



Muskegon County Homeless Continuum of Care Network

HMIS

Operating Policies and Procedures

DRAFT

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2023 Homeless Management Information System (HMIS) Operating Policies and Procedures

The purpose of the Muskegon County Homeless Continuum of Care HMIS project is to:

- Record and store client-level information about the numbers, characteristics, and needs of persons who use prevention, homeless housing, and supportive services.
- To produce an unduplicated count of persons experiencing homelessness for the Muskegon County Homeless Continuum of Care Network
- To understand the extent and nature of homelessness locally, regionally and nationally
- To understand patterns of service usage and measure the effectiveness of projects and systems of care.

These are the minimum standards of operation of the Muskegon County Homeless Continuum of Care Network HMIS Project.

KEY TERMS AND ACRONYMS:

Term	Acronym (if used)	Brief Definition
Homeless Management Information System	HMIS	A data system that meets HUD’s HMIS requirements and is used to measure homelessness and the effectiveness of related service delivery systems. The HMIS is also the primary reporting tool for HUD homeless service grants as well as for other public streams of funding related to homelessness.
Continuum of Care	CoC	Planning body charged with guiding the local response to homelessness.
Michigan Homeless Assistance Advisory Board	MHAAB	The Statewide HMIS project reports to MHAAB.
Michigan State Housing Development Authority	MSHDA	MSHDA is the grantee for the Statewide HMIS and subcontracts with MCAH for the administration of the system.
Michigan Department of Health and Human Services	MDHHS	The Michigan Department of Health and Human Services oversees a wide range of health, public welfare and resource initiatives throughout the State of Michigan. It was formed in 2015 from the merger of the Department of Community Health (DCH) and the Department of Human Services (DHS).
The Michigan Campaign to End Homelessness	CTEH	The Michigan Campaign to End Homelessness is a statewide partnership between MSHDA, MDHHS, MCAH, MDVA, the Salvation Army, and a broad coalition of regional and local partners. The CTEH exists to provide coordinated leadership for initiatives to prevent and end homelessness within the State of Michigan.
Joint Governance Charter		The Agreement between Michigan’s IJ CoCs and HMIS that supports a statewide HMIS operating in a single system environment.
The Health Insurance Portability and Accountability Act of 1996	HIPAA	The Health Insurance Portability and Accountability Act of 1996, particularly the Privacy Rule under Title II, regulates the use and disclosure of Protected Health Information (PHI) held by covered entities and business associates. HIPAA is the base operational privacy rule on which the HMIS privacy rule is structured.
42 CFR Part 2	Part 2	42 CFR Part 2 is the federal regulation governing the confidentiality of drug and alcohol use treatment and prevention records. The regulations apply to

		certain federally assisted substance use treatment programs limiting the use and disclosure of substance use patient records and identifying information.
Participation Agreement		The agreement between HMIS participating agencies and MCAH that specifies the rights and responsibilities of MCAH and participating agencies.
Administrative Qualified Services Organization Business Associates Agreement	Admin QSOBAA	The agreement signed by each CHO, the local HMIS Lead Agency, MCAH and MSHDA that governs the privacy standards for participants that can see data from multiple organizations.
Sharing Qualified Services Organization Business Associates Agreement	Sharing QSOBAA	The Agreement between agencies that elect to share information using the HMIS. The Agreement prevents the re-release of data and, in combination with the Participation Agreement, defines the rules of sharing.
User Agreement & Code of Ethics		The document each HMIS user signs that define the HMIS standards of conduct.
Release of Information	ROI	A Release of Information comes in two forms, a paper ROI and an electronic ROI. A signed (paper) ROI giving informed client consent for sharing is also required to share data between agencies. An electronic ROI must be completed to share a client's data on the HMIS.
Sharing		In an HMIS context, sharing refers to the exchange of client data between agencies. External data sharing requires a Sharing QSOBAA be established between two or more agencies, and a client signed Release of Information authorizing the sharing of that client's information. Basic data entry does not require an ROI as there is implied consent for the agency to keep records when a client provides information.
Protected Personal Information	PPI	Protected Personal Information is a category of sensitive information that is associated with an individual person and should be accessed only on a strictly need-to-know basis and handled and stored with care. In HMIS, all portions of a client record outside of the Client Profile require a Sharing QSOBAA to be in place and a client signed release of information before information can be shared.
Visibility		Refers to whether a provider page can see client data if it has been entered into another provider page. HMIS visibility is configured on each provider page. Visibility can be configured by individual provider pages or by Visibility Groups.
Visibility Group		A Visibility Group is a defined group of Provider Pages where data is shared to. Internal Visibility Groups control internal sharing within an organization. Internal Visibility is governed by an agency's internal privacy rule. External Visibility Groups control sharing with other agencies and are defined by a Sharing QSOBAA.
Coverage Rate		Coverage rate refers to the percentage of the homeless population in a geographic area that is measured on the HMIS, divided by the total number of homeless persons in that geographic area. Coverage rates are used to project a total homeless count if there are homeless service providers in a jurisdiction that do not participate in HMIS. (These may include persons served in Domestic Violence Providers or other non-participating Shelters or Outreach Projects.)
Project Types		HUD defines 12 Project Types in HMIS: <ul style="list-style-type: none"> • Coordinated Assessment – A CoC project that coordinates assessment and referrals of persons seeking housing and/or services and may include the use of a comprehensive and standardized assessment tool. • ES: Emergency Shelter- Overnight shelters or shelters with a planned length of stay of fewer than 3 months.

		<ul style="list-style-type: none"> • HP: Homeless Prevention – A project that helps those who are at imminent risk of losing housing, to retain their housing. • TH: Transitional Housing- Transitional environments with a planned LOS of not more than 2 years that provide supportive services. • PH: PSH Permanent Supportive Housing- Permanent Supportive Housing includes both services and housing. Permanent Supportive Housing requires a disability for entry and often serves persons who are chronically homeless. • PH: Housing Only - Permanent Housing may be supported by a voucher but does not have services attached to the housing. • PH: Housing with Services (no disability requirement) – Permanent Housing that provides both housing and supportive services, but does not require a disability to be served by the project • RR: Rapid Rehousing- A project that rapidly rehouses those that are identified at Literally Homeless. • SO: Street Outreach Project- A project that serves homeless persons that are living on the street or other places not meant for habitation. • SSO: Services Only Project- A project that serves persons only with no residential component. These projects often provide case management and other forms of support and meet with clients in an office, at the client’s home, or in a shelter. • Safe Haven: A project that provides low-demand shelter for hard-to-serve persons with severe disabilities. The clients have often failed in other sheltering environments.
Length of Stay	LOS	The number of days between the beginning of services and the end of services or in the case of permanent housing, the number of days between the housing move-in date and the exit from the housing. Length of stay is calculated using project start and exit dates, shelter stay dates or for permanent housing, the housing move-in date and project exist. HMIS offers calculations for discrete stays as well as the total stays across multiple sheltering events.
Point in Time Count	PIT	An annual count, usually in the last week in January that is required for all CoCs. In odd-numbered years, the PIT Count must include an “unsheltered” or street count.
Housing Inventory Count	HIC	The HIC is where all residential projects (both HMIS participating and non-participating) specify the number of beds and units available to homeless persons within a jurisdiction. The numbers are recorded in the agency’s HMIS provider pages, (for HMIS participating projects), or in “shell” provider pages for non-HMIS participating agencies.
SOAR Across Michigan	SOAR	Using the national “best practice” curriculum, the SOAR project, led by the Department of Health and Human Services, reduces barriers and supports the application for Social Security Benefits for Michigan’s disabled homeless population.
Department of Health and Human Services Emergency Services Project	DHHS ESP	The ESP project combines DHHS general fund funds and TANF dollars designated for homeless services, primarily sheltering. The dollars are managed through the Salvation Army and require HMIS participation.
Homeless Definition		<p>See Homeless Definition Crosswalk.</p> <p>The HEARTH Act defines 4 categories of homelessness. Not all projects can serve all categories, and some may utilize a different definition when delivering services. HMIS has adopted the HUD definition for counting persons experiencing homelessness.</p> <ul style="list-style-type: none"> • Category 1: Literally Homeless

		<ul style="list-style-type: none"> • Category 2: Imminent Risk of Homelessness • Category 3: Homeless under other Federal Statutes • Category 4: Fleeing/Attempting to Flee DV •
Projects for Assistance in Transition from Homelessness	PATH	PATH is funded by the Substance Abuse and Mental Health Services Administration (SAMHSA) and administered by the Michigan Department of Health and Human Services. It provides services to persons experiencing homelessness with mental health conditions, primarily through street outreach, to link them to permanent supportive housing. This project has different reporting requirements than HUD-funded projects and uses HMIS to collect this information.
Shelter Plus Care	S+C	Lead by the Michigan Department of Health and Human Services, Shelter + Care provides Permanent Supportive Housing to disabled persons in the State of Michigan and reports on the HMIS.
Housing Opportunities for Persons with AIDS	HOPWA	Lead by the Michigan Department of Health and Human Services, HOPWA provides housing assistance and related supportive services for persons with HIV/AIDS, and family members who are homeless or at risk of homelessness. This project has different project reporting requirements than the other HUD-funded projects in this document.
Housing Assessment and Resource Agencies	HARAs	Michigan has implemented HARAs across the state to serve as coordinated points of entry for homeless persons. HARAs work with other service providers to ensure that access to homeless resources is optimized and based on an assessment of need.
Local HMIS Lead Agency	EWP	The Local HMIS Lead Agency is the Agency that fills the following roles for the CoC: <ul style="list-style-type: none"> • Holds the CoC's HMIS grant or is funded by other dollars to support the CoC wide HMIS activities • Employs the Local System Administrator for the CoC
Local System Administrator	EWP	The Local System Administrator is responsible for overseeing the operation of the HMIS project for the CoC. The Local System Administrator maintains relationships with agencies in the local community and supports the specific HMIS needs of the agencies and leadership teams for which they are responsible.
By-Name List	BNL	A By-Name List is a list of persons experiencing homelessness within the CoC. By-Name Lists can be comprehensive, meaning they include all homeless persons, or focused, meaning they contain persons with certain sub-populations or prioritization characteristics. By-Name Lists are frequently used within collaborative multi-partner meetings known as case conferencing sessions to link appropriate homeless persons with housing options that best meet their needs.

I. POLICIES AND PROCEDURES SUMMARY:

A. Policy Disclaimers and Updates

Operational standards in this document are not intended to supersede grant-specific requirements and operating procedures as required by funding entities. PATH, HOPWA, and VA providers have operating rules specific to HHS and VA.

The HMIS Operating Policies and Procedures are updated routinely as HUD publishes additional guidance or as part of an annual review. The MCHCCN HMIS Administrator will participate with the MSHMIS monthly System Administrator Call-Ins and ensure that he/she is included in the MSHMIS meeting minutes' distribution email.

II. AGREEMENTS, CERTIFICATIONS, LICENSES, AND DISCLAIMERS:

MCHCCN agencies and users are required to uphold specific rules and responsibilities as participants in the HMIS project.

A. Required Agency Agreements, Certifications, and Policies

1. The MCHCCN will participate with the MSHMIS and by doing so by signing a **Joint Governance Charter** that designates the Michigan Statewide HMIS Vendor and identifies the Michigan Coalition Against Homelessness as the Statewide Lead Agency for the administration of the statewide database. The MCHCCN will identify a local Lead Agency that coordinates with the Statewide Agency and is responsible for specific tasks. The Charter supports the ability of multiple jurisdictions to participate in a single HMIS information system.
2. The MCHCCN will have the following fully executed documents on file with the Local System Administrator and users of the HMIS system and comply with the policies and directives contained therein:
 - a. An **Administrative QSOBAA** governing administrative access to the system.
 - b. A **Participation Agreement** governing the basic operating principals of the system and rules of membership.
 - c. **Sharing QSOBAA's** (if applicable) governing the nature of the sharing and the re-release of data.

B. HMIS User Requirements:

The MCHCCN Local System Administrator will have the following documents on file for all active users licensed in the HMIS project.

1. A fully executed User Agreement and Code of Ethics document governing the individual's participation in the system.
2. All agencies must have training certificates for active users on file.
 - a. All users must take full privacy training when they are first licensed and take privacy update training at least annually. Successful completion of the certification questionnaire is required for both the full privacy training and the privacy update. Documentation of completion of these trainings is to be available for review.

- b. All users must complete workflow training, related workflow updates and have documentation of the training completion for all workflows they work with.
- c. All users must be trained in the HUD Data Standards Universal Data Elements and any Program Specific Elements that apply to the programs they work with. This includes training on the process for collecting client identifying information, the Homeless Definition, and the Chronic Homeless Definition.

C. CoC System Administrator Requirements

1. Training Requirements – The CoC System Administrator must complete and maintain documentation of the following:
 - a. All trainings required for standard users on the system.
 - b. Provider Page training.
 - c. Workflow Training for all workflows used in their agency.
 - d. Reports Training (users and leadership are tasked with supporting data quality as well as monitoring outcome and other performance issues).
 - e. Other training as specified by the CoC.
2. CoC System Administrator Participation Requirements – The CoC System Administrator should participate in the following MCHCCN or agency meetings:
 - a. Agency-specific HMIS user meetings or preside over an HMIS specific topic during routine staff meetings.
 - b. A local Reports/Data Committee that reviews and governs the publication of MCHCCN information.

III. PRIVACY:

A. Privacy Statement

The MCHCCN is committed to making the HMIS project safe for participating agencies and the clients whose information is recorded on the system.

Toward that end:

- Sharing is a planned activity guided by sharing agreements between agencies (Sharing QSOBAAs). Agencies may elect to keep private some or all of the client record including all identifying data.
- All organizations will screen for safety issues related to the use of automation.
- The MSHMIS is compliant with HIPAA and all Federal and State laws and codes. All privacy procedures are designed to ensure that the broadest range of organizations may participate in the project. Access to Personal Protected Information will be restricted to persons with a business need to know, as defined by the laws governing the implementation, (ex. HIPAA, 42 CFR Part 2), these Policies and Procedures and privacy policies implemented by the CoC.
- MSHMIS has systematized the risk assessment related to clients through the standard HMIS release. The standardized release offers options for the use of a client's Social Security number.

It also provides guidance on using unnamed records and how the Privacy Notice is explained to clients. The CoC utilizes the ROI developed by MSHMIS.

- MSHMIS has adopted a Privacy Notice (with minor modifications) that was developed in close collaboration with providers that manage information that may put a client at risk. The CoC utilizes the Privacy Notice developed by MSHMIS.
- Privacy Training is a requirement for all agencies and users on HMIS.
- We view our privacy training as an opportunity for all participating organizations to revisit and improve their overall privacy practices. Many agencies choose to have all their staff complete the HMIS training curricula – not just those with user access to the system.
- All users issued access to the system must sign a User Agreement & Code of Ethics form, and agencies must sign an HMIS Participation Agreement. Taken together, these documents obligate participants to core privacy procedures. If agencies decide to share information, they must sign an agreement that defines their sharing and prevents the re-release of information to unauthorized third parties (the Sharing QSOBAA).
- Policies have been developed that protect not only a client's privacy but also an agency's privacy.
- The HMIS System allows projects with multiple components/locations that serve the same client to operate on a single case plan. This reduces the amount of staff and client time spent in the documentation of activities and ensuring that care is coordinated and messages to clients are reinforced and consistent.

B. Privacy and Security Plan:

All records entered into and downloaded from the HMIS are required to be kept confidentially and securely. No client sensitive information is to be downloaded to a storage device.

Oversight:

1. All Agency Administrators with support of agency leadership must:
 - a. Ensure that all staff using the system complete annual privacy and security training. Training must be provided by HMIS Certified Trainers and based on the HMIS Privacy/Security Training curricula.
 - b. Conduct a quarterly review of their provider page visibility, ensuring that it properly reflects any signed Sharing QSOBAAs.
 - c. Modify their adapted Release of Information, and script used to explain privacy to all clients, for any privacy changes made.
 - d. Ensure user accounts are removed from the HMIS when a staff member leaves the organization, or when changes to a staff member's job responsibilities eliminate their need to access the system.
 - e. Report any security or privacy incidents to the MCHCCN's HMIS Local System Administrator. The System Administrator investigates the incident including running applicable audit reports. If the System Administrator determines that a breach has occurred and/or the staff involved violated privacy or security guidelines, the System Administrator will report the issue immediately to the

HMIS Project Director and CoC Chair. This will be followed up by a written description of the Local System Administrator's findings to the MCHCCN Coordinator and Chair. A Corrective Action Plan will be implemented. Components of the plan must include at minimum supervision and retraining. It may also include removal of HMIS license, client notification if a breach has occurred, and any appropriate legal action.

2. Criminal background checks must be completed on all Local System Administrators by the Local Lead Agency.
3. The MCHCCN HMIS Lead Agency will conduct routine audits of participating agencies to ensure compliance with the Operating Policies and Procedures. The audit will include a mix of systems and on-site reviews. The MCHCCN HMIS Lead Agency will document the inspection and any recommendations made, as well as schedule follow-up activities to identify any changes made to document compliance with the Operating Policies and Procedures.

Privacy:

1. Any agency that is subject to the Violence Against Women Act restrictions on entering data into an HMIS is not permitted to participate in the HMIS project. These providers will maintain a comparable database to respond to grant contracts and reporting requirements.
2. All agencies must have the **HUD Public Notice** posted and visible to clients in locations where information is collected.
3. All Agencies must have a **Privacy Notice**. They may adopt the HMIS sample notice or integrate HMIS language into their existing notice. All Privacy Notices must define the uses and disclosures of data collected on HMIS including:
 - a. The purpose of the collection of client information.
 - b. A brief description of policies & procedures governing privacy including protections for vulnerable populations.
 - c. Data collection, use and purpose limitations. The Uses of Data must include de-identified data.
 - d. The client right to copy/inspect/correct their record. Agencies may establish reasonable norms for the time and cost related to producing any copy from the record. The agency may say "no" to a request to correct information, but the agency must inform the client of its reasons in writing within 60 days of the request.
 - e. The client complaint procedure
 - f. Notice to the consumer that the Privacy Notice may be updated over time and applies to all client information held by the Agency.
4. All Notices must be posted on the Agency's website.
5. All Agencies are required to have a **Privacy Policy**. Agencies may elect to use the Sample Privacy Policy provided by the HMIS project. All Privacy Policies must include:
 - a. Procedures defined in the Agencies Privacy Notice

- b. Protections afforded those with increased privacy risks such as protections for victims of domestic violence, dating violence, sexual assault, and stalking. Protections include at a minimum:
 - i. Closing of the profile search screen so that only the serving agency may see the record.
 - ii. The right to refuse to share if the agency has established an external sharing plan.
 - iii. The right to be entered as an unnamed record, where identifying information is not recorded in the system and the record is located through a randomly generated number (note: this interface does allow for unduplication because the components of the unique Client ID are generated)
 - iv. The right to have a record marked as inactive.
 - v. The right to remove their record from the system.
 - c. Security of hard copy files: Agencies may create a paper record by printing the assessment screens located within the HMIS. These records must be kept in accordance with the procedures that govern all hard copy information (see below).
 - d. Client Information storage and disposal: Users may not store information from the system on personal portable storage devices. The Agency will retain the client record for a period of seven years, after which time the forms will be discarded in a manner that ensures client confidentiality is not compromised.
 - e. Remote Access and Usage: The Agency must establish a policy that governs the use of the system when access is approved from remote locations. The policy must address:
 - i. The use of portable storage devices with client identifying information is strictly prohibited.
 - ii. The environments where use is approved. These environments are not open to public access and all paper and/or electronic records that include client identified information are secured in locked spaces or are password controlled.
 - iii. All browsers used to connect to the system must be secure. If access through a wireless network, that network must be encrypted and secured. **No user is allowed to access the database from a public or non-secured private networks such as an airport, hotel, library, or internet café.**
 - iv. Access via a cellular network using 4G LTE or similar access is permitted if the connection is protected and encrypted. This permits users to access HMIS from cell phones, tablet devices or personal hotspots. If broadcasting a hotspot signal, the device must have a passcode or other security measures to restrict general access.
 - v. All computers accessing the system are owned by the agency.
6. Agencies must protect **hard copy data** that includes client identifying information from unauthorized viewing or access.
- a. Client files must be locked in a drawer/file cabinet.
 - b. Offices that contain files must be locked when not occupied.
 - c. Client files must not be left visible to unauthorized individuals.

7. The agency provides a **Privacy Script** to all staff charged with explaining privacy rights to clients that standardize the privacy presentation. The script must:
 - a. Be developed with agency leadership to reflect the agency's sharing agreements and the level of risk associated with the type of data the agency collects and shares.
 - b. The script should be appropriate for the general education/literacy level of the agency's clients.
 - c. A copy of the script should be available to clients as they complete the intake interview.
 - d. All agency staff responsible for client interaction will be trained in the use of the Privacy Script.

8. Agencies that plan to share information through the system must sign a **Sharing QSOBAA** (Qualified Services Organization Business Associates Agreement).
 - a. The Sharing QSOBAA prescribes the re-release of information shared under the terms of the agreement.
 - b. The Sharing QSOBAA specifies what is shared with whom.
 - c. Agencies may share different portions of a client record with different partners and may sign multiple Sharing QSOBAAs to define a layered sharing practice.
 - d. The signatories on the Sharing QSOBAA must be representatives who are authorized to sign such an agreement by senior agency leadership and/or the Agency Board of Directors.
 - e. All members of a Sharing QSOBAA are informed that by sharing, they are creating a common electronic record that can impact data reflected in reports. Members of the sharing group agree to communicate and negotiate data conflicts.
 - f. No agency may be added to the agreement without the approval of all other participating agencies.
 - i. Documentation of that approval must be available for review and may include such items as meeting minutes, email response or other written documentation.
 - ii. Agency approval of additions or changes to a Sharing QSOBAA must be approved by a staff member with authorization to make such decisions on behalf of their agency.
 - g. When a new member is added to the Sharing QSOBAA, the related Visibility Group in the system is end-dated and a new Visibility Group is begun. **A new member may not be added to an existing Visibility Group.**

9. Agencies must have appropriate **Release(s) of Information** that is consistent with the type of data the agency plans to share.
 - a. The agency has adopted the appropriate HMIS Basic Release of Information that applies to their sharing practice to share basic demographic and transactional information.

- b. If the agency integrates the HMIS Release into their existing releases, the release must include the following components:
 - i. A brief description of HMIS including a summary of the HUD Public Notice.
 - ii. A specific description of the Client Profile Search Screen and an opportunity for the client to request that the screen be closed.
 - iii. A listing of the Agencies sharing partners (if any) and a description of what is shared. These sections must reflect items negotiated in the agency's Sharing QSOBAA.
 - iv. A defined term of the Agreement¹.
 - v. Interagency sharing must be accompanied by a negotiated and executed Sharing QSOBAA.

For agencies subject to 42 CFD, Part 2, both internal and external sharing will be done in accordance with the law.

HIPAA compliant **Authorization to Release Confidential Information** is also required if the planned sharing includes any of the following:

- vi. Case notes/progress notes
- vii. Information or referral for health, mental health, HIV/AIDS, substance use disorders, or domestic violence.
- viii. To reduce paper usage, the basic HMIS Release may be adapted to include the language necessary for a HIPAA compliant release if sharing practice is likely to include the items listed above in ii.²

10. An **automated ROI** is required to enable the sharing of any client's information between any provider pages on the system.

- a. Agencies should establish **Internal Sharing** or share between only their agency's provider pages, by creating visibility group(s) that include all of the agency's provider pages where sharing is planned and allowed by law.
 - 1. Internal Sharing does not require a signed Client ROI unless otherwise specified by law. (However, an electronic release must still be entered into the system to permit Internal Sharing.)
 - 2. Unless otherwise specified by law, when new provider pages are added to the Agency tree, they may be included in the existing internal visibility group. The information available to that Provider Page will include all information covered by the visibility group from the beginning date of the Group – sharing will be retroactive.
- b. Agencies may elect to share information with other agencies, a practice known as **External Sharing**, by negotiating a Sharing QSOBAA (see 8 above).

1. A signed and dated Client ROI must be stored in the Client Record (paper or scanned onto the system) for all Automated ROIs that release data between different agencies.
 2. Retroactive Sharing or sharing historic information between two or more agencies without client consent is not permitted in HMIS. To prevent retroactive sharing, a new visibility group is constructed whenever a new sharing partner is added to the agency's existing sharing plan/Sharing QSOBAA.
 - c. MCAH has defined a procedure for pulling a client's housing history across the entire database to verify a client's eligibility for specific housing options.
 - i. Consent for obtaining the client's housing history is written into the agency's Outreach Sharing Plan of their ROI, and the client has agreed to permit this activity by initialing this section.
 - ii. An electronic copy of the signed ROI including the client authorization to release the housing history has been attached to the client record on the system.
11. The Agency must have a procedure to assist clients that are hearing impaired or do not speak English as a primary language. For example:
 - a. Provisions for Braille or audio
 - b. Available in multiple languages
 - c. Available in large print
12. **Agencies are required to maintain a culture that supports privacy.**
 - a. The staff does not discuss client information in the presence of others without a need to know.
 - b. Staff eliminates unique client identifiers before releasing data to the public.
 - c. The Agency configures workspaces for intake that supports the privacy of client interaction and data entry.
 - d. User accounts and passwords must not be shared between users, or visible for others to see.
 - e. Project staff must be educated to not save reports with clients identifying data on portable media. Agencies must be able to provide evidence of users receiving training on this procedure or meeting minutes.
 - f. Staff must be trained regarding the use of email communication, texting, file sharing and other electronic means of transferring data related to client services.
 - g. By-name housing prioritization lists may not be printed with client identifying information without written client consent.

Data Security:

1. All licensed users of the system must be assigned **access levels** that are consistent with their job responsibilities and their business “need to know”.
2. All computers have **network threat protection software with automatic updates**.
 - a. Agency Administrators or designated staff are responsible for monitoring all computers that connect to the HMIS to insure:
 - i. The threat protection software is up-to-date.
 - ii. That various system updates are automatic unless a specific, documented reason exists to maintain an older version of the software.
 - iii. Operating System updates are run regularly.
3. All computers are protected by a firewall.
 - a. Agency Administrators or designated staff are responsible for monitoring all computers that connect to the HMIS to ensure:
 - i. For single computers, the software and versions are current.
 - ii. For networked computers, the firewall firmware is current.
4. Physical access to computers that connect to the HMIS is controlled.
 - a. All workstations are in secured locations (locked offices).
 - b. Workstations are logged off when not manned.
 - c. All workstations are password protected.
 - d. **All HMIS Users are prohibited from using a computer that is available to the public.**
5. A **Plan for Remote Access** must exist if staff will be using the HMIS System outside of the office such as working from home. Concerns addressed in this plan should include the privacy surrounding off-site access.
 - a. The computer and environment of entry must meet all the standards defined above.
 - b. Downloads from the computer may not include client identifying information.
 - c. Staff must use an agency-owned computer.

Remember that your information security is never better than the trustworthiness of the staff you license to use the system. The data at risk is your own and that of your sharing partners. If an accidental or purposeful breach occurs, you are required to notify MCAH. A full accounting of access to the record can be completed.

IV. DATA BACKUP AND DISASTER RECOVERY PLAN:

The MSHMIS is a critically important tool in responding to catastrophic events. The MSHMIS data is housed in a secure server bank in Shreveport, Louisiana with nightly off-site backup. In case of a significant system failure at the main data center, HMIS can be brought back online within approximately four hours.

The Local CoC System Administrator must have a data backup and disaster recovery plan. It is as follows:

EWP-VSES01 Exchange Server (EMAIL ONLY) - DAILY Backups: Every 2 HOURS

EWP-VSDC01 File Server, Active Directory, Print Server - DAILY Backups: Every 2 HOURS

EWP-VSAS01 Accounting Programs (Creative Solutions) DAILY Backups: Every 2 HOURS

All backups are stored on IOSAFE (WaterProof and Fireproof) NAS

IOSAFE is plugged into EWP-PSHV01

The IOSAFE, Physical Server and Network Switch are plugged into UPS (Battery Backup) in case of power outages.

Backup Details for HMIS

See “Bowman Systems Securing Client Data” for a detailed description of data security and Bowman’s Disaster Response Plan

1. The MSHMIS Project is required to maintain the highest-level disaster recovery service by contracting with Bowman Systems for Premium Disaster Recovery that includes:
 - a. Off-site, out-of-state backup on a different Internet provider, and a separate electrical grid.
 - b. Backups of the application server occur regularly and align with the current version of the live MSHMIS site.
 - c. Near-instantaneous backups of the MSHMIS database (information is backed up within 5 minutes of entry.)
 - d. Additional nightly off-site replication to protect in case of a primary data center failure.
 - e. Priority level response (ensures downtime will not exceed 4 hours).

B. HMIS Project Disaster Recovery Plan:

In the event of a major system failure:

2. The MSHMIS Project Director or designee will notify all participating CoCs, and Local System Administrators should a disaster occur at Bowman Systems which affects the functionality and availability of ServicePoint. When appropriate, MCAH will notify Local System Administrators/CoC Leadership of the planned recovery activities and related timelines.
3. Local/assigned System Administrators are responsible for notifying their local agencies and users.
 - a. If a failure occurs after normal business hours, HMIS staff will report the system failure to Bowman Systems using their emergency contact line. An email will also be sent to local System Administrators no later than one hour following the identification of the failure.

- b. The MSHMIS Project Director or designated staff will notify Bowman Systems if additional database services are required.
- c. The MSHMIS Project will always have one staff member on-call 24/7/365 so agencies and users can report system outages.

B. The Local Lead HMIS Lead Agency:

The local Lead HMIS Agency has an obligation, to secure and backup key information necessary for the administration and functioning of the HMIS Project within the CoC. Please see the earlier discussion of the disaster plan.

- a. The Local HMIS Lead Agency must have a disaster recovery plan documented which outlines the policies and procedures for the MCHCCN in case of a major system disaster.
 - b. Agency Emergency Protocols must include:**
 - i. Emergency contact information including the names/organizations and numbers of local responders and key internal organization staff, designated representative of the CoCs, local HMIS Lead Agency, and the MSHMIS Project Director.
 - ii. Delegation of key responsibilities. The plan should outline which persons will be responsible for notification and the timeline of notification.
- 2. In the event of a local disaster:
 - a. MSHMIS in partnership with the local Lead Agency will work to fill all reasonable requests to provide access to additional hardware and user licenses to allow the agencies to reconnect to the database as soon as possible.
 - b. MSHMIS in collaboration with the local Lead Agency will also provide information to local responders as required by law and within best practice guidelines.
- 3. MSHMIS in collaboration with the local Lead Agency will also provide access to organizations charged with crisis response within the privacy guidelines of the system and as allowed by law.

V. SYSTEM ADMINISTRATION:

The position of the Local System Administrator is key to the success of the MCHCCN. This individual is responsible for overseeing the operation of the HMIS project. The following describes the typical list of responsibilities for a Local System Administrator:

A. Training Requirements for a Local System Administrator:

- 1. All trainings required for standard users on the system.
- 2. Provider Page training and Workflow Training for all workflows used in the CoC.
- 3. Reports Training (Local System Administrators are tasked with supporting data quality as well as monitoring outcome and other performance issues).
- 4. System Administrator Training – This training usually takes place several weeks after a new Local System Administrator has been in their position.
- 5. Continuous Quality Improvement Training

6. All System Administrators are required to read and understand the HUD Data Standards that underpin the rules of the HMIS.
7. HUD Initiative Training (LSA, PIT, APR, etc.)

B. Required Meetings for the Local System Administrator:

1. Regular MCHCCN Meetings and/or workgroups as determined by the MCHCCN
2. The Data Committee or meetings where data use and release are discussed.
3. The MSHMIS Monthly System Administrator Call-In (3rd Wednesday of every month at 10 am).
4. Regular Agency Administrator/User Meetings within the MCHCCN.
5. Michigan's Campaign to End Homelessness workgroups and Regional Meetings as assigned.

C. Local System Administrator Responsibilities:

1. Help Desk and Local Technical Support

- a. The Local System Administrator provides front-line technical support/technical assistance for users and agencies within the MCHCCN. This support includes resetting passwords and troubleshooting/problem solving for users and agencies within their MCHCCN. Where applicable, the Local System Administrator may train Agency Administrators to do fundamental system support activities, minimizing the burden for support on the Local System Administrator.
- b. The Local System Administrator builds relationships within the agencies they serve, working to understand the business practices of these agencies, and assisting them with mapping these business practices onto the system.

2. User and Provider Page Setup

- a. Local System Administrators will set up new users in MI HMIS or delegate the task to their Agency Administrators. In the case of delegating this task, they will train Agency Administrators on the proper setup of user accounts.
- b. Local System Administrators will supervise license allocation for users and agencies within the MCHCCN. When necessary or requested, the Local System Administrator will purchase additional licenses directly for the MCHCCN.
- c. The Local System Administrator will work in partnership with agencies and Agency Administrators in the MCHCCN to ensure that agency provider pages are set up correctly per the HUD Data Standards.
- d. The Local System Administrator will work directly with Agency Administrators and agencies, through a collaborative process to ensure proper visibility is established for the provider pages in the MCHCCN. The agency, at all times, will be directly involved in the visibility process and will sign off on any visibility changes made.

3. Communication

- a. The Local System Administrator will host regular User/Agency Administrator meetings for users of the system in the MCHCCN. These meetings will cover important news on changes in the system, items of local interest within the MCHCCN and issues identified by the Local System Administrator within the MCHCCN.
- b. The Local System Administrator will share any key news items of local impact, interest, or relevance to the users and Agency Administrators in the MCHCCN.

4. Training

- a. The Local System Administrator will inform Agency Administrators and local users of required and recommended system training's that are available through the MSHMIS Lead training website
- b. The Local System Administrator will provide localized training to MCHCCN users and agencies for issues or items of importance related to the local community. These may include local PIT/HIC training, guidance on local data cleanup, or specific guidance on proper workflow and system usage that are identified through an audit process
- c. The Local System Administrator will provide training for local users on initiatives identified and agreed upon between the Local System Administrator and the MCHCCN.

5. HUD Projects and Activities (Including LSA, PIT/HIC, HMIS APR, SPMs, HUD NOFA):

- a. The Local System Administrator will work directly with the MCHCCN leadership to complete CoC wide HUD activities such as the LSA, PIT/HIC, System Performance Measures and the CoC HUD NOFA submission. The Local System Administrator will also assist the MCHCCN with work surrounding state and local funding initiatives that require data from the HMIS.
- b. The Local System Administrator will assist with completing the HMIS APR for the MCHCCN.
- c. The Local System Administrator will provide support/technical assistance for agencies completing the MCHCCN APR within their jurisdiction. This will include providing technical assistance with problem-solving data quality issues, reporting issues, etc.

6. MCHCCN Reporting

- a. The Local System Administrator will be responsible for providing reports to the MCHCCN. These include, but are not limited to:
 - i. MCHCCN wide demographics, performance outcomes, and data quality reports that are used for informational and evaluation purposes

- ii. Final reports on submissions made to HUD for various HUD mandated activities such as the LSA, PIT/HIC, and HMIS APR,SPM
 - iii. General requests for data of interest to the MCHCCN
 - iv. Any additional reporting requirements initiated by HUD that are required of the MCHCCN.
- b. The Local System Administrator will train users on how to run reports at the agency level to monitor data quality and outcomes regularly.
 - c. The Local System Administrator will be responsible for generating reports on activities and expenditures to the MCHCCN.

7. MCHCCN/Agency/Project Auditing and Monitoring

- a. The Local System Administrator will work with the MCHCCN to establish local HMIS policies and procedures using the MSHMIS system-wide Policies and Procedures document as a frame. The Local System Administrator will work with the MCHCCN leadership and Agency Leadership/Administrators to update this document as needed.
- b. The Local System Administrator, collaborating with the Agency Administrators in the MCHCCN will audit agencies and projects to ensure compliance. Audit activities may include, but are not limited to:
 - i. Ensuring the agency has all required contracts, agreements and policies in place for participation on the HMIS.
 - ii. Verifying system users have completed all required training for system participation.
 - iii. Ensuring provider pages are correctly setup per HUD Standards Guidance
 - iv. Ensuring agencies are following appropriate data entry protocol per the funding sources they receive funding from
 - v. Monitoring implementation of privacy, to ensure client rights are being protected.
 - vi. Regularly monitoring data quality, completeness, and outcomes to ensure projects are maintaining a high level of compliance with HUD and CoC requirements.

VI. DATA QUALITY PLAN AND WORKFLOWS

A. Provider Page Set-Up:

1. Provider Page is appropriately named per the HMIS naming standards **Agency Name – Location (CoC Name) – Project Name – Project Funding Descriptors**.
For example, The Salvation Army – Marquette Alger CoC – Hotel Voucher Project – ESP. Identification of the funding stream is critical to completing required reporting to the funding organization.
2. Inactive Provider Pages are properly identified with "XXX Closed" followed by the year of the last project exit > Provider Page Name. For example, XXX Closed 2016

- a. Close all clients in inactive/closed provider pages. Audit of inactive pages includes closing all open services and incomes and exiting all un-exited clients.
3. The primary provider contact information reflects where the services are being delivered.
4. HUD Data Standards are fully completed on all Provider Pages:
 - a. The operating start date is correctly set. If a project is still functioning, the end date is null. IF the project has stopped operations, the end date reflects the date the project stopped offering services.
 - b. CoC code is correctly set. If a project stops functioning in the CoC, the appropriate end date will be added to the CoC Code Entry.
 - c. Project type codes are correctly set.
 - d. The services code is correctly set.
 - e. If a project is an Emergency Shelter, the Method for Tracking Emergency Shelter Utilization field is correctly set. If a project is not an Emergency Shelter, this field is left null or “-Select- “
 - f. Geocodes are set correctly
 - g. The Continuum Project field must be properly completed.
 - h. If a project is HOPWA, RHY, PATH or SSVF, the Provider Grant Type is correctly filled out.
 - i. Bed and Unit Inventories are set for applicable residential projects. Bed and Unit Inventories for all projects should be reviewed at least annually and updated as needed.
 - j. Federal Partner Funding Source values are selected if a project is funded by one of the Federal Partners. Federal Partner Funding Sources are to be updated at least annually. If a project is not funded by a Federal Partner Funding Source, the option selected is NA.
 - k. Assessments with the appropriate 3.917 Living Situation question are assigned based on Program Type
 - i. Emergency Shelter, Street Outreach or Safe Haven projects use 3.917a.
 - ii. All other project types use 3.917b.

B. Data Quality Plan:

1. Agencies must require documentation at the intake of the homeless status of consumers according to the reporting and eligibility guidelines issued by HUD. The “order of priority” for obtaining evidence of homeless status are (1) third party documentation, (2) worker observations, and certification from the person. Lack of third-party documentation may not be used to refuse emergency shelter, outreach or domestic violence services. Local CoCs may designate the local HARA’s to establish the homeless designation and maintain related documentation.
2. **100% of the clients must be entered into the System within 7 days of data collection.** If the information is not entered on the same day it is collected, the agency must assure that the data associated with the information is the date on which the data was collected by:
 - a. Data is entered into the system using the Data As function
 - b. Entering the project start/exit data including the UDEs on the Entry/Exit Tab of ServicePoint or

- c. Backdating the information into the System³
5. All staff is required to be trained on the definition of Homelessness.⁴
 - a. HMIS provides a homeless definition crosswalk and 3.917 flowcharts to support agency-level training.
 - b. There is congruity between the following HMIS case record responses, based on the applicable homeless definition. (Elements to HUD Data Standard Element 3.917a or 3.917b have been properly completed).
6. The agency has a process to ensure the First and Last Names are spelled properly, and the DOB is accurate.
 - a. An ID is requested at intake to support the proper spelling of the client's name as well as the recording of the DOB.
 - b. If no ID is available, staff request the legal spelling of the person's name. **Staff should not assume they know the spelling of the name.**
 - c. Projects that serve the chronic and higher-risk populations are encouraged to use the scan card process within ServicePoint to improve un-duplication and to improve the efficiency of recording services.
 - d. Data for clients with significant privacy needs may not be entered under the "unnamed record" feature of the system. However, client records can be locked down so just the agency entering the information is able to see.
7. Income and non-cash benefits are being updated at least annually and at the exit, or at the frequency specified by program requirements.
 - a. Annual Reviews will be completed in the +/-30 days before the anniversary of the client's entry into services.
 - b. For PH projects with long stays, at the annual review, incomes over two years old must be updated by closing the existing income and entering a new income record (even if the income has not changed). This assures that the income has been reconfirmed and will pull properly into reports.
 - c. For all other projects, any income(s) no longer available to the client should be closed for the day before intake (shared data from another provider), annual review and exit. If the income is over two years old, please follow the procedure defined above.⁵
8. Agencies have an organized exit process that includes:
 - a. Clients and staff are educated on the importance of planning and communicating regarding discharge. This is evidenced through staff meeting minutes or other training logs and records.
 - b. Discharge Destinations are properly mapped to the HUD Destination Categories.
 - i. HMIS provides a Destination Definition document to support the proper completion of exits. All new staff must have training in this document.

³ Clarification of existing policy.

⁴ Specific instruction is available for PATH and HOPWA projects at www.dyns-services.com

⁵ Reflecting the 2015 data quality review of client income, staff are being asked to close any incomes that are more than two years old and to enter a new income with the income review process and to prevent the further accumulation of open old incomes to add closing of the income to the routine discharge processes.

- ii. Projects must have defined processes for collecting this information from as many households as possible.⁶
 - c. There is a procedure for communicating exit information to the person responsible for data entry if not entering real-time.
- 9. Empty Record Clean Up
 - a. On a quarterly basis, the HMIS Administrator will run a report to pull data on clients who have a program entry with no service transactions. These reports will be sent to the Data Committee and the appropriate Agency Administrators to review and address. It will be the responsibility of the Agency Administrator to meet with their staff to ensure that they are recording their service transactions properly.
 - i. Any clients who have a program enrollment must receive at least one service transaction per month. Any clients that are discovered to have no service transactions with their program enrollment will have that program enrollment deleted or end dated by the Agency Administrator
 - ii. Agency Administrators will report back to the HMIS Administrator when the data concerns have been addressed before the following quarter begins.
- 10. Agency Administrators/staff regularly run data quality reports.
 - a. Report frequency should reflect the volume of data entered into the System. The frequency for funded projects will be governed by Grant Agreements, HUD reporting cycles, and MCHCCN Standards. However, higher volume projects such as shelters and services only projects must review and correct data at least monthly. Lower volume projects such as Transitional and Permanent Housing must run following all intakes and exits and quarterly to monitor the recording of services and other required data elements including annual updates of income and employment.⁷
 - b. The project start and exit dates should be recorded upon the project entry or exit of all participants. Project start dates should record the first day of service or initial contact with a client. Exit dates should record the last day of residence before the participant leaves the shelter/housing project or the last day service was provided.
 - c. Data quality screening and correction activities must include the following:
 - i. Missing or inaccurate information in (red) Universal Data Element Fields.
 - ii. The Relationship to Household assessment questions is completed.
 - iii. The 3.917 Living Situation series of questions are completed.
 - iv. The 3.16 Client Location question is completed
 - v. The Domestic Violence questions are completed
 - vi. HUD Verifications are completed on all Income, Non- Cash Benefits, Health Insurance and Disability sub-assessments.
 - vii. The Housing Move-in Date is completed for all Permanent Housing projects as appropriate.
 - viii. All project-specific data elements are completed as required by the various funding sources supporting the project.

11. The MCHCCN and its Agencies are required to review Outcome Performance Reports/System Performance Measures reports defined by HUD and other funding organizations. Measures are based on Project Type. The Steering Council, in collaboration with the Data Committee, establishes local benchmark targets for performance improvement on shared measures.
12. HMIS publishes regional benchmarks on all defined measures annually.
13. Agencies are expected to participate in MCHCCN's Continuous Quality Improvement Process.

B. Workflow Requirements:

1. Assessments set in the Provider Page Configuration are appropriate for the funding stream.
2. Users performing data entry have the latest copies of the workflow guidance documents.
3. If using paper, the intake data collection forms correctly align with the workflow.
4. 100% of clients are entered into the system within 7 days of intake.
5. Agencies are actively monitoring project participation and exiting clients. Clients are exited within 30 days of the last contact unless project guidelines specify otherwise.
6. All of the required project information is being collected.⁸
 - a. All HMIS participating agencies are required to enter at minimum the Universal Data Elements.
 - b. Projects that serve clients over time are required to complete additional updates as defined by the funding stream. If the Agency is not reporting to a funding stream, they are encouraged to use the Michigan Update forms that are consistent with the workflows.

VII. RESEARCH AND ELECTRONIC DATA EXCHANGES

A. Electronic Data Exchanges:

1. Agencies electing to either import or export data from the HMIS must assure:
 - a. **Data Import** - The quality of data being loaded onto the System meets all of the data quality standards listed in this policy including timeliness, completeness, and accuracy. In all cases, the importing organization must be able to successfully generate all required reports including but not limited to the CoC APR, the ESG CAPER, or other required reports as specified by the funder.
 - b. **Data Export** - Agencies exporting data from HMIS must certify the privacy and security rights promised participants on the HMIS are met on the destination system. If the destination System operates under less restrictive rules, the client must be fully informed and approve the transfer during the intake process. The agency must have the ability to restrict transfers to those clients that approve the exchange.
2. MSHDA/MCAH and/or the MCHCCN may elect to participate in de-identified research data sets to support research and planning.
 - a. De-identification will involve the masking or removal of all identifying or potentially identifying information such as the name, Unique Client ID, SS#, DOB, address, agency name, and agency location.

- b. The geographic analysis will be restricted to prevent any data pools that are small enough to inadvertently identify a client by other characteristics or combination of characteristics.
 - c. Projects used to match and/or remove identifying information will not allow a re-identification process to occur. If retention of identifying information is maintained by a “trusted party” to allow for updates of an otherwise de-identified data set, the organization/person charged with retaining that data set will certify that they meet medical/behavioral health security standards and that all identifiers are kept strictly confidential and separate from the de-identified data set.
 - d. The MCHCCN will be described in each study being implemented. Agencies or the MCHCCN may opt-out of the Study through a written notice to MCAH or the study owner.
3. MSHDA/ MCAH and/or the MCHCCN may elect to participate in identified research data sets to support research and planning.
- a. All identified research must be governed through an Institutional Research Board including requirements for client informed consent.
 - b. CoCs will be described in each Study being implemented. Agencies may opt-out of the study through a written notice to MCAH or the study owner.

Approved 05/2023
Revised 09/07/2023

APPENDIX A: DOCUMENT CHECKLIST FOR HMIS AGENCIES

All agencies that participate in the HMIS project are required to keep either a physical or electronic binder containing each of the following fully executed documents.

Contracts, Agreements, Policies, and Procedures

- Fully Executed Joint Governance Charter:** (Only the HMIS Lead Agency is required to maintain this document.)
- HMIS Policies and Procedures Document for the CoC:** (Only the HMIS Lead Agency is required to maintain this document. It must have been formally approved by the MCHCCN as evidenced by the MCHCCN meeting minutes.)
- Administrative QSOBAA:** Fully signed and executed
- Participation Agreement:** Fully signed and executed
- Sharing QSOBAAs:** (Only necessary if the agency has engaged in external sharing). The document should be fully signed and executed. If any changes have been made to a Sharing QSOBAA written documentation and approval of those changes by all parties must be included also.
- Confidentiality Policy:** (Approved by Agency Board)
- Grievance Policy:** (Approved by Agency Board)

HMIS User Documentation

- User Agreement and Code of Ethics Document:** Fully initialed and signed. A User Agreement and Code of Ethics document must be on file for all users currently licensed on HMIS. It is recommended that the User Agreement and Code of Ethics documents for employees no longer at the agency be kept with their separated employee file
- User Training Documentation/Certification:** Documentation of all HMIS trainings completed by active users are to be kept in the HMIS binder. These trainings are to be certified by either MCAH, a certified MCAH trainer, other identified statewide trainers or MCHCCN identified trainers for MCHCCN initiatives. Evidence of training include training completion certificates, successfully passed training quizzes, training logs, etc.

Agency Privacy Documents

- HUD Posted Public Notice:** HUD Public Notices should be posted in locations where clients are seen.
- Agency Privacy Notice:** Agencies can adopt the sample MCAH Notice or customize to address agency needs.
- Current Agency Privacy Script:** That's been developed and approved by agency leadership.
- Current Agency Release of Information:** Including all sharing partners and sharing outreach plans as applicable.