### **Before Starting the CoC Application**

The CoC Consolidated Application is made up of two parts: the CoC Application and the CoC Priority Listing, with all of the CoC's project applications either approved and ranked, or rejected. The Collaborative Applicant is responsible for submitting both the CoC Application and the CoC Priority Listing in order for the CoC Consolidated Application to be considered complete.

The Collaborative Applicant is responsible for:

- 1. Reviewing the FY 2017 CoC Program Competition NOFA in its entirety for specific application and program requirements.
- 2. Ensuring all questions are answered completely.
- Reviewing the FY 2017 CoC Consolidated Application Detailed Instructions, which gives additional information for each question.
- 4. Ensuring all imported responses in the application are fully reviewed and updated as needed.
- 5. The Collaborative Applicant must review and utilize responses provided by project applicants in their Project Applications.
- 6. Some questions require the Collaborative Applicant to attach documentation to receive credit for the question. This will be identified in the question.
- Note: For some questions, HUD has provided documents to assist Collaborative Applicants in filling out responses. These are noted in the application.
- All questions marked with an asterisk (\*) are mandatory and must be completed in order to submit the CoC Application.

For CoC Application Detailed Instructions click here.

FY2017 CoC Application Page 1 09/25/2017
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### 1A. Continuum of Care (CoC) Identification

#### Instructions:

For guidance on completing this application, please reference the FY 2017 CoC Application Detailed Instructions and the FY 2017 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

**1A-1. CoC Name and Number:** GA-508 - DeKalb County CoC

1A-2. Collaborative Applicant Name: DeKalb County, Georgia

1A-3. CoC Designation: CA

**1A-4. HMIS Lead:** Georgia Department of Community Affairs

### 1B. Continuum of Care (CoC) Engagement

#### Instructions:

FY2017 CoC Application

For guidance on completing this application, please reference the FY 2017 CoC Application Detailed Instructions and the FY 2017 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

1B-1. From the list below, select those organization(s) and/or person(s) that participate in CoC meetings. Using the drop-down boxes, indicate if the organization(s) and/or person(s): (1) participate in CoC meetings; and (2) vote, including selection of CoC Board members.

Responses should be for the period from 5/1/16 to 4/30/17.

Local Government Staff/Officials  CDBG/HOME/ESG Entitlement Jurisdiction  Law Enforcement  Yes  Local Jail(s)  Hospital(s)  EMT/Crisis Response Team(s)  Mental Health Service Organizations  Substance Abuse Service Organizations  Affordable Housing Developer(s)  Disability Service Organizations  Yes  Public Housing Authorities  Yes  Yes  Public Housing Authorities	
Law Enforcement  Local Jail(s)  Hospital(s)  EMT/Crisis Response Team(s)  Mental Health Service Organizations  Substance Abuse Service Organizations  Affordable Housing Developer(s)  Disability Service Organizations  Public Housing Authorities  Yes  Yes  Yes  Public Housing Authorities	Yes
Local Jail(s)  Hospital(s)  EMT/Crisis Response Team(s)  Mental Health Service Organizations  Substance Abuse Service Organizations  Affordable Housing Developer(s)  Disability Service Organizations  Yes  Disability Advocates  Public Housing Authorities	Yes
Hospital(s)  EMT/Crisis Response Team(s)  Mental Health Service Organizations  Substance Abuse Service Organizations  Affordable Housing Developer(s)  Disability Service Organizations  Yes  Disability Advocates  Public Housing Authorities  Yes	Yes
EMT/Crisis Response Team(s)  Mental Health Service Organizations  Substance Abuse Service Organizations  Affordable Housing Developer(s)  Disability Service Organizations  Yes  Disability Advocates  Public Housing Authorities  Yes	Yes
Mental Health Service Organizations  Substance Abuse Service Organizations  Affordable Housing Developer(s)  Disability Service Organizations  Yes  Disability Advocates  Public Housing Authorities  Yes	Yes
Substance Abuse Service Organizations  Affordable Housing Developer(s)  Disability Service Organizations  Public Housing Authorities  Yes  Yes  Yes	Yes
Affordable Housing Developer(s)  Disability Service Organizations  Public Housing Authorities  Yes  Yes	Yes
Disability Service Organizations  Public Housing Authorities  Yes  Yes  Yes	Yes
Disability Advocates  Public Housing Authorities  Yes  Yes	Yes
Public Housing Authorities Yes	Yes
	Yes
	Yes
CoC Funded Youth Homeless Organizations  Not Applicable	No
Non-CoC Funded Youth Homeless Organizations Yes	Yes
Youth Advocates Yes	Yes
School Administrators/Homeless Liaisons Yes	Yes
CoC Funded Victim Service Providers Not Applicable	No
Non-CoC Funded Victim Service Providers  Yes	Yes
Domestic Violence Advocates Yes	Yes
Street Outreach Team(s) Yes	Yes
Lesbian, Gay, Bisexual, Transgender (LGBT) Advocates	Yes
LGBT Service Organizations Yes	Yes
Agencies that serve survivors of human trafficking  Yes	Yes
Other homeless subpopulation advocates Yes	Yes
Homeless or Formerly Homeless Persons Yes	
Other:(limit 50 characters)	No

Page 3

09/25/2017

Faith Community	
VA/SSVF Grantees	

## Applicant must select Yes, No or Not Applicable for all of the listed organization/person categories in 1B-1.

# 1B-1a. Describe the specific strategy(s) the CoC uses to solicit and consider opinions from organizations and/or persons that have an interest in preventing or ending homelessness. (limit 1000 characters)

We promote community-wide planning, coordination & strategic use of resources to address homelessness by having monthly meetings of the COC, Planning & Service Coord. Committees, Case Mgrs/ HMIS User Groups & Bimonthly mtgs of the Governance Bd. To ensure full participation & consider the full range of opinions, the CoC solicits input from stakeholders inc. MH/SA Orgs, PSH, Youth/DV Advo. & providers w/ direct experience preventing or ending homelessness to participate in CoC activities, meetings & on committees through targeted outreach/recruitment and opportunities to provide input. We post info, announcements & mtg notices to CoC list serves, newspapers and county websites & distribute info directly to organizations, community groups and citizens. Stakeholder input guides COC policy & practice. For example, input solicited from Victim Services Provider reflected in CoC Written Standards and Coordinated Entry process & CoC training on victim access, safety & confidentiality.

# 1B-2. Describe the CoC's open invitation process for soliciting new members, including any special outreach. (limit 1000 characters)

The CoC has over 250 members, governance board & six committees w/respons. for planning, service coord. & eval. The CoC invites new members by public open invit. CONTINUOUSLY by post on DeKalb website, MONTHLY at CoC Mtgs & by direct recruitment of needed partners 3-5 x/PER YEAR; The DeKalb PHA Dir recruited to serve on CoC Board & chair Service Coord. Commit. - increasing perm housing for homeless fams w/HCV set asides. DeKalb DFCS Dir recruited to serve on CoC Board ensures service coord. & max of TANF & MOE to house vulnerable families. DV Provider serves on Written Standards and Coord.Entry committee to provide critical consult & CoC training on victim access, safety & confidentiality. Youth Service Provider serves on Coordinated Entry committee & provides consult & training on key issues related to youth outreach, services & LGBTQ access to services & housing. A formerly homeless veteran recruited by SSVF & now serves on CoC Governance Board which meets monthly.

# 1B-3. Describe how the CoC notified the public that it will accept and consider proposals from organizations that have not previously received CoC Program funding in the FY 2017 CoC Program Competition, even if the CoC is not applying for new projects in FY 2017. The response must

FY2017 CoC Application Page 4 09/25/2017
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# include the date(s) the CoC made publicly knowing they were open to proposals. (limit 1000 characters)

The DeKalb CoC accepts & considers proposals from all organizations interested in ending homelessness. Public notices announcing the opening of the DeKalb CoC Local 2017 Competition for HUD NOFA funding were posted 5/22/17 on the DeKalb County Website at https://www.dekalbcountyga.gov, in Champion Newspaper on 5/22/17 and to the CoC Email distribution list on 5/25/17. 8 ORGANIZATIONS NOT CURRENTLY FUNDED BY THE COC ATTENDED THE NOFA INFO MTG. Local apps for new and renewal project funding, application and submission guidelines were distributed at an Application Information Meeting on 6/2/17 and posted along with meeting materials to the DeKalb Website on 6/2/17. Application technical assistance was provided June 5 – 9, 2017. In response, the Collaborative App received 19 applications for renewal funding and 5 applications for new funding on 6/16/17. 3 OF THE 5 NEW PROJECT APPS WERE SUBMITTED BY ORGANIZATIONS THAT HAVE NOT PREVIOUSLY RECEIVED COC PROGRAM FUNDING.

### 1C. Continuum of Care (CoC) Coordination

#### Instructions:

For guidance on completing this application, please reference the FY 2017 CoC Application Detailed Instructions and the FY 2017 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

1C-1. Using the chart below, identify the Federal, State, Local, Private and Other organizations that serve homeless individuals, families, unaccompanied youth, persons who are fleeing domestic violence, or those at risk of homelessness that are included in the CoCs coordination; planning and operation of projects.

Only select "Not Applicable" if the funding source(s) do not exist in the CoC's geographic area.

Entities or Organizations the CoC coordinates planning and operation of projects	Coordinates with Planning and Operation of Projects
Housing Opportunities for Persons with AIDS (HOPWA)	Yes
Temporary Assistance for Needy Families (TANF)	Yes
Runaway and Homeless Youth (RHY)	Not Applicable
Head Start Program	Yes
Housing and service programs funded through Department of Justice (DOJ) resources	Yes
Housing and service programs funded through Health and Human Services (HHS) resources	Yes
Housing and service programs funded through other Federal resources	Yes
Housing and service programs funded through state government resources	Yes
Housing and service programs funded through local government resources	Yes
Housing and service programs funded through private entities, including foundations	Yes
Other:(limit 50 characters)	

1C-2. Describe how the CoC actively consults with Emergency Solutions Grant (ESG) recipient's in the planning and allocation of ESG funds. Include in the response: (1) the interactions that occur between the CoC and the ESG Recipients in the planning and allocation of funds; (2) the CoCs participation in the local Consolidated Plan jurisdiction(s) process by providing Point-in-Time (PIT) and Housing Inventory Count (HIC) data to the Consolidated Plan jurisdictions; and (3) how the CoC ensures local homelessness information is clearly communicated and addressed in Consolidated Plan updates. (limit 1000 characters)

DeKalb Cty Com. Devel. Dept serves as the admin of the DeKalb Emergency Solutions Grant Program (ESGP) & consults in wkly mtg w/ ESG recipient to support COC/ESG service coord & outreach. Key funding criteria for ESG

FY2017 CoC Application	Page 6	09/25/2017
------------------------	--------	------------

**Project:** GA-508 FY2017 COC\_REG\_2017\_149606

funded projects include consistency with HUD priorities, active CoC, Coordinated Entry & HMIS participation. The CoC also consults with other Jurisdictional CoCs to reduce duplication of ESG funding, develop cross jurisdictional written standards and administration of the HMIS. The ConPlan for DeKalb outlines the jurisdictions 5yr goals for reducing & ending homlessness. The 1 yr plan goal of serving a min of 100 homeless/at-risk persons is met in collab w/ CoC and ESG funded agencies. Annual plan update also include recommendations for ESGP funding. Info provided by CoC to the ConPlan jurisd. includes info on local homeless demogr. housing & services – data derived from HMIS, CAPER, PIT & HIC/AHAR. CoC updates are given 1/y at ConPlan dept mts & workshops.

# 1C-3. CoCs must demonstrate the local efforts to address the unique needs of persons, and their families, fleeing domestic violence that includes access to housing and services that prioritizes safety and confidentiality of program participants. (limit 1000 characters)

CoC coord w/Vict.ServiceProvidrs(VSP) ensures hmless survi/fams fleeing DV safe/secure housing to prev/end hmlessness. Non-\$\$ VSPs active in CoC & Writ.Standrds Comm, mo case staffing, input on CoordEntry/CE & 2017 CoC traing on safety caseplanning/confidentiality. PRIORITIZATION CoC CE uses comm. assess tool to ID & immed. divert DV indiv. DV Hotline or VSP for full assess & safe shelter. ACCESS TO HOUSING & SERVICES 2016 CoC realloc. \$ supports new RRH project w/ med-long term rental assist & intensive CM to fams, persons fleeing DV & youth. ESGP funds emerg shel. & trans hsing for DV w/kids & CoC collabs w/ Cty to ensure VSPs recv. Co. Gen funds. SAFETY & CONFIDENTIALITY incorp in coc writ stndrs & VSP have gated facil., secured entry, call screening & coding of client files by # vs name for stat. reporting. PARTICIPANT DATA SHARING secured by de-identified aggregate data from Apricot. CLIENT CHOICE if client chooses to return to abuser advocates safety plan & follow up for 1yr.

1C-3a. CoCs must describe the following: (1) how regular training is provided to CoC providers and operators of coordinated entry processes that addresses best practices in serving survivors of domestic violence; (2) how the CoC uses statistics and other available data about domestic violence, including aggregate data from comparable databases, as appropriate, to assess the scope of community needs related to domestic violence and homelessness; and (3) the CoC safety and planning protocols and how they are included in the coordinated assessment. (limit 1,000 characters)

1)Women's Resource Cntr (WRC) - DV lead agency for coordinated entry (CE) & srv on CoC planning cmmttee. WRC & DeKalb Cty DA office are keynote spkr once yr at mnthly CoC meeting for ESG&CoC funded agencies & othr human srvc prvdrs. Mnthly training&discussions (define DV, engaging/advocating for survivors, safety protocol, trauma informed care, available srvs) at CE meetings 2) De-identified hhld type (fam/ind) data tracked via CE allows CoC to track # ppl fleeing DV who want DV shelter/srvcs & determine cmty need. GA&US DV stats show impact of DV on kids so WRC created kids Summer Peace Camp to address trauma. Stats show safety critical (1/3 female victims killed yrly) 3) CE

	FY2017 CoC Application	Page 7	09/25/2017
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**Applicant:** DeKalb County, Georgia **Project:** GA-508 FY2017

process: no wrong door access pts; intro script asks if fleeing DV; If yes, ask abt need -srvs/shelter (offer DV specific or othr options to choose); Ask abt safety (if

not safe, develop safety plan); Immediately place in safe&confidential housing. Process described via CE tranings/mtngs & policy&procedures manual

1C-4. Using the chart provided, for each of the Public Housing Agency's (PHA) in the CoC's geographic area: (1) identify the percentage of new admissions to the Public Housing or Housing Choice Voucher (HCV) Programs in the PHA's that were homeless at the time of admission; and (2) indicate whether the PHA has a homeless admission preference in its Public Housing and/or HCV program.

Attachment Required: If the CoC selected, "Yes-Public Housing", "Yes-HCV" or "Yes-Both", attach an excerpt from the PHA(s) written policies or a letter from the PHA(s) that addresses homeless preference.

Public Housing Agency Name	% New Admissions into Public Housing and Housing Choice Voucher Program during FY 2016 who were homeless at entry	PHA has General or Limited Homeless Preference
Housing Authority of DeKalb County		Yes-HCV
Decatur Housing Authority		No
Lithonia Housing Authority		No

1C-4a. For each PHA where there is not a homeless admission preference in their written policies, identify the steps the CoC has taken to encourage the PHA to adopt such a policy. (limit 1000 characters)

DeKalb HA greed to a homeless preference in its HVA program. DeKalb HA also greed to reserve turnover HCVs for the homeless. After CoC informational presentations and CoC/Housing Authority conversations, Decatur Housing Authority agreed to present a proposal to its board to reserve turn-over vouchers for homeless households. Although the Housing Authority's wait list has not opened for 7 years, the Authority will consider placing a homeless preference in their documented plan. Lithonia Housing Auth. is in financial shortfall status and was prohibited from issuing new vouchers. They housed 1 homeless individual in one of their 8 available units.

1C-5. Describe the actions the CoC has taken to: (1) address the needs of Lesbian, Gay, Bisexual, Transgender (LGBT) individuals and their families experiencing homelessness, (2) conduct regular CoC-wide training with providers on how to effectively implement the Equal Access to Housing in HUD Programs Regardless of Sexual Orientation or Gender Idenity, including Gender Identify Equal Access to Housing, Fina Rule; and (3) implementation of an anti-discrimination policy. (limit 1000 characters)

FY2017 CoC Application	Page 8	09/25/2017
------------------------	--------	------------

Unique needs of LGBT individuals & their fams experiencing hmlessness addressed thru: FUNDING CoC & ESG funds provide outreach, emerg. Shel, RRH, cs mgt & support to homeless LGBT youth. MONITORING DeKalb as collab applicant w/resp for monitoring CoC projects, sent Notice CPD-15-02 on 5/23/17-Appropriate Placement for Trans Persons in 1-Sex Emerg Shter & oth Facil. w/ instruc. to review, share w/staff, ensure placement requirements in agency policies and procedures. RECORD AND POLICY REVIEW conducted 9/17 to ensure P/P reflect all federal requirements including ANTI DISCRIMINATION (AD) POLICIES, also reflected in CoC Written Standards for provision of all CoC/ESG services. Onsite monitoring scheduled 10/4-10/9/17. TRAINING conducted at mo CoC general body mtg 8/16/17 on Equal Access to Housing in HUD Programs Regardless of Sexual Orientation or Gender Identify. Annual Training conducted by CHRIS180 w/ content on EA Rule, requirements w/ recomm. & techniques for implementation.

1C-6. Criminalization: Select the specific strategies implemented by the CoC to prevent the criminalization of homelessness in the CoC's geographic area. Select all that apply.

Engaged/educated local policymakers:	Х
Engaged/educated law enforcement:	Х
Engaged/educated local business leaders	Х
Implemented communitywide plans:	X
No strategies have been implemented	
Other:(limit 50 characters)	

When "No Strategies have been implemented" is selected no other checkbox may be selected.

FY2017 CoC Application	Page 9	09/25/2017

### 1D. Continuum of Care (CoC) Discharge Planning

#### Instructions:

For guidance on completing this application, please reference the FY 2017 CoC Application Detailed Instructions and the FY 2017 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

1D-1. Discharge Planning-State and Local: Select from the list provided, the systems of care the CoC coordinates with and assists in state and local discharge planning efforts to ensure those who are discharged from that system of care are not released directly to the streets, emergency shelters, or other homeless assistance programs. Check all that apply.

Foster Care:	X
Health Care:	X
Mental Health Care:	X
Correctional Facilities:	X
None:	

1D-1a. If the applicant did not check all the boxes in 1D-1, provide: (1) an explanation of the reason(s) the CoC does not have a discharge policy in place for the system of care; and (2) provide the actions the CoC is taking or plans to take to coordinate with or assist the State and local discharge planning efforts to ensure persons are not discharged to the street, emergency shelters, or other homeless assistance programs. (limit 1000 characters)

N/A All boxes are checked.

1D-2. Discharge Planning: Select the system(s) of care within the CoC's geographic area the CoC actively coordinates with to ensure persons who have resided in any of the institutions listed below longer than 90 days are not discharged directly to the streets, emergency shelters, or other homeless assistance programs. Check all that apply.

Foster Care:		X
Health Care:		Х
FY2017 CoC Application	Page 10	09/25/2017

Mental Health Care:	X
Correctional Facilities:	Х
None:	

### 1E. Continuum of Care (CoC) Project Review, Ranking, and Selection

#### Instructions

For guidance on completing this application, please reference the FY 2017 CoC Application Detailed Instructions and the FY 2017 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

1E-1. Using the drop-down menu, select the appropriate response(s) that demonstrate the process the CoC used to rank and select project applications in the FY 2017 CoC Program Competition which included (1) the use of objective criteria; (2) at least one factor related to achieving positive housing outcomes; and (3) included a specific method for evaluating projects submitted by victim service providers.

Attachment Required: Public posting of documentation that supports the process the CoC used to rank and select project application.

Used Objective Criteria for Review, Rating, Ranking and Section	Yes
Included at least one factor related to achieving positive housing outcomes	Yes
Included a specific method for evaluating projects submitted by victim service providers	No

#### 1E-2. Severity of Needs and Vulnerabilities

CoCs must provide the extent the CoC considered the severity of needs and vulnerabilities experienced by program participants in their project ranking and selection process. Describe: (1) the specific vulnerabilities the CoC considered; and (2) how the CoC takes these vulnerabilities into account during the ranking and selection process. (See the CoC Application Detailed Instructions for examples of severity of needs and vulnerabilities.) (limit 1000 characters)

SEVERITY OF NEEDS & VULNERATILIBIES CONSIDERED IN RANKING AND SELECTION: New/Renewal Project apps evaluated and rated based on project type, target pop, # and % of clients srved & prioritized in specific subpops, inc. chronic homeless, victims of DV or human trafficking, substance abuse, mentally ill, HIV/AIDs; Max points awarded to projects serving & prioritizing the chronically homeless, w/plus points awarded to projects serving homeless families, individ, unaccompanied youth & veterans. Additional pts awarded for Housing 1st/low barrier services to ind/fam with no/low income, crim histories, current SA, etc. Overall Ratings based on quantitative eval of project align w/ HUD policy prior., prog design, vulnerability of target pop & CH priority, fund util/cost effec, APR/performance measures and client outcomes. Renew/Bonus Proj providing low barrier PH -PSH/RRH & Jt.TH/RRH to chronics, fams, youth, DV, HIV/AIDS, Ment.ILL/SA were ranked high to low and

FY2017 CoC Application	Page 12	09/25/2017	
------------------------	---------	------------	--

prioritized in T1 & T2.

1E-3. Using the following checklist, select: (1) how the CoC made publicly available to potential project applicants an objective ranking and selection process that was used for all project (new and renewal) at least 2 days before the application submission deadline; and (2) all parts of the CoC Consolidated Application, the CoC Application attachments, Priority Listing that includes the reallocation forms and Project Listings that show all project applications submitted to the CoC were either accepted and ranked, or rejected and were made publicly available to project applicants, community members and key stakeholders.

Attachment Required: Documentation demonstrating the objective ranking and selections process and the final version of the completed CoC Consolidated Application, including the CoC Application with attachments, Priority Listing with reallocation forms and all project applications that were accepted and ranked, or rejected (new and renewal) was made publicly available. Attachments must clearly show the date the documents were publicly posted.

Public Posting	
CoC or other Website	X
Email	X
Mail	
Advertising in Local Newspaper(s)	X
Advertising on Radio or Television	
Social Media (Twitter, Facebook, etc.)	

1E-4. Reallocation: Applicants must demonstrate the ability to reallocate lower performing projects to create new, higher performing projects. CoC's may choose from one of the following two options below to answer this question. You do not need to provide an answer for both.

Option 1: The CoC actively encourages new and existing providers to apply for new projects through reallocation.

Attachment Required - Option 1: Documentation that shows the CoC actively encouraged new and existing providers to apply for new projects through reallocation.

Option 2: The CoC has cumulatively reallocated at least 20 percent of the CoC's ARD between FY 2013 and FY 2017 CoC Program Competitions.

No Attachment Required - HUD will calculate the cumulative amount based on the CoCs reallocation forms submitted with each fiscal years Priority Listing.

Reallocation: Option 1

FY2017 CoC Application	Page 13	09/25/2017	
------------------------	---------	------------	--

> Attachment Required - provide documentation that shows the CoC actively encouraged new and existing providers to apply for new projects through reallocation.

1E-5. If the CoC rejected or reduced project 09/13/2017 application(s), enter the date the CoC and Collaborative Applicant notified project applicants their project application(s) were being rejected or reduced in writing outside of e-snaps.

09/13/2017

**Attachment Required: Copies of the written** notification to project applicant(s) that their project application(s) were rejected. Where a project application is being rejected or reduced, the CoC must indicate the reason(s) for the rejection or reduction.

1E-5a. Provide the date the CoC notified applicant(s) their application(s) were accepted and ranked on the Priority Listing,

in writing, outside of e-snaps.

Attachment Required: Copies of the written notification to project applicant(s) their project application(s) were accepted and ranked on the Priority listing.

### **Reallocation Supporting Documentation**

Attachment Required - provide documentation that shows the CoC actively encouraged new and existing providers to apply for new projects through reallocation.

Document Type	Required?	Document Description	Date Attached
Reallocation Supporting Documentation	No		

### **Attachment Details**

**Document Description:** 

### 2A. Homeless Management Information System (HMIS) Implementation

#### Intructions:

For guidance on completing this application, please reference the FY 2017 CoC Application Detailed Instructions and the FY 2017 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

2A-1. Does the CoC have in place a Yes **Governance Charter or other written** documentation (e.g., MOU/MOA) that outlines the roles and responsibilities of the CoC and HMIS Lead?

Attachment Required: If "Yes" is selected, a copy of the sections of the Governance Charter, or MOU/MOA addressing the roles and responsibilities of the CoC and HMIS Lead.

**2A-1a. Provide the page number(s) where the** pages 3-4 in Governance Charter roles and responsibilities of the CoC and HMIS Lead can be found in the attached document(s) referenced in 2A-1. In addition, indicate if the page number applies to the Governance Charter or MOU/MOA.

2A-2. Does the CoC have a HMIS Policies and Yes **Procedures Manual? Attachment Required: If** the response was "Yes", attach a copy of the HMIS Policies and Procedures Manual.

2A-3. What is the name of the HMIS software vendor?

Eccovia Clienttrack

**2A-4.** Using the drop-down boxes, select the Statewide HMIS (multiple CoC) HMIS implementation Coverage area.

2A-5. Per the 2017 HIC use the following chart to indicate the number of beds in the 2017 HIC and in HMIS for each project type within the CoC. If a particular project type does not exist in the CoC then enter "0" for all cells

FY2017 CoC Application	Page 17	09/25/2017
------------------------	---------	------------

#### in that project type.

Project Type	Total Beds in 2017 HIC	Total Beds in HIC Dedicated for DV	Total Beds in HMIS	HMIS Bed Coverage Rate
Emergency Shelter (ESG) beds	111	52	59	100.00%
Safe Haven (SH) beds	0	0	0	
Transitional Housing (TH) beds	230	22	168	80.77%
Rapid Re-Housing (RRH) beds	225	0	225	100.00%
Permanent Supportive Housing (PSH) beds	1,861	0	1,542	82.86%
Other Permanent Housing (OPH) beds	0	0	0	

2A-5a. To receive partial credit, if the bed coverage rate is below 85 percent for any of the project types, the CoC must provide clear steps on how it intends to increase this percentage for each project type over the next 12 months. (limit 1000 characters)

1)We have 100% coverage in ES & RRH, & 80%+ in other two types. For TH: Increase bed coverage from 72% in 2016 to 81% in 2017. The 40 beds not in HMIS are at United Methodist Children's Home. UMCH is faith based & receives no ESG/CoC funding. With new HMIS vendor in 2017, CoC is taking practical steps to get UMCH beds in (i.e. staff received training/login ids, project set up in HMIS, newly hired data quality specialist onboarding agency). 2) PSH: 22 beds (Rosalyn Apts) were in HMIS but weren't included in HMIS Bed in HIC in error b/c they are being entered into HMIS by different agency. This will be corrected for 2018 HIC. Other 297 beds are Decatur Housing Authority (DHA) VASH beds. VA & HUD don't require but encourage VASH beds to be recorded in HMIS. Housing Authorities use own database to report to HUD. CoC is discussing with DHA possibility of entering VASH data in HMIS. If DHA VASH beds not included in bed coverage rate as occurs with AHAR, then PSH would be at 99% coverage

2A-6. Annual Housing Assessment Report 12 (AHAR) Submission: How many Annual Housing Assessment Report (AHAR) tables were accepted and used in the 2016 AHAR?

**2A-7.** Enter the date the CoC submitted the 04/28/2017 2017 Housing Inventory Count (HIC) data into the Homelessness Data Exchange (HDX). (mm/dd/yyyy)

FY2017 CoC Application	Page 18	09/25/2017
o		00, 20, 20

### 2B. Continuum of Care (CoC) Point-in-Time Count

#### Instructions:

For guidance on completing this application, please reference the FY 2017 CoC Application Detailed Instructions and the FY 2017 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

2B-1. Indicate the date of the CoC's 2017 PIT 01/26/2017 count (mm/dd/yyyy). If the PIT count was conducted outside the last 10 days of January 2017, HUD will verify the CoC received a HUD-approved exception.

2B-2. Enter the date the CoC submitted the 04/28/2017 PIT count data in HDX. (mm/dd/yyyy)

# 2C. Continuum of Care (CoC) Point-in-Time (PIT) Count: Methodologies

#### Instructions:

For guidance on completing this application, please reference the FY 2017 CoC Application Detailed Instructions and the FY 2017 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

2C-1. Describe any change in the CoC's sheltered PIT count implementation, including methodology and data quality changes from 2016 to 2017. Specifically, how those changes impacted the CoCs sheltered PIT count results. (limit 1000 characters)

NOT APPLICABLE: DeKalb County didn't make any changes to its implementation of sheltered PIT count from 2016 to 2017. 3 months prior to count we develop a detailed provider questionnaire form based on HUD's "Notice for Housing Inventory Count (HIC) and PIT Count Data Collection for CoC Program & ESG Program". In Dec & Jan, we notify all DeKalb County agencies of upcoming PIT count via email & at meetings. Few days prior to count we send out survey with detailed instructions (on who/how to count) to all CoC sheltered agencies to return completed form day after PIT. The week after PIT, we follow up with providers on any missing data. Submitted prvder survey PIT count data is compared to HMIS, along with prior year's HIC, to check for any inconsistencies. Agencies are contacted to explain or correct discrepancies so that we have most accurate & valid numbers (validity). We have reliable data by repeatedly using HUD best practice method from "A Guide to Counting Sheltered Homeless People"

# 2C-2. Did your CoC change its provider Yes coverage in the 2017 sheltered count?

2C-2a. If "Yes" was selected in 2C-2, enter the change in provider coverage in the 2017 sheltered PIT count, including the number of beds added or removed due to the change.

Beds Added:	0
Beds Removed:	62
Total:	-62

2C-3. Did your CoC add or remove emergency shelter, transitional housing, or Safe-Haven inventory because of funding specific to a Presidentially declared disaster resulting in a change to the CoC's 2017 sheltered PIT count?

	FY2017 CoC Application	Page 20	09/25/2017
--	------------------------	---------	------------

# 2C-3a. If "Yes" was selected in 2C-3, enter the number of beds that were added or removed in 2017 because of a Presidentially declared disaster.

Beds Added:	0
Beds Removed:	0
Total:	0

2C-4. Did the CoC change its unsheltered PIT count implementation, including methodology and data quality changes from 2016 to 2017?

CoCs that did not conduct an unsheltered count in 2016 or did not report unsheltered PIT count data to HUD in 2016 should compare their efforts in 2017 to their efforts in 2015.

2C-4a. Describe any change in the CoC's unsheltered PIT count implementation, including methodology and data quality changes from 2016 to 2017. Specify how those changes impacted the CoC's unsheltered PIT count results. See Detailed Instructions for more information. (limit 1000 characters)

CoC uses 2methods for unsheltered PIT: "Complete coverage"-volunteers drive all CoC finding unsheltered ppl in 1 night; & "Hot Spot" method (HS)-police & outreach workers survey on same night at concealed locations (ie abandoned bldgs or under bridges) where ppl sleep. Enumerators experienced w/ street populations count "HS" areas. Teams leave deployments sites at same time to avoid double counting. CHANGE 1)In past, drive teams only visually counted homeless ppl. For 2017, all teams were asked to survey ppl encountered on PIT night, improves data quality b/c verifies homeless status and asks detailed questions about veteran, youth, homeless history disabilities for chronic hmlss. Teams don't survey if appeared unsafe. 2) Youth focused hot spot teams added (3 teams in afternoon & 3 at night). In past all teams left around 11pm to count but youth teams also counted in afternoon as hmlss youth become difficult to find at night, usually have shelter by evening to avoid police and for safety

# 2C-5. Did the CoC implement specific Yes measures to identify youth in their PIT count?

2C-5a. If "Yes" was selected in 2C-5, describe the specific measures the CoC; (1) took to identify homeless youth in the PIT count; (2) during the planning process, how stakeholders that serve homeless youth were engaged; (3) how homeless youth were engaged/involved; and (4) how the CoC worked with stakeholders to select locations where homeless youth are most likely to be identified. (limit 1000 characters)

1) 3 special coverage teams heading out twice (afternoon & night) on count

FY2017 CoC Application	Page 21	09/25/2017
------------------------	---------	------------

night, comprised of staff & (paid) residents from homeless youth focused agency. Teams went to known homeless youth hot spots (locations informed by homeless youth/provider). Youth on count teams approached youth who appeared homeless to survey (incl youth specific questions) b/c youth are more willing to engage with peers & hmlss youth more easily identify other hmlss youth. 2) CoC reached out to youth provider to support 2017 PIT count. Providers served on planning committee, helped create youth counting/surveying process, & led & staffed hmlss youth focused count teams. 3) Homeless youth planned, informed locations focus, & conducted count. 4) Youth focused agency has outreach workers who conduct street outreach weekly who identified locations where hmlss youth most likely to be found i.e. mall, downtown, Tech College; also asked homeless youth residents themselves where to find hmlss youth

# 2C-6. Describe any actions the CoC implemented in its 2017 PIT count to better count individuals and families experiencing chronic homelessness, families with children, and Veterans experiencing homelessness. (limit 1000 characters)

2017 STREET COUNT: all enumeration teams (not just hot spot teams) surveyed anyone encountered. Detailed survey asked if served in military, if live w/ any family members, & chronic homeless status (sleeping location, disabilities, # times hmlss, length time hmlss). 2017 SHELTERED COUNT: service agencies completed an in depth provider survey (detailed instructions included) that clearly identifies families (all types), chronically homeless and veterans staying in their programs. VETS: DeKalb County CoC achieved functional zero for vets in 2016 & expected/found decrease # hmlss vets for 2017 PIT. CHRONIC: CoC saw increase in chronic hmlss on street for PIT b/c increase # unsheltered ppl surveyed on count night. FAMILIES: Two CoC family projects closed in 2016 (16 units) & saw decrease in family units by 16 units for 2017 PIT. No families were found unsheltered for PIT.

# 3A. Continuum of Care (CoC) System Performance

#### Instructions

For guidance on completing this application, please reference the FY 2017 CoC Application Detailed Instructions and the FY 2017 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

3A-1. Performance Measure: Reduction in the Number of First-Time Homeless. Describe: (1) the numerical change the CoC experienced; (2) the process the CoC used to identify risk factors of becoming homeless for the first time; (3) the strategies in place to address individuals and families at risk of becoming homeless; and (4) the organization or position that is responsible for overseeing the CoC's strategy to reduce or end the number of individuals and families experiencing homelessness for the first time. (limit 1000 characters)

1)CoC showed 83 ppl increase for ES/TH/PH. HMIS lead changed vendors. New vendor used all State of GA data for FTH measurement instead of GA 508 only data. Using GA 508 only data showed decrease of 61 ppl. 2)Analyzed data from past 10 PIT Counts/surveys, HMIS data to i.d risk factors,& data from initiatives to help unstably housed; reviewed data from GA Tech researchers & other risk factor research. 3)Implement hsg subsidy programs to help the precariously housed; ID at-risk ppl at coord entry pre-screen & send to prevention svcs; Case Mgrs mediate with llords to stop evictions; Work w/employment orgs & employers to offer jobs; Offer skills trng thru GA WorkSource & Tech Schools (WorkSource reserved \$200,000 for skills training for this population); Work w/ Re-Entry Committee & Court programs to ensure incarcerated ppl do not become homeless; Work w/hospitals & mental institutions so that patients are not released homeless; 4) CoC Coord w/CoC Hsg & Svc Committees, oversee strategy.

3A-2. Performance Measure: Length-of-Time Homeless. CoC 's must demonstrate how they reduce the length-of-time for individuals and families remaining homeless. Describe (1) the numerical change the CoC experienced; (2) the actions the CoC has implemented to reduce the length-of-time individuals and families remain homeless; (3) how the CoC identifies and houses individuals and families with the longest length-of-time homeless; and (4) identify the organization or position that is responsible for overseeing the CoC's strategy to reduce the length-of-time individuals and families remain homeless. (limit 1000 characters)

(1) Average LOT homeless for ES/TH decreased from 245 in 2015 to 218 in 2016, due to CoC strategies and actions. (2) To reduce LOT: Require ESG/CoC/CDBG funded agencies to assess & refer for hsg/svcs within 24 hours of 1st engagement; CoC encouraged agencies move to housing 1st

FY2017 CoC Application	Page 23	09/25/2017
1 12011 COC Application	I age 25	03/23/2017

approach; Add permanent housing units through CoC & County, based on PIT data; CoC maintains a prioritized list of the homeless and agencies match to hsg quickly (currently w/in 90 days, goal w/in 30 days; Require case meetings for collaboration on difficult cases; Negotiated with Housing Authority for Housing Choice Vouchers for high barrier hholds. (3) CoC determines LOT homeless during the assessment phase of coordinated entry. Length of time homeless is one factors in determining priority for housing placement. (4)CoC Coordinator oversees strategy implementation and works with Hsg Committee for strategy improvement.

### 3A-3. Performance Measures: Successful Permanent Housing Placement and Retention

Describe: (1) the numerical change the CoC experienced; (2) the CoCs strategy to increase the rate of which individuals and families move to permanent housing destination or retain permanent housing; and (3) the organization or position responsible for overseeing the CoC's strategy for retention of, or placement in permanent housing. (limit 1000 characters)

1)Successful Permanent Housing Placement & Retention from ES/TH/RRH increased by 66 people from 2015 to 2016; Placements from PH increased by 161 people; Placements from Outreach decreased by 14 people. 2)Increase housing inventory thru Cty rent subsidy programs; vouchers from PHA assist hholds w/barriers; increase jobs thru collaboration with employment agencies, Dept of Labor & WorkSource, skills training,& services thru Tech Schools & WorkSource to move clients to self-sufficiency; employ housing 1st to house quickly; work with landlord to accept clients with barriers; case management available for recovery, mental health & skills of daily life. PPL identified in outreach are most difficult to house. 2017 strategy for outreach is to connect to mental health providers & reconnect w/ACT Team to encourage hsg. Mental health providers may accompany outreach worker. 3)CoC Coordinator is responsible for working w/agencies in the CoC to ensure successful implementation of the strategy

# 3A-4. Performance Measure: Returns to Homelessness. Describe: (1) the numerical change the CoC experienced, (2) what strategies the CoC implemented to identify individuals and families who return to homelessness, (3) the strategies the CoC will use to reduce additional returns to homelessness, and (4) the organization or position responsible for overseeing the CoC's efforts to reduce the rate of individuals and families' returns to homelessness. (limit 1000 characters)

1)Ttl # of RTH over 2 yrs in SysPM shows increase by 53 ppl in error. With change in HMIS vendors in 2017, this measure was calculated combining all CoCs in GA instead of within DeKalb CoC only. Working with HMIS lead & vendor to fix problem for next SysPM submission. Our CoC data indicates that # of returns should be only 11 returns to hmlss. 2) W/no wrong door approach, all ppl entering the CoC are asked. # of times RTH thru Coord Entry assessment.3)Number of times homeless is major factor in determining priority for hsg and svc. Once returners are identified, agencies determine reasons for returns and implement actions to ensure that clients receive required stabilizing

FY2017 CoC Application	Page 24	09/25/2017
1 12017 COO Application	l age 24	03/23/2017

**GA-508** 

COC\_REG\_2017\_149606

Project: GA-508 FY2017

Applicant: DeKalb County, Georgia

services to ensure self-sufficiency, including connecting to jobs, mental & physical health srvs, substance abuse treatment. 4)The CoC Coordinator, assisted by the Planning and Housing Committees, oversees the efforts.

3A-5. Performance Measures: Job and Income Growth Describe: (1) the strategies that have been implemented to increase access to employment and mainstream benefits; (2) how the CoC program-funded projects have been assisted to implement the strategies; (3) how the CoC is working with mainstream employment organizations to help individuals and families increase their cash income; and (4) the organization or position that is responsible for overseeing the CoC's strategy to increase job and income growth from employment, nonemployment including mainstream benefits. (limit 1000 characters)

1)Link: agencies w/employment orgs & Tech Schools for jobs & skills training: ppl w/mainstream benefits, i.e. Food Stamps TANF, Childcare, Healthcare; ppl w/insurance orgs for reduced \$ ins. 2) TA provided agency trng re SOAR specialist implementation; Coord. Entry agencies refer Vets to VA for full VA assmnt/benefits; Coll Appl. distributed job availability & job fair info to agencies for client referral; negotiated training funds for hmlss ppl for agencies to refer for training; connected emplymnt orgs with CoC/ESG agencies for job referrals; obtain commitment for sliding scale health insurance from ins provider and tell agencies to refer; Re-Entry Task force provide seminars from HHS and State agencies on obtaining benefits, work with HHS, Dept of Labor, and other Federal Depts for one-stop shop for svcs.3) CoC works w/1st Step Staffing, Direct Staffing, WorkSource to assist in gaining employment. 4) CoC Coordinator oversees strategy implementation.

3A-6. Did the CoC completely exclude a No geographic area from the most recent PIT count (i.e. no one counted there, and for communities using samples in the area that was excluded from both the sample and extrapolation) where the CoC determined there were no unsheltered homeless people. including areas that are uninhabitable (deserts, forests).

> 3A.6a. If the response to 3A-6 was "Yes", what was the criteria and decision-making process the CoC used to identify and exclude specific geographic areas from the CoCs unsheltered PIT count? (limit 1000 characters)

n/a

3A-7. Enter the date the CoC submitted the 06/05/2017 System Performance Measures data in HDX, which included the data quality section for FY 2016.

	FY2017 CoC Application	Page 25	09/25/2017
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(mm/dd/yyyy)

# 3B. Continuum of Care (CoC) Performance and Strategic Planning Objectives

#### Instructions

For guidance on completing this application, please reference the FY 2017 CoC Application Detailed Instructions and the FY 2017 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

3B-1. Compare the total number of PSH beds, CoC program and non CoCprogram funded, that were identified as dedicated for yes by chronically homeless persons in the 2017 HIC, as compared to those identified in the 2016 HIC.

	2016	2017	Difference
Number of CoC Program and non-CoC Program funded PSH beds dedicated for use by chronically homelessness persons identified on the HIC.	176	250	74

3B-1.1. In the box below: (1) "total number of Dedicated PLUS Beds" provide the total number of beds in the Project Allocation(s) that are designated ad Dedicated PLUS beds; and (2) in the box below "total number of beds dedicated to the chronically homeless:, provide the total number of beds in the Project Application(s) that are designated for the chronically homeless. This does not include those that were identified in (1) above as Dedicated PLUS Beds.

Total number of beds dedicated as Dedicated Plus	0
Total number of beds dedicated to individuals and families experiencing chronic homelessness	239
Total	239

3B-1.2. Did the CoC adopt the Orders of Priority into their standards for all CoC Program funded PSH projects as described in Notice CPD-16-11: Prioritizing Persons Experiencing Chronic Homelessness and Other Vulnerable Homeless Persons in Permanent Supportive Housing.

# 3B-2.1. Using the following chart, check each box to indicate the factor(s) the CoC currently uses to prioritize households with children based on need during the FY 2017 Fiscal Year.

History of or Vulnerability to Victimization	Х
Number of previous homeless episodes	X

FY2017 CoC Application	Page 27	09/25/2017

Unsheltered homelessness	X
Criminal History	X
Bad credit or rental history (including not having been a leaseholder)	X
Head of Household with Mental/Physical Disability	X

3B-2.2. Describe: (1) the CoCs current strategy and timeframe for rapidly rehousing every household of families with children within 30 days of becoming homeless; and (2) the organization or position responsible for overseeing the CoC's strategy to rapidly rehouse families with children within 30 days of becoming homeless. (limit 1000 characters)

1) Applied for TH-RRH project in this application to add 64 beds and house families rapidly. Cty TBRA programs add 61 units. Developers reserve 7 units for homeless hholds. Coord. Entry/no wrong door approach for immediate prescreen and referral to lead agcies. Within 24 hours of contact, family lead agency assesses and prioritizes. Housing providers update bed availability daily for bed inventory accuracy. Case mgrs meet twice monthly to review priority list and plan hsg for difficult hholds. Housing Choice vouchers to high barrier hholds. Strategy immediately reduced timeframe from 90 to 81 days. Continuing strategy will reduce days to 30. 2) Entry Coord ensures hholds move from priority list to housing in 30 days, checks inventory list for updates and accuracy and rpts to Coll App. and Hsg Committee on progress. Lead agcies review status of hhold. CoC Coord is responsible for strategy oversight.

## 3B-2.3. Compare the number of RRH units available to serve families from the 2016 and 2017 HIC.

	2016	2017	Difference	
Number of CoC Program and non-CoC Program funded PSH units dedicated for use by chronically homelessness persons identified on the HIC.	33	61	28	

3B-2.4. Describe the actions the CoC is taking to ensure emergency shelters, transitional housing, and permanent supportive housing (PSH and RRH) providers within the CoC adhere to anti-discrimination policies by not denying admission to, or separating any family members from other members of their family or caregivers based on age, sex, gender, LGBT status, marital status or disability when entering a shelter or Housing. (limit 1000 characters)

To ensure that all housing providers adhere to fair housing practices, the Collaborate Applicant in collaboration with Metro Fair Housing, sponsored an Affirmatively Furthering Fair Housing training session and asked all CoC, ESG, HOME, and CDBG providers to attend. During CoC meetings specialist presented information on non-discrimination and ensuring safety for the LGBT population. Regulatory requirements and anti-discrimination policies are

FY2017 CoC Application   Page 28   09/25/2017
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distributed to all CoC members. In the desk monitoring process, the Collaborative Applicant reviews CoC and ESG agency procedure manuals to ensure that policies do no deny admission to or separate family members based on age, sex, gender, LGBT status, marital status, or disability.

# 3B-2.5. From the list below, select each of the following the CoC has strategies to address the unique needs of unaccompanied homeless youth.

Human trafficking and other forms of exploitation?	Yes
LGBT youth homelessness?	Yes
Exits from foster care into homelessness?	Yes
Family reunification and community engagement?	Yes
Positive Youth Development, Trauma Informed Care, and the use of Risk and Protective Factors in assessing youth housing and service needs?	Yes

# 3B-2.6. From the list below, select each of the following the CoC has a strategy for prioritization of unaccompanied youth based on need.

History or Vulnerability to Victimization (e.g., domestic violence, sexual assault, childhood abuse)	X
Number of Previous Homeless Episodes	X
Unsheltered Homelessness	X
Criminal History	X
Bad Credit or Rental History	X

3B-2.7. Describe: (1) the strategies used by the CoC, including securing additional funding to increase the availability of housing and services for youth experiencing homelessness, especially those experiencing unsheltered homelessness; (2) provide evidence the strategies that have been implemented are effective at ending youth homelessness; (3) the measure(s) the CoC is using to calculate the effectiveness of the strategies; and (4) why the CoC believes the measure(s) used is an appropriate way to determine the effectiveness of the CoC's efforts. (limit 1500 characters)

(1)Strategies included increasing funding and using available mainstream sources: Obtained a County commitment to fund 20 new housing units thru tenant based rental assistance (TBRA) for homeless, fragile youth aged out of foster care; Implemented the Host HOME model for youth 18-20 to prevent homelessness among youth aged out of foster care; Obtained United Way Bridge Housing funds to remove youth from the streets while they look for perm. housing; Created drop-in centers for housing resistant street youth; Obtained funds from Medicaid and GA DBHDD for case mgt and life skills training. (2) In a TBRA pilot w\15 youth aged out of foster care, 90% remained housed for 2 years & became self-sufficient. Data show that the Host Model is successful in

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other states. Bridge funding moved \_\_\_\_\_ youth from the streets. The CoC has shown a \_\_\_\_\_% decrease in youth homelessness with these programs. (3)Success of programs is measured in terms of % attainment of the desired outcome. The change in the number of homeless youth as measured by the point-in-time count information in HMIS are also used as success/failure indicators. (4) The measures are directly related to outcome.

3B-2.8. Describe: (1) How the CoC collaborates with youth education providers, including McKinney-Vento local educational authorities and school districts; (2) the formal partnerships the CoC has with these entities; and (3) the policies and procedures, if any, that have been adopted to inform individuals and families who become homeless of their eligibility for educational services. (limit 1000 characters)

(1)Liaisons from school systems, colleges, juvenile justice orgs, & welfare agencies work w/CoC to know services & refer homeless & at-risk fams. A school system homeless liaison attends CoC case mgt meetings to give infor & input on resources & svc coordination. (2)Reps from school systems, Department of Fam & Child. Svcs., serve on the CoC Board. A child care Dtr., and headstart provider is Board chair. Reps from colleges/univ/tech schools, school system, serve on the youth and services committees. (3) CoC & ESG funded projects serving hholds w/kids must employ education liaisons to develop relationships w/school personnel to tell school personnel & hholds of benefits and ensure that homeless children attend school. In the CoC intake process, parents and homeless students learn of educational & homeless benefits. Projects make referrals to the liaison in the student's school & ensure that students enroll.

3B-2.9. Does the CoC have any written formal agreements, MOU/MOAs or partnerships with one or more providers of early childhood services and supports? Select "Yes" or "No".

	MOU/MOA	Other Formal Agreement
Early Childhood Providers	Yes	Yes
Head Start		
Early Head Start		
Child Care and Development Fund		
Federal Home Visiting Program		
Healthy Start		
Public Pre-K		
Birth to 3		
Tribal Home Visting Program		
Other: (limit 50 characters)		
Boys & Girls Club	Yes	Yes

# 3B-3.1. Provide the actions the CoC has taken to identify, assess, and refer homeless Veterans who are eligible for Veterans Affairs services and

FY2017 CoC Application	Page 30	09/25/2017
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housing to appropriate resources such as HUD-VASH and Supportive Services for Veterans Families (SSVF) program and Grant and Per Diem (GPD).
(limit 1000 characters)

One of the 1st steps in the CoC's no wrong door approach is to determine if the client is a veteran wishes to obtain available veterans' services, and if so, refer the veteran appropriately for extensive assessment, determination of eligibility, and provision of services. SSVF providers, VA representatives, Housing Authorities, community agencies, and CoC representatives meet monthly to develop, review, & maintain the homeless veterans' by-name list and ensure that all veterans are served and house appropriately and expediently. The County and CoC has worked with VA to arrange housing and training events. The County in collaboration with VEO have implemented a housing subsidy program for veterans who are not eligible for VASH, SSVF or other veterans' benefits. The CoC has attained Functional Zero status.

3B-3.2. Does the CoC use an active list or by Yes name list to identify all Veterans experiencing homelessness in the CoC?

3B-3.3. Is the CoC actively working with the Yes VA and VA-funded programs to achieve the benchmarks and criteria for ending Veteran homelessness?

3B-3.4. Does the CoC have sufficient Yes resources to ensure each Veteran is assisted to quickly move into permanent housing using a Housing First approach?

# 4A. Continuum of Care (CoC) Accessing Mainstream Benefits and Additional Policies

#### Instructions:

For guidance on completing this application, please reference the FY 2017 CoC Application Detailed Instructions and the FY 2017 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

# 4A-1. Select from the drop-down (1) each type of healthcare organization the CoC assists program participants with enrolling in health insurance, and (2) if the CoC provides assistance with the effective utilization of Medicaid and other benefits.

Type of Health Care	Yes/No	Assist with Utilization of Benefits?
Public Health Care Benefits (State or Federal benefits, e.g. Medicaid, Indian Health Services)	Yes	Yes
Private Insurers:	Yes	Yes
Non-Profit, Philanthropic:	Yes	Yes
Other: (limit 50 characters)		

#### 4A-1a. Mainstream Benefits

CoC program funded projects must be able to demonstrate they supplement CoC Program funds from other public and private resources, including: (1) how the CoC works with mainstream programs that assist homeless program participants in applying for and receiving mainstream benefits; (2) how the CoC systematically keeps program staff up-to-date regarding mainstream resources available for homeless program participants (e.g. Food Stamps, SSI, TANF, substance abuse programs); and (3) identify the organization or position that is responsible for overseeing the CoCs strategy for mainstream benefits. (limit 1000 characters)

The DeKalb Cty CoC funded projects are supplemented by the DeKalb County's general fund, the county's judicial fund to support victim assistance projects, Veterans Admin, Depart of Family and Children Services, Health Care Providers and Board of Education agencies to enhance the CoC's ability to provide supportive services for the homeless. Additional, the local Emergency Food and Shelter Program assists the DeKalb Cty CoC by providing funds for food, mortgage payments, temporary lodging, rental assistance and utility assistance. Working together, the COC and the Coordinated Entry Specialist engages and trains funded mainstream providers, private entities, and organizations within the homeless service system as well as non-funded agencies such as the faith-based community partners, school systems, the Board of Health, developers, and other interested community members.

FY2017 CoC Application	Page 32	09/25/2017
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Additionally, the COC and the Coordinated Entry Specialist monitors each agency APRs for mainstream benefits updates.

# 4A-2. Low Barrier: Based on the CoCs FY 2017 new and renewal project applications, what percentage of Permanent Housing (PSH) and Rapid Rehousing (RRH), Transitional Housing (TH), Safe-Haven, and SSO (Supportive Services Only-non-coordinated entry) projects in the CoC are low-barrier?

Total number of PH (PSH and RRH), TH, Safe-Haven and non-Coordinated Entry SSO project applications in the FY 2017 competition (new and renewal)	18.00
Total number of PH (PSH and RRH), TH, Safe-Haven and non-Coordinated Entry SSO renewal and new project applications that selected "low barrier" in the FY 2017 competition.	18.00
Percentage of PH (PSH and RRH), TH, Safe-Haven and non-Coordinated Entry SSO renewal and new project applications in the FY 2017 competition that will be designated as "low barrier"	100.00%

# 4A-3. Housing First: What percentage of CoC Program Funded PSH, RRH, SSO (non-coordinated entry), safe-haven and Transitional Housing; FY 2017 projects have adopted the Housing First approach, meaning that the project quickly houses clients without preconditions or service participation requirements?

Total number of PSH, RRH, non-Coordinated Entry SSO, Safe Haven and TH project applications in the FY 2017 competition (new and renewal).	18.00
Total number of PSH, RRH, non-Coordinated Entry SSO, Safe Haven and TH renewal and new project applications that selected Housing First in the FY 2017 competition.	18.00
Percentage of PSH, RRH, non-Coordinated Entry SSO, Safe Haven and TH renewal and new project applications in the FY 2017 competition that will be designated as Housing First.	100.00%

# 4A-4. Street Outreach: Describe (1) the CoC's outreach and if it covers 100 percent of the CoC's geographic area; (2) how often street outreach is conducted; and (3) how the CoC has tailored its street outreach to those that are least likely to request assistance. (limit 1000 characters)

1) Daily, a full-time Outreach Coordinator locates the unsheltered, assesses needs, and offers housing and services, based on reports from residents/organizations/police of unsheltered homeless individuals or the Coordinator's sightings during daily area canvassing. Twice monthly, the Coordinator, with PATH team and medical providers, visits known encampment sites to screen individuals and offer services and housing. Data on located individuals is recorded in HMIS. The unsheltered may be geo-located and documented using a GIS application. This application facilitates finding specific homeless individuals at a later date for follow-up. Outreach covers 100% of the CoC's area. (2)Street outreach occurs daily. The Coordinator and PATH team conduct outreach at encampment sites twice monthly. (3)Encampment areas are identified. The Outreach Coordinator visits the encampment areas weekly to build rapport/trust, provide access to services, and convince the homeless to move to housing.

# 4A-5. Affirmative Outreach Specific strategies the CoC has implemented that furthers fair housing as

FY2017 CoC Application Page 33 09/25/2017
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detailed in 24 CFR 578.93(c) used to market housing and supportive services to eligible persons regardless of race, color, national origin, religion, sex, gender identify, sexual orientation, age, familial status, or disability; who are least likely to apply in the absence of special outreach. Describe: (1) the specific strategies that have been implemented that affirmatively further fair housing as detailed in 24 CFR 578.93(c); and (2) what measures have been taken to provide effective communication to persons with disabilities and those with limited English proficiency. (limit 1000 characters)

The Collaborate Applicant has engaged with "Metro Fair Housing Services, Inc." to help market fair housing and supportive services practices through detailed training sessions. All CoC, ESG, HOME, and CDBG providers are asked to attend training sessions. We also have provider agencies that have a full range of translation services to assist our diverse community, which consist of over 64 spoken languages. We have a melting pot of nationalities --including residences from Asian, Hispanic, European, and African. The workshops deliver relevant fair housing information and examines compliance with the Fair Housing Act, regulatory requirements and anti-discrimination policies are also distributed at all CoC meetings. The outreach to our residence ensures that every family or individual is able to make the best housing choices possible about where they live. The CoC advocates for housing opportunities, and makes sure that we're helping people learn about their housing rights."

### 4A-6. Compare the number of RRH beds available to serve populations from the 2016 and 2017 HIC.

	2016	2017	Difference
RRH beds available to serve all populations in the HIC	129	225	96

4A-7. Are new proposed project applications No requesting \$200,000 or more in funding for housing rehabilitation or new construction?

4A-8. Is the CoC requesting to designate one or more SSO or TH projects to serve homeless households with children and youth defined as homeless under other Federal statues who are unstably housed (paragraph 3 of the definition of homeless found at 24 CFR 578.3).

FY2017 CoC Application	Page 34	09/25/2017
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#### 4B. Attachments

#### Instructions:

Multiple files may be attached as a single .zip file. For instructions on how to use .zip files, a reference document is available on the e-snaps training site: https://www.hudexchange.info/resource/3118/creating-a-zip-file-and-capturing-a-screenshot-resource

Document Type	Required?	Document Description	Date Attached
01. 2016 CoC Consolidated Application: Evidence of the CoC's communication to rejected participants	Yes	Communication to	09/25/2017
02. 2016 CoC Consolidated Application: Public Posting Evidence	Yes	Evidence of Publi	09/25/2017
03. CoC Rating and Review Procedure (e.g. RFP)	Yes	Rating & Review P	09/25/2017
04. CoC's Rating and Review Procedure: Public Posting Evidence	Yes	Evidence of Publi	09/25/2017
05. CoCs Process for Reallocating	Yes	Reallocation Process	09/25/2017
06. CoC's Governance Charter	Yes	CoC Governance Ch	09/25/2017
07. HMIS Policy and Procedures Manual	Yes	HMIS Policies & P	09/25/2017
08. Applicable Sections of Con Plan to Serving Persons Defined as Homeless Under Other Fed Statutes	No		
09. PHA Administration Plan (Applicable Section(s) Only)	Yes	PHA Administratio	09/25/2017
10. CoC-HMIS MOU (if referenced in the CoC's Goverance Charter)	No	HMIS MOU	09/25/2017
11. CoC Written Standards for Order of Priority	No		
12. Project List to Serve Persons Defined as Homeless under Other Federal Statutes (if applicable)	No		
13. HDX-system Performance Measures	Yes	HDX System Perfor	09/25/2017
14. Other	No	Evidence of Encou	09/25/2017
15. Other	No		

FY2017 CoC Application Page 35 09/25/2017
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#### **Attachment Details**

**Document Description:** Communication to Rejected Applicants

#### **Attachment Details**

**Document Description:** Evidence of Public Posting

#### **Attachment Details**

**Document Description:** Rating & Review Procedure

### **Attachment Details**

**Document Description:** Evidence of Public Posting

#### **Attachment Details**

**Document Description:** Reallocation Process

#### **Attachment Details**

**Document Description:** CoC Governance Charter

FY2017 CoC Application	Page 36	09/25/2017
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# **Attachment Details**

**Document Description:** HMIS Policies & Procedures

## **Attachment Details**

**Document Description:** 

# **Attachment Details**

**Document Description:** PHA Administration Plan

# **Attachment Details**

**Document Description:** HMIS MOU

# **Attachment Details**

**Document Description:** Written Standards

## **Attachment Details**

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FY2017 CoC Application	Page 37	09/25/2017

**Document Description:** 

# **Attachment Details**

**Document Description:** HDX System Performance Measures

# **Attachment Details**

**Document Description:** Evidence of Encouragment for New Projects

# **Attachment Details**

**Document Description:** 

# **Submission Summary**

Ensure that the Project Priority List is complete prior to submitting.

Page	Last Updated
1A. Identification	08/28/2017
1B. Engagement	09/25/2017
1C. Coordination	09/25/2017
1D. Discharge Planning	08/28/2017
1E. Project Review	09/25/2017
1F. Reallocation Supporting Documentation	No Input Required
2A. HMIS Implementation	09/25/2017
2B. PIT Count	09/25/2017
2C. Sheltered Data - Methods	09/25/2017
3A. System Performance	09/25/2017
3B. Performance and Strategic Planning	09/25/2017

FY2017 CoC Application	Page 39	09/25/2017
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**4A. Mainstream Benefits and Additional** 09/25/2017

**Policies** 

**4B. Attachments** 09/25/2017

Submission Summary No Input Required



September 11, 2017

Dr. Carol Collard

Dear Dr. Collard:

404.371.2727 (o) 404.371.2742 (f) DeKalbCountyGa.gov **Community Development** 3486 Covington Highway Decatur, GA 30032

Chief Executive Officer Michael L. Thurmond

**Board of Commissioners** 

District 1 Nancy Jester

District 2

District 3

District 6

President and CEO **Caring Works** 2785 Lawrenceville Highway, Suite 205 Decatur, GA 30033

Larry Johnson

District 4 Steve Bradshaw

District 5

Mereda Davis Johnson

Thank you for submitting an application for funding in the DeKalb County 2017 Continuum of Care (CoC) Program Competition. Your application has been reviewed and ranked by the review committee for the DeKalb CoC. While your application identifies work that is important to the Gregory Adams Sr. DeKalb CoC, unfortunately your application score and associated ranking do not place it among the applications recommended for funding at this time. Your application will not be included in the application package that is submitted to HUD as part of the DeKalb CoC Consolidated Application. application scores will be posted on the DeKalb County www.dekalbcountyga.gov/community-development/dekalb-county-continuum-care.

District 7

Kathie Gannon

A Continuum of Care/ Collaborative Applicant staff member will contact you within five days to discuss your application. In the meantime, please contact me at 404-371-2625 or mwrichards@dekalbcountyga.gov, if you have questions or concerns.

Melvia Richards

**Housing Manager** 

**DeKalb County Community Development Department** 

**Collaborative Applicant** 

## Richards, Melvia

From:

Richards, Melvia

Sent:

Wednesday, September 13, 2017 5:11 PM

To:

'Carol Collard'

Cc: Subject: 'wandareed@caringworksinc.org' FW: CoC Application - Move DeKalb

Attachments:

Scanned from a Xerox Multifunction Printer (15)

Importance:

High

From: Richards, Melvia

Sent: Wednesday, September 13, 2017 4:58 PM

To: 'carolcollard@daringworksinc.org'
Cc: 'wandareed@caringworksinc.org'
Subject: CoC Application - Move DeKalb

Carol:

Please see the attached letter regarding your Move DeKalb application.

Melvia Richards



September 11, 2017

Mr. Jeff Smythe VP of Development

Atlanta, GA 30303

Dear Mr. Smythe:

Lutheran Services of Georgia

**Home and Community Based Services** 

230 Peachtree Street NW, Suite 1100

Chief Executive Officer Michael L. Thurmond

**Board of Commissioners** 

District 1 Nancy Jester

District 2

District 3 Larry Johnson

District 4 Steve Bradshaw

District 5

Mereda Davis Johnson

District 6 Kathie Gannon

Thank you for submitting an application for funding in the DeKalb County 2017 Continuum of Care (CoC) Program Competition. With your decision to withdraw your application, it will not be included. Gregory Adams Sr. in the DeKalb CoC Consolidated Application Package that is submitted to HUD. We are disappointed in your decision to withdraw, but look forward to your participating in DeKalb CoC activities and submitting an application in the 2018 competition.

District 7

You may review all DeKalb CoC application scores by visiting the DeKalb County website at www.dekalbcountyga.gov/community-development/dekalb-county-continuum-care.

A Continuum of Care/ Collaborative Applicant staff member will contact you within five days to discuss your application. In the meantime, please contact me at 404-371-2625 or mwrichards@dekalbcountyga.gov, if you have questions or concerns.

Sincerely,

Melvia Richards Housing Manager

**DeKalb County Community Development Department** 

Collaborative Applicant

cc: Melissa Austin

#### Richards, Melvia

From:

Richards, Melvia

Sent:

Wednesday, September 13, 2017 5:05 PM

To: Cc: 'jsmythe@lsga.org'
'maustin@lsga.org'
Lutheran Services - sl.pdf
Lutheran Services - sl

Subject:

Attachments:

Importance:

High

Mr. Smythe:

Please see the attached letter regarding your DeKalb County CoC application.

Melvia W. Richards Manager, Housing Programs **DeKalb County Community Development Collaborative Applicant** 



404.371.2727 (o) 404.371.2742 (f) DeKalbCountyGa.gov **Community Development** 3486 Covington Highway Decatur, GA 30032

September 11, 2017

Dear Mr. Johnson:

Chief Executive Officer Michael L. Thurmond

Board of Commissioners

District 1 Nancy Jester

District 2

Mr. Keith Johnson President/CEO Men & Women for Human Excellence, Inc. 1026 Holcomb Road Decatur, GA 30032

District 3 Larry Johnson

District 4

Steve Bradshaw

District 5

Mereda Davis Johnson

Thank you for submitting an application for funding in the DeKalb County 2017 Continuum of Care (CoC) Program Competition. Your application has been reviewed and ranked by the review committee for the DeKalb CoC. While your application identifies work that is important to the Gregory Adams Sr. DeKalb CoC, unfortunately your application score and associated ranking do not place it among the applications recommended for funding at this time. Your application will not be included in the application package that is submitted to HUD as part of the DeKalb CoC Consolidated Application. All application scores will posted the be on DeKalb County www.dekalbcountyga.gov/community-development/dekalb-county-continuum-care.

A Continuum of Care/ Collaborative Applicant staff member will contact you within five days to discuss your application. In the meantime, please contact me at 404-371-2625 or mwrichards@dekalbcountyga.gov, if you have questions or concerns.

Sincerely.

Melvia Richards **Housing Manager** 

**DeKalb County Community Development Department** 

**Collaborative Applicant** 

District 6 Kathie Gannon

District 7

#### Richards, Melvia

From:

Richards, Melvia

Sent:

Wednesday, September 13, 2017 5:01 PM 'kj.msw@comcast.net'

To: Cc:

'wesleybgood@msn.com'

Subject: Attachments: Men and Women for Human Excellence - signed letter.pdf

Men and Women for Human Excellence - signed letter

Mr. Johnson:

Please see the attached letter regarding your DeKalb CoC application.

Melvia Richards **Housing Manager** Collaborative Applicant DeKalb County Community Development Depart,emt



404.371.2727 (o) 404.371.2742 (f) DeKalbCountyGa.gov **Community Development** 3486 Covington Highway Decatur, GA 30032

Chief Executive Officer Michael L. Thurmond

**Board of Commissioners** 

District 1 Nancy Jester

District 2

District 3 Larry Johnson

District 4 Steve Bradshaw

District 5

Mereda Davis Johnson District 6

Kathie Gannon

District 7

September 11, 2017

Ms. Alice Jenkins **Executive Director Clifton Sanctuary Ministries** 369 Connecticut Avenue Atlanta, GA 30307

Dear Ms. Jenkins:

Thank you for submitting an application for funding in the DeKalb County 2017 Continuum of Care (CoC) Program Competition. Your application has been reviewed and ranked by the review committee for the DeKalb CoC. While your application identifies work that is important to the Gregory Adams Sr. DeKalb CoC, unfortunately your application score and associated ranking do not place it among the applications recommended for funding at this time. Your application will not be included in the application package that is submitted to HUD as part of the DeKalb CoC Consolidated Application. application scores will posted be on the DeKalb County www.dekalbcountyga.gov/community-development/dekalb-county-continuum-care.

A Continuum of Care/ Collaborative Applicant staff member will contact you within five days to discuss your application. In the meantime, please contact me at 404-371-2625 or mwrichards@dekalbcountyga.gov, if you have questions or concerns.

Sincerely.

Melvia Richards Housing Manager

**DeKalb County Community Development Department** 

**Collaborative Applicant** 

## Richards, Melvia

From:

Richards, Melvia

Sent:

Wednesday, September 13, 2017 5:03 PM

To: Cc: 'alice@cliftonsanctuary.com'

Subject:

'gslade@cliftonsanctuary.com' Clifton Sanctuary Ministries - sl.pdf Clifton Sanctuary Ministries - sl

Attachments:

Importance:

High

Ms. Jenkins:

Please see the attached letter regarding your DeKalb CoC application.

Melvia W. Richards Manager, Housing Programs **DeKalb County Community Development** Collaborative Applicant

# DeKalb 2017 CoC NOFA Competition Application Review, Ranking and Appeals

## **Public Notice**

The DeKalb County Community Development Department, as Collaborative Applicant for the DeKalb County Homeless Continuum of Care (CoC), posted public notices announcing the opening of the DeKalb CoC Local Competition for 2017 HUD CoC NOFA funding. The announcement was posted May 22, 2017 on the DeKalb County Website at <a href="https://www.dekalbcountyga.gov">https://www.dekalbcountyga.gov</a> and in the Champion Newspaper on May 22, 2017. Local applications for new and renewal project funding and application guidelines were distributed at an Application Information Meeting on June 2, 2017. Local applications and Information Meeting materials were also posted to the DeKalb County Website on June 2, 2017. Application technical assistance was provided June 5 – 9, 2017.

In response, the Collaborative Applicant received nineteen (19) applications for renewal funding and five (5) applications for new funding on June 16, 2017.

# **NOFA Project Application Review and Rating**

Project Applications received a three-part proposal review. Projects were evaluated for Application and Threshold Compliance then read and rated by a a team of independent reviewers. New project applications received a Quantitative Review for a maximum of 100 points. Renewal projects received a Quantitative and an independent Annual Performance Report (APR) and Performance Measure review for a maximum of 130 points.

The Quantitative rating form for new project applications used was divided into three sections to mirror the application.

I.	Applicant Information	25 Points
II.	Project Information	25 Points
III.	Performance and Service Capacity	50 Points

The Quantitative rating form for renewal project applications used cost, performance, outcome data and adherence to housing first as primary evaluation measures. The rating form was divided into four sections to mirror the application and measured key performance to include data quality, bed utilization, length of participation and housing stability. A maximum of 130 points could be awarded.

I.	Application Information	20 Points
II.	Project Information	30 Points
III.	Performance and Service Capacity	40 Points
IV.	Quantitative APR and Performance Measure Review	30 Points

Reviewers were provided a copy of the Application for New and Renewal Projects, the Application Guidelines as well as a copy of the HUD Line of Credit Control System (eLOCCS) to assist in assessing current fund utilization and cost effectiveness.

A dedicated HMIS APR and Performance Measure review was conducted on all renewal project applications in operation a full year or more. Consideration was given to the state HMIS system conversion and its impact on client migration, data entry and accuracy during the period under review. HUD Performance Measures were weighted by project type for comparative analysis and equity in evaluation.

#### **Review Team**

A team of independent reviewers with experience in the human services or homeless assistance arena was identified and convened to conduct the project reviews. An orientation was conducted and each reviewer assigned a minimum of two project applications. Renewal applications received three independent reviews and New project applications received two independent reviews.

The period for application review commenced on June 29, 2017. Reviewers convened on Friday July 28, 2017 and Wednesday, August 15, 2017 to report ratings, and provide valuable feedback on the applications and application process.

# **Rating and Ranking**

Based on the results of the proposal review and reviewer feedback, project scores were reviewed, rated and ranked from the highest proposal score down. Renewal projects in operation long enough to generate an APR received a dedicated APR review and rating for project performance measure ranking. Renewal Project applications necessary for the operation of the CoC, such as HMIS, Planning and SSO/Coordinated Assessment were automatically placed in Tier I without a competitive ranking. Renewal project applications in their first year of operation were also placed in Tier 1. Preliminary rankings were presented to and reviewed by the CoC Planning Committee and CoC Governance Board for input and feedback. The final rankings were presented to the CoC Governance Board for approval and project applicants notified.

# **Applicant Notification**

Project applicants accepted or rejected for inclusion in the consolidated CoC NOFA application were notified in writing on September 13, 2017. One new project application was withdrawn from consideration and two new projects that ranked below the 65% cut off and were rejected for inclusion in the consolidated CoC NOFA application. Specific guidance regarding appeal of the CoC's decision is attached.

For questions or concerns, please call or email Ann Pope at (404) 371-2637 or <a href="mailto:adpope@dekalbcountyga.gov">adpope@dekalbcountyga.gov</a>.

# DeKalb CoC - 2017 NOFA Competition Final Project Application Rankings

, 11		0		
Agency	Application Type	Project Name	Ranking	Tier
Department of Community Affairs	Renewal	DeKalb HMIS	1	T1
DeKalb County Government	Renewal	Coordinated Entry and Assessment	2	T1
CHRIS Kids	New Renewal	Changing Directions	3	T1
Action Ministries	New Renewal	RRH II	4	T1
GHFA- Caring Works, Inc.	Renewal	S+CR 2	5	T1
GHFA – Rosalyn Apartments	Renewal	S+CR	6	T1
GHFA – Caring Works, Inc.	Renewal	S+CR 1	7	T1
Traveler's Aid of Metropolitan Atlanta	Renewal	DeKalb RRH 2017	8	T1
Traveler's Aid of Metropolitan Atlanta	Renewal	DeKalb PSH 2017	9	T1
GHFA – Jerusalem House	Renewal	S+CR	10	T1
DeKalb CSB	Renewal	Permanent Housing for Persons with Disabilities	11	T1
GHFA – DeKalb CSB	Renewal	S+CR	12	T1
Action Ministries	Renewal	DeKalb RRH	13	T1
Decatur Cooperative Ministry	Renewal	Family Success Project	14	T1
Nicholas House	Renewal	New Horizons	15	T1
St. Jude's Recovery Center	Renewal	Project Open Arms	16	T1
St. Jude's Recovery Center	Renewal	Welcome Home	17	T1
Jerusalem House	Renewal	The Family Program	18a	T1
Jerusalem House	Renewal	The Family Program	18b	T2
Decatur Cooperative Ministry	Renewal	Rapid Re-housing	19	T2
Decatur Cooperative Ministry	Bonus Joint TH/RRH	DCM Interim Housing Project	20	T2

# Appeal Procedures for Applicant Organizations

## **Section 1: Purpose**

The purpose of the appeal procedure is to review and resolve any objections or concerns raised by the Applicant Organization as quickly as possible to assure an efficient Consolidated Grant Application process.

# **Section 2: Eligibility**

An appeal may be filed by any applicant organization that claims it has been adversely affected by:

- 1. Improper application of rules, regulations and procedures concerning participation in the Consolidated Grant application process;
- 2. Improper interpretation of rules, regulations and procedures concerning participation in the Consolidated Grant application process;
- 3. Disparity in the application of rules, regulations and procedures regarding participation in the Consolidated Grant application process;
- 4. Violation of rules, regulations or procedures concerning participation in the Consolidated Grant application process.

### **Section 3: Informal Resolution**

An applicant organization should pursue, if possible, an informal resolution of his/her complaint with the Collaborative Applicant before filing a formal written appeal. The Collaborative Applicant is encouraged to work with the applicant to resolve appeals informally. Efforts at informal resolution are unrelated to the formal appeal procedure. Time limits for the formal process do not change when an informal resolution is attempted.

# Section 4: Filing an Applicant Organization Appeal

- **Step 1 -** If the applicant organization is not satisfied with the informal resolution proffered by the Collaborative Applicant, the applicant organization has five (5) working days to file an appeal with the CoC Governance Board using the official form.
- **Step 2 -** The CoC Governance Board must investigate the grievance, and respond in writing within five (5) working days using the official form. The decision of the CoC Governance Board is final.

#### **Section 5: General Provisions**

The Appeal Forms provided by the Collaborative Applicant should be used in pursuing a formal resolution of the grievance.

# DeKalb Continuum of Care Consolidated Grant Application Process Appeal Form

Applicant Organization:	
Applicant Representative:	
Job Title:	
Organization's Address:	
Organization's Phone Number:	
We have discussed this complaint with the Collaborative Applicant a his/her verbal answer on (date) Eanswer is unacceptable to us, we wish to file a formal appeal.	
Nature of grievance. Explain how your organization was unfairly traincluding names and dates. (Use additional pages if needed.	reated

A just and fair resolution to our grievance is:		
Date	Signature	

Appeals not filed timely are considered settled at the previous level.

Copy retained by Applicant Organization. Copy retained in Applicant Organization NOFA file.

# DeKalb Continuum of Care Consolidated Grant Application Process Appeal Form - CoC Response

Applicant O	ganization:			
Applicant Re	epresentative:			
	Collaborative Applicant Recommendation			
	DeKalb CoC Governance Board Response to Applicant Organization Appeal			
Date	Signature			

The CoC Governance Board decision is final.

Collaborative Applicant retains copy for Applicant Organization's file and returns original to applicant organization.

# **CoC Process for Reallocating Funds**

The CoC will consider reallocating funds from projects as shown below.

- 1. Projects that do not conform to HUD and CoC's priorites as shown in the CoC priority listing.
- Projects that are under performing, as measure by APR scores on existing clients to permanent housing and failure to meet CoC standards. Performance indicators will be determined by the CoC Board.
- 3. Projects indicating that they will not or cannot implement the scope of work submitted in the previous NOFA application.
- 4. Projects that show a 2-3 year trend of underspending. Or projects that indicate that their funded is in excess of their ability to fund.
- 5. Cost effectiveness.

# DeKalb Continuum of Care GOVERNANCE CHARTER

#### I. Overview

#### A. Governance Charter Purpose

This document sets forth:

- Guiding principles of membership and participation in the DeKalb Continuum of Care (the Continuum)
- Responsibilities delegated by the Continuum to its Board, committees, and agents
- Provisions for Continuum governance through the Board and key policies and processes

#### **B.** Contents

The sections of this Charter are as follow:

- I. Overview
- II. The Continuum of Care
- III. The Board
- IV. Committees and Subcommittees
- V. Continuum Policies
- VI. Appointed Entities
- VII. General Provisions

#### C. Terms & Definitions

**CoC Program Grantee (Recipient) -** The CoC Program Grantee is the "recipient" as used by HUD and means an applicant that signs a grant agreement with HUD.

Collaborative applicant means the eligible applicant that has been designated by the Continuum of Care to apply for a grant for Continuum of Care planning funds under this part on behalf of the Continuum. Section VI of this Charter designates DeKalb County as the Collaborative Applicant for the Continuum. The Collaborative Applicant is the coordination hub responsible for:

- Providing logistical support for Continuum responsibilities as in Interim Rule 24 CFR §578.7
- Convening and facilitating the Board and Committees
- · Monitoring strategic coherence across efforts
- Coordinating communication within the Continuum
- Managing collective data systems and information distribution
- Mobilizing planning efforts that frame community-wide plans and their revision
- Stewarding resources for collective impact as appropriate

The Continuum (Continuum of Care) means the group organized to carry out the responsibilities required by the HUD CoC Program and that is composed of representatives of organizations, including nonprofit homeless providers, victim service providers, faith---based organizations, governments, businesses, advocates, public housing agencies, school districts, social service providers, mental health agencies, hospitals, universities, affordable housing developers, law enforcement, organizations that serve homeless and formerly homeless veterans, and homeless and formerly homeless persons to the extent these groups are represented within the geographic area and are available to participate.

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

HMIS Lead means the entity designated by the Continuum of Care in accordance with this part to operate the Continuum's HMIS on its behalf. Section VI of this Charter designates the Department of Community Affairs/Georgia Housing Finance Agency as the HMIS Lead for the Continuum.

**Notice** is defined as adequate for this Charter when it meets any time required and the Collaborative Applicant:

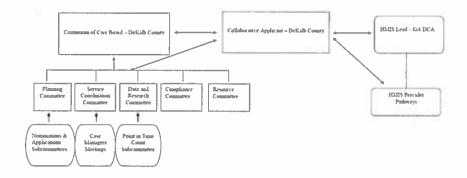
- Delivers the content electronically to Continuum member lists
- Posts the content to the Continuum website (once the site is up)

#### This further requires that:

- Members take responsibility for providing their electronic contact information to the Collaborative Applicant
- Committees disseminate the notice to their members
- Continuum members disseminate the notice both electronically and onsite as appropriate to its clients, staff and volunteers

#### D. Overview of Continuum Structure

#### DeKalb Continuum of Care Work Flowchart



#### As defined in this Charter:

- The Continuum is the collaborative body implementing homeless prevention and intervention strategies
- The Collaborative Applicant staffs the work of the Continuum as a body, coordinating the work of the Board and Committees and acts on behalf of the Continuum to maintain momentum and oversight. The Collaborative Applicant also applies for HUD's CoC Program funding, reporting to the Board
- Committees and the like are responsible for specific activities and strategies, reporting to the Board
- The HMIS Lead operates the Continuum's data system, reporting to the Statewide Advisory Board, on which the Continuum of Care has representation.

#### II. The Continuum of Care

# A. Continuum Mission, Vision, Purpose & Responsibilities Mission and Vision:

Our vision is that all DeKalb County residents will have the stable housing and appropriate services they need to live in dignity and reach their highest potential. Our mission is to develop and implement a community-wide coordinated system of housing and services for preventing and ending homelessness in DeKalb County.

#### Responsibilities:

- Performance Targets & Monitoring
  - o Establish appropriate performance targets by population and program in consultation with the CoC Program Grantee and sub---recipients and then:
    - Monitor performance and evaluate outcomes of ESG and CoC programs
    - §. Develop a fair process for performance improvement and recommend action per that process
    - §. Report to HUD
- Centralized Assessment
  - o Establish and:
  - §. Operate a centralized or coordinated assessment system in consultation with ESG fund recipients
  - §. Follow written standards for providing CoC assistance in consultation with ESG fund recipients
- HMIS
- o Designate a single HMIS for its geographic area and designate an eligible applicant to manage its HMIS
- o Review, revise, and approve privacy, security, and data quality plans
- o Ensure consistent participation of the CoC Program Grantee and sub---recipients in HMIS
- o Ensure that the HMIS is administered in compliance with HUD requirements
- Planning
  - o Coordinate implementation of a housing and service system
  - o Conduct a point---in---time count of homeless persons that meets HUD's requirements, at least biannually
  - o Conduct an annual gaps analysis of homelessness needs and services
  - Provide information required to complete the Consolidated Plan(s)

- o Consult with state and local ESG recipients in the geographic area on the plan for allocating ESG funds and reporting/evaluating performance of ESG programs
- Application for CoC Program Funds
  - o Design, operate and follow a collaborative process for developing applications and approving submission of applications in response to a CoC Program NOFA
  - o Establish priorities for funding projects
  - o Determine if one or more applications will be submitted
    - §. If more than one, designate the collaborative applicant
    - §. If only one, the applicant is the collaborative applicant
  - o Rank multiple applications if required by HUD

Delegation: The Continuum has delegated elements of its day-to-day work to the Collaborative Applicant, CoC Board, committees, and other entities as described in this Charter. However, the Continuum Board retains all of its responsibilities. Responsibilities extend to approval of the CoC Program application, even if it designates eligible applicants other than itself to apply for funds.

#### **B. Continuum Membership Composition & Voting Rights**

**Composition:** The Continuum is composed of:

- The following to the extent they are represented within the geographic area and are available to participate:
- o Nonprofit homeless providers
- o Prevention service providers
- o Victim service providers
- o Disaster planning and prevention agencies
- o Faith---based organizations
- o Funders
- o Governments
- o Businesses
- o Advocates
- o Public housing agencies
- o School districts

o Social service providers

- o Medical professionals
- o Mental health agencies
- o Hospitals
- o Universities
- o Affordable housing developers
- o Law enforcement
- o Organizations that serve

homeless and formerly homeless

- veterans
- o Courts

- Homeless and formerly homeless persons
- Representatives from the following:
  - o Collaborative Applicant
  - o CoC Program Grantee
  - o Consolidated Plan Entity
  - o ESG Grantee
  - o HMIS Lead

Anyone/entity committed to the prevention and ending of homeless is welcome in the Continuum.

Voting Rights: Those individuals that meet the following provisions are eligible to vote at Continuum meetings.

Self-identification as homeless or formerly homeless OR

• Commitment to the DeKalb Continuum of Care as demonstrated by active participation in the Continuum over the prior 12 months as demonstrated by Continuum and/or Committee attendance sheets.

The Collaborative Applicant will maintain eligibility lists and make them available prior to all meetings of the full Continuum.

#### C. Continuum Meetings

Frequency: The Continuum will hold full membership meetings at least four (4) times per year at a time and location determined by the Collaborative Applicant. The Collaborative Applicant will select a meeting location that is accessible to potential homeless participants and in regard to ability/disability.

Open Meeting: Meetings of the Continuum will be open to any interested person.

Agendas: The Collaborative Applicant will disseminate agendas in advance of the meeting.

**Notice:** The Continuum will publish agendas in advance of the meeting and publicly invite new members at least annually. Fifteen- (15)-days' notice will be given for meetings of the Continuum. See definition of Notice in Overview section of this Charter.

Quorum: Quorum for the transaction of business at full Continuum meetings will be defined as those present at a properly noticed meeting.

**Voting:** Each member must be present to vote on Continuum matters. Votes will be by voice or ballot at the will of the majority of those in attendance. No member may vote on any item that presents a real or perceived conflict-of-interest.

**Proxy:** There is no proxy voting. Decision-making requires live conversation and active participation from all parties.

#### III. The Board

#### A. Board Roles & Responsibilities

**Definition:** The Continuum Governing Board is the body that makes decisions on behalf of the full Continuum.

Continuum of Care Board: The Board is the designated entity for managing the CoC Program process in DeKalb, including the ranking of proposals for submittal to the US Department of Housing and Urban Development under the annual NOFA. The Board reviews and votes on all recommendations from the various committees.

In addition, the Board is responsible for:

• Working closely with the designated Collaborative Applicant to fulfill major duties of the Continuum.

- Monitoring implementation of the Continuum Plan and ongoing alignment with vision, goals and strategies.
- Overseeing periodic planning and annual plan revisions
- Making decisions about priorities
- Actively seeking out participation from each group listed below, for both the Continuum and its committees

o Nonprofit homeless providers

o Victim service providers

o Faith---based organizations

o Governments

o Businesses

o Advocates

o Public housing agencies

o School districts

o Social service providers

o Mental health agencies and

substance abuse providers

o Hospitals, health care institutions and practitioners

o Universities

o Affordable housing developers

o Law enforcement

o Organization that serve

homeless and formerly homeless

veterans

o Homeless and formerly homeless

persons

- Ensuring transparent governance within the Continuum and monitoring potential conflicts of interest
- Delegating activities to and oversee committees as appropriate
- Delegating responsibilities/activities to the Collaborative Applicant as appropriate
- Designating the HMIS Lead to manage the HMIS system.
- Ensuring consultation of ESG recipient throughout planning and implementation of Continuum activities.

#### Individual Members: Individuals serving on the Board must:

- Commit to preventing and ending homelessness
- Attend meetings of the Board and quarterly meetings of the Continuum
- Seek out input from the peers, industry, and/or population he/she represents
- Bring that input to Board deliberations, while remaining attentive to un-represented views
- Communicate Board work to the peers, industry, and/or population he/she represents
- Adhere to all Governance Charter policies

#### B. Board Number, Terms, Composition & Guidelines

Number: The Board will operate with no fewer than 15 members.

Terms: With the exception of the founding election, Board members will serve two-(2)-year terms up to a maximum of four (4) consecutive years (including partial terms) before rotating off for at least one (1) year. Member terms will be staggered such that approximately (1/2) are up for selection each year. See Board Member Elections.

**Composition:** Members of the Board represent local funders, government, services providers, consumers, and other community members whose interest relate to homeless services and housing systems. Specifically, the Board consists of the following:

Elected Seats (4)

One Homeless or Formerly Homeless Individuals

Three (3) Homeless or Housing Providers

• Named designees for up to eleven (11) Appointed Seats

DeKalb County Government (2)

DeKalb and Decatur Housing Authority (2)

DeKalb County School System (1)

Veterans Administration (1)

United Way (1)

DeKalb CSB (1)

DeKalb DFACS (1)

Business Community Representative (1)

**Developer Community Representative (1)** 

Guidelines: In managing Board number and composition, the following will be true:

- Each seat has a vote as exercised by a named individual, and each individual may exercise only one vote.
- With the exception of short-term vacancies, there will always be an odd number of Board members.
- The Board should represent a diverse set of service, population, and program interests.
- Direct service providers can include those who do and do not receive federal funding; those serving individuals, families, youth, veterans, or any other targeted population; a wide range of services such as outreach, shelter, transitional housing, supportive housing, permanent housing, victim services, service only, etc.; and a mix of secular, faith-based, and community providers.

#### C. Board Member Elections

**Oversight:** The Planning Committee is responsible for development and oversight of all elections through the work of the Nominations Subcommittee. As such, they will:

- Send out calls for Board nominees
- Accept, verify and collect information (e.g., attendance record, bio) for nominations
- Present nominees to the Board for approval

**Process:** The election process will include at least the following:

• Calls for nominations, vetting of nominations received, and presentation of nominees for approval by the full CoC.

**Process Review:** The Board will review this process at least every five (5) years to ensure it remains consistent with Continuum objectives and responsibilities.

#### D. Board Officers

Officers: The Board members vote in a Chair and Vice-Chair from its membership.

- The Chair conducts Council meetings.
- The Vice Chair serves in the Chair's absence.

Terms: An officer serves for a one-(1)- year term with Chair and Chair-elect transitioning at the time of elections.

Term Limits: An officer cannot serve for more than one (1) consecutive term in the same role.

#### E. Board Vacancy, Removal & Resignation

Vacancy: In the event of a vacancy, the members of the Board will elect a successor based on the recommendations of the nominations committee to hold the vacant seat for the remainder of the term of the person vacating the seat. At the end of the term, a regular election will be held as described in this Charter. In the event of an appointee vacancy, the relevant agency will identify a replacement appointee.

Removal: Members of the Board may remove a Board member who is absent for two (2) Council regularly scheduled board meetings in any twelve-month period.

Board members may also be removed for cause by a 3/4 vote of the Board then-seated. Cause may include but is not limited to:

- Failure to perform Board duties
- Failure to comply with this Charter and/or applicable policies
- Engaging in conduct that constitutes a conflict of interest
- Engaging in behavior that causes harm to the reputation of the Continuum

Such seats will then be filled through the process described above under vacancies.

**Resignation:** Unless otherwise provided by written agreement, any member of the Board may resign at any time by giving written notice to the Chair. Any such resignations will take effect at the time specified within the written notice or if the time be not specified therein upon its acceptance by the Board.

#### F. Board Meetings & Action

**Frequency:** The Board will meet no less frequently than four (4) times per year at such times and places as the Board will determine. The Chair or Vice Chair may call a special meeting of the Board provided it meets all notice and quorum requirements.

Open Meeting: Attendance at meetings of the Board will be open to any interested person to observe.

Agendas: The Board will disseminate agendas in advance of the meeting.

**Notice:** Fifteen (15) days' notice will be given for regularly scheduled meetings of the Continuum Board. Special meetings may be called in emergency situations with 48 hours notice. See definition of Notice in Overview section of this Charter.

**Quorum:** A number equal to a majority of the Board members then-seated will constitute a quorum for the transaction of business at any meeting. No decision will be made unless a quorum is present. Board members may attend meetings by phone or videoconference when necessary.

**Decision-Making**: The Board makes decisions by consensus. The group will work toward consensus on all issues but taking votes with majority rule for decisions. If, in a given meeting, the group cannot reach consensus on an issue, a final vote will be taken with simple majority rule at the same meeting barring any unique circumstances requiring a postponement of a vote.

Voting: Each member of the Board is eligible to vote on decisions being made when present at the meetings in person or by phone/videoconference. If a vote is necessary, all votes will be by voice or

ballot at the will of the majority of those in attendance at a meeting with a quorum represented. No member may vote on any item that presents a real or perceived conflict-of-interest.

**Proxy:** There is no proxy voting. Decision-making requires live conversation and active participation from all parties.

Action without a Meeting: The Board may take an action without a meeting if that action, provided:

- The action is within its authority
- Notice is provided
- It is approved via email, phone or video conference by a majority of all Board then-seated members who are entitled to vote on the matter

#### **G. Board Staffing**

An employee of the Collaborative Applicant staffs the Board. This staff member is responsible for:

- Recording minutes for the Board and
- Ensuring Board members receive all necessary information including changes at the federal level that may influence or impact the Continuum as they may occur.

Staff may participate in discussion but may not vote.

#### IV. Committees, Working Groups & Task Forces

#### A. Formation & Composition

**Purpose:** The committees and subcommittees are the action planning components of the system. In these bodies, strategies are developed, deepened and expanded into timed work plans. These groups may also be directly responsible for specific strategies or exploring options to solve particular concerns.

**Formation:** Standing committees and subcommittees are designated in this Charter. Ad hoc working groups or task forces may be formed and given specific responsibilities as needed by the Board. All committee responsibilities apply to ad hoc groups as well.

**Membership:** Committee membership may include any Continuum member. However, at least one (1) committee member must come from the Board. Each committee will set its number and recruit members from the Continuum and larger community

#### **B. Standing Committees**

The Board has four (4) standing committees, three (3) standing subcommittees, and one standing workgroup:

- 1. Planning Committee
  - Nominations Subcommittee
  - Application Subcommittee
- 2. Service Coordination Committee
  - Case Managers Workgroup
- 3. Data and Research Committee
  - Point in Time Subcommittee
- 4. Compliance Committee
- 5. Resource Development Committee

1

Committees are responsible for the following:

- 1. Planning Committee Annually reviewing, updating, and ensuring Continuum approval of all policies, including the Governance charter, code of conduct, conflict of interest and recusal policies, and the Board election process; overseeing Continuum voting eligibility and elections; and coordinating capacity-building activities within the Continuum; monitoring grant performance, developing a fair process for performance improvement, recommending action per that process, and coordinating efforts to expand resources available to the continuum; Based on information from other committees assesses the Continuum for gaps, overlaps, duplication, strategic conflicts, etc. and makes recommendations for funding priorities and resources allocation; Coordinating implementation of Continuum goals related to public policy, advocacy, and related strategies; Coordinating implementation of Continuum goals related to community awareness, education, partnership development.
  - a. **Nominations Subcommittee** Send out calls for Board nominees; Accept, verify and collect information (e.g., attendance record, bio) for nominations; Present nominees to the Continuum of Care membership for approval.
  - b. Application Subcommittee— Overseeing of all application processes related to the HUD CoC Program: reviewing applications for funding, recommending project rank, assisting Collaborative applicant in developing application training, and answering questions related to the process. No agency currently receiving CoC funding can participate on the Application Subcommittee.
- 2. Service Coordination Committee Coordinating the implementation of housing system strategies within the Continuum that meets the needs of the homeless individuals (including unaccompanied youth) and families as well as those at risk of homelessness; Coordinating the implementation of service and prevention system strategies within the Continuum that meets the needs of the homeless individuals (including unaccompanied youth) and families as well as those at risk of homelessness; Scanning the environment for best practices and innovations; Developing written standards for CoC and ESG providers.
- 3. Data and Research Guiding the annual strategic plan review/update and periodic planning process, conducting an annual gaps analysis of the homeless needs and services available, evaluating outcomes of the Blueprint overall and projects funded under HUD (CoC and ESG Programs), and coordinating data collection and systems (including HMIS); Establishing system and project-level performance targets appropriate for population and program type, The Committee will not be responsible for nor have the authority to apply for funds directly. Point-in-Time Subcommittee Oversight of the point-in-time count process, implementation and analysis. Reviews best practice methodology and makes recommendations.
- 4. Compliance Committee Works closely with planning committee to develop monitoring procedures related to performance measurement, Continuum of Care policies and procedures, and any other applicable requirements. Implements monitoring of compliance with Continuum of Care operating procedures; Provides feedback to planning and services coordination committee, per monitoring policy, on results of monitoring regarding agencies noncompliance as well as on challenges experienced across all agencies.
- 5. Resource Development Committee Identifies potential sources of public and private funding and resources for services and infrastructure. Works closely with eligible agencies to

identify most effective strategy for applying for funding. Oversight of all funding and resources in DeKalb County to ensure maximum leverage and coordination of funds. Works closely with planning committee and application committee to ensure consistency and transparency around funding decisions and recommendations.

#### C. Committee Leadership

A chair or co-chairs, as selected from within the committee, will coordinate each committee.

#### D. Other Committee Roles & Responsibilities

Each committee will be responsible for:

- Recruiting its members
- Selecting a chair or co-chairs
- Establishing its policies and procedures, and providing them to the Board and Support Entity
- Recording its minutes and attendance, and providing them to the Support Entity
- Ensuring transparency of its process and meetings
- Providing recommendations to the Board on relevant HEARTH requirements

#### V. Continuum Policies

#### A. Conflict of Interest & Recusal

No member of the Continuum will participate in the review, ranking, selection, or award of any grant funds in which they have a financial interest, or in which any member of their immediate family (such as parent, sibling, child, niece/nephew, or person with whom they cohabit) has a financial interest.

Members of the Continuum will disclose potential conflicts of interest that they may have regarding any matters that come before it in full session, Council or committee.

Members will recuse themselves from any matter in which they may have a conflict of interest – abstaining from discussion and voting on the matter.

More information about the Conflict of Interest Policy can be found in the DeKalb Continuum of Care Conflict of Interest Policy. All Board members and Committee members (where applicable) must sign the Conflict of Interest Policy and complete any associated paperwork prior to serving on the Continuum Board and annually thereafter.

#### **B.** Non-Discrimination

The members, officers, committee members and contractors of the Continuum will be selected entirely on a nondiscriminatory basis with respect to race, color, national origin, age, disability, religion, gender, sexual orientation, or other federal, state or locally protected group.

#### C. Committee Policies & Procedures

Committees will establish their own policies and procedures, consistent with this Charter, and provide them to the Board and Collaborative Applicant for review.

#### **D. Limited Authority**

The Continuum is not a formal organization. As such:

- It has, and can have, no assets or liabilities;
- It cannot indemnify member or participant action; and
- No member of the Continuum, Board or its committees may contract, incur debt, or otherwise create an enforceable obligation for the Continuum, Board or its committees.

Only the Board, in collaboration with the Collaborative Applicant, may designate an individual or entity to speak for the Continuum or its components.

With the exception of removal policies in this Charter, any grievance related to the Continuum or CoC Program will follow HUD policies and contracts.

#### VI. Appointed Entities

#### A. Process

Except as otherwise specified in this section, the process for entity appointment will be as follows:

- Specific performance expectations for each appointment will be outlined in the Memorandum of Agreement and/or policies and procedures
- The Board will review appointments and their performance each year
- Appointed entity relationships may be terminated upon mutual agreement or for cause with a majority vote of the then-seated Board

A broad description of each appointment is provided in this section of the Charter.

#### **B.** Collaborative Applicant

DeKalb County has been designated as Collaborative Applicant for the Continuum.

For the purposes of the annual HUD NOFA application and the management of CoC Program planning grants, the Continuum Board must designate a grant recipient to be the Collaborative Applicant.

The Collaborative Applicant is the only entity that may

- Apply for grants from HUD on behalf of the Continuum.
- Apply for and receive CoC Program planning funds on behalf of the Continuum.
- Manage Planning Funds on behalf the CoC.

The Collaborative Applicant will be chosen by the Board annually prior to the release of the HUD NOFA and accepted by a 75% vote of then-seated Council members.

#### C. HMIS Lead

Department of Community Affairs/Georgia Housing and Finance Authority (DCA) has been designated as the Continuum HMIS Lead. DCA, thus, ensures all HMIS activities are carried out in accordance with the HEARTH Act with direction from the Continuum of Care and Collaborative Applicant (as outlined in the MOA and HMIS governance charter). HMIS Lead roles and responsibilities are clearly outlined in the definitions of this Charter, in the HMIS Governance Charter, and in the HMIS governance charter. HMIS policies and procedures will be reviewed and updated by the Data Quality Committee annually in accordance with HMIS data standards and HEARTH act and submitted to the Continuum of Care Board for review and approval. The policies and procedures can be accessed through the Collaborative Applicant and the Continuum website once created. The HMIS Lead will be chosen by the Board annually prior to the release of the HUD NOFA and accepted by a 75% vote of then-seated Council members.

#### VII. General Provisions

#### A. Operating Year

The operating year of the Continuum will commence on January 1st of each calendar year and end on the 31st day of December of said calendar year.

#### **B. Annual Document Review**

The Board will review this Charter annually to ensure it remains consistent with HUD's COC Program requirements as well as Continuum objectives and responsibilities.

#### C. Record Keeping

Proceedings of all Continuum, Board and committee meetings are documented in minutes.

- Minutes of meetings are circulated to members of the relevant body and approved at the subsequent meeting.
- The Collaborative Applicant is responsible for recording minutes for quarterly meetings of the Continuum and Board meetings
- Committees are responsible for selecting a Secretary, recording their own minutes, and providing to the Support Entity for record keeping
- Minutes for all bodies will be disseminated by the Support Entity upon request

The Collaborative Applicant will be the holder of all Continuum, Board and committee documentation and records.

#### D. Amendments

The members of the Continuum will have the power to adopt, amend, or repeal the provisions of this Governance Charter by a two-thirds (2/3) vote of the membership present at any meeting where such proposed action has been described in the notice of the meeting.

# GA HMIS Interim Policies and Standard Operating Procedures

This document details the Interim policies, procedures, guidelines, and standards that govern the operations of the GA Homeless Management Information System (GA HMIS).

# GA HMIS Policies and Standard Operating Procedures

## **Table of Contents**

lr	ntroduction	1
G	A HMIS Goals	2
D	efinitions	3
0	rganization and Management of GA HMIS	5
	Program Management	5
	Policy:	5
	Procedure:	5
	System Administration	5
	Policy:	5
	Procedure	., 5
	Agency Administration.	5
	Policy:	5
	Procedure:	6
	User Access Levels	6
	Policy:	. 6
	Procedure:	6
	GA Communication with Authorized Agencies	7
	Policy:	7
	Procedure:	7
	System Availability	7
	Policy:	7
	Explanation:	7
	Procedure:	7
	Inter-Agency Data Sharing	8
	Policy:	8
	Explanation	8
	Procedure	Q

Ethical Data Use
Policy:
Procedure:8
Access to Core Database9
Policy:9
Procedure9
Client Rights and Confidentiality of Records
Policy:
Explanation:
Procedure
Authorized Agency Grievances10
Policy:
Procedure:
Client Grievances
Policy:
Procedure:10
Authorized Agency Hardware/Software Requirements
Policy:11
Procedure11
Hardware/Software Requirements
Minimum Workstation Requirements
Recommended Workstation Requirements
Authorized Agency Technical Support Assistance
Policy:12
Procedure12
Videos, Guides, Etc
Policy:
Explanation:

Procedure:	13
Monitoring and Evaluation	13
Policy:	13
Explanation	13
Procedure	13
Security and Access	14
User Access	14
Policy:	
Explanation	14
Procedure:	14
User Changes	14
Policy:	
Procedure:	14
Passwords	
Policy:	15
Procedure:	15
Password Recovery	15
Policy:	15
Procedure:	15
Extracted Data	15
Policy:	15
Procedure:	16
Data Access Computer Requirements	16
Policy:	16
Explanation:	16
Procedure:	16
Agency Participation Requirements	18
GA HMIS Agency Participation Agreements	18

Procedure:
Client Consent Forms for Data Sharing
Policy:23
Procedure:
Appropriate Data Collection
Policy:23
Explanation:
Procedure:
Ownership24
Policy:
Procedure:
Data Entry - Client Profile Sharing Level
Policy:24
Procedure:
Additional Customization24
Additional Customization
Policy:24
Policy:
Policy:         24           Explanation:         24           Procedure:         25
Policy:         24           Explanation:         24           Procedure:         25           Data Integrity         25
Policy:       24         Explanation:       24         Procedure:       25         Data Integrity       25         Policy:       25
Policy:       24         Explanation:       24         Procedure:       25         Data Integrity       25         Policy:       25         Procedure:       25
Policy:         24           Explanation:         24           Procedure:         25           Data Integrity         25           Policy:         25           Procedure:         25           Quality Control: Data Integrity Expectations         25
Policy:         24           Explanation:         24           Procedure:         25           Data Integrity         25           Policy:         25           Procedure:         25           Quality Control: Data Integrity Expectations         25           Policy:         25
Policy:       24         Explanation:       24         Procedure:       25         Data Integrity       25         Policy:       25         Procedure:       25         Quality Control: Data Integrity Expectations       25         Policy:       25         Procedure:       25         Procedure:       25
Policy:       24         Explanation:       24         Procedure:       25         Data Integrity       25         Policy:       25         Procedure:       25         Quality Control: Data Integrity Expectations       25         Policy:       25         Procedure:       25         On-Site Review       25

	Policy:	26
	Procedure:	26
	Public Data Retrieval	26
	Policy:	26
	Procedure:	26
	Data Retrieval Support/Reporting	26
	Policy:	26
	Explanation:	26
	Procedure:	27
	DATA SHARING & SECURITY	28
	DISASTER RECOVERY	28
٩	ppendix A: GA HMIS End User Participation Agreement	29
	ppendix B: GA HMIS Agency Participation Agreement	
٩	ppendix C: GA HMIS Privacy Policy	50
	ppendix D: GA HMIS Client Consent Form	

#### Introduction

This document details the policies, procedures, guidelines, and standards that govern the operations of the GA Homeless Management Information System (GA HMIS). It outlines the roles and responsibilities of all agencies and persons with access to GA HMIS data, and it contains important and useful information about the ways in which GA HMIS data is secured and protected. All Providers using the GA HMIS should read this document in full and train every end user within its agency and programs to understand its contents as necessary. Appendix A is a user license agreement, which includes a statement that the user has read and understands these operating procedures as per the Agency Participation Agreement.

The US Department of Housing and Urban Development (HUD), other federal and state Partners, and the GA Collaborative, also known as Continuums of Care (CoCs), require GA HMIS to provide unduplicated statistical demographic reports on the numbers and characteristics of clients served as well as on program outcomes. In order to address the reporting requirements mandated by HUD and Department of Community Affairs has implemented an electronic management information system that will provide the necessary demographic information and reports. This system is called the GA Homeless Management Information System (GA HMIS) and is administered by the GA Department of Community Affairs (DCA). All Providers funded by certain HUD as well as some providers funded locally are required to Participate in the GA HMIS, and some privately funded providers Participate on a voluntary basis.

Providers' participating in the GA HMIS are required to collect and record HUD required data elements for all new and continuing clients in the HMIS. Data entry should be completed weekly with the exception of Emergency Shelter, which should enter daily data. All Providers using the GA HMIS are also required to comply with HUD's HMIS Data and Technical Standards available at <a href="http://www.hudhre.info">www.hudhre.info</a> and on the DCA website at <a href="http://www.dca.state.ga.us/housing/specialneeds/programs/hmis.asp.">http://www.dca.state.ga.us/housing/specialneeds/programs/hmis.asp.</a>

GA recognizes the importance of maintaining confidential client records in a secure environment to ensure that the information is not misused or accessed by unauthorized people. The following Policies and Standard Operating Procedures (SOP) have been developed to establish standards for the collection, storage and dissemination of confidential information by the users of the GA HMIS. GA has developed a privacy policy regarding the use and disclosure of data in the GA HMIS and by programs operated directly by GA HMIS (see Appendix C for a copy of this policy).

The GA HMIS is an "open" system which allows for the sharing of client-level data electronically between collaborating agencies, which must adhere to the GA HMIS privacy policy as well as the policies and operating procedures in this document. Agencies may also be able to share information through other methods unrelated to the GA HMIS, as outlined in their specific program policies. Data shared outside of GA HMIS is not able to be controlled or monitored by GA; therefore this data is not covered by the GA HMIS privacy policy. GA is the System Administrator for the GA HMIS and as such is the only entity with

access to all client-level information, including personal identifiers, contained in the GA HMIS. Acceptable uses and disclosures of the data are outlined in the GA HMIS privacy policy. For example, GA may disclose data that is required under a court order issued by a judge, to protect the health and safety of those being served in its programs, and may use de-identified data for research and analysis purposes. Except in rare cases, GA does not provide access to client-level data containing personal identifiers to any non-Participating agency. Additionally, HUD does not require any client-level information from the GA HMIS for the programs it funds. Thus, only de-identified and/or aggregate-level data is shared with non-participating agencies and HUD.

#### **GA HMIS Goals**

The goals of the GA HMIS are to support and improve the delivery of homeless services in the jurisdictions it serves. Inclusive in these goals is the improvement of the knowledge base about homelessness that contributes to an enlightened and effective public response to homelessness. The GA HMIS is a tool that facilitates the following:

- Improvements in service delivery for clients as case Administrators assess the client's needs, inform
  the client about available services on site or through referral, help the client find and keep permanent
  housing, and improve service coordination when information is shared between programs within one
  agency that are serving the same client.
- A confidential and secure environment that protects the collection and use of all client data including personal identifiers.
- The automatic generation of standard reports required by HUD or other stakeholders and funders, including participation in the national Annual Homelessness Assessment Report (AHAR).
- Generation of system-level data and analysis of resources, service delivery needs and program outcomes for the Commonwealth's homeless population.
- A data collection and management tool for authorized agencies to administer and supervise their programs.

GA recognizes the need to maintain each client's confidentiality, and will treat the personal data contained within the GA HMIS with respect and care. As the guardians entrusted with this personal data, GA has both an ethical and a legal obligation to ensure that data is collected, accessed and used appropriately. Of primary concern to GA are issues of security (i.e. encryption of data traveling over the Internet, the physical security of the GA HMIS servers), and the policies governing the release of this information to the public, government and funders. Meeting the needs of homeless persons served by GA HMIS and its Providers is the underlying and most basic reason for having the GA HMIS, and employing it for continued improvements in program quality.

#### **Definitions**

**Agency Administrator:** The person responsible for system administration at the agency level. This person is, or is appointed by an Agency's Executive Director.

Authorized/Participating Agency: Any agency, organization or group who has a GA HMIS Participation Agreement and/or contract with DCA and that is allowed access to the GA HMIS Client Track application. These Agencies connect independently to the application via the Internet.

Client: shall mean any recipient of services offered by a Provider or Authorized/Participating Agency.

Client-level Data: Data collected or maintained about a specific person. This type of data can be deidentified for purposes of data analysis, which means that personally identifying information is removed from the record for reporting.

GA HMIS: The specific HMIS system utilized by the GA HMIS CoC's and other participating jurisdictions.

GA HMIS System Administrator: The job title of the person at DCA who provides oversight of GA HMIS. This person has the highest level of user access in GA HMIS and has full access to all user and administrative functions.

Database: An electronic system for organizing data so it can easily be searched and retrieved; usually organized by fields and records.

**Encryption**: Translation of data from plain text to a coded format. Only those with the "key" have the ability to correctly read the data. Encryption is used to protect data as it moves over the internet.

Firewall: A method of controlling access to a private network, to provide security of data. Firewalls can use software, hardware, or a combination of both to control access.

HMIS: Homeless Management Information System. This is a generic term for any system used to manage data about homelessness and housing.

HUD HMIS Data and Technical Standards: The initial HUD Data & Technical Standards were published July 30, 2004 Federal Register, Vol. 69, No. 146, pp. 45888 through 45934. The Department of Housing and Urban Development (HUD), the Department of Health and Human Services (HHS), and the Department of Veterans Affairs (VA) released the 2017 HMIS Data Standards on May 2, 2017. The HMIS Data Standards provide communities with baseline data collection requirements developed by HUD, HHS, and VA.

**Identifying Information:** Information that is unique to an individual and that may be used to identify a specific person. Examples of identifying information are name and social security number.

**Provider:** Shall mean any organization within a CoC that provides outreach, shelter, housing, employment and/or social services to homeless people. For the purposes of this document, the term "provider" is synonymous with "Authorized Agency."

Server: A computer on a network that manages resources for use by other computers in the network. For example, a file server stores files that other computers (with appropriate permissions) can access. One file server can "serve" many files to many client computers. A database server stores a data file and performs database queries for client computers.

User: An individual who uses a particular software package; in this case, the GA HMIS *Client Track* software.

### **Organization and Management of GA HMIS**

### **Program Management**

Policy: The Georgia Department of Community Affairs (DCA) is responsible for project management and coordination of the GA HMIS. DCA contracts with Eccovia who provides System Administration for the GA HMIS and is responsible for baseline training, system changes, reporting, custom reporting, addressing end user tickets and system change coordination. The System Administrator is the primary contact with GA HMIS Lead to implement any necessary or desired system-wide changes and updates. In this role as Project Administrator, GA endeavors to provide a uniform GA HMIS that yields the most consistent data for client management, agency reporting, and service planning.

**Procedure:** All concerns relating to the policies and procedures of the HMIS should be addressed with the GA HMIS Lead.

### **System Administration**

**Policy:** DCA contracts with Eccovia who provides System Administration for the GA HMIS and is responsible for baseline training, system changes, reporting, custom reporting, addressing end user tickets and system coordination and administration. In the absence of the System Administrator, the backup staff member/ proxy for responding to Authorized Agencies is the DCA HMIS Coordinator.

**Procedure:** The GA HMIS System Administrator administers the day-to-day operations of the GA HMIS and is governed by Georgia Bylaws Code of Conduct. Among other things, this Code of Conduct governs access to the Georgia data (client level or otherwise). All system-wide questions and issues should be directed to the GA HMIS System Administrator or proxy, if System Administrator is absent. DCA HMIS Lead is ultimately responsible for all final decisions regarding planning and implementation of the GA HMIS.

### **Agency Administration**

**Policy:** Each Authorized Agency must designate a staff member to be the GA HMIS Agency Administrator who is responsible on a day-to-day basis for enforcing the data and office security requirements under these Policies and Standard Operating Procedures. While one person per Authorized Agency may be designated as the Agency Administrator; a backup Administrator should be considered.

**Procedure:** The Executive Director of the Authorized Agency must identify an appropriate Agency Administrator and provide that person's name and contact information to the GA HMIS System Administrator and respective CoC Administrator. Changes to that information over time should be reported immediately to the GA HMIS System Administrator respective CoC Administrator. The GA HMIS Lead is responsible for maintaining a current list of Agency Administrators.

Agency Administrators are responsible for the following:

- Serves as the primary contact between the Authorized Agency and System Admin and HMIS Lead.
- Must have a valid email address and be an active, trained user.
- Communicates the need to remove end users from the GA HMIS immediately upon termination from agency, placement on disciplinary probation, or upon any change in duties not necessitating access to GA HMIS information. All changes must be relayed to the GA HMIS System Administrator or proxy.
- Must be technically proficient with web-based software since he/she will be responsible for maintaining the Authorized Agency's GA HMIS organizational structure and information.
- Has access to all client data, user data, and agency administration information for the Authorized Agency; thus, is responsible for the quality and accuracy of this data.
- Ensures the stability of the agency connection to the Internet and GA HMIS, either directly or in communication with other technical professionals.
- Ensures Privacy Posting is posted and visible to all clients.
- Monitors and enforces compliance with standards of client confidentiality and ethical data collection, entry, and retrieval at the agency level.

#### **User Access Levels**

**Policy:** All GA HMIS Users will have a level of access to data that is appropriate to the duties of their position so that information is recorded and accessed on a "need to know" basis. All users should have the level of access that allows efficient job performance without compromising the security of the GA HMIS or the integrity of client information.

**Procedure:** Each CoC Representative (and/or its CoC HMIS Administrator) will identify the level of access each end user will have to the GA HMIS database. Privilege levels are detailed below:

- Manage Clients The ability to create and edit client records and enroll clients in programs
- Manage Programs The same privileges as "Manage clients" with the addition of the ability to edit relevant program profile information
- Manage Users The same privileges as "Manage Programs" with the addition of the ability to manage user access and permission to programs
- Manage Agency The same privileges as "Manage Users" with the addition of the ability to edit Agency information and create/ manage sites
- HMIS Lead A "super user" privilege level used by the DCA HMIS Lead staff to allow "Manage Agency" access to multiple agencies (a service area).

 System Administrator - Full privileges to GA HMIS - GA HMIS System Administrator, Help Desk, and programmers only

#### **GA Communication with Authorized Agencies**

**Policy:** The GA HMIS Lead is responsible for relevant and timely communication with CoC Representative, who is then in turn responsible to communicate to each agency regarding the GA HMIS. The GA HMIS Lead will communicate system-wide changes and other relevant information to Agencies as needed.

**Procedure:** General communications from the GA HMIS Lead will be directed towards all users. Specific communications will be addressed to the person or people involved. The GA HMIS Lead will be available via email, phone, and mail. The GA HMIS email list will also be used to distribute HMIS information. While specific problem resolution may take longer, the GA HMIS System Administrator will strive to respond to Authorized Agency questions and issues within 24 hours of receipt. CoC Admins and Agency Administrators are responsible for distributing information to any additional people at their agency who may need to receive it, including, but not limited to, Executive Directors, client intake workers, and data entry staff. Agency Administrators are responsible for communication with all of their agency's users.

#### **System Availability**

Policy: GA and GA HMIS will provide a highly available database server and will inform users in advance of any planned interruption in service.

**Explanation:** A highly available database affords agencies the opportunity to plan data entry, management, and reporting according to their own internal schedules. Availability is the key element in maintaining an HMIS that is a useful tool for Authorized Agencies to use in managing programs and services.

**Procedure:** No computer system achieves 100% uptime. Downtime may be experienced for routine maintenance, in the event of a disaster, or due to systems failures beyond the control of GA HMIS System Administrator or the GA HMIS Lead. In the event of disaster or routine planned server downtime, the GA HMIS Lead will use Constant Contact to send correspondence that informs users of the cause and duration of the interruption in service. The HMIS Client Track system is backed up every four hours and the entire system is backed up daily so it can be restored as quickly as possible if necessary.

### **Inter-Agency Data Sharing**

**Policy:** GA HMIS is an "open" system, meaning that data can be shared between GA HMIS participating agencies. Whether data is actually shared or not is determined on a per client basis, based on user input and client data sharing preferences.

**Explanation:** The need for client confidentiality and the benefit of integrated case management needs to be balanced. In light of new regulations for Coordinated Entry and community needs, the privacy and security policies were designed to permit Inter-Agency data sharing while still safeguarding client confidentiality.

**Procedure:** When new clients are entered into GA HMIS, the initiating user must set the Client's data sharing permission (Restrict to MOU) based on the Client's response on the Release of Information form) before data sharing is permitted. These permissions control the information that is shared about the client globally.

Users must record the actual responses received by the client when setting up the client's electronic data sharing policy. Users may be monitored to ensure compliance with this policy at any time by Agency Administrators, HMIS Leads, or the GA HMIS System Administrator, in which case users will need to provide a copy of any Release of Information forms that are requested. Any user found to not adhere to the data sharing permissions allowed by the client will be immediately and permanently banned from GA HMIS, and may face possible legal action. If a user feels it is in the best interest of the client, they may further restrict the client's electronic sharing policy by setting sharing to Restrict to Org, but users may never choose to implement a less restrictive data sharing policy without collecting a new Release of Information form that has been signed by the client and permits less restrictive data sharing.

#### **Ethical Data Use**

Policy: Data contained in the GA HMIS will only be used to support or report on the delivery of homeless and housing services in Georgia. Each GA HMIS End User will affirm the principles of ethical data use and client confidentiality contained in the GA HMIS Policies and Standard Operating Procedures Manual, the GA HMIS Participation Agreement, and the GA HMIS End User Agreement. Each Authorized Agency must have a written privacy policy, including specific policies related to employee misconduct or violation of client confidentiality. All GA HMIS End Users must understand their Agency's privacy policy, and a signed policy statement must become a permanent part of the employee's personnel file.

**Procedure:** All GA HMIS users will sign a GA HMIS System End User Agreement before being given access to the GA HMIS. Any individual or Authorized Agency misusing, or attempting to misuse GA HMIS data will be denied access to the database, and his/her/its relationship with the GA HMIS may be terminated. Any Authorized Agency for which the relationship with the GA HMIS is terminated will also

likely be de-funded by GA and/ or the Continuum of Care in which they are located because of the statutory requirement to participate in the Continuum's HMIS.

#### Access to Core Database

**Policy:** No one but GA HMIS System Administrator/GA HMIS Lead staff will have direct access to the GA HMIS database through any means other than the GA HMIS user interface, unless explicitly given permission by GA HMIS System Administrator/GA HMIS Lead.

**Procedure:** GA HMIS System Administrator/GA HMIS Lead staff will monitor employ updated security methods to prevent unauthorized database access.

### Client Rights and Confidentiality of Records

**Policy:** The GA HMIS System operates under a protocol of *inferred consent* to include client data in the GA HMIS. Each Authorized Agency is required to post a sign about their privacy policy in a place where clients may easily view it (i.e. - at the point of intake, on a clipboard for outreach providers, in a case management office). The privacy posting should include a statement about the uses and disclosures of client data as outlined in this document. Written authorization for inclusion of a client's data in GA HMIS is not required, but is inferred when a client accepts the services offered by the program and when the privacy posting is displayed for client review.

Clients may opt out of GA HMIS or be unable to provide basic personal information. Clients have the right of refusal to provide personal identifying information to the GA HMIS, except in cases where such information is required to determine program eligibility or is required by the program's funders. Such refusal or inability to produce the information shall not be a reason to deny eligibility or services to a client. When a client exercises his/her right of refusal, de-identified demographic (anonymous) information will be entered into the GA HMIS.

Each Authorized Agency shall take appropriate steps to ensure that authorized users only gain access to confidential information on a "need-to-know" basis in accordance with this document and their own Privacy Policy. Duly authorized representatives of GA may inspect client records (including electronic records) at any time, although non-GA HMIS staff will not, as a matter of routine, be permitted to access protected private information. GA and Authorized Agencies will ensure the confidentiality of all client data as described in this document.

**Explanation:** The data in the GA HMIS is personal data, collected from people in a vulnerable situation. GA System Administrators, HMIS Representatives, CoC Administrators, the HMIS Lead and Authorized

Agencies are ethically and legally responsible to protect the confidentiality of this information. The GA HMIS will be a confidential and secure environment protecting the collection and use of client data.

**Procedure:** Access to client data will be controlled using restrictive access policies. Each Authorized Agency must develop and make available a privacy policy related to client data captured in GA HMIS and through other means. A posting that summarizes the privacy policy must be placed in an area easily viewed by clients, and must also be placed on the Authorized Agency's web site (if they have one). Only individuals authorized to view or edit individual client data in accordance with the stated privacy policies and these Standard Operating Procedures will have access to that data.

### **Authorized Agency Grievances**

**Policy:** Authorized Agencies will contact the GA HMIS System Administrator to resolve GA HMIS problems including but not limited to operation or policy issues. If an issue needs to be escalated, the GA HMIS System Administrator may contact GA HMIS Lead for further guidance. The GA HMIS Lead and the CoC HMIS Steering Committee, will have final decision-making authority over all grievances that arise pertaining to the use, administration, and operation of the GA HMIS.

**Procedure:** Users at Authorized Agencies will bring GA HMIS problems or concerns to the attention of their Agency Administrator. If problems, concerns, or grievances cannot be addressed by the Agency Administrator, the Agency Administrator will contact their respective CoC Representative, who may ask for these issues to be stated in writing. If the grievance requires further attention, the GA HMIS Lead may consult with Georgia's legal counsel. The Georgia HMIS Lead along with the GA HMIS Steering Committee shall have final decision-making authority in all matters regarding the GA HMIS.

#### **Client Grievances**

**Policy:** Clients must contact the Authorized Agency with which they have a grievance for resolving of GA HMIS problems. Authorized Agencies will report all GA HMIS-related client grievances to the respective CoC Representatives, who in turn, will report these grievances to the GA HMIS Lead. If the Authorized Agency's grievance process has been followed without resolution, the Authorized Agency may escalate the grievance to the respective GA CoC Representative as outlined in the "Authorized Agency Grievances" section.

**Procedure:** Each Authorized Agency is responsible for answering questions, complaints, and issues from their own clients regarding the GA HMIS. Authorized Agencies will provide a copy of their privacy policy and/or copies of the GA HMIS Privacy Policy or GA HMIS Policies and Standard Operating Procedures upon client request. Client complaints should be handled in accordance with the Authorized Agency's internal grievance procedure, and then escalated to the appropriate CoC Representative in

writing if no resolution is reached. The GA HMIS Lead is responsible for the overall use of the GA HMIS, and will respond if users or Authorized Agencies fail to follow the terms of the GA HMIS agency agreements, breach client confidentiality, or misuse client data. Authorized Agencies are obligated to report all GA HMIS-related client problems and complaints to their CoC Representative, who will determine the need for further action. Resulting actions might include further investigation of incidents, clarification or review of policies, or sanctioning of users and Agencies if users or Agencies are found to have violated standards set forth in GA HMIS Agency Agreements or the Policies and Standard Operating Procedures Manual. Upon the client's request for data removal from the GA HMIS, the Agency Administrator will delete all personal identifiers of client data within 72 hours. A record of these transactions will be kept for a period of three years by the Agency Administrator and provided to GA upon request.

### **Authorized Agency Hardware/Software Requirements**

Policy: Authorized Agencies will provide their own computer and method of connecting to the Internet, and thus to the GA HMIS Client Track system. If possible and as funds permit, GA HMIS Lead or the respective CoC may choose to assist Authorized Agencies in obtaining computers and Internet access for the GA HMIS.

Procedure: Contact your local CoC Representative for the current status of assistance.

Hardware/Software Requirements: GA HMIS is web-enabled software; all that is required to use the database is a computer, a valid username and password, and the ability to connect to the Internet using internet browser software (Chrome, Internet Explorer, Firefox, etc.). There is no unusual hardware or additional GA HMIS-related software or software installation required. The following workstation specifications are recommended.

#### **Minimum Workstation Requirements**

- Computer: PC 500 MHz or better
- Web Browser: Google Chrome 4.0.249 or higher, Microsoft Internet Explorer 5 or higher, Mozilla Firefox 3.0 or higher, or Netscape Navigator 6.0 or higher
- Hard Drive: 2 GB
- 64 MB RAM
- Internet Connectivity (broadband or high-speed)
- SVGA monitor with 800 x 600+ resolutions
- Keyboard and Mouse

#### **Recommended Workstation Requirements**

- Computer: 1 Gigahertz Pentium Processor PC
- Browser: Google Chrome 17.0.963 or higher, Microsoft Internet Explorer 8.0 or higher (preferred)
- 20 GB Hard Drive
- 512 MB RAM
- > Broadband Internet Connection 128 Kbps (hosted version) or LAN connection
- SVGA monitor with 800x600 + resolution
- Keyboard and mouse

Although there is no unusual hardware or additional GA HMIS-related software required to connect to the database, the speed and quality of the Internet connection and the speed of the hardware and could have a profound effect on the ease of data entry and report extraction. A high-speed Internet connection, like a DSL or ISDN line with speeds at or above 128.8 Kbps, is preferred, as is a computer with speeds above 166MHz. Google Chrome 17.0.963 or higher is the recommended platform to eliminate certain technical problems.

### **Authorized Agency Technical Support Assistance**

**Policy:** GA HMIS System Administrators and the GA HMIS Lead will provide technical assistance including a help desk, training, and ongoing software support for users of the GA HMIS. Technical issues with the GA HMIS software should be addressed by submitting a ticket while logged into the Client Track system or submit an email at <a href="mailto:GAHMISSupport@dca.ga.gov">GAHMISSupport@dca.ga.gov</a>. Internal hardware and internet connectivity issues should be addressed by the Authorized Agency's internal IT staff to the extent possible.

**Procedure:** Hardware and connectivity issues not related to the GA HMIS software are not under the control of the GA HMIS Lead or GA HMIS System Administrator and should be addressed by the Authorized Agency's internal IT staff. Authorized Agencies may send an email to <a href="mailto:GAHMISSupport@dca.ga.gov">GAHMISSupport@dca.ga.gov</a> for technical support to learn what is necessary to connect to the GA HMIS Client Track system as well as to request assistance with the application itself.

#### Videos, Guides, Etc.

**Policy:** The GA System Administrators and the GA HMIS Lead will provide an array of materials to assist all GA HMIS End Users on use and functionality of the system. Each GA HMIS End User will be required to view several videos and completing an assessment prior to obtaining system access. These videos, documentation, forms, etc. will be posted in the GA HMIS webpage <a href="http://www.dca.ga.gov/housing/specialneeds/programs/hmis.asp">http://www.dca.ga.gov/housing/specialneeds/programs/hmis.asp</a>.

**Explanation:** A variety of training methods and materials targets various learning styles to provide software users with information about how the software product is used. Videos and reference guides will provide specific technical instruction to GA HMIS End Users about how to use GA HMIS Client Track.

**Procedure:** The GA HMIS System Administrators and GA HMIS Lead staff will create, distribute and update the necessary videos, reference guides, etc. These will include procedures that are held in common for all Authorized Agencies.

#### **Monitoring and Evaluation**

**Policy:** The GA HMIS Lead and participating CoCs will regularly monitor and evaluate the effectiveness of the GA HMIS Implementation and, based on the information received, will continue to make enhancements to the GA HMIS system and the Policies and Standard Operating Procedures as necessary.

**Explanation**: Monitoring and evaluation helps ensure security and proper usage of the GA HMIS system.

**Procedure:** The GA HMIS System Administrator will conduct internal system monitoring. This information will be shared with the CoCs and may be used by the CoC to monitor programs funded through the CoC as required by HUD. The HMIS Lead is authorized to conduct monitoring on behalf of the GA HMIS System Administrator and/or their CoC.

### **Security and Access**

#### **User Access**

**Policy:** Only the GA HMIS System Administrators or the GA HMIS Lead staff will be authorized to grant user access to GA HMIS. User accounts will be unique for each user and may not be exchanged or shared with other users.

**Explanation**: Unique user names and passwords are the most basic building block of data security. Not only is each user name assigned a specific access level, but in order to provide to clients or program management an accurate record of who has altered a client record, when it was altered, and what the changes were (called an "audit trail") it is necessary to log a user name with every change. Exchanging or sharing user names seriously compromises the security of the GA HMIS system, and will be considered a breach of the system user agreement and will trigger appropriate repercussions and/or sanctions for the user and agency.

**Procedure:** Users are not able to access any data until they are trained, all agreements are collected, and the account is activated by GA HMIS staff. The GA System Administrator and GA HMIS Lead staff will have access to the list of active end user names. Additionally, Agency Administrators will monitor the users in their agency to ensure that accounts are current.

### **User Changes**

**Policy:** The Authorized Agency Administrator will notify the System Administrator and GA HMIS Lead of needed changes to the Authorized Agency user accounts. This includes revoking authorization for staff who are no longer with the agency and any needed changes to the users' agency access and privilege levels, etc.

**Procedure:** The Agency Administrator is required to inform the System Administrator through the ticketing system within the Client Track application of the need to revoke the user account of a terminated employee immediately upon termination of employment. For employees with user access otherwise leaving the agency, the user account should be revoked at the close of business on the person's last day of employment.

#### **Passwords**

Policy: GA End Users will have access to the GA HMIS Client Track system via a user name and password. Passwords must be changed a minimum of once every 90 days. Users will keep passwords confidential. Under no circumstances shall a user share a password nor shall they post their password in an unsecured location; to do so will be considered a breach of the system user agreement and will trigger appropriate repercussions and/or sanctions for both the user and agency.

**Procedure:** Upon sign in with the user name and temporary password, the user will be required by the software to select a unique password that will be known only to him/her. Every 90 days, end users will be prompted to change their password. See Section entitled "User Access" for additional detail on Password security.

#### Password Recovery

**Policy:** The GA HMIS System Administrators and GA HMIS Lead staff DO NOT have access to User account passwords.

**Procedure:** In the event of a lost or forgotten password, the end user will use the password recovery option to reset their password. The system will ask the user for their email address, and then ask for the answer to their security question. As an extra layer of security, End Users may not choose where the password reset email is sent. Once the security question is answered correctly, an email will be sent only to the email address listed in the End User's account profile. If this account is no longer active, the End User must request assistance from the System Administrator or HMIS Lead to reactivate their account. This request must be sent to the <a href="mailto:GAHMISSupport@dca.ga.gov">GAHMISSupport@dca.ga.gov</a> address. Once users receive the Password reset email which contains a temporary Password, Users must login and change their password immediately before gaining access to Agency and Client data. Each request for a new password is logged in an audit trail.

#### **Extracted Data**

**Policy:** GA HMIS end users will maintain the security of any client data extracted from the database and stored locally, including all data used in custom reporting. GA HMIS users will not electronically transmit any unencrypted client data across a public network. Any custom reports (electronic or printed) which are shared with non-Participating agency, must remove Client and Household names.

**Procedure:** Data extracted from the database and stored locally will be stored in a secure location (not on floppy disks/CDs or other temporary storage mechanisms like flash drives or on unprotected laptop computers, for example) and will not be transmitted outside of the private local area network unless it is properly protected via encryption or by adding a file-level Password. The GA HMIS System Administrator will provide help in determining the appropriate handling of electronic files. All security questions will be addressed to the GA HMIS System Administrator via the internal ticketing system. Breach of this security policy will be considered a violation of the user agreement, which may result in personnel action and/or agency sanctions.

### **Data Access Computer Requirements**

**Policy:** Users will ensure the confidentiality of client data, following all security policies in the GA HMIS Policies and Standard Operating Procedures Manual and adhering to the standards of ethical data use, regardless of the location of the connecting computer. All Policies and Procedures and security standards will be enforced regardless of the location of the connecting computer. The participating CoC may restrict access to the GA HMIS system to specific computers in the future.

**Explanation:** Because GA HMIS is web-enabled, software end users could conceivably connect to the database from locations other than the Authorized Agency itself, using computers other than agency-owned computers. Connecting from a non-agency location may introduce additional threats to data security, such as the ability for non-GA HMIS users to view client data on the computer screen or the introduction of a virus. If such a connection is made, the highest levels of security must be applied, and client confidentiality must still be maintained. This includes only accessing the GA HMIS via a computer that has virus protection software installed and updated.

#### **Procedure:** Each Authorized Agency and Agency Administrator is responsible for:

- a) Physical space: Authorized Agencies must take reasonable steps to ensure client confidentiality when authorized users are accessing the GA HMIS system. Authorized end users are required to conduct data entry in a protected physical space to prevent unauthorized access to the computer monitor while confidential client information is accessible.
- b) Use of a non-agency computer located in a public space (i.e. internet café, public library) to connect to HMIS is prohibited.
- c) Time-Out Routines: Time-out (login/logout) routines on every computer to shut down access to the GA HMIS Client Track system when a computer is unattended. Time-out routines will be engaged at a minimum after 10 minutes of inactivity or at other intervals as GA HMIS Steering Committee determines.
- d) Each computer that accesses GA HMIS Client Track system must have current virus software that updates automatically installed.

e) If the GA HMIS Client Track system is accessed over a network, the network must be protected by a hardware or software firewall at the server. A stand-alone machine that accesses the GA HMIS client data must also have a hardware or software firewall installed and active. This may be the firewall protection included as part of the operating system or the virus protection software installed on the computer.

Questions about security of the GA HMIS should be referred to the GA HMIS System Administrator via the internal ticketing system.

### **Agency Participation Requirements**

### **GA HMIS Agency Participation Agreements**

Policy: Only Authorized Agencies will be granted access the GA HMIS Client Track system. The GA CoC's shall make the sole determination to identify Authorized Agencies that will participate in their Continuum of Care. The Executive Director of each Authorized Agency will be required to sign a "GA HMIS Agency Participation Agreement" (Appendix B) binding their organization to the GA HMIS Policies and Standard Operating Procedures and all applicable Federal, State, and local laws and regulations regarding the handling of client data before access is granted.

**Procedure:** Authorized Agencies will be given a copy of the GA HMIS Agency Participation Agreement, the Policies and Standard Operating Procedures Manual, and any other relevant GA HMIS paperwork prior to any end user for the agency accessing the ClientTrack system. The Executive Director should review and then signed the paperwork and return to the GA HMIS Lead. The Agency account must first be setup prior to activating an end user account under that agency.

#### **User Accounts**

Policy: In order to activate an account, an end user review and sign the GA HMIS End User Agreement and send to the GA HMIS Lead. Additionally, Agency end users will be trained to use GA HMIS Client Track system by completing the initial end user video playlist or by the System Administrator at a training sessions scheduled by the GA HMIS System Administrator or GA HMIS Lead. Once training has been completed, the end user will complete the associated training assessment and then will activate each user's account.

Sharing of accounts, User IDs, or Passwords is strictly prohibited. Users may not even share accounts, User IDs, or Passwords with management within their agency.

**Procedure:** Each Agency Administrator (or Executive Director) will identify the authorized users for the agency. These authorized user names should be submitted to the respective CoC in which the agency resides. The CoC Representative or CoC Admin from the CoC will notify the GA HMIS System Administrator via the internal ticket system of the need to set up new authorized end user accounts.

### **GA HMIS System User Agreements**

**Policy:** Each Authorized Agency User will sign a GA HMIS Collaborative System User Agreement before being granted access to the GA HMIS.

**Explanation:** Before being granted access to the GA HMIS, each user must sign a GA HMIS End User Agreement, stating that he/she will abide by the GA HMIS Policies and Standard Operating Procedures Manual, will appropriately maintain the confidentiality of client data, and will only collect, enter, and retrieve data in the GA HMIS relevant to the delivery of services to people in housing crisis.

**Procedure:** The CoC will distribute GA HMIS System End User Agreements to new GA HMIS Users for signature. The user will sign the GA HMIS System End User Agreement and the agreement will be faxed or emailed/scanned to the GA HMIS Lead or the System Administrator. The CoC will also file the signed GA HMIS System End User Agreements for all users. The existence of a signed GA HMIS End User Agreement for each active user will be verified in any on-site reviews or may be checked during regular monitoring of contracts. Allowing a user access to the GA HMIS system without a signed user agreement is a violation of the GA HMIS Policies and Standard Operating Procedures and may result in sanctions.

### **Training**

**Policy**: The GA HMIS System Administrator and GA HMIS Lead are responsible for defining training needs and organizing training sessions for Authorized Agencies. Various training options will be provided, to the extent possible, based on the needs of GA HMIS end users. GA HMIS Client Track training materials will be provided on <a href="http://www.dca.ga.gov/housing/specialneeds/programs/hmis.asp">http://www.dca.ga.gov/housing/specialneeds/programs/hmis.asp</a> that may be used by Agency Administrators, CoC Representatives and CoC Admins to provide extra training opportunities.

**Explanation:** In order for the GA HMIS to be a benefit to clients, a tool for Authorized Agencies and a guide for planners, all users must be adequately trained to collect, enter, and extract data.

**Procedure:** The GA HMIS System Administrator and GA HMIS Lead will provide access to training for all GA HMIS users. The GA HMIS System Administrator and GA HMIS Lead will provide support to Agency Administrators, CoC Representatives and CoC Admins, who will in turn provide for end user training above and beyond the initial training.

### **Contract Termination Initiated by Authorized Agency**

**Policy:** Authorized Agencies that are not contracted to GA HMIS may terminate the GA HMIS Agency Participation Agreement with or without cause upon 30 days written notice to GA HMIS and according to the terms specified in the GA HMIS Agency Participation Agreement. The termination of the GA HMIS Agency Participation Agreement by the Authorized Agency may affect other contractual relationships with DCA and/or requirements set forth in contracts issued by HUD. In the event of termination of the GA HMIS Agency Participation Agreement, all data entered into the GA HMIS will remain an active part of the GA HMIS system.

**Explanation:** While non-GA HMIS contracted Authorized Agencies may terminate relationships with DCA and the GA HMIS Collaborative, the data entered prior to that termination would remain part of the database. This is necessary for the database to provide accurate information over time and information that can be used to guide planning for community services in GA. The termination of the GA HMIS Agency Participation Agreement may affect other contractual relationships with DCA, HUD, or other funders.

**Procedure:** GA HMIS Provider Agencies are required to participate in the GA HMIS system as a condition of their funding. For all non-GA HMIS contracted Authorized Agencies terminating the GA HMIS Agency Participation Agreement, the person responsible for signing the GA HMIS Agency Participation Agreement (or a person in the same position within the agency) will notify the GA HMIS System Administrator 30 days or more prior to the date of termination. In all cases of termination of GA HMIS Agency Participation Agreement, the GA HMIS System Administrator will disable all user accounts from that Authorized Agency on the date of termination of agreement.

### **Contract Termination Initiated by GA**

Policy: DCA may terminate the GA HMIS Agency Participation Agreement for non-compliance with the terms of the agreement or with the GA HMIS Standard Operating Procedures with written notice to the Authorized Agency. DCA may also terminate the GA HMIS Agency Participation Agreement with or without cause with 30 days written notice to the Authorized Agency and according to the terms specified in the GA HMIS Agency Participation Agreement. If a GA HMIS contract is terminated under the terms of that contract, the GA HMIS Agency Participation Agreement(s) for GA HMIS access for that/those Agency(ies) will also be terminated. In that case, access may be renegotiated by DCA and the agency if appropriate and in accordance with these standard operating procedures. The termination of the GA HMIS Agency Participation Agreement or contract with DCA may affect other contractual relationships with GA, HUD, or other funders. In the event of termination of the GA HMIS Agency Participation Agreement or GA HMIS contract, all data entered into the GA HMIS will remain a part of the GA HMIS. If termination of the GA HMIS Agency Participation Agreement or GA HMIS contract occurs, all Authorized Agency end user

accounts will be disabled on the date the GA HMIS Agency Participation Agreement or contract is terminated.

**Explanation:** While DCA may terminate the GA HMIS Agency Participation Agreement or its contract with the Authorized Agency, the data entered by that Authorized Agency prior to termination of contract would remain part of the database. This is necessary for the database to provide accurate information over time and information that can be used to guide planning for community services in GA. The termination of the GA HMIS Agency Participation Agreement may affect other contractual relationships with GA, HUD, or other funders.

**Procedure:** GA HMIS Provider Agencies are required to participate in the GA HMIS as a condition of their funding. Willful neglect or disregard of the Standard Operating Procedures will result in immediate termination of an Authorized Agency from the GA HMIS. If a contract with an authorized agency or collaborative of authorized agencies is terminated, that/those Agency(ies) will be terminated from GA HMIS. For all non-GA HMIS contracted Authorized Agencies for which the GA HMIS Agency Participation Agreement is terminated, the GA HMIS System Administrator will notify the CoC Representative 30 days or more from the date of termination. The CoC will notify the Provider Agency. In all cases of termination of GA HMIS Agency Participation Agreement, the GA HMIS System Administrator will disable all user accounts from that Provider Agency on the date of termination of agreement.

### **Data Collection, Quality Assurance and Reporting**

### **Required Data Collection**

**Policy:** Authorized Agencies funded by HUD (either through DCA or directly) through the Supportive Housing Program, Shelter Plus Care, HOPWA, Section 8 Moderate Rehabilitation, the Emergency Shelter Grant, the Homelessness Prevention and Rapid Rehousing Program, or Emergency Solutions Grant are required to participate in HMIS by HUD. Other providers contracted by other State or Federal departments may also be required to participate in the GA HMIS. All Authorized Agencies that participate in HMIS are considered "Covered Homeless Organizations" (CHO) and are required to comply with HUD's *HMIS Data and Technical Standards* unless those standards are in conflict with local laws. This includes the collection of required data elements.

Authorized Agencies shall collect and enter all HUD required data elements on every client served by the Provider upon intake into the Provider's facility or program. Authorized Agencies may choose to collect more client information for their own case management and planning purposes or to comply with requirements from their CoC or funders.

Timeliness of Data Entry: Providers are required to enter basic client intake data into the GA HMIS weekly. Emergency Shelter programs must complete all data entry within 24 hours of a client being served which includes their entry or exit from their Program.

**Procedure:** Each agency should review and enter all HUD required data into GA HMIS as specified by HUD per Program Type.

#### **Client Consent**

**Policy:** Each agency must post a sign at each intake or comparable location and on its web site (if applicable) explaining the reasons for data collection for those seeking services. Consent for entering of data into GA HMIS may be inferred when the proper privacy notice is posted and if the client accepts the services offered. If a client chooses to not share their data through GA HMIS, all of the client's data may still be collected and stored in GA HMIS, but data sharing must be disabled for that client's record (i.e. "locked").

**Explanation:** Privacy Policies should be in effect for each agency to both inform clients about the uses and disclosures of their personal data and to protect the agency by establishing standard practices for the use and disclosure of data. Each client must give permission for the disclosure and/or use of any client

data outside of the privacy policy developed and posted by the agency. Client consent notices must contain enough detail so that the client may make an informed decision. Clients may withdraw permission to have their personal protected information in the HMIS, or may make a request to see copies of his or her client record.

**Procedure:** Authorized Agencies will develop a privacy posting, which will be posted in appropriate areas for client review.

#### Client Consent Forms for Data Sharing

Policy: GA HMIS participating/authorized agencies must use the GA HMIS Client Consent to Share form to collect all clients' sharing consent (Appendix F). Each agency should include in its privacy policy that data collected by the agency is disclosed to the DCA HMIS Lead as part of its administrative responsibility for the GA HMIS and that the data may be used for analysis and reporting purposes. DCA HMIS Lead will only report aggregate and/or de-identified data as part of its responsibilities, and agrees to maintain the data with the highest level of confidentiality and within the security guidelines set forth in this document.

**Procedure:** Each client must have a signed GA HMIS Client Consent to Share form on file which records their permission (or lack thereof) before users can share their data via GA HMIS.

### **Appropriate Data Collection**

**Policy:** GA HMIS end users will only collect client data relevant to the delivery of services to people in housing crises as required by HUD and/or required by funders or by law.

**Explanation:** The purpose of the GA HMIS is to support the delivery of homeless and housing services in Georgia. The database should not be used to collect or track information not related to serving people in housing crises or otherwise required for policy development, planning, or intake purposes.

**Procedure:** Agency Administrators will ask the GA HMIS System Administrator for any necessary clarification of appropriate data collection. The GA HMIS System Administrator, in consultation with GA HMIS Steering Committee, will make decisions about the appropriateness of data being entered into the database. The GA HMIS Lead may periodically audit an agency's data collection practices to ensure the database is being used appropriately.

### Ownership

**Policy:** The GA HMIS, including any and all data stored in the GA HMIS, is the property of the DCA. DCA has authority over the creation, maintenance, and security of the GA HMIS. Violations of the GA HMIS Agency Participation Agreement, the Standard Operating Procedures, and Privacy Policies may be subject to discipline and/or termination of access to the GA HMIS.

**Procedure:** The GA HMIS Agency Participation Agreement includes terms regarding the maintenance of the confidentiality of client information, an acknowledgement of receipt of the Policies and Standard Operating Procedures Manual, and an agreement to abide by all policies and procedures related to the GA HMIS including all security provisions contained therein. Because programs participating in the GA HMIS are funded through different streams with different requirements, DCA shall maintain ownership of the database in its entirety in order that these funders cannot access data to which they are not legally entitled.

### Data Entry - Client Profile Sharing Level

**Policy:** Users will accurately record the real time data sharing level(s) indicated by the client. Repeated violation of this policy may lead to personnel action and or action against the Authorized Agency, including but not limited to immediate termination of user and/or agency access.

**Procedure:** Client information will not ever be shared unless the user expressly sets up a data sharing policy in the client's profile. It is imperative that, once a data sharing policy is set up for a client, users at an Authorized Agency keep this information current, modifying a current policy record or creating a new policy record as necessary, in accordance with changes to the client's GA HMIS Client Consent to Share form.

#### Additional Customization

**Policy:** Authorized Agencies may request additional desired customization (such as special reports) directly from the respective CoC Representative. Agency or CoC level customizations will be considered by the GA HMIS Steering Committee on a case-by-case basis. If the customization requires development by Eccovia, billing will be set up based upon a contract between the Authorized Agency(ies)/CoC and GA.

**Explanation:** It is the responsibility of individual Agencies to determine the best way to use GA HMIS for internal data collection, tracking, and reporting. This may include purchasing additional customization.

**Procedure:** Authorized Agencies will contact their CoC Representative in order to discuss additional customization needs.

### **Data Integrity**

**Policy:** GA HMIS users will be responsible for the accuracy of their data entry. Authorized Agency leadership will be responsible for ensuring that data entry by users is being conducted in a timely manner and will also ensure the accuracy of the data entered. Data may also be used to measure program efficacy, which impacts funding opportunities during competitive funding processes such as the annual Continuum of Care application to HUD or annual ESG applications.

**Procedure:** It is the responsibility of each Authorized Agency to monitor the quality and accuracy of its GA HMIS data, not the GA HMIS Lead. However, the GA HMIS Lead may periodically audit data integrity. In order to test the integrity of the data contained in the GA HMIS, the GA HMIS System Administrator will perform periodic data integrity checks on the GA HMIS. The data integrity checks will include reporting of "overlaps," possible verification of data and comparison to hard files, as well as querying for internal data consistency and null values. Any patterns of error will be reported to the GA HMIS Lead and the GA HMIS Steering Committee. When patterns of error have been discovered, users will be required to make corrections where possible, correct data entry techniques, and improve the accuracy of their data entry.

### **Quality Control: Data Integrity Expectations**

**Policy:** Accurate and consistent data entry is essential to ensuring the usefulness of the GA HMIS. Authorized Agencies will provide acceptable levels of timeliness and accuracy. Authorized Agencies without acceptable levels of data quality or timeliness may have payments withheld or incur other contract sanctions until the problems are addressed.

**Procedure:** The Continuum of Care, will perform data integrity checks on its respective GA HMIS authorized agencies.

#### **On-Site Review**

Policy: The DCA Lead may perform reviews of an Authorized Agency's procedures related to the GA HMIS as part of monitoring. Additional monitoring may take place by funding bodies, or CoCs.

**Procedure:** Reviews enable the GA HMISs Lead and the CoCs to monitor compliance with the Policies and Standard Operating Procedures Manual and GA HMIS Agency Participation Agreements. The exact procedures for on-site reviews will be determined in advance of the actual on-site review.

#### **Client Data Retrieval**

**Policy:** Any client may request to view, or obtain a printed copy of, his or her own records contained in the GA HMIS. This information should be made available to clients within a reasonable time frame of the request. No client shall have access to another client's records in the GA HMIS.

**Procedure:** A client may ask his/her case Administrator or other agency staff to see his or her own record. The case Administrator, or any available staff person with GA HMIS access, will verify the client's identity and print all requested information. The client may request changes to the record. The agency can follow applicable law regarding whether to change information based on the client's request. A log of all such requests and their outcomes should be kept on file in the client's record.

#### **Public Data Retrieval**

**Policy:** The GA HMIS Lead will address all requests for data from entities other than Authorized Agencies or clients. No individual client data will be provided to any group or individual that is neither the Authorized Agency that entered the data or the client him or herself without proper authorization or consent.

**Procedure:** All requests for data from anyone other than an Authorized Agency or a client must be directed solely to GA HMIS Lead. GA may also issue periodic public reports about homelessness and housing issues in the areas covered by GA HMIS. No individually identifiable client data will be reported in any of these documents.

### Data Retrieval Support/Reporting

Policy: Authorized CoC HMIS Administrators will create and run CoC- level and agency-level reports.

**Explanation:** Authorized CoC HMIS Administrators and the System Administrators have the ability to create and execute reports on CoC –wide and agency-wide data, depending on their privilege level. This allows Authorized CoC HMIS Administrators to support CoC-level and agency-level goals.

**Procedure:** The CoC HMIS Administrators will be trained in the use of reporting tools by the System Administrator. The System Administrator will provide query functionality and templates for reports specifically for GA HMIS. The System Administrator may assist with the development of or running of reports/queries.

#### **DATA SHARING & SECURITY**

- Clients are uniquely identified by a database-managed identity field.
- GA HMIS maintains the following:
  - a. User permissions are assigned by role and by Agency/Site
  - b. Users are logged out of the system after a configurable period of inactivity (20 minutes)
  - c. Passwords must be changed periodically (90 days)
  - d. Inactive end users must contact the System Administrator to re-activate the end user account.
- GA HMIS uses HTTPS/SSL Standards for data transmission.
- Passwords must be updated every 90 days, and cannot be reused.

#### DISASTER RECOVERY

- Disaster recovery for the GA HMIS application is managed by Eccovia.
- A full back up of the Database is performed nightly. Incremental and Transactional backups are done periodically during the day. All back up files are moved off site.

**Appendix A: GA HMIS End User Participation Agreement** 

### Appendix A: GA HMIS End User Participation Agreement

Agency Name (Please Print):	
User Name (Please Print):	
In this End User Participation Agreement, "Agency" refers to the agency named a needs in the design and management of the Georgia HMIS ("GA HMIS"). These the quality of homeless and housing services with the goal of eliminating home vigilantly maintain client confidentiality, treating the personal data of our most v	include both the need to continually improve elessness in our community, and the need to
GA HMIS End Users ("Users") have a moral and a legal obligation to ensure that and used appropriately. It is also the responsibility of each User to ensure that which it was collected. Proper user training; compliance with the terms and corthe GA HMIS Privacy Policy.	client data is only used for the purposes for
Relevant points regarding client confidentiality include:	
<ul> <li>A client consent form must be signed by each client whose data is share the GA HMIS system. Users may not share client data with other GA HMIS system without obtaining this written permission from the client.</li> <li>Client consent may be revoked by that client at any time by compliance Revocation Form at any GA HMIS participating agency.</li> <li>No client may be denied services for failure to provide consent for GA H</li> <li>With the exception of case notes, Clients have a right to inspect, received HMIS records.</li> <li>Users will maintain GA HMIS data in such a way as to protect the identity individuals or entities.</li> <li>Any User failing to protect client confidentiality as set forth in this User may be denied access to the GA HMIS.</li> </ul>	IS participating agencies via the GA HMIS eting the GA HMIS Client Consent to Share MIS data sharing or collection. The a copy of, and request changes to their GA of clients from further participating agencies, The Agreement and the GA HMIS Privacy Policy,
HMIS Policies and Procedures Manual and affirm the following:	
<ol> <li>I have received GA HMIS Privacy Policy.</li> <li>I have read and will abide by the terms of the GA HMIS User Agree HMIS Policies and Procedures Manual.</li> </ol>	ment, the GA HMIS Privacy Policy and the GA
<ol> <li>I will maintain the confidentiality of client data in the GA HMIS as Agreement, the GA HMIS Privacy Policy, and the GA HMIS Policies a</li> </ol>	nd Procedures Manual.
<ol> <li>I will only collect, enter, and extract data in the GA HMIS relevant t of becoming homeless, and formerly homeless people experiencing</li> </ol>	•
User Signature	Date

Due to the sensitive nature of the data stored in GA HMIS, each User is required to be trained in Privacy, Security and Confidentiality practices and End User Onboarding Training prior to being allowed access. These trainings are recorded and updated as necessary, and posted to <a href="http://www.dca.ga.gov/housing/specialneeds/programs/hmis.asp">http://www.dca.ga.gov/housing/specialneeds/programs/hmis.asp</a>. Additionally, users will be able to find the training calendar which lists the availability of any live training, videos and webinars along with registration information.

To ensure that each user has been trained, GA HMIS staff tracks training attendance. Users who have not yet attended mandatory training are not permitted access to the system. GA HMIS staff realizes that in some cases, a user may need to be able to be trained quickly so as not to adversely affect their agency's ability to utilize GA HMIS. In the event a training is not offered and presents an undue hardship on a participating Agency that has limited staffing and was forced to wait for training. In these cases, new users may be trained by their respective GA HMIS CoC Admin (or designated Representative). The CoC Admin or designated Representative may use any materials posted by GA HMIS staff on <a href="http://www.dca.ga.gov/housing/specialneeds/programs/hmis.asp">http://www.dca.ga.gov/housing/specialneeds/programs/hmis.asp</a> to assist them in providing a complete training consisting of Privacy, Security and Confidentiality, and system use appropriate with the user's needed access level. If the CoC Admin (or designated Representative needs to provide training in the stead of GA HMIS staff, the user's account will not be activated until the CoC Admin (or designated Representative completes this form and certifies that the user has been trained. Please note that the CoC Admin (or designated Representative does not need to complete this form for any users trained directly by GA HMIS staff directly or by the System Admin. HMIS Lead users may only be trained by GA HMIS staff or System Admin staff.

Signature, User	Date
I authorize, as the Executive Director (or Designee) the aforement system for this designated agency.	ntioned User to have access to the HMIS
Signature, Executive Director (or Designee)	Date
I certify the aforementioned User has completed the required tr system (complete if applicable).	rainings necessary to access the HMIS
Training completed	Date
Training completed	Date
Signature, CoC Admin (or Designee)	Date
GA HMIS Policy and SOP – Appendix A	31   Page

**Appendix B: GA HMIS Agency Participation Agreement** 

#### **Appendix B: GA HMIS Agency Participation Agreement**

("Agency") has elected to participate in the Homeless Management Information System ("HMIS"). The HMIS software is licensed by the Georgia Housing Finance Authority, who has designated it to be solely administered by the Georgia Department of Community Affairs ("DCA"). Agency is entering into this HMIS Participation Agreement for Agencies ("Agreement"). The HMIS is a database that collects and maintains information on the characteristics and service needs of clients. The system collects and stores client–level data, which can be used to generate unduplicated and aggregate reports to determine the use and effectiveness of the services being provided to the homeless population.

In consideration of their mutual undertakings and covenants, the Agency and DCA agree as follows:

#### 1. General Understandings:

- A. <u>Definitions</u>. In this Agreement, the following terms will have the following meanings:
  - "Agency" (sometimes called "Participating Agency") refers to any service provider or organization signing this document that is participating or planning to participate in the HMIS.
  - ii. "Agency staff" refers to employees, volunteers, contractors, or any other agents of the Agency.
  - iii. "Client" refers to a person receiving services from the Agency.
  - iv. "DCA" refers to the Georgia Department of Community Affairs.
  - v. "De-Identifying Information" (also referred to as "non-identifying" information) refers to data that has specific Client demographic information removed, to allow use of the data without identifying a specific Client.
  - vi. "End User" refers to Agency employees, volunteers, contractors, or any other agents of the Agency authorized to have, and having, access to the HMIS.
  - vii. "Enter(ing)" or "entry" refers to the entry of any Client information into the HMIS.
  - viii. "GA HMIS Privacy Policy" is a document related to the processing of protected personal client information by end users of the GA HMIS.

- ix. "GA HMIS End User Agreement/Code of Ethics is a document outlining the agreement between the End User and DCA.
- x. "GHFA" refers to the Georgia Housing Finance Authority.
- xi. "HMIS" refers to the Homeless Management Information System.
- xii. HMIS staff" refers to the employees, contractors, or agents of DCA assigned to administer the HMIS, as well as to analyze, review and report on the data contained in HMIS.
- xiii. "HMIS Policies and Procedures" is a document referring to the day to day policies and procedures to be followed.
- xiv. "Identifying Information" (also referred to as confidential data or confidential information) refers to information about a Client that can be used to distinguish or trace the Client's identity, either alone or when combined with other personal or identifying information using methods reasonably likely to be used.
- xv. "Information" refers to both De-Identifying Information and Identifying Information.
- xvi. "Share(ing)," or "information share(ing)" refers to entering information into HMIS, or providing Identifying Information to other agencies, organizations, individuals, or providers that participate in the HMIS.
- B. <u>Use and Disclosure</u>. Whenever Agency enters information into HMIS, such Identifying Information will be available to the HMIS staff who may use it to: administer HMIS, conduct analysis, coordinate services, and prepare reports to be submitted to others in a de-identifying form. Identifying Information entered into the HMIS may also be viewed by other agencies that participate in the HMIS who are serving that client with appropriate authorization, have executed a GA HMIS End User Agreement/Code of Ethics ("End User Code of Ethics") and have agreed to be bound by the GA HMIS Privacy Policy ("Privacy Policy") and HMIS Policies and Procedures ("HMIS Policies"). Agency may use and disclose HMIS Identifying Information only in accordance with the above documents.
- C. <u>Incorporation and Modification of Other Documents</u>. The Privacy Policy, HMIS Policies and Procedures, and End User Code of Ethics are incorporated into this Agreement as if restated in full, and are attached to this Agreement as Appendices "A", "B" and "C" respectively. All three of these

documents may be amended from time to time at the discretion of DCA, and all parties are bound by such amendments. Notice of any amendments will be done through DCA's website at: <a href="http://www.dca.ga.gov/housing/specialneeds/programs/hmis.asp">http://www.dca.ga.gov/housing/specialneeds/programs/hmis.asp</a>

D. <u>Access</u>. Agency agrees to allow DCA and its subcontractors access to information provided by the Agency in accordance with this Agreement and to carry out its duties with respect to the HMIS, which includes without limitation, HMIS administration, testing, problem identification and resolution, management of the HMIS database, and data aggregation and analysis activities, as permitted by applicable state and federal laws and regulations.

#### 2. Confidentiality:

#### A. Agency shall not:

- i. enter information into the HMIS which it is not authorized to enter, or
- ii. share information that Agency is not authorized to share.

By entering information into the HMIS, Agency represents that it has the authority to enter such information into the HMIS. To the best of Agency's knowledge, any information entered into the HMIS does not violate any of the Client's rights, under any relevant federal, state, or local confidentiality laws, regulations or other restrictions applicable to Client information.

If Agency is subject to any laws or requirements which restrict Agency's ability either to disclose or enter certain data elements into HMIS, Agency will ensure that any entry it makes in the HMIS or disclosure of any data elements complies with all applicable laws or other restrictions. Agency is solely responsible for determining if any disclosures of Client information are restricted under any state or federal laws and regulations including but not limited to the Health Insurance Portability and Accountability Act of 1996 ("HIPAA") and the Federal Drug and Alcohol Confidentiality Regulations, 42 CFR Part 2 ("Confidentiality Regulations").

B. To the extent that information entered by Agency into the HMIS is or becomes subject to disclosure restrictions, Agency will immediately inform DCA in writing of such restrictions and submit by mail to the address given herein for written notices.

#### 3. <u>Display of Notice</u>:

Pursuant to the notice published by the Department of Housing and Urban Development ("HUD") on July 30, 2004, Agency will prominently display at each intake desk (or comparable location) the Privacy Policy provided by DCA, that explains generally the reasons for collecting Identifying Information in the HMIS and the Client rights associated with providing Agency staff with Identifying Information. It is

Agency's responsibility to ensure that each Client understands his or her rights. Additionally, if Agency maintains a public webpage, the current version of the Privacy Policy must be posted on the webpage. The current form of Privacy Policy, which may be modified from time to time at DCA's discretion, is attached to and incorporated into this Agreement by reference, and is available from DCA or on its website, <a href="http://www.dca.ga.gov/housing/specialneeds/programs/hmis.asp">http://www.dca.ga.gov/housing/specialneeds/programs/hmis.asp</a>

#### 4. Information Collection, Release and Sharing Consent:

A. <u>Collection of Identifying Information</u>. Agency must collect information by lawful and fair means, and with the knowledge or consent of the Client.

Any Identifying Information collected by the Agency must be relevant to the purpose for which it is to be used. To the extent necessary for those purposes, Identifying Information should be accurate, complete and timely.

B. <u>Sharing</u>. Prior to sharing any of a Client's information with an agency or organization, except as provided in the Privacy Policy, Agency will provide the Client with a copy of its GA HMIS Consent to Share Form ("Consent"). Following an explanation regarding the entity or individual that the information will be shared with and how it will be used, the Agency will obtain the informed consent of the Client by having the Client sign the Consent Form.

If a Client does not sign the Consent form, information may not be shared with other agencies except as may be allowed in the Privacy Policy. Agency shall keep all copies of the signed Consent form for a period of seven (7) years after the Client last received services at or from the Agency. Such forms shall be available for inspection and copying by DCA and/or the U.S. Department of Housing and Urban Development, at any time.

C. <u>Refusal of Services</u>. Agency may not refuse or decline services to a Client or potential Client if that person:

- i. objects to the entry of its information in the HMIS; or
- ii. refuses to share his or her personal information with the Agency or cannot remember certain information; however, some information may be required by the program to determine eligibility for housing or services, to assess needed services, or to fulfill reporting requirements.

#### 5. HMIS Policies and Procedures:

Notwithstanding any other provision of this Agreement, Agency's use of and participation in the HMIS, and the use, disclosure, and submission of data to and from the HMIS shall, at all times, be governed by the Privacy Policy and the HMIS Policies, as may be revised from time to time. The Privacy Policy shall control any disagreements between the referenced documents.

#### 6. Disclosure to Third Parties:

Agency shall not release any Identifying Information received from the HMIS to any other person or organization without the written informed Consent of the Client, unless such disclosure is required by law or in accordance with the Privacy Policy.

#### 7. Client Inspection/Correction:

Upon receipt of a written request from a Client, Agency shall allow the Client to inspect and obtain a copy of his or her own information during regular business hours. Agency is not required to provide a Client access to information (a) compiled in reasonable anticipation of, or for use in, a civil, criminal or administrative action or proceeding; (b) about another individual; (c) obtained under a promise of confidentiality if disclosure would reveal the source of the information; and (d) which, if disclosed, would be reasonably likely to endanger the life or physical safety of any individual. Agency must allow a Client to correct information that is inaccurate or incomplete; provided, however, that prior to correcting such information, Agency shall consult with DCA. Such consultation is necessary to ensure proper coordination between the Agency's response and the capabilities of the HMIS system, unless the requested correction is a routine correction of a common data element for which a field exists in HMIS (e.g., date of birth, prior residence, social security number, etc.). Agency is not required to remove any information as a result of a correction, but may, in the alternative, mark information as inaccurate or incomplete and may supplement it with additional information.

#### 8. Security:

Agency shall maintain the security and confidentiality of information in the HMIS and is responsible for the actions of its employees, contractors, volunteers, or agents and their proper training and supervision. Agency agrees to follow the HMIS Policies. At its discretion, DCA may conduct periodic assessments of Agency to monitor its compliance. The steps Agency must take to maintain security and confidentiality include, but are not limited to:

- A. <u>Access</u>. Agency will permit password-protected access to the HMIS only to authorized Agency staff who need information from the 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). Agency will limit the access of such staff to only those records that are immediately relevant to their work assignments.
- B. <u>End User Code of Ethics</u>. Prior to permitting any End User to access HMIS, Agency will require the End User to sign an End User Code of Ethics. Agency will comply with and enforce the End User Code of Ethics and will inform DCA immediately in writing of any breaches of the End User Code of Ethics.
  - i. any staff, volunteer or other person who has been granted an End User ID and password and is found to have committed a breach of system security and/or Client confidentiality will have his/her access to the database revoked immediately.
  - ii. in the event of a breach of system security or Client confidentiality, the Director of the Agency or designee shall notify DCA in writing immediately, but in no event later than twenty-four (24) hours. This correspondence should be sent to address given herein for notice. Any Agency that is found to have had breaches of system security and/or Client confidentiality shall enter a period of probation, during which technical assistance shall be provided to help the Agency prevent further breaches.

Probation shall remain in effect until DCA has evaluated the Agency's security and confidentiality measures and found them compliant with the policies stated in this Agreement and the End User Code of Ethics. Subsequent violations of system security may result in suspension from the HMIS.

- C. <u>Computers</u>: Security for data maintained in the HMIS depends on a secure computing environment. Computer security is adapted from relevant provisions of the Department of Housing and Urban Development's ("HUD") "Homeless Management Information Systems (HMIS); Data and Technical Standards Proposed Rule" (Docket No. FR 5475-P-01- Fed. Reg. Vol. 76, No. 237 (December 9, 2011/Proposed Rules). Agencies are encouraged to directly consult that document for complete documentation of HUD's standards relating to HMIS, and hereby agree to incorporate any changes to HUD policy into their computing environment on the timeline specified by HUD. Agency will allow access to the HMIS only from computers which are:
  - protected from viruses by commercially available virus protection software (a) that includes, at a minimum, automated scanning of files as they are accessed by End Users on the system on which the HMIS application is accessed and (b) with virus definitions that are regularly updated from the software vendor;

- ii. protected with a secure software or hardware firewall between, at least, the workstation and any systems (including the internet and other computer networks) located outside of the Agency;
- iii. maintained to ensure that the computer operating system running the computer used for the HMIS is kept up to date in terms of security and other operating system patches, updates, and fixes;
- iv. accessed through web browsers with 128-bit encryption (e.g., Internet Explorer, and Google Chrome). Some browsers have the capacity to remember passwords, so that the End User does not need to type in the password when returning to password-protected sites. This default shall not be used with respect to the HMIS; the End User is expected to physically enter the password each time he or she logs on to the system; and
- v. staffed at all times when in public areas. When computers are not in use and staff is not present, steps should be taken to ensure that the computers and data are secure and not usable by unauthorized individuals. These steps should minimally include (a) logging off the HMIS system, (b) physically locking the computer in a secure area, (c) shutting down the computer entirely, or (d) using a password protected screen saver.
- D. End User Authentication: Agency will permit access to HMIS only with use of an End User authentication system consisting of an End User name and a password which the End User may not share with others. Written information pertaining to End User access (e.g., End User name and password) shall not be stored or displayed in any publicly accessible location. Passwords shall be between eight and twelve characters long and include both letters and numbers. Passwords shall not be, (or include) the End User name, the HMIS vendor's name, the HMIS name, the Agency's name, or consist entirely of any word found in the common dictionary or any of the forenamed words spelled backwards. The use of default passwords on initial entry into the HMIS application is allowed so long as the End User changes the default password on first use. Individual End Users must not be able to log on to more than one workstation at a time, or be able to log on to the network at more than one location at a time. Passwords and End User names shall be consistent with guidelines issued from time to time by HUD and DCA. Passwords and End User names shall not be exchanged electronically without DCA's approval.
- E. <u>Hard Copies</u>: The Agency must secure any paper or other hard copy containing Identifying Information that is generated either by or for the HMIS, including, but not limited to reports, data entry forms and signed consent forms. Any paper or other hard copy generated by or for the HMIS that contains such information must be supervised at all times when it is in a public area. If Agency staff is not present, the information must be secured in areas that are not publicly accessible. Agencies wishing

to dispose of hard copies containing Identifying Information must do so by shredding the documents or by other equivalent means with written approval by DCA. Written information specifically pertaining to End User access (e.g., End User name and password) must not be stored or displayed in any publicly accessible location.

F. <u>Training/Assistance</u>: Agency will ensure End Users have received the required GA HMIS Privacy, Security and Confidentiality Training and the End User Onboarding Training prior to accessing the HMIS system. Agency will participate in such training as is provided from time to time by DCA. Representatives of DCA will be reasonably available during DCA's defined weekday business hours for technical assistance (e.g., troubleshooting and report generation).

#### 9. Information Entry Standards:

- A. Information entered into HMIS by Agency will be truthful, accurate, complete and timely to the best of the Agency's knowledge.
- B. Agency will not solicit from Clients or enter information about Clients into the 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.
- C. Agency will only enter information into the HMIS database with respect to individuals which it serves or intends to serve, including through referral.
- D. Agency will enter information into the HMIS database within seven (7) days of data collection.
- E. Agency will not alter or over-write information entered by another Agency.

DCA reserves the right to, in its sole discretion, delete or segregate information entered into the HMIS by an Agency, or take any other appropriate measures, to maintain the accuracy and integrity of the HMIS or to avoid compromising the HMIS' goal of maintaining unduplicated counts of Clients.

#### 10. Use of the HMIS:

- A. Agency will not access Identifying Information for any individual for whom services are neither being sought nor provided by the Agency.
- B. Agency may report non-identifying information to other entities for funding or planning purposes. Such non-identifying information shall not directly identify individual Clients.

- C. Agency and DCA will report only non-identifying information in response to requests for information from the HMIS, including but not limited to requests for information related to research
- D. Agency will not use the HMIS in violation of any federal or state law, including, but not limited to, copyright, trademark and trade secret laws, and laws prohibiting the transmission of material which is threatening, harassing, or obscene. Software licensing was purchased from ClientTrack, Inc. ("Supplier") to implement the HMIS. Without limiting the foregoing covenant, Agency agrees that the data and information related to the software licensed by Supplier, and related documentation and support services, may be confidential and proprietary information ("Confidential Information") of the Supplier and agrees to use such Confidential Information only in connection with Agency's authorized use of the HMIS and support services and further agrees not to disclose such Confidential Information to any third party, other than as required by law. Furthermore, Agency acknowledges and agrees that the Supplier will retain all right, title, interest and ownership in and to the HMIS software, including any customization or modification thereof, and Agency will not copy any documentation related to the HMIS software other than for internal business purposes, nor shall Agency disassemble, decompose or reverse engineer the HMIS software, except as otherwise provided herein, use the HMIS software on behalf or for the benefit of any other person or entity or otherwise infringe upon any of the Supplier's trademarks, trade secrets, copyrights, patents or other intellectual property rights. Agency shall include all Supplier copyright and other proprietary notices on any copy of the documentation related to HMIS software reproduced, used, or made available by Agency.
- E. Agency will not use the HMIS to defraud federal, state or local governments, individuals or entities, or conduct any illegal activity.
- F. Agency shall not use the HMIS to aggregate data to compare the performance of other participating Agencies, without the express written consent of DCA and each of the Participating Agencies being compared.
- G. Notwithstanding any other Section of this Agreement, the parties may use or disclose for any lawful purpose information that: (a) is in the possession of the party prior to the time of the disclosure to the party through the HMIS and was not acquired, directly or indirectly, from the HMIS; or (b) is made available to the party by a third party who has the legal right to do so.

#### 11. Proprietary Rights of the HMIS:

A. Agency or HMIS Staff shall assign passwords and access codes for all Agency Staff that meet other privacy, training and conditions contained within this Agreement.

- B. Agency or HMIS Staff shall not assign passwords or access codes to any other person not directly connected to or working for the Agency.
- C. Agency shall be solely responsible for all acts and omissions of its End Users, and all other individuals who access the HMIS either through the Agency or by use of any password, identifier or log-on received or obtained, directly or indirectly, lawfully or unlawfully, from the Agency or any of the Agency's Authorized End Users, with respect to the HMIS and/or any confidential and/or other information accessed in connection therewith, and all such acts and omissions shall be deemed to be the acts and omissions of the Agency. Each Agency shall certify:
  - that its End Users have received training regarding the confidentiality of HMIS
    information under all applicable federal, state, and local laws and agree to protect the
    Information in compliance with such laws and this Agreement;
  - ii. that its End Users shall only access the HMIS for purposes approved by the Agency and that are consistent with this Agreement;
  - that its End Users have agreed to hold any passwords, or other means for accessing the HMIS, in a confidential manner and to release them to no other individual or entity.
     Agency shall ensure that all End Users understand that sharing passwords and other means for accessing the HMIS is expressly prohibited;
  - iv. that its End Users agree and understand that their failure to comply with the terms of this Agreement may result in their exclusion from the HMIS and may constitute cause for disciplinary action by the Agency; and
  - v. that it has restricted access to the HMIS only to the End Users that the Agency has identified pursuant to this Section.
- D. Agency shall inform the CoC Administrator or System Administrator at DCA via email to terminate the rights of an End User immediately upon the End User's termination or resignation from his or her position. The Agency is responsible for following up to verify that the End User is removed from the system. It shall be the responsibility of the Agency to routinely ensure that End Usernames and passwords are current and to immediately notify HMIS staff in the event that End Usernames and passwords are not current.
- E. Agency shall be diligent not to cause in any manner or way, corruption of the HMIS, and Agency agrees to be responsible for any damage it may cause.

#### 12. Data Collection & Evaluation Committee:

DCA and HMIS staff will consult with the Data Collection & Evaluation Committee under the Georgia HMIS By-Laws from time to time regarding issues such as revision to the form of this Agreement. Written Agency complaints that are not resolved may be forwarded to the Data Collection & Evaluation Committee under the GA HMIS By-Laws, which will try to reach a voluntary resolution of the complaint. Unresolved issues would then go to the Steering Committee for resolution.

#### 13. Limitation of Liability and Indemnification:

Note: Under sections 13 and 14, the term DCA includes both GHFA and DCA. It is the intention of the parties that all limitations of liability and indemnification agreed to apply to DCA also apply to GHFA. Parties acknowledge that this is an essential provision of this Agreement.

A. Except as provided in Section 13, no party to this Agreement shall assume any additional liability of any kind due to its execution of this Agreement or its participation in the HMIS system. It is the intent of the parties that each party shall remain liable, to the extent provided by law, regarding its own acts and omissions; but that no party shall assume additional liability on its own behalf or liability for the acts of any other person or entity through participation in HMIS except for the acts and omissions of its own employees, volunteers, agents or contractors unless any such liability is expressly created herein. The parties specifically agree that this Agreement is for the benefit of the parties only and creates no rights in any third party.

- B. IT IS EXPRESSLY AGREED THAT IN NO EVENT SHALL DCA BE LIABLE TO AGENCY FOR ANY SPECIAL, DIRECT, INDIRECT, CONSQUENTIAL, EXEMPLARY, OR OTHER DAMAGES, INCLUDING BUT NOT LIMITED TO LOSS OR PROFITS OR REVENUES, LOSS OF USE, LOSS OF INFORMATION/DATA, OR OTHER DAMAGES NOT SPECIFIED HEREIN. This is agreed whether a claim for any such liability or damages is premised upon breach of contract, breach of warranty, negligence, strict liability, equitable theory, tort, or any other theories of liability, even if DCA has been apprised of the possibility or likelihood of such damages occurring. Parties acknowledge that this is an essential provision of this Agreement, with adequate consideration made.
- C. Agency agrees to indemnify, defend and hold harmless DCA including its directors, officers, employees, representatives, and agents from and against any and all claims and liabilities (including, without limitation, all damages, costs, and expenses, including legal fees and disbursements paid or incurred) arising from the intentional acts or omissions, negligence, or strict liability of Agency, its directors, officers, employees, representatives, or agents, or Agency's breach of this Agreement. This Section shall survive the termination of this Agreement.

D. Without limiting any other provision of this Agreement, Agency and its End Users shall be solely responsible for all decisions and actions taken or not taken involving services, treatment, patient care, utilization management, and quality management for their respective Clients resulting from or in any way related to the use of the HMIS or the Information made available thereby. Agency and End Users shall have no recourse against, and hereby waive, any claims against DCA for any loss, damage, claim or costs relating to or resulting from its own use or misuse of the HMIS.

E. HMIS uses available technology to match Client identities with their records in the HMIS to provide Agencies with information regarding Clients. Because Client information is maintained in multiple places and because not all information is kept in a standard fashion, it is possible that false matches may occur or that there may be errors or omissions in the information provided to Agency. To that end, it is incumbent upon the Agency and its End Users to verify the Client's information before the information is relied upon in providing services to a Client. Neither DCA nor the HMIS in general independently verifies or reviews the information transmitted through the HMIS for accuracy or completeness. Further, neither DCA nor the HMIS make any representations or promises regarding the continued participation of any particular Agency in the HMIS. Agencies may be added to or deleted from the HMIS at any time and such changes may be beyond the control of DCA or the HMIS and may occur without prior notice to Agency.

F. Agency acknowledges and agrees that the HMIS is an information management tool only and that it contemplates and requires the involvement of Agencies and End Users that are qualified to maintain, collect and enter information into the HMIS. Agency further acknowledges and agrees that DCA has not represented its services as having the ability to perform any tasks that constitute the practice of medicine or of other professional or academic disciplines. DCA shall not be responsible for any errors, misstatements, inaccuracies, or omissions regarding the content of the HMIS, although every effort has been made to ensure its quality and accuracy. Agency assumes all risk for selection and use of the content in the HMIS.

G. All data to which access is made through the HMIS originates from Agencies, and not from DCA. All such data is subject to change arising from numerous factors, including without limitation, changes to Client information made at the request of the Client, changes in the Client's condition, the passage of time and other factors. DCA neither initiates the transmission of any data nor monitors the specific content of data being transmitted. Without limiting any other provision of this Agreement, DCA shall have no responsibility for or liability related to the accuracy, content, currency, completeness, content or delivery of any data either provided by Agency, or used by Agency, pursuant to this Agreement.

H. Access to the HMIS and the information obtained by Agency pursuant to the use of those services are provided "as is" and "as available." Agency is solely responsible for any and all acts or omissions taken or made in reliance on the HMIS or the information in the HMIS, including inaccurate or incomplete information.

I. DCA shall not be liable for any cessation, delay or interruption of services, nor for any malfunction of hardware, software or equipment for whatever reason.

#### 14. Disclaimer of Warranties:

DCA makes no warranties, express or implied, including warranties of merchantability or fitness for a particular purpose, to any Agency or any other person or entity as to the services of the HMIS or as to any other matter.

#### 15. Notice

All notices under this Agreement to DCA will be made as follows. This Notice address may be modified in writing.

Georgia Department of Community Affairs 60 Executive Park South, NE Atlanta, GA 30329 ATTN: Jeanette Pollock

Notices to the Agency under this Agreement will be made according to the Authorized Officer at the mailing address specified in the signature block of this Agreement. This Notice address may be modified in writing.

#### 16. Prohibition of Unauthorized Customization

For customization of any features of HMIS that may be desired by an Agency, Agency will first contact their local Continuum of Care, who will forward any such request directly to DCA for approval. DCA has the absolute right to approve or disapprove of any requested modification at its' sole discretion. Such requests will not be unreasonably withheld. Agency understands that it may be liable for the complete cost of any such approved customization.

#### 17. Survival

The following provisions shall survive any termination of this Agreement: Sections 1, 2, 4B, 5, 6, 7, 8E, 9, 10. 11c, 11e, 13, 14, 15, 17. It is the intention of the parties that termination does not relieve any party of any obligations detailed in the Agreement generally up until the point the Agreement is terminated.

#### 18. Term

This agreement will continue until terminated by either party pursuant to the provisions contained herein.

#### 19. Additional Terms and Conditions:

- A. Agency will abide by such guidelines as are promulgated by HUD and DCA from time to time regarding administration of the HMIS.
- B. Agency and DCA intend to abide by applicable State and Federal laws. Should any term of this Agreement be inconsistent with applicable law, or should additional terms be required by applicable law, Agency and DCA agree to modify the terms of this Agreement so as to comply with applicable law.
- C. Neither DCA nor Agency will transfer or assign any rights or obligations regarding the HMIS without the written consent of the other party.
- D. This Agreement will be in force until terminated by either party. Either party may terminate this Agreement with thirty (30) days written notice, for any reason. Either party may also terminate this Agreement immediately upon a material breach of this Agreement by the other party, including but not limited to a breach of the HMIS Policies or Privacy Policy by Agency. Upon termination of this Agreement, Agency shall remain liable for (and nothing in this Agreement shall prevent DCA from recovering) any fees, costs, or expenses that have been incurred prior to the termination of this Agreement.

DCA and the remaining Participating Agencies will maintain their rights to use all of the information previously entered by Agency except to the extent a restriction is imposed by the Client or applicable law.

E. Copies of Agency data will be provided to the Agency upon termination of this Agreement at the Agency's written request to DCA made within sixty (60) days after the termination of this Agreement. Information will be provided on hard drive or other mutually agreed upon media. Unless otherwise specified in writing, copies of data will be delivered to Agency within sixty (60) calendar days of receipt

of written requests for data copies. DCA reserves the right to charge Agency DCA's actual costs for providing such data to Agency.

- F. Except as otherwise provided, no action taken by either party, or its officers, employees or agents, pursuant to this Agreement, shall be deemed to constitute an action of the other party, or shall be construed to place the parties in a relationship of partners, joint ventures, principal and agent, or employer and employee, or shall be deemed to confer upon either party any express or implied power, right or authority to enter into any agreement or commitment, express or implied, or to incur any obligation or liability on behalf of the other party except as expressly provided herein. DCA and Agency intend and agree that they and their respective agents or employees shall serve as independent contractors and not as employees of the other party, and this Agreement shall not be considered a hiring by either party or a contract of employment.
- G. During the term of this Agreement, Agency shall not (without the written consent of DCA) directly or indirectly, hire, employ or attempt to hire or employ any person who is an employee of DCA, or who was within the preceding twelve (12) month period an employee of DCA, or in any way solicit, induce, bring about, influence, promote, facilitate, encourage, cause or assist or attempt to cause or assist any current employee of DCA to leave his or her employment with DCA.
- H. This Agreement may be amended or modified, and any of the terms, covenants, representations, warranties or conditions of this Agreement may be waived, only by a written instrument executed by the Parties, or in the case of a waiver, by the party waiving compliance.
- I. Any waiver by any party of any condition, or of the breach of any provision, term, covenant, representation or warranty contained in this Agreement, in any one or more instances, shall not be deemed to be or construed as a further or continuing waiver of any such condition or breach of any other condition or the breach of any other provision, term, covenant, representation, or warranty of this Agreement.
- J. Neither party shall assign its rights or delegate its duties hereunder without the prior written consent of the other, which consent will not be unreasonably withheld. All of the terms, provisions, covenants, conditions and obligations of this Agreement shall be binding on and inure to the benefit of the successors and assigns of the parties hereto.
- K. Any notice required or permitted to be given under this Agreement shall be conclusively deemed to have been received by a party Three days after mailing, or upon actual signature date for registered/certified mail.

- L. This Agreement sets forth the entire understanding between the parties with respect to the matters contemplated by this Agreement and supersedes and replaces all prior and contemporaneous agreements and understandings, oral or written, with regard to these matters.
- M. If any provision of this Agreement is determined to be invalid or unenforceable, such invalidity or unenforceability shall not affect the validity or enforceability of any other provisions of this Agreement that can be given effect without the invalid or unenforceable provisions, and all unaffected provisions of this Agreement shall remain in full force and effect as if this Agreement had been executed without such invalid or unenforceable provisions.
- N. The Parties affirm that this Agreement has been entered into in the State of Georgia and will be governed by and construed in accordance with the laws of the State of Georgia, notwithstanding any state's choice of law rules to the contrary. Any action to enforce, challenge or construe the terms or making of this Agreement or to recover for its breach shall be litigated exclusively in a state court located in the State of Georgia, DeKalb County, or in Federal Court in the Northern District of Georgia.
- O. Headings used in this Agreement are for the convenience of the parties, and shall not be used to assist in the interpretation of the Agreement.
- P. This Agreement may be executed in two or more counterparts, each of which will be deemed an original, but all of which together shall constitute one and the same instrument.

In Witness Whereof, Agency and DCA have, through their duly authorized representatives, entered into this Agreement. The parties, having read and understood the foregoing terms of this Agreement, do by their respective signatures dated below hereby agree to the terms thereof.

Agency Name		
Name of Authorized Officer:		
Signature of Authorized Officer:		
Date:		
Title of Authorized Officer:		
Agency Street Address:		
Mailing Address for notice (if different):	carca est	
Telephone:	Facsimile:	
Email:		
DCA		
Name of Authorized Officer:	<u>.</u>	
Signature of Authorized Officer:		
Date:		
Title of Authorized Officer:		
Department of Community Affairs 60 Executive Park South, NE		

Atlanta, Georgia 30329

**Appendix C: GA HMIS Privacy Policy** 

#### **Appendix C: GA HMIS Privacy Policy**

This notice describes the privacy policy of the Georgia Homeless Management Information System ("GA HMIS"). GA HMIS is administered by the HMIS Lead Agency, the Georgia Department of Community Affairs ("DCA"), operating on behalf of the Georgia Housing and Finance Authority (GHFA). DCA administers GA HMIS on behalf of the regional homeless services planning bodies (individually referred to as "Continuum of Care" or "CoC" and collectively referred to as "The Collaborative" or "CoCs") in Georgia that participate in the statewide GA HMIS implementation. DCA may amend this GA HMIS Privacy Policy at any time, and will maintain a record of any changes made, as well as post new versions on the GA HMIS website located at <a href="http://www.dca.ga.gov/housing/specialneeds/programs/hmis.asp">http://www.dca.ga.gov/housing/specialneeds/programs/hmis.asp</a>.

This notice applies to the personal information of individuals whose personal data is collected or maintained in hard copy or in electronic formats in the GA HMIS.

In relation to this personal information, users entering data in the GA HMIS:

- Collect personal client information only when appropriate or required by entities providing funding for homeless services ("the Funder or Funders");
- May use or disclose information in order to facilitate service delivery;
- May also use or disclose information to comply with legal requirements or other obligations as described in the notice;
- Will not disclose personal information without written consent unless specifically stated within the notice; and
- Assume that, unless stated otherwise, persons applying for or receiving services from one of the GA HMIS Participating Agencies agree to allow users of the GA HMIS to collect, use, or disclose information as described in this notice.

Each person providing personal information may:

- Inspect his/her personal information that is maintained in the GA HMIS, with the exception of case notes;
- Ask the agency entering data for the GA HMIS to correct inaccurate or incomplete information within the record;
- Ask about the GA HMIS' privacy policy or practices;
- File a grievance regarding GA HMIS' privacy policies and practices. DCA will respond to questions and complaints;
- Request a copy of this full notice for more details.

#### A. What this notice covers

This notice describes the privacy policy and practices of the GA HMIS, administered by DCA, which
is the lead agency for the GA HMIS. DCA's main office is located at 60 Executive Park South,

Atlanta, GA 30329. DCA's phone number for purposes of GA HMIS is (404) 679-4840. Information about GA HMIS is on DCA's web site which is located at: http://www.dca.ga.gov/housing/specialneeds/programs/hmis.asp.

- 2. The policy and practices in this notice cover the processing of protected personal client information by users of the GA HMIS within The Collaborative. This notice covers all personal information policies set forth by DCA in its role as a program administrator for CoC programs and in its role as the administrator of the GA HMIS. GA HMIS Participating Agencies may have additional privacy policies on information entered and accessed by users.
- 3. Protected Personal information (PPI) is any information GA HMIS maintains about a client that:
  - Allows identification of an individual directly or indirectly; and
  - Can be manipulated by a reasonably foreseeable method to identify a specific individual; Or
  - Can be linked with other available information to identify a specific client.

When this notice refers to personal information, it means PPI.

- 4. DCA and each CoC in The Collaborative have adopted this policy in accordance with the Homeless Management Information Systems Data and Technical Standards and subsequent HMIS notices issued by the U.S. Department of Housing and Urban Development (HUD) and their federal partners through the U.S. Interagency Council on Homelessness (USICH). DCA's policies and practices are consistent with those standards and with industry standard best practices. DCA's policies are also consistent with requirements outlined in other applicable state and local laws.
- 5. This notice informs clients, staff, contractors, GA HMIS Participating Agency users, Funders and others how personal information is processed by the GA HMIS Collaborative.
- 6. DCA may amend this notice and change the policy or practices at any time. Amendments may affect personal information that DCA or the GA HMIS Participating Agencies obtained before the effective date of the amendment. Any changes to this privacy policy will be posted as a notice at <a href="http://www.dca.ga.gov/housing/specialneeds/programs/hmis.asp">http://www.dca.ga.gov/housing/specialneeds/programs/hmis.asp</a>.
- 7. DCA and/or GA HMIS Participating Agencies will provide a written copy of this notice to any individual or organization that requests one. DCA also maintains a copy of this notice on its website located at http://www.dca.ga.gov/housing/specialneeds/programs/hmis.asp.

#### B. How and Why We Collect Personal Information

- 1. DCA (including DCA's contractors), CoC Administrator Agencies (an agency other than DCA, duly authorized in writing by a respective CoC, to have an employee(s) with access to the client-level data of that specific CoC for purposes of system administration activities), and the GA HMIS Participating Agencies may collect and/or maintain personal information for some or all the following purposes:
  - To provide or coordinate services to clients;
  - To locate other programs that may be able to assist clients;
  - For functions related to payment or reimbursement from others for services provided by DCA or DCA's contractors;
  - To carry out administrative functions, including legal, audit, personnel, oversight, contract monitoring, program evaluation, and other management functions;
  - To comply with government and Funder reporting obligations;
  - For research, data analysis, and community reporting purposes, including reporting to the GA
     HMIS Steering Committee to inform policy decisions; and
  - When required by law.
- 2. DCA (including DCA's contractors), CoC Administrator Agencies, and the GA HMIS Participating Agencies use only lawful and fair means to collect and/or maintain personal information.
- By seeking assistance at one of the GA HMIS Participating Agencies and providing personal information, it is assumed that a person consents to the collection of information as described in this notice and that the collected information may be entered into the GA HMIS.
- DCA (including DCA's contractors), CoC Administrator Agencies, and the GA HMIS Participating Agencies may also obtain information about those seeking services from:
  - Other individuals who are accompanying the person seeking services, such as a guardian, caretaker, or advocate;
  - Referring organizations and/or service providers (with proper written consent);
  - DCA's contractors and/or GA HMIS Participating Agency users that are providing services.
- 5. GA HMIS Participating Agencies are required to post a sign at their intake desks or offices explaining the reasons personal information is requested. GA HMIS Participating Agencies may have additional policies not required by DCA that they must follow, but at a minimum, they must adhere to this Notice. While GA HMIS Participating Agencies are required to adopt their own privacy policies and postings for data collection unrelated to GA HMIS, DCA provides a posting template to GA HMIS Participating Agencies which reads:

#### **Privacy Posting**

Georgia Homeless Management Information System

The U.S. Department of Housing and Urban Development (HUD) and other federal and state partners require that each jurisdiction that receives homeless funding have a Homeless Management Information System (HMIS) in place. Therefore, this Agency is required to participate in the GA Homeless Management Information System (GA HMIS), a computerized system that collects and stores basic information about the persons who receive services from this Agency. The goal of the GA HMIS is to assist us in determining your needs and to provide a record for evaluating the services we are providing to you.

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

The collection and use of all personal information is guided by strict standards of confidentiality as outlined in our privacy policy. A copy of our agency's Privacy Policy and a copy of the Georgia HMIS Privacy Policy is available upon request for your review.

#### C. Usage and Disclosure of Personal Information

- 1. *DCA, CoC Administrator Agencies, and the GA HMIS Participating Agencies* may use or disclose personal information for the following purposes:
  - a) To provide or coordinate services for individuals to help them end their homelessness. GA HMIS may be used to share portions of client records (with written consent) with GA HMIS Participating Agencies that, at a minimum, must adhere to this notice and may have additional privacy policies and that may allow different uses and disclosures of the information;
  - b) For functions related to payment or reimbursement for services;
  - c) To carry out administrative functions, such as legal, audit, personnel, oversight, contract monitoring, program evaluation, and other management functions;
  - d) When required by law to the extent that use or disclosure complies with and is limited to the requirements of the law.
  - e) To avert a serious threat to health or safety if:
    - It is believed in good faith that the use or disclosure is necessary to prevent or lessen
      a serious and imminent threat to the health or safety of an individual or the public,

- The use or disclosure is made to a person reasonably able to prevent or lessen the threat, including the target of the threat.
- f) To report about an individual that DCA, a CoC Administrator Agency, or a GA HMIS Participating Agency reasonably believes to be a victim of abuse, neglect or domestic violence to a governmental authority (including a social service or protective services agency) authorized by law to receive reports of abuse, neglect or domestic violence under any of the following circumstances:
  - where the disclosure is required by law and the disclosure complies with and is limited to the requirements of the law;
  - if the individual agrees to the disclosure; or
  - to the extent that the disclosure is expressly authorized by statute or regulation; and
  - DCA, a CoC Administrator Agency, or a GA HMIS Participating Agency believes the disclosure is necessary to prevent serious harm to the individual or other potential victims; or
  - if the individual is unable to agree because of incapacity, then a law enforcement or
    other public official authorized to receive the report must represent that the PPI for
    which disclosure is sought is not intended to be used against the individual, and must
    represent that an immediate enforcement activity that depends upon the disclosure
    would be materially and adversely affected by waiting until the individual is able to
    agree to the disclosure; and
  - when DCA, a CoC Administrator Agency, or a GA HMIS Participating Agency makes a
    permitted disclosure about a victim of abuse, neglect or domestic violence, DCA, the
    CoC Administrator Agency, or the GA HMIS Participating Agency will promptly inform
    the individual who is the victim that a disclosure has been or will be made, except if:
    - i. in the exercise of professional judgment DCA, the CoC Administrator Agency, or the GA HMIS Participating Agency believes informing the individual would place the individual at risk of serious harm, or
    - ii. DCA, the CoC Administrator Agency, or the GA HMIS Participating Agency would be informing a personal representative (such as a family member or friend) and reasonably believe the personal representative is responsible for the abuse, neglect or other injury; such that informing the personal representative would not be in the best interests of the individual as DCA determines in the exercise of professional judgment.

- g) To a law enforcement official for a law enforcement purpose (if consistent with applicable law and standards of ethical conduct) under the following circumstances:
  - In response to a lawful court order, court-ordered warrant, subpoena or summons issued by a judicial officer, or a grand jury subpoena;
  - If the law enforcement official makes a written request for PPI that:
    - is signed by a supervisory official of the law enforcement agency seeking the PPI;
    - ii. states that the information is relevant and material to a legitimate law enforcement investigation;
    - iii. identifies the PPI sought;
    - is specific and limited in scope to the extent reasonably practicable in light of the purpose for which the information is sought; and
    - v. states that de-identified information could not be used to accomplish the purpose of the disclosure.
  - If it is believed in good faith that the PPI constitutes evidence of criminal conduct that occurred on the premises of DCA or the premises of a GA HMIS Participating Agency;
  - In response to a written request as described above for the purpose of identifying or locating a suspect, fugitive, material witness or missing person and the PPI disclosed consists only of name, address, date of birth, place of birth, Social Security Number, and distinguishing physical characteristics; or
  - If the official is an authorized federal official seeking PPI for the provision of protective services to the President or other persons authorized by 18 U.S.C. 3056, or to foreign heads of state or other persons authorized by 22 U.S.C. 2709(a)(3), or for the conduct of investigations authorized by 18 U.S.C. 871 and 879 (threats against the President and others); and if the information requested is specific and limited in scope to the extent reasonably practicable in light of the purpose for which it is sought.
- To comply with government reporting obligations for homeless management information systems and for oversight of compliance with homeless management information system requirements.
- 2. *DCA and CoC Administrator Agencies* may use or disclose personal information for activities set forth below and for activities DCA determines to be compatible with such activities. DCA assumes that you consent to the use or disclosure of your personal information for such purposes.
  - a) To carry out maintenance and operation of GA HMIS:

- b) To create de-identified (anonymous) information that can be used for research and statistical purposes without identifying clients.
- c) For academic research purposes, release of PPI will be allowed if research is:
  - Conducted by an individual or institution that has or enters into a formal relationship with DCA and/ or with a CoC Administrator Agency, if the research is conducted by either:
    - an individual employed by or affiliated with the organization for use in a research project conducted under a written research agreement approved in writing by DCA and/ or the CoC Administrator Agency, (other than the individual conducting the research); or
    - ii. an institution for use in a research project conducted under a written research agreement approved in writing by DCA and/ or the CoC Administrator Agency; and
  - The formal relationship is contained in a written research agreement that must:
    - i. establish rules and limitations for the processing and security of PPI in the course of the research;
    - ii. provide for the return or proper disposal of all PPI at the conclusion of the research;
    - iii. restrict additional use or disclosure of PPI, except where required by law;
    - require that the recipient of data formally agree to comply with all terms and conditions of the agreement;
  - The written research agreement is not a substitute for approval (if appropriate) of a research project by an Institutional Review Board, Privacy Board, or other applicable human subjects protection institution
- Before DCA, a CoC Administrator Agency, or the GA HMIS Participating Agencies make any use or disclosure of your personal information that is not described herein and above, we will seek your consent.

#### D. How to Inspect and Correct Personal Information

Clients may inspect and have a copy of their PPI that is maintained in GA HMIS, with
the exception of case notes. DCA, a CoC Administrator Agency, and/or the GA HMIS
Participating Agency, will respond to any such request made by a client within a
reasonable time frame, usually 2-3 business days. GA HMIS Participating Agency staff
will offer to explain any information in the file. For data that is maintained by DCA as
the administrator of GA HMIS but was not entered by the DCA staff, DCA may require
that the request for inspection be managed through the GA HMIS Participating
Agency that entered the information.

- DCA, a CoC Administrator Agency, and/or the GA HMIS Participating Agency will
  consider requests for correction of inaccurate or incomplete personal information
  from clients. If DCA, a CoC Administrator Agency, and/or the GA HMIS Participating
  Agency agrees that the information is inaccurate or incomplete, the personal
  information may be deleted or supplemented with additional information.
- 3. To inspect, get a copy of, or ask for correction of personal information, a client can contact any GA HMIS Participating Agency staff member at the GA HMIS Participating Agency at which he or she received services. The appropriate GA HMIS Participating Agency staff member will be located to assist with the review and/or correction of the file within a reasonable time period, usually 2-3 business days.
- 4. DCA, a CoC Administrator Agency, and/or a GA HMIS Participating Agency may deny a direct request for inspection or copying of personal information if:
- the information was compiled in reasonable anticipation of litigation or comparable proceedings;
- the information is about another individual;
- the information was obtained under a promise of confidentiality and if the disclosure would reveal the source of the information; or
- disclosure of the information would be reasonably likely to endanger the life or physical safety of any individual.
  - 5. If a request for access or correction is denied, the organization that denies the request (DCA, the CoC Administrator Agency, and/or the GA HMIS Participating Agency) will explain the reason for the denial. DCA, the CoC Administrator Agency, and/or the GA HMIS Participating Agency will also include, as part of the personal information that is maintained, documentation of the request and the reason for the denial.
  - 6. DCA, a CoC Administrator Agency, and/or a GA HMIS Participating Agency may reject repeated or harassing requests for access or correction

#### E. Data Quality

The Collaborative collects only personal information that is relevant to the purposes for which it
plans to use it or as required for reporting to our Funders. To the extent necessary for those
purposes, The Collaborative seeks to maintain only personal information that is accurate,
complete, and timely.

- DCA may implement a plan to dispose of personal information not in current use seven years after the information was created or last changed. As an alternative to disposal, DCA may choose to remove identifiers from the information so that the data can be maintained for analysis purposes.
- DCA may keep information for a longer period if it chooses or if it is required to do so by statute, regulation, contract, or other requirement.

#### F. Complaints and Accountability

- DCA, on behalf of The Collaborative, accepts and considers questions or complaints about GA HMIS' privacy and security policies and practices. To file a complaint or question, a person should do the following:
  - If the complaint is about one of the GA HMIS Participating Agencies using GA HMIS, the
    client should first follow the questions and/or grievance procedure of that organization.
    If the grievance cannot be resolved at the GA HMIS Participating Agency level, the
    question/complaint should be addressed to DCA in writing or in person for resolution.
    DCA's main office is located at 60 Executive Park South, Atlanta, GA 30329. DCA's phone
    number for purposes of GA HMIS is (404) 679-4840;
  - If the complaint is received by DCA, in writing or in person, about a GA HMIS Participating
    Agency or about an internal program, it will be reviewed by the staff responsible for
    administering GA HMIS first. If the question or complaint cannot be resolved at that level
    it will be brought to the attention of the GA HMIS Steering Committee and/or DCA's Office
    of General Counsel, whichever is most appropriate for the particular situation.
- All members of DCA (including employees, volunteers, affiliates, contractors and associates), CoC Administrator Agencies and GA HMIS Participating Agencies are required to comply with this notice. Each individual with access to GA HMIS must receive and acknowledge receipt of a copy of this notice and pledge to comply with this notice in writing.

#### **G. Privacy Policy Change History**

Each copy of this notice will have a history of changes made to the document. This document's change history is as follows:

- Version 1 2005 Initial Policy
- Version 2 New policy Draft (Insert approval date here and remove drafts below)
  - October 19th, 2015 (Initial revised Draft)
  - Appendix D: GA HMIS Client Consent Form December 14th, 2015 (2nd revised Draft)

**Appendix D: GA HMIS Client Consent Form** 

#### Appendix D: GA HMIS Client Consent Form

### Georgia Homeless Management Information System (GA HMIS) Collaborative Client Consent to Share Information

The Georgia Homeless Management Information System ("GA HMIS") is an online database that is used to collect information (data) about clients accessing housing and homeless services throughout the State of Georgia. Organizations that receive homeless funding from the US Department of Housing and Urban Development (HUD) and other federal and state partners are required to collect and store basic information about the persons who receive their services. This organization participates in the GA HMIS and by requesting and accepting services from them you are providing consent to enter your personal information into the GA HMIS. This information is utilized to determine your needs and provide supportive services to you and your household, and information is shared with other organizations that use this database, based on your signed consent.

#### What type of information may be shared in the HMIS?

We collect general and Protected Personal Information about you and record it in GA HMIS. Depending on your situation, this may include, but is not limited to:

- Your basic identifying information (including name, Social Security Number, date of birth, gender, race/ ethnicity, marital and family status, household relationships, contact information, veteran status, disability status)
- Your history of homelessness and housing (including your current housing status and where and when you have accessed services)
- Your income information (sources and amounts of household income, employment information, work skills) and other resources, such as non-cash benefits
- Your legal history/information
- Your general, self-reported medical history including any mental health and substance abuse issues (however, detailed medical or treatment information will never be shared), and type of health insurance
- Your service needs and the outcomes of services provided
- Your emergency contact information

#### How do you benefit from sharing your information?

The information you provide to GA HMIS helps us coordinate the most effective services for you and/or your family. By sharing your information, you may be able to avoid being screened more than once, get faster and more personalized services, and minimize how many times you have to tell your 'story.' Collecting this information also gives us a better understanding of homelessness in your local area and the effectiveness of the services provided in your area.

#### Who can have access to your information?

The GA HMIS participating organizations can have access to your data. These organizations may include homeless service providers, other social services organizations, housing providers, and healthcare providers. System users at participating organizations who have access to your information have signed an agreement to maintain the security and confidentiality of your information.

#### How is your personal information protected?

Your information in the HMIS is secured by passwords and encrypted transmission technology. In addition, each participating organization and system user must sign an agreement to maintain the security and confidentiality of the information. Your information is protected by the federal HMIS Privacy Standards. In some instances, depending on the services provided by a participating organization, your information may also be protected by additional Federal and/or State regulations, which may require additional written consent prior to any disclosure.

#### By signing below, you understand that:

- You have the right to receive services even if you do not sign this consent form.
- Signing this consent form does not guarantee you services.
- You have the right to receive a copy of this consent form.
- Your consent allows your record to be updated by any participating organization with which you interact without you being required to sign another consent form.
- This consent is valid for seven (7) years from the date after the Protected Personal Information was created or updated.
- You may cancel your consent at any time, but your cancellation must be done either in
  writing or by completing the Client Revocation of Consent to Share Information form. You
  further understand that any cancellation of this consent will not retroactively change
  information that has already been disclosed or actions already taken under your previous
  authorization.
- The GA HMIS Privacy Policy contains more detailed information about how your information may be used and disclosed.
- Upon your request, we will provide you with:
  - A copy of the Client Revocation of Consent to Release Information;
  - A copy of the GA HMIS Privacy Policy;
  - A copy of your full HMIS records (apart from case notes) within five (5) business days of your request;
  - A current list of participating organizations that have access to your data.
- If you find inaccurate or incomplete Protected Personal Information in your records, you have the right to request a correction.
- Aggregate or statistical data that is released from HMIS will not disclose any of your Protected Personal Information.
- You have the right to file a grievance against any organization you feel has violated your confidentiality.
- If you need to be referred to another agency for services, certain information may need to be forwarded through HMIS to facilitate a referral. If you do not provide consent to share your

information, it may negatively affect participating providers from addressing your service needs in a coordinated fashion.

You are not waiving any rights protected under Federal and/or Georgia law.

#### SIGNATURE AND ACKNOWLEDGEMENT

For Agency Personnel Use Only:

**Print Name of Organization** 

**Signature of Organization Staff** 

Your signature below indicates that you have read (or been read) this client consent form and have received answers to your questions. Please indicate your sharing preference by choosing one of the options below: consent to allow my information, and that of my minor children (if applicable, as listed below), to be shared via the GA HMIS as described in this consent form. I consent to allow my information, and that of my minor children (if applicable, as listed below), to be shared via the GA HMIS; however, I wish to limit that sharing as specified in the Client Consent to Share Information - Supplement form. I do not consent to allow my information to be shared via the GA HMIS. I understand that this choice may negatively affect the quality of services the GA HMIS participating providers are able to provide. Client/ Legal Guardian Name (Please print): \_\_\_\_\_\_DOB: \_\_\_\_\_DOB: \_\_\_\_\_\_DOB: \_\_\_\_\_ digits of SS\_\_\_\_\_\_ Signature Date Minor Children (if any): Client Name: DOB: Last 4 digits of SS Client Name: \_\_\_\_\_\_ DOB: \_\_\_\_\_ Last 4 digits of SS\_\_\_\_\_\_ Client Name: \_\_\_\_\_ DOB: \_\_\_\_ Last 4 digits of SS

**Print Name of Organization Staff** 

Date

	*	

# Housing Choice Voucher Program Administrative Plan

Board Approved April 28, 2017



www.dekalbhousing.org



#### 4-III.C. SELECTION METHOD

PHAs must describe the method for selecting applicant families from the waiting list, including the system of admission preferences that the PHA will use [24 CFR 982.202(d)].

#### Local Preferences [24 CFR 982.207; HCV p. 4-16]

PHAs are permitted to establish local preferences, and to give priority to serving families that meet those criteria. HUD specifically authorizes and places restrictions on certain types of local preferences. HUD also permits the PHA to establish other local preferences, at its discretion. Any local preferences established must be consistent with the PHA plan and the consolidated plan, and must be based on local housing needs and priorities that can be documented by generally accepted data sources.

#### **HADC Policy**

The HADC will offer a preference to the following:

- DeKalb County residents;
- Project-based voucher transfer waiting list;
- Families participating in the HADC Foster Youth Aging Out Program;
- Families participating in an HADC Homeless Demonstration Program;
- State of Georgia Settlement Agreement Housing Program Persons meeting the criteria under the Americans with Disabilities Act Settlement Agreement between the Department of Justice and the State of Georgia in order to assist the Department of Behavioral Health and Development Disabilities (DBHDD) and Department of Community Health (DCH) in carrying out the remedy required by the Settlement Agreement. To qualify for this preference an applicant must be receiving continuous voluntary highly targeted community based supportive services through DBHDD and the DCH. The preference will cover persons specified in the Settlement Agreement. In particular, the preference extends to persons with developmental disabilities and persons with severe and persistent mental illness or at risk of institutionalization. For people with mental illness, factors that indicate risk of institutionalization include people who are frequently readmitted to State hospitals, who are frequently seen in emergency rooms, who are chronically homeless, an/or who are being released from jails or prisons. The preference will also cover persons specified in the Settlement Agreement who are currently receiving temporary housing assistance thorough Georgia's DBHDD and the DCH.
- Families terminated due to insufficient funding;

Georgia HMIS MOA June 14

2017

This document signifies the Memorandum Of Agreement between the Georgia HMIS Lead and the GA HMIS Collaborative

#### **GA HMIS MOA**

## Purpose and Scope

The purpose of this Memorandum of Agreement ("MOA") is to confirm agreements between the Georgia Housing and Finance Authority ("GHFA") and the Continua of Care ("CoCs"), as represented by their Collaborative Applicant. These partnerships constitute the GA HMIS Collaborative, regarding the implementation of a statewide, HUD-compliant Homeless Management Information System ("GA HMIS Implementation"). Heretofore, the reference to the GA HMIS Implementation consists of the oversight of the software vendor, the system administration and managing the partnership with the GA HMIS Collaborative.

As such, the MOA sets forth the general understandings and specific responsibilities of each party relating to key aspects of the governance and operation of the GA HMIS Implementation. In the spirit of collaboration, all parties have agreed to enter into this MOA to document each party's duties and responsibilities with regard to the GA HMIS Implementation and to ensure that the same are successfully executed.

The parties commit to timely responses, open communication, and collaborative work strategies in the completion of tasks necessary to ensure efficient and effective operations of the GA HMIS Collaborative and the HMIS Lead.

## Background

The Homeless Management Information System ("HMIS") is a computerized data collection application designed to capture information about homeless persons and homeless service programs over time. HMIS is mandated by the U.S. Department of Housing and Urban Development ("HUD") under the HEARTH Act for all communities and agencies receiving HUD Continuum of Care and Emergency Solutions Grants homeless assistance funds. Other Federal Partners, such as the U.S. Department of Health and Human Services ("HHS") and the U.S. Department of Veteran Affairs ("VA") also mandate use of HMIS for some of their programs. HMIS is essential to streamline client services and inform public policy. Through HMIS, homeless persons benefit from improved coordination within and between agencies, informed advocacy efforts and policies that result in targeted services. Analysis of information gathered through HMIS is critical to the preparation of a periodic accounting of homelessness in Georgia, which may include measuring the extent and nature of homelessness, the utilization of services and homeless programs over time and the effectiveness of homeless service programs. Such an unduplicated accounting of homelessness is necessary to service and systems planning, effective resource allocation and advocacy.

In response to the need for a more effective HMIS implementation, 8 Continua of Care across the State of Georgia (Atlanta, Athens-Clarke County, Augusta – Richmond County, DeKalb County, Fulton County, Marietta – Cobb County, Savannah-Chatham County and the Georgia Balance of the State) joined together in 2015 to form the GA HMIS Collaborative in pursuit of a statewide GA HMIS Implementation under the Georgia Department of Community Affairs ("DCA") as the HMIS Lead. The GA HMIS Collaborative established a governing body, the GA HMIS Steering Committee, to aid in directing planning and policy decisions in support of the GA HMIS Implementation.

## Term of Agreement and Termination

- a. This MOA shall commence from date of execution, as designated by the last date of signature of the parties, and shall require renewal in concurrence with the current grant award term that each CoC utilizes to meet their HMIS grant contribution requirement. This MOA may be terminated sooner by written agreement of both parties or as otherwise permitted under this MOA.
- b. A CoC may terminate for convenience its participation in this MOA for any reason at the beginning of the next contract year by giving GHFA six (6) months prior written notice. Written notice of a CoC's intent to withdraw from the GA HMIS Implementation should be sent DCA, c/o HMIS Lead, 60 Executive Park South NE, Atlanta, GA 30329
- c. GHFA may terminate for convenience its participation in this MOA for any reason at the beginning of the next contract year by giving the other party eighteen (18) months prior written notice.
- d. Parties will work in good faith to resolve material breaches through mediation efforts addressing the cause of the perceived breach. In the event that amenable resolution cannot be reached in the event of material breach, either party may terminate this MOA upon written notice to the other party if the other Party materially breaches any term or condition of this MOA and fails to cure such breach within ninety (90) days from the terminating party's provision of written notice.
- e. All amendments, additions, deletions, or modifications to this MOA must be mutually agreed upon in writing by the parties. Additionally, such amendments, additions, deletions or modifications are subject to review and approval of the GA HMIS Steering Committee.

## Specific Responsibilities of the Parties

#### Responsibilities of the Continua of Care

Each CoC entering into this MOA agrees to participate in the GA HMIS Implementation with DCA, on behalf of the GHFA, as the designated HMIS Lead Agency. Further, each CoC agrees to collaboratively govern the GA HMIS Collaborative through the By-laws and participation requirements of the GA HMIS Steering Committee.

#### **Governance Commitments**

- Collaborative Applicant, agrees to fully participate in the GA HMIS Implementation and follow the By-Laws of the GA HMIS Steering Committee. This shall include, at a minimum, incorporating reference to the GA HMIS Implementation, including GA HMIS Steering Committee participation and adoption of its By-Laws, into local CoC governance documentation. Full compliance with this action requires the following additional commitments from the CoC:
  - Adopt and/or re-affirm adoption of the GA HMIS Steering Committee By-Laws and participate in an annual review and request updates to the By-Laws;
  - Appoint two voting members, in writing, as specified in Section IV of the By-Laws, to serve on the GA HMIS Steering Committee to provide oversight of the Implementation and represent the CoC in GA HMIS Collaborative decision-making;

#### **GA HMIS MOA**

- Formalize and document the local process by which representatives to the GA HMIS
   Steering Committee are appointed and vested with the authority to act on behalf of the CoC on all matters related to the GA HMIS Implementation;
- Incorporate and follow the standards and processes adopted by the GA HMIS Steering Committee with regards to monitoring HMIS participating agencies as defined in the GA HMIS Implementation's Standard Operating Procedures (SOPs); and
- Enter into a separate agreement with the HMIS Lead that outlines the CoC Administrator's
  duties and responsibilities including the scope of access rights and role in addressing request
  for assistance from users, and provides consequences for non-compliance, as defined in the
  CoC Agreement.
- GA HMIS Standard Operating Procedures

#### Each CoC agrees to comply with:

- The GA HMIS Standard Operating Procedures;
- o The privacy plan, security plan, and data quality plan for the GA HMIS Collaborative;
- o Compliance monitoring of participating agencies; and

### Operational Responsibilities

#### Each CoC agrees to:

- Enter into a Memorandum of Agreement with DCA, as the HMIS Lead, for the provision of HMIS services;
- Accept the HMIS software, chosen by the GA HMIS Collaborative as the designated software for its CoC;
- Designate DCA as the HMIS Lead to manage the CoC's HMIS and apply for/receive HUD HMIS funding on behalf of its CoC;
- Designate at least one user in the CoC to be a CoC Administrator, who would be authorized to have administrative-level access to the data for the specific CoC for the purposes of providing CoC level oversight and user support, as well as to monitor agency compliance with Federal Data Standards;
- Ensure HMIS participation by participating agencies as established by the GA HMIS
   Implementation's Standard Operating Procedures of the GA HMIS Collaborative and any additional policies and procedures established by its respective CoC;
- Direct all requests and concerns to the HMIS Lead, including, but not limited to software vendor management, HMIS enhancements, system errors, and project status to allow the HMIS Lead to more efficiently manage communications and centralize feedback and input across all participating CoCs;
- Require that participating agency users meet the minimum training requirements established by the GA HMIS Steering Committee;
- Ensure the commitment of funding for the GA HMIS Implementation;
- Ensure HMIS privacy and security protocols are integrated into participating agency policies and practices;
- Require that all participating agencies and users in the CoC comply with GA HMIS Standard Operating Procedures;
- Conduct ongoing data analysis and evaluation to help drive planning and funding decisions;

#### **GA HMIS MOA**

- Provide support, as needed to the HMIS Lead, in the preparation of all HUD required applications or reports related to HUD HMIS funding; and
- Prepare, review, and submit all HUD required Continuum-level reports (Annual Homeless
  Assessment Report, and System Performance Measures) with support from the HMIS Lead.

#### Responsibilities of the HMIS Lead

The parties designate DCA as the HMIS Lead. DCA agrees, at a minimum, to carry out the following responsibilities to the best of its ability:

#### **Project Management**

- Oversee the day-to-day operations and management of the GA HMIS implementation;
- Enter into a MOA with each CoC for the purpose of enacting the GA HMIS implementation.
- Obtain and maintain GA HMIS Participation Agreements with all participating agencies and users:
- Administer each CoCs required funding contributions to the GA HMIS Implementation which
  may include HUD HMIS awards or outside funding as determined by the CoC, in accordance with
  the MOAs between GHFA and each Collaborative Applicant;
  - o The Services in Exhibit A are subject to change based on unforeseen circumstances and/or other factors beyond the control of GHFA and the CoCs. Each CoC hall be reasonably consulted on all budget changes, however, GHFA shall have final authority over final costs and the final scope of the work outlined in this Agreement.
- Provide staff support for GA HMIS Steering Committee;
- Develop and maintain a process for the GA HMIS Steering Committee to submit, track, review, and recommend requests for system enhancements and development projects; and
- Develop and maintain a tracking and communication process that will allow the GA HMIS
   Steering Committee to stay informed about the activities of the software related to compliance, enhancements, bug fixes, and new development projects.

#### System Functionality

- Enter into a formal contractual relationship with the software vendor which outlines the
  requirements and responsibilities of the software vendor, including those required by HUD and
  its Federal partners through its data and technical standards, statutes, regulations, notices, etc.;
- Ensure that the vendor's software system maintains timely compliance with all relevant current and future data and technical standards, statutes, regulations, and notices:
- Ensure that the vendor's software system maintains timely compliance with any other required standards set by other federal partner and state programs that require HMIS use;
- Ensure that the vendor's software system, within reasonable development timeframes, provides
  CoCs with the ability to produce all HUD required reports, including related reports needed to
  assess data quality, timeliness, and completeness; and,
- Provide CoC Administrators with tools necessary to monitor participating agency compliance with Federal Data Standards, including reports and access to raw agency data; and
- Ensure that the vendor's software continues to meet the needs of the GA HMIS Collaborative.

### **GA HMIS Standard Operating Procedures**

- Develop and maintain GA HMIS Standard Operating Procedures in accordance with HUD requirements and notices and CoC needs for approval by the GA HMIS Steering Committee;
- Develop and maintain a privacy plan, security plan, and data quality plan for the participating agencies of the GA HMIS Collaborative in accordance with HUD requirements for approval by the GA HMIS Steering Committee;
- As specified by MOA with each CoC, assist CoCs in monitoring participating agency compliance with security, privacy, and confidentiality policies.

#### Training and Technical Assistance

- Establish a CoC Admin User Group to engage and encourage support amongst CoC Admins.
- Develop minimum training requirements for participating agency users for approval by the GA HMIS Steering Committee;
- Ensure required basic training is available to participating agency staff and accessible on a regular basis;
- Identify and provide additional training that may be needed to ensure good data quality for HUD and the Federal partners;
- Ensure technical assistance and help desk support is available and accessible to participating agencies on a regular basis; and
- Ensure CoCs have access to reports, technical assistance, and training required to develop a data quality improvement plan when necessary.

# General Understandings, provisions

All parties to this MOA, as members of the GA HMIS Collaborative, agree to the general governance provisions set forth by the GA HMIS Steering Committee, as defined by said Committee's By-Laws (Exhibit B).

#### a. Governance

The GA HMIS Collaborative is governed by the GA HMIS Steering Committee, which will provide oversight and accountability for all GA HMIS Implementation responsibilities in support of the HMIS Lead. The CoC's responsibilities for GA HMIS Implementation oversight and governance are carried out by the GA HMIS Steering Committee, which serves as the implementation and planning body of the GA HMIS Collaborative.

## b. HMIS Lead Agency Designation

DCA, on behalf of GHFA, is designated as the HMIS Lead for the GA HMIS Collaborative. The HMIS Lead is responsible for ensuring that the HMIS software is administered according to the regulations and notices promulgated pursuant to the HEARTH Act and other similar, subsequent and applicable federal, state, and local laws and ordinances. The HMIS Lead manages the HMIS operations on behalf of GA HMIS Collaborative's CoCs and provides HMIS project administration functions including staffing, budget and grant requirements management, as well as providing additional mutually agreed services.

#### c. Software Designation

The GA HMIS Collaborative designates Eccovia Solutions'

Client Track to serve as the sole HMIS software application and agrees to use the product as configured for the GA HMIS Implementation.

#### e. Compliance and Funding

Notwithstanding anything to the contrary herein, funding for the GA HMIS software and operations, including without limitation, the software product fee and any other reasonable out-of-pocket expenses incurred by the HMIS Lead in relation to this MOA, shall be the responsibility of the CoCs, and provided by the CoCs. Funding for the software licensure and the operation and administration of the GA HMIS Implementation shall come from the CoCs comprising the GA HMIS Collaborative and represented on the GA HMIS Steering Committee. The funding obligations, delineated to each CoC through Cost Distribution Plan shall be derived from a HUD funded CoC HMIS dedicated grant, or other funding identified by the CoC in agreement with the HMIS Lead. CoCs shall have the discretion to require participating agencies to pay user fees for the GA HMIS software and reporting licenses assigned to their agency. In the event there is a shortfall in funding for the software or operation of the GA HMIS Implementation, the GA HMIS Steering Committee shall be charged with supporting the HMIS Lead in pursuing additional revenue streams to support the GA HMIS Implementation.

For CoCs that possess a HUD funded CoC HMIS dedicated grant, there is a responsibility implied to that CoC to be openly required to use an agreed upon amount of the grant, as specified in the attached Exhibit A, to assist in the GA HMIS Implementation.

#### f. Compliance with Homeless Management Information System Standards

The HMIS Lead shall operate, and shall require that Eccovia Solutions operate, the HMIS in compliance with HUD HMIS Data and Technical Standards and any other laws and/or regulations applicable to the operation of the HMIS. The parties anticipate that HUD will release revised HMIS Standards periodically. The parties agree to make changes to this MOA, the CoC's Governance Charter, the GA HMIS Standard Operating Procedures, and other HMIS operational documents, as necessary, to comply with the revised standards within the HUD-specified timeframe for such changes.

Further, CoCs and partner agencies agree to collect and enter data in a compliant manner.

#### g. Data Ownership

Agency-level client-level information entered into HMIS (and any changes to such information) is the responsibility of the participating agency that is entering the data. However, the HMIS Lead and participating agencies are jointly responsible for ensuring that HMIS data processing capabilities, including the collection, maintenance, use, disclosure, transmission, and destruction of data, comply with the GA HMIS Implementations' privacy, security and confidentiality policies and procedures. Except where prohibited by law, or where the participating agency is able to reasonably demonstrate a pressing need to the HMIS Lead and the GA HMIS Steering Committee for complete control over its own data, the HMIS Lead owns all data entered into the HMIS and has the final authority to approve or disapprove the use of the data that is contained in the HMIS.

#### h. Data Responsibility

It is understood that all parties subject to this MOA as part of the GA HMIS Implementation will receive client information that may be subject to the privacy and security protections and requirements of HUD HMIS Standards, HIPAA Privacy Rule, other law, and local HMIS privacy and security policies and

#### **GA HMIS MOA**

procedures. All parties agree that protected client information will be used only for purposes permitted by agreement with the HMIS Lead and as permitted by the applicable laws and standards. Further, all parties agree to make use of all safeguards required by HUD Privacy Standards, HIPAA Privacy Rule, where appropriate, other law, and local HMIS privacy and security policies and procedures in order to prevent any unauthorized disclosure of protected client information.

## Acknowledgements

By signing below, we understand that: (could use this section to call out specific, explicit items, or reference items under general understandings)

- The Designated Representatives to the GAHMIS Steering Committee as listed in the By-Laws shall make themselves reasonably available to each other on an ongoing basis in order to ensure successful GA HMIS implementation to the mutual benefit of the parties.
- Formal communications with HUD regarding GA HMIS Implementation under this MOA shall be made by the HMIS Lead
- Interpretation of HUD requirements and /or HUD rules and agreements shall take precedence over conflicting terms in this MOA.
- No party will discriminate against any employee or applicant for employment or any customer
  or prospective customer seeking services because of their race, color, sex, creed, national origin,
  age, religion, veteran status, or disability.
- The parties agree to carry out the responsibilities outlined in this MOA in compliance with all laws, rules, regulations and orders of federal, state and local government.
- Any agent, contractor, employee or designee of either party to this agreement shall in no event
  be liable to the other party for indirect or consequential loss or damage, loss of profits, business,
  revenue, and goodwill or anticipated savings suffered by the other party during the term of this
  Agreement.

Signatures Mitchell	24 Sept 24/7
Authorized CoC Representative	Date
Shown Williams	9-25-17
Authorized DCA Representative	Date

# PIT Count Data for GA-508 - DeKalb County Continuum of Care

## **Total Population PIT Count Data**

	2016 PIT	2017 PIT
Total Sheltered and Unsheltered Count	473	460
Emergency Shelter Total	101	99
Safe Haven Total	0	0
Transitional Housing Total	214	176
Total Sheltered Count	315	275
Total Unsheltered Count	158	185

# **Chronically Homeless PIT Counts**

	2016 PIT	2017 PIT
Total Sheltered and Unsheltered Count of Chronically Homeless Persons	24	47
Sheltered Count of Chronically Homeless Persons	5	19
Unsheltered Count of Chronically Homeless Persons	19	28

## **Homeless Households with Children PIT Counts**

	2016 PIT	2017 PIT
Total Sheltered and Unsheltered Count of the Number of Homeless Households with Children	76	59
Sheltered Count of Homeless Households with Children	76	59
Unsheltered Count of Homeless Households with Children	0	0

## **Homeless Veteran PIT Counts**

	2011	2016	2017
Total Sheltered and Unsheltered Count of the Number of Homeless Veterans	NA	32	21
Sheltered Count of Homeless Veterans	NA	19	13
Unsheltered Count of Homeless Veterans	NA	13	8

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# HIC Data for GA-508 - DeKalb County Continuum of Care

## **HMIS Bed Coverage Rate**

Project Type	Total Beds in 2017 HIC	Total Beds in 2017 HIC Dedicated for DV	Total Beds in HMIS	HMIS Bed Coverage Rate
Emergency Shelter (ES) Beds	111	52	59	100.00%
Safe Haven (SH) Beds	0	0	0	NA
Transitional Housing (TH) Beds	230	22	168	80.77%
Rapid Re-Housing (RRH) Beds	225	0	225	100.00%
Permanent Supportive Housing (PSH) Beds	1861	0	1542	82.86%
Other Permanent Housing (OPH) Beds	0	0	0	NA
Total Beds	2,427	74	1994	84.74%

## **PSH Beds Dedicated to Persons Experiencing Chronic Homelessness**

Chronically Homeless Bed Counts	2016 HIC	2017 HIC
Number of CoC Program and non-CoC Program funded PSH beds dedicated for use by chronically homeless persons identified on the HIC	176	250

## Rapid Rehousing (RRH) Units Dedicated to Persons in Household with Children

Households with Children	2016 HIC	2017 HIC
RRH units available to serve families on the HIC	33	61

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# HIC Data for GA-508 - DeKalb County Continuum of Care

# Rapid Rehousing Beds Dedicated to All Persons

All Household Types	2016 HIC	2017 HIC
RRH beds available to serve all populations on the HIC	129	225

9/25/2017 5:53:19 PM 3

# FY2016 - Performance Measurement Module (Sys PM)

## Summary Report for GA-508 - DeKalb County Continuum of Care

For each measure enter results in each table from the System Performance Measures report generated out of your CoCs HMIS System. There are seven performance measures. Each measure may have one or more "metrics" used to measure the system performance. Click through each tab above to enter FY2016 data for each measure and associated metrics.

RESUBMITTING FY2015 DATA: If you provided revised FY 2015 data, the original FY2015 submissions will be displayed for reference on each of the following screens, but will not be retained for analysis or review by HUD.

ERRORS AND WARNINGS: If data are uploaded that creates selected fatal errors, the HDX will prevent the CoC from submitting the System Performance Measures report. The CoC will need to review and correct the original HMIS data and generate a new HMIS report for submission.

Some validation checks will result in warnings that require explanation, but will not prevent submission. Users should enter a note of explanation for each validation warning received. To enter a note of explanation, move the cursor over the data entry field and click on the note box. Enter a note of explanation and "save" before closing.

## **Measure 1: Length of Time Persons Remain Homeless**

This measures the number of clients active in the report date range across ES, SH (Metric 1.1) and then ES, SH and TH (Metric 1.2) along with their average and median length of time homeless. This includes time homeless during the report date range as well as prior to the report start date, going back no further than October, 1, 2012.

Metric 1.1: Change in the average and median length of time persons are homeless in ES and SH projects. Metric 1.2: Change in the average and median length of time persons are homeless in ES, SH, and TH projects.

a. This measure is of the client's entry, exit, and bed night dates strictly as entered in the HMIS system.

# FY2016 - Performance Measurement Module (Sys PM)

	Universe (Persons)			Average LOT Homeless (bed nights)				Median LOT Homeless (bed nights)			
	Submitted FY2015	Revised FY2015	Current FY	Submitted FY2015	Revised FY2015	Current FY	Difference	Submitted FY2015	Revised FY2015	Current FY	Difference
1.1 Persons in ES and SH	192	180	182	155	75	81	6	86	57	77	20
1.2 Persons in ES, SH, and TH	477	435	375	317	245	218	-27	240	167	117	-50

#### b.

This measure includes data from each client's "Length of Time on Street, in an Emergency Shelter, or Safe Haven" (Data Standards element 3.17) response and prepends this answer to the client's entry date effectively extending the client's entry date backward in time. This "adjusted entry date" is then used in the calculations just as if it were the client's actual entry date.

NOTE: Due to the data collection period for this year's submission, the calculations for this metric are based on the data element 3.17 that was active in HMIS from 10/1/2015 to 9/30/2016. This measure and the calculation in the SPM specifications will be updated to reflect data element 3.917 in time for next year's submission.

	Universe (Persons)			ge LOT Hor bed nights		Median LOT Homeless (bed nights)			
	Previous FY	Current FY	Previous FY	Current FY	Difference	Previous FY	Current FY	Difference	
1.1 Persons in ES and SH	-	182	-	81		-	177		
1.2 Persons in ES, SH, and TH	-	375	-	218		-	117		

# **FY2016 - Performance Measurement Module (Sys PM)**

# Measure 2: The Extent to which Persons who Exit Homelessness to Permanent Housing Destinations Return to Homelessness

This measures clients who exited SO, ES, TH, SH or PH to a permanent housing destination in the date range two years prior to the report date range. Of those clients, the measure reports on how many of them returned to homelessness as indicated in the HMIS for up to two years after their initial exit.

	Total # of Persons who Exited to a Permanent Housing Destination (2 Years Prior)		Returns to Homelessness in Less		Returns to Homelessness from 6 to 12 Months			Returns to Homelessness from 13 to 24 Months			Number of Returns in 2 Years		
	Revised FY2015	# of Returns	Revised FY2015	# of Returns	% of Returns	Revised FY2015	# of Returns	% of Returns	Revised FY2015	# of Returns	% of Returns	# of Returns	% of Returns
Exit was from SO	0	5	0	0	0%	0	0	0%	0	0	0%	0	0%
Exit was from ES	47	92	4	18	20%	3	6	7%	5	12	13%	36	39%
Exit was from TH	97	89	3	0	0%	4	0	0%	2	4	4%	4	4%
Exit was from SH	0	0	0	0		0	0		0	0		0	
Exit was from PH	317	481	20	30	6%	12	24	5%	17	29	6%	83	17%
TOTAL Returns to Homelessness	461	667	27	48	7%	19	30	4%	24	45	7%	123	18%

## **Measure 3: Number of Homeless Persons**

Metric 3.1 – Change in PIT Counts

# FY2016 - Performance Measurement Module (Sys PM)

This measures the change in PIT counts of sheltered and unsheltered homeless person as reported on the PIT (not from HMIS).

	2015 PIT Count	Most Recent PIT Count	Difference
Universe: Total PIT Count of sheltered and unsheltered persons	684	473	-211
Emergency Shelter Total	91	101	10
Safe Haven Total	0	0	0
Transitional Housing Total	396	214	-182
Total Sheltered Count	487	315	-172
Unsheltered Count	197	158	-39

## Metric 3.2 – Change in Annual Counts

This measures the change in annual counts of sheltered homeless persons in HMIS.

	Submitted FY2015	Revised FY2015	Current FY	Difference
Universe: Unduplicated Total sheltered homeless persons	485	436	380	-56
Emergency Shelter Total	188	180	182	2
Safe Haven Total	0	0	0	0
Transitional Housing Total	297	256	198	-58

# FY2016 - Performance Measurement Module (Sys PM)

# Measure 4: Employment and Income Growth for Homeless Persons in CoC Program-funded Projects

Metric 4.1 – Change in earned income for adult system stayers during the reporting period

	Submitted FY2015	Revised FY2015	Current FY	Difference
Universe: Number of adults (system stayers)	207	440	748	308
Number of adults with increased earned income	0	0	5	5
Percentage of adults who increased earned income	0%	0%	1%	1%

Metric 4.2 – Change in non-employment cash income for adult system stayers during the reporting period

	Submitted FY2015	Revised FY2015	Current FY	Difference
Universe: Number of adults (system stayers)	207	440	748	308
Number of adults with increased non-employment cash income	1	0	11	11
Percentage of adults who increased non-employment cash income	0%	0%	1%	1%

Metric 4.3 – Change in total income for adult system stayers during the reporting period

	Submitted FY2015	Revised FY2015	Current FY	Difference
Universe: Number of adults (system stayers)	207	440	748	308
Number of adults with increased total income	1	0	16	16
Percentage of adults who increased total income	0%	0%	2%	2%

# FY2016 - Performance Measurement Module (Sys PM)

Metric 4.4 – Change in earned income for adult system leavers

	Submitted FY2015	Revised FY2015	Current FY	Difference
Universe: Number of adults who exited (system leavers)	69	148	113	-35
Number of adults who exited with increased earned income	2	16	21	5
Percentage of adults who increased earned income	3%	11%	19%	8%

## Metric 4.5 – Change in non-employment cash income for adult system leavers

	Submitted FY2015	Revised FY2015	Current FY	Difference
Universe: Number of adults who exited (system leavers)	69	148	113	-35
Number of adults who exited with increased non-employment cash income	29	40	21	-19
Percentage of adults who increased non-employment cash income	42%	27%	19%	-8%

### Metric 4.6 – Change in total income for adult system leavers

	Submitted FY2015	Revised FY2015	Current FY	Difference
Universe: Number of adults who exited (system leavers)	69	148	113	-35
Number of adults who exited with increased total income	29	54	32	-22
Percentage of adults who increased total income	42%	36%	28%	-8%

# FY2016 - Performance Measurement Module (Sys PM)

## Measure 5: Number of persons who become homeless for the 1st time

Metric 5.1 – Change in the number of persons entering ES, SH, and TH projects with no prior enrollments in HMIS

	Submitted FY 2015	Revised FY2015	Current FY	Difference
Universe: Person with entries into ES, SH or TH during the reporting period.	280	266	254	-12
Of persons above, count those who were in ES, SH, TH or any PH within 24 months prior to their entry during the reporting year.	2	55	79	24
Of persons above, count those who did not have entries in ES, SH, TH or PH in the previous 24 months. (i.e. Number of persons experiencing homelessness for the first time)	278	211	175	-36

## Metric 5.2 – Change in the number of persons entering ES, SH, TH, and PH projects with no prior enrollments in HMIS

	Submitted FY 2015	Revised FY2015	Current FY	Difference
Universe: Person with entries into ES, SH, TH or PH during the reporting period.	1190	1480	1558	78
Of persons above, count those who were in ES, SH, TH or any PH within 24 months prior to their entry during the reporting year.	78	512	507	-5
Of persons above, count those who did not have entries in ES, SH, TH or PH in the previous 24 months. (i.e. Number of persons experiencing homelessness for the first time.)	1112	968	1051	83

# **FY2016 - Performance Measurement Module (Sys PM)**

Measure 6: Homeless Prevention and Housing Placement of Persons defined by category 3 of HUD's Homeless Definition in CoC Program-funded Projects

This Measure is not applicable to CoCs in the FY2016 Resubmission reporting period.

# Measure 7: Successful Placement from Street Outreach and Successful Placement in or Retention of Permanent Housing

Metric 7a.1 – Change in exits to permanent housing destinations

	Submitted FY 2015	Revised FY2015	Current FY	Difference
Universe: Persons who exit Street Outreach	110	90	132	42
Of persons above, those who exited to temporary & some institutional destinations	50	26	73	47
Of the persons above, those who exited to permanent housing destinations	29	38	24	-14
% Successful exits	72%	71%	73%	2%

Metric 7b.1 – Change in exits to permanent housing destinations

# FY2016 - Performance Measurement Module (Sys PM)

	Submitted FY 2015	Revised FY2015	Current FY	Difference
Universe: Persons in ES, SH, TH and PH-RRH who exited	632	972	1108	136
Of the persons above, those who exited to permanent housing destinations	438	742	808	66
% Successful exits	69%	76%	73%	-3%

## Metric 7b.2 – Change in exit to or retention of permanent housing

	Submitted FY 2015	Revised FY2015	Current FY	Difference
Universe: Persons in all PH projects except PH-RRH	1387	1372	1520	148
Of persons above, those who remained in applicable PH projects and those who exited to permanent housing destinations	1320	1301	1462	161
% Successful exits/retention	95%	95%	96%	1%

# FY2016 - SysPM Data Quality

## **GA-508 - DeKalb County Continuum of Care**

This is a new tab for FY 2016 submissions only. Submission must be performed manually (data cannot be uploaded). Data coverage and quality will allow HUD to better interpret your Sys PM submissions.

Your bed coverage data has been imported from the HIC module. The remainder of the data quality points should be pulled from data quality reports made available by your vendor according to the specifications provided in the HMIS Standard Reporting Terminology Glossary. You may need to run multiple reports into order to get data for each combination of year and project type.

You may enter a note about any field if you wish to provide an explanation about your data quality results. This is not required.

# **FY2016 - SysPM Data Quality**

	All ES, SH			All TH				All PSH, OPH			All RRH				All Street Outreach					
	2012- 2013	2013- 2014	2014- 2015	2015- 2016	2012- 2013	2013- 2014	2014- 2015	2015- 2016	2012- 2013	2013- 2014	2014- 2015	2015- 2016	2012- 2013	2013- 2014	2014- 2015	2015- 2016	2012- 2013	2013- 2014	2014- 2015	2015- 2016
1. Number of non- DV Beds on HIC	87	187	63	62	435	345	450	271	1439	1360	1713	1707	43	18	44	129				
2. Number of HMIS Beds	31	117	49	62	352	231	377	194	558	476	1207	1403	43	18	44	129				
3. HMIS Participation Rate from HIC ( % )	35.63	62.57	77.78	100.00	80.92	66.96	83.78	71.59	38.78	35.00	70.46	82.19	100.00	100.00	100.00	100.00				
4. Unduplicated Persons Served (HMIS)	151	208	180	182	258	277	256	198	875	981	1368	1526	71	49	89	204	0	12	43	98
5. Total Leavers (HMIS)	129	179	146	152	150	135	159	84	125	96	166	134	37	28	26	159	0	9	33	74
6. Destination of Don't Know, Refused, or Missing (HMIS)	0	2	3	1	8	6	10	2	9	7	43	15	0	0	0	0	0	0	0	0
7. Destination Error Rate (%)	0.00	1.12	2.05	0.66	5.33	4.44	6.29	2.38	7.20	7.29	25.90	11.19	0.00	0.00	0.00	0.00		0.00	0.00	0.00

## **Date of PIT Count**

	Date	Received HUD Waiver
Date CoC Conducted 2017 PIT Count	1/26/2017	

# Report Submission Date in HDX

	Submitted On	Met Deadline
2017 PIT Count Submittal Date	4/28/2017	Yes
2017 HIC Count Submittal Date	4/28/2017	Yes
2016 System PM Submittal Date	6/5/2017	Yes

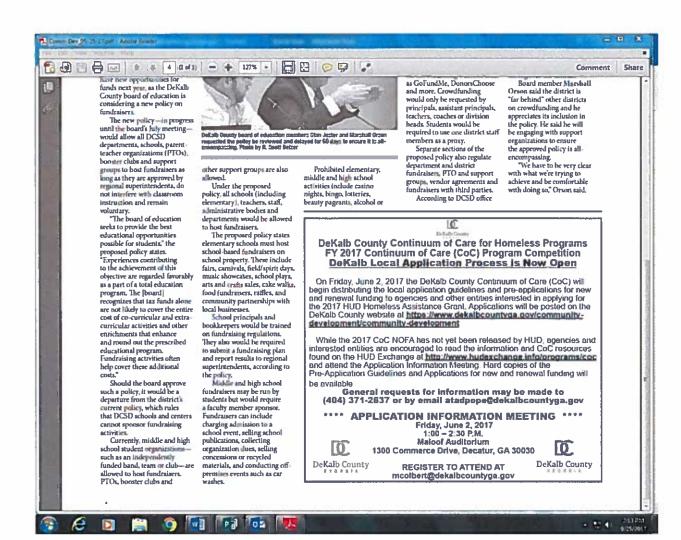
The DeKalb CoC accepts and considers proposals from all organizations interested in ending homelessness. Public notices announcing the opening of the DeKalb CoC Local 2017 Competition for HUD NOFA funding were posted on 5 /22/17 on the DeKalb County Website at <a href="https://www.dekalbcountyga.gov">https://www.dekalbcountyga.gov</a>, in The Champion Newspaper on 5/22/17 and to the CoC Email distribution list on 5 /25/17.

Eight (8) organizations not currently funded by the Coc attended the NOFA Information meeting. Local Applications for New and Renewal Project funding, Application Guidelines, including submission guidelines were distributed at an Application Information Meeting held on 6/2/17. Meeting materials from the Information Meeting were also posted to the DeKalb County Government website on 6/2/17. Application technical assistance was provided June 5 -9, 2017.

In response to these public notices and meetings, the Collaborative App received nineteen (19) applications for renewal funding and five (5) applications for new funding on 6/16/17. Three (3) of the five (5) new project applications were submitted by organizations that have not previously received CoC Program funding.

SEE EVIDENCE OF PUBLIC POSTING:







The DeKalb County Continuum of Care invites everyone who is interested in eliminating homeles meetings and volunteer to participate on committees. For additional information, contact adpoper

May 22, 2017 – Public Notice: 2017 DeKaib County CoC – Notice of 2017 Local Application Proce June 2nd, 2017 - NOFA Information Meeting Power Point

2017 DeKalb CoC Application Guidelines
2017 DeKalb CoC Application for New Projects

2017 DeKalb CoC Application for Renewal Projects



**Home Investment Partnership** 

**Homeless Prevention and Rapid** 

Re-Housing Program (HPRP)

**Neighborhood Stabilization** 

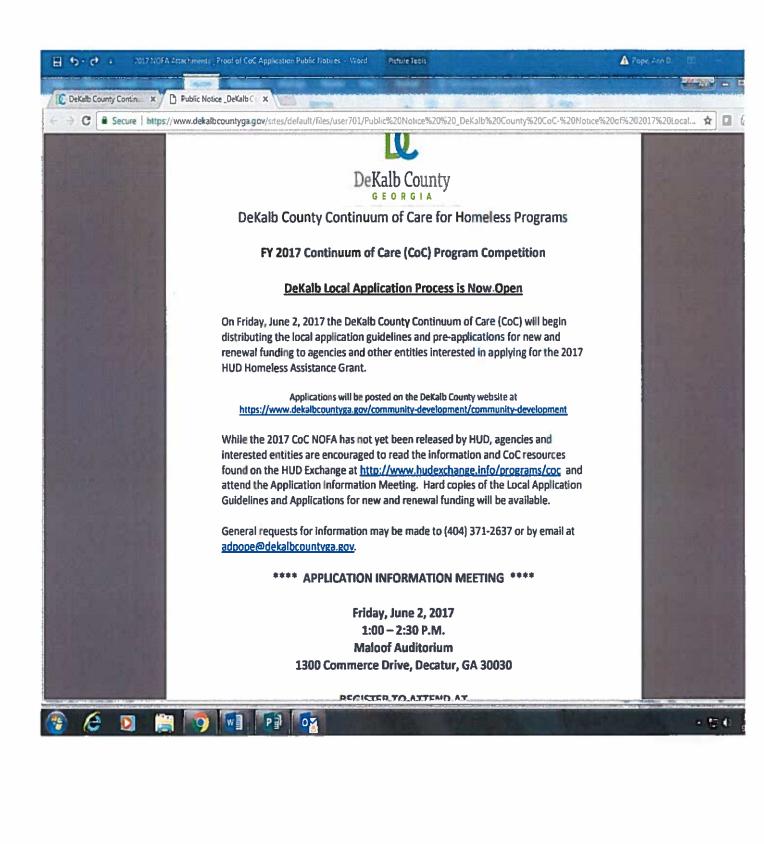
**Grant (HOME)** 

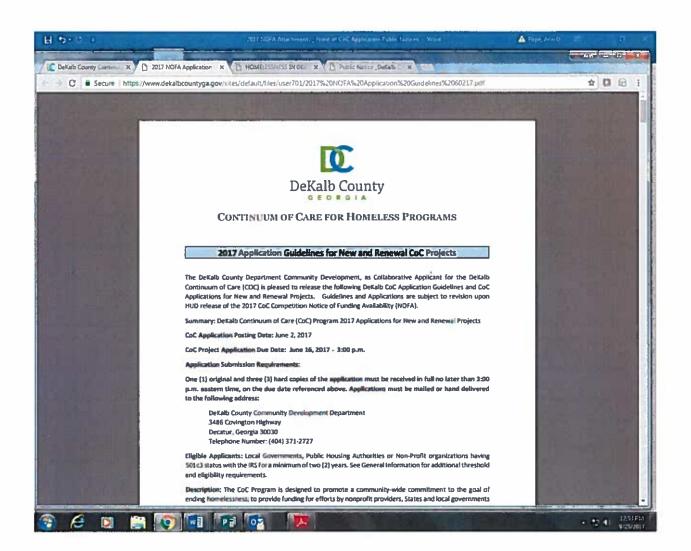
**Grant Application** 

Program (NSP)

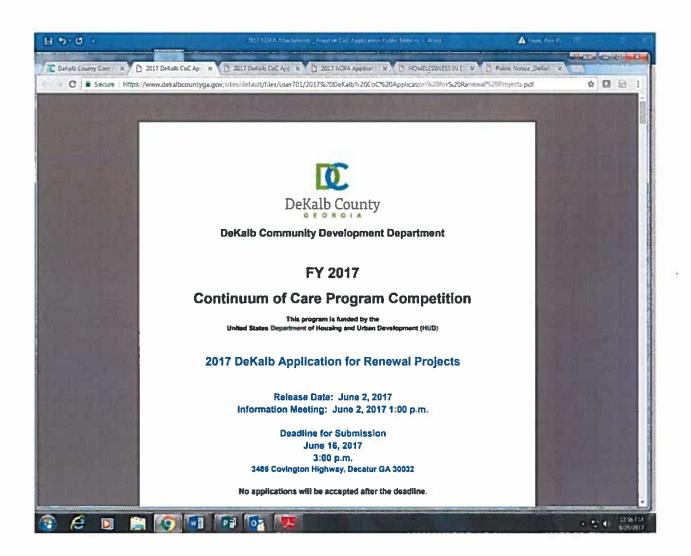
Other information

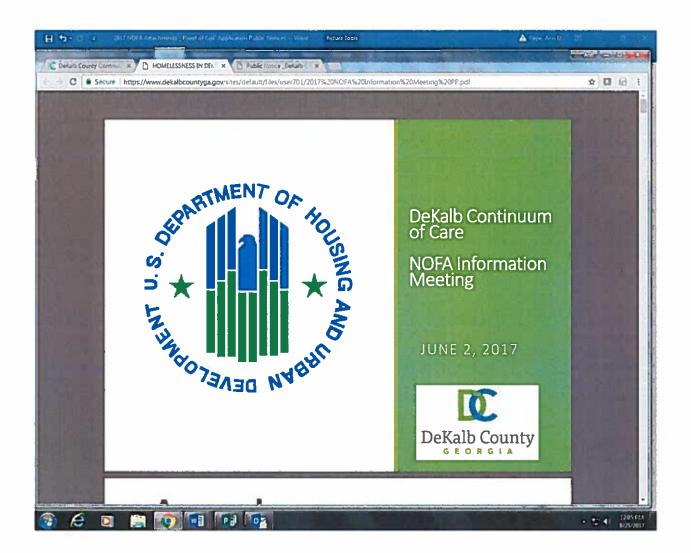


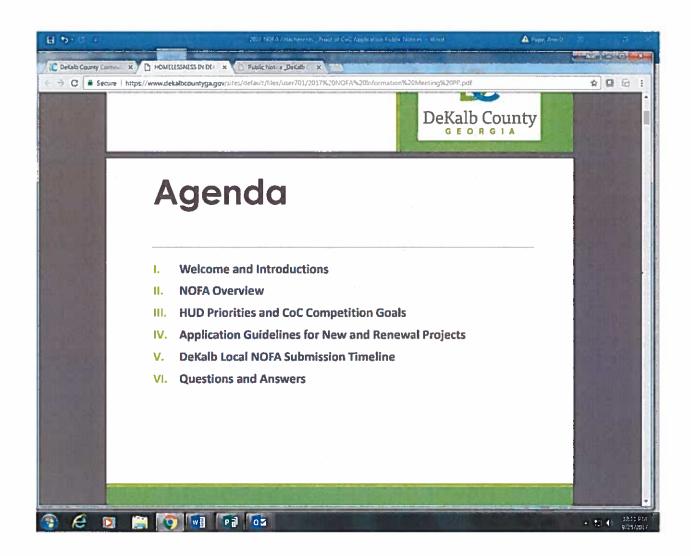




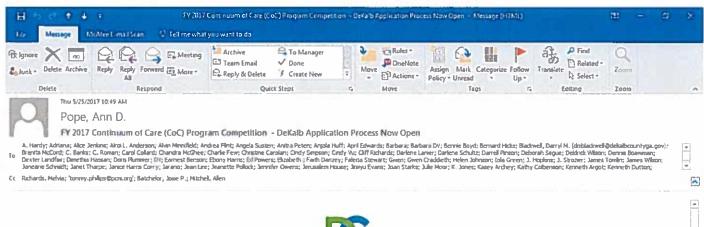








# NOFA ATTACHMENT – EVIDENCE OF COC DISTRIBUTION NOTIFICATION OF 2017 COC PROGRAM COMPETITION OPENING





**DeKalb County Continuum of Care for Homeless Programs** 

FY 2017 Continuum of Care (CoC) Program Competition

#### **DeKalb Local Application Process is Now Open**

On Friday, June 2, 2017 the DeKalb County Continuum of Care (CoC) will begin distributing the local application guidelines and applications for new and renewal funding to agencies and other entities interested in applying for the 2017 HUD Homeless Assistance Grant.

Applications will be posted on the DeKalb County website at <a href="https://www.dekalbcountyga.gov/community-development/community-development">https://www.dekalbcountyga.gov/community-development/community-development</a>



