

San Mateo County Continuum of Care

CoC AND HMIS GOVERNANCE CHARTER

Adopted January 17, 2014
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I. Overview: Continuum of Care Structure and Purpose Under HEARTH

The Homeless Emergency Assistance and Rapid Transition to Housing (HEARTH) Act of 2009 amends and reauthorizes the McKinney-Vento Homeless Assistance Act. HEARTH provides the statutory framework for the federal government’s response to homelessness. Among the requirements established in HEARTH is that every community establish a “Continuum of Care (CoC),” defined as “the group organized to carry out the responsibilities required under [HEARTH] and that is composed of representatives of organizations, including nonprofit homeless service providers, victim service providers, faith-based organizations, governments, businesses, advocates, public housing agencies, school districts, social service providers, mental health agencies, hospitals, universities, affordable housing developers, law enforcement, organizations that serve homeless and formerly homeless veterans, and homeless and formerly homeless persons to the extent these groups are represented within the geographic area and are available to participate.”

The CoC’s primary responsibilities under the HEARTH Act include the following:

- Operating the CoC
- Designating and operating a Homeless Management Information System (HMIS)
- CoC planning

The Emergency Shelter Grants (ESG) Program further requires that a jurisdiction that receives an ESG grant “must consult with the Continuum of Care in determining how to allocate its ESG grant for eligible activities; in developing the performance standards for, and evaluating the outcomes of, projects and activities assisted by ESG funds; and in developing funding, policies, and procedures for the operation and administration of the HMIS.”

The HEARTH Act directs each local community to establish a CoC governance structure and process, to be formalized through a written Governance Charter.

II. San Mateo County CoC Goals and Objectives

The San Mateo County CoC has made a commitment to achieving the goals set forth in Home, Together: The Federal Strategic Plan to Prevent and End Homelessness.

Strategies for meeting these goals are set forth in [Ending Homelessness in San Mateo County](#) the community's strategic plan for ending homelessness among all populations by 2020.

This plan affirms the community's commitment to meet the HEARTH measures, including: reducing the number of first time homeless households, increasing the rate of exit to permanent housing, reducing the length of time households are homeless, reducing the rate of return to homelessness and increasing participant income.

Additionally, the CoC affirms an intention to develop a system that meets the specific needs of all populations. Specific goals include:

- Homeless families are rapidly re-housed within 30 days of becoming homeless;
- Developing strategies that address the unique needs of unaccompanied homeless youth, including strategies that addresses homeless youth trafficking and other forms of exploitation;
- Ensuring that persons fleeing domestic violence are offered available safe housing and services available, and that they have options and choices, and that their personal information is protected.

The CoC's policies, procedures, including standards for assistance, are described in Attachment B.

III. San Mateo County CoC Steering Committee – Structure and Function

A. Authority

In San Mateo County, the CoC role and responsibilities are fulfilled by a committee called the San Mateo County CoC Steering Committee ("the Steering Committee"). The Steering Committee is convened and staffed by the San Mateo County Human Services Agency (HSA), Center on Homelessness. HSA also serves as the CoC Lead Agency. The Steering Committee is responsible for overseeing the creation of an annual Homeless Continuum of Care plan and application to HUD for funding for projects and programs serving homeless persons. Specific responsibilities are detailed in Section V.

B. Purpose

The purpose of the CoC Steering Committee is to:

- Oversee a year-round planning process designed to guide the development of a homeless crisis response system for San Mateo County;
- Regularly assess system performance data and use data to inform system planning;
- Oversee San Mateo County's annual application to HUD for Continuum of Care funding;

- Oversee the implementation of the Homeless Management Information System (HMIS);
- Consult with the San Mateo County Department of Housing and entitlement jurisdictions on the administration of ESG funds, including funding allocations, performance standards, and evaluation of project performance.

C. Composition

CoC Regulations (578.5) require that the CoC Steering Committee be representative of relevant organizations and of projects serving homeless subpopulations and include at least one homeless or formerly homeless individual.

The San Mateo County Steering Committee shall be composed of no more than forty members. The composition of the committee is designed to ensure that the CoC solicits and considers opinions from individuals and organizations with knowledge or an interest in ending homelessness in the area. The Steering Committee shall include representatives of the following constituencies, in the following numbers.

Stakeholder Group	Number of Representatives on Committee
Non-Profit Service Providers Representing Key Service Modalities : <ol style="list-style-type: none"> 1. Prevention 2. Outreach 3. Emergency shelter, 4. Transitional or Interim housing 5. Rapid Re-Housing 6. Supportive housing 7. Affordable housing 8. Core Service Agency/Safety Net 	Up to 8 (one for each modality)
Mainstream Service Systems: <ol style="list-style-type: none"> 1. Employment and Training System 2. Mental Health System 3. Alcohol and Drug Treatment System 4. Health System 5. Criminal Justice System 	Up to 5 (one for each system)
Organizations Representing Key Subpopulations: <ol style="list-style-type: none"> 1. Veterans 2. Seniors 3. Youth 4. Domestic Violence Survivors 	Up to 4 (one for each subpopulation)

Stakeholder Group	Number of Representatives on Committee
Entitlement Cities: <ol style="list-style-type: none"> 1. Daly City 2. Redwood City 3. San Mateo 4. South San Francisco 	Up to 4 (one for each city)
County Government Rep	1
Housing Authority Representative	1
Private Foundation Rep	1
Business Rep	1
Homeless or Formerly Homeless Individual	1
Housing Developer	1
Housing Advocate	1
Community Development/Finance Rep	1
Representative of the educational system	1
An agency that serves survivors of human trafficking	1
Disability Service Organizations, Disability Advocates	1
Lesbian, Gay, Bisexual, Transgender, Queer (LGBTQ) Advocates, and LGBTQ Service Organizations	1
At-Large Members	Up to 8
Subcommittee and Workgroup Chairs	Up to 5

D. Terms

Steering Committee members shall serve for three-year terms. Steering Committee members may be re-elected, with a term limit of three three-year terms (nine consecutive years). Term limits may be waived by a vote of the Steering Committee on a case-by-case basis in instances where another applicable representative of that stakeholder group cannot be identified.

E. Election/Nomination of Members

A new Steering Committee shall be seated each year in January. Slots that are vacant due to resignation or term expiration shall be filled through a nomination process. Nominations shall generally be solicited for vacant slots July through September, with nominations made at the October meeting. The process for solicitation of nominations shall include outreach by Lead Agency staff and Committee members (via emails, phone calls, announcements at meetings, etc.), recruitment postings on HSA’s Continuum of Care webpage, an regular announcements of openings through email blasts to HSA’s broad list of stakeholders. Specific individuals (not organizations) shall be recruited who

are able to represent the constituencies described in Section C. In the event there are no openings on the Committee, HSA shall maintain a list of interested individuals to draw upon when vacancies arise.

Once a slate of individuals has been identified, the Committee will entertain nominations and elect the new members to fill the vacant slots. New members shall generally be voted in at the October meeting and will be seated in the first meeting of the calendar year.

Vacancies that occur outside the regular cycle due to resignations may be filled before the October meeting. Nominations may be voted upon at any meeting following the resignation.

F. Meetings

The Steering Committee shall meet on a quarterly basis, usually in October, January/February, April/May and July/August (dates will be impacted by the deadline for HUD Continuum of Care NOFA as well as by the ESG funding cycle).

Meetings shall be open to any interested individual, including members of the public. Meeting announcements and agenda will be distributed to members by email at least two days prior to the date of the meeting. Agendas will be publicly posted in advance of the meeting.

G. Decision-Making

All actions of the Steering Committee shall be taken by vote. A two-thirds majority of Steering Committee members present shall be required to take a Steering Committee action. In circumstances that need time-sensitive action, voting may take place by email, with the vote being ratified at the next in person Steering Committee meeting.

Robert's Rules of Order shall be followed in taking Committee action. No member may participate in or influence discussions or resulting decisions concerning the award of a grant or other financial benefits to the organization that the member represents.

H. Conflict of Interest

A Steering Committee member shall be deemed to have a conflict of interest if he or she has a prohibited conflict of interest pursuant to any of the following: the California Political Reform Act, Government Code sections 81000 *et seq.*; California Government Code sections 1090 *et seq.*, the common law prohibition against bias, or any applicable conflict of interest policy for the County of San Mateo.

The Steering Committee shall apply a reasonableness standard in determining whether a conflict exists. If a member has a conflict of interest, he or she shall declare the conflict on the record, refrain from discussing the issue with the Committee, and recuse him or herself from voting on the matter.

I. Attendance

Steering Committee Members shall be expected to attend all meetings unless excused by informing HSA staff.

Each committee member may designate one proxy member to vote in his/her place if he/she is unable to attend. The proxy member must be specifically named by the member in advance of the meeting by sending an email to HSA staff. HSA staff will maintain the membership roster and list of proxies.

If a Steering Committee member has two unexplained absences in a year, the Chair/Co-Chair may recommend that he or she be removed from the Steering Committee. Members may be removed only by a vote of the Steering Committee.

J. Officers

The Steering Committee shall elect either: (1) one Committee Chair; or (2) two Committee Co-Chairs. Election of officers shall take place at the meeting following the meeting at which new members are elected.

The Co-Chairs shall be responsible for chairing Steering Committee meetings and for working with Center on Homelessness staff to develop meeting agendas.

If the Chair or Co-Chairs cannot a meeting, the Chair/Co-Chairs may name an Acting Chair for that meeting. The Acting Chair must be a member of the Steering Committee (not a proxy).

K. Subcommittees and Workgroups

The Steering Committee shall establish subcommittees and workgroups as are necessary to conduct the work of Continuum of Care planning and submission of the CoC application. Subcommittee membership is open to any interested member of the community. Each subcommittee must have a chair or co-chairs, who are appointed by the Steering Committee Chair or Co-Chairs.

Subcommittees may include, but are not limited to:

- HMIS Subcommittee
- Performance Measurement Subcommittee (CoC and ESG)
- CoC Standards and Policies Subcommittee

- Funding Group/CoC Application Review Panel
- Lived Experience Advisory Group

L. Record Keeping

In consultation with the Chair or Co-Chairs of the Steering Committee, staff of the Center on Homelessness shall develop and distribute agendas and minutes and perform other record keeping functions.

IV. HMIS Lead Agency

The CoC Steering Committee shall designate a lead agency for the HMIS. The HMIS Lead Agency for San Mateo County is the San Mateo County Human Services Agency, Business Systems Group (BSG). In accordance with Section 578.7(b) of the CoC Interim Rule, the CoC shall:

- Review, revise, and approve a privacy plan, security plan, and data quality plan for the HMIS
- Ensure consistent participation of recipients and sub recipients in the HMIS; and
- Ensure the HMIS is administered in compliance with requirements prescribed by HUD in the HMIS Data Standards

This work shall be conducted by staff from the Center on Homelessness, Business Systems Group, and the HMIS Subcommittee.

Compliance with HMIS requirements shall be documented in the San Mateo County HMIS Policies and Procedures, which will be updated annually by the HMIS Lead Agency and reviewed and approved by the CoC Steering Committee. The HMIS Policies and Procedures are provided in Attachment C of this document.

V. Responsibilities of the Steering Committee and Subcommittees

Responsibilities of the Steering Committee are listed below.

A. Steering Committee

- Review and vote on nominations to fill vacancies on the Steering Committee;
- Review and approve strategies for addressing homelessness developed by lead agency, subcommittees, and workgroups;
- Review and approve CoC Policies and Standards developed by the Lead Agency, subcommittees and workgroups (Attachment B);
- Regularly assess system performance data and use data to inform system planning;

- Review and approve the general design of the Coordinated Entry System for homeless households, as documented in the CoC Policies and Standards (Attachment B). Provide input to the Lead Agency on development of HUD-compliant CoC policies and procedures;
- Review and approve recommendations from the Project Performance Subcommittee on performance issues, recommended corrective action, and proposed re-allocation of funds;
- Review and approve annual Collaborative Application for CoC funds; including a Rating and Ranking policy that uses objective, written criteria to review, rank and select projects for funding;
- Ensure that the CoC application process is transparent, open and that proposals from organizations who have not received CoC funds are accepted;
- Approve final Project Priority list developed by Review Panel;
- Review and act on provider appeals as needed;
- Approve methodology for annual Point in Time Count, Housing Inventory and Gaps Analysis developed by lead agency (bi-annually for street count), review and approve final count
- Review and approve annual performance standards and evaluation of outcomes for CoC and ESG programs, as developed by Lead Agency and Project Performance Work Group;
- Review and provide input on information prepared by Lead Agency for entitlement cities related to their Consolidated Plans; specifically, information relating to reducing and ending homelessness through:
 - Outreach and assessment;
 - Emergency and transitional shelter;
 - Transitions to permanent housing through shortening episodes of homelessness, access to affordable housing and prevent recurrence of homelessness, and;
 - Homeless prevention.

This information may also include PIT and/or HMIS data to help inform funding allocations for homeless programs using ESG and other sources of funding
- Review and provide input on the annual ESG funding priorities and allocations as developed by the Department of Housing;
- Provide representation to the Housing and Community Development Committee (CDBG and ESG), Interagency Council on Homelessness, and other planning bodies
- Designate an HMIS Lead Agency and information system for the HMIS software;
- Review and approve HMIS policies and procedures, privacy plan, security plan, data quality plan, and any other plan the HMIS Lead is required to develop.

The Steering Committee may choose to delegate some or all of these responsibilities to the Subcommittees or Work Groups, as described below.

B. HMIS Subcommittee

- Identify training and support needs for HMIS agencies regarding data quality, data entry procedures and other topics relevant to HMIS users.
- Advise HMIS Lead and Steering Committee on decisions about HMIS administration and management;
- Review all CoC data reports to include the HIC, PIT, AHAR, & System Performance Measure report;
- Review HMIS Policies and Procedures and make recommendations to CoC Steering Committee regarding approval.

C. Performance Measurement Subcommittee

- Reviews San Mateo County's results on the HUD system performance measures and advises the COH on strategies to improve system performance
- Advises COH on setting and updating standards for evaluating the performance of CoC and ESG funded projects
- Reviews overall results of monitoring conducted by COH to identify trends and recommend training or support that could be provided or modified to increase support to providers
- Works collaboratively with the HMIS Users Group on any needed changes to the HMIS system to track performance measures.

D. CoC Standards and Policies Committee

- Works with HSA to develop and maintain written policies and standards for CoC system operations, including Coordinated Entry
- Works with HSA to develop and maintain written policies and standards for CoC and ESG assistance, including who receives what type and level of assistance and for how long;
- Works with HSA on development of policies and procedures as needed to support implementation of the strategic plan to end homelessness (including policies relating to shelter, TH, RRH, PSH).

E. Funding Group/Project Review Panel

- Develop and oversee an annual process for applying for HUD Continuum of Care funding;
- Recommend priorities and selection criteria for CoC project ranking for approval by Steering Committee;
- Review and rank applications from new and renewal projects; recommend final ranking to Steering Committee;
- Recommend priorities and process for ESG funding to be approved by Steering Committee.

Organizations that are recipients of CoC or ESG funds may not participate in this group/panel.

F. Lived Experience Advisory Group

- Provide support and guidance to the CoC regarding the experience of people navigating homelessness and the services system to support system and program improvements.

The overall structure and specific goals of this group are to be established by the group of persons with lived expertise and this description will be updated once they have had a chance to discuss and establish desired language for the Governance Charter.

Attachment A: CoC Code of Conduct

The following Code of Conduct provides a foundation of ethics for the San Mateo County Continuum of Care Steering Committee (“the Steering Committee”), its subcommittees and workgroups.

The Steering Committee prohibits the solicitation and acceptance of gifts or gratuities (anything of monetary value) by officers, voting members, and agents for their personal benefit. Ask yourself if the gift would have been offered if you did not have your position. If the answer is “No” then you should decline accepting the gift.

- A. The Steering Committee promotes impartiality in performing official duties, and prohibits any activity representing a conflict of interest. You should not act on a matter if a reasonable person who knew the circumstances of the situation could legitimately question your fairness.
- B. The Steering Committee prohibits the misuse of position. You cannot use your position with the Committee for your own personal gain or for the benefit of family or friends.
- C. Officers and voting members shall put forth honest effort in the performance of their duties.
- D. Officers and voting members shall not knowingly make unauthorized commitments or promises of any kind purporting to bind the Committee without previous Board approval.
- E. Officers and voting members shall disclose waste, fraud, abuse, and corruption to the San Mateo County Manager.
- F. A member shall be deemed to have a conflict of interest if he or she has a prohibited conflict of interest pursuant to any of the following: the California Political Reform Act, Government Code sections 81000 *et seq.*; California Government Code sections 1090 *et seq.*, the common law prohibition against bias, or any applicable conflict of interest policy for the County of San Mateo.

The Steering Committee shall apply a reasonableness standard in determining whether a conflict exists. If a member has a conflict of interest, he or she shall declare the conflict on the record, refrain from discussing the issue with the Committee, and recuse him or herself from voting on the matter.

- G. Officers, voting members and employees shall adhere to all laws and regulations that provide equal opportunity for all Americans regardless of race, color, religion, sex, national origin, age, or disability.

Violation of any portion of this code may result in removal from the CoC Steering Committee. The code has been distributed to the Committee, its subcommittees and workgroups, as well as posted on the website of the San Mateo County Human Services Agency (the CoC Lead Agency).

Attachment B: San Mateo County CoC Policies and Standards

1. Housing First

The San Mateo County CoC is committed to adopting a Housing First approach throughout the homeless crisis response system. The system prioritizes rapid placement and stabilization in permanent housing and there is an expectation that programs will not have service participation requirements or preconditions such as sobriety or a minimum income threshold. Participation in these services is based on the needs and desires of the program participant. Our system:

- *Uses data on project performance to develop strategies to quickly and stably house homeless households.* We evaluate the length of stay in programs and rate of exit to permanent housing to determine if programs are being effective at meeting our system goals.
- *Engages landlords and property owners.* HSA has contracted with a service provider to engage landlords and property owners on behalf of homeless households who have enrolled in rental assistance programs (permanent supportive housing and rapid re-housing) to assist them to locate and secure available rental units. In addition to this system-wide landlord engagement, individual programs also may engage landlords and property owners.
- *Prioritizes funding for projects that remove entry barriers.* The San Mateo County CoC encourages providers to remove entry criteria that are not required by a project funder. Having low barriers to entry is a scored criteria for projects requesting CoC funding (both new and renewal). Screening criteria the CoC define as “barriers” include, but are not limited to, criteria relating to: credit history, income, employment, domestic violence, sobriety/substance use, criminal record, immigration status, mental health status, or willingness to participate in services. Providers also are encouraged to remove ongoing program participation requirements that would cause participants to be terminated for any of these reasons.
- *Adopts client-centered service methods.* Projects in the San Mateo County CoC are expected to ensure that housing and service options are tailored to meet the unique needs of each individual or family presenting for services and that program participants have access to the services that they reasonably believe will help them achieve their goals.

2. Coordinated Entry System (CES)

The CoC Steering Committee has approved the governance and operational structure for San Mateo County’s Coordinated Entry System (CES), the CES objectives, high-level CE system design, and non-discrimination policy, as detailed in this section. HSA is

responsible for developing detailed CES policies that align with what is specified in this section and that comply with all applicable HUD requirements. Any significant changes to the CE system structure or design will be presented to the CoC Steering Committee for approval and will be documented in these CoC Policies and Standards.

A. CES Governance and Operational Structure

The following entities have responsibilities relating to the design and implementation of the San Mateo County CES:

- Human Services Agency (HSA): As the CoC Lead Agency, HSA holds responsibility for the overall design and implementation of Coordinated Entry, and is the primary funder of the CES activities. HSA is responsible for developing written CES Policies that comply with all applicable HUD requirements and align with the community’s strategic plan to end homelessness.
- Continuum of Care Steering Committee: As the CoC Governing Body, advises HSA on design and implementation of Coordinated Entry and approves the overall CES approach and design, as documented in these CoC Policies and Standards.
- Coordinated Entry provider: Via a Request for Proposals process, an agency has been identified by HSA as the Coordinated Entry and Diversion provider. The Coordinated Entry provider is responsible for developing operating procedures to implement the CES Policies developed by HSA and aligned with the CoC Policies and Standards.
- Core Service Agencies: The eight Core Service Agencies serve as the front door to safety net services and will serve as “access points” into the CES.
- Homeless Outreach Teams (HOT): Funded by HSA and leveraging other funding sources, HOT is the County’s primary street outreach program specifically targeting people experiencing unsheltered homelessness. HOT is a designated “Access Point” for any household living outdoors who is not able to or not interested in going to a Core Service Agency.

B. CES Goals and Objectives

The objective of CES is to ensure streamlined access to San Mateo County’s homeless resolution system for people experiencing homelessness and to ensure they are matched to the appropriate intervention to end their homelessness, based on their vulnerability and housing barriers. CES was adopted as part of the County’s strategic plan to end homelessness to serve as the “front door” of the homeless crisis response system and a critical element of the overall system infrastructure. Additionally, CES

helps the community meet its goal of ensuring that the experience of homelessness is rare, brief, and one-time.

Establishing an effective CES is a federal requirement set forth by the Department of Housing and Urban Development (HUD) with the goal of ensuring that “assistance be allocated as effectively as possible and that it be easily accessible no matter where or how people present” within a community. An effective CES should prioritize individuals with the greatest need for assistance; ensure people are not “screened out” or denied assistance because of perceived barriers to housing or services (i.e. use of drugs or alcohol, criminal background, lack of employment); be grounded in Housing First principles; be client-centered; and provide fair and equal access to all.

Desired outcomes of implementing CES include:

- Households receive support to solve their housing crises and avoid homelessness to the greatest extent possible;
- People experiencing homelessness receive the right resources at the right time;
- Households who are unsheltered can access shelter as quickly as possible;
- Waiting times for housing assistance are reduced;
- Length of time that housing slots are vacant is minimized — for each program opening, an eligible household is quickly matched and referred to fill it;
- Those with the greatest need and who are hardest to serve are prioritized for help from the homeless system; and
- People experiencing homelessness move to permanent housing and do not return to homelessness.

C. CES Design

The design of San Mateo County’s CES is aligned with federal requirements set forth by HUD, as well as informed by local experience and expertise.

The system incorporate the following key elements:

1. Access and initial screening – the 8 Core Service Agencies and the Homeless Outreach Teams (HOT) are the designated Access Points for CES. Any household presenting to any Access Point with a housing crisis will receive an initial screening to determine whether they are experiencing homelessness, are at imminent risk of homelessness, or have other housing needs. Households determined to be homeless or at imminent risk will receive assistance from a trained CE Specialist (either at a Core Service Agency or HOT); all others will receive referrals to the mainstream resources available through the Core Service Agencies and mainstream systems.
2. Diversion – all households who are determined to be homeless or at imminent risk will have a diversion conversation with a trained CE specialist, either at a

- Core Service Agency or with the HOT. The goal of diversion is to identify a no-cost or low-cost solution that will resolve the household's housing crisis and prevent entry into homelessness. Households that are not able to identify a housing solution through the diversion conversation will receive an assessment for housing assistance (see #3, below)
3. Assessment. All households who are not diverted from the homeless system will be assessed using a standardized assessment tool developed by HSA. The purpose of the assessment is to identify household need, as indicated by their history of homelessness (length of time homeless, numbers of episodes), barriers to housing, and vulnerability. Households assessed as having lower needs will be referred for diversion assistance. Those with higher needs will be prioritized for shelter and/or a housing intervention. Assessments will be conducted by CE Specialists at the Core Service Agencies and with the HOT.
 4. Prioritization for Interim and Permanent Housing Interventions.
 - Based on the results of the assessment, the CE Program Manager or designated other CE staff will determine which households are prioritized for available interim beds (emergency shelter and transitional housing). Criteria for shelter prioritization will emphasize the acuity of the household's immediate need for shelter (i.e. whether they are unsheltered and have significant vulnerability).
 - HSA will use the results of the assessment to develop a prioritized list of households in need of housing assistance – either rapid re-housing, permanent supportive housing or other permanent housing that participates in the CES.
 5. Referrals for Interim Housing. The CE program will manage referrals to available interim beds using a standardized process and policy. All participating interim housing programs shall report their bed availability on a daily basis so that placements can be made in a timely manner.
 6. Referrals to Housing Interventions. HSA will be responsible for managing a centralized list of households that have been prioritized for housing interventions. Households with the highest needs as indicated by the standardized assessment will be referred to permanent supportive housing (PSH) (provided they meet PSH eligibility criteria); others will be referred for available rapid re-housing (RRH) or other housing interventions. If households are assessed as needing PSH but none is available, they will be offered available RRH or other housing interventions.
 7. Acceptance into Interim and Permanent Housing Programs. All programs participating in CES (shelter, transitional, RRH, PSH, other permanent housing) are expected to accept any household referred through CES provided they meet all funder-required eligibility criteria. Programs will not perform additional screening or assessment beyond what is needed to ensure eligibility criteria are

met. All programs are expected to remove any entry criteria that are not specifically required by a program funder.

The general design of CES is the same for all populations. All Access Points are all useable by all people experiencing homelessness and the same assessment approach is used at all Access Points for all populations. There are some variations in tools and process steps for families with children, single adults and youth, as detailed in the CES policies.

D. Equal Access and Non-Discrimination

1. Geographic Coverage

The San Mateo County CES for all populations covers the entire County geography, which is the same geography as the CoC.

2. Marketing and Accessibility

The CES is widely marketed and available to:

- All eligible persons regardless of race, color, national origin, religion, sex, age, familial status, disability, actual or perceived sexual orientation, gender identity, or marital status.
- All populations and subpopulations in the CoC's geographic area, including people experiencing chronic homelessness, veterans, families with children, youth, and survivors of domestic violence, have fair and equal access to the coordinated entry process, regardless of the location or method by which they access the system.
- Individuals with disabilities; and
- Persons with Limited English Proficiency (LEP).

The Core Service Agencies, which are the physical system access points, are all accessible to individuals with disabilities, including accessible physical locations for individuals who use wheelchairs.

3. Non-Discrimination

All housing providers that receive funding through the County must affirmatively market their housing and supportive services to eligible persons regardless of race, color, national origin, religion, sex, age, familial status, or disability who are least likely to apply in the absence of special outreach, and maintain records of those marketing activities. Housing assisted with CoC funds and/or HSA funds must also be made available to individuals and families without regard to actual or perceived sexual orientation, gender identity, or marital status in accordance with 24 CFR 5.105 (a)(2).

All programs that receive referrals from CE are expected to comply with all applicable State and Federal civil rights and fair housing laws and requirements, including, but not limited to:

- Fair Housing Act prohibits discriminatory housing practices based on race, color, religion, sex, national origin, disability, or familial status;
- Section 504 of the Rehabilitation Act prohibits discrimination on the basis of disability under any program or activity receiving Federal financial assistance;
- Title VI of the Civil Rights Act prohibits discrimination on the basis of race, color or national origin under any program or activity receiving Federal financial assistance; and
- Title II of the Americans with Disabilities Act prohibits public entities, which includes state and local governments, and special purpose districts, from discriminating against individuals with disabilities in all their services, programs, and activities, which include housing, and housing-related services such as housing search and referral assistance.
- Title III of the Americans with Disabilities Act prohibits private entities that own, lease, and operate places of public accommodation, which include shelters, social service establishments, and other public accommodations providing housing, from discriminating on the basis of disability.
- HUD's Equal Access Rule at 24 CFR 5.105(a)(2) prohibits discriminatory eligibility determinations in HUD-assisted or HUD-insured housing programs based on actual or perceived sexual orientation, gender identity, or marital status, including any projects funded by the CoC Program, ESG Program, and HOPWA Program. The CoC Program interim rule also contains a fair housing provision at 24 CFR 578.93. For ESG, see 24 CFR 576.407(a) and (b), and for HOPWA, see 24 CFR 574.603.

The prioritization policy and process adopted by the CoC is designed to be fair and non-discriminatory:

- To the maximum extent possible, prioritization criteria are designed to be objective and to focus on concrete housing barriers and vulnerability factors;
- Clients are not required to disclose the presence of a disability in order to be prioritized and presence of a disability by itself is not a prioritization factor.
- HSA has tested the results of the CES prioritization tool to ensure that it does not result in disparate treatment of protected classes of people (race, ethnicity, age, gender).

3. Policies and Standards for Homeless System Programs

The San Mateo County Continuum of Care has developed a consistent and county-wide set of policies governing the operation the main types of homeless programs that make up the homeless system: emergency shelter (ES) and transitional housing (TH), rapid re-housing (RRH), permanent supportive housing (PSH), and other policies and standards. These high-level policies provide the framework for the implementation of programs in San Mateo County's homeless crisis resolution system.

The Continuum of Care Steering Committee has delegated to the Human Services Agency (as CoC Lead Agency) the role of developing detailed standards for each program type (shelter, RRH, PSH, others), that align with these CoC policies. HSA worked in collaboration with program providers in San Mateo County on the development of the standards. Each program provider maintains their own written program policies that align with the CoC standards.

a. General Principles of the San Mateo County Homeless System

The County of San Mateo maintains a strong commitment to prevent and end homelessness for county residents, with the goal to reach a functional zero level of homelessness by 2020. Since the County's strategic plan to end homelessness was published in 2016, the County and stakeholders have focused on system changes and implementing the strategies identified in the plan.

San Mateo County's Strategic Plan to End Homelessness is working to create a unified system, invest in best practices, and reorient the current homeless system towards housing crisis response. The plan addresses homelessness as a housing crisis and sets the path to develop a systematic approach targeted at helping people maintain their housing, returning unsheltered homeless people to housing as quickly as possible, and prioritizing existing system capacity for those who face the highest barriers and longest history of homelessness.

The strategies and policies adopted by San Mateo County and the CoC are guided by the following principles:

- **Systems Orientation:** Create a **system** that responds effectively and rapidly to the crisis of homelessness. In this system, all stakeholders, programs, and organizations work together in a coordinated way to accomplish a clear set of shared objectives. The objective of the housing crisis resolution system is to ensure that anyone who is homeless quickly returns to stable housing.
- **Housing First:** People experiencing homelessness need housing above all else. Strategies and interventions focus on returning households to safe and

- secure housing that they can use as a starting place to address other issues.
- **Data Driven:** Strategies are based on an analysis of the current system that assesses what is working and what can be improved. System and program-level performance is measured, and the results are used for continuous quality improvement. Funders of the system view their role as stewards of community resource who are responsible for understanding what results their investments are achieving and ensuring resources are used in a way that maximizes impact.
 - **Client-Centered:** People experiencing homelessness are at the center of the system design. The system is designed to ensure easy and streamlined access for everyone, and particularly those who experience the greatest challenge navigating the complexities of publicly-funded services and programs.
 - **Context-Specific and Aligned with Best Practices:** System strategies are aligned with evidence-based practices and lessons learned from the field, as well as federal policy direction. Best practices are applied to local conditions and tailored to reflect the specific strengths and challenges of San Mateo County.

a. Emergency Shelter and Transitional Housing

i. Description

Shelter programs, both emergency shelter and transitional housing programs, are short-term interventions designed to act as a safety net for households who are unsheltered or who are in the midst of a housing crisis and have no alternative housing options. Homeless shelter services provide an entry point into stabilization services and move households towards permanent housing as quickly as possible. Individuals and families who enter a shelter program receive immediate short-term housing-focused case management to address and resolve current crises, as well as to address barriers that prevent households from re-entering housing. Shelter stays are generally short term (1 month) or medium term (2-4 months), but the stays vary by client/household.

ii. General Principles

San Mateo County as adopted the following general principles for shelter, which build upon the general principles for the overall homeless system.

- **System Orientation:** Shelter plays a key role in ending homelessness overall. To do so effectively and efficiently, shelter programs must coordinate with the broader homeless system, not screen out people experiencing homelessness, and have a commitment to a Housing First

approach. Shelter programs must prioritize for assistance for households who are unsheltered and those who have the highest need for assistance to resolve their housing crisis, by accepting referrals from the County's Coordinated Entry System (CES).

- **Housing First:** Shelter Programs should be flexible enough to serve any household that is unsheltered and has no viable alternative housing resource. Shelter should be offered without precondition to any eligible household. Programs shall ensure low barriers to program entry and program rules designed to minimize residents being involuntarily terminated from programs. Low entry barriers mean there are no sobriety requirements, service participation requirements, or other entry criteria designed to screen out households based on lack of "housing readiness" or motivation. Programs may establish reasonable screening criteria and program rules to ensure safety of shelter residents and staff. Program design is oriented to help all households return to stable housing as quickly as possible.
- **Data Driven:** Shelter programs will track and report on progress in meeting performance standards and will use data for continuous quality improvement.
- **Client-Centered:** Shelter programs support client choice and self-determination. Programs incorporate fair, transparent and accessible program rules and policies. To the maximum extent possible, rules are limited to what is needed to ensure a safe environment for all residents and staff.

iii. Access to Shelter

Under San Mateo County's CES policies, all shelter programs must accept referrals from CES, which uses a locally designed assessment tool to prioritize households based on the acuity of their current housing crisis, history of homelessness, and immediate vulnerability. The households matched to shelter must be unsheltered or have been assessed as at immediate risk of being unsheltered by CES staff. Households must also meet the CES eligibility criteria, which includes meeting the literal homelessness definition.

Each shelter program in San Mateo County will establish its own eligibility criteria in compliance with applicable funding sources. Funder-mandated eligibility restrictions may include: maximum income levels, convictions for specific criminal offenses (e.g. sex offender), minimum or maximum age of residents (e.g. must be at least 18, must be 18-24), veteran status and other factors.

Shelter programs shall not adopt additional eligibility or screening criteria beyond what is required by a funding source. In particular, providers shall not impose additional targeting or screening criteria designed to identify whether a household is “housing ready,” such as:

- Sobriety or participation in treatment services
- Employability or employment readiness
- Income or ability to pay rent
- “Motivation” or willingness to participate in services
- Proof of citizenship/immigration status

Shelter programs will operate in compliance with the Department of Housing and Urban Development’s (HUD) Equal Access to Housing Final Rule, ensuring that all individuals have equal access and accommodations to shelter, regardless of gender, gender identity, sexual orientation, and/or marital status.

iv. Shelter Services

The primary purpose of shelter is to provide a safe place for residents to stay while they quickly implement a plan to secure housing. To meet this objective, the primary service intervention offered at shelter programs is housing-focused case management and service linkages.

Shelter case managers will respond to residents’ immediate and short-term service needs, complete an initial housing needs assessment, and develop a housing-focused case plan to secure housing. Case managers will work to identify and build upon residents’ strengths. Additionally, case management will provide linkage to appropriate services and supports, as well as continued monitoring and follow-up regarding client progress and ongoing needs. The goal of the housing-focused case management is to help residents locate and move to a permanent housing situation as quickly as possible; permanent housing includes market housing, senior housing, affordable housing, shared housing situations, moving in with a relative or friend, obtaining housing with a voucher or subsidy, or any other housing situation that is not time-limited.

Supportive services in shelter programs are offered and encouraged, however participation is not mandatory. Programs may offer health and behavioral health services, employment services, budgeting/financial planning classes, and other types of support, but participation is not mandatory as a condition of receiving assistance. Programs may set up savings programs in which residents are supported to save some of their income for move-in expenses once they secure housing. However, savings programs cannot be mandatory.

Programs will utilize motivational interviewing and other engagement techniques to encourage residents to participate in supportive services.

v. Shelter Program Rules

In keeping with the principles of client self-determination and to ensure that programs have low barriers to participation, shelter programs establish program rules that foster an environment of trust, are clear and reasonable, and are focused ensuring that all residents have a safe environment in which to live. Program rules should not mandate participation in services as a condition of remaining in the program. Rules should be enforced consistently using a transparent process.

To the extent feasible, shelter providers should involve shelter residents in shelter governance and the development of shelter rules. Rules should be reviewed regularly to ensure they support the overall goal of creating a housing-focused, client-centered, safe environment.

Involuntary exit from shelter should always be a last resort. Program rules and services should be designed to support residents to access the support they need to participate in the shelter program and to exit as rapidly as possible to housing. Programs will maintain written grievance policies and procedures regarding involuntary exits/asked to leave situations. Residents will be made aware of the grievance procedures.

b. Rapid Re-Housing (RRH)

i. Description

Rapid re-housing is a program model designed to aid individuals and family households who are literally homeless to make quick exits from homelessness and return to permanent housing. The program does so by offering targeted case management services and financial assistance to enable a household to move into housing and stabilize in housing (National Alliance to End Homelessness RRH Solutions Brief, Feb. 2016).

All Rapid Re-Housing Programs in San Mateo County include the following three core components:

- 1. Housing Identification.** Recruit landlords with units in the communities and neighborhoods where program participants want to live and negotiate with landlords to help program participants access housing. Provide housing search assistance to participants to identify and secure suitable units.
- 2. Rent and Move-In Assistance.** Provide short-term help to households so they can pay for housing. Activities under this core component include paying for security deposits, move-in expenses, rent, and utilities.

- 3. Rapid Re-Housing Case Management and Services.** Provide case management services to help participants obtain and move into permanent housing, support participants to stabilize in housing, and connect them to community and mainstream services and supports if needed.

ii. General Principles

San Mateo County as adopted the following general principles for Rapid Re-Housing, which build upon the overall principles for the homeless system:

- **System Orientation:** RRH plays a key role in ending homelessness overall. To do so effectively and efficiently, RRH programs must coordinate with the broader homeless system, not screen out people experiencing homelessness, and have a commitment to a Housing First approach. RRH must prioritize for assistance for households who are unsheltered and those who have the highest need for assistance to resolve their housing crisis, by accepting referrals from CES.
- **Housing First:** RRH is an intervention designed for and flexible enough to serve anyone not able to exit homelessness on their own and should be offered without precondition to any eligible household. RRH programs shall ensure low barriers to program entry and program rules designed to minimize clients being involuntarily terminated from programs. Low entry barriers mean there are no sobriety requirements, service participation requirements, or other entry criteria designed to screen out households based on lack of “housing readiness” or motivation. Program design is oriented to help all households return to stable housing as quickly as possible.
- **Data Driven:** RRH programs will track and report on progress in meeting performance standards and will use data for continuous quality improvement.
- **Client-Centered** – RRH assistance is individualized to meet the needs of each client/household, supporting client choice and self-determination. Programs incorporate fair, transparent and accessible program policies. RRH participants have all the rights and responsibilities of typical tenants and sign standard lease agreements.

iii. Rapid Re-Housing Access

Under San Mateo County’s CES policies all RRH Programs must accept referrals from CES, which uses a locally designed assessment tool to prioritize households for RRH based on their history of homelessness and presence of housing barriers.

The households matched to RRH must be:

- Experiencing homelessness, as defined by the definitions established by the funding source for the RRH program to which they are being referred
- Meet the eligibility criteria (such as literal homelessness)

RRH programs and providers may not have their own referral procedures, and must accept referrals directly from the CES, eliminating “side doors” into the homeless system, unless the program has funder-driven requirements for specialized referral processes, such as DV survivor homeless programs and the CalWORKs program.

Each RRH program in San Mateo County will establish its own eligibility criteria in compliance with applicable funding sources. Funder-mandated eligibility restrictions may include: maximum income levels, the definition of homelessness that a household must meet, veteran status and other factors. RRH programs shall not adopt additional eligibility or screening criteria beyond what is required by a funding source. In particular, providers shall not impose additional targeting or screening criteria designed to identify whether a household is “housing ready,” such as:

- Sobriety
- Employability or employment readiness
- Income
- “Motivation” or willingness to participate in services

iv. Housing Identification and Selection

The goal of Housing Identification is to find housing for program participants quickly. Activities under this core component include recruiting landlords with units in the communities and neighborhoods where program participants want to live and negotiating with landlords to help program participants access housing. This also includes having discussions with clients about housing options. Program staff listen to and respect client choices about their housing (where they want to live, how much they are willing to pay, whether they are willing to share) and also provide accurate information about the implications of those choices given the realities of the housing market.

RRH programs hire and retain staff with the skills and experience necessary to conduct housing identification and location, and to assist participants and landlords in understanding landlord-tenant rights and responsibilities.

v. Rent and Move-In Assistance

The goal of Rent and Move-In Assistance is to provide short-term help to households so they can stabilize in housing and maintain housing after leaving the RRH program.

Activities under this core component of RRH include paying for security deposits, move-in expenses, rent, and utilities. In general:

- Rent and move-in assistance should be flexible and tailored to the varying and changing needs of a household while providing the assistance necessary for households to move immediately out of homelessness and to stabilize in permanent housing.
- Each RRH program should maximize the number of households it is able to serve by providing households with financial assistance in a progressive manner, providing only the assistance necessary to stabilize in permanent housing.
- RRH programs will assume that all households, even those with high barriers, have the chance to succeed with a minimal subsidy.
- RRH policies should reflect realistic expectations about the household's rent burden when subsidies end. Given the expensive rental market and cost of living in San Mateo County, households may have to spend a very high percentage of their income for rent.

A best practice in RRH, progressive engagement provides a tailored level of assistance to households, reserving the most intensive interventions for individuals and families with the highest barriers to housing success. After initially entering a program, clients are met with a fitting level of services, typically beginning with low-intensity services and progressively increasing service intensity if needed. Clients should be continually re-assessed throughout the program's duration to ensure they are receiving an appropriate level of service. Services can be increased or decreased according to reassessment findings. The goal of this approach is that RRH provider services and subsidies effectively target and adjust to each household's needs.

Another goal of progressive engagement is to build a foundation for client independence and permanent housing maintenance by creating connections to needed support and services networks within the community. By the time rental assistance ceases, clients will ideally have built a support system to help address and overcome future hurdles, including access to childcare, transportation, health care, and/or employment.

vi. Case Management and Support Services

The goals of RRH case management are to help participants obtain and move into permanent housing, support participants to stabilize in housing, and connect them to community and mainstream services and supports as needed. To the maximum extent possible, services should be aligned with the National Alliance to End Homelessness (NAEH) "Rapid Re-Housing Performance Benchmarks and Program Standards."

Supportive services in RRH programs are offered and encouraged, however participation is not mandatory. Programs may offer employment services, budgeting classes, and other types of support, but participation is not mandatory as a condition of receiving assistance. Programs will utilize motivational interviewing and other engagement techniques to encourage participants to participate in supportive services that are applicable to each participant's housing plan.

c. Permanent Supportive Housing (PSH)

i. Description

Permanent supportive housing (PSH) is a form of housing that provides long-term (not time limited) deeply affordable housing in conjunction with supportive services. PSH generally is targeted to serve those households that have the greatest needs and highest vulnerabilities – people with disabling conditions and who have experienced extended periods of homelessness.

PSH programs are not all identical. Generally speaking, there are three main types of programs and projects:

1. *Tenant-based rental assistance.* The most common form of PSH in San Mateo County, tenant-based or voucher programs provide ongoing rental assistance to tenants who lease units directly from a landlord in the private rental market. The tenant pays a portion of the rent (typically 30% of their adjusted income), while the program pays the remainder up to a maximum allowable contract rent. In this model, program participants must identify and secure a housing unit, typically with assistance from a service provider. Participants may receive services in their units through dedicated service providers, and also may participate in community-based services.
2. *Site-based, project-based or dedicated PSH units.* Some PSH projects in San Mateo County consist of dedicated, built units, typically developed and owned by non-profit affordable housing developers. Services are provided on-site and tenants may also participate in community-based services.
3. *Sponsor-based or master-leased units.* A third type of PSH consists of units that are owned or master-leased by a PSH sponsor, typically a non-profit housing or service providers. In this model, the units are owned or leased by the sponsor and then sub-leased to program participants. Services may be provided on-site and tenants may also participate in community-based services.

ii. General Principles

San Mateo County has adopted the following general principles for Permanent Supportive Housing, which build upon the overall principles for the homeless system:

- **System Orientation:** PSH plays a key role in ending homelessness overall. To do so effectively and efficiently PSH programs must coordinate with the broader homeless system, not screen out large portions of the homeless population, and have a commitment to a Housing First approach. PSH must prioritize assistance for households who are unsheltered and those who have the highest need for assistance to resolve their housing crisis, by accepting referrals from the County's Coordinated Entry System (CES).
- **Housing First:** PSH programs are generally designed to serve those households that are experiencing chronic homelessness – those with long histories of homelessness and who have a disabling condition. PSH programs should have the capacity to house those households with very high service needs and challenging housing histories. They should have low barriers to program entry and program rules designed to minimize clients being involuntarily terminated or evicted. Low entry barriers means there are no sobriety requirements, service participation requirements, or other entry criteria designed to screen out households based on lack of “housing readiness” or motivation. Program design is oriented to help all households sustain housing and prevent eviction.
- **Data-Driven:** PSH programs will track and report on progress in meeting performance standards and use data for continuous quality improvement.
- **Client-Centered:** Support services provided in PSH programs are individualized to meet the needs of each client, supporting client choice and self-determination. Programs incorporate fair, transparent, and accessible program policies. PSH participants have all the rights and responsibilities of typical tenants and sign a standard lease agreement.

iii. Permanent Supportive Housing Access

Under San Mateo County's CES policies all PSH programs receiving CoC funding must accept referrals from CES, which uses a locally designed assessment tool to prioritize households for PSH based on their history of homelessness, presence of housing barriers and vulnerability.

The households matched to PSH must be:

- Experiencing chronic homelessness, as defined in the HUD Final Rule on Chronic Homelessness
- Meet the CES eligibility criteria

PSH programs and providers may not have their own outreach and referral procedures, and must accept referrals directly from the CES, eliminating “side doors” into the homeless system. Some programs have funder-driven requirements for specialized referral processes due to the other systems that the program interacts with, such as the San Mateo County Department of Behavioral Health and Recovery Services (BHRS), which is the primary provider of services to some PSH projects. Programs with specialized referral process work with HSA to involve CES prioritization as part of the specialized referral process.

Each PSH program in San Mateo County will establish its own eligibility criteria in compliance with applicable funding sources. Funder-mandated eligibility restrictions may include: maximum income levels, the definition of homelessness that a household must meet, veteran status and other factors. PSH projects that are site-specific dedicated built units must also comply with the regulatory requirements associated with all their permanent financing sources (e.g. tax credits, HUD 811, etc.) that are related to tenant eligibility and screening.

PSH programs shall not adopt additional eligibility or screening criteria beyond what is required by a funding source. In particular, providers shall not impose additional targeting or screening criteria designed to identify whether a household is “housing ready,” such as:

- Sobriety
- Employability or employment readiness
- Minimum income
- “Motivation” or willingness to participate in services

iv. Orders of Priority

All CoC-funded PSH beds in the CoC are offered to eligible chronically homeless households using the process described above and further detailed in the CoC’s adopted CES policies. The prioritization policy for PSH complies with the order of priority set forth in HUD’s CPD Notice CPD-16-11 - *Notice on Prioritizing Persons Experiencing Chronic Homelessness and Other Vulnerable Persons in Supportive Housing*.

The San Mateo County CES uses a locally-designed housing assessment and prioritization tool that assesses each household’s length of time homeless and barriers to securing housing.

The CoC Lead Agency manages a centralized priority pool of adults and families who have been prioritized for assistance based on their assessment results. When there are openings in PSH projects, the CoC Lead Agency will match the household on the list that has the highest score and has been verified as being chronically homeless and who appears to meet the program's eligibility criteria. Individuals are referred in priority score order – this ensures that those who have the most significant housing barriers are assisted first.

The CoC ensures that all eligible veterans are referred for assistance through Veterans Affairs Supportive Housing (VASH) and Supportive Services for Veteran Families (SSVF). Those veterans who are not eligible for these VA-funded programs may access available CoC-funded PSH beds provided they meet the chronic homelessness criteria.

v. Housing Standards

The detailed PSH standards developed by HSA in collaboration with PSH providers specify number of standards relating to housing features. These are briefly summarized below:

- Housing quality and inspection requirements. Units should meet HUD's Habitability Standard, unless the Housing Quality Standard (HQS) is required by a funding source. CoC-funded units must meet HQS.
- Unit location. The CoC program requires that participants may lease units outside San Mateo County in some circumstances as per the CoC Interim Rule.
- Neighborhood Amenities. Ideal neighborhood locations for site-based and master-leased PSH will ensure that program participants have access to a quality of life that meets individual backgrounds and needs.
- Unit size and occupancy standards. Occupancy requirements should align to the standards of the Housing Authority of San Mateo County unless a funding source requires some other standard.
- Shared Housing. PSH providers should offer some flexibility to allow participants to share units to the extent feasible.
- Unit Rents and Participant Rents. Maximum allowable rent and tenant rent is determined by the PSH funding source(s). CoC-funded programs must comply with HUD's rent reasonableness standard and rent reasonableness must be documented. Participants in CoC-funded units pay 30% of adjusted income towards rent, as per the CoC Interim Rule.
- Lease Terms. PSH tenants must have leases that comply with all applicable local regulations. CoC funded units must comply with the lease terms in the CoC Interim Rule.
- Housing Search Services. Tenant-based rental assistance programs should provide all participants with locating and accessing housing in a timely manner.

- Landlord Relations. PSH programs shall build and maintain positive relationships with landlords.
- Client Choice. PSH programs shall maximize the ability of participants to have a choice of unit. Reasonable restrictions on how many times a participant may turn down an offer of housing are permissible.
- Housing First Oriented Property Management. PSH tenants tend to have a range of challenges that can make it difficult for them to be stable in their housing. Above all, property management must be oriented to a housing first philosophy that prioritizes keeping tenants in their housing and avoiding eviction to the greatest extent possible.

vi. Service Standards

The detailed PSH standards developed by HSA in collaboration with PSH providers specify number of standards relating to support services. These are briefly summarized below:

- Voluntary Service Participation. As a general matter, supportive services in PSH programs are offered and encouraged, however participation is not mandatory. Programs should at a minimum offer case management, linkages to health and behavioral health services, and may also offer employment services, budgeting classes, and other types of support. However, participation must not be mandatory as a condition of receiving housing. Programs will utilize motivational interviewing and other engagement techniques to encourage participants to participate in supportive services.
- Case Management. All PSH programs should offer case management to participants, preferably on-site. The goals of PSH case management are to help participants obtain and move into permanent housing, support participants to stabilize in and maintain their housing, and connect them to community and mainstream services and supports as needed.
- Behavioral Health and Other Services. An integral part of permanent supportive housing is ensuring that program participants receive the necessary health, behavioral health, and other services needed to lead quality lives and maintain housing stability. These services may be provided on-site by a dedicated staff or by partnering organizations qualified to perform services on a continual basis. Services should be tailored to fit the needs of the households to be assisted. Site-based, dedicated PSH projects generally are required as a condition of their permanent financing to develop a formal service plan specifying what services will be provided (e.g. Mental Health Services Act (MHSA), No Place Like Home (NPLH)). In these instances, specific service standards may be imposed by the funder.

d. Anti-Discrimination Policy

The Continuum of Care has adopted the following policy regarding affirmative marketing and non-discrimination.

All homeless system providers and programs receiving federal CoC and/or ESG funds, or who are under contract with the San Mateo County Human Services Agency (HSA) shall affirmatively market their housing, shelter and supportive services to eligible persons regardless of race, color, national origin, religion, sex, age, familial status, or disability and who are least likely to apply in the absence of special outreach, and maintain records of those marketing activities. Housing and services must be made available to individuals and families without regard to actual or perceived sexual orientation, gender identity, or marital status in accordance with 24 CFR 5.105 (a)(2). Programs shall adopt written policies ensuring that LBGTQIA individuals and families may receive supportive services, shelter and housing free from discrimination.

All programs shall comply with all applicable state and Federal civil rights and fair housing laws and requirements, including, but not limited to:

- Fair Housing Act prohibits discriminatory housing practices based on race, color, religion, sex, national origin, disability, or familial status;
- Section 504 of the Rehabilitation Act prohibits discrimination on the basis of disability under any program or activity receiving Federal financial assistance;
- Title VI of the Civil Rights Act prohibits discrimination on the basis of race, color or national origin under any program or activity receiving Federal financial assistance; and
- Title II of the Americans with Disabilities Act prohibits public entities, which includes state and local governments, and special purpose districts, from discriminating against individuals with disabilities in all their services, programs, and activities, which include housing, and housing-related services such as housing search and referral assistance. Title III of the Americans with Disabilities Act prohibits private entities that own, lease, and operate places of public accommodation, which include shelters, social service establishments, and other public accommodations providing housing, from discriminating on the basis of disability.
- HUD's Equal Access Rule at 24 CFR 5.105(a)(2) prohibits discriminatory eligibility determinations in HUD-assisted or HUD-insured housing programs based on actual or perceived sexual orientation, gender identity, or marital status, including any projects funded by the CoC Program, ESG Program, and HOPWA Program. The CoC Program interim rule also contains a fair housing

provision at 24 CFR 578.93. For ESG, see 24 CFR 576.407(a) and (b), and for HOPWA, see 24 CFR 574.603.

No person shall be denied any services provided on the grounds of race, color, national origin, ancestry, age, disability (physical or mental), sex, sexual orientation, gender identity, marital or domestic partner status, religion, political beliefs or affiliation, familial or parental status (including pregnancy), medical condition (cancer-related), military service, or genetic information.

No otherwise qualified individual with a disability shall, solely by reason of a disability, be excluded from the participation in, be denied the benefits of, or be subjected to discrimination in the performance of any services.

The above policies are incorporated by HSA into the policies for the Coordinated Entry System (CES). Additional policies relating specifically to CES are listed below:

The CES is widely marketed and available to:

- All eligible persons regardless of race, color, national origin, religion, sex, age, familial status, disability, actual or perceived sexual orientation, gender identity, or marital status.
- All populations and subpopulations in the CoC's geographic area, including people experiencing chronic homelessness, veterans, families with children, youth, and survivors of domestic violence, have fair and equal access to the coordinated entry process, regardless of the location or method by which they access the system.
- Individuals with disabilities; and
- Persons with Limited English Proficiency (LEP).

The prioritization policy and process adopted by the CoC is designed to be fair and non-discriminatory:

- To the maximum extent possible, prioritization criteria are designed to be objective and to focus on concrete housing barriers and vulnerability factors;
- Clients are not required to disclose the presence of a disability in order to be prioritized and presence of a disability by itself is not a prioritization factor.

e. Other Policies and Standards

1. Policies Relating to Families With Children

CoC- and ESG-funded organizations providing shelter, services or housing to families with children who are experiencing homelessness and will have written policies in place that are consistent with the requirements of the McKinney Vento Act relating to education of children experiencing homelessness. Provider shall designate a staff person to be responsible for ensuring that children being served in the program are enrolled in

school and connected to appropriate services in the community, including early childhood programs such as Head Start. Provider will affirmatively inform participants of their educational rights under the McKinney Vento Act. programs will ensure all children are enrolled in early childhood programs or in school and connected to appropriate services in the community.

CoC- and ESG-funded emergency shelters, transitional housing, rapid rehousing and permanent housing project shall adopt written policies that implement the prohibition against family separation in the CoC Interim Rule (Section 578.95). The age and gender of any children under age 18 must not be used as a basis for denying a family's admission to a shelter or housing project.

2. Policies Relating to Survivors of Domestic Violence (DV)

The San Mateo County CoC provides individuals and families fleeing domestic violence access to housing and trauma-informed, victim-centered services that prioritize the survivor's safety needs, accommodate their unique circumstances, and maximize client choice. The Continuum of Care Steering Committee has delegated to the Human Services Agency (as CoC Lead Agency) the role of developing detailed DV policies that align with these CoC policies. HSA worked in collaboration with CORA (San Mateo County's victim service provider) and homeless system program providers on the development of the standards. Each program provider maintains their own written program policies that align with the CoC standards.

The CoC has established the following policies relating to domestic violence survivors to implement the applicable provisions of 78 FR 47717 The Violence Against Women Reauthorization Act (VAWA) of 2013 and 24 CFR 5.2005 VAWA protections, as set forth in HUD's Final Rule: Violence Against Women Reauthorization Act of 2013: Implementation in HUD Housing Programs, published on November 16, 2016 and codified in the amended CoC Interim Rule: 24 CFR 578.99(j), published in April 2017.:

- Prohibition on Denying, Terminating and Evicting Protected Program Participants. All CoC and ESG funded providers must have a policy that documents how they are complying with HUD requirements relating to the denial of service, termination or eviction of participants because they have experienced or are experiencing domestic violence, dating violence, sexual assault or stalking.
- Providing Notice of Occupancy Rights, VAWA Protections and Certification Form. All CoC housing providers must provide program applicants and participants with the Notice of Occupancy Rights Under VAWA and the VAWA Certification Form to document an incident of domestic violence, dating violence, sexual assault, or stalking. Providers must document that clients were informed of their rights and provided copies of the notices. A signed copy of acknowledgement must be maintained in client files.

- **Contract, Lease and Occupancy Agreement Provisions.** All covered housing providers must include language in agreements or addendums with housing owners or landlords detailing VAWA protections.
- **Emergency Transfer Requirements.** In accordance with the Violence Against Women Act (VAWA), all TH and PSH housing providers in the San Mateo County CoC must allow tenants who are victims of domestic violence, dating violence, sexual assault, or stalking to request an emergency transfer from the tenant's current unit to another unit. The ability to request a transfer must be available regardless of sex, gender identity, or sexual orientation. Programs must have a HUD-compliant written policy on Emergency Transfers.
- **Documentation of Domestic Violence.** To document that clients are eligible to receive VAWA protections, housing providers may, but are not required to, ask participants to provide documentation certifying incidents of domestic violence, dating violence, sexual assault, or stalking, to assert VAWA's protections. Oral statements by the individual or head of household that the household is fleeing or attempting to flee domestic violence shall be accepted. Third party verification is not required.
- **Protecting Sensitive Data.** Programs that are primarily for survivors of DV may not enter data into HMIS but must maintain an HMIS compliant database. Non victim service providers may enter data into HMIS but may not refuse assistance to households that are fleeing DV who do not wish their data to be entered into HMIS. Agencies must ensure they have policies and infrastructure in place to secure sensitive data. Data privacy procedures are detailed in the HMIS Policies and Procedures.
- **Safety.** The location of confidential DV programs shall not be made public. Coordinated Entry System (CES) staff shall receive training to implement safety protocols and make referrals to the DV system as needed for households that are fleeing.
- **Access.** The CES shall ensure equal access to homeless system programs for households fleeing domestic violence, regardless of whether they initially contact a victim services provider or other homeless system provider, as detailed in the CES policies. CoC and ESG funded programs shall not deny admission or terminate assistance to a household on the grounds that they are fleeing or attempting to flee domestic violence, as specified in HSA's standards for shelter, rapid re-housing and Permanent Supportive Housing.

In addition to the above policies, HSA, as the CoC Lead Agency, provides technical assistance to any provider in the CoC covered by HUD's final rule implementing housing provisions under the Violence Against Women Reauthorization Act of 2013 (VAWA), published November 16, 2018. This includes assisting providers in ensuring that their policies are in compliance regarding emergency transfers to allow victims of domestic and/or sexual violence to move to another safe and available unit if they fear for their life and safety. The Lead Agency also provides technical assistance to providers to

ensure they comply with other provisions of this rule, including rules relating to tenant notification requirements, third party documentation requirements (unnecessary so long as a victim self-certifies their need for VAWA protections), and requirements that housing providers do not deny tenancy or occupancy rights based solely on adverse factors that are a direct result of being a survivor of domestic or sexual violence.

3. Other Policies

All providers shall adopt strategies to help program participants obtain mainstream benefits.

The CoC will provide regular training for providers on topics relevant to implementation of these policies and standards, including training on how to effectively implement HUD's rule on [Equal Access to Housing in HUD Programs Regardless of Sexual Orientation or Gender Identity](#).

The CoC Lead Agency (HSA) shall require all providers receiving funding through HSA to comply with all applicable local, state and federal anti-discrimination requirements, including prohibiting discrimination based on age, sex, gender, LGBTQ status, marital status or disability.

4. Procedures for Monitoring Outcomes of CoC and ESG Recipients

The San Mateo County Human Services Agency (HSA), Center on Homelessness (the CoC Lead Agency) is responsible for regular monitoring of all emergency shelter, transitional housing, outreach, supportive housing, rapid re-housing and prevention programs as part of the HSA's contract management responsibilities. This includes all CoC and ESG funded projects. Monitoring shall include site visits, analysis of spending rates, review of financial information, review of occupancy data, and a review of whether projects are meeting the performance benchmarks established by HUD and the CoC. Specific performance measures to be monitored shall include: utilization rates, increasing housing stability, participant eligibility, length of time homeless, destination upon exit, increasing income, and connecting to mainstream benefits.

The CoC Project Performance subcommittee shall work with the Lead Agency staff to conduct an annual assessment of how well CoC and ESG projects are performing, identify those that are underachieving either in terms of outcomes, spending, effectiveness, or other factors, and recommends whether projects should be offered technical assistance to improve performance or should be candidates for grant re-allocation.

The San Mateo County Department of Housing (DOH), the County's ESG recipient, is responsible for coordinating closely with the CoC in regards to ESG funding. There is a designated slot for a CoC representative on the HCDC board which allocates ESG funding. The DOH has a designated representative on the CoC Steering Committee.

The CoC Steering Committee shall consult on relevant sections of the Consolidated Plan for the County and four entitlement jurisdictions, including sections covering funding priorities for the County's ESG funds. DOH works closely with the CoC Lead Agency, the San Mateo County Human Services Agency (HSA), on awarding contracts, gathering community input, data analysis and contract monitoring. The CoC Lead Agency is also the HMIS Lead Agency and develops the policies and procedures for operation and administration of HMIS for ESG funded projects. The CoC Lead Agency shall evaluate and rank local applications for State ESG funding in accordance with priorities established by the CoC Steering Committee.

Attachment C: HMIS Policies and Procedures Manual

County of San Mateo
Human Services Agency
HMIS Policies and Procedures

*County of San Mateo's Homeless Management Information System
will provide standardized and timely information
to improve access to our housing and services
and strengthen our effort to end homelessness.*

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Contact information/User Support

Should you have any questions or technical difficulty regarding the Clarity HMIS application, or need to add or remove users, please contact the Human Services Agency, Business Systems Group Service Desk to submit a support ticket:

Human Services Agency Business Systems Group
HSA_ServiceDesk@smcgov.org
650-802-7573

Or the County of San Mateo Human Services Agency HMIS Coordinator can help troubleshoot:

Brian Eggers
BEggers@smcgov.org
(650) 802-5083

Background

The Homeless Management Information System (HMIS) enable data from a variety of service providers to be combined to reveal a more comprehensive picture of client needs. In San Mateo County and elsewhere, this is accomplished via the secure, private, client centric and centralized system by BitFocus (the vendor), called Clarity Human Services (Clarity).

History

In 2000 Congress instructed the U.S. Department of Housing and Urban Development to take measures to improve available data concerning homelessness in the United States. In response, HUD obligated all Continuum of Care regions to implement region-wide databases that would allow an unduplicated count of service users.

Specifically, Congress mandated HUD to collect information on the number of persons assisted through the McKinney-Vento Act. The Omnibus Appropriations Act of 2003 (Pub. L. 108-7) in its conference committee report noted:

HUD is directed to begin collecting data on the percentage and number of beds and supportive services programs that are serving people who are chronically disabled and/or chronically homeless . . . HUD should continue its collaborative efforts with local jurisdictions to collect an array of data on homelessness in order to analyze patterns of use of assistance, including how many people enter and exit the homeless assistance system, and to assess the effectiveness of the homeless assistance system.

Previously in FY 1999 HUD Appropriations Act, Congress directed HUD to collect data from representative samples of existing HMIS systems,

Collect, at a minimum, the following data: The unduplicated count of clients served; client characteristics such as age, race, disability status, units (days) and type of housing received (shelter, transitional, permanent); and services rendered. Outcome information such as housing stability, income and health status should be collected.¹

¹ See Federal Register, Volume 68, No 140 (July 22, 2003) for further overview of federal mandates for HMIS.

Eligible Programs

Programs which may use HMIS include, but are not limited to:

- Emergency Shelters and Transitional Housing Programs serving homeless adults, families and youth²
- Street and Community outreach programs to persons who are homeless
- Supportive Service programs serving persons who are homeless

In addition, HMIS participation is a requirement of various funders. On the Federal level, HMIS participation is mandated for all service and housing providers that receive HUD funding under the McKinney-Vento Act, which includes:

- Supportive Housing Program (SHP)
- Permanent Supportive Housing
- Other Permanent Housing
- Shelter Plus Care
- Section 8 Moderate Rehab for Single Room Occupancy
- Emergency Solutions Grant (ESG)
- Housing for Persons with AIDS (HOPWA)

Ideally all emergency shelters, transitional and supportive housing program, and homeless outreach programs will participate in HMIS. The more agencies that participate in the system the better. More agencies equal more comprehensive data, and therefore improved information for planning and policymaking. More users within agencies means that clients will more likely receive appropriate services, since their caseworkers may have an opportunity to see relevant case history from prior service episodes, and will have an opportunity to rely upon the systems case planning, referral, and data protection capacities.

² In general, domestic violence shelters are prohibited from participating in HMIS by federal legislation, under the Violence Against Women Act (VAWA).

Why is this Important?

Because agencies that serve people experiencing homelessness work for the public welfare of our communities, they must remain accountable to their program participants, funders, and community partners. One way to remain accountable is to be driven and focused on a mission and to report progress on accomplishing that mission. Programs should be transparent about what outcomes and goals they have achieved. HMIS allows programs to manage data in a secure and standardized environment that also offers an aggregate view of our county's homelessness. We hope that with better information we will be able to plan, work, and achieve greater success in serving participants with meaningful services and housing options and end a social problem that can be fixed.

Expectations for HMIS Partner Agencies

Human services agencies that participate in San Mateo County's HMIS are referred to as "partner agencies." Each partner agency needs to follow certain guidelines to help keep the HMIS on track and to maintain data privacy and accuracy.

Implementing HMIS

To prepare for participating in San Mateo County's HMIS, agency administration should:

- Dedicate at least one computer to the use of HMIS. The computer must have access to the Internet and must be running a modern browser. The computer(s) should be in an area that is not accessible to the public or any staff not cleared to see identifying information of the agency's clients.
- Familiarize themselves with HMIS by attending a HMIS training session or by calling the HMIS coordinator and scheduling a HMIS site visit.
- Decide how many system end-users they will need. "End users" are the people who will actually enter data into the HMIS and use the system to run reports that the agency will need for funding purposes, or find useful for internal management. Typical end users include intake workers and case managers. Typically, the more end-users in an agency, the more useful the system becomes.
- Familiarize prospective end-users with basic computer skills if necessary (e.g., windows, using a mouse, navigating the internet).
- Designate a primary HMIS contact within the agency.

- Develop a clear understanding of current reporting needs and funding streams.
- Understand the agency's data privacy requirements. For example, is the agency covered by HIPAA?
- Who will run reports? Which ones? How often? Note that we strongly recommend running reports on a monthly or weekly basis to help check for data errors. This particularly includes program entry and exit dates and the progress of the client receiving services. The agency is responsible for maintaining accurate data, and regularly running reports is a good way to double check that information has been properly recorded in the system. Regular reporting may also provide the agency with important information about its clients and programmatic goals.
- Data privacy practices and client informed consent. Before entering actual data, agencies must develop or adopt any necessary client notice, consent, and release of information forms, as well as their own written data privacy policy.

Reporting

Agencies are required to run reports in the system as directed by their funding sources, and should run these reports prior to actual report due dates to check for data entry errors. Agencies are strongly encouraged to use the systems reporting features on a more frequent weekly or monthly basis to check for data entry errors. Agencies are responsible for the quality of the data that they report.

General On-Going Commitments and Data Quality

Participating agencies should be prepared to commit to the following:

Maintaining accurate data. The agency should run system reports on a regular weekly or monthly basis to check for errors. The agency should contact the County of San Mateo's Human Services Agency, Business Systems Group 650-802-7573 or HSA_ServiceDesk@smcgov.org if needing assistance with data correction, including deleting any client records that were entered by mistake.

Obtaining written client consent, or releases of information, for data sharing (if the agency desires to share client data with other HMIS partner agencies). HIPAA-covered agencies also must allow clients to opt out of research uses of HMIS data.

Cancel HMIS access of any end-user who is terminated from employment, leaves the agency, or needs to be restricted from the system for any other reason. The agency needs to contact the County of San Mateo's Human Services Agency, Business Systems Group 650-802-7573 or

HSA_ServiceDesk@smcgov.org as soon as possible and no more than 24 hours after the end-user is terminated.

Information Entry Standards

- Information entered into County of San Mateo’s HMIS will be truthful, accurate and complete.
- Agency staff will not enter information about clients into County of San Mateo’s HMIS database unless the information is required for a legitimate business purpose such as to provide services to the Client, to conduct evaluation or research, to administer the program, or to comply with regulatory requirements.
- When adding to, or modifying data in, an existing client’s HMIS record, end users should check to see if that client is currently receiving services from a different HMIS partner agency (e.g., entered into, but not yet exited from another program).

No Conditioning of Services

Agencies shall not decline to provide any services to a client based upon a client's refusal to sign a Release of Information form or refusing to allow entry of information into County of San Mateo’s HMIS. (Note: This does not over-ride agency policies or funding restrictions that may require certain data from a client before an agency is able to serve the client. However, the client may be offered the opportunity to be entered into HMIS as a “private” client – e.g., all client information will be hidden from other provider agencies.)

Data Privacy and Protection

Program participants have a clear right to:

- Keep their personal information held private.
- Have their preferences with regard to the entry and sharing of client information within County of San Mateo’s HMIS respected, whether they prefer their data to be shared with other partner agencies or not.
- Request a change in their information sharing preferences.
- Refuse to allow entry of identifiable information into County of San Mateo’s HMIS without being denied services (except if entry of identifiable information is necessary for program operation).

- Have only truthful and accurate information about them entered into the system.
- Not be asked for information unless the information is required for a legitimate business purpose such as to provide services to the client.
- Inspect and obtain a copy of their own information maintained within County of San Mateo's HMIS (except for information that is used in preparation for a criminal or civil court case under release by subpoena).
- File grievances related to the HMIS without retaliation.

Agencies are responsible for the actions of their users. Among the steps each agency will take to maintain data privacy and security are:

- Access. Agencies will permit access to County of San Mateo's HMIS or client-level information obtained from it only to paid employees or who need access to County of San Mateo's HMIS for legitimate business purposes (such as to provide services to the Client, to conduct evaluation or research, to administer the program, or to comply with regulatory requirements).
- Usernames and passwords. Usernames and passwords shall not be stored or displayed in any publicly accessible location. Usernames and passwords may only be used by the person to whom they are assigned; licenses may not be shared under any circumstance. Each staff who accesses HMIS must have a unique username and password.
- Change in Employee status. If an authorized user separates from employment with a Core Service Agency or Homeless Service Provider, notification must be made via a support ticket to the HSA Services desk by contacting County of San Mateo's Human Services Agency, Business Systems Group at HSA_ServiceDesk@smcgov.org or 650-802-7573. The ticket shall request termination of the user's rights within 24 hours of an employee leaving employment to terminate access to the Clarity account.
- Training. Each agency will only allow their staff to access County of San Mateo's HMIS after the authorized user receives appropriate confidentiality training and has signed an Oath of Confidentiality. The Oath of Confidentiality represents the user's agreement to the following terms and conditions:
 - Do not access, review or discuss client information unless required in the completion of assigned responsibilities. Do not access any information for any unlawful or improper purpose.

- Do not disclose or discuss client information to other staff who do not have a legitimate business need for that information.
- Do not attempt to access systems or client data to which you lack authorization.
- Do not attempt to access client information through a colleague(s) unless it is for a legitimate business purpose.
- Do not change or delete any client data unless such a change or deletion is part of your job function.
- Do not attempt to access client information for personal use for any reason.
- Do not attempt to access client information for use that exceeds the scope of the Clarity User's duties and responsibilities.
- Staff should collect printed client information promptly from shared printers and photocopiers. Where the technology is available, "delayed" or "confidential" printing options should be selected for highly sensitive document production. All printed client information should be shredded when no longer needed or kept in a locked cabinet.
- Do not make or store printed or media copies of client information unless it is a necessary part of your job.
- Do not share your access information (user name and password) with anyone.

Data Sharing

One of the potential benefits – and potential risks – of the County of San Mateo's HMIS is the ability to easily share data between agencies in a standardized format. In either case, clients have the right to control access to their data and must sign a Client Release of Information form before an agency can share information about the client with other agencies via the County of San Mateo's HMIS. Note that agency staff must be prepared to explain the HMIS system and agency privacy policies upon request.

HMIS project staff at the County of San Mateo, Human Services Agency, Center on Homelessness, will have access to all information entered into the system. The Human Services Agency routinely deals with sensitive data and abide by strict data privacy practices. The

Human Services Agency will only access identifying information for business-related reasons, including administering the database, conducting research, and preparing reports (only aggregate information will be included in reports).

Accountability for Noncompliance

The Human Services Agency, Center on Homelessness will review progress made by participating programs with HMIS. The Center on Homelessness may provide notice to the local Continuum of Care when agencies are found not to be in compliance with data entry or have violated the code of ethics or privacy concerns.

Expectations for HMIS System Administrator

Providing an HMIS

As system administrator for County of San Mateo's HMIS, the Human Services Agency provides all of the necessary equipment, staff, and technology to operate and maintain the central site. This is done in partnership with the vendor (BitFocus) and San Mateo County Human Services Agency, which is the CoC Lead Agency and the HMIS Lead Agency.

In addition, the system administrator will work with Continuum of Care Coordinators, participating agencies, end-users, vendors, and other HMIS stakeholders to ensure compliance with HMIS-related rules and standards enacted by the U.S. Department of Housing and Urban Development, meaning the current HMIS Data Standard. This is to include, but not limited to:

- Review, revise, and approve a privacy plan, security plan, and data quality plan for the HMIS
- Ensure consistent participation of recipients and sub recipients in the HMIS; and
- Ensure the HMIS is administered in compliance with requirements prescribed by HUD in the HMIS Data Standards

Notice of Planned Interruption in Service

Whenever possible, the Human Services Agency will notify participating agencies of planned interruptions to service at least 3 business days prior to the interruption.

HMIS Policies Continued

Data Requests

Agencies will respond to all data requests submitted by individual program participants served by that particular agency. Any requests received by an agency that the agency is unable to fulfill will be forwarded to HSA.

Requests for inspection or copies of personal data or private information or by individual program participants shall be accommodated with no service charges or fees. Any agency, or the County of San Mateo's Human Services Agency, may deny access to information that is legally protected due to current or pending legal activity. An agency or program may deny inspection or copies of personal information if the individual program participant has requested the same data or information more than two times in a calendar year (unless substantive change have been made to the record – program participants may request another copy upon substantive change to their records).

Program participants may request amendments or corrections to their record. Any such requests shall be honored unless program staff have a justifiable reason for not making the change, including that the requested change would misrepresent client characteristics, service dates, or the like. Requests for changes that are not honored may be recorded under client case notes in the HMIS. Requests for multiple alterations in any calendar year may be denied due to administrative burden or harassment by the individual program participant (unless substantive changes have been made to the record – program participants may request additional alterations following substantive changes to their records).

Grievance Procedures for Individual Program Participants

Users must permit clients to file a written complaint regarding the use or treatment of their information within County of San Mateo's HMIS. Clients may file a written complaint with either the Agency/program or with the Center on Homelessness. Clients may not be retaliated against for filing a complaint.

Data Privacy and Security Protection Training

The Human Services Agency encourages all participating agencies or programs to routinely train their personnel on best practices in data privacy and security protection. Data privacy is emphasized in HMIS training sessions, but more general training on this topic is encouraged.

Data Accuracy

Agencies are responsible for the accuracy of the data they enter into the HMIS. Agencies are strongly encouraged to run reports on a monthly or weekly basis to check data and consult with the Human Services Agency to correct any problems.

The Center on Homelessness shall regularly check data quality in County of San Mateo's HMIS. Agencies, or particular end-users, that make repeated errors may be required to attend more training, or may be barred from using HMIS if they are unwilling to improve data entry practices.

Third Party Access to Data

No request for private, personal information about an individual program participant from a third party or entity shall be honored unless the request is legally binding.

All requests for system-wide aggregate data or information shall be forwarded to the Human Services Agency.

Unused Licenses

If any license goes unused for more than 90 days, that license may be terminated. The Requesting Agency will be notified prior to deactivation of the license and the agency will have 5 business days to respond with a request if the license is to be continued.