

BOSTON CONTINUUM OF CARE  
LEADERSHIP COUNCIL MEETING AGENDA  
August 16<sup>th</sup> , 2017, 2017 3:00- 4:30PM  
Bill Buckley Conference Room, 26 Court St., 11<sup>th</sup> Floor

Agenda Items

1. Welcome & Introductions
  
2. CoC 2017 Competition Katie
  - New PH Bonus and Reallocation Update
  - Renewal Project Applications
  - Narrative Insight & Assistance
  
3. Review & Action: Jen
  - Proposed Charter Language Updates
  
4. Boston's Way Home Laila
  - Challenges and Opportunities
  - Planning Grant Brainstorm
  
5. Next Meeting: September

Potential dates:

- 9/6 @ 3 PM (joint meeting of LC & CH LC) or come earlier for LC
- 9/7 @ 3PM
- 9/12 @ 3 PM

- Review Projects to be included in Application
- Deadline for notice of inclusion: 9/13/17



## FY17 Boston CoC New Project Scoring Tool

Criteria Topic	Scored Criteria	Criteria Source	Pass/Fail	Notes
<b>Project Quality Threshold Criteria</b>	Project will serve eligible populations. For PSH: 100% of households will be chronically homeless and/or DedicatedPLUS For RRH: 100% of households will be coming from streets or emergency shelters, or fleeing DV (category #4), or in a TH project that is being eliminated in FY17, in a joint TH-RRH project, or receiving services through a VA program and meet one of the above	Project application		
	Is the project cost-effective, with such costs not deviating substantially from the norm in that locale for the type of structure or kind of activity	Project application		
	Does the project applicant provide reasonable assurances that the project will meet the requirements: CAS/CES participation; Housing First/Low Barrier Housing; Documented and secured minimum match; applicant is active in CoC; application is complete and data is consistent; bed/unit utilization rate will be at or above 95%; acceptable organization audit/financial review, documented financial stability of appliance agency	Project application		
	If applicant is seeking to fund a new project with either PH Bonus Funds or through Reallocation, did they submit a project application in accordance with the publicly advertised Request for Proposals	Project application		
If project does not score "pass" in ALL of the above criteria- the project application does not meet minimum CoC and HUD threshold for funding and is not eligible for inclusion in the Boston CoC 2017 application to HUD.				

Criteria Topic	Scored Criteria	Criteria Source	Points	Score
<b>Agency Past Performance</b>	1. The proposal demonstrates successful experience working with the eligible target population(s)	project application	5 pts: yes 0 pts: no	
	2. The proposal demonstrates successful experience working with HUD funded projects including: leasing units, administering rental assistance, providing supportive services, and utilizing HMIS, as applicable to the proposed project	project application	10 pts: yes 0 pts: no	
	3. The agency has past experience operating similar types of programs and services, working with the subpopulation, and achieving 80% participants maintain PH housing for at least 12 months or from exiting RRH or TH, program provides evidence participants achieve increased income	project application, agency CoC program portfolio	10 pts: yes 0 pts: no If agency does not have CoC funds award	
	4. Linkages and collaborations with other resources and providers are leveraged and discussed (evidenced by signed MOUs, contracts)	project application	2 pts: yes 0 pts: no	
	5. Agency has given back a project/funds/subsidies to serve homeless households to DND without a budget management plan, in the last 5 years	DND monitoring and portfolio	5 pts: no 0 pts: yes	
<b>Program Design</b>	6. The project will practice a Housing First/Low Barriers model	project application	10 pts: yes 0 pts: no	
	7. The proposal describes a management plan and reasonable plan for effective and timely start up of the proposed activities	project application	5 pts: yes 0 pts: no	
	7a. If RRH, PSH or Joint TH-RRH the proposal describes how the sponsor will manage housing search challenges and quick identification and lease up of	project application	5 pts: yes 0 pt: no	

	hard units for clients. Proposal references existing relationships with property owners, managers, existing units leased by sponsor, PBVs, etc.			
	8. The proposed staffing level is adequate to support the project (i.e. for RRH, 1 FTE to max. 30 households; for CH 1 FTE for 15 - 20 households)	project application	2 pts: yes 0 pts: no	
	9. The proposal includes performance measurements related to housing stability: a) The proposal describes how participants will be assisted to obtain and remain in permanent housing for at least 12 months (if PSH program) b) The proposal describes how participants will be assisted to obtain permanent housing upon exiting a RRH program (RRH program or Joint TH-RRH)	project application	4 pts: yes 0 pts: no	
	10. The proposal includes performance measurements related to how participants will be assisted to increase both their employment, access to mainstream resources and/or non-employment income and maximize their ability to live independently	project application	4 pts: yes 0 pts: no	
<b>Subpopulations proposed to serve</b>	11a. The proposal describes a viable plan for conducting outreach to identify and enroll chronically homeless program participants <b>(for PSH proposals)</b>	project application	3 pts: yes 0 pts: no	
	11b. The proposal describes a viable plan for conducting outreach to identify and enroll homeless households living in on the street or in emergency shelter <b>(for RRH proposals)</b>	project application	3 pts: yes 0 pts: no	
	12. Other sub-populations priorities: *Veterans	project application	1 pt for each sub-population	

	<ul style="list-style-type: none"> <li>* Chronically homeless</li> <li>* Families</li> <li>* Youth</li> <li>* DV</li> </ul>			
<b>Fiscal Planning and Agency Performance</b>	13. The project shows a diverse mix of funding or primary reliance on CoC Program (supportive services, leasing, rental assistance etc.)	project application	10 pts: mix of funding 5 pts: reliance of CoC funds	
	14. The project demonstrates cost effectiveness; use industry standards for matrix= families \$4,000 per year, CH program 1 csmgr per 17 clients, RRH 1 csmgr per 40 - 50 clients per year	project application	3 pts: Within range 0 pts: Not in range	
	15. Funds requested are reasonable in relationship to stated goals and objectives (review if costs and direct assistance seem too high or too low to achieve proposed outcomes)	project application	4 pts: yes 0 pts: no	
	16. Sponsor/applicant provides match commitments totaling 25% of the HUD funding requested (minus leasing dollars) and demonstrates effective use of the match resources	project application	3 pts: yes 0 pts: no	
	17. Project will participate in the CoC CAS system	project application	2 pts: yes 0 pts: no	
	18. Agency audit A-133 or supplement external audit has no major findings/"low risk"	project application, agency CoC program portfolio	2 pts: yes 0 pts: no	
<b>CoC Needs/Gaps Analysis</b>	19. The proposed project fills a need or gap in the existing homeless assistance system and is not duplicative of other mainstream resources	project application	2 pts: yes 0 pts: no	

	<p>20. The proposed project has made a convincing rationale, backed by data and/or a CoC needs analysis, that the project will address identified system gaps, thereby furthering HUD and CoC goals of ending homelessness for the target population to be served</p>	<p>project application</p>	<p>2 pts: yes 0 pts: no</p>	
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The reviewer may assign partial points to each question if proposal semi/partially addressed question/scoring criteria. The maximum points total available is 100.





**Q. 1C-5**

All

**Describe the actions your agency has taken to: (1) address the needs of Lesbian, Gay, Bisexual, Transgender (LGBT) individuals and their families experiencing homelessness, (2) conduct regular training with staff and partnering agencies on how to effectively implement the Equal Access to Housing in HUD Programs Regardless of Sexual Orientation or Gender Identity, including Gender Identify Equal Access to Housing, Final Rule; and (3) implementation of an anti-discrimination policy.**

Please provide DND with any shelter or program policies that demonstrate how your agency is addressing the needs of the LGBT community experiencing homelessness and steps that have been taken to effectively implement the Equal Access Final Rule.

**Q3B 2-4**

Family and Couples

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

Please provide DND with any shelter or program policies that demonstrate how your agency is taking steps to avoid familial or care giver separation in placements.

**Q3A-5**

All

**Describe: (1) the strategies that have been implemented to increase access to employment and mainstream benefits; (2) how the CoC program-funded projects have been assisted to implement the strategies; (3) how your agency is working with mainstream employment organizations to help individuals and families increase their cash income; and (4) the organization or position that is responsible for overseeing the CoC's strategy to increase job and income growth from employment, non-employment including mainstream benefits.**

Please describe the strategies your agency is utilizing to increase access to employment & mainstream benefits and how you're using these strategies in your CoC – funded programs.

All

**CoC program funded projects must be able to demonstrate they supplement CoC Program funds from other public and private resources, including: (1) how your agency works with mainstream programs that assist homeless program participants in applying for and receiving**

**mainstream benefits; (2) how the CoC systematically keeps program staff up-to-date regarding mainstream resources available for homeless program participants (e.g. Food Stamps, SSI, TANF, substance abuse programs); and (3) identify the organization or position that is responsible for overseeing the CoCs strategy for mainstream benefits.**

**Q 1C-3**

**DV providers**

**CoCs must demonstrate the local efforts to address the unique needs of persons, and their families, fleeing domestic violence that includes access to housing and services that prioritizes safety and confidentiality of program participants.**

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

Please provide information on state resources, trainings, protocols that DV shelters abide by to ensure safety and confidentiality of participants. Reference any statistics or data that are used to assess community need related to DV.

**Q 3B2.2**

**Family Providers**

**Need Info from DHCD re: Homebase (# of Boston families), MBHP / HomeStart (diversion)**

**Describe: (1) the CoCs current strategy and timeframe for rapidly rehousing every household of families with children within 30 days of becoming homeless.**

## **ARTICLE I. - Mission**

The mission of the City of Boston's Leadership Council is to oversee, through innovation and initiatives, the reduction of family and individual homelessness in the City of Boston.

The Leadership Council will carry this mission out through the following efforts:

- Prioritization of both new and renewal projects funded through the US Department of Housing and Urban Development's Continuum of Care Program
- Leadership to leverage and prioritize the effective use of Public/Private resources
- Oversight of implementation efforts of the *Boston's Way Home: An Action Plan to End Veteran and Chronic Homelessness in Boston*
- Policy Making and Advocacy on issues of concern to Boston's homeless families and individuals
- Oversight of the City of Boston's Continuum of Care accomplishing all responsibilities specified by HUD's Continuum of Care Program
- Setting performance targets for all Continuum of Care and ESG funded programs based on the Strategic Planning Objectives in the CoC application and the City homeless plan
- Oversight of monitoring of all CoC and ESG funded programs
- Oversight and Planning of City Initiatives and innovative pilots

## **ARTICLE II. – Collaborative Applicant and Unified Funding Agency**

Section 1. The Leadership Council designates the City of Boston's Department of Neighborhood Development as both the Collaborative Applicant and the Unified Funding Agency representing the City of Boston's Continuum of Care. The Department of Neighborhood Development is responsible for conducting the duties and responsibilities of both the Collaborative Applicant (24 CFR 578.9) and the Unified Funding Agency (24 CFR 578.11) outlined in the US Department of Urban Development's Continuum of Care Program Regulation as codified in 24 CFR 578.

## **ARTICLE III. - Membership**

Section 1. **Leadership Board Membership.** The City of Boston's Leadership Council is the decision-making body of Boston's Continuum of Care. The Leadership Council's representation consists of a broad representation from city agencies, service providers, philanthropic organizations, housing developers, faith-based groups, and consumers. The Leadership Council's composition is discussed in Articles III and IV.

Section 3. **Continuum of Care Membership.** The City of Boston's Continuum of Care membership is open to all interested parties from the Boston's geographic area involved in ending homelessness through the City of Boston. Members will be invited to join the CoC through a publically advertised open invitation process through solicitation of participation in the Consolidated Planning process (Con Plan

planning process includes CoC, ESG and HOPWA funds), and public solicitation of funding opportunities for CoC, ESG and HOPWA. Members can request to be added to the CoC membership by contacting DND, the CoC lead agency. The Leadership Council seeks Continuum of Care representation from the following stakeholders: non-profit and for profit entities such as; non-profit homeless assistance providers, victim service providers, faith-based organizations, governments, businesses, advocates, public housing agencies, school districts, social service providers, mental health agencies, hospitals, universities, affordable housing developers, law enforcement, and organizations that serve veterans and formerly homeless individuals.

#### **ARTICLE IV. – Leadership Council Officers**

**Section 1. Officers and Duties.** The officers shall be 2 Co-Chairs (with staggered terms) and a Secretary. These officers shall perform the duties prescribed by the Governance Charter. The Co-Chairs shall be responsible for chairing and convening all meetings and the Executive Committee. One Co-Chair shall be a member and represent homeless service providers and one Co-Chair shall be a member and represent public or private entities. Working with DND staff, the Secretary shall assure that minutes are taken and distributed for all meetings and be responsible for keeping the attendance records of the Leadership Council.

**Section 2. Nomination.** Any Leadership Council member may nominate a fellow member for a vacant officer position. A nomination must be seconded by one additional Leadership Council member. The member must serve actively on the Leadership Council for a minimum on one year in order to be nominated for an officer position.

**Section 3. Elections and Terms of Office.** The Leadership Council members shall elect all officers through a quorum vote as constituted in the Governance Charter. Co-Chairs shall serve for a two year staggered term. Co-Chairs shall serve up to two consecutive terms. The Secretary shall serve for a two year term and can serve consecutive terms with no limit.

**Section 4. Vacancies.** A vacancy in any office shall be filled by following the nomination and approval process described in Section 2.

**Section 5. Executive Committee.** The Executive Committee is comprised of the two Co-Chairpersons and the Secretary. All three individuals must be present to represent a quorum of the Executive Committee. The Co-Chairs shall be given the authority to convene a meeting of the Executive Committee in order for decisions/votes to be executed when time limits convening the full Leadership Council.

#### **ARTICLE V. – Leadership Council Composition/Structure**

**Section 1. Leadership Council Composition.** The Leadership Council will be comprised of 19 members – the 3 Council Officers and 16 additional members. The Leadership Council members will represent the following groups:

- City of Boston – Department of Neighborhood Development, Boston Public Health Commission, Boston Public Housing Authority (3 members)

- Commonwealth of Massachusetts – Department of Housing and Community Development (1 member)
- Homeless Services Provider Representatives (Individual, Family, Veteran) (9 members)
- Homeless Advocacy (2 member)
- Faith-Based Community (1 member)
- Philanthropy Community (1 member)
- Private Business/Housing Development (1 member)
- Homeless or Formerly Homeless Individual (1 member)

Section 2. **Leadership Board Nomination/Selection.** Based on the composition goals described above, the City of Boston’s Department of Neighborhood Development (DND) staff will identify, screen, and recommend a slate of individuals to the Mayor of the City of Boston. The Mayor will review and approve an individual from the slate of nominees for membership on the Leadership Council. The terms of membership will be for three years. There are no term limits for general membership on the Leadership Council. A homeless service provider agency is limited to one individual representative on the Council at any given time. As a condition of membership on the Council, a homeless service provider representative must agree to be named and carry out the responsibilities of a Workgroup Chairperson. All other Leadership Council members must agree to actively participate on at least one of the Workgroups.

Section 3. **Removal/Vacancies.** Leadership Council members may be removed from office by the Mayor of the City of Boston. A Leadership Council member shall resign their membership on the Council by providing written notice to the Mayor as well as the Leadership Council. DND staff will work to fill the Council vacancy by providing a slate of nominees to the Mayor at the earliest possible time.

Section 3. **Leadership Council Duties and Responsibilities.** The Leadership Council will be responsible for the following duties:

***Strategic Planning***

- Leadership to leverage and prioritize the effective use of Public/Private resources
- Oversight of implementation efforts of the Boston’s Way Home Homeless Plan
- Policy Making and Advocacy on issues of concern to Boston’s homeless families and individuals
- Oversight and Planning of City Initiatives and innovative pilots

***Continuum of Care Oversight and Operation***

- Prioritization of both new and renewal projects funded through the US Department of Housing and Urban Development’s Continuum of Care Program
- Operation of the Continuum of Care in accordance with HUD’s Continuum of Care Regulations
- Oversight of the City of Boston’s Homeless Management Information System (HMIS)
- Oversight of the City of Boston’s Coordinated Access System (CAS)
- Oversight of implementation of Continuum-wide Coordinated Entry System
- Conduct of Continuum of Care Planning in accordance with HUD’s Continuum of Care Regulations

**ARTICLE VI. - Meetings**

**Section 1. Leadership Council Meetings.** The Leadership Council shall meet regularly on a quarterly basis in order to conduct business. The Leadership Council shall formally meet no less than four times per year. Meeting information and tentative agendas shall be noticed to the Leadership Council membership at least one week in advance of the meeting. Special meetings of the Leadership Council may be called with three (3) days notice by the Co-Chairs.

**Section 2. Workgroup Meetings.** Each of the CoC Workgroups shall meet at a minimum of two times per quarter in order to conduct needed business. Supported by DND Staff, the Workgroup Chairperson will be responsible for coordinating the conduct of these meetings, providing adequate notice to workgroup members prior to the meeting, and providing periodic updates/report to the Leadership Council on progress of the workgroup.

**Section 3. Semi-Annual CoC Meeting.** The City of Boston's Continuum of Care shall hold at a minimum of two CoC Meetings per year. Meeting information and tentative agendas will be posted to all CoC membership as well as posted on Boston's Department of Neighborhood Development website at least one week in advance. DND Staff is responsible for taking notes and properly documenting these CoC General meetings.

## **ARTICLE VII. – Workgroup Structure and Responsibilities**

**Section 1. Workgroups' Composition/Responsibilities.** The membership of the Workgroups will be comprised of experienced leaders in the field. Within its mission and mandate provided by the Leadership Council, the workgroup will be responsible for: identifying the full range of services and providers; identifying barriers for consumers; identifying gaps and duplications; establishing goals for streamline offering and removing barriers that support the Leadership Council's goals; identifying state, City, and non-profit level system changes necessary to achieve the Leadership Council's mission; and developing a work plan to share with the Leadership Council and related workgroups.

**Section 2. Workgroups' Mission Statement.** The mission of each workgroup is as follows:

**Chronically Homeless Individuals Workgroup:** Create housing plans for all chronically homeless individuals on Boston's by-name chronic list and coordinate resources to ensure chronically homeless individuals stabilize in permanent housing.

**Chronically Homeless Individuals Leadership Team:** Create goals and overall plan for reducing chronic homelessness through increasing permanent housing access, reducing reliance on shelter, streamlining consumer access to housing and benefits, removing regulatory barriers, increasing income potential and diverting and preventing individuals from becoming chronically homeless.

**Homeless Youth Workgroup:** Create goals and overall plan for reducing youth homelessness through increasing permanent housing access, reducing reliance on shelter, streamlining consumer access to housing and benefits, removing regulatory barriers, increasing household income, and preventing youth

from becoming homeless. Work shall be informed with input from the Youth Leadership Council and the Boston Youth Advisory Board (YAB).

**Homeless Veterans Workgroup:** Create housing plans for all homeless Veterans on Boston's by-name Veteran list and coordinate resources to ensure homeless Veterans stabilize in permanent housing.

**Homeless Veterans Leadership Team:** Create goals and overall plan for reducing Veteran homelessness through increasing permanent housing access, reducing reliance on shelter, streamlining consumer access to housing and benefits, removing regulatory barriers through both the federal and State service systems for Veterans, increasing household income, and preventing Veterans from becoming homeless.

**HMIS and Data Analysis Workgroup:** Focus on developing a unified data collection and reporting system addressing provider/agency barriers to participating in uniform data collection, reporting changes, technical assistance needs, and goals for network reporting.

**Coordinated Access Workgroup:** Implement Coordinated Access to connect individuals experiencing homelessness to the most appropriate housing resource. This group is charged with standardizing referrals and eligibility for Permanent Supportive Housing and Rapid Rehousing, maximizing utilization of resources, and streamlining process to accessing housing through technology. Coordinated Access and Front Door Triage together form Boston's Coordinated Entry system.

**Front Door Triage Workgroup:** Develop a unified triage response for individuals first entering the homeless system. The triage will provide a differential response based on vulnerability and individual need. Coordinated Access and Front Door Triage together form Boston's Coordinated Entry system.

**Family Stability Pilot:** The Commonwealth, City of Boston, Boston Public Schools, and various Boston-based agencies team up to provide housing units for homeless families in Boston Public Schools, and to deliver and/or direct these families to additional supports.

**Rapid Re-Housing Workgroup:** Align the rapid rehousing programs in Boston and develop a system that moves homeless individuals into housing as quickly as possible by expanding availability, accessibility, and appeal of Rapid Rehousing.

**Income Expansion and Coordination Committee:** Increase income for persons experiencing homelessness. To do this, the group develops and streamlines connections to mainstream employment and benefits as well as specialized employment and benefits.

**Landlord Engagement Workgroup:** Engage landlords and property owners in building an inventory of available units for homeless individuals to rent in and around Boston.

**Permanent Supportive Housing Workgroup:** Expedite creation of affordable housing paired with tenant support services targeted to chronically homeless households. This group works to address funding and other production barriers, increase access to services tied to affordable housing developments, develop the "Moving On" program, and other issues.

Section 3. **Special Workgroups.** As the situation or need arises, the Leadership Council may form a special workgroup to address an emerging planning need or requirement within the CoC. The Leadership Council will provide a mission to the workgroup and a mandate to come back to the Council with specific recommendations. The special workgroups' mandate will typically be on a time limited basis.

Section 4. **Workgroup Chairperson Responsibilities.** The Workgroup Chairperson will be responsible for recruitment and outreach to build and maintain workgroup membership. The Workgroup Chairperson will also seek feedback from a broad base of relevant partners including agencies not represented in the workgroup membership.

#### **ARTICLE VIII. – Leadership Council Voting**

Section 1. **Motions.** Each item requiring Leadership Council approval will be formally voted upon. A Leadership Council member will make a motion. The motion will be seconded by a fellow Leadership Council member and a full vote will be taken. The Leadership Council's meeting minutes will reflect the motion, the second and the outcome of the formal vote including the number of "yeas" and "nays". Each Leadership member in attendance present for the meeting will be entitled to one vote. All votes are determined by a majority of voting members present.

For unanticipated motions, a vote may be tabled and warned for action at the next Leadership Council meeting upon request by any Leadership Council member.

Section 2. **Quorum.** Fifty percent or more of the Leadership Council Members present shall constitute a quorum.

#### **ARTICLE IX. - Conflict of Interest**

Section 1. Leadership Council member may not participate in or influence discussions or resulting decisions concerning the award of a grant or other financial benefits to the organization that the member represents.

Section 2. The Leadership Council member shall recuse themselves from all discussions or voting that is or perceived to be an organizational conflict of interest. Per the US Department of Housing and Urban Development Continuum of Care Regulations (24 CFR 578.95), an organizational conflict of interest arises when, because of activities or relationships with other persons or organizations, the recipient or sub-recipient is unable or potentially unable to render impartial assistance in the provision of any type or amount of assistance under HUD's Continuum of Care Program, objectivity in performing work with respect to any activity assisted under this part is or might be otherwise impaired.

Section 3. Leadership Council members who work for a service provider agency in direct service to consumers are not eligible to review or vote on which programs receive funding through HUD's Continuum of Care Program. This policy applies whether or not an agency currently receives funding through HUD's Continuum of Care Program.



## **ARTICLE X. - Homeless Management Information System (HMIS) and Coordinated Access System (CAS)**

### **Section 1. Background**

HMIS is mandated by the U.S. Department of Housing and Urban Development (HUD) for all communities and agencies receiving HUD Continuum of Care (CoC) homeless assistance funds. HMIS is essential to efforts to streamline client services and inform public policy. Through HMIS, homeless persons benefit from improved coordination in and between agencies, informed advocacy efforts, and policies that result in targeted services. Analysis of information gathered through HMIS is critical to the preparation of a periodic accounting of homelessness in the City of Boston, which may include measuring the extent and nature of homelessness, the utilization of services and homeless programs over time, and the effectiveness of homeless programs. Such an unduplicated accounting of homelessness is necessary to service and systems planning, effective resource allocation, and advocacy.

The continuum of care system components includes prevention, emergency shelter, transitional housing, permanent affordable and permanent supportive housing, supportive services at each stage, specialized programs and outreach for each homeless subpopulations, and integration with “mainstream” programs. HMIS will enable homeless service providers to collect uniform client information over time. Analysis of information gathered through HMIS is critical to accurately calculate the size, characteristics, and needs of the homeless population; these data are necessary to service and systems planning, and advocacy.

### **Section 2. Specific Responsibilities of the Parties**

1. The City of Boston’s Department of Neighborhood Development shall act as the lead HMIS and CAS Governance Body and HMIS and CAS Lead Agency, providing oversight, project direction, policy setting, and guidance for the project in accordance with 24 CFR 578.7. The Boston CoC HMIS Data Warehouse is the designated HMIS of the CoC in accordance with the 24 CFR 578.7 (b)(1). The Boston CoC also provides licenses to ETO Software for use as a front end HMIS, however to be considered an HMIS Contributing Organization, data must be uploaded to the Boston CoC HMIS Data Warehouse at least monthly. In consultation with the Leadership Council, the HMIS and CAS Lead has developed and will update annually or as needed, all policies, procedures, roles and responsibilities in regards to the maintenance, operations and oversight of the HMIS and CAS Systems. These responsibilities include:

- 1) **General Responsibilities**
  - a. Responsible for ensuring and monitoring compliance with the HUD HMIS Standards.
  - b. Designating the software to be used for HMIS
  - c. Conducting outreach to and encouraging participation by all homeless assistance programs and other mainstream programs serving homeless people.
  - d. Developing and approving all HMIS operational agreements, policies, and procedures.
  - e. Working to inform elected officials, government agencies, the nonprofit community, and the public about the role and importance of HMIS and HMIS data.
  - f. Guiding data quality and reporting.

- g. Promoting the effective use of HMIS data, including measuring the extent and nature of homelessness, the utilization of services and homeless programs over time, and the effectiveness of homeless programs.
  - h. Provide all local information as necessary for compilation of the Continuum of Care Point in Time Count (PIT), Housing Inventory Chart (HIC), System Performance Measures (SPM) and the Annual Homeless Assessment Report (AHAR).
  - i. Serving as the liaison with HUD regarding the HUD HMIS grant.
  - j. Serving as the liaison with the software vendor.
  - k. Providing overall staffing for the project.
  - l. Participating in the success of HMIS.
  - m. Complying with HUD HMIS Standards (currently the 2016 HMIS Data 5.0 Manual and including anticipated changes to the HMIS Standards as of 10/1/2017 to version 1.2) and all other applicable laws.
  - n. Assisting with the completion of the HUD CoC Supportive Housing NOFA Exhibit 1
  - o. Annually prepare the HUD CoC Supportive Housing NOFA application for HMIS funding.
- 2) Project Management and System Administration
- a. Selecting and procuring server hardware.
  - b. Arranging hosting and executing the hosting facility agreement.
  - c. Providing domain registration.
  - d. Procuring server software and licenses.
  - e. Providing and managing end user licenses (per terms of grant agreement with HUD).
  - f. Creating project forms and documentation.
  - g. Providing and maintaining the project website.
  - h. Preparing project policies and procedures and monitoring and ensuring compliance of Agencies
  - i. Responsible for success of the HMIS project, including data, software vendor contract and licensing, security arrangements, Partner Agency MOUs, and contractor agreements.
  - j. Obtaining and maintaining signed Partner Agency MOUs.
- 3) System Security and Maintenance
- a. Server security, configuration, and availability
  - b. Setup and maintenance of hardware
  - c. Installation and maintenance of software
  - d. Configuration of network and security layers
  - e. Anti-virus protection for server configuration
  - f. System backup and disaster recovery
  - g. Taking all steps needed to secure the system against breaches of security and system crashes.
  - h. Ensuring system uptime and monitoring system performance.
  - i. Protecting of confidential data (in compliance with HUD Standards, local privacy policies, and other applicable law), and abiding by any restrictions clients have placed on their own data.
  - j. Developing and implementing security and confidentiality plans if required by the revised HUD HMIS Standards.
- 4) Administering HMIS end users including:
- a. Add and remove partner agency technical administrators
  - b. Manage user licenses

5) Training:

a. Provide all training and user guidance needed to ensure appropriate system use, data entry, data reporting, and data security and confidentiality, including:

- a. Training documentation
- b. Confidentiality and Intake/Exit Forms training
- c. Application training for agency administrators and end users
- d. Outreach to users/end user support
- e. Training timetable
- f. Helpdesk

6) Data Quality:

- a. Ensuring all client and homeless program data are collected in adherence to the HUD HMIS Data Standards and local additional requirements thereto.
- b. Customizing the HMIS application to meet local data requirements.
- c. Monitoring data quality, generating agency exceptions reports
- d. Ensuring data quality.
- e. Preparing and implementing a data quality plan if required by the revised HUD HMIS Standards.
- f. Carrying out aggregate data extraction and reporting including the HMIS data needed for an unduplicated accounting of homelessness, including the Point in Time and Street count.
- g. Assist partner agencies with agency-specific data collection and reporting needs, such as the Annual Progress Report and program reports (within reason and within constraints of budget and other duties).

7) Centralized or Coordinated Assessment System (CAS):

- a. Establish and Operate a coordinated assessment system that provides an initial, comprehensive assessment of the needs of the individual or family for housing and services.
- b. Develop a specific policy on how the system will address the needs of individuals and families who are fleeing or attempting to flee, domestic violence, dating violence, sexual assault or stalking but who are seeking services from a non-victim service provider.
- c. Develop policies and procedures for the overall CAS that address:
  - i. Prioritization
  - ii. Low Barrier
  - iii. Housing First Oriented
  - iv. Person-Centered
  - v. Fair and Equal Access
  - vi. Emergency Services
  - vii. Standardized Access and Assessment
  - viii. Inclusive
  - ix. Referral to projects
  - x. Referral Protocols
  - xi. Outreach
  - xii. Ongoing Planning and Stakeholder Consultation
  - xiii. Informing local planning
  - xiv. Leverage local attributes and capacity
  - xv. Safety Planning

- xvi. Use of HMIS and other system for Coordinated Access
- xvii. Full Coverage

8) The Continuum has established the following prioritization for all CoC Program funded PSH for individuals and families. These priorities have been established because solving homelessness for the City's most vulnerable people, who have the longest time spent in homelessness and the most severe service needs, will enhance the City's goal of quickly transitioning homeless persons to permanent supportive housing and ultimately eradicating homelessness.

The following established and implemented *Order of Priority* for dedicated and prioritized PSH beds will ensure that those persons with the longest histories residing in places not meant for human habitation, emergency shelters, and in safe havens and with the most severe service needs are given first priority. The CoC identifies and verifies prioritization status (both with length of time homeless and severity of needs) through data driven methods which include an administrative data match and process that is documented in the participant's files.

***1. Prioritizing chronically homeless persons in CoC Program-funded PSH beds dedicated or prioritized for occupancy by persons experiencing chronic homelessness***

- a. First Priority- Households who are chronically homeless and; are the most vulnerable individuals and families who have the **longest history of homelessness** living in places not meant of human habitation, a safe haven, or an emergency shelter **AND** who have the **most severe service needs**
- b. Second Priority- Chronic/long-term homeless households; who have the **longest history of homelessness**
- c. Third Priority- Chronically homeless households who present with the **most severe services needs**
- d. Fourth Priority- All other chronically homeless households

Through CAS- the majority of CoC-funded PSH units will be available for CH households until the CoC ends chronic homelessness. In very limited cases (typically when the units have additional funder statutorily regulated specific target populations i.e. HIV/AIDS) the non-dedicated and non-prioritized units will follow this order of priority:

***2. Prioritizing homeless persons in CoC Program-funded PSH beds not dedicated or not prioritized for occupancy by persons experiencing chronic homelessness***

- a. First Priority- Homeless households with a disability with long periods of episodic homelessness and severe service needs
- b. Second Priority- Homeless households with a disability with severe service needs
- c. Third Priority- Homeless households with a disability coming from places not meant for human habitation, safe havens, emergency shelters without severe service needs
- d. Fourth Priority- Homeless households with a disability coming from transitional housing

9) DND as the HMIS and CAS Lead will maintain compliance with all HUD requirements current and future in accordance with 24 CFR 5787.7 (a)(5)

### **Section 3. Satisfactory Assurances Regarding Confidentiality and Security**

DND shall receive from Human Services client information that may be subject to the privacy and security protections and requirements of HUD HMIS Standards, HIPAA Privacy Rule, other law, and local HMIS privacy and security policies and procedures. DND shall use protected client information only for purposes permitted by agreement with Human Services and as permitted by the applicable law and Standards. Further, DND shall use of all safeguards required by HUD Privacy Standards, HIPAA Privacy Rule, where appropriate, other law, and local HMIS privacy and security policies and procedures in order to prevent any unauthorized disclosure of protected client information.

### **ARTICLE XI. - Amendments**

These Standing Rules may be amended or repealed at any Leadership Council meeting by a two-thirds vote of the Leadership Council provided there is a quorum.

### **ARTICLE XII. - Non-Discrimination**

It is the policy of the City of Boston CoC Leadership Council that no person shall be discriminated against because of their race, sex, age, marital status, religious creed, color, national origin, disability, sexual orientation, or because they have minor children, or receive public assistance. The CoC Leadership Council shall be operated in an open and democratic fashion and shall not discriminate against anyone because they are a member of one of the above groups.

**Last Updated:** August 14, 2017

**Voted and Approved by Leadership Council on:** August 16, 2017

