2016 NC HMIS Operating Policies and Procedures

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2016 North Carolina Statewide Homeless Management Information System (NC HMIS) Operating Policies and Procedures

The purpose of an HMIS project is to:

- Record and store client-level information about the numbers, characteristics and needs of persons who use homeless housing and supportive services
- Produce an unduplicated count of persons experiencing homelessness for each Continuum of Care
- Understand the extent and nature of homelessness locally, regionally and nationally
- Understand patterns of service usage and measure the effectiveness of projects and systems of care

These are the minimum standards of operation for the NC HMIS Project. CoCs may elect to implement more rigorous standards as agreed upon by their local CoC. **The following operating policies and procedures apply to all designated HMIS Lead Agencies and participating agencies in North Carolina. (Contributing HMIS Organizations – CHOs).**

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.
North Carolina Statewide Homeless Management Information System	NC HMIS	The North Carolina Statewide Homeless Management Information System is the unified statewide HMIS for all of North Carolina's 12 Continua of Care.
Continuum of Care	CoC	Planning body charged with guiding the local response to homelessness.
Independent Jurisdiction CoCs	IJs	CoCs that are recognized by HUD and are usually organized around higher population counties.
Balance of State CoC	BOS	The Balance of State CoC is composed of the communities/counties within North Carolina that are not part of another CoC within the state. Communities that are part of the Balance of State are typically smaller mid-sized or rural communities.
Michigan Coalition Against Homelessness	MCAH	The Michigan Coalition Against Homelessness is a nonprofit membership organization that is an advocate for individuals and families who are homeless or at-risk of becoming homeless, and the agencies that serve them. MCAH serves as the HMIS statewide lead for the NC HMIS project.
North Carolina HMIS Governance Committee	GC	The NC Governance Committee is composed of representatives from all 12 North Carolina CoCs and provides direct oversight of the Statewide HMIS project.
MCAH Memorandum of Understanding	MOU	The Interim MOU enables MCAH to serve as the HMIS Lead Agency and administer the statewide HMIS implementation on behalf of the North Carolina CoCs.

Contributing HMIS Organizations	**CHO**	An organization that participates on the HMIS.
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 NC 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 are applicable to certain federally assisted substance use treatment programs This law limits use and disclosure of substance use patient records and identifying information.
Participation Agreement		The agreement between NC HMIS participating agencies and MCAH that specifies the rights and responsibilities of MCAH and participating agencies.
Data Use Agreement/Administrative Qualified Services Organization Business Associates Agreement	**Data Use Agreement /Admin QSOBAA**	The agreement signed by each CHO, the local HMIS Lead Agency and MCAH 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 defines 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		Sharing refers to the exchange of client data between agencies. External data sharing requires a Sharing QSOBAA between two or more agencies, and a client signed Release of Information authorizing the sharing of that client's information. Data entry (internal sharing) does not require a client signed 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. It should be accessed only on a strict need-to-know basis and handled and stored with care. Before any portion of the HMIS client record, outside of the Client Profile, can be shared, a Sharing QSOBAA and a client signed release of information must be in place.
Visibility		Refers to whether or not a provider page can view client data that has been entered into another provider page. HMIS system visibility is configured separately in 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 between which data is shared. 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 estimates are used to project a total homeless count if there are homeless service providers in a

		jurisdiction that do not participate in NC HMIS. (These may include persons served in Domestic Violence Providers or other non-participating Shelters or Outreach Projects.) See the NC HMIS Coverage Memo for guidance.
Project Types		**HUD defines 12 Project Types in HMIS:** • 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 less than 3 months. • 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 Housing for the formerly homeless with services attached to persons served under this project. • PH: Permanent Housing- Permanent housing that may be supported by a voucher but does not have services attached to the housing. • RR: Rapid Rehousing- A project that rapidly rehouses those who are identified at Literally Homeless. • HP: Homeless Prevention- A project that helps those who are at imminent risk of losing housing, to retain their housing. • SO: Street Outreach Project- A project that serves homeless persons who 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. It is calculated using entry and exit dates or shelter stay dates. NC HMIS offers calculations for discrete stays as well as the total stays across multiple sheltering events.
Point in Time Count	**PIT**	An annual count, that is required for all CoCs. It is usually performed during the last week in January. Every other year, the PIT Count must include an "unsheltered" or street count.
Housing Inventory Chart	**HIC**	The HIC Chart 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 NC HMIS participating projects), or in "shell" provider pages for non-HMIS participating agencies.
Homeless Definition		**See Homeless Definition Crosswalk.** **The HEARTH Act defines 4 categories of homelessness.** NC HMIS has adopted the HUD definition for counting persons experiencing homelessness. • Category 1: Literally Homeless • Category 2: Imminent Risk of Homelessness • Category 3: Homeless under other Federal Statutes • Category 4: Fleeing/Attempting to Flee DV

		Not all projects can serve all categories and some may utilize a different definition when delivering services.
Projects for Assistance in Transition from Homelessness	**PATH**	PATH is funded by the Substance Abuse and Mental Health Services Administration (SAMHSA). It provides services to mentally ill homeless people, primarily through street outreach, to link them to permanent community housing. This project has different reporting requirements than HUD funded projects and uses HMIS to collect this information.
Shelter Plus Care	**S+C**	Shelter + Care provides Permanent Supportive Housing to disabled persons and reports on the HMIS.
Housing Opportunities for Persons with AIDS	**HOPWA**	HOPWA provides housing assistance and related supportive services for persons with HIV/AIDS, and family members who are homeless or at risk of homelessness. This project has different project reporting requirements than the other HUD funded projects in this document.
Coordinated Assessment Programs	**CA**	Coordinated assessment is now required for all communities receiving HUD funding. Each CoC must develop a plan based on their local providers and resources. The shared objective of these locally defined processes is to ensure that access to homeless resources is optimized and based on a standardized assessment of need.

I. POLICIES AND PROCEDURES SUMMARY:

A. Policy Disclaimers and Updates

Operating Procedures defined in this document represent the minimum standards of participation on the NC HMIS project and represent general "best practice" operational procedures. Local HMIS Lead Agencies in coordination with their CoCs may add additional standards to this base document, which define the local HMIS policies within their jurisdiction.

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 NC HMIS Operating Policies and Procedures are updated routinely as HUD publishes additional guidance or as part of an annual review. Draft updates will be reviewed at the NC HMIS monthly System Administrator Call-In and included in the meeting minutes' distribution email. Before being finalized, the NC HMIS Policies and Procedures will be formally approved by the North Carolina HMIS Governance Committee. To allow for evolution of compliance standards without re-issuing core agreements, updated policies supersede related policies in any previously published Policies and Procedures document or agreements. Any changes from the previous year will be highlighted. A current copy of the NC HMIS Policies and Procedures may also be found on the NC HMIS website www.nchmis.org

II. AGREEMENTS, CERTIFICATIONS, LICENSES AND DISCLAIMERS:

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

A. Required Agency Agreements, Certifications and Policies
Participating CHOs or other partners on the NC HMIS project must have the following contracts, agreements, policies and procedures available for review:

1. All CoCs participating on the NC HMIS must sign the **MCAH Memorandum of Understanding** that designates the Michigan Statewide HMIS Vendor and identifies the Michigan Coalition Against Homelessness as the Statewide Lead Agency for administration of the statewide database. (Within national HMIS circles, this document is often called a Joint Governance Charter.) Each jurisdiction will identify a local Lead Agency that coordinates with the Statewide Agency and is responsible for specific tasks. The Charter supports the ability for multiple jurisdictions to participate on a single HMIS information system.
2. All agencies must have the following fully executed documents on file and be in compliance with the policies and directives contained therein:
   a. A **Data Use Agreement/Administrative QSOBAA** governing administrative access to the system.
   b. A **Participation Agreement** governing the basic operating principles 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.
   d. A board certified **Confidentiality Policy** governing the privacy and security standards for the Agency.
   e. A board certified **Grievance Policy** outlining a structured process for resolving complaints or grievances against, or within, the organization.

B. HMIS User Requirements:
All agencies must have the following documents on file for all active users licensed in the NC 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 keep training certificates for active users on file.
   a. All users are required to take full privacy training when they are first licensed, and take privacy update suite of trainings 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 must be available for review.
   b. All users will complete workflow training, related workflow updates and have documentation of the training completion for all programs with which they work. If local CoCs or Agency Administrators have additional training requirements or offerings, they

should have a method for documenting successful completion and have that documentation available at their local agencies for review as needed.

    c. All users are trained in the HUD Data Standards Universal Data Elements and any Program Specific Elements that apply to the programs with which they work. This includes training on both the process for collecting client identifying information, the Homeless Definition and the Chronic Homeless Definition.

C. Agency Administrator Requirements

All agencies participating on the system must have an assigned Agency Administrator.

    1. Agency Administrator Training Requirements - Agency Administrators must complete and maintain documentation of the following:

        a. All trainings required for standard HMIS users on the system.

        b. Provider Page training.

        c. Workflow Training for all workflows used in their agency. This training will be developed by the NC HMIS Project, the funding agency or an agency authorized to train on behalf of the funding agency or NC HMIS.

        d. Reports Training (agency 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. Agency Administrator Participation Requirements – Agency Administrators should participate in the following CoC or agency meetings:

        a. CoC HMIS Agency Administrator meetings and trainings.

        b. Agency specific HMIS user meetings or preside over an HMIS specific topic during routine staff meetings.

        c. A local Reports Committee that reviews and governs the publication of CoC information.

III. PRIVACY:

A. Privacy Statement

NC HMIS is committed to making the 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.
- NC HMIS has systematized the risk assessment related to clients through the standard NC 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.

- NC HMIS 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 NC HMIS system is compliant with HIPAA, and all Federal and State laws and codes. All privacy procedures are designed to ensure that the broadest range of providers may participate in the project.
- Privacy Training is a requirement for all agencies and users on the NC HMIS system.
- Privacy training is an opportunity for all participating organizations to revisit and improve their overall privacy practices. Many agencies choose to have all of their staff complete the NC 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 a NC 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 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. Privacy practice principles around the use and publication of agency or CoC specific data have been developed and included in both the Participation Agreement and this HMIS Policies and Procedures document.
- The NC 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 documentation of activities and ensuring that care is coordinated and messages to clients are reinforced and consistent.
- NC HMIS has incorporated continuous quality improvement training designed to help agency administrators use the information collected in the HMIS to stabilize and improve project processes, measure outcomes, report to funders, and be more competitive in funding requests.

B. Privacy and Security Plan:
All records entered into and downloaded from the HMIS are required to be kept in a confidential and secure manner.

Oversight:
1. All Agency Administrators with support of agency leadership must[1]:
    a. Ensure that all staff using the system complete annual privacy update training. Training must be provided by NC HMIS Certified Trainers and based on the NC 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. These documents should also be audited quarterly to ensure they are compliant with current sharing agreements.

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[1] In lieu of revised Technical Standards, in 2015 the requirement for a privacy officer was removed.   However, the function of data security has been assigned to the Agency Administrator. Reflecting Participation Agreement language, the quarterly review of Provider Visibility has been expressly added to this document.

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 CoC's HMIS Local System Administrator. The System Administrator must investigate the incident and run the applicable audit reports. If the System Administrator determines that a breach has occurred and/or the staff member involved violated privacy or security guidelines, the System Administrator must report the issue immediately to the NC HMIS Project Director and CoC Chair. The Local System Administrator must provide a written description of the breach and a summary of his or her findings to the NC HMIS Project Director and CoC Chair. A Corrective Action Plan will be implemented by the agency and the CoC. 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. All agencies should be aware of the risks associated with any person given access to the system and limit access as necessary. System access levels should be used to support this activity.

3. The Local 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 system and on-site reviews. The Local 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 are not permitted to participate in the NC HMIS project. These providers will maintain a comparable database to respond to grant contracts and reporting requirements.
2. All agencies are required to 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 NC HMIS sample notice or integrate NC HMIS language into their existing notice. All Privacy Notices must define the uses and disclosures of data collected on HMIS including:
   a. The purpose for collection of client information.
   b. A brief description of policies and 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.[2]
   e. The client complaint procedure.

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[2] Language was added to clarify the HIPAA rule.

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 NC HMIS project. All Privacy Policies must include:
   a. Procedures defined in the Agency's 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 minimum:
      i. Closing of the profile search screen so that only the serving agency may see the record.
      ii. The right to refuse sharing 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 by looking at key demographic identifiers in the system.)
      iv. The right to have a record marked as inactive.
      v. The right to remove their client record from the system.
   c. Security of hard copy files: Agencies may create a paper record by printing the assessment screens located within NC 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 use of the system when access is approved from remote locations. The policy must address:
      i. The strict control of the use of portable storage devices with client identifying information.
      ii. The environments where use is approved. These environments cannot be open to public access and all paper and/or electronic records that include client identified information must be secured in locked spaces or be password controlled.
      iii. All browsers used to connect to the system must be secure. If accessing 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 network 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 NC 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. Files cannot be left visible to unauthorized individuals.

7. The agency must provide a **Privacy Script** to all staff charged with explaining privacy rights to clients in order to 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 to 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 must be trained in 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 have been authorized to sign such an agreement by the senior agency's leadership and/or the Agency Board of Directors.

   e. All members of a Sharing QSOBAA must be informed that by sharing, they are creating a common electronic record that can impact data reflected in their reports. Members of the sharing group must 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 must be end-dated and a new Visibility Group must be begun. **A new member may not be added to an existing External Visibility Group.**

9. Agencies must have appropriate **Release(s) of Information** that are consistent with the type of data the agency plans to share.

   a. The agency must have adopted the appropriate NC HMIS Basic Release of Information that is applicable to their sharing practice in order to share basic demographic and transactional information.[3]

   b. If the agency integrates the NC HMIS Release into their existing releases, the release must include the following components:

      i. A brief description of NC HMIS including a summary of the HUD Public Notice.

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[3] Beyond light touch projects that do not collect or share protected data elements, all projects are encouraged to engage their CoC to discuss and implement the 2016 Reciprocal Release of Confidential Information. This release includes a privacy discussion and can be completed one time to include all sharing partners for the specified time limit and purpose.

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 Agency's 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 Agreement[4].

v. Interagency sharing must be accompanied by a negotiated and executed Sharing QSOBAA.

vi. If an agency is subject to stricter privacy laws (ex. 42 CFR Part 2), that only permit external sharing between a subset of their provider pages, all provider pages within that agency that will be sharing must be listed on any Sharing QSOBAAs to which the agency is a party.

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

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

i. Case notes/progress notes

ii. Information or referral for health, mental health, HIV/AIDS, substance use disorders, or domestic violence.

iii. To streamline paper, 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 above in ii.[5]

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

a. Agencies should establish **Internal Sharing** or sharing only between 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.

i. Internal Sharing does not require a signed Client Release of Information unless otherwise specified by law. (However, an electronic release must still be entered into the system to permit Internal Sharing.)

ii. 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).

i. A signed and dated Client Release of Information must be stored in the Client Record (paper or scanned onto the system) for all electronic ROIs that release data between different agencies.

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[4] The change reflects changes in the HIPAA rule that allow for Releases the cover a term – rather than a specific date. The date in the electronic ROI will reflect the specific date defined by the term. The term should not be arbitrary but reflect the anticipated term of the agencies planned coordinating activities.
[5] Recognizes existing practice by participating CoCs.

     ii.   Retroactive Sharing, or sharing historic information between two or more agencies without client consent is not permitted on the system. To prevent retroactive sharing, a new visibility group must be 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. This procedure requires that:
     i.   Consent for obtaining the client's housing history is written into the Outreach Sharing Plan section of the agency's Release of Information, and that the client has agreed to permit this activity by initialing this section.
     ii.   An electronic copy of the signed Release of Information 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 provide privacy notices to clients that are visually or 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. Staff must not discuss client information in the presence of others without a need to know.
  b. Staff must eliminate unique client identifiers before releasing data to the public.
  c. The Agency must configure workspaces for intake that supports the privacy of client interaction and data entry.
  d. User accounts and passwords cannot be shared between users, or visible for others to see.
  e. Project staff must be educated to not save reports with client identifying data on portable media. Agencies must be able to provide evidence of this training through written training procedures or meeting minutes.
  f. Staff must be trained regarding use of email communication, texting, file sharing and other electronic means of transferring data related to client services.
     i.   By-name housing lists may not be printed with client identifying information without obtaining 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 must 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 ensure that:
     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 must be protected by a firewall.

    a. Agency Administrators or designated staff are responsible for monitoring all computers that connect to the HMIS to ensure that:
        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 must be controlled.
    a. All workstations must be in secured locations (locked offices).
    b. Workstations must be logged off when not manned.
    c. All workstations must be 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 NC 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 system audit of which users have touched a client record can be completed by a System Administrator.

IV. DATA BACKUP AND DISASTER RECOVERY PLAN:

The HMIS is a critically important tool in responding to catastrophic events. The NC HMIS 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, NC HMIS can be brought back online within approximately four hours.[6]

A. Backup Details for NC HMIS
See "Bowman Systems Securing Client Data" for a detailed description of data security and Bowman's Disaster Response Plan
1. The NC HMIS Project maintains 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. Regular backups of the application server and regular alignment with the current version of the live NC HMIS site.
    c. Near-instantaneous backups of the NC HMIS database (information is backed up within 5 minutes of entry.)
    d. Additional nightly off site replication for protection in case of a primary data center failure.

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[6] MCAH will update the disaster plan from time to time based on best practice recommendations, lessons learned from actual disasters, and other conditions that may change on the ground.

e. Priority level response that ensures downtime will not exceed 4 hours.

B. NC HMIS Project Disaster Recovery Plan:
In the event of a major system failure:
1. The NC HMIS 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 time lines.
2. Local/assigned System Administrators are responsible for notifying their local agencies and users.
    a. If a failure occurs after normal business hours, NC 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 identification of the failure.
3. The NC HMIS Project Director or designated staff will notify Bowman Systems if additional database services are required.

C. Local HMIS Lead Agencies:
Local HMIS Lead Agencies within CoCs have an obligation to secure and backup key information necessary for the administration and functioning of the NC HMIS Project within their own jurisdiction.

1. NC HMIS Lead Agencies are required to back-up their internal data system nightly.
2. Data back-ups must include a solution for maintaining at least one copy of key internal data off-site for participating agency internal data systems. This location must be secure with controlled access.
3. Local HMIS Lead Agencies must have a disaster recovery plan documented which outlines the policies and procedures for the CoC in case of a major system disaster.
    a. **Agency Emergency Protocols must include:**
        i. Emergency contact information including the names/organizations and numbers of local responders and key internal organization staff, designated representatives of the CoCs, the local HMIS Lead Agency, and the NC HMIS Project Director.
        ii. Delegation of key responsibilities. The plan should outline which persons will be responsible for notification and the timeline of notification.
4. In the event of a local disaster:
    a. NC HMIS in collaboration with the local Lead Agencies will also provide information to local responders as required by law and within best practice guidelines.
5. NC HMIS in collaboration with the local Lead Agencies 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/System Administrator I is key to the success of the CoC. This individual is responsible for overseeing the operation of the NC HMIS project in either a local CoC or a local Planning Body/Jurisdiction. This position will be referred to in this section as a Local System Administrator. The following describes the typical list of responsibilities for a Local System Administrator within a local CoC.

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 their CoC.
3. Reports Training (Local System Administrators are tasked with supporting data quality as well as monitoring outcomes 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 (AHAR, PIT, APR, etc.)

B. Meetings Local System Administrators Are Required to Participate In:
1. Regular CoC Meetings and/or workgroups as determined by the CoC.
2. The CoC Reports Committee or meetings where data use and release is discussed.
3. The Monthly System Administrator Call-In (2nd Tuesday of every Month at 10 am).
4. Regular Agency Administrator/User Meetings within the CoC

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 CoCs they support. This support includes resetting passwords and troubleshooting/problem solving for users and agencies within their CoCs. 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. The HMIS lead staff will be available, on request, to provide advanced technical support if requested by the Local System Administrator/Local CoC.

2. **User and Provider Page Setup**
   a. Local System Administrators will set up new users in NC HMIS, or delegate the task to their Agency Administrators. In the case of delegating this task, they will train Agency Administrators on proper setup of user accounts.

b. Local System Administrators will supervise license allocation for users and agencies within the CoC they serve. When necessary or requested, the Local System Administrator will purchase additional licenses directly for the CoC.

c. The Local System Administrator will work in partnership with agencies and Agency Administrators in the CoC they serve 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 CoC they serve. 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 CoC they serve. These meetings will cover important news on changes in the system, items of local interest within the CoC, and issues identified by the Local System Administrator within the CoC.

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 CoC they serve.

4. **Training**

a. The Local System Administrator will inform Agency Administrators and local users of required and recommended system trainings that are available through the NCHMIS training website.

b. The Local System Administrator will provide localized training to CoC 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 local CoC.

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

a. The Local System Administrator will work directly with CoC leadership to complete CoC wide HUD activities such as the AHAR, PIT/HIC, System Performance Measures and the CoC HUD NOFA submission. The Local System Administrator will also assist the CoC with work surrounding state and local funding initiatives which require data from the HMIS.

b. The Local System Administrator will assist with completing the HMIS APR for the CoC they serve in.

c. The Local System Administrator will provide support/technical assistance for agencies completing the CoC APR within their jurisdiction. This includes providing technical assistance with problem solving data quality issues, reporting issues, etc.

6. **Local CoC Reporting**
   a. The Local System Administrator will be responsible for providing reports to the CoC it serves as the HMIS Lead for, regarding requests made by the local CoC for data. These include, but are not limited to:
      i. CoC 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 AHAR, PIT/HIC, System Performance Measures and the HMIS APR
      iii. General requests for data of interest to the local CoC
      iv. Any additional reporting requirements initiated by HUD that are required of the local CoC.
   b. The Local System Administrator will train local Agency Administrators and users on how to run reports at the agency level for the purpose of monitoring data quality and outcomes on a regular basis in the agencies that it serves.
   c. The Local System Administrator will be responsible for generating reports on activities and expenditures to the local CoC which he or she serves, as directed by the CoC.

7. **CoC/Agency/Project Auditing and Monitoring**
   a. The Local System Administrator will work with the local CoC to establish local HMIS policies and procedures using the system-wide Policies and Procedures document as a frame. The Local System Administrator will work with local CoC leadership and Agency Leadership/Administrators to update this document as needed.
   b. The Local System Administrator, collaborating with the Agency Administrators in the CoC which they serve, will audit agencies and projects to ensure compliance. Audit activities may include, but not be 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 from which they receive funding.
      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.

(Note: Completion of these tasks are the responsibility of both the HMIS Lead (the Local System Administrator) and the agencies which participate on the system in the local CoC. The Local System Administrator can create a policy under which local agencies are responsible for monitoring themselves, and instruct them on application of that policy. The Local System Administrator can then assist agencies with implementing the policy locally to ensure compliance. The HMIS Lead has released a series of tools to help local HMIS Leads with the process of developing compliance tools.)

VI. DATA QUALITY PLAN AND WORKFLOWS:

A. Provider Page Set-Up:

1. Provider Pages are appropriately named per the NC HMIS naming standards **Agency Name – Location (CoC Name) – Project Name – Project Funding Descriptors.**
   For example: The Salvation Army – Guilford CoC – Emergency Shelter Project – ESG. Identification of funding stream is critical to completing required reporting to funding organization.

2. Inactive Provider Pages must be properly identified with "XXX Closed" followed by the year of the last project exit >Provider Page Name. For example, XXXClosed2016. For a detailed description of closing inactive provider pages, see the MCAH Procedure for Closing Inactive HMIS Provider Pages.
   a. All clients in inactive/closed provider pages must be closed. Audit and clean-up of inactive pages includes closing all open services and incomes and exiting all unexited clients.

3. The primary provider contact information must be current and reflect where the services are being delivered.

4. HUD Data Standards must be fully completed on all provider pages:
   a. CoC code must be correctly set. If a project stops functioning in the CoC, the appropriate end date must be added to the CoC Code Entry.
   b. Project type codes must be correctly set.
   c. If a project is an Emergency Shelter, the Method for Tracking Emergency Shelter Utilization field must be correctly set. If a project is not an Emergency Shelter, this field should be left null or "-Select-."
   d. Geocodes must be set correctly.
   e. The Continuum Project field must be properly completed.
   f. If a project is HOPWA, RHY, PATH or SSVF, the Provider Grant Type must be correctly filled out.
   g. Bed and Unit Inventories must be set for applicable residential projects. Bed and Unit Inventories for all projects should be reviewed at least annually, and updated as needed.
   h. Federal Partner Funding Source values should be selected for projects 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 should be "NA."
   i. Assessments with the appropriate 3.917 Living Situation question must be assigned based on Program Type
      i. Emergency Shelter, Street Outreach or Safe Haven projects should use 3.917a assessment.
      ii. All other project types should use the 3.917b assessment.

B. Data Quality Plan:

1. Agencies must require documentation at 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 (3) 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 NC HMIS within 15 days of data collection. If the information is not entered on the same day it is collected, the agency must assure that the date associated with the information is the date on which the data was collected by:

   a. Entering data into the system using the Enter Data As function if needed.

   b. Entering the entry/exit data including the UDEs on the Entry/Exit Tab of ServicePoint or

   c. Backdating the information into the system[7]

3. All staff are required to be trained on the definition of Homelessness.

   a. NC HMIS provides a homeless definition crosswalk and a 3.917 flowchart to support agency level training.

   b. There must be congruity between the following NC HMIS case record responses, based on the applicable homeless definition. Elements to HUD Data Standard Element 3.917a or 3.917b must be properly completed.

4. The agency has a process to ensure the First and Last Names are spelled properly and that the DOB and social security numbers are accurate.

   a. Identification (ID) should be requested at intake to support proper spelling of the client's name, as well as, the recording of the DOB.

   b. If no ID is available, staff should 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 be entered under the "unnamed record" feature of the system. However, while identifiers are not stored using this feature, great care should be taken in creating the unnamed algorithm by carefully entering the first and last name and the DOB. Names and ServicePoint ID number crosswalks (that are required to find the record again) must be maintained off-line in a secure location.

5. Income and non-cash benefits must be updated at least annually and at exit, or at the frequency specified by program requirements.

   a. Annual Reviews will be completed in the 30 days prior to the anniversary of the client's entry into services.

   b. For PH projects with long stays, at the annual review, incomes that are over two years old must be updated by closing the existing income and entering a new income record (even

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[7] Clarification of existing policy.

if the income has not changed). This assures that the income has been confirmed and will pull properly into reports.

    c.   For all other projects, any income(s) no longer available to the client should be closed on the day before intake (if data is shared from another provider), annual review and exit. If the income is over two years old, please follow the procedure defined above. [8]

6.   Agencies must have an organized exit process that includes:

    a.   Educating clients and staff on the importance of planning and communicating regarding discharge destination and outcomes. This must be evidenced through staff meeting minutes or other training logs and records.

    b.   Discharge Destinations must be properly mapped to the HUD Destination Categories.

        i. NC HMIS provides a Destination Definition document to support proper completion of exits. All new staff must have training on this document.

        ii. Projects must have defined processes for collecting this information from as many households as possible.[9]

    c.   There is a procedure for communicating exit information to the person responsible for data entry if not entering real time.

7.   Agency Administrators/staff regularly run data quality reports.

    a.   Report frequency should reflect the volume of data entered into the System. Frequency for funded projects will be governed by Grant Agreements, HUD reporting cycles, and local CoC 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.[10]

    b.   The project entry and exit dates should be recorded for all participants upon project entry and exit. Entry dates should record the first day of service or project entry. A new project entry date is required for each period/episode of service. Exit dates should record the last day of residence before the participant left the shelter/housing project or the last day a service was provided.

    c.   Data quality screening and correction activities must confirm all required data is complete, and should include:

        i.   Correction of missing or inaccurate information in (red) Universal Data Element Fields.

        ii.   Completion of the Relationship to Household assessment questions.

        iii.   Completion of the 3.917 Living Situation series of questions.

        iv.   Completion of the 3.16 Client Location question.

        v. Completion of the Domestic Violence questions.

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[8] 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.

[9] Data indicates that some providers have regressed in completing discharge destination in the last year and accurately completing this field is vitally important to success. Beyond data entry issues, projects must define processes that collect this information from as many households as possible.

[10] Additional detail was added for low volume environments that are required to annually update income and employment.

    vi. Completion of the HUD Verifications for all Income, Non Cash Benefits, Health Insurance and Disability sub-assessments.

    vii. Completion of the Residential move-in-date for all PH: RRH projects.

    viii. Completion of all of the project specific data elements, as required by the various funding sources supporting the project.

  d. Providers must audit unexited clients in the system by using the Length of Stay and unexited Client Data Quality Reports.

8. CoCs and 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 CoC Lead Agency, in collaboration with the CoC Reports Committee or other designated CQI Committee, establishes local benchmark targets for performance improvement on shared measures.

9. Agencies are expected to participate in the CoC's Continuous Quality Improvement Plan. See CQI materials designed to support Data Quality through Continuous Quality Improvement.

C. Workflow Requirements:

1. Provider Page Configuration settings must use the assessments that are appropriate for the funding stream.

2. Users performing data entry must use the latest copies of the workflow guidance documents.

3. If using paper, the intake data collection forms must align correctly with the workflow.

4. 100% of clients must be entered into the system no later than 15 days from the intake date.

5. Agencies must actively monitor project participation and client exits. Clients must be exited within 30 days of last contact, unless project guidelines specify otherwise.

6. All required project information must be collected.

  a. All HMIS participants 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 form.

VII. RESEARCH AND ELECTRONIC DATA EXCHANGES

A. Electronic Data Exchanges:

1. Agencies electing to either import or export data from the NC HMIS must assure:

  a. **Data Import** - The quality of the data being loaded onto the System meets all 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 NC 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 or your local CoC 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 potential identifying information such as the name, Unique Client ID, SS#, DOB, address, agency name, and agency location.
   b. 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. CoCs will be provided a description of each study being implemented. Agencies or CoCs may opt out of the study through a written notice to MCAH or the study owner.

3. MSHDA/ MCAH or your local CoC 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 provided a description of each study being implemented. Agencies may opt out of the study through a written notice to MCAH or the study owner.

APPENDIX A: DOCUMENT CHECKLIST FOR NC HMIS AGENCIES[11]

All agencies that participate on the NC 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 MCAH Memorandum of Understanding:** (Only the HMIS and/or CoC Lead Agency is required to maintain this document.)

☐ **HMIS Policies and Procedures Document for the CoC:** (Only the HMIS and/or CoC Lead Agency are required to maintain this document. It must have been formally approved by the CoC as evidenced by CoC 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). 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:** (As approved by Agency's Board of Directors)

☐ **Grievance Policy:** (As approved by Agency's Board of Directors)

NC 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 NC 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 NC HMIS trainings completed by active users are to be kept in the NC HMIS binder. These trainings must be certified by either MCAH, a certified MCAH trainer, other identified statewide trainers or CoC identified trainers for CoC 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 the notice to address agency needs.

☐ **Agency Privacy Policy:** Agencies can adopt the sample MCAH Policy or customize the policy to address agency needs.

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[11] The previous Appendix A, has been removed due to a full revamping of the MCAH training protocol and documentation storage functionality on our website. MCAH will be releasing an updated version of this document as a real time tool during the HUD FY 2016.

- ❑ **Current Agency Privacy Script:** Developed and approved by agency leadership. The policy should be based on a current version of the CoC or Agency Release of Information.
- ❑ **Current Agency Release of Information:** Must specify all sharing partners and the sharing outreach plan, as applicable.