate = 10% of client records audited.

Using this system, most agencies would fall into the first category and audit 3% of their total clients served during the last quarter. Based on the last audit, only about 1-2 agencies would fall into each of the higher categories.