Before Starting the CoC Application

The CoC Consolidated Application consists of three parts, the CoC Application, the CoC Priority Listing, and all the CoC's project applications that were either approved and ranked, or rejected. All three must be submitted for the CoC Consolidated Application to be considered complete.

 The Collaborative Applicant is responsible for reviewing the following:

 1. The FY 2018 CoC Program Competition Notice of Funding Available (NOFA) for specific application and program requirements.
 2. The FY 2018 CoC Application Detailed Instructions which provide additional information and guidance for completing the application.
 3. All information provided to ensure it is correct and current.
 4. Responses provided by project applicants in their Project Applications.
 5. The application to ensure all documentation, including attachment are provided.
 6. Questions marked with an asterisk (*), which are mandatory and require a response.

1A. Continuum of Care (CoC) Identification

Instructions:

For guidance on completing this application, please reference the   FY 2018 CoC Application Detailed Instructions and the FY 2018 CoC Program Competition NOFA.   Please submit technical questions to the   HUD Exchange Ask A Question.

1A-1. CoC Name and Number: UT-504 - Provo/Mountainland CoC

1A-2. Collaborative Applicant Name: United Way of Utah County

1A-3. CoC Designation: CA

1A-4. HMIS Lead: Department of Workforce Services, State of Utah

1B. Continuum of Care (CoC) Engagement

Instructions:

For guidance on completing this application, please reference the FY 2018 CoC Application Detailed Instructions and the FY 2018 CoC Program Competition NOFA.   Please submit technical questions to the   HUD Exchange Ask A Question.

1B-1. CoC Meeting Participants. For the period from May 1, 2017 to April 30, 2018, using the list below, applicant must: (1) select organizations and persons that participate in CoC meetings; and (2) indicate whether the organizations and persons vote, including selecting CoC Board members.

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

Other:(limit 50 characters)		

By selecting "other" you must identify what "other" is.

1B-1a. Applicants must describe the specific strategy the CoC uses to solicit and consider opinions from organizations and/or persons that have an interest in preventing or ending homelessness.
(limit 2,000 characters)

The Mountainland CoC has representation from each county of its geography. We increase participation through phone calls, in-person meetings, and electronic communication. We routinely reach out to agencies with any expertise in homelessness to meet our local needs. The CoC has organized subcommittees to allow for participation by local stakeholders and service providers. Each CoC member is assigned to a subcommittee, depending on their expertise. Committees range from discharge planning, PIT, by-name supportive services, youth and education, housing solutions, rank and review, and community relations. These groups meet regularly from bi-weekly to quarterly. The CoC also maintains a presence on social media, posting on Facebook or Twitter at least once a week and updating our website as needed. This allows for immediate feedback about needs in the region and publicity about events, grants, and other happenings.

1B-2.Open Invitation for New Members. Applicants must describe:
 (1) the invitation process;
 (2) how the CoC communicates the invitation process to solicit new members;
(3) how often the CoC solicits new members; and
(4) any special outreach the CoC conducted to ensure persons experiencing homelessness or formerly homeless persons are encouraged to join the CoC.
(limit 2,000 characters)

1. The Mountainland CoC regularly recruits through our stakeholders, community partnerships, and service providers. 2. Potential members are solicited primarily through their contact with CoC members and staff or through contact through our website, social media, or e-newsletters. 3. New members are typically included every few months, and attend an orientation with CoC staff and engage in monthly CoC meetings. New members are voted on during CoC meetings and encouraged to participate in subcommittees. Our most recent inclusion is Mountainland Aging & Family Services. 4. Mountainland is committed to a diverse representation in our membership and also includes formerly homeless individuals as consultants on our subcommittees, specifically our by-name supportive services subcommittee.

1B-3.Public Notification for Proposals from Organizations Not Previously Funded. Applicants must describe how the CoC notified the public that it

will accept and consider proposals from organizations that have not previously received CoC Program funding, even if the CoC is not applying for new projects in FY 2018, and the response must include the date(s) the CoC publicly announced it was open to proposals.
(limit 2,000 characters)

Mountainlands posted a public RFP on their website and social media accounts on June 25th, 2018 and sent a mass email to the entire CoC membership the same day. The RFP was also posted on a nonprofit association newsletter on July 26th, 2018. The announcement also included a timeline with dates, deadlines, requirements, the rank and review process, and an invitation for all interested homeless service providers to attend a new project orientation on July 16th, 2018. Any agency expressing interest in submitting a new project received one-on-one technical support from the collaborative applicant about project development and eligibility. Five entities expressed interest in developing a new project, two of which were not previously funded. Ultimately, two of the five agencies submitted new projects, all of which were ranked for funding in tier one, tier two, or bonus project funding.

1C. Continuum of Care (CoC) Coordination

Instructions:

For guidance on completing this application, please reference the FY 2018 CoC Application Detailed Instructions and the FY 2018 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

1C-1. CoCs Coordination, Planning, and Operation of Projects. Applicants must use the chart below to identify the federal, state, local, private, and other organizations that serve individuals, families, unaccompanied youth, persons who are fleeing domestic violence who are experiencing homelessness, or those at risk of homelessness that are included in the CoCs coordination, planning, and operation of projects.

Entities or Organizations the CoC coordinates planning and operation of projects	Coordinates with Planning and Operation of Projects
Housing Opportunities for Persons with AIDS (HOPWA)	Yes
Temporary Assistance for Needy Families (TANF)	Yes
Runaway and Homeless Youth (RHY)	Yes
Head Start Program	Yes
Funding Collaboratives	Yes
Private Foundations	Yes
Housing and services programs funded through U.S. Department of Justice (DOJ) Funded Housing and Service Programs	Yes
Housing and services programs funded through U.S. Health and Human Services (HHS) Funded Housing and Service Programs	Yes
Housing and service programs funded through other Federal resources	Yes
Housing and services programs funded through State Government	Yes
Housing and services programs funded through Local Government	Yes
Housing and service programs funded through private entities, including foundations	Yes
Other:(limit 50 characters)	

1C-2. CoC Consultation with ESG Program Recipients. Applicants must describe how the CoC:
(1) consulted with ESG Program recipients in planning and allocating ESG funds; and
(2) participated in the evaluating and reporting performance of ESG Program recipients and subrecipients.
(limit 2,000 characters)

1.   The Mountainland CoC leadership formally participated in ESG allocation and presented on funding priorities during the funding reviews. The Mountainland CoC lead and executive committee was heavily involved in the rank and review process of state-wide applicants for ESG funding, and was

given an opportunity to demonstrate the funding needs and priorities during the allocation process. Additionally, CoC leadership offered one-on-one technical support for any agencies applying for ESG funding to ensure that the CoC priorities were adequately and strategically represented. 2. CoC staff work with all agencies receiving ESG funding to ensure that they are in compliance with all of the policies and procedures of the CoC and that they are meeting the terms of their ESG funding. Additionally, the CoC lead will be accompanying ESG program monitors as projects are evaluated at each funded agency. The CoC lead works in partnership with the ESG program to make sure that all of the funding recipients are prepared for their monitoring and compliance visits.

1C-2a. Providing PIT and HIC Data to Consolidated Plan Jurisdictions. Did the CoC provide Point-in-Time (PIT) and Housing Inventory Count (HIC) data to the Consolidated Plan jurisdictions within its geographic area?   Yes to both

1C-2b. Providing Other Data to Consolidated Plan Jurisdictions. Did the CoC provide local homelessness information other than PIT and HIC data to the jurisdiction(s) Consolidated Plan(s)?   Yes

1C-3. Addressing the Safety Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors. Applicants must describe:
(1) the CoC's protocols, including the existence of the CoC's emergency transfer plan, that prioritizes safety and trauma-informed, victim-centered services to prioritize safety; and
(2) how the CoC maximizes client choice for housing and services while ensuring safety and confidentiality.
(limit 2,000 characters)

1.   The Mountainland CoC prioritizes safe placement for anyone fleeing domestic violence. This includes the adoption of a state-wide emergency transfer policy. This emergency transfer plan includes trauma-informed, victim-centered services to prioritize a client's safety and maximizes client choice. 2. The Housing Authority of Utah County and Provo City Housing) both give top priority to survivors of domestic violence for their Section 8 housing services. Peace House and the Center for Women and Children in Crisis have worked for several years with our local Community Action Center to develop and disseminate a grant for housing support for survivors of dating and domestic violence, sexual assault, and stalking. The Center for Women and Children in Crisis and the Housing Authority of Utah County have also been working for several years to develop grant funding to acquire housing specifically for single survivors of violence who frequently have a harder time obtaining affordable housing in the community. Many other collaborative grants and initiatives among these Continuum of Care partners bring our support agencies together in meaningful ways to address these important issues.

1C-3a. Applicants must describe how the CoC coordinates with victim services providers to provide annual training to CoC area projects and Coordinated Entry staff that addresses best practices in serving survivors of domestic violence, dating violence, sexual assault, and stalking. (limit 2,000 characters)

The Mountainland COC coordinates with the two domestic violence providers in our CoC, as well as the Utah Domestic Violence Coalition to provide annual training to all CoC members and Coordinated Entry staff to address best practices in serving survivors.   Many of our local Continuum agencies have entered into a written memorandum of understanding to participate in a collaborative effort to develop a concerted approach to better serve the needs of survivors of sexual assault, domestic violence, dating violence, and stalking within the Utah County region; work together to improve communication among the involved parties as well as with other related organizations and those that may choose to join the collaborative in the future; maintain policies and procedures that: 1) support confidentiality related to internal care of client records and that are designed to prevent sharing of confidential victim information with outside organizations and/or individuals without the documented consent of the survivor, and then only when the sharing of such information has a clear and demonstrable benefit to the victim; and 2) promote and encourage ongoing safety planning for victims of abuse (if appropriate), and that otherwise promote physical safety measures for victims; develop policies inclusive of age, immigration status, race, religion, sexual orientation, mental health condition, physical health condition, criminal record, or work in the sex industry; and work collaboratively to inform victims about services available from community services, programs, and resources.

1C-3b. Applicants must describe the data the CoC uses to assess the scope of community needs related to domestic violence, dating violence, sexual assault, and stalking, including data from a comparable database. (limit 2,000 characters)

The Mountainland CoC relies primarily on data recorded in quarterly sheltered PIT counts, and data from the two domestic violence service providers in our geographical region to inform policies regarding the scope of community need. Additionally, both of our domestic violence providers keep HMIS-comparable databases identifying individuals who are assessed due to domestic violence, dating violence, sexual assault, and stalking. Our domestic violence service providers participate heavily in CoC and subcommittees, including the local Coordinated Support Services committee, which meets twice a month, where they advocate for the needs of their clients and coordinate services of clients who have given permission to participate in this process, while still protecting their anonymity. The shelters maintain a close contact and a strong collaborative relationship with Continuum of Care members and other organizations in the community in order to share relative data, coordinate with other homeless and related services, and better respond to the needs of our clients and the community. Both agencies utilize the coordinated assessment tools such as the SPDAT as a part of their assessment process to the extent that it is acceptable to their clients. This enables them to leverage the resources of many organizations in behalf of their clients to maximize the benefit of these resources for their clients and avoid duplication of services.

1C-4. DV Bonus Projects. Is your CoC Yes
applying for DV Bonus Projects?

1C-4a. From the list, applicants must indicate the type(s) of DV Bonus project(s) that project applicants are applying for which the CoC is including in its Priority Listing.

SSO Coordinated Entry	
RRH	
Joint TH/RRH	X

1C-4b. Applicants must describe:
(1) how many domestic violence survivors the CoC is currently serving in the CoC's geographic area;
(2) the data source the CoC used for the calculations; and
(3) how the CoC collected the data.
(limit 2,000 characters)

The CWCIC provides services to approximately 300 survivors of domestic violence annually in their emergency shelter, about 20 survivors in their transitional housing units annually, with another 500-600 survivors through out-of-shelter services throughout their service region. Peace House provided services last year to 262 unduplicated individuals. 2. Data was collected through the Center for Women and Children in Crisis, Peace House, and the Utah Domestic Violence Coalition. 3. Data was collected through contacts at the two domestic violence shelters.

1C-4c. Applicants must describe:
(1) how many domestic violence survivors need housing or services in the CoC's geographic area;
(2) data source the CoC used for the calculations; and
(3) how the CoC collected the data.
(limit 2,000 characters)

1.   Last year, 504 clients (273 households) were turned away from the Center for Women and Children in Crisis, due to lack of available beds. Additionally, another 700-800 survivors of domestic violence in our geographical region are assisted annually by local law enforcement victim advocates without entering the shelter system. 2. This data was provided by the Utah State Domestic Violence Coalition and the Center for Women and Children in Crisis' internal turn-away records, as well as local law enforcement victim advocates. 3. The CoC partners with the Utah State Domestic Violence Coalition for training in trauma-informed care, confidentiality, and our emergency transfer plan.   Part of their role in our Continuum is to help provide data to inform our CoC policies and training

1C-4d. Based on questions 1C-4b. and 1C-4c., applicant must:

(1) describe the unmet need for housing and services for DV survivors, or if the CoC is applying for an SSO-CE project, describe how the current Coordinated Entry is inadequate to address the needs of DV survivors;
(2) quantify the unmet need for housing and services for DV survivors;
(3) describe the data source the CoC used to quantify the unmet need for housing and services for DV survivors; and
(4) describe how the CoC determined the unmet need for housing and services for DV survivors.
(limit 3,000 characters)

1.   In the last year, we have documented 504 survivors of domestic violence whose needs for housing went unmet. Law enforcement victim advocates also estimate that another 700-800 survivors were not connected with domestic violence services. The CWCIC provides services to approximately 300 survivors of domestic violence annually in their emergency shelter and about 20 survivors in their transitional housing units annually. Another 500-600 survivors are assisted with out-of-shelter services throughout their service region. The Center for Women and Children in Crisis has a 25 bed capacity, This critical disparity will be alleviated in part by this new RRH program. 2. Of the roughly 800 individuals who contacted the Center for Women and Children in Crisis for emergency shelter last year, approximately 62.5% went without services due to lack of capacity. 3. The data source used to quantify the unmet need for emergency shelter alone were provided by internal records at the Center for Women and Children in Crisis. 4. The CoC determined unmet need for housing by the number of individuals who contacted the domestic violence shelter in need of emergency shelter but who were turned away because of lack of beds.

1C-4e. Applicants must describe how the DV Bonus project(s) being applied for will address the unmet needs of domestic violence survivors. (limit 2,000 characters)

The Utah State Domestic Violence Coalition has determined that the shortage of domestic violence sheltering in Utah and Juab Counties is extremely critical. While the combined population of Utah and Juab Counties is apx. 617,675 and growing, CWCIC's only shelter with 25 beds, is inadequate. Last year, 504 clients (273 households) were turned away for lack of shelter space. This critical disparity will be alleviated in part by this new RRH program.

1C-4f. Applicants must address the capacity of each project applicant applying for DV bonus projects to implement a DV Bonus project by describing:
(1) rate of housing placement of DV survivors;
(2) rate of housing retention of DV survivors;
(3) improvements in safety of DV survivors; and
(4) how the project applicant addresses multiple barriers faced by DV survivors.
(limit 4,000 characters)

1.   The Center for Woman and Children in Crisis currently has a housing placement rate of 68% of successful exits to permanent housing, with an additional 11% leaving the program to stay temporarily with family or friends. 2. Of the survivors exiting to permanent housing, only 3% return to an emergency shelter situation. 3. The Center for Women and Children in Crisis is a driving

force in the training procedures offered by the CoC with regards to survivor privacy, safety, and confidentiality. Additionally, they utilize the Campbell Lethality Assessment to inform prioritization, and participate in a unique pre-screen mechanism in HMIS that creates VAWA appropriate client-level data. 4. The proposed domestic violence bonus project advocates a multifaceted approach to the unique barriers and challenges faced by DV survivors. Not only does the proposed project tackle the issue of housing, but proposes additional supportive services and additional financial support once an individual or family is placed in housing. Extensive research demonstrates that support services are essential to helping this homeless population to become independent and self-sustaining, and this project is a balance of necessary RRH resources with minimal supportive services.

1C-5. PHAs within CoC. Applicants must use the chart to provide information about each Public Housing Agency (PHA) in the CoC's geographic areas:
(1) Identify the percentage of new admissions to the Public Housing or Housing Choice Voucher (HCV) Programs in the PHA who were experiencing homelessness at the time of admission;
(2) Indicate whether the PHA has a homeless admission preference in its Public Housing and/or HCV Program; and
(3) Indicate whether the CoC has a move on strategy. The information should be for Federal Fiscal Year 2017.

Public Housing Agency Name	% New Admissions into Public Housing and Housing Choice Voucher Program during FY 2017 who were experiencing homelessness at entry	PHA has General or Limited Homeless Preference	PHA has a Preference for current PSH program participants no longer needing intensive supportive services, e.g. move on?
Provo City Housing Authority	33.00%	Yes-Both	Yes
Housing Authority of Utah County	7.00%	Yes-Both	Yes

If you select "Yes--Public Housing," "Yes--HCV," or "Yes--Both" for "PHA has general or limited homeless preference," you must attach documentation of the preference from the PHA in order to receive credit.

1C-5a. For each PHA where there is not a homeless admission preference in their written policy, applicants must identify the steps the CoC has taken to encourage the PHA to adopt such a policy.
(limit 2,000 characters)

N/A

1C-5b. Move On Strategy with Affordable Housing Providers. Does the CoC have a Move On strategy with affordable housing providers in its jurisdiction (e.g., multifamily Yes

assisted housing owners, PHAs, Low Income Tax Credit (LIHTC) developments, or local low-income housing programs)?

> **Move On strategy description.**
> **(limit 2,000 characters)**

The Mountainland CoC has a move-on strategy where clients who are in good standing with their PSH vouchers are transferred to a regular section 8 voucher in order to move-on higher functioning individuals who have no longer need that level of support, opening up space for individuals who would not succeed in a housing program without additional wraparound support.

1C-6. Addressing the Needs of Lesbian, Gay, Bisexual, Transgender (LGBT). Applicants must describe the actions the CoC has taken to address the needs of Lesbian, Gay, Bisexual, and Transgender individuals and their families experiencing homelessness.
(limit 2,000 characters)

The Mountainland CoC is committed to providing services to all those in need, regardless of race, gender, sexual orientation, or sexual identity. All of our CoC members have undergone training in Fair Housing and antidiscrimination. In partnership with Equality Utah, an LGBTQ rights agency, we have implanted annual training on the CoC level and case management level to better serve the needs of homeless LGBT individuals. This included training on using inclusive (non-binary) language for entry to shelter, transitional housing, and other housing resources. Our continuum's policies and procedures around coordinated entry follow the Equal Access Final Ruling by providing training to entry level staff at each CoC member agency to provide a safe and culturally competent approach. On September 11th, 2017, the Mountainland CoC formally adopted an antidiscrimination policy with a grievance process for any agency violating tenets of the Equal Access ruling.

1C-6a. Anti-Discrimination Policy and Training. Applicants must indicate if the CoC implemented a CoC-wide anti-discrimination policy and conducted CoC-wide anti-discrimination training on the Equal Access Final Rule and the Gender Identity Final Rule.

1. Did the CoC implement a CoC-wide anti-discrimination policy that applies to all projects regardless of funding source?	Yes
2. Did the CoC conduct annual CoC-wide training with providers on how to effectively implement the Equal Access to Housing in HUD Programs Regardless of Sexual Orientation or Gender Identity (Equal Access Final Rule)?	Yes
3. Did the CoC conduct annual CoC-wide training with providers on how to effectively implement Equal Access to Housing in HUD Programs in Accordance with an Individual's Gender Identity (Gender Identity Final Rule)?	Yes

1C-7. Criminalization of Homelessness. Applicants must select the specific strategies the CoC implemented to prevent the criminalization of homelessness in the CoC's geographic area. Select all that apply.

Engaged/educated local policymakers:	

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

**1C-8. Centralized or Coordinated Assessment System. Applicants must:
 (1) demonstrate the coordinated entry system covers the entire CoC geographic area;
(2) demonstrate the coordinated entry system reaches people who are least likely to apply homelessness assistance in the absence of special outreach;
 (3) demonstrate the assessment process prioritizes people most in need of assistance and ensures they receive assistance in a timely manner; and
(4) attach CoC's standard assessment tool.
(limit 2,000 characters)**

1. The Mountainland CoC utilizes a standard coordinated entry system across the entire geographic area. The CoC has chosen to use the VI-SPDAT and SPDAT, as recommended by the state of Utah. Every point of entry into the homeless system utilizes the same coordinated entry system, from street outreach workers, to domestic violence services providers, to PSH programs.
2. Due to our widespread coverage at all points of entry, the coordinated entry process reaches both individuals who are less likely to engage in services as well as individuals who are frequent service users. The CoC strongly supports coordinated entry and prioritizing services for the most vulnerable in our community, and member agencies are continually exploring new ways to reach those who are less likely to engage in services. Our Coordinated Support Services committee (by-name list committee) meets twice a month to discuss the needs of individuals on our prioritized list, as well as individuals who have not yet engaged with service agencies but have been recognized as homeless in our community. Members of the CSS committee are specifically assigned to engage with these individuals and complete a coordinated entry assessment to smooth the path for services. 3. Our CSS committee regularly meets to discuss individuals by name who have been assessed at a higher vulnerability. The committee prioritizes individuals who have scored a 40+ on the SPDAT, a 12+ on the VISPDAT, or are identified as veterans, chronically homeless, or homeless youth. This ensures that those most vulnerable receive priority assistance with PSH, mental health services, addiction services, or other

services as needed. This also allows member agencies to provide wrap-around services for the most vulnerable, as we coordinate around a specific individual's unique needs.

1D. Continuum of Care (CoC) Discharge Planning

Instructions:

For guidance on completing this application, please reference the FY 2018 CoC Application Detailed Instructions and the FY 2018 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

1D-1. Discharge Planning–State and Local. Applicants must indicate whether the CoC has a discharge policy to ensure persons discharged from the systems of care listed are not discharged directly to the streets, emergency shelters, or other homeless assistance programs. Check all that apply (note that when "None:" is selected no other system of care should be selected).

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

1D-2. Discharge Planning Coordination. Applicants must indicate whether the CoC actively coordinates with the systems of care listed to ensure persons who have resided in them longer than 90 days are not discharged directly to the streets, emergency shelters, or other homeless assistance programs. Check all that apply (note that when "None:" is selected no other system of care should be selected).

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

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

Instructions

For guidance on completing this application, please reference the   FY 2018 CoC Application Detailed Instructions and the FY 2018 CoC Program Competition NOFA.   Please submit technical questions to the   HUD Exchange Ask A Question.

1E-1. Project Ranking and Selection. Applicants must indicate whether the CoC used the following to rank and select project applications for the FY 2018 CoC Program Competition:
(1) objective criteria;
(2) at least one factor related to achieving positive housing outcomes;
(3) a specific method for evaluating projects submitted by victim services providers; and
(4) attach evidence that supports the process selected.

Used Objective Criteria for Review, Rating, Ranking and Section	Yes
Included at least one factor related to achieving positive housing outcomes	Yes
Included a specific method for evaluating projects submitted by victim service providers	Yes

1E-2. Severity of Needs and Vulnerabilities. Applicants must describe:
(1) the specific severity of needs and vulnerabilities the CoC considered when reviewing, ranking, and rating projects; and
(2) how the CoC takes severity of needs and vulnerabilities into account during the review, rating, and ranking process.
(limit 2,000 characters)

1.   The Rank and Review Committee prioritized projects that served vulnerable subpopulations, including the chronically homeless, domestic violence victims, veterans, youth, and homeless families with children. Projects were also prioritized that showed successful outcomes, actively used SPDAT scores to serve individuals, and demonstrated a capacity to operate with low barriers. 2. During the selection process, the committee reviewed the applications for demonstrated commitment to housing first or low-barrier criteria for our vulnerable subpopulations. Capacity was assessed by program model, demonstrated wrap-around service partnerships, participation in coordinated entry and assessment, eligibility verification, and subpopulation priority.   PSH projects serving the chronically homeless were given priority, as well as projects serving clients primarily with disabilities, zero income, or high SPDAT scores.

1E-3. Public Postings. Applicants must indicate how the CoC made

public:
(1) objective ranking and selection process the CoC used for all projects (new and renewal);
(2) CoC Consolidated Application–including the CoC Application, Priority Listings, and all projects accepted and ranked or rejected, which HUD required CoCs to post to their websites, or partners websites, at least 2 days before the CoC Program Competition application submission deadline; and
(3) attach documentation demonstrating the objective ranking, rating, and selections process and the final version of the completed CoC Consolidated Application, including the CoC Application with attachments, Priority Listing with reallocation forms and all project applications that were accepted and ranked, or rejected (new and renewal) was made publicly available, that legibly displays the date the CoC publicly posted the documents.

Public Posting of Objective Ranking and Selection Process		Public Posting of CoC Consolidated Application including: CoC Application, Priority Listings, Project Listings	
CoC or other Website	☐	CoC or other Website	☐
Email	☐	Email	☐
Mail	☐	Mail	☐
Advertising in Local Newspaper(s)	☐	Advertising in Local Newspaper(s)	☐
Advertising on Radio or Television	☐	Advertising on Radio or Television	☐
Social Media (Twitter, Facebook, etc.)	☐	Social Media (Twitter, Facebook, etc.)	☐

1E-4. Reallocation. Applicants must indicate whether the CoC has cumulatively reallocated at least 20 percent of the CoC's ARD between the FY 2014 and FY 2018 CoC Program Competitions.

Reallocation: No

1E-4a. If the answer is "No" to question 1E-4, applicants must describe how the CoC actively reviews performance of existing CoC Program-funded projects to determine the viability of reallocating to create new high performing projects.
(limit 2,000 characters)

The CoC actively encourages new and existing providers to apply for new projects through reallocation. The CoC actively reviews performance of existing CoC Program-funded projects annually during our monitoring process to make sure that each project is in compliance with mandatory policies and procedures, on track with regard to drawdowns, and meeting their stated project goals at the time of application.

The Rank and Review committee may review funds from renewal projects for reallocation if renewal projects have:
•Low bed utilization rates
•A history of returning high percentages of project funds (=15%) to HUD
•A history of serving ineligible clients
•Underperformed on APR goals without reasonable cause (indicated in

monitoring reports)
•Continue to manage project models that are low priority for the CoC and/or HUD

1E-5. Local CoC Competition. Applicants must indicate whether the CoC: (1) established a deadline for project applications that was no later than 30 days before the FY 2018 CoC Program Competition Application deadline–attachment required; (2) rejected or reduced project application(s)–attachment required; and (3) notify applicants that their project application(s) were being rejected or reduced, in writing, outside of e-snaps, at least 15 days before FY 2018 CoC Program Competition Application deadline–attachment required. :

(1) Did the CoC establish a deadline for project applications that was no later than 30 days before the FY 2018 CoC Program Competition Application deadline? Attachment required.	Yes
(2) If the CoC rejected or reduced project application(s), did the CoC notify applicants that their project application(s) were being rejected or reduced, in writing, outside of e-snaps, at least 15 days before FY 2018 CoC Program Competition Application deadline? Attachment required.	Yes
(3) Did the CoC notify applicants that their applications were accepted and ranked on the Priority Listing in writing outside of e-snaps, at least 15 before days of the FY 2018 CoC Program Competition Application deadline?	Yes

2A. Homeless Management Information System (HMIS) Implementation

Intructions:

For guidance on completing this application, please reference the FY 2018 CoC Application Detailed Instructions and the FY 2018 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

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

2A-1a. Applicants must: (1) provide the page number(s) where the roles and responsibilities of the CoC and HMIS Lead can be found in the attached document(s) referenced in 2A-1, and (2) indicate the document type attached for question 2A-1 that includes roles and responsibilities of the CoC and HMIS Lead (e.g., Governance Charter, MOU/MOA).
pages 3-5 of the MOU

2A-2. HMIS Policy and Procedures Manual. Does your CoC have a HMIS Policy and Procedures Manual? Attachment Required.
Yes

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

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

**2A-5. Bed Coverage Rate. Using 2018 HIC and HMIS data, applicants must report by project type:
(1) total number of beds in 2018 HIC;
(2) total beds dedicated for DV in the 2018 HIC; and**

(3) total number of beds in HMIS.

Project Type	Total Beds in 2018 HIC	Total Beds in HIC Dedicated for DV	Total Beds in HMIS	HMIS Bed Coverage Rate
Emergency Shelter (ES) beds	97	36	61	100.00%
Safe Haven (SH) beds	0	0	0	
Transitional Housing (TH) beds	64	26	38	100.00%
Rapid Re-Housing (RRH) beds	117	0	117	100.00%
Permanent Supportive Housing (PSH) beds	200	8	192	100.00%
Other Permanent Housing (OPH) beds	2	0	2	100.00%

**2A-5a. To receive partial credit, if the bed coverage rate is 84.99 percent or lower for any of the project types in question 2A-5., applicants must provide clear steps on how the CoC intends to increase this percentage for each project type over the next 12 months.
(limit 2,000 characters)**

N/A

2A-6. AHAR Shells Submission: How many 2017 Annual Housing Assessment Report (AHAR) tables shells did HUD accept? 12

2A-7. CoC Data Submission in HDX. Applicants must enter the date the CoC submitted the 2018 Housing Inventory Count (HIC) data into the Homelessness Data Exchange (HDX). (mm/dd/yyyy) 04/30/2018

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

Instructions:

For guidance on completing this application, please reference the   FY 2018 CoC Application Detailed Instructions and the FY 2018 CoC Program Competition NOFA.   Please submit technical questions to the   HUD Exchange Ask A Question.

2B-1. PIT Count Date. Applicants must enter the date the CoC conducted its 2018 PIT count (mm/dd/yyyy).   01/24/2018

2B-2. HDX Submission Date. Applicants must enter the date the CoC submitted its PIT count data in HDX (mm/dd/yyyy).   04/30/2018

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

Instructions:

For guidance on completing this application, please reference the FY 2018 CoC Application Detailed Instructions and the FY 2018 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

2C-1. Change in Sheltered PIT Count Implementation. Applicants must describe any change in the CoC's sheltered PIT count implementation, including methodology and data quality changes from 2017 to 2018. Specifically, how those changes impacted the CoC's sheltered PIT count results.
(limit 2,000 characters)

In the past, our CoC only reported as chronic homeless those individuals whose chronic status could be confirmed in HMIS. However, after reviewing this practice, we concluded that reporting all individuals who self-reported as chronic the night of PIT better represented all our chronically homeless population. This change partially explains our higher chronically homeless number on this year's PIT.

2C-2. Did your CoC change its provider coverage in the 2018 sheltered count? No

2C-2a. If "Yes" was selected in 2C-2, applicants must enter the number of beds that were added or removed in the 2018 sheltered PIT count.

Beds Added:	0
Beds Removed:	0
Total:	0

2C-3. Presidentially Declared Disaster Changes to Sheltered PIT Count. Did your CoC add or remove emergency shelter, transitional housing, or Safe Haven inventory because of funding specific to a Presidentially declared disaster, resulting in a change to the CoC's 2018 sheltered PIT count? No

2C-3a. If "Yes" was selected for question 2C-3, applicants must enter the number of beds that were added or removed in 2018 because of a Presidentially declared disaster.

Beds Added:	0
Beds Removed:	0
Total:	0

2C-4. Changes in Unsheltered PIT Count Implementation. Did your CoC change its unsheltered PIT count implementation, including methodology and data quality changes from 2017 to 2018? If your CoC did not conduct and unsheltered PIT count in 2018, select Not Applicable.   Yes

2C-4a. If "Yes" was selected for question 2C-4, applicants must:
 (1) describe any change in the CoC's unsheltered PIT count implementation, including methodology and data quality changes from 2017 to 2018; and
 (2) specify how those changes impacted the CoC's unsheltered PIT count results.
(limit 2,000 characters)

1. In the past, our CoC only reported as chronic homeless those individuals whose chronic status could be confirmed in HMIS. However, after reviewing this practice, we concluded that reporting all individuals who self-reported as chronic the night of PIT better represented all our chronically homeless population. 2. This change partially explains our higher chronically homeless number on this year's PIT.

2C-5. Identifying Youth Experiencing Homelessness in 2018 PIT Count. Did your CoC implement specific measures to identify youth experiencing homelessness in its 2018 PIT count?   Yes

2C-5a. If "Yes" was selected for question 2C-5., applicants must describe:
 (1) how stakeholders serving youth experiencing homelessness were engaged during the planning process;
 (2) how the CoC worked with stakeholders to select locations where youth experiencing homelessness are most likely to be identified; and
 (3) how the CoC involved youth experiencing homelessness in counting during the 2018 PIT count.
(limit 2,000 characters)

1. Members of the PIT committee consulted with the education subcommittee of the CoC and local homeless liaisons for schedule districts in our region in order to reach all homeless youth in the area. 2. Information provided from our stakeholders was used to determine the specific areas of coverage during the last PIT count. The Department of Child and Family Services was also involved to complete surveys for homeless youth encountered during the day. 3. Member agencies of our CoC who work with homeless youth consulted with clients in their services to help provide the CoC with a list of hot spots to

contact.

2C-6. 2018 PIT Implementation. Applicants must describe actions the CoC implemented in its 2018 PIT count to better count:
(1) individuals and families experiencing chronic homelessness;
(2) families with children experiencing homelessness; and
(3) Veterans experiencing homelessness.
(limit 2,000 characters)

1.   PIT planning began early in Fall 2017, and included service providers and formerly homeless individuals. Mental Health Outreach worked with the local police department to create a "hot spots" list of known locations of chronically homeless individuals who have been in our community for some time. Experienced case workers and mental health outreach workers canvassed this particular subset of our list, believing (correctly) that some of the most ill or vulnerable in our community would be more willing to talk to a familiar face. Additionally, we enlisted a local church to sponsor an overnight "movie night" and spread the word through our homeless community. They allowed our survey team to come in and administer surveys to individuals who were staying overnight in the church. This allowed us to canvas many people who normally cannot be found for PIT.
2.   Our RRH service providers and school liaisons helped provide insight on what locations might have homeless families with children. We also utilized the expertise of Wasatch Mental Health street outreach teams and local law enforcement to search for homeless families. Community Action Services and Food Bank and the Food and Care Coalition also assisted by administering surveys to families who came in during PIT for day services.
3.   We added a survey volunteer from the Utah Valley Veterans Council who directed a team to specific locations of veterans he was working with, and helped administer surveys all three mornings of PIT. He provided valuable insight because many of the veterans who work with him and the council do not engage with other service providers.

3A. Continuum of Care (CoC) System Performance

Instructions

For guidance on completing this application, please reference the FY 2018 CoC Application Detailed Instructions and the FY 2018 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

3A-1. First Time Homeless as Reported in HDX. In the box below, applicants must report the number of first-time homeless as reported in HDX.

Number of First Time Homeless as Reported in HDX.	1,110

3A-1a. Applicants must:
(1) describe how the CoC determined which risk factors the CoC uses to identify persons becoming homeless for the first time;
(2) describe the CoC's strategy to address individuals and families at risk of becoming homeless; and
(3) provide the name of the organization or position title that is responsible for overseeing the CoC's strategy to reduce the number of individuals and families experiencing homelessness for the first time. (limit 2,000 characters)

1.   The Mountainland CoC engages with local assistance programs and 211 to reach precariously housed individuals and families, and to identify trends in characteristics leading to first-time homeless experiences. These risk factors are addressed by CoC planners and providers and include victimization, rental history, landlord relationships, habitability of housing, language/cultural barriers, lease violations, inability to pay rent, illegal evictions, discrimination, substance abuse, mental illness, institutional history, lack of support network, aging out of foster care, and jail or hospital discharge. 2. The CoC is committed to expanding our use of diversion to assist in keeping people from experiencing first-time homeless. Front-door contact agency staff from CoC agencies, such as 211 and intake workers are being utilized in a strategic CoC plan to coordinate our diversion efforts. Ongoing training has commenced regarding diversion strategy best-practices nationwide. The Mountainland CoC staff have reached out to other communities nationwide who are successfully implementing diversion, particularly through 211, to help develop our community strategies. The CoC also offers services and education to help mitigate risk factors such as landlord engagement and mediation, landlord outreach and services education, tenant rights and responsibilities classes, homeless prevention rental assistance, and outreach through social services, churches, hospitals, schools, and employers. Additionally, the CoC in partnership with Provo City created a Housing First Fund to be utilized for diversion, rental assistance, deposit assistance, and other incidental expenses related to gaining and maintaining housing. This fund has frequently been utilized to prevent families and individuals from experiencing first-time homelessness. 3. United Way employs staff and interns to facilitate strategic planning with regard to mitigating first-time homelessness in our community.

3A-2. Length-of-Time Homeless as Reported in HDX. Applicants must:
 (1) provide the average length of time individuals and persons in families remained homeless (i.e., the number);
 (2) describe the CoC's strategy to reduce the length-of-time individuals and persons in families remain homeless;
 (3) describe how the CoC identifies and houses individuals and persons in families with the longest lengths of time homeless; and
 (4) provide the name of the organization or position title that is responsible for overseeing the CoC's strategy to reduce the length of time individuals and families remain homeless.
(limit 2,000 characters)

1. The data provided by the state HMIS team indicated the following measure:
•Metric 1.1a: average length of time persons are homeless in ES and SH projects: 11
•Metric 1.1b: average length of time persons are homeless in ES and SH projects: 104
•Metric 1.2a: average length of time persons are homeless in ES, SH, and TH projects: 24
•Metric 1.2b: average length of time persons are homeless in ES, SH, and TH projects: 120
. 2. The Mountainland CoC is committed to a "no wrong door" approach to CEA for years, which was fully implemented in all HMIS-participating agencies November 1st, 2017. We continue to use and develop strategies for effective diversion in our community utilizing front-door agencies. The Mountainland CoC CEA process invludes both CoC and non-CoC funded agencies in our community that meet together twice a month to case conference the most difficult to house clients in our community. The Coordinated Support Services committee also functions as our by-name committee. 3. Our by-name list is sorted based on the highest SPDAT scores, chronic status, veteran status, and homeless youth status. We prioritize through coordinated assessment families and individuals in our community who have the longest period of homelessness. Clients typically receive vouchers for PSH within seven days of assessment. 4. United Way of Utah County's CoC Program Coordinator oversees the committee that determines the CoC's strategy to reduce the length of time individuals and families remain homeless.

3A-3. Successful Permanent Housing Placement and Retention as Reported in HDX. Applicants must:
(1) provide the percentage of individuals and persons in families in emergency shelter, safe havens, transitional housing, and rapid rehousing that exit to permanent housing destinations; and
(2) provide the percentage of individuals and persons in families in permanent housing projects, other than rapid rehousing, that retain their permanent housing or exit to permanent housing destinations.

	Percentage
Report the percentage of individuals and persons in families in emergency shelter, safe havens, transitional housing, and rapid re-housing that exit to permanent housing destinations as reported in HDX.	39%
Report the percentage of individuals and persons in families in permanent housing projects, other than rapid re-housing, that retain their permanent housing or exit to permanent housing destinations as reported in HDX.	86%

3A-3a. Applicants must:
(1) describe the CoC's strategy to increase the rate at which individuals and persons in families in emergency shelter, safe havens, transitional housing and rapid rehousing exit to permanent housing destinations; and
(2) describe the CoC's strategy to increase the rate at which individuals and persons in families in permanent housing projects, other than rapid rehousing, retain their permanent housing or exit to permanent housing destinations.
(limit 2,000 characters)

1.The Mountainland Continuum of Care is committed to increasing the percentage of individuals and families who exit to permanent housing destinations. As a unified body, our CoC is making great strides to overcome some of our geographical obstacles, such as an exceptionally low vacancy rate, an unusually high college student population, and a housing market in which affordable housing is not prioritized. In the last year we have reconvened a Housing Solutions Workgroup as a subcommittee of the CoC, which includes city and local government leaders, CoC member agencies, developers, and other members of the community interested in affordable housing solutions. The CoC also commissioned a study for our city planners examining the correlation between a city's economic growth and prioritizing affordable housing. Additionally, our housing authorities have worked with local developers and business leaders to renovate and master-lease additional PSH units. Our CSS committee (by-name list review committee) works in tandem with PSH providers to identify individuals in emergency shelter programs, transitional housing programs, and rapid rehousing programs and help them exit to permanent housing. As we increase our inventory of PSH, specifically projects that follow a Housing First model, we expect that our rate of successful exits into permanent housing destinations will also increase. 2. Our high permanent housing retention rates are largely due to the wrap-around services provided by our CoC member agencies. Services provided include regular home visits, psychotherapy, day treatment, medication management, psychiatric services, healthcare services, assistance with food and clothing, case management, employment counseling, and life-skills courses. The CoC has learned through experience that individuals in PSH can succeed in retaining their housing with appropriate support, and we continually expand our CoC membership to additional agencies who provide support.

3A-4. Returns to Homelessness as Reported in HDX. Applicants must report the percentage of individuals and persons in families returning to homelessness over a 6- and 12-month period as reported in HDX.

	Percentage
Report the percentage of individuals and persons in families returning to homelessness over a 6- and 12-month period as reported in HDX	8%

3A-4a. Applicants must:
(1) describe how the CoC identifies common factors of individuals and persons in families who return to homelessness;
(2) describe the CoC's strategy to reduce the rate of additional returns to homelessness; and

(3) provide the name of the organization or position title that is responsible for overseeing the CoC's strategy to reduce the rate individuals and persons in families returns to homelessness.
(limit 2,000 characters)

1.   The Mountainland CoC utilizes HMIS data, Coordinated Support Services meetings twice a month, and VI-SPDAT and SPDAT scores to identify common factors in individuals and persons in families who return to homelessness. 2. The CoC's strategy to reduce the rate of additional returns to homelessness includes case conferencing for individuals who are in danger of losing their housing, coordination on such persons through our Coordinated Support Services meetings, partnerships facilitating open communication between the service agencies providing wrap-around services for clients in PSH programs and PSH providers, a private Housing First Fund (flex fund) that can be used to mitigate financial reasons for pending eviction, and a consistent effort to incentivize tenant education and responsibility. Due to the CoC's commitment to a Housing First approach, tenants who are struggling to maintain their housing in PSH programs are quickly identified and given additional support in the form of wrap-around services and advocacy. Wasatch Mental Health provides much of the wrap-around services available to clients in PSH programs. Provo City Housing Authority and Housing Authority of Utah County spearhead identifying individuals in PSH programs who are struggling to maintain housing. United Way of Utah County manages the Housing First Fund and 2-1-1 referrals for individuals who reach out who are precariously housed, as well as diversion training and strategy, and Community Action Services and Food Bank leads tenant education.

3A-5. Job and Income Growth. Applicants must:
(1) describe the CoC's strategy to increase access to employment and non-employment cash sources;
(2) describe how the CoC works with mainstream employment organizations to help individuals and families increase their cash income; and
(3) provide the organization name or position title that is responsible for overseeing the CoC's strategy to increase job and income growth from employment.
(limit 2,000 characters)

1.   The Mountainland CoC partners with many local programs and agencies, such as Utah Defendant/Offender Workplace Development Program, Job Corps, People Helping People, and the Department of Workforce Services to help clients access opportunities for employment and access to mainstream benefits. The CoC provides training twice a year on mainstream benefits for all case managers, with a specific focus on any changes to access of mainstream benefits or additional resources. 2. Many of our CoC program-funded agencies have SOAR trained case managers which helps to facilitate clients' access to mainstream employment agencies. The CoC also facilitates trainings on employment opportunities, access to job fairs, and updated information on programs that can help clients increase income or access employment opportunities. 3. United Way of Utah County staff provide advertisement of new employment opportunities and training for case managers on mainstream benefits. Community Action provides Bridges out of Poverty training, and DWS provides mainstream services.

3A-6. System Performance Measures Data Submission in HDX. Applicants must enter the date the CoC submitted the System Performance Measures data in HDX, which included the data quality section for FY 2017 (mm/dd/yyyy)

05/30/2018

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

Instructions

For guidance on completing this application, please reference the FY 2018 CoC Application Detailed Instructions and the FY 2018 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

3B-1. DedicatedPLUS and Chronically Homeless Beds. In the boxes below, applicants must enter:
(1) total number of beds in the Project Application(s) that are designated as DedicatedPLUS beds; and
(2) total number of beds in the Project Application(s) that are designated for the chronically homeless, which does not include those that were identified in (1) above as DedicatedPLUS Beds.

Total number of beds dedicated as DedicatedPLUS	0
Total number of beds dedicated to individuals and families experiencing chronic homelessness	115
Total	115

3B-2. Orders of Priority. Did the CoC adopt the Orders of Priority into their written standards for all CoC Program-funded PSH projects as described in Notice CPD-16-11: Prioritizing Persons Experiencing Chronic Homelessness and Other Vulnerable Homeless Persons in Permanent Supportive Housing? Attachment Required.

Yes

3B-2.1. Prioritizing Households with Children. Using the following chart, applicants must check all that apply to indicate the factor(s) the CoC currently uses to prioritize households with children during FY 2018.

History of or Vulnerability to Victimization (e.g. domestic violence, sexual assault, childhood abuse)	X
Number of previous homeless episodes	X
Unsheltered homelessness	X
Criminal History	
Bad credit or rental history	
Head of Household with Mental/Physical Disability	X

3B-2.2. Applicants must:
(1) describe the CoC's current strategy to rapidly rehouse every household of families with children within 30 days of becoming homeless;
(2) describe how the CoC addresses both housing and service needs to ensure families successfully maintain their housing once assistance ends; and
(3) provide the organization name or position title responsible for overseeing the CoCs strategy to rapidly rehouse families with children within 30 days of becoming homeless.
(limit 2,000 characters)

1.   The two DV shelters in our CoC, along with Community Action Services and Food Bank partner in order to rehouse any families with children within 30 days of becoming homeless. Families who enter Community Action's shelter program or a DV program are assessed through our coordinated entry process at the time they present to one of these agencies. Housing search begins within 1-7 days of assessment with a placement goal of 2-3 weeks. The CoC maintains an updated list of vacant housing and continually recruits landlords who are willing to accept high-risk families. Additionally, the CoC makes use of a Housing First Fund to assist in quickly housing families. Community Action assists homeless families in finding housing and negotiating with landlords. Families with children have priority in PSH units and families with higher risk factors are a higher priority for RRH funding. 2. Once families are placed in housing, the housing authority agencies partner with local service agencies to help ensure wrap-around services. Ongoing case management and education services are available through Wasatch Mental Health and Community Action Services. When families are in danger of losing housing funded through a voucher program, the Housing Authority notifies the agency working with that family to provide additional support. Additionally, the CoC's Housing First Fund assists with diversion and assistance in maintaining housing after placement. 3. Community Action leads the strategic planning and RRH for homeless families to be rehoused within 30 days.

3B-2.3. Antidiscrimination Policies. Applicants must check all that apply that describe actions the CoC is taking to ensure providers (including emergency shelter, transitional housing, and permanent supportive housing (PSH and RRH) within the CoC adhere to antidiscrimination 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.

CoC conducts mandatory training for all CoC and ESG funded service providers on these topics.	☐
CoC conducts optional training for all CoC and ESG funded service providers on these topics.	☐
CoC has worked with ESG recipient(s) to adopt uniform anti-discrimination policies for all subrecipients.	☐
CoC has worked with ESG recipient(s) to identify both CoC and ESG funded facilities within the CoC geographic area that may be out of compliance, and taken steps to work directly with those facilities to come into compliance.	☐
CoC has sought assistance from HUD through submitting AAQs or requesting TA to resolve non-compliance of service providers.	☐

3B-2.4. Strategy for Addressing Needs of Unaccompanied Youth Experiencing Homelessness. Applicants must indicate whether the CoC's strategy to address the unique needs of unaccompanied homeless youth

includes the following:

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

3B-2.5. Prioritizing Unaccompanied Youth Experiencing Homelessness Based on Needs. Applicants must check all that apply from the list below that describes the CoC's current strategy to prioritize unaccompanied youth based on their needs.

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

3B-2.6. Applicants must describe the CoC's strategy to increase:
 (1) housing and services for all youth experiencing homelessness by providing new resources or more effectively using existing resources, including securing additional funding; and
 (2) availability of housing and services for youth experiencing unsheltered homelessness by providing new resources or more effectively using existing resources.
(limit 3,000 characters)

1.   One of the major strategies that the Mountainland CoC has employed to increase resources or more effectively utilize existing resources for youth homelessness has been to facilitate partnerships and collaborations with agencies working with homeless youth. Within the Mountainland CoC jurisdiction is a shelter for unaccompanied youth, which pursues new RHY NOFAs as they are announced. The CoC has facilitated discussions between the youth shelter and the Department of Human Services youth programs about how to better utilize the housing we currently have and strategies for increasing funding for youth housing in the future. The CoC also participates in a statewide initiative on awareness surrounding youth homelessness. The CoC coordinates with the Department of Child and Family Services to focus on youth aging out of the foster care system and has agreements in place with the housing authority agencies for set-aside units for youth aging out of the foster care system. 2. The Mountainland CoC's youth homeless shelter partners with street outreach workers to specifically address the needs of unaccompanied youth who are unsheltered. Youth who are unsheltered and contacted by street outreach workers are fast-tracked into shelter services to quickly begin the

process of permanently housing them. Additionally, through our coordinated entry process and "no wrong door" approach, the CoC can quickly identify youth presenting at any service agency who are unsheltered and unaccompanied. Our CSS committee discusses unaccompanied, unsheltered youth by-name in our bi-weekly meetings and matches them with housing programs or set-aside units. Additionally, our Housing First Fund can help to quickly place unaccompanied homeless youth in housing that may not qualify for other types of financial assistance, such as shared student housing, by covering move-in costs, past-due rent, utility hookup fees, application fees, and other incidental fees.

3B-2.6a. Applicants must:
(1) provide evidence the CoC uses to measure both strategies in question 3B-2.6. to increase the availability of housing and services for youth experiencing homelessness;
(2) describe the measure(s) the CoC uses to calculate the effectiveness of the strategies; and
(3) describe why the CoC believes the measure it uses is an appropriate way to determine the effectiveness of the CoC's strategies.
(limit 3,000 characters)

1.   The Mountainland CoC utilizes the HMIS database to measure and track the placements of homeless youth, both previously sheltered and unsheltered. Additionally, data collected from the VI-SPDAT and SPDAT coordinated assessment is used to inform policies for our CoC surrounding homeless youth. 2. The CSS committee, or by-name committee, tracks the placements of unaccompanied youth who have been assessed through our coordinated assessment. Monthly placement goals for unaccompanied youth are determined by this committee. Data from the HMIS database is used to determine placements and clients actively in services who have yet to be placed. 3. The Mountainland CoC believes this to be an effective way to determine the effectiveness of its strategy because by identifying unaccompanied youth as a special subcategory of homelessness, the changes in population of homeless youth and placement of homeless youth can be more easily identified and tracked. The HMIS database is an effective tool to help track placements and availability of housing and services because it is maintained and updated with data from the entire state, is HUD compliant, and is a proven and reliable tool.

3B-2.7. Collaboration–Education Services. Applicants must describe how the CoC collaborates with:
(1) youth education providers;
(2) McKinney-Vento State Education Agency (SEA) and Local Education Agency (LEA);
(3) school districts; and
(4) the formal partnerships with (1) through (3) above.
(limit 2,000 characters)

1.   The Mountainland CoC staffs an Education Subcommittee, which includes youth education providers, an LGBTQ resource center, Community Action, DCFS, a youth shelter, Head Start, the DV shelter, Job Corps, and CoC staff. This subcommittee meets monthly to share resources, referrals, and to

strategically plan for our Continuum. This committee is also consulted about PIT methodology. 2. Part of the Education Subcommittee includes school liaisons who provide education to CoC members regarding the McKinney-Vento Act. Our Local Education Agency is also involved with supporting our Education Subcommittee. 3. Local school district liaisons collaborate with the CoC to ensure that housing referral cards and brochures are readily available, and partner with the domestic violence shelter to help provide transportation to educational services. 4. Member agencies involved in the Education Subcommittee have formal MOUs in place to coordinate services. These include youth education providers, SEA and LEA, school districts, Mountainland Head Start, and United Way's Help Me Grow program. Additionally, local school districts have a formal policy in place to post McKinney-Vento Homeless Assistance Act information for parents on their website and in the front office at each school. Registration forms for local school districts also ask questions specifically relating to housing status.

3B-2.7a. Applicants must describe the policies and procedures the CoC adopted to inform individuals and families who become homeless of their eligibility for education services.
(limit 2,000 characters)

The Mountainland CoC policies and procedures for informing homeless clients about eligibility for education services include: the utilization of 2-1-1 as a general informational directory; assistance from case managers at CoC partner agencies to apply for educational services; one-on-one consultation with outreach workers for special subpopulations, such as veterans; and information posted on the Mountainland Continuum of Care website. Additionally, twice a year, the Mountainland CoC holds informational trainings on mainstream benefits and educational resources in the area, so that case managers and intake workers across the continuum are informed and able to quickly connect individuals and families with educational services. New educational services, classes, and opportunities are also frequently sent out by email to all of our CoC agencies.

3B-2.8. Does the CoC have written formal agreements, MOU/MOAs or partnerships with one or more providers of early childhood services and supports? Select "Yes" or "No". Applicants must select "Yes" or "No", from the list below, if the CoC has written formal agreements, MOU/MOA's or partnerships with providers of early childhood services and support.

	MOU/MOA	Other Formal Agreement
Early Childhood Providers	Yes	No
Head Start	Yes	No
Early Head Start	No	No
Child Care and Development Fund	No	No
Federal Home Visiting Program	No	No
Healthy Start	No	No
Public Pre-K	No	Yes
Birth to 3 years	Yes	No
Tribal Home Visiting Program	No	No

Other: (limit 50 characters)		

**3B-3.1. Veterans Experiencing Homelessness. Applicants must describe the actions the CoC has taken to identify, assess, and refer Veterans experiencing homelessness, who are eligible for U.S. Department of Veterans Affairs (VA) housing and services, to appropriate resources such as HUD-VASH, Supportive Services for Veterans Families (SSVF) program and Grant and Per Diem (GPD).
(limit 2,000 characters)**

The Mountainland CoC is strongly committed to early identification of veterans to connect them quickly with the appropriate resources. Coordinated entry assessments are completed at every point of homeless entry, and veterans are quickly identified through these assessments. The CoC's Coordinated Support Services committee (by-name list committee) includes representatives from the VA, HVS, and DWS. These agencies help look up self-declared veterans in the HMIS Repository and the Veteran Status Query and Response Exchange System (SQUARES) to quickly identify how to get the necessary paperwork and DD-214s in place. VA representatives also provide twice a month outreach to homeless veterans and assist in connecting them with benefits. Veterans are also referred to the CoC through the American Legion and Utah County Vet Center. Street outreach also works to identify, assess, and refer homeless veterans to the appropriate resources. Veteran service providers were also heavily involved in this year's PIT to make sure that we were accurately contacting known homeless veterans and assisting them in connecting with services.

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

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

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

3B-5. Racial Disparity. Applicants must: (1) indicate whether the CoC assessed whether there are racial disparities in the provision or outcome of homeless Yes

**assistance;
(2) if the CoC conducted an assessment,
attach a copy of the summary.**

3B-5a. Applicants must select from the options below the results of the CoC's assessment.

People of different races or ethnicities are more or less likely to receive homeless assistance.	X
People of different races or ethnicities are more or less likely to receive a positive outcome from homeless assistance.	X
There are no racial disparities in the provision or outcome of homeless assistance.	
The results are inconclusive for racial disparities in the provision or outcome of homeless assistance.	

3B-5b. Applicants must select from the options below the strategies the CoC is using to address any racial disparities.

The CoC's board and decisionmaking bodies are representative of the population served in the CoC.	☐
The CoC has identified steps it will take to help the CoC board and decisionmaking bodies better reflect the population served in the CoC.	☐
The CoC is expanding outreach in geographic areas with higher concentrations of underrepresented groups.	☐
The CoC has communication, such as flyers, websites, or other materials, inclusive of underrepresented groups	☐
The CoC is training staff working in the homeless services sector to better understand racism and the intersection of racism and homelessness.	☐
The CoC is establishing professional development opportunities to identify and invest in emerging leaders of different races and ethnicities in the homelessness sector.	☐
The CoC has staff, committees or other resources charged with analyzing and addressing racial disparities related to homelessness.	☐
The CoC is educating organizations, stakeholders, boards of directors for local and national non-profit organizations working on homelessness on the topic of creating greater racial and ethnic diversity.	☐
The CoC reviewed coordinated entry processes to understand their impact on people of different races and ethnicities experiencing homelessness.	☐
The CoC is collecting data to better understand the pattern of program use for people of different races and ethnicities in its homeless services system.	☐
The CoC is conducting additional research to understand the scope and needs of different races or ethnicities experiencing homelessness.	☐
Other:	☐

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

Instructions:

For guidance on completing this application, please reference the FY 2018 CoC Application Detailed Instructions and the FY 2018 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

4A-1. Healthcare. Applicants must indicate, for each type of healthcare listed below, whether the CoC:
(1) assists persons experiencing homelessness with enrolling in health insurance; and
(2) assists persons experiencing homelessness with effectively utilizing Medicaid and other benefits.

Type of Health Care	Assist with Enrollment	Assist with Utilization of Benefits?
Public Health Care Benefits (State or Federal benefits, Medicaid, Indian Health Services)	Yes	Yes
Private Insurers:	Yes	Yes
Non-Profit, Philanthropic:	Yes	Yes
Other: (limit 50 characters)		

4A-1a. Mainstream Benefits. Applicants must:
(1) describe how the CoC works with mainstream programs that assist persons experiencing homelessness to apply for and receive mainstream benefits;
(2) describe how the CoC systematically keeps program staff up-to-date regarding mainstream resources available for persons experiencing homelessness (e.g., Food Stamps, SSI, TANF, substance abuse programs); and
(3) provide the name of the organization or position title that is responsible for overseeing the CoC's strategy for mainstream benefits. (limit 2,000 characters)

1.   CoC-funded projects provide case management assistance to help clients connect with mainstream benefits and maintain their benefits, once awarded. The CoC also coordinates with DWS to provide an employment counselor who is specifically trained to work with homeless individuals and families, and provides support for our CoC-funded agencies. This counselor works with families receiving TANF RRH, and veterans. Additionally, DWS provides assistance for persons on an employment plan, intensive employment preparation, job seek skills, and job search. DWS provides employer financial incentives for companies who employ persons with a wide variety of barriers, including homelessness. DWS also provides support with GED programs, adult high school, short-term training, and apprenticeships. DWS is actively involved

with the CoC and subcommittees. 2. The CoC coordinates annual trainings with DWS about mainstream benefits for all members and agencies, highlighting new or changing resources. 3. United Way of Utah County and Community Action Services and Food Bank organize these trainings.

4A-2.Housing First: Applicants must report:
(1) total number of new and renewal CoC Program Funded PSH, RRH, SSO non-coordinated entry, Safe-Haven, and Transitional Housing projects the CoC is applying for in FY 2018 CoC Program Competition; and
(2) total number of new and renewal CoC Program Funded PSH, RRH, SSO non-coordinated entry, Safe-Haven, and Transitional Housing projects the CoC is applying for in FY 2018 CoC Program Competition that have adopted the Housing First approach–meaning that the project quickly houses clients without preconditions or service participation requirements.

Total number of new and renewal CoC Program Funded PSH, RRH, SSO non-coordinated entry, Safe-Haven, and Transitional Housing projects the CoC is applying for in FY 2018 CoC Program Competition.	9
Total number of new and renewal CoC Program Funded PSH, RRH, SSO non-coordinated entry, Safe-Haven, and Transitional Housing projects the CoC is applying for in FY 2018 CoC Program Competition that have adopted the Housing First approach–meaning that the project quickly houses clients without preconditions or service participation requirements.	7
Percentage of new and renewal PSH, RRH, Safe-Haven, SSO non-Coordinated Entry projects in the FY 2018 CoC Program Competition that will be designated as Housing First.	78%

4A-3. Street Outreach. Applicants must:
(1) describe the CoC's outreach;
(2) state whether the CoC's Street Outreach covers 100 percent of the CoC's geographic area;
(3) describe how often the CoC conducts street outreach; and
(4) describe how the CoC tailored its street outreach to persons experiencing homelessness who are least likely to request assistance. (limit 2,000 characters)

1.Our street outreach consists of dedicated persons from Wasatch Mental Health in partnership with local law enforcement and CoC membership agencies. Although we do not have street outreach covering 100 percent of our geographic region, our street outreach teams work closely with local law enforcement and service agencies to act whenever there is a report of someone living in a place not meant for habitation. During our annual PIT, volunteers provide street outreach contact cards to local late night or 24/7 businesses with instructions to call if they encounter someone who is homeless during the year. With our network of service providers, law enforcement agencies, and concerned citizens reaching out to our street outreach team, we have been able to adequately reach individuals in all areas of our region, even if these areas are not regularly covered during street outreach.
2.Our street outreach team regularly covers about 75% of our geographic region.
3.Street outreach is conducted 5 days a week and is led by mental health professionals trained in trauma-informed care. Street outreach teams also include at least one formerly homeless individual.
4.Our street outreach teams frequent areas of high traffic for unsheltered individuals and also provide "in-reach" services by meeting with individuals at

drop-in soup kitchens and homeless resource centers five days a week. They also participate with law enforcement to connect with people identified on weekends. This "in-reach" process helps connect outreach teams with individuals who are not as conspicuously homeless, allowing for better access to service for those who are less likely to request help or call attention to themselves through panhandling or camping. Additionally, we have found that veterans are less likely to request assistance from outreach workers, so we coordinate services with the local veteran council and a case manager through the VA who can directly address the specific needs of veterans.

4A-4. Affirmative Outreach. Applicants must describe:
(1) the specific strategy the CoC implemented that furthers fair housing as detailed in 24 CFR 578.93(c) used to market housing and supportive services to eligible persons regardless of race, color, national origin, religion, sex, gender identify, sexual orientation, age, familial status or disability; and
(2) how the CoC communicated effectively with persons with disabilities and limited English proficiency fair housing strategy in (1) above.
(limit 2,000 characters)

1.Mountainland CoC actively markets housing and supportive services to individuals regardless of race, color, national origin, religion, sex, gender identify, sexual orientation, age, familial status or disability, in compliance with Fair Housing. Our CoC policy requires member agencies to comply with fair housing laws. 2. Clients are instructed on their housing rights during their housing briefings and instructed on how to file complaints with Fair Housing. Our housing authorities and most CoC agencies have staff who are bilingual fluent to assist individuals with limited English proficiency. We partner with agencies specializing in working with families with disabled heads of household to ensure sensitivity and effective communication with disabled persons seeking housing services. Interpretation and translation services are provided when needed, and policies are in place to make reasonable accommodations for persons with disabilities.

4A-5. RRH Beds as Reported in the HIC. Applicants must report the total number of rapid rehousing beds available to serve all household types as reported in the Housing Inventory Count (HIC) for 2017 and 2018.

	2017	2018	Difference
RRH beds available to serve all populations in the HIC	81	117	36

4A-6. Rehabilitation or New Construction Costs. Are new proposed project applications requesting $200,000 or more in funding for housing rehabilitation or new construction?   No

4A-7. Homeless under Other Federal Statutes. Is the CoC requesting to designate one or more of its SSO or TH projects to serve   No

families with children or youth defined as homeless under other Federal statutes?

4B. Attachments

Instructions:

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

Document Type	Required?	Document Description	Date Attached
1C-5. PHA Administration Plan–Homeless Preference	No	Homeless preference	09/14/2018
1C-5. PHA Administration Plan–Move-on Multifamily Assisted Housing Owners' Preference	No		
1C-8. Centralized or Coordinated Assessment Tool	Yes	Coordinated Entry...	09/14/2018
1E-1. Objective Critiera–Rate, Rank, Review, and Selection Criteria (e.g., scoring tool, matrix)	Yes	Rank and Review C...	09/14/2018
1E-3. Public Posting CoC-Approved Consolidated Application	Yes		
1E-3. Public Posting–Local Competition Rate, Rank, Review, and Selection Criteria (e.g., RFP)	Yes	RFP 2018	09/14/2018
1E-4. CoC's Reallocation Process	Yes	Rank and Review P...	09/14/2018
1E-5. Notifications Outside e-snaps–Projects Accepted	Yes	Rank and Review n...	09/14/2018
1E-5. Notifications Outside e-snaps–Projects Rejected or Reduced	Yes	Rank and Review r...	09/14/2018
1E-5. Public Posting–Local Competition Deadline	Yes	public postings n...	09/14/2018
2A-1. CoC and HMIS Lead Governance (e.g., section of Governance Charter, MOU, MOA)	Yes	HMIS lead governa...	09/14/2018
2A-2. HMIS–Policies and Procedures Manual	Yes	HMIS policies and...	09/14/2018
3A-6. HDX–2018 Competition Report	Yes	HDX Competition R...	09/14/2018
3B-2. Order of Priority–Written Standards	No	Written Priority ...	09/14/2018

3B-5. Racial Disparities Summary	No	Racial Disparity ...	09/14/2018
4A-7.a. Project List–Persons Defined as Homeless under Other Federal Statutes (if applicable)	No		
Other	No		
Other	No		
Other	No		

Attachment Details

Document Description: Homeless preference

Attachment Details

Document Description:

Attachment Details

Document Description: Coordinated Entry Assessment- SPDAT

Attachment Details

Document Description: Rank and Review Criteria

Attachment Details

Document Description:

Attachment Details

Document Description: RFP 2018

Attachment Details

Document Description: Rank and Review Policies

Attachment Details

Document Description: Rank and Review no change

Attachment Details

Document Description: Rank and Review reduced projects

Attachment Details

Document Description: public postings nofa deadlines

Attachment Details

Document Description: HMIS lead governance and COC SOP

Attachment Details

Document Description: HMIS policies and procedures

Attachment Details

Document Description: HDX Competition Report

Attachment Details

Document Description: Written Priority Standards

Attachment Details

Document Description: Racial Disparity summary

Attachment Details

Document Description:

Attachment Details

Document Description:

Attachment Details

Document Description:

Attachment Details

Document Description:

Submission Summary

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

Page	Last Updated
1A. Identification	09/14/2018
1B. Engagement	Please Complete
1C. Coordination	09/14/2018
1D. Discharge Planning	09/14/2018
1E. Project Review	09/14/2018
2A. HMIS Implementation	09/14/2018
2B. PIT Count	09/14/2018
2C. Sheltered Data - Methods	09/14/2018
3A. System Performance	09/14/2018
3B. Performance and Strategic Planning	09/14/2018
4A. Mainstream Benefits and Additional Policies	09/14/2018
4B. Attachments	Please Complete

Submission Summary   No Input Required

Notes:

By selecting "other" you must identify what "other" is.

Service Prioritization Decision Assistance Tool (SPDAT)

Assessment Tool for Single Adults

VERSION 4.01

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ORG CODE
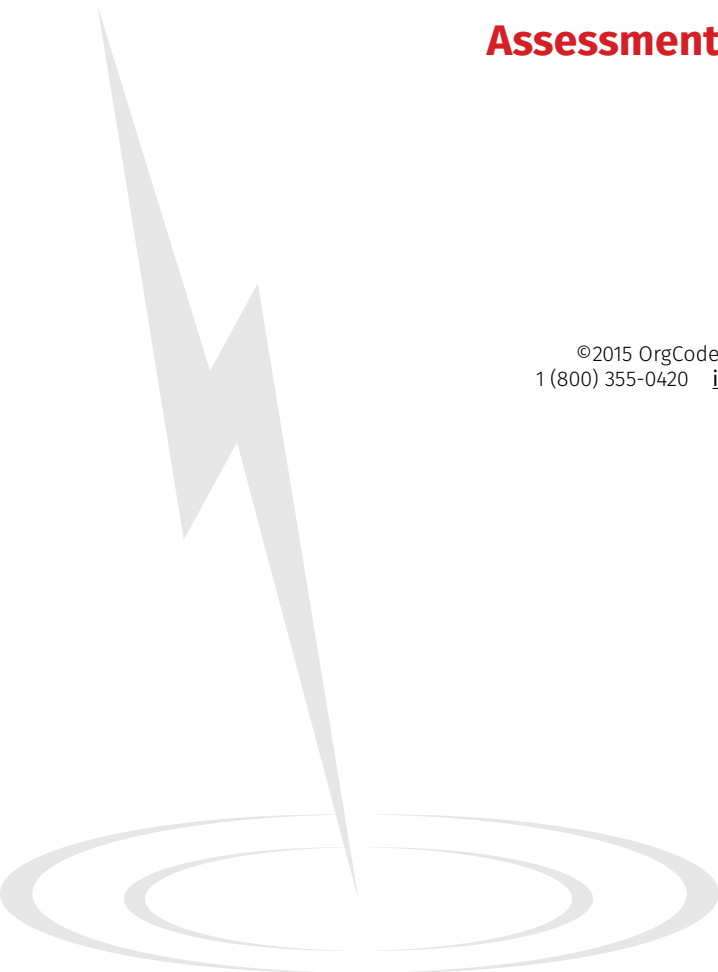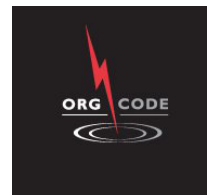
Welcome to the SPDAT Line of Products

The Service Prioritization Decision Assistance Tool (SPDAT) has been around in various incarnations for over a decade, before being released to the public in 2010. Since its initial release, the use of the SPDAT has been expanding exponentially and is now used in over one thousand communities across the United States, Canada, and Australia.

More communities using the tool means there is an unprecedented demand for versions of the SPDAT, customized for specific client groups or service delivery contexts. With the release of SPDAT V4, there have been more current versions of SPDAT products than ever before.

VI-SPDAT Series

The **Vulnerability Index – Service Prioritization Decision Assistance Tool** (VI-SPDAT) was developed as a pre-screening tool for communities that are very busy and may not have the resources to conduct a full SPDAT assessment for every client. It was made in collaboration with Community Solutions, creators of the Vulnerability Index, as a brief survey that can be conducted to quickly determine whether a client has high, moderate, or low acuity. The use of this survey can help prioritize which clients should be given a full SPDAT assessment first. Because it is a self-reported survey, no special training is required to use the VI-SPDAT.

Current versions available:

- VI-SPDAT V 2.0 for Individuals
- VI-SPDAT V 2.0 for Families
- VI-SPDAT V 1.0 for Youth

All versions are available online at

www.orgcode.com/products/vi-spdat/

SPDAT Series

The **Service Prioritization Decision Assistance Tool** (SPDAT) was developed as an assessment tool for frontline workers at agencies that work with homeless clients to prioritize which of those clients should receive assistance first. It is an in-depth assessment that relies on the assessor's ability to interpret responses and corroborate those with evidence. As a result, this tool may only be used by those who have received proper, up-to-date training provided by OrgCode Consulting, Inc. or an OrgCode certified trainer.

Current versions available:

- SPDAT V 4.0 for Individuals
- SPDAT V 2.0 for Families
- SPDAT V 1.0 for Youth

Information about all versions is available online at

www.orgcode.com/products/spdat/

SPDAT Training Series

To use the SPDAT, training by OrgCode or an OrgCode certified trainer is required. We provide training on a wide variety of topics over a variety of mediums.

The full-day in-person SPDAT Level 1 training provides you the opportunity to bring together as many people as you want to be trained for one low fee. The webinar training allows for a maximum of 15 different computers to be logged into the training at one time. We also offer online courses for individuals that you can do at your own speed.

The training gives you the manual, case studies, application to current practice, a review of each component of the tool, conversation guidance with prospective clients – and more!

Current SPDAT training available:
- Level 0 SPDAT Training: VI-SPDAT for Frontline Workers
- Level 1 SPDAT Training: SPDAT for Frontline Workers
- Level 2 SPDAT Training: SPDAT for Supervisors
- Level 3 SPDAT Training: SPDAT for Trainers

Other related training available:
- Excellence in Housing-Based Case Management
- Coordinated Access & Common Assessment
- Motivational Interviewing
- Objective-Based Interactions

More information about SPDAT training, including pricing, is available online at

http://www.orgcode.com/product-category/training/spdat/

Terms and Conditions Governing the Use of the SPDAT

SPDAT products have been developed by OrgCode Consulting, Inc. with extensive feedback from key community partners including people with lived experience. The tools are provided free of charge to communities to improve the client centered services dedicated to increasing housing stability and wellness. Training is indeed required for the administration and interpretation of these assessment tools. Use of the SPDAT products without authorized training is strictly prohibited.

By using this tool, you accept and agree to be bound by the terms of this expectation.

No sharing, reproduction, use or duplication of the information herein is permitted without the express written consent of OrgCode Consulting, Inc.

Ownership

The Service Prioritization Decision Assistance Tool ("SPDAT") and accompanying documentation is owned by OrgCode Consulting, Inc.

Training

Although the SPDAT Series is provided free of charge to communities, training by OrgCode Consulting, Inc. or a third party trainer, authorized by OrgCode, must be successfully completed. After meeting the training requirements required to administer and interpret the SPDAT Series, practitioners are permitted to implement the SPDAT in their work with clients.

Restrictions on Use

You may not use or copy the SPDAT prior to successfully completing training on its use, provided by OrgCode Consulting, Inc. or a third-party trainer authorized by OrgCode. You may not share the SPDAT with other individuals not trained on its use. You may not train others on the use of the SPDAT, unless specifically authorized by OrgCode Consulting, Inc.

Restrictions on Alteration

You may not modify the SPDAT or create any derivative work of the SPDAT or its accompanying documentation, without the express written consent of OrgCode Consulting, Inc. Derivative works include but are not limited to translations.

Disclaimer

The management and staff of OrgCode Consulting, Inc. (OrgCode) do not control the way in which the Service Prioritization Decision Assistance Tool (SPDAT) will be used, applied or integrated into related client processes by communities, agency management or frontline workers. OrgCode assumes no legal responsibility or liability for the misuse of the SPDAT, decisions that are made or services that are received in conjunction with the assessment tool.

A. *Mental Health & Wellness & Cognitive Functioning*

PROMPTS	CLIENT SCORE:
• *Have you ever received any help with your mental wellness?* • *Do you feel you are getting all the help you need for your mental health or stress?* • *Has a doctor ever prescribed you pills for nerves, anxiety, depression or anything like that?* • *Have you ever gone to an emergency room or stayed in a hospital because you weren't feeling 100% emotionally?* • *Do you have trouble learning or paying attention?* • *Have you ever had testing done to identify learning disabilities?* • *Do you know if, when pregnant with you, your mother did anything that we now know can have negative effects on the baby?* • *Have you ever hurt your brain or head?* • *Do you have any documents or papers about your mental health or brain functioning?* • *Are there other professionals we could speak with that have knowledge of your mental health?*	**NOTES**

SCORING	
4	**Any** of the following: ☐ Serious and persistent mental illness (2+ hospitalizations in a mental health facility or psychiatric ward in the past 2 years) **and** not in a heightened state of recovery currently ☐ Major barriers to performing tasks and functions of daily living or communicating intent because of a brain injury, learning disability or developmental disability
3	**Any** of the following: ☐ Heightened concerns about state of mental health, but fewer than 2 hospitalizations, and/or without knowledge of presence of a diagnosable mental health condition ☐ Diminished ability to perform tasks and functions of daily living or communicating intent because of a brain injury, learning disability or developmental disability
2	While there may be concern for overall mental health or mild impairments to performing tasks and functions of daily living or communicating intent, **all** of the following are true: ☐ No major concerns about safety or ability to be housed without intensive supports to assist with mental health or cognitive functioning ☐ No major concerns for the health and safety of others because of mental health or cognitive functioning ability ☐ No compelling reason for screening by an expert in mental health or cognitive functioning prior to housing to fully understand capacity
1	☐ In a heightened state of recovery, has a Wellness Recovery Action Plan (WRAP) or similar plan for promoting wellness, understands symptoms and strategies for coping with them, **and** is engaged with mental health supports as necessary.
0	☐ No mental health or cognitive functioning issues disclosed, suspected or observed.

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B. *Physical Health & Wellness*

PROMPTS
• *How is your health?*
• *Are you getting any help with your health? How often?*
• *Do you feel you are getting all the care you need for your health?*
• *Any illness like diabetes, HIV, Hep C or anything like that going on?*
• *Ever had a doctor tell you that you have problems with blood pressure or heart or lungs or anything like that?*
• *When was the last time you saw a doctor? What was that for?*
• *Do you have a clinic or doctor that you usually go to?*
• *Anything going on right now with your health that you think would prevent you from living a full, healthy, happy life?*
• *Are there other professionals we could speak with that have knowledge of your health?*
• *Do you have any documents or papers about your health or past stays in hospital because of your health?*

CLIENT SCORE: _____

NOTES

	SCORING
4	**Any** of the following: ☐ Co-occurring chronic health conditions ☐ Attempting a treatment protocol for a chronic health condition, but the treatment is not improving health ☐ Pallative health condition
3	Presence of a health issue with **any** of the following: ☐ Not connected with professional resources to assist with a real or perceived serious health issue, by choice ☐ Single chronic or serious health concern but does not connect with professional resources because of insufficient community resources (e.g. lack of availability or affordability) ☐ Unable to follow the treatment plan as a direct result of homeless status
2	☐ Presence of a relatively minor physical health issue, which is managed and/or cared for with appropriate professional resources or through informed self-care ☐ Presence of a physical health issue, for which appropriate treatment protocols are followed, but there is still a moderate impact on their daily living
1	Single chronic or serious health condition, but **all** of the following are true: ☐ Able to manage the health issue and live a relatively active and healthy life ☐ Connected to appropriate health supports ☐ Educated and informed on how to manage the health issue, take medication as necessary related to the condition, and consistently follow these requirements.
0	☐ No serious or chronic health condition disclosed, observed, or suspected ☐ If any minor health condition, they are managed appropriately

C. Medication

PROMPTS
• *Have you recently been prescribed any medications by a health care professional?*   • *Do you take any medications prescribed to you by a doctor?*   • *Have you ever sold some or all of your prescription?*   • *Have you ever had a doctor prescribe you medication that you didn't have filled at a pharmacy or didn't take?*   • *Were any of your medications changed in the last month? If yes: How did that make you feel?*   • *Do other people ever steal your medications?*   • *Do you ever share your medications with other people?*   • *How do you store your medications and make sure you take the right medication at the right time each day?*   • *What do you do if you realize you've forgotten to take your medications?*   • *Do you have any papers or documents about the medications you take?*

CLIENT SCORE:	

NOTES

SCORING	
4	**Any** of the following: ☐ In the past 30 days, started taking a prescription which **is** having any negative impact on day to day living, socialization or mood ☐ Shares or sells prescription, but keeps **less** than is sold or shared ☐ Regularly misuses medication (e.g. frequently forgets; often takes the wrong dosage; uses some or all of medication to get high) ☐ Has had a medication prescribed in the last 90 days that remains unfilled, for any reason
3	**Any** of the following: ☐ In the past 30 days, started taking a prescription which is **not** having any negative impact on day to day living, socialization or mood ☐ Shares or sells prescription, but keeps **more** than is sold or shared ☐ Requires intensive assistance to manage or take medication (e.g., assistance organizing in a pillbox; working with pharmacist to blister-pack; adapting the living environment to be more conducive to taking medications at the right time for the right purpose, like keeping nighttime medications on the bedside table and morning medications by the coffeemaker) ☐ Medications are stored and distributed by a third-party
2	**Any** of the following: ☐ Fails to take medication at the appropriate time or appropriate dosage, 1-2 times per week ☐ Self-manages medications except for requiring reminders or assistance for refills ☐ Successfully self-managing medication for fewer than 30 consecutive days
1	☐ Successfully self-managing medications for more than 30, but less than 180, consecutive days
0	**Any** of the following: ☐ No medication prescribed to them ☐ Successfully self-managing medication for 181+ consecutive days

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D. Substance Use

PROMPTS
• *When was the last time you had a drink or used drugs?*   • *Is there anything we should keep in mind related to drugs or alcohol?*   • *[If they disclose use of drugs and/or alcohol] How frequently would you say you use [specific substance] in a week?*   • *Ever have a doctor tell you that your health may be at risk because you drink or use drugs?*   • *Have you engaged with anyone professionally related to your substance use that we could speak with?*   • *Ever get into fights, fall down and bang your head, or pass out when drinking or using other drugs?*   • *Have you ever used alcohol or other drugs in a way that may be considered less than safe?*   • *Do you ever end up doing things you later regret after you have gotten really hammered?*   • *Do you ever drink mouthwash or cooking wine or hand sanitizer or anything like that?*

CLIENT SCORE:	
NOTES	

Note: Consumption thresholds: 2 drinks per day or 14 total drinks in any one week period for men; 2 drinks per day or 9 total drinks in any one week period for women.

	SCORING

4	☐ In a life-threatening health situation as a direct result of substance use, **or**,
	 In the past 30 days, **any** of the following are true...
	   ☐ Substance use is almost daily (21+ times) **and** often to the point of complete inebriation
	   ☐ Binge drinking, non-beverage alcohol use, or inhalant use 4+ times
	   ☐ Substance use resulting in passing out 2+ times

3	☐ Experiencing serious health impacts as a direct result of substance use, though not (yet) in a life-threatening position as a result, **or**,
	 In the past 30 days, **any** of the following are true...
	   ☐ Drug use reached the point of complete inebriation 12+ times
	   ☐ Alcohol use usually exceeded the consumption thresholds (at least 5+ times), but usually not to the point of complete inebriation
	   ☐ Binge drinking, non-beverage alcohol use, or inhalant use occurred 1-3 times

2	In the past 30 days, **any** of the following are true...
	   ☐ Drug use reached the point of complete inebriation fewer than 12 times
	   ☐ Alcohol use exceeded the consumption thresholds fewer than 5 times

1	☐ In the past 365 days, no alcohol use beyond consumption thresholds, **or**, ☐ If making claims to sobriety, no substance use in the past 30 days
0	☐ In the past 365 days, no substance use

E. Experience of Abuse & Trauma

PROMPTS
*To avoid re-traumatizing the individual, ask selected approved questions as written. Do not probe for details of the trauma/abuse. This section is entirely self-reported.
• *"I don't need you to go into any details, but has there been any point in your life where you experienced emotional, physical, sexual or psychological abuse?"* • *"Are you currently or have you ever received professional assistance to address that abuse?"* • *"Does the experience of abuse or trauma impact your day to day living in any way?"* • *"Does the experience of abuse or trauma impact your ability to hold down a job, maintain housing or engage in meaningful relationships with friends or family?"* • *"Have you ever found yourself feeling or acting in a certain way that you think is caused by a history of abuse or trauma?"* • *"Have you ever become homeless as a direct result of experiencing abuse or trauma?"*

CLIENT SCORE: [   ]

NOTES

	SCORING
4	☐ A reported experience of abuse or trauma, believed to be a direct cause of their homelessness
3	☐ The experience of abuse or trauma is **not** believed to be a direct cause of homelessness, but abuse or trauma (experienced before, during, or after homelessness) **is** impacting daily functioning and/or ability to get out of homelessness

2	**Any** of the following:
	   ☐ A reported experience of abuse or trauma, but is not believed to impact daily functioning and/or ability to get out of homelessness
	   ☐ Engaged in therapeutic attempts at recovery, but does not consider self to be recovered

1	☐ A reported experience of abuse or trauma, and considers self to be recovered
0	☐ No reported experience of abuse or trauma

F. Risk of Harm to Self or Others

PROMPTS	CLIENT SCORE:

- *Do you have thoughts about hurting yourself or anyone else? Have you ever acted on these thoughts? When was the last time?*
- *What was occurring when you had these feelings or took these actions?*
- *Have you ever received professional help – including maybe a stay at hospital – as a result of thinking about or attempting to hurt yourself or others? How long ago was that? Does that happen often?*
- *Have you recently left a situation you felt was abusive or unsafe? How long ago was that?*
- *Have you been in any fights recently - whether you started it or someone else did? How long ago was that? How often do you get into fights?*

NOTES

SCORING	
4	**Any** of the following: ☐ In the past 90 days, left an abusive situation ☐ In the past 30 days, attempted, threatened, or actually harmed self or others ☐ In the past 30 days, involved in a physical altercation (instigator or participant)
3	**Any** of the following: ☐ In the past 180 days, left an abusive situation, but no exposure to abuse in the past 90 days ☐ Most recently attempted, threatened, or actually harmed self or others in the past 180 days, but not in the past 30 days ☐ In the past 365 days, involved in a physical altercation (instigator or participant), but not in the past 30 days
2	**Any** of the following: ☐ In the past 365 days, left an abusive situation, but no exposure to abuse in the past 180 days ☐ Most recently attempted, threatened, or actually harmed self or others in the past 365 days, but not in the past 180 days ☐ 366+ days ago, 4+ involvements in physical alterations
1	☐ 366+ days ago, 1-3 involvements in physical alterations
0	☐ Reports no instance of harming self, being harmed, or harming others

G. Involvement in Higher Risk and/or Exploitive Situations

PROMPTS	CLIENT SCORE:

PROMPTS

- *[Observe, don't ask] Any abcesses or track marks from injection substance use?*
- *Does anybody force or trick you to do something that you don't want to do?*
- *Do you ever do stuff that could be considered dangerous like drinking until you pass out outside, or delivering drugs for someone, having sex without a condom with a casual partner, or anything like that?*
- *Do you ever find yourself in situations that may be considered at a high risk for violence?*
- *Do you ever sleep outside? How do you dress and prepare for that? Where do you tend to sleep?*

NOTES

SCORING	
4	**Any** of the following: ☐ In the past 180 days, engaged in 10+ higher risk and/or exploitive events ☐ In the past 90 days, left an abusive situation
3	**Any** of the following: ☐ In the past 180 days, engaged in 4-9 higher risk and/or exploitive events ☐ In the past 180 days, left an abusive situation, but not in the past 90 days
2	**Any** of the following: ☐ In the past 180 days, engaged in 1-3 higher risk and/or exploitive events ☐ 181+ days ago, left an abusive situation
1	☐ Any involvement in higher risk and/or exploitive situations occurred more than 180 days ago but less than 365 days ago
0	☐ In the past 365 days, no involvement in higher risk and/or exploitive events

H. Interaction with Emergency Services

PROMPTS	CLIENT SCORE:
• *How often do you go to emergency rooms?* • *How many times have you had the police speak to you over the past 180 days?* • *Have you used an ambulance or needed the fire department at any time in the past 180 days?* • *How many times have you called or visited a crisis team or a crisis counselor in the last 180 days?* • *How many times have you been admitted to hospital in the last 180 days? How long did you stay?*	**NOTES**

Note: Emergency service use includes: admittance to emergency room/department; hospitalizations; trips to a hospital in an ambulance; crisis service, distress centers, suicide prevention service, sexual assault crisis service, sex worker crisis service, or similar service; interactions with police for the purpose of law enforcement; interactions with fire service in emergency situations.

	SCORING
4	☐ In the past 180 days, cumulative total of 10+ interactions with emergency services
3	☐ In the past 180 days, cumulative total of 4-9 interactions with emergency services
2	☐ In the past 180 days, cumulative total of 1-3 interactions with emergency services
1	☐ Any interaction with emergency services occurred more than 180 days ago but less than 365 days ago
0	☐ In the past 365 days, no interaction with emergency services

I. Legal

PROMPTS	CLIENT SCORE:
• *Do you have any "legal stuff" going on?* • *Have you had a lawyer assigned to you by a court?* • *Do you have any upcoming court dates? Do you think there's a chance you will do time?* • *Any involvement with family court or child custody matters?* • *Any outstanding fines?* • *Have you paid any fines in the last 12 months for anything?* • *Have you done any community service in the last 12 months?* • *Is anybody expecting you to do community service for anything right now?* • *Did you have any legal stuff in the last year that got dismissed?* • *Is your housing at risk in any way right now because of legal issues?*	**NOTES**

SCORING	
4	**Any** of the following: ☐ Current outstanding legal issue(s), likely to result in fines of $500+ ☐ Current outstanding legal issue(s), likely to result in incarceration of 3+ months (cumulatively), inclusive of any time held on remand
3	**Any** of the following: ☐ Current outstanding legal issue(s), likely to result in fines less than $500 ☐ Current outstanding legal issue(s), likely to result in incarceration of less than 90 days (cumulatively), inclusive of any time held on remand
2	**Any** of the following: ☐ In the past 365 days, relatively minor legal issue has occurred and was resolved through community service or payment of fine(s) ☐ Currently outstanding relatively minor legal issue that is unlikely to result in incarceration (but may result in community service)
1	☐ There are no current legal issues, **and** any legal issues that have historically occurred have been resolved without community service, payment of fine, or incarceration
0	☐ No legal issues within the past 365 days, **and** currently no conditions of release

J. Managing Tenancy

PROMPTS	CLIENT SCORE:
• *Are you currently homeless?* • *[If the person is housed] Do you have an eviction notice?* • *[If the person is housed] Do you think that your housing is at risk?* • *How is your relationship with your neighbors?* • *How do you normally get along with landlords?* • *How have you been doing with taking care of your place?*	**NOTES**

Note: Housing matters include: conflict with landlord and/or neighbors, damages to the unit, payment of rent on time and in full. Payment of rent through a third party is <u>not</u> considered to be a short-coming or deficiency in the ability to pay rent.

SCORING	
4	**Any** of the following: ☐ Currently homeless ☐ In the next 30 days, will be re-housed or return to homelessness ☐ In the past 365 days, was re-housed 6+ times ☐ In the past 90 days, support worker(s) have been cumulatively involved 10+ times with housing matters
3	**Any** of the following: ☐ In the next 60 days, will be re-housed or return to homelessness, but not in next 30 days ☐ In the past 365 days, was re-housed 3-5 times ☐ In the past 90 days, support worker(s) have been cumulatively involved 4-9 times with housing matters
2	**Any** of the following: ☐ In the past 365 days, was re-housed 2 times ☐ In the past 180 days, was re-housed 1+ times, but not in the past 60 days ☐ Continuously housed for at least 90 days but not more than 180 days ☐ In the past 90 days, support worker(s) have been cumulatively involved 1-3 times with housing matters
1	**Any** of the following: ☐ In the past 365 days, was re-housed 1 time ☐ Continuously housed, with no assistance on housing matters, for at least 180 days but not more than 365 days
0	☐ Continuously housed, with no assistance on housing matters, for at least 365 days

K. Personal Administration & Money Management

PROMPTS	CLIENT SCORE:

PROMPTS

- *How are you with taking care of money?*
- *How are you with paying bills on time and taking care of other financial stuff?*
- *Do you have any street debts?*
- *Do you have any drug or gambling debts?*
- *Is there anybody that thinks you owe them money?*
- *Do you budget every single month for every single thing you need? Including cigarettes? Booze? Drugs?*
- *Do you try to pay your rent before paying for anything else?*
- *Are you behind in any payments like child support or student loans or anything like that?*

CLIENT SCORE:

NOTES

SCORING

4	**Any** of the following: ☐ Cannot create or follow a budget, regardless of supports provided ☐ Does not comprehend financial obligations ☐ Does not have an income (including formal and informal sources) ☐ Not aware of the full amount spent on substances, if they use substances ☐ Substantial real or perceived debts of $1,000+, past due or requiring monthly payments
3	**Any** of the following: ☐ Requires intensive assistance to create and manage a budget (including any legally mandated guardian/trustee that provides assistance or manages access to money) ☐ Only understands their financial obligations with the assistance of a 3rd party ☐ Not budgeting for substance use, if they are a substance user ☐ Real or perceived debts of $999 or less, past due or requiring monthly payments
2	**Any** of the following: ☐ In the past 365 days, source of income has changed 2+ times ☐ Budgeting to the best of ability (including formal and informal sources), but still short of money every month for essential needs ☐ Voluntarily receives assistance creating and managing a budget or restricts access to their own money (e.g. guardian/trusteeship) ☐ Has been self-managing financial resources and taking care of associated administrative tasks for less than 90 days
1	☐ Has been self-managing financial resources and taking care of associated administrative tasks for at least 90 days, but for less than 180 days
0	☐ Has been self-managing financial resources and taking care of associated acministrative tasks for at least 180 days

L. Social Relationships & Networks

PROMPTS
• *Tell me about your friends, family or other people in your life.* • *How often do you get together or chat?* • *When you go to doctor's appointments or meet with other professionals like that, what is that like?* • *Are there any people in your life that you feel are just using you?* • *Are there any of your closer friends that you feel are always asking you for money, smokes, drugs, food or anything like that?* • *Have you ever had people crash at your place that you did not want staying there?* • *Have you ever been threatened with an eviction or lost a place because of something that friends or family did in your apartment?* • *Have you ever been concerned about not following your lease agreement because of your friends or family?*

CLIENT SCORE: _____

NOTES

	SCORING
4	**Any** of the following: ☐ In the past 90 days, left an exploitive, abusive or dependent relationship ☐ Friends, family or other people are placing security of housing at imminent risk, **or** impacting life, wellness, or safety ☐ No friends or family and demonstrates no ability to follow social norms ☐ Currently homeless and would classify most of friends and family as homeless
3	**Any** of the following: ☐ In the past 90-180 days, left an exploitive, abusive or dependent relationship ☐ Friends, family or other people are having some negative consequences on wellness or housing stability ☐ No friends or family but demonstrating ability to follow social norms ☐ Meeting new people with an intention of forming friendships ☐ Reconnecting with previous friends or family members, but experiencing difficulty advancing the relationship ☐ Currently homeless, and would classify some of friends and family as being housed, while others are homeless
2	**Any** of the following: ☐ More than 180 days ago, left an exploitive, abusive or dependent relationship ☐ Developing relationships with new people but not yet fully trusting them ☐ Currently homeless, and would classify friends and family as being housed
1	☐ Has been housed for less than 180 days, **and** is engaged with friends or family, who are having no negative consequences on the individual's housing stability
0	☐ Has been housed for at least 180 days, **and** is engaged with friends or family, who are having no negative consequences on the individual's housing stability

M. Self Care & Daily Living Skills

PROMPTS
• *Do you have any worries about taking care of yourself?* • *Do you have any concerns about cooking, cleaning, laundry or anything like that?* • *Do you ever need reminders to do things like shower or clean up?* • *Describe your last apartment.* • *Do you know how to shop for nutritious food on a budget?* • *Do you know how to make low cost meals that can result in leftovers to freeze or save for another day?* • *Do you tend to keep all of your clothes clean?* • *Have you ever had a problem with mice or other bugs like cockroaches as a result of a dirty apartment?* • *When you have had a place where you have made a meal, do you tend to clean up dishes and the like before they get crusty?*

CLIENT SCORE:

NOTES

	SCORING
4	**Any** of the following: ☐ No insight into how to care for themselves, their apartment or their surroundings ☐ Currently homeless and relies upon others to meet basic needs (e.g. access to shelter, showers, toilet, laundry, food, and/or clothing) on an almost daily basis ☐ Engaged in hoarding or collecting behavior and is not aware that it is an issue in her/his life
3	**Any** of the following: ☐ Has insight into some areas of how to care for themselves, their apartment or their surroundings, but misses other areas because of lack of insight ☐ In the past 180 days, relied upon others to meet basic needs (e.g. access to shelter, showers, toilet, laundry, food, and/or clothing), 14+ days in any 30-day period ☐ Engaged in hoarding or collecting behavior and is aware that it is an issue in her/his life
2	**Any** of the following: ☐ Fully aware and has insight in all that is required to take care of themselves, their apartment and their surroundings, but has not yet mastered the skills or time management to fully execute this on a regular basis ☐ In the past 180 days, relied upon others to meet basic needs (e.g. access to shelter, showers, toilet, laundry, food, and/or clothing), fewer than 14 days in every 30-day period
1	☐ In the past 365 days, accessed community resources 4 or fewer times, **and** is fully taking care of all their daily needs
0	☐ For the past 365+ days, fully taking care of all their daily needs independently

N. Meaningful Daily Activity

PROMPTS
• *How do you spend your day?*   • *How do you spend your free time?*   • *Does that make you feel happy/fulfilled?*   • *How many days a week would you say you have things to do that make you feel happy/fulfilled?*   • *How much time in a week would you say you are totally bored?*   • *When you wake up in the morning, do you tend to have an idea of what you plan to do that day?*   • *How much time in a week would you say you spend doing stuff to fill up the time rather than doing things that you love?*   • *Are there any things that get in the way of you doing the sorts of activities you would like to be doing?*

CLIENT SCORE: _____

NOTES

SCORING	
4	☐ No planned, legal activities described as providing fulfillment or happiness
3	☐ Discussing, exploring, signing up for and/or preparing for new activities or to re-engage with planned, legal activities that used to provide fulfillment or happiness
2	☐ Attempting new or re-engaging with planned, legal activities that used to provide fulfillment or happiness, but uncertain that activities selected are currently providing fulfillment or happiness, **or** the individual is not fully committed to continuing the activities.
1	☐ Has planned, legal activities described as providing fulfillment or happiness 1-3 days per week
0	☐ Has planned, legal activities described as providing fulfillment or happiness 4+ days per week

O. History of Homelessness & Housing

PROMPTS	CLIENT SCORE:

• *How long have you been homeless?*
• *How many times have you been homeless in your life other than this most recent time?*
• *Have you spent any time sleeping on a friend's couch or floor? And if so, during those times did you consider that to be your permanent address?*
• *Have you ever spent time sleeping in a car or alleyway or garage or barn or bus shelter or anything like that?*
• *Have you ever spent time sleeping in an abandoned building?*
• *Were you ever in hospital or jail for a period of time when you didn't have a permanent address to go to when you got out?*

NOTES

	SCORING
4	☐ Over the past 10 years, cumulative total of 5+ years of homelessness
3	☐ Over the past 10 years, cumulative total of 2+ years but fewer than 5 years of homelessness
2	☐ Over the past 4 years, cumulative total of 30+ days but fewer than 2 years of homelessness
1	☐ Over the past 4 years, cumulative total of 7+ days but fewer than 30 days of homelessness
0	☐ Over the past 4 years, cumulative total of 7 or fewer days of homelessness

Client:	Worker:	Version:	Date:

COMPONENT	SCORE	COMMENTS
MENTAL HEALTH & WELLNESS AND COGNITIVE FUNCTIONING		
PHYSICAL HEALTH & WELLNESS		
MEDICATION		
SUBSTANCE USE		
EXPERIENCE OF ABUSE AND/ OR TRAUMA		
RISK OF HARM TO SELF OR OTHERS		
INVOLVEMENT IN HIGHER RISK AND/OR EXPLOITIVE SITUATIONS		
INTERACTION WITH EMERGENCY SERVICES		

Client:	Worker:	Version:	Date:

COMPONENT	SCORE	COMMENTS
LEGAL INVOLVEMENT		
MANAGING TENANCY		
PERSONAL ADMINISTRATION & MONEY MANAGEMENT		
SOCIAL RELATIONSHIPS & NETWORKS		
SELF-CARE & DAILY LIVING SKILLS		
MEANINGFUL DAILY ACTIVITIES		
HISTORY OF HOUSING & HOMELESSNESS		
TOTAL		

Appendix A: About the SPDAT

OrgCode Consulting, Inc. is pleased to announce the release of Version 4 of the Service Prioritization Decision Assistance Tool (SPDAT). Since its release in 2010, the SPDAT has been used with over 10,000 unique individuals in over 100 communities across North America and in select locations around the world.

Originally designed as a tool to help prioritize housing services for homeless individuals based upon their acuity, the SPDAT has been successfully adapted to other fields of practice, including: discharge planning from hospitals, work with youth, survivors of domestic violence, health research, planning supports for consumer survivors of psychiatric care systems, and in work supporting people with fetal alcohol spectrum disorders. We are encouraged that so many service providers and communities are expanding the use of this tool, and OrgCode will continue to support the innovative use of the SPDAT to meet local needs.

SPDAT Design

The SPDAT is designed to:

- Help prioritize which clients should receive what type of housing assistance intervention, and assist in determining the intensity of case management services
- Prioritize the sequence of clients receiving those services
- Help prioritize the time and resources of Frontline Workers
- Allow Team Leaders and program supervisors to better match client needs to the strengths of specific Frontline Workers on their team
- Assist Team Leaders and program supervisors to support Frontline Workers and establish service priorities across their team
- Provide assistance with case planning and encourage reflection on the prioritization of different elements within a case plan
- Track the depth of need and service responses to clients over time

The SPDAT is NOT designed to:

- Provide a diagnosis
- Assess current risk or be a predictive index for future risk
- Take the place of other valid and reliable instruments used in clinical research and care

The SPDAT is only used with those clients who meet program eligibility criteria. For example, if there is an eligibility criterion that requires prospective clients to be homeless at time of intake to be eligible for Housing First, then the pre-condition must be met before pursuing the application of the SPDAT. For that reason, we have also created the VI-SPDAT as an initial screening tool.

The SPDAT is not intended to replace clinical expertise or clinical assessment tools. The tool complements existing clinical approaches by incorporating a wide array of components that provide both a global and detailed picture of a client's acuity. Certain components of the SPDAT relate to clinical concerns, and it is expected that intake professionals and clinicians will work together to ensure the accurate assessment of these issues. In fact, many organizations and communities have found the SPDAT to be a useful method for bridging the gap between housing, social services and clinical services.

Version 4

The SPDAT has been influenced by the experience of practitioners in its use, persons with lived experience that have had the SPDAT implemented with them, as well as a number of other excellent tools such as (but not limited to) the Outcome Star, Health of the Nation Outcome Scale, Denver Acuity Scale, Camberwell Assessment of Needs, Vulnerability Index, and Transition Aged Youth Triage Tool.

In preparing SPDAT v4, we have adopted a comprehensive and collaborative approach to changing and improving the SPDAT. Communities that have used the tool for three months or more have provided us with their feedback. OrgCode staff have observed the tool in operation to better understand its implementation in the field. An independent committee composed of service practitioners and academics review enhancements to the SPDAT. Furthermore, we continue to test the validity of SPDAT results through the use of control groups. Overall, we consistently see that groups assessed with the SPDAT have better long-term housing and life stability outcomes than those assessed with other tools, or no tools at all.

OrgCode intends to continue working with communities and persons with lived experience to make future versions of the SPDAT even better. We hope all those communities and agencies that choose to use this tool will remain committed to collaborating with us to make those improvements over time.

Version 4 builds upon the success of Version 3 of the SPDAT with some refinements. Starting in August 2014, a survey was launched of existing SPDAT users to get their input on what should be amended, improved, or maintained in the tool. Analysis was completed across all of these responses. Further research was conducted. Questions were tested and refined over several months, again including the direct voice of persons with lived experience and frontline practitioners. Input was also gathered from senior government officials that create policy and programs to help ensure alignment with guidelines and funding requirements.

The major differences from Version 3 to Version 4 include:

- The structure of the tools is the same: four domains (five for families) with components aligned to specific domains. The names of the domains and the components remain unchanged.
- The scoring of the tools is the same: 60 points for singles, and 80 points for families.
- The scoring tables used to run from 0 through to 4. They are now reversed with each table starting at 4 and working their way down to 0. This increases the speed of assessment.
- The order of the tools has changed, grouped together by domain.
- Language has been simplified.
- Days are used rather than months to provide greater clarification and alignment to how most databases capture periods of time in service.
- Greater specificity has been provided in some components such as amount of debts.

Appendix B: Where the SPDAT is being used (as of May 2015)

United States of America
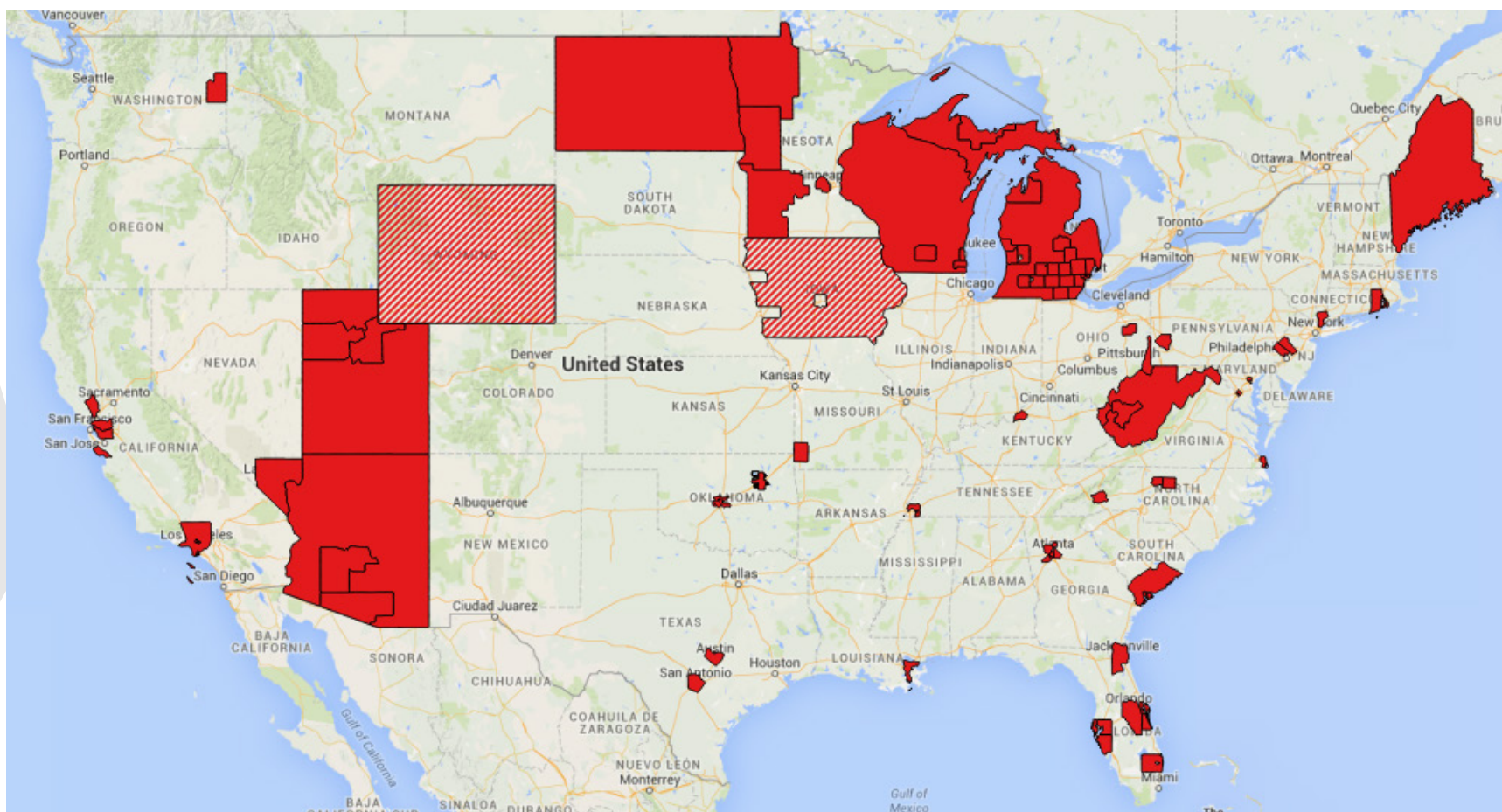
Arizona
- Statewide

California
- Oakland/Alameda County CoC
- Richmond/Contra Costa County CoC
- Watsonville/Santa Cruz City & County CoC
- Napa City & County CoC
- Los Angeles City & County CoC
- Pasadena CoC
- Glendale CoC

District of Columbia
- District of Columbia CoC

Florida
- Sarasota/Bradenton/Manatee, Sarasota Counties CoC
- Tampa/Hillsborough County CoC
- St. Petersburg/Clearwater/Largo/Pinellas County CoC
- Orlando/Orange, Osceola, Seminole Counties CoC
- Jacksonville-Duval, Clay Counties CoC
- Palm Bay/Melbourne/Brevard County CoC
- West Palm Beach/Palm Beach County CoC

Georgia
- Atlanta County CoC
- Fulton County CoC
- Marietta/Cobb County CoC
- DeKalb County CoC

Iowa
- Parts of Iowa Balance of State CoC

Kentucky
- Louisville/Jefferson County CoC

Louisiana
- New Orleans/Jefferson Parish CoC

Maryland
- Baltimore City CoC

Maine
- Statewide

Michigan
- Statewide

Minnesota
- Minneapolis/Hennepin County CoC
- Northwest Minnesota CoC
- Moorhead/West Central Minnesota CoC
- Southwest Minnesota CoC

Missouri
- Joplin/Jasper, Newton Counties CoC

North Carolina
- Winston Salem/Forsyth County CoC
- Asheville/Buncombe County CoC
- Greensboro/High Point CoC

North Dakota
- Statewide

Nevada
- Las Vegas/Clark County CoC

New York
- Yonkers/Mount Vernon/New Rochelle/ Westchester County CoC

Ohio
- Canton/Massillon/Alliance/Stark County CoC
- Toledo/Lucas County CoC

Oklahoma
- Tulsa City & County/Broken Arrow CoC
- Oklahoma City CoC

Pennsylvania
- Lower Marion/Norristown/Abington/ Montgomery County CoC

- Bristol/Bensalem/Bucks County CoC
- Pittsburgh/McKeesport/Penn Hills/ Allegheny County CoC

Rhode Island
- Statewide

South Carolina
- Charleston/Low Country CoC

Tennessee
- Memphis/Shelby County CoC

Texas
- San Antonio/Bexar County CoC
- Austin/Travis County CoC

Utah
- Salt Lake City & County CoC
- Utah Balance of State CoC
- Provo/Mountainland CoC

Virginia
- Virginia Beach CoC
- Arlington County CoC

Washington
- Spokane City & County CoC

Wisconsin
- Statewide

West Virginia
- Statewide

Wyoming
- Wyoming is in the process of implementing statewide

Canada

Alberta
- Province-wide

Manitoba
- City of Winnipeg

New Brunswick
- City of Fredericton
- City of Saint John

Newfoundland and Labrador
- Province-wide

Northwest Territories
- City of Yellowknife

Ontario
- City of Barrie/Simcoe County
- City of Brantford/Brant County
- City of Greater Sudbury
- City of Kingston/Frontenac County
- City of Ottawa
- City of Windsor

- District of Kenora
- District of Parry Sound
- District of Sault Ste Marie
- Regional Municipality of Waterloo
- Regional Municipality of York

Saskatchewan
- Saskatoon
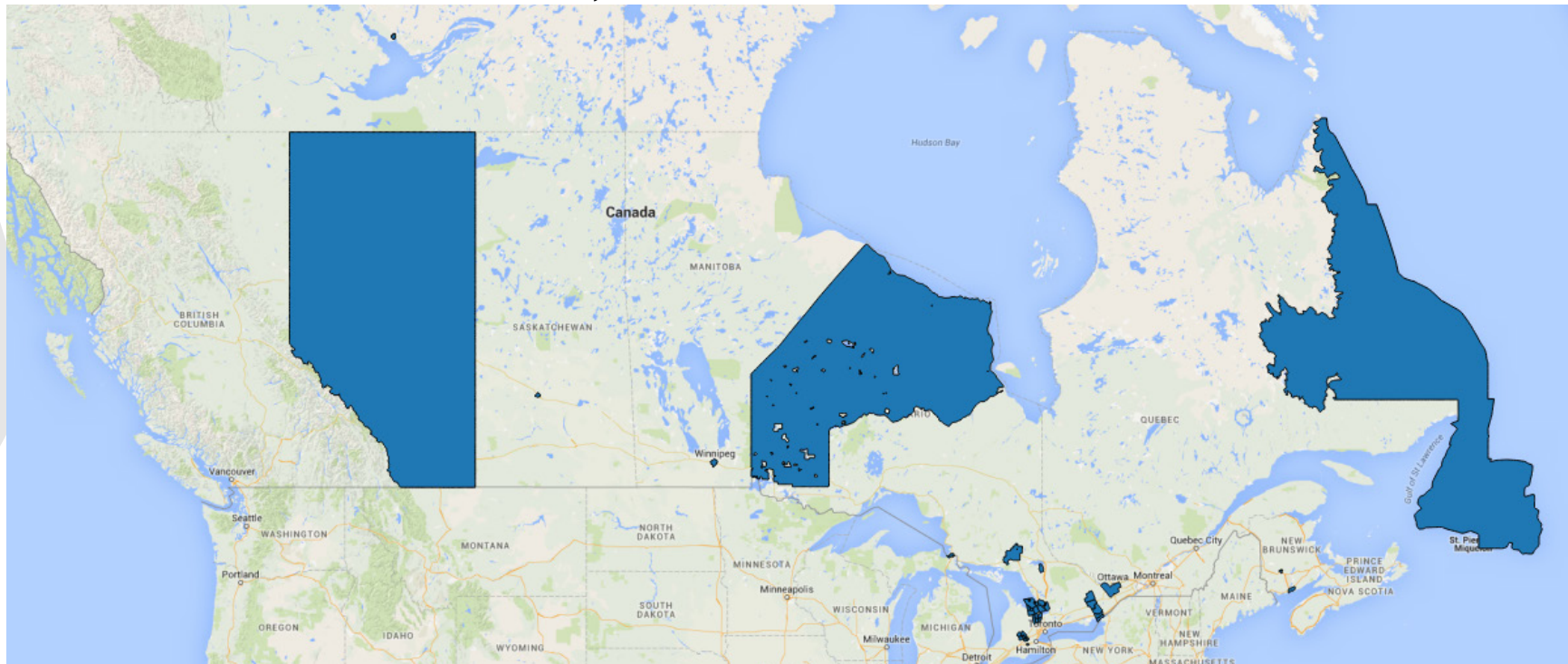
Australia

Queensland
• Brisbane

Mountainland Continuum of Care
HUD Notice of Funding Availability (NOFA)
Open RFP Announcement

Memorandum

To: Interested Parties with Projects Serving Homeless Populations in Utah, Wasatch, and Summit Counties

From: Mountainland Continuum of Care Staff

Date: June 22, 2018

Dear Community Partners,

The Mountainland Continuum of Care (CoC) invites local community members, organizations, and agencies in Utah, Wasatch, and Summit counties that work toward ending homelessness to apply for funding through our program. The CoC offers open membership and provides coordinated planning and funding opportunities to service programs. The purpose of the CoC program is described as follows:

"The Continuum of Care (CoC) Program is designed to promote communitywide commitment to the goal of ending homelessness; provide funding for efforts by nonprofit providers, and State and local governments to quickly rehouse homeless individuals and families while minimizing the trauma and dislocation caused to homeless individuals, families, and communities by homelessness; promote access to and effect utilization of mainstream programs by homeless individuals and families; and optimize self-sufficiency among individuals and families experiencing homelessness." (Source: https://www.hudexchange.info/programs/coc/)

The CoC coordinates access to services, facilitates dialogue and sharing of best practices, and promotes an integrated, systems-based approach to solving homelessness. We need the talent, empathy, and expertise of diverse stakeholders in order to create housing opportunities for the vulnerable in our community. Our combined efforts have contributed to the placement of hundreds of homeless households into permanent housing every year.

The CoC periodically offers funding opportunities for projects and services that are oriented toward permanent housing. The primary annual funding opportunity for these projects is provided by the federal government's Department of Housing and Urban Development (HUD). To find out more information about FY2018's funding opportunity, please join our orientation meeting on Monday, July 16th at 2:00 PM-4:00 PM at United Way of Utah County, 148 North 100 West, Provo, UT 84601. Please RSVP by email to the CoC Planner, Heather Hogue at heatherh@unitedwayuc.org.

To learn more about general CoC events and/or learn more about the Mountainland Continuum of Care, please visit our website at mountainlandcoc.org.

Mountainland Continuum of Care

==FY 2018== CoC HUD Funding Opportunity

The Utah ==FY 2018== Mountainland Continuum of Care funding competition opened June 21ˢᵗ, 2018.
The CoC invites proposals from entities engaged with homeless services, for those either currently engaged with the Continuum of Care or willing to become engaged, for new projects. Applications only consistent with project type eligibility defined by HUD and with the funding priorities established by the CoC are available**.** For profit organizations are not eligible to apply.

The deadline for **all renewal and new project applications is Friday, August 10, 2018 at 11:59PM**.
Any new staff submitting applications for the first time may contact CoC staff to receive training about the technical process and application materials. If you intend to apply for a renewal project you must send a **Letter of Intent** to Heather Hogue via email at heatherh@unitedwayuc.org by **July 27th, 2018 at 5:00 PM**. If you are interested in creating a new project under CoC funding, please also contract Heather Hogue to sign up an orientation session. An informational/grantee **orientation session for NEW applications** will be held **Monday, July 16, 2018 at 4:00 PM** at United Way of Utah County.

New projects may be considered and funded through reallocation of funds from low performing projects or through the permanent housing bonus made available in this competition.

Timeline for project applications:
The Department of Housing and Urban Development (HUD) released the application instructions for FY8's funding competition on June 28th, 2018. Please click here to see the announcement and instructions from the HUD Exchange website. Our CoC has already completed the registration process and is beginning the local competition process for renewal and new projects. For information on how to apply, see the attached document below.

Please note the application timeline for the MTL CoC:

Timeline for project applications:
1. Posting of the announcement of funding on CoC website (mountainlandcoc.org) on June 25, and via email to CoC membership. Posting of the notice in local community forums (newspapers, websites, boards, etc.) will occur by June 26, 2018.

2. A draft of the 2018 Rank and Review Criteria will be posting on the CoC website by July 6, 2018 for public review and comment.

3. An orientation session for new applicants and "new project" applicants will be held on July 16, 2018 from 2:00-4:00pm at United Way of Utah County. Agencies may join by phone. Please call 801-691-7723, passcode 1234#.

4. Organizations applying for renewal projects must submit a letter of intent by July 27, 2018. Please submit letters via email to Heather Hogue at heatherh@unitedwayuc.org.

5. Adoption of the final rank and review criteria will occur in the general CoC meeting on August 13, 2018. Rank and Review Committee members will be voted into placement that day. Nominations for new members may be submitted to Heather Hogue by August 6, 2018. Rank and review committee members shall have no conflict of interest while sitting on the committee. The posting of the final rank and review criteria will also be made available on the CoC website by August 14, 2018.

6. Renewal and new project supplemental applications and e-snaps application are due by 11:59 PM on Friday, August 15, 2018.

7. The Rank and Review Committee will review applications between August 16-22, 2018.

8. Determination of project application ranking in Tier 1 and Tier 2 in CoC Rank and Review meeting on Thursday, August 23, 2018.

9. Notification of agencies regarding project funding ranking by August 28, 2018 by email and through public posting on the CoC website. Formal announcement will also take place in CoC meeting on September 10, 2018.

10. CoC staff will review e-snaps applications to ensure compliance with HUD threshold and application requirements between August 28th through September 7th. Staff will work with agencies to make any needed improvements or modifications.

11. The final due date for the Consolidated Application is September 18, 2018. Our CoC will be turning in the application on Friday, September 14

Timeline for Continuum of Care Collaborative Application:

1. Registration within the required timeframe completed.
2. Reviewed, completed and submitted the GIW in the required timeframe.
3. Final review of HUD approved GIW by CoC staff by June 30th.
4. Review of debrief and scoring of previous collaborative application by CoC staff beginning June 12th.
5. Review of NOFA and collaborative application requirements and process by CoC staff June 28
6. CoC staff will engage organizations to discuss progress made, future plans, goals regarding various components of the Collaborative application between June 28th and September 3, 2018.
7. Acquire all required attachments for the Collaborative Application and Project Listing by September 1, 2018:
    - Certification of Consistency with the Consolidated Plan – HUD-2991 for Provo, Orem, Lehi and MAG
    - CoC Review, Score and Ranking Procedures
    - CoC's Process for Reallocating
    - Public Posting of FY 2017 Project Selections, Ranking and CoC Application.
    - Governance Charter (HMIS Governance)
    - PHA Administrative Plan(s)
    - HDX Report
    - Project reallocation forms (if any)
    - HUD-approved final FY 2017 GIW
8. Initial draft of Collaborative Application narrative posted on website by September 1, 2018 and emailed to CoC membership for review and feedback between September 4 and September 11.
9. Collaborative application with project list submitted to HUD by midnight September 14, 2018.

Eligible new housing projects identified by the HUD NOFA include:

1. **For renewal projects only**: Project applicants can transition an existing renewable component (e.g., TH) to another component (e.g., PH-RRH). To take advantage of the transition grant, the project applicant must use the reallocation process to relocate the existing eligible renewal component to one of the eligible new project components: PH-PSH, PHRRH, Joint TH and PH-RRH, dedicated HMIS, or SSO-CE. The term of the new grant must be for 1 year. A project applicant can transition more than one existing component to create a new component provided the new project meets the following:

- is from the same recipient for the eligible renewal grant(s) being eliminated; and
- the project applicant must provide the grant number(s) of the project(s) being eliminated to create the new project; and
- must attach a copy of the most recently awarded project application

2. **For domestic violence projects only**: Up to $50 million is available for the DV Bonus which will provide housing and services to survivors of domestic violence, dating violence, and stalking. A CoC may apply for up to 10 percent of its Preliminary Pro Rata Need (PPRN), or a minimum of $50,000, whichever is greater, or a maximum of $5 million. A CoC may apply for one of each of the following types of projects which are limited to a 1-year funding request and must follow the Housing First approach:

- Rapid Re-housing (PH-RRH) projects.
- Joint TH and PH-RRH component projects as defined in Section II.C.3.m of this NOFA.
- SSO Projects for Coordinated Entry (SSO-CE) to implement policies procedures, and practices that equip the CoC's coordinated entry to better meet the needs of survivors of domestic violence, dating violence, sexual assault, or stalking (e.g., to implement policies and procedures that are trauma-informed, client-centered or to better coordinate referrals between the CoC's coordinated entry and the victim service providers coordinated entry system where they are different).

Other projects eligible through reallocation of funding:

- PH-PSH;
- PH-RRH;
- Joint TH and PH-RRH
- HMIS (dedicated); and
- SSO-CE.

Consolidation of renewal projects is also eligible through reallocation. If you plan to consolidate, please reach out to Heather Hogue at heatherh@unitedwayuc.org.

HUD and MTL CoC Priorities:
1. Create a systemic response to homelessness
2. Strategically allocate resources
3. End chronic homelessness
4. End family homelessness
5. End youth homelessness
6. End veteran homelessness
7. Use a Housing First Approach

Counties served by the Mountainland CoC:
Utah   Wasatch   Summit

CoC Contact Information:
Please contact Heather Hogue at heatherh@unitedwayuc.org if you are interested in submitting a new project or if you would like additional information.

For More Information:
For information about the Continuum of Care Program and funding, click here. For access to the NOFA and related materials, click here. For email notifications from HUD about the CoC program, click here. All application information will be posted to the Mountainland Continuum of Care website.

UTAH HOMELESS
MANAGEMENT
INFORMATION
SYSTEM

Standard Operating Policies & Procedures

DEPARTMENT OF WORKFORCE SERVICES

1385 South State Street, 4th Floor
Salt Lake City, UT 84115

September, 2014

SOP INFORMATION

	VERSION UPDATES	
DATE OF UPDATE	**DATE OF APPROVAL**	**CHANGES MADE**
FEBRUARY 2009	8.24.2009	
AUGUST 2011	8.8.2011 (MTLAND) 8.18.2011 (SLC) 10.18.2011 (BOS)	UPDATED TO CLIENTTRACK SYSTEM, FORMS UPDATED
MAY 2013	07.17.2013 (STEERING COMMITTEE)	CONTACT INFORMATION; REPLACED APPENDICES H & I WITH NEW STEERING COMMITTEE BY-LAWS AND CoC MOU; INCLUDED NEW POLICIES FOR TECHNICAL ASSISTANCE AND TRAINING, MONITORING AND COMPLIANCE, AND DATA ENTRY
DECEMBER 2013	DATE REVIEWED BY: STEERING COMMITTEE:__1/22/14___ DATE APPROVED BY CoC EXECUTIVE COMMITTE: MTLAND:__1/2014_____ SLC:_____1/2014_____ BOS:_____1/2014_____	VERSION UPDATE SECTION REVISED; CONTACT INFORMATION; CHAPTER 4 MODIFIED TO INCLUDE DATA SECURITY PLAN, PRIVACY PLAN; CHAPTER 6 MODIFIED TO INCLUDE TRAINING DETAIL, AND END-USER ACTIVATION AND DE-ACTIVATION POLICY; CHAPTER 8 MODIFIED TO INCLUDE BEST PRACTICES DATA ENTRY PLAN, DATA QUALITY PLAN; REPLACED APPENDICES C AND J WITH UPDATED PRIVACY POSTING AND MONITORING TOOLS
SEPTEMBER 2014	DATE APPROVED BY STEERING COMMITTEE: 9/3/2014	UHMIS PRIVACY POLICY; UHMIS PRIVACY POSTING AND UHMIS INFORMED CONSENT RELEASE FORM

CONTACT INFORMATION

Utah HMIS

1385 South State Street, 4th Floor

Salt Lake City, UT 84115

UHMIS Contact Information		
Patrick Frost	Utah HMIS Director	pfrost@utah.gov
Michelle Smith	UHMIS System Administrator/Technical Support	msmith@utah.gov
Jayme Day	Research Analyst	jday@utah.gov
Alex Hartvigsen	Intern	alexhartvigsen@utah.gov

UHMIS Website

http://utahhmis.org/

ClientTrack Training Website

http://www.clienttrack.net/uhmis_train/

ClientTrack Production Website

http://www.clienttrack.net/utahhmis

Contents

1. I<small>NTRODUCTION AND</small> P<small>ROJECT</small> O<small>VERVIEW</small>

This document is the Utah Homelessness Management Information System standard operating policies and procedures manual (SOP) which provides standard policies and procedures for Homeless Management Information System (HMIS) implementation for the agency managing the Utah HMIS (known as the UHMIS Lead or Lead Agency), Continua of Care and Contributing HMIS Organizations (CHOs). It also provides the framework for the ongoing operations of UHMIS. This introduction provides an overview of the main objectives, direction and benefits of UHMIS. In subsequent sections, this document addresses HMIS participation by CHOs, Client informed consent rights, data security policies, monitoring and compliance, training assistance, and data entry guidelines. This document also includes several forms employed in UHMIS implementation and use as appendices. Operating Procedures provide specific policies and steps necessary to control the operational environment and enforce compliance in:

- **Data Security**
- **Data Coverage**
- **Operational Compliance across multiple grant requirements**

In 2001, Congress delegated the [U.S. Department of Housing and Urban Development (HUD)](#) to lead communities to develop an unduplicated count of the homeless.

To meet this goal, HUD required federally funded public and nonprofit organizations to implement a homeless tracking system. Out of this directive came the [Homeless Management Information System (HMIS)](#), a computerized data collection application that facilitates the collection of information on homeless individuals and families using residential or other homeless assistance service agencies, and stores that data in a centralized database for analysis.

One explicit goal of developing HMIS is to gain a clearer understanding of the prevalence of homelessness and to track client service needs over time. We also aim to understand the complexities of needs of those who experience homelessness, and can better plan for a more responsive system of homeless service provision.

UHMIS is staffed at the State Community Services Office (SCSO) which is responsible for the administration and technical assistance of UHMIS software to the UHMIS CHOs and end-users.

Benefits of UHMIS
Described below are the overall benefits of the UHMIS, but not limited to:

- Streamline Reporting on all levels (Agency, Continuum, and State).
- Assist in the Coordination of Services and Programs within various communities.
- Ensure data quality and integrity.
- Meet compliance requirements of various funding sources.
- Provide outcome information of programs and services.
- Preparation of HUD required reports including agency-level Annual Performance Reports (APR), Annual Homelessness Assessment Report (AHAR), data compilation for the Notice of Funding Availability (NOFA), etc.1`

2. HMIS P<small>ARTICIPATION</small>
In order to participate in UHMIS, all CHOs must provide an **Agency Partner Agreement** (Appendix A) and a Data Sharing Memorandum of Understanding (MOU) (Appendix B). In addition, participating CHO personnel must receive training by the lead agency and sign an **End-User Agreement** (Appendix C). Training by the lead agency is addressed in section five. Independent researchers or research agencies requesting access to UHMIS must provide a completed Research Access Agreement (Appendix D).

3. UHMIS PRIVACY POLICY AND DATA SHARING POLICY

This agency is part of the Utah Homeless Management Information System (UHMIS). UHMIS is a system that uses computers to collect information about homelessness. The reason for UHMIS is to track funding for homeless programs given by many funders. The goal is to simplify service delivery to people in need.

UHMIS operates over the internet and uses many security protections to keep client information safe. Many service providers across Utah use UHMIS, so client information will be shared with other service providers that provide similar services. This is done to provide services to clients in the best way possible.

Information collected is housed in a secure server located at Data System International (DSI), in Sandy, Utah. DSI employees have access to this server and the data housed there, but only for network support and maintenance purposes. UHMIS staff and approved Utah State Community Services Office (SCSO) staff collect and use only information that is needed for reports on homelessness to help inform policy decisions. Every person with access to this information must sign and comply with all confidentiality agreements.

Client consent is required for your information to be entered into HMIS. Utah HMIS has a tiered approach to client consent.

Tier I minimum standard: Emergency Shelters, Street Outreach and Coordinated Quick Assessment Projects:

- Projects must post the UHMIS privacy posting in an area easily accessible to clients. If the client is being served over the phone, the agency will read the statement to the client found in the UHMIS Privacy Posting.

Tier II minimum standard: All other projects

- Projects much post the UHMIS Privacy Posting and gather a signed UHMIS Informed Consent Release form from their clients. For clients participating in these programs this form must be gathered before their information is entered into UHMIS.

This tiered approach to gathering client consent is consistent with regulations set forth by HUD, please see: Federal Register/ Vol. 69, No. 146 / Friday, July 30, 2004 / Notices.

Clients may cancel their consent to share their information at any given time by written request to this agency. The cancellation will not be applied to records already collected from the client. If clients choose to not give consent, it does not make the client ineligible to receive services unless the client is applying for the Homeless Prevention and Rapid Re-housing Funding thru ESG, SSVF, TANF.

What Data Are We Sharing

Shared between and editable by all participating organizations:

- Client Intake record: Name, Birth date, Social Security Number, Gender, Race, Ethnicity
- Family and Contact Information: Family Name, Family Relationships, Family Address,
- Client Photo

Shared between all participating organizations:

- Program Enrollments: Case Name, Entry Date, Exit Date, Program Name, User Name, Program Type, Organization Name
- General Client assessment data: income, general health, education, etc.

Limited to the organization that created the record:

- Sensitive client data, such as: Case Notes, HIV/AIDS Barrier, Mental Illness, Domestic Violence assessment, alcohol abuse and substance abuse assessment

How We May Use and Disclose Client Information

We only collect information that is needed for 1) case management, 2) administrative, 3) billing and disclosures, 4) analytical, 5) other purposes as permitted by the client or required by law. We do not use or reveal client information

without client written consent, except in certain situations. These situations are when required by our funders or by law, or for specific administrative or research purposes. These specific purposes are outlined in our policy.

- **Case Management:** Agencies may use or give client information for case management purposes to help match services. Unless a client requests that his/her record remain hidden, personal identifiers will only be given to HMIS participating agencies. Agencies may only give client information with written client consent or other specific waiver.
- **Administrative Uses:** Agencies may use client information to carry out administrative functions internally including but not limited to report, checks, oversight, and management functions. Client information is stored on a central statewide database. Client information will be given for system administration purposes by the Lead Agency or contractors who administer the central database.
- **Billing Use:** Agencies my use client information for functions related to payment or reimbursement for services if required by the funder/billing agency.
- **Analytical Use:** Agencies may use client information for internal analysis including but not limited to evaluating program effectiveness, creating an unduplicated database on clients served within the system, understanding needs and trends in homelessness, and assessing Utah's Plan to End Homelessness. Information that could be used to identify the client will never be included in these reports.
- **Required by Law:** Agencies may give client personal information that meets the minimum standard necessary for the immediate purpose to comply with legal requirements. Agencies may only give client information to law enforcement entities in response to appropriate legal requests including subpoena or court order.
- **Other:** Agencies may give client information to an agency authorized by law to receive reports of abuse, neglect, or domestic violence if this agency believes the clients are the victim of such treatment on the circumstance that 1) the disclosure is required by law, 2) the client agrees to this disclosure, 3) this agency believes the disclosure is necessary to prevent serious harm. An agency may give client information if it believes it is necessary to prevent or lessen a serious or imminent threat to the health and safety of an individual or public, and if that information is given to a person reasonably able to prevent or reduce that threat.

Client records are maintained on the HMIS system for a period of seven years from its last modification date after which, personally identified information is removed and the remaining information is stored in a de-identified format. If clients have any questions about the use of their personal information or are concerned about client privacy or safety, they should share their questions or concerns with staff. If a client feels that the security or integrity of their information has been violated by an end-user or agency itself, CHOs are required to provide a client with a Grievance Filing Form (Appendix G) and submit it to the lead agency. The lead agency will investigate each grievance and submit suggested actions to the CHO within 30 days.

Clients that submit a grievance filing form will not be retaliated against for filing a complaint. You may also ask for a copy and/or an explanation of the privacy policy.

Client Rights

- Clients have the right to get services even if they choose **NOT** to participate in the UHMIS.
- Clients have the right to ask who has seen their information.
- Clients have the right to see their information and to change it if it's not correct. Clients must show documentation to do so.

A list of participating agencies is available from their case manager or online at http://hmis.utah.gov. If clients don't want their information shared with a specific agency, need to let their case manager or intake worker know. He/she can then take the proper action to honor their request.

Changes to This Policy

Changes to our privacy practices and the terms of this Policy may apply to all client information in HMIS. We reserve the right to change our privacy practices and the terms of this Policy at any time, including protected personal information created or received before we made the changes, provided such changes are permitted by applicable law. Before we make

a significant change in our privacy practices, we will change this Policy. A copy of the revised Policy will be posted at our location and on our website, and available upon request.

We are required by applicable federal and state law to maintain the privacy of clients' personal information. We are required to provide this Policy of our privacy practices, legal duties, and clients' rights concerning their protected personal information. We must follow the privacy practices that are described in this Policy while it is in effect. This Policy takes effect immediately, and will remain in effect until we replace it.

4. DATA SECURITY POLICIES AND PROCEDURES

In accordance with 2010 HUD data security guidelines, this section reviews the UHMIS Privacy Plan, including physical and technical safeguard, and data disposal policies. It also outlines the UHMIS Data Security Plan with guidelines for administrative responsibilities to protect data security, and reporting data security breaches. These policies are designed to secure Personal Protected Information (PPI) that allows identification of an individual directly or indirectly, can be manipulated by a reasonably foreseeable method to identify a specific individual, or can be linked with other available information to identify a specific individual.

4.A. Utah HMIS Privacy Plan

4.A.1   Physical Safeguards

a. The HMIS lead agency and CHOs will take all reasonable, foreseeable and protective actions to physically secure the PPI of clients. These actions are listed below but do not represent an exhaustive list of physical safeguards.

   i.   To secure protected personal information when transmitting written communication about clients, all users will use the ClientID to refer to the client.
   ii. Hard copies of client information or reports with protected personal information will be kept in a locked cabinet or storage area when unattended.
   iii. Loose papers or notes with client information not stored in the clients file will be securely destroyed.
   iv. The lead organization and CHOs will minimize the visibility of computer/tablet/phone screens used to limit HMIS access to unauthorized individuals.
   v.   Documents that contain passwords will be kept physically secure.
   vi. The servers that house UHMIS information will be kept in a secured and monitored facility.

4.A.2   Technical Safeguards

a. The HMIS lead agency and CHOs will take all reasonable, foreseeable and protective actions to technically secure the protected personal information of clients. These actions are listed below but do not represent an exhaustive list of technical safeguards.

   i.   Users will change their passwords at least once annually.
   ii. Terminals used to access HMIS will have locking screen savers and will be password protected.
   iii. Users will not leave UHMIS open and running when terminal is unattended.
   iv. Users will be automatically logged off after 30 or less minutes of inactivity.
   v.   Electronic Documents stored outside of a private protected local network that contain protected personal information must be password protected.
   vi. All computers accessing HMIS must have regularly updated anti-virus software installed that automatically scans files.

4.A.3   Data Disposal

a. The HMIS Lead will annually review PPI associated with clients for data no longer in use. Client records will be maintained on the HMIS system for a period of seven years from its last modification date after which, PPI will be removed and the remaining information shall be stored in a de-identified format.

4.B. Utah HMIS Security Plan

This section includes the UHMIS Security Plan implementation. Within twelve months of UHMIS SOP finalization by the Executive Committees of Utah's CoCs, all parts of the security plan will be completely implemented across all CHOs in each CoC by UHMIS. The following steps include administrative safeguards to be implemented by the lead agency and CHOs including the designation of security officers that participate in security monitoring for HUD security compliance.

4.B.1   Administrative Safeguards

There will be one lead security officer designated within the HMIS lead agency. The name and contact information of the current security officer at the lead agency can be found on the Utah HMIS website (http://hmis.utah.gov/). The lead security officer's responsibilities are as follows:

a. The lead security officer will provide an annual training and guidance to CHO security officers
b. At least twice a year the lead agency will offer a security specific training for users who need to recertify their annual security training
c. Work with the HMIS Steering Committee and CoC to develop and implement the security plan and review/update it annually
d. Keep a current list of the names and contact information for each CHO security officers
e. Be the primary contact for the CHO's security officer and work with them to resolve security issues
f. Ensure that CHOs are performing background checks on their security officers
g. Upon receipt of notification from a CHO to deactivate access for employee/volunteers that no longer need access, the lead HMIS security officer will ensure that the lead agency deactivates access within five business days.

There will be one security officer designated at each CHO. The responsibilities of this security officer are as follows :

a. Provide name and contact information to the lead HMIS security officer
b. Ensure that all other employees in the organization are current in their security training
c. At least once a year the CHO security officer will conduct a review of organization practices, policies and procedures to ensure that they are in compliance with the security plan.
d. Keep list of active users and notify HMIS when within two business days to deactivate access for employee/volunteers that no longer need access

Both the Lead and CHOs security officers are responsible for ensuring compliance with applicable security standards. CHOs will perform a background check on designated security officers and any administrative users.

Prior to being given access to HMIS all users must participate in a basic end user security training for certification in HMIS. The training will be provided by someone at the HMIS lead agency (unless authorization from Utah HMIS has been given for training to be offered within the organization) and will include information to safeguard privacy and improve data security. Contents of training is discussed in greater detail in section 6. Trainees will complete and return a copy of the UHMIS End User Agreement. The HMIS lead agency will offer the basic end user training on a regular basis and will make efforts to provide additional training as needed. All users of HMIS will need to participate in training addressing data privacy, security and data quality at least annually. The HMIS lead agency will offer annual security training at least twice a year.

4.B.2   Reporting Security Incidents

A security incident is defined as the act of violating an explicit or implied security policy including but not limited to:

a. Attempts (either failed or successful) to gain unauthorized access to a system or its data

b. Unauthorized access to PPI due to misplaced, lost, or otherwise compromised access

c. The unauthorized use of a system for the processing or storage of data

d. Unwanted disruption or denial of service

e. Changes to system hardware, firmware, or software characteristics without the owner's knowledge, instruction, or consent

If a user notices or suspects a security breach, they must immediately notify the CHO's security officer. CHO security officers should report incidents to the lead agency security officer in instances a through c above. In instances d and e, CHO security officers should conduct an internal investigation and, if needed then contact the HMIS lead security officer for further resolution. If the user and the CHO's security officer is the same person, then that person will contact the HMIS lead security officer in every case when they notice or suspect a security breach.

4.B.3 Disaster Recovery Plan

In conjunction with their contract with ClientTrack, the UHMIS lead agency will follow the disaster recovery plan provided by ViaWest. This plan is available on the internet: https://docs.google.com/a/utah.gov/file/d/0B8h2IWCp2iVULXJpRE81V3Jqalk/edit.

4.B.4 Contracts and Other Arrangements

The HMIS Lead must retain copies of all contracts and agreements executed as part of the administration and management of HMIS. As indicated above, CHOs that wish to share client information with other agencies to better facilitate program management must have a **Data Sharing MOU** (Appendix B) in place before the UHMIS team grants access to information outside of the originating agency.

5. MONITORING AND COMPLIANCE

In conjunction with the Data Security Plan outlined in section four, this section delineates the duties of security officers from the lead agency and CHOs. All programs participating in the Utah HMIS will be monitored annually for data security and data security best practices according to guidance set forth by 2010 HUD data security guidelines using the Utah HMIS **Security Checklist** (see Appendix H). Monitoring will be conducted by Utah HMIS, CoC approved staff or related local or state monitors requiring HMIS data compliance. UHMIS staff will visit all participating agencies across Utah at least once annually. The purpose of the visit is to monitor data security practices and to discuss any changes to the program or staff. Utah HMIS will also collect feedback to improve the HMIS Lead Agency.

5.A. Annual Security Review

5.A.1 At least annually the HMIS lead security officer and the CHO security officers will conduct a security review. This process will include the completion of the **UHMIS Security Checklist** (Appendix H) for each CHO.

5.A.2 CHO's security officer responsibilities include:
a. Review and complete the UHMIS Security Checklist during the second quarter of each year during UHMIS participation.
b. Submit the completed UHMIS Security Check list to the HMIS lead security officer.
c. Develop plans with the lead security officer to improve or correct issues that were found using the UHMIS Security Checklist.

5.A.3 UHMIS lead security officer security responsibilities include:
a. Complete the UHMIS Security Checklist during the second quarter of each year.
b. Review the completed and submitted UHMIS Security Checklists from CHOs.
c. Make a plan with CHO security officers to improve or correct issues found using the UHMIS Security Checklist.

6. TRAINING AND TECHNICAL ASSISTANCE

Utah HMIS will offer regular training from their offices and offer the ability to conference into training for remote trainees. Onsite training will be offered at three certification levels: new users, administrators, and program directors. The content of trainings is outlined below including the content of the training, attendees, skills, and schedules for the different certification levels.

6.A. Training for End Users

6.A.1. Content of the training
   a. UHMIS website
   b. Privacy of information and data security
   c. Data quality
   d. ClientTrack basics
      i. Enrollment
      ii. Recording a service
      iii. During program enrollment assessments (annual assessment)
      iv. Exiting Clients
      v. Submitting an issue

6.A.2. Who is required to attend
   a. Any one person who needs a UHMIS user account

6.A.3. Tasks new users must complete in the UHMIS training environment before being given access to the UHMIS
   a. Attend the UHMIS end user training
   b. Enroll two fictitious individuals and one fictitious family in programs in the training website
   c. Record services for these people
   d. If set up in the UHMIS: HUD Competitive workgroup they need to perform during program enrollment assessment
   e. Exit these individuals
   f. Return a signed (by both the individual and the agency director) copy of the "UHMIS Ender User Agreement" to the UHMIS staff

6.A.4. Schedule
   a. For new agencies/new programs
   b. Whenever possible UHMIS staff will offer to provide onsite training to new agencies. If this is not an option they will set up a time separate from other end user trainings to train the individuals at the new agencies.
   c. Regularly scheduled trainings
      i. UHMIS will offer end-user training at least twice a month
      ii. These will typically take place on the second and third week of every month
      iii. In most instances these will be held in the UHMIS office building but will be made available via conference call and over the internet for those users that cannot make it to the office.
      iv. If the regularly scheduled trainings do not meet the needs of an agency UHMIS will work with them to set a training with them.

6.B. Training for Reporting

6.B.1. Content of the training

   a.   Privacy of information and data security
   b.   Data quality
   c.   Canned Reports
        i.   Using filters
        ii.   Data export options
   d.   The APR
             i.   Auditing data connected to performance measures
   e.   Data Explorer Basic
   f.   Data clouds
             i.   Linking clouds
             ii. Using filters

6.B.2. Who is required to attend

   a.   Anyone who will be pulling and reporting UHMIS data

6.B.3.   Schedule

   a.   Report training will be offered the last week of a month. In most instances these will be held in the UHMIS
        office building but will be made available via conference call and over the internet for those users that cannot
        make it to the office.
   b.   If the regularly scheduled trainings do not meet the needs of an agency, UHMIS will work with them to set a
        training with them.

6.B.4.   Annual privacy or information, data security and data quality review

   a.   Content
             i.   Privacy of information and data security
             ii. Data quality
   b.   Who is required to attend
             i.   All UHMIS users at least once a year
   c.   Schedule
             i.   These trainings will take place twice a year in the first and third quarter. There will be at least two
                  sessions each time it is offered to give flexibility to those that need to attend. In most instances these
                  will be held in the UHMIS office building but will be made remotely available via conference call and
                  over the internet. If the regularly scheduled trainings do not meet the needs of an agency UHMIS will
                  work with them to set trainings with them.

6.C. Training for Program Directors

6.C.1.   Content of the training

   a.   Privacy of information and data security
   b.   Data quality
   c.   Canned Reports
             i.   Using filters
             ii.   Exporting option
             iii. Using the export to excel data
   d.   The APR
             i.   Auditing data connected to performance measures
   e.   Data Explorer Basic

      f.   Data clouds
- i.   Linking clouds
- ii.   Using filters

6.C.2.   Who is required to attend
    a.   Program directors who will be pulling and reporting UHMIS data

6.C.3.   Schedule
    a.   UHMIS will regularly offer data analysis and report training the last week of the month. In most instances these will be held in the UHMIS office building but will be made available via conference call and over the internet for those users that cannot make it to the office.

    b.   If the regularly scheduled trainings do not meet the needs of an agency UHMIS will work with them to set a training with them.

6.D. Annual Privacy and Data Security Review

6.D.1.   Content
    a.   Privacy of information and data security
    b.   Data quality

6.D.2.   Who is required to attend
    a.   All UHMIS users at least once a year

6.D.3.   Schedule
    a.   These trainings will take place twice a year about six months apart. There will be at least two sessions each time it is offered to give flexibility to those that need to attend. In most instances these will be held in the UHMIS office building but will be made available via conference call and over the internet for those users that cannot make it to the office. If the regularly scheduled trainings do not meet the needs of an agency UHMIS will work with them to set a training with them.

6.E. Other Training

6.E.1.   End User Groups
    a.   These trainings will be led by End User leads with support from the UHMIS staff.
- i.   End user leads are prominent UHMIS end users that come from CHOs from across the state acting in the capacity of proficient HMIS end users.
- ii.   The End User lead is a volunteer position.

    b.   Content of the training
- i.   The content of the training will be set by the End User leads and can vary from meeting to meeting, but will be will relevant to data quality, data definitions, software use, case management issues, or other HMIS topics

    c.   Who is required to attend
- i.   All end users from any agency are encouraged to attend

    d.   Schedule
- i.   These trainings will take place quarterly as determined by End User leads.

UHMIS will work with the UHMIS Steering Committee, CHOs, UHMIS lead user groups and UHMIS end users to provide any other training as needed.

6.F. Technical Assistance

All issues and questions are required to be submitted through the Help feature in ClientTrack. The Help feature in ClientTrack records vital information to help resolve issues including: workgroup, screen, client information and report parameters. If the issue question requires an answer within three hours, users may call any Utah HMIS team member.

All issues will be addressed within five business days, questions will be answered within three business days and suggestions will be reviewed by the Utah HMIS team. Depending on the complexity of the issue and/or question it might take longer to resolve the issue.

6.G. HMIS End User Registration

End Users will be registered into HMIS after the designated training for End-Users protocols have been met. End-Users who have not entered the HMIS system for 90 days or more will be designated as "Inactive" and will automatically have their HMIS account deactivated, including the deactivation of a working password.

6.H. HMIS End User Inactivation

Monthly end user reports will be generated by UHMIS team members using the Organization User List report under the User & Administration Reports folder in HMIS and distributed to CoC leadership. Those agencies with personnel designated with "Inactive" status will be contacted by the lead agency for verification. Written notification of inactive users from the agency will be included the HMIS agency files. CHOs will notify the Utah HMIS team of any personnel whose employment has been terminated in order to deactivate that employee's HMIS access. The lead agency will deactivate access within five business days.

7. DATA ENTRY POLICIES AND PROCEDURES

All agencies shall consistently enter or upload information into the UHMIS database with <u>five</u> working days of seeing the client. This is to ensure that accurate and timely data is being reported to Local, State, and Federal government entities. Data should be entered or uploaded within 24 hours where possible (see also the Agency Partner Agreement in Appendix A). All agencies should develop a client record verification/audit procedure and regular times (at least quarterly) for verifying HMIS data.

7.A. Utah HMIS Best Practices Data Entry Plan

7.A.1   Agencies need to have timely and correct data within Utah HMIS. The following section describes best practices data entry policy for each program type. **All agencies need to have quarterly data entered and corrected by the HMIS Data Pull date.** All Programs need to have a client record verification/audit procedure and timeframe for verifying HMIS data at least quarterly.

7.A.2   Timely data entry is explained for Permanent Supportive Housing Programs

a.   Entry enrollment data will be entered into Utah HMIS within five business days of enrollment.

b.   Assessment will be entered into Utah HMIS within five business days of contact(s) with the client(s).

c.   Exit enrollment will be entered into Utah HMIS within five business days of client exit out of the program. If client disappears or an agency has no contact with the client and program policy has determined that the client has left the program, the exit must be done within five business days of determining that the client(s) has exited the program.

d.   Data Correction

   i.   Backdate entry, assessment and exit enrollments within five business days.

   ii.   Deletion must be submitted to the Utah HMIS within 30 days of the record date.

   iii. Correcting information must be completed quarterly within the program.

7.A.3   Timely data entry is explained for <u>Transitional Housing Programs</u>

a.   Entry enrollment data will be entered into Utah HMIS within five business days of enrollment.

b.   Assessment will be entered into Utah HMIS within five business days of contact(s) with the client(s).

c.   Exit enrollment will be entered into Utah HMIS within five business days of client exit out of the program. If client disappears or an agency has no contact with the client and program policy has determined that the client has left the program, the exit must be done within five business days of determining that the client(s) has exited the program.

d.   Data Correction

   i.   Backdate entry, assessment and exit enrollments within five business days.

   ii.   Deletion must be submitted to the Utah HMIS within 30 days of the record date.

   iii. Correcting information must be completed within 30 days after the end of the current quarter.

7.A.4.   Timely data entry is explained for <u>Emergency Shelter Programs</u>

a.   Entry enrollment data will be entered into Utah HMIS within ten business days of enrollment.

b.   Assessment will be entered into Utah HMIS within ten business days of contact(s) with the client(s).

c.   Exit enrollment will be entered into Utah HMIS within ten business days of client exit out of the program. If client disappears or an agency has no contact with the client and program policy has determined that the client has left the program, the exit must be done within five business days of determining that the client(s) has exited the program.

d.   Data Correction

   i.   Backdate entry, assessment and exit enrollments within ten business days.

   ii.   Deletion must be submitted to the Utah HMIS within 30 days of the record date.

   iii. Correcting information must be completed within 30 days after the end of the current quarter.

7.A.5.   Timely data entry is explained for <u>Rapid-Rehousing and Homeless Prevention programs</u>

a.   Entry enrollment data will be entered into Utah HMIS within five business days of enrollment.

b.   Assessment will be entered into Utah HMIS within five business days of contact(s) with the client(s).

c.   Exit enrollment will be entered into Utah HMIS within five business days of client exit out of the program. If client disappears or an agency has no contact with the client and program policy has determined that the client has left the program, the exit must be done within five business days of determining that the client(s) has exited the program.

d.   Data Correction

   i.   Backdate entry, assessment and exit enrollments within five business days.

   ii.   Deletion must be submitted to the Utah HMIS within 30 days of the record date.

   iii. Correcting information must be completed within 30 days after the end of the current quarter.

7.A.6.   Timely data entry is explained for <u>Outreach and Services only programs</u>

    a.   Entry enrollment data will be entered into Utah HMIS within five business days of enrollment.

    b.   Assessment will be entered into Utah HMIS within ten business days of contact(s) with the client(s).

    c.   Exit enrollment will be entered into Utah HMIS within ten business days of client exit out of the program. If client disappears or an agency has no contact with the client and program policy has determined that the client has left the program, the exit must be done within five business days of determining that the client(s) has exited the program.

    d.   Data Correction

      i.   Backdate entry, assessment and exit enrollments within ten business days.

      ii.   Deletion must be submitted to the Utah HMIS within 30 days of the record date.

      iii.   Correcting information must be completed within 30 days after the end of the current quarter.

7.B. Quarterly Data Quality Reports

7.B.1. Data Quality Reporting Schedule

Utah HMIS will pull quarterly performance measurements on each program in CHOs. Quarterly data quality reports will be submitted by the lead agency with items identified for improvement to the CoC Steering Committee and each grantee according to the schedule below. Actions to improve data quality required by HUD guidelines will be suggested by the CoC and aided by the HMIS agency.

Quarterly Point In Time Data Collection Date	Reporting Time Period	HMIS Data Pull Date	HMIS reporting to grantees
July (last Wednesday)	May-July	August (first Wednesday)	September
October (last Wednesday)	August – October	November (first Wednesday)	December
January (last Wednesday)	November- January	February (first Wednesday)	March
April (last Wednesday	February – April	May (first Wednesday)	June

Utah HMIS will provide each agency and grantee instructions on what reports are being pulled and how the data is compiled and analyzed at start of each contract.

7.B.2 Discrepancies in Data

If at the time of quarterly reporting, agency program information is reported incorrectly the agency will submit a letter of explanation to the grantee(s) and Utah HMIS. Utah HMIS will not re-run the quarterly performance measurement reports, the report will stand as is. The CHO letter will be attached to the report.

7.B.3. Request of Deletion Past the Program Policy

Starting January 2014, CHOs needing information deleted from a client record that is past the program policy date must submit an explanation letter to the Utah HMIS explaining why the agency was unable to follow the program policy. The lead agency will submit the CHO letter to the Utah HMIS Steering Committee who will be notified of the request for deletion. The agency letter will be put into the Agency file at the lead HMIS agency.

7.C. Utah HMIS Data Quality Plan

Utah HMIS collects a variety of data elements that change over time during a client's homelessness. This document reviews Utah HMIS policies for Data Quality.

Data quality of Universal Data will be assessed quarterly among all Utah Continua. Data quality reports assess frequency of missing data, "Don't Know," and "Refused" responses by agency across each homelessness program type.

Universal and Program Data Standards

Data Element	Utah CoC Standards for data on all clients	HUD Standards for Missing Data (includes "Don't Know" or "Refused")
Universal Data		
Name[1]	100%	0%
Social Security Number (SSN)[1]	100%	5% or less
Date of Birth (DOB)[1]	100%	1% or less
Gender[1]	100%	1% or less
Race[1]	98%	5% or less
Ethnicity[1]	100%	1% or less
Disabling Condition	98%	5% or less
Veteran Status	98%	5% or less
Residence Prior to Program Entry	95%	10% or less
Zip Code of Last Permanent Address	95%	10% or less
Length of Stay in prior residence	95%	10% or less
Homelessness Status	100%	1% or less
Program Entry Date	100%	1% or less
Program Exit Date	100%	1% or less
Program Data		
Income and Sources	100%	5% or less
Non-Cash benefits	100%	5% or less
Physical Disability	98%	5% or less
Developmental Disability	98%	5% or less

Chronic Health Condition	98%	5% or less
Mental Health	98%	5% or less
Substance Abuse	98%	5% or less
Domestic Violence	90%	15% or less
Destination	95%	10% or less
Reason for leaving	95%	10% or less
[1] One or more of these personal identifiers may need to be collected on subsequent visits to retrieve the client record, though this information needs only to be recorded on initial program entry		

Corrections in ClientTrack should only be done when information in the system is incorrect. A new assessment should be done when information is updated. This document indicates data element quality standards as set by HUD. Data quality reporting will follow the schedule set forth in section 7.B.1.

8. UHMIS GOVERNANCE

The general structure, roles, and responsibilities of the invested parties and/or entities of the UHMIS lead agency are designated in Appendix I: Utah HMIS and CoC MOU. By-laws of the HMIS Steering Committee are outlined in Appendix J.

9. GLOSSARY OF TERMS AND USEFUL ACRONYMS

A	B	C	D	E	F	G	H	I	J	K	L	M
N	O	P	Q	R	S	T	U	V	W	X	Y	Z

A

Annual Homeless Assessment Report (AHAR): HUD's annual report to Congress on the nature and extent of homelessness nationwide. The report details yearly homelessness counts, demographics, trends, and service usage; reports are compared and contrasted to data collected for previous years, helping to determine if homelessness is increasing or decreasing.

Annual Performance Report (APR): The APR is a performance based report that HUD uses to track program progress and accomplishments of HUD homeless assistance programs on an annual basis. The majority of this report is pulled from the UHMIS system and then reported to HUD in the HDX system. This report was formerly known as the Annual Progress Report.

B

Bed Utilization: An indicator of whether shelter beds are occupied on a particular night or over a period of time.

C

Contributory HMIS Organization (CHO): An organization that operates a contributory homeless assistance program or homelessness prevention program or contributory non-homeless assistance program.

Chronically Homeless Individual: An unaccompanied homeless adult individual (persons 18 years or older) with a disabling condition (see definition below) who has either been continuously homeless for a year or more OR has had at least four (4) separate occasions of homelessness in the past three (3) years. To be considered chronically homeless, persons must have been sleeping in a place not meant for human habitation (e.g., living on the streets) and/or in an emergency shelter/Safe Haven during that time. Persons under the age of 18 are not counted as chronically homeless. For purposes of the PIT, persons living in transitional housing at the time of the PIT count should not be included in this subpopulation category.

Chronically Homeless Family: A household with at least one adult member (persons 18 or older) who has a disabling condition (see definition below) and who has either been continuously homeless for a year or more OR has had at least four (4) separate occasions of homelessness in the past three (3) years. To be considered chronically homeless, persons must have been sleeping in a place not meant for human habitation (e.g., living on the streets) and/or in an emergency shelter/Safe Haven during that time. The subpopulation count should include all members of the household. For purposes of the PIT, persons living in transitional housing at the time of the PIT count should not be included in this subpopulation category.

Client: A living individual about whom a Contributory HMIS Organization (CHO) collects or maintains protected personal information: (1) because the individual is receiving, has received, may receive, or has inquired about services from a CHO; or (2) in order to identify service needs, or to plan or develop appropriate services within the CoC.

Community Development Block Grant (CDBG): Federal HUD formula grant program providing communities with resources to address a variety of community development needs. CDBG is awarded to entitlement communities to carry out a wide range of community development activities directed toward revitalizing neighborhoods, economic development, and providing improved community facilities and services.

Consolidated Plan: A long-term housing and community development plan developed by state and local governments and approved by HUD (24 CFR Part 91). The Consolidated Plan contains information on homeless populations and should be coordinated with the CoC plan.

Continuum of Care (CoC): The primary decision making entity defined in the funding application to HUD as the official body representing a community plan to organize and deliver housing and services to meet the specific needs of people who are homeless as they move to stable housing and maximum self-sufficiency. Utah has three CoCs: Salt Lake, Mountainland and Balance of State. The Salt Lake continuum consists of the Salt Lake and Tooele Counties. The Mountainland continuum consists of Utah, Summit, and Wasatch counties. The Balance of State continuum consists of all other counties no contained in the other two continua.

D

Data Recipient: A person who obtains PPI from an HMIS Lead Agency or from a CHO for research or other purposes not directly related to the operation of the HMIS, CoC, HMIS Lead Agency, or CHO.

Disabling Condition: Any one of (1) a disability as defined in Section 223 of the Social Security Act; (2) a physical, mental, or emotional impairment which is (a) expected to be of long-continued and indefinite duration, (b) substantially impedes an individual's ability to live independently, and (c) of such a nature that such ability could be improved by more suitable housing conditions; (3) a developmental disability as defined in Section 102 of the Developmental Disabilities Assistance and Bill of Rights Act; (4) the disease of acquired immunodeficiency syndrome or any conditions arising from the etiological agency for acquired immunodeficiency syndrome; or (5) a diagnosable substance abuse disorder.

E

Emergency Shelter (ES): A homeless program that is intended to provide short term support and emergency housing to homeless individuals. Individuals you are in sating in an emergency shelter as still considered literally homeless. Emergency shelter may take to from of a congregate shelter, motel vouchers, or a domestic violence shelter.

Emergency Solutions Grant (ESG): ESG is a federal grant that is given to eligible states, cities, counties and territories. The ESG program provides funding to: (1) engage homeless individuals and families living on the street; (2) improve the number and quality of emergency shelters for homeless individuals and families; (3) help operate these shelters; (4) provide essential services to shelter residents, (5) rapidly re-house homeless individuals and families, and (6) prevent families and individuals from becoming homeless.

End User (or User): An employee, volunteer, affiliate, associate, and any other individual acting on behalf of a CHO or HMIS Lead Agency who uses or enters data in the HMIS or another administrative database from which data are periodically uploaded to the HMIS.

F

G

H

Hashing: The process of producing hashed values for accessing data or for security. A hashed value is a number or series of numbers generated from input data. The hash is generated by a formula in such a way that it is extremely unlikely that some other text will produce the same hash value or that data can be converted back to the original text. Hashing is often used to check whether two texts are identical. For the purposes of Homeless Management Information Systems it can be used to compare whether client records contain the same information without identifying the clients.

Health Insurance Portability and Accountability Act of 1996 (HIPAA): U.S. law designed to provide privacy standards to protect patients' medical records and other health information provided to health plans, doctors, hospitals, and other health care providers. Developed by the Department of Health and Human Services, these standards provide patients access to their medical records and give them more control over how their personal health information is used and disclosed.

HMIS Lead Agency: An organization designated by a CoC to operate the CoCs HMIS on its behalf.

HMIS Participating Bed: For any residential homeless program, a bed is considered a "participating HMIS bed" if the program makes a reasonable effort to record all universal data elements on all clients served in that bed and discloses that information through agreed upon means to the HMIS Lead Agency at least once annually.

HMIS Software Solution Provider: An organization that sells, licenses, donates, builds or otherwise supplies the HMIS user interface, application functionality and database. The HMIS software solution that has been chosen to serve all three of Utah CoC is ClientTrack.

HMIS Vendor: A contractor who is paid to provide services for the operation of a CoC's HMIS. An HMIS vendor includes an HMIS software solution provider, web server host, and data warehouse provider, as well as a provider of other contracted information technology or support.

Homeless Management Information System (HMIS): The information system designated by the CoC to process Protected Personal Information (PPI) and other data in order to create an unduplicated accounting of homelessness within the CoC. An HMIS may provide other functions beyond unduplicated accounting.

Homelessness Prevention and Rapid Re-Housing Program (HPRP): A program designed to assist households who would otherwise become homeless, and to quickly help re-house those who are homeless.

Housing Inventory Chart (HIC): The HIC is a point-in-time inventory of provider programs within your Continuum of Care that provide beds and units dedicated to serve persons who are homeless. It should reflect the number of beds and units available on the night designated for the count that are dedicated to serve persons who are homeless, per the HUD homeless definition.

Housing Opportunities for Persons with AIDS (HOPWA): The only Federal program dedicated to the housing needs of people living with HIV/AIDS. Under the HOPWA program, HUD makes grants to local communities, States, and nonprofit organizations for projects that benefit low-income persons medically diagnosed with HIV/AIDS.

Housing and Urban Development (HUD): A Federal organization aiming to increase homeownership, support community development and increase access to affordable housing free from discrimination.

I
Informed Consent: A client is informed of options of participating in an HMIS system and then specifically asked to consent. The individual needs to be of age and in possession of all of his faculties (for example, not mentally ill), and his/her judgment not impaired at the time of consenting (by sleep, illness, intoxication, alcohol, drugs or other health problems, etc.).

J

K

L

M

McKinney-Vento Act: The McKinney-Vento Homeless Assistance Act was signed into law by President Ronald Reagan on July 22, 1987. The McKinney-Vento Act funds numerous programs providing a range of services to homeless people, including the Continuum of Care programs: the Supportive Housing Program, the Shelter Plus Care Program, and the Single Room Occupancy Program, as well as the Emergency Shelter Grant Program.

N

Neighborhood Stabilization Program (NSP): This program was established for the purpose of stabilizing communities that have suffered from foreclosures and abandonment. NSP targets low and moderate income persons under 120% of area median income. Eligible activities include costs related to purchase and redevelopment of foreclosed and abandoned homes and residential properties. NSP grantees must use at least 25 percent of the funds appropriated for the purchase and redevelopment of abandoned or foreclosed homes or residential properties that will be used to house individuals or families whose incomes do not exceed 50 percent of the area median income.

Notice of Funding Availability (NOFA): includes important information on program priorities, general requirements, funding levels, and contacts for each program.

Non-Contributory CoC Program: A CoC Program that does not contribute PPI or other client-level data to an HMIS.

O

P

Participating CoC Program: A Contributory CoC Program that makes reasonable efforts to record all the universal data elements and all other required data elements as determined by HUD funding requirements on all clients served and discloses these data elements through agreed upon means to the HMIS Lead Agency at least once annually.

Performance Measures – A process that systematically evaluates whether your program's efforts are making an impact on the clients you are serving.

Permanent Supportive Housing (PSH): – Long-term, community-based housing that has supportive services for homeless persons with disabilities. This type of supportive housing enables the special needs populations to live independently as possible in a permanent setting. Permanent housing can be provided in one structure or in several structures at one site or in multiple structures at scattered sites.

Point in Time (PIT): – A snapshot of the homeless population taken on a given day. Since 2005, HUD requires all CoC applicants to complete this count every other year in the last week of January. This count includes a street count in addition to a count of all clients in emergency and transitional beds.

Protected Personal Information (PPI): Information about a client: (1) whose identity is apparent from the information or can reasonably be ascertained from the information; or (2) whose identity can, taking into account any methods reasonably likely to be used, be learned by linking the information with other available information or by otherwise manipulating the information.

Processing: An operation or set of operations performed on PPI, whether or not by automated means, including but not limited to collection, maintenance, use, disclosure, transmission and destruction of the PPI.

Q

Quarterly Performance Reports (QPR): A reporting tool that HUD uses to track progress and accomplishments of HPRP funded programs on a quarterly basis. This report affects HPRP funding.

R

Rapid Re-Housing: Housing relocation and stabilization services and short-and/or medium-term rental assistance as necessary to help individuals or families living in shelters or in places not meant for human habitation move as quickly as possible into permanent housing and achieve stability in that housing. Eligible costs also include utilities, rental application fees, security deposits, last month's rent, utility deposits and payments, moving costs, housing search and placement, housing stability case management, landlord-tenant mediation, tenant legal services, and credit repair.

S

Safe Haven: A Safe Haven is a form of supportive housing that serves hard-to-reach homeless persons with severe mental illness and other debilitating behavioral conditions that are on the street and have been unable or unwilling to participate in housing or supportive services. A Safe Haven project that has the characteristics of permanent supportive housing and requires clients to sign a lease may also be classified as permanent housing when applying for HUD funds. It is expected that clients will be reengaged with treatment services as they become stabilized and learn to trust service providers.

Shelter Plus (S+C): A program that provides grants for rental assistance for homeless persons with disabilities through four component programs: Tenant, Sponsor, Project, and Single Room Occupancy (SRO) Rental Assistance.

Street Outreach: Essential Services related to reaching out to unsheltered homeless individuals and families, connecting them with emergency shelter, housing, or critical services, and providing them with urgent, non-facility-based care. Eligible costs include engagement, case management, emergency health and mental health services, and transportation.

Supportive Services Only Program: Supportive Services Only (SSO) projects address the service needs of homeless persons. Projects are classified as this component only if the project sponsor is not also providing housing to the same persons receiving the services. SSO projects may be in a structure or operated independently of a structure, such as street outreach or mobile vans for health care.

T

Temporary Assistance for Needy Families (TANF): Money set aside to give assistance to families in danger of becoming homeless. This money can be used for such things as back rental or utility payments, deposits, rent and utilities. This money is specific for preventing homelessness.

Transitional Housing (TH): The transitional housing component facilitates the movement of homeless individuals and families to permanent housing. Homeless persons may live in transitional housing for up to 24 months and receive supportive services such as childcare, job training, and home furnishings that help them live more independently.

U

Unaccompanied Youth: Minors not in the physical custody of a parent or guardian, including those living in inadequate housing such as shelters, cars, or on the streets. Also includes those who have been denied housing by their families and school-age unwed mothers who have no housing of their own.

Unduplicated Accounting of Homelessness: An unduplicated accounting of homelessness includes measuring the extent and nature of homelessness (including an unduplicated count of homeless persons), utilization of homelessness programs over time, and the effectiveness of homelessness programs.

Unduplicated Count of Homeless Persons: The number of people who are homeless within a specified location and time period. An unduplicated count ensures that individuals are counted only once regardless of the number of times they entered or exited the homeless system or the number of programs in which they participated. Congress directed HUD to develop a strategy for data collection on homelessness so that an unduplicated count of the homeless at the local level could be produced.

Universal Data Element (UDE): Data required to be collected from all clients serviced by homeless assistance programs using an HMIS. These data elements include date of birth, gender, race, ethnicity, veteran`s status, and Social Security Number (SSN). These elements are needed for CoCs to understand the basic dynamics of homelessness in their community and for HUD to meet the Congressional directive to support AHAR.

V

Victim Service Provider: A nonprofit or non-governmental organization including rape crisis centers, battered women's shelters, domestic violence transitional housing programs, and other programs whose primary mission is to provide services to victims of domestic violence, dating violence, sexual assault, or stalking.

W

Written Consent: Written consent embodies the element of informed consent in a written form. A client completes and signs a document consenting to an understanding of the options and risks of participating or sharing data in an HMIS system. The signed document is then kept on file at the agency.

X

Y

Z

10. HMIS JOB DESCRIPTIONS

10.A HMIS Director

1. Assist Lead Agency in the planning, coordination and management of the HMIS in the following three Task areas:

   a. Planning, scheduling and meeting project objectives as outlined by the Agency Executive Director and CoC Steering Committee including issues related to funding, budgeting, grant writing and project reporting.

   b. Determining guiding principles for implementation and administration of the HMIS.

   c. Identifying and orienting Partner Agencies as participants in the HMIS.

   d. Selecting minimum data requirements, defining criteria, standards and parameters for the release of aggregate data.

   e. Ensuring adequate privacy protection provisions in project implementation and administration.

   f. Planning and oversight of relevant technical infrastructure and services to implement and administer the HMIS.

2. Assume primary responsibilities for daily operations of the HMIS, including:

   a. Managing contractual agreements between the three Utah CoC and Partner Agencies participating in the HMIS.

   b. Providing technical assistance to three Utah CoC and Partner Agencies in the use of the HMIS, including on-site training and support.

   c. Developing training procedures and materials to support use of the HMIS.

   d. Monitoring technical aspects of system functioning, speed, and database back-up procedures of the HMIS.

   e. Auditing access to and use of the HMIS to ensure full participation and compliance by Partner Agencies authorized to use the system.

   f. Providing technical assistance to ensure that all Partner Agencies using the HMIS adhere to the governing principles related to its use.

   g. Developing standard reports and queries on HMIS usage and data for interested parties.

   h. Developing strategies to ensure that Resource information contained in the HMIS is expanded and updated regularly.

   i. Monitoring issues related to contractual performance of the HMIS software vendor pertaining to software development, system upgrades, hosting and data protection services.

3. Development and Management of Resources for Implementation, Operation and/or Expansion of the HMIS, including:

   a. Researching, interpreting and preparation of information for grant applications and other funding sources as needed.

   b. Determination of cost estimates and budgets. Submittal of grant applications and funding proposals.

   c. Coordination of applications and/or proposals with Agency and representatives of other public and private agencies.

   d. Management of activities to ensure compliance with funding requirements, regulations, and policies.

10.B System Administrator

1. Act as the fiduciary for the local Emergency Services Grant.

2. Contracts with software vendor for local licenses, hosting fees, and training beyond that provided through HMIS project.

3. House the System Administration I position. With the support of the HMIS project assigned training staff, that person will:

   a. Guide the HMIS process locally.

b. Complete required trainings with regard to Privacy and System Use.

c. Respond to questions from the assigned Agency Administers (HMIS Lead Person at each agency) and provide on-site help as needed.

d. Convene/coordinate Community User Meetings and local group trainings.

e. Report database problems/successes to HMIS project committee

f. Attend System Administration User Meetings to share and benefit from the lessons learned across the State.

g. Mine the database for Continuum-wide numbers and report to CoC Steering and Executive Committees. The degree to which this activity occurs at a local level will be determined at the local level.

10.C Trainer and Technical Assistance Coordinator

1. The Training Coordinator will provide training and technical assistance through remote meeting software, web based training tools, classroom training and, as needed, site visits.

    a. Trainings will be designed to ensure homeless service provider organizations are in compliance with US Department of Housing and Urban Development (HUD) and Utah CoC HMIS requirements.

    b. Trainings are to support compliance with data and technical specifications, including maintenance of security, confidentiality and privacy requirements; reporting requirements; support efforts to strengthen and expand provider/community participation, improve data quality, and enhance and exploit the potential of HMIS implementations to measure program and system performance, and inform strategic planning and system change.

2. S/he will master the basic user workflow of the Utah CoC HMIS system and convey all components to users in training courses; design, develop and deliver both distance and classroom training programs and courses including materials, exercises and skills evaluation related to nay new policies and procedures as required by HUD or the Utah CoC; and provide user follow up after initial training, helping to ensure that agencies are capable of meeting all data quality and timeliness standards outlined by the CoC and HUD.

3. Additionally, s/he will coordinate and conduct training programs in-house and off-site, and potentially via the web; and handle all registrations and related correspondence.

4. The Coordinator will also explore new and creative ways of providing user training and support such as videos, webinars, social media, and develop such tools.

5. The HMIS Training coordinator will maintain the Utah CoC HMIS Policies & Procedures, making updates and revisions as needed; and provide training to homeless services providers on the HMIS Policies & Procedures on a regular basis.

10.D Research Analyst

1. Reporting to the HMIS Manager, the Data Analyst will support the development and implementation of the Homeless Management Information System in Utah. The HMIS Data Analyst will provide strategic statistical analysis to support system planning, community investment and performance management.

2. The Data Analyst will be responsible for the quantitative analysis of ESG funded programs using various reporting techniques to assess business processes and resource allocation; provide analytical supports to the Communication, Research and management teams to inform CoC business and strategic planning decisions.

3. Primary duties and responsibilities include:

    a. Cleaning, mining and analyzing HMIS data to identify patterns and correlations among the various data elements.

    b. Developing and generating reports/data pulls for HMIS, participating agencies, and external parties.

    c. Conducting statistical analysis on programs performance and activity levels.

    d. Interpreting results of the analysis in the manner understood by general public.

e. Providing analytical supports to inform the Ten Year Plan rewrite and funding allocation.

f. Applying both quantitative and qualitative data analysis techniques using statistical and descriptive research methodologies.

g. Providing participating programs with assistance to build agency capacity in terms of data analysis, including on-site support.

h. Monitoring data quality with regard to accuracy, timeliness and completeness and notifying agencies if problems arise by using data quality reports.

i. Researching, interpreting and preparing information for community debriefing, annual meetings, community reports and grant applications as needed.

j. Ensuring that relevant components of the Ten Year Plan to End Homelessness are integrated into the HMIS structure.

k. Undertaking research on specific issues including responding to inquiries and answering questions from the participating agency staff.

11. REFERENCES

Many of the definitions included in this document are pulled from the following sources.

HUD. (n.d.). *2013 Housing Inventory Count and Point-in-Time Count or Homeless Persons; Data Collection Guidance*. Retrieved June 21, 2013, from https://www.onecpd.info/resources/documents/2013HICandPITGuidance.pdf

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12. APPENDICES

APPENDICES	DOCUMENT TITLE
Appendix A	Agency Partner Agreement
Appendix B	Data Sharing Memorandum of Understanding
Appendix C	End User Agreement
Appendix D	Research Access Agreement
Appendix E	Privacy Posting
Appendix F	Informed Consent Release Form
Appendix G	Grievance Filing Form
Appendix H	UHMIS Security Checklist
Appendix I	Utah HMIS and Continuum of Care Memorandum of Understanding
Appendix J	Utah HMIS Steering Committee By-Laws

UTAH HOMELESS MANAGEMENT INFORMATION SYSTEM
AGENCY PARTNER AGREEMENT

I. *Purpose and Policy*

A. The Agency shall uphold baseline standards, as issued by the U.S. Department of Housing and Urban Development and the desire for any related procedure or practices to be consistent with HUD standards (see Final Revised HMIS Data Standards March 2010 for additional information).

   a. The baseline standards for HMIS issued by HUD, and the desire for this privacy and any related procedure or practices to be consistent with HUD standards. (see 69 Federal Register 45888, July 2004 for additional information)

5. UHMIS Lead Agency operates in an "open with exception" manner to insure that necessary and appropriate referrals and coordinated case planning takes place. All records are open for sharing unless otherwise closed by the entering agency to ensure that the designed purpose and need for sharing of UHMIS information is met.

   a. The standard sharing for all participating agencies will be to share a client's Name, gender, partial SSN, birth date.

6. Confidential information shall be defined as any and all information relating to past or present clients, any information required by law to be kept confidential, computer codes, passwords and access information for the HMIS, and any information designated as confidential by the disclosing party.

7. Client authorization to release information shall also be established through the use of a written, signed *Informed Consent Release Form,* to be completed at the point-of-entry participant agency site and retained on file.

8. The Agency shall solicit consent from Clients to share their information across the UHMIS database. The Agency agrees not to release any confidential information received from the UHMIS database to any organization or individual without proper Client Consent.

   The agency can release information for the following exceptions:

   a) When required by law and to the extent that use or disclosure complies with, and is limited to, the requirements of the law.

   b) When a provider reasonably believes that a child or vulnerable adult is a victim of abuse and neglect and should be reported

   c) To create unduplicated data within the UHMIS system, where only users who have signed a user agreement to maintain client privacy and protections are allowed to access disaggregated data.

   d) To avert a serious threat to health or safety if:

   i. The service provider believes that the use or disclosure is necessary to prevent or lessen a serious and imminent threat to the health or safety of an individual or the public.

   ii. The use or disclosure is made to a person reasonably able to prevent or lessen the threat, including the target of the threat.

   e) To a law enforcement official for a law enforcement purpose (if consistent with applicable law and standards for ethical conduct)

   i. In response to a lawful court order, court ordered warrant, subpoena or summons issued by a judicial officer or a grand jury subpoena, unless otherwise restricted by law.

   ii. If the service provider believes in good faith that the protected personal information constitutes evidence of criminal conduct that occurred on its premises.

   f) When required for payment or reimbursement for services. Information disclosed is to be used only for payment or reimbursement for services, and remains protected by this policy.

9. Agency will ensure that the necessary users and personnel have the appropriate certifications to access the UHMIS software.

   a. The agency will need to have at least one person certified in each certification level. This can be three different individuals that is certified in the appropriate level, or one individual who is certified in each level.

10. The Agency shall ensure that all staff, volunteers and other persons issued a User ID and password for the UHMIS receives certification training provided by the UHMIS team.

11. Partner Agencies are bound by all restrictions placed upon the data by the client of any Partner Agency. The Agency shall diligently record all restrictions requested. <u>The Agency shall not knowingly enter false or misleading data under any circumstances.</u>

12. If this agreement is terminated, the Utah SCSO's UHMIS Lead Agency and remaining Partner Agencies shall maintain their right to the use of all Client data previously entered by the terminating Partner Agency; this use is subject to any restrictions requested by the client.

13. Clients who choose not to authorize sharing of information cannot be denied services for which they would otherwise be eligible.

14. If a Client withdraws consent for release of information, the <u>Agency</u> remains responsible to ensure that the Client's information is unavailable to all other Partner Agencies.
    i. If Agency is unsure on how to do this, they must contact UHMIS staff to inform them of the clients request and ensure that sharing rights are revoked for that client.

15. The Agency will utilize the UHMIS Data Sharing MOU, as developed in conjunction and coordination with Partner Agencies, for all clients providing information for the UHMIS database. The Client Data Sharing Consent form, once signed by the client, authorizes Client data to be shared with UHMIS Partner Agencies.
    i. The Agency shall maintain appropriate documentation of Client consent, including but not limited to the Client Data Sharing Consent Form in the UHMIS database.
    ii. The Agency shall keep signed copies of the Client Data Sharing Consent Form, and other client consent forms for the UHMIS for a period of seven years.

II. *Data Entry and Use*

A. The Agency shall follow, comply with and enforce the End-User Agreement & UHMIS Standard Operating Policies and Procedures within the Agency. Modification to the User Policy and Standard Operating Policies and Procedures shall be made by the UHMIS Staff with input from the Steering Committee of the three state Continua. This will be done on an as needed basis for the purpose of the smooth and efficient operation of the UHMIS system. The UHMIS Lead Agency through the Utah SCSO will announce approved modifications in a timely manner.

B. Agencies will only use lawful and fair means by which to collect Personal Protected Information (PPI) with the knowledge or consent of the client. The Agency needs to full respect each individual's right to privacy, confidentiality, and safety.
    i. PPI will only be collected for the purposes listed above.
    ii. Clients will be made aware that personal information is being collected and recorded.
    iii. Agency will post **UHMIS Privacy Posting** in locations where PPI is collected.
        a. A copy of this written notice can be found in Appendix G of the UHMIS SOP Manual
        b. This posting will be explained in cases where the client is unable to read and/or understand it.
    iv. Clients must sign *Informed Consent Release Form* on file at the entering agency.
    v. Client's PPI will not be turned over into a national database. It's important that the client's rights to their information are honored by all UHMIS participating agencies.
    vi. PPI that is gathered needs to be accurate, complete, and relevant; and entered into the system in a timely manner.
        c. All PPI collected will be relevant to the purposes for which it is to be used.
        d. Identifiers will be removed from data that is not in current use after 7 years (from date of creation or last edit) unless other requirements mandate longer retention.
        e. Data will be entered in a consistent manner by authorized users.
        f. Data will be entered in "real-time" when possible, or within 5 to 10 business days of initial intake, contact, or provided service.
        g. Measures will be developed to monitor data for accuracy, completeness and for the correction of errors.
        h. Data quality is subject to routine audit by UHMIS System Administrators who have administrative responsibilities for the database.

C. The Agency shall consistently enter or upload information into the UHMIS database with <u>5 to 10</u> working days of seeing the client. This is to ensure that accurate and timely data is being reported to Local, State, and Federal government entities. Data should be entered or uploaded within 24 hours where possible.

D. The Agency shall utilize the UHMIS database for business purposes only.

E. The UHMIS team will provide initial training and certification (including confidentiality training) and periodic updates to Agency staff on the use of UHMIS software.
   i. Agency staff will attend all pertinent meetings with the UHMIS team and the Utah SCSO as required.
   ii. The Agency's Program Managers should hold regular user meetings and report all pertinent information (i.e. software issues, trouble with entering or placing client, etc.) to the UHMIS Help desk.

F. The UHMIS team will provide general technical assistance via a Help Desk and periodic site visits as deemed appropriate for the purpose of troubleshooting and report generation.

G. The transmission of material in violation of any federal or state regulations is prohibited. This includes, but is not limited to, copyright material, material legally judged to be threatening or obscene, and material considered protected by trade secret.

H. The Agency shall not use the UHMIS database with intent to defraud federal, state or local governments, individuals or entities, or to conduct any illegal activity.

I. The Agency staff should fully inform clients about the limits of confidentiality in a given situation, the purposes for which the information was obtained, and how it may be used, per appropriate State and Federal guidelines.

J. When providing a client with access to his/her UHMIS records, the Agency staff should provide either a screen visual without allowing direct access to input devices or a hard copy printout. Appropriate measures should be taken to protect the confidentiality of all other records.

K. The Agency staff should afford clients reasonable access to any UHMIS records concerning them, in accordance with Agency internal policies and procedures.

III. Reports

A. The Agency shall retain ownership of identifying and statistical data on the clients it serves.

B. The Agency's access to data on clients it does not serve shall be limited to non-identifying and statistical data without written consent.

C. The Agency may make aggregate data available to other entities for funding or planning purposes pertaining to providing services to homeless person or persons at risk of homelessness, in accordance with the UHMIS procedures on data use and release. However, such aggregate data shall not directly identify individual clients.

D. The Utah SCSO will use only aggregate UHMIS data for homelessness related policy and planning decisions, in preparing federal, state or local applications for homelessness and housing funding, to demonstrate the need for and effectiveness of programs and to obtain a system-wide view of program utilization in the state.

E. The UHMIS staff may need to view data on occasion for quality assurance purposes. The UHMIS staff will follow all guidelines and restrictions on data.

IV. Proprietary Rights of UHMIS

A. The Agency shall not give or share assigned user identification and passwords access codes of the UHMIS database with any other Agency, business, or individual.

B. The Agency shall not intentionally cause in any manner, or way corruption of the UHMIS database in any manner.

V. Hold Harmless

The Utah SCSO and the UHMIS Lead Agency makes no warranties, expressed or implied. The Agency, at all times, will indemnify and hold the Utah SCSO harmless from any damages, liabilities, claims, and expenses that may be claimed against the Agency; or for injuries or damages to the Agency or another party arising from participation in UHMIS; or arising from any acts, omissions neglect, or fault of the Agency or its agents, employees, licensees, or clients; or arising from the Agency's failure to comply with laws, statutes, ordinances, or regulations applicable to it or the conduct of its business. This Agency will also hold the Utah SCSO harmless for negative repercussions resulting in the loss of data due to delays, non-deliveries, mis-deliveries, or service interruption caused by the Agency's or another Participant Agency's negligence or errors or omissions, as well as natural disasters, technological difficulties, and/or other events out of its control. The Utah SCSO shall not be liable to the Agency for damages, losses, or injuries to the Agency or another party other than if such is the result of the gross negligence or willful misconduct of the Utah SCSO.

VI. Terms & Conditions

A. The Agency recognizes the HMIS Steering Committee to be the discussion center regarding UHMIS, including UHMIS process updates, policy and practice guidelines, data analysis, and software/hardware upgrades. The Agency may designate an assigned UHMIS user within their agency to attend the Utah Homeless Information Committee meetings regularly, and understands that the Committee will continue to be responsible for coordinating the UHMIS activities.

B. The Agency understands that periodic updates and/or changes to data requirements may occur based on HUD mandate, State mandate, or by the Continua of Care. UHMIS staff will provide due notification before such changes take effect.

C. Neither the Utah SCSO nor the Agency shall transfer or assign any rights or obligations without the written consent of the other party.

_____

Agency

_____   _____

Agency Executive Director   Date

_____   _____

HMIS Director   Date

UTAH HOMELESS MANAGEMENT INFORMATION SYSTEM
DATA SHARING
MEMORANDUM OF UNDERSTANDING

This Memorandum of Understanding between *(Primary Reporting/Funded Agency)* and *(list the Partner Agencies)* outlines what client level information is to be shared between these partnering agencies for the _____ Program.

It is understood between these partnering agencies that all participating clients will have to sign an interagency consent form that demonstrates that they understand and agree to have their information shared with the herein listed agencies. A hard copy of this consent form will be kept in the client's file at *(an appointed agency)*. *(An appointed agency)* will be responsible for ensuring that this release form is tracked within the UHMIS software.

(Primary agency) will grant access of afore mentioned client data to the following agencies:

1. **Partner Agency _____ & designated contact person _____**

2. **Partner Agency _____ & designated contact person _____**

3. **Partner Agency _____ & designated contact person _____**

4. **Partner Agency _____ & designated contact person _____**

5. **Partner Agency _____ & designated contact person _____**

Information to be shared:

It is understood that all agencies and users will be accountable for following all security and privacy policies. The list below outlines which elements are to be viewable, but not altered, and will allow for creation of additional records, considered "Shared" or "Not Shared". It is understood that a portion of the Universal Data Elements are shared with all UHMIS Partnering Agencies globally.

What is Shared	Not Shared	Shared
CLIENT RECORDS		
Name, DOB, and Partial SSN		X
TRANSACTIONS		
Assessments: Employment, Income/Non-Cash Benefits, Barriers, Education, Health **Enrollments:** Housing, Shelter, Other Program Placements **Services:** This includes services that are associated with the enrollments of the programs.		X
*Exceptions (Default is not shared) • Domestic Violence Assessment • Case Notes • Barriers: HIV/AIDS, Mental Health, Substance Abuse	X	Can be shared on a case by case basis if necessary.

Agreed upon exceptions for Sharing Records: (Please specify any of the aforementioned exceptions)

1. _____
2. _____
3. _____
4. _____
5. _____

Responsibility by Agency:

The following are responsibilities for completing the necessary tasks within the UHMIS software in order to complete compliance reporting and can be delegated to any agencies within the partnership. Please note: While these duties may be delegated to agencies other than the reporting or lead agency, the lead agency is ultimately responsible for all data related to the program funded tied to compliance reporting.

Please list appointed agency and designated contact person:

- **Client Intake:** _____

- **Program Enrollment:** *Must be funded or primary agency*

- **Client level Annual & Exit Assessments:** _____

- **Client level tracking of supportive services:** _____

- **Client level unit/bed occupancy tracking:** _____

- **Annual/Compliance Reporting (APR):** *Must be funded or primary agency*

Agreement:

By signing this document each agency involved agrees to the terms set by this document and accepts all roles and responsibilities herein, as well as compliance with the UHMIS Operating Policies and Procedures.

_____   _____
Primary Reporting Agency Name   Agency Director (Please Print)

_____   _____
Date Signed   Agency Director Signature

Partner Agencies

_____   _____
Agency Name   Agency Director (Please Print)

_____   _____
Date Signed   Agency Director Signature

_____   _____
Agency Name   Agency Director (Please Print)

_____   _____
Date Signed   Agency Director Signature

_____   _____
Agency Name   Agency Director (Please Print)

_____   _____
Date Signed   Agency Director Signature

_____   _____
Agency Name   Agency Director (Please Print)

_____   _____
Date Signed   Agency Director Signature

UTAH HOMELESS MANAGEMENT INFORMATION SYSTEM
END-USER AGREEMENT

Printed Name_____Agency_____

Job Title_____ E-mail/Phone_____

Identified User Group_____Program_____

SECTION I

PURPOSE OF POLICIES & PROCEDURES FOR DATA IN THE UTAH HOMELESS MANAGEMENT INFORMATION SYSTEM (UHMIS)

The purpose of this agreement is to: 1) ensure that information collected as part of UHMIS will affirm the basic right of clients to have the confidentiality of their information protected; 2) establish directions for the release of confidential information; 3) cite ethical/legal exception to the right of confidentiality; and 4) create procedures to ensure client confidentiality while providing for the exchange of information necessary for continuity of care.

SECTION II

USER POLICY, RESPONSIBILITY STATEMENT, & CODE OF ETHICS

User Policy

At the discretion of the UHMIS Partner Agency, information for provision of services to homeless persons may be shared through the networked infrastructure that establishes electronic communication among the Partner Agencies.

Partner Agencies shall at all times have rights to the data pertaining to their clients that was created or entered by them in UHMIS. Partner Agencies shall be bound by all restrictions imposed by clients pertaining to the use of personal data. The UHMIS Informed Consent Release Form must be signed in order for identifying information to be shared with Partner Agencies. Partner Agencies bound by HIPAA or 42 CFR Part 2 are expected to develop and administer appropriate consent and Notice of Privacy Practices documentation in compliance with all appropriate State and Federal regulations.

Minimum data entry on each Client shall consist of the Universal Data Elements as defined in the March 2010 HUD Data Standards. This standard is subject to modification by State and Federal policymakers. Data necessary for the development of aggregate reports of homeless services, including services needed, services provided, referrals and Client goals and outcomes should be entered to the greatest extent possible.

The UHMIS is a tool to assist agencies in focusing services and locating alternative resources to help homeless persons. Therefore, agency staff shall only use the Client information in UHMIS to target services to the Client's needs.

User Responsibility

The user ID and password is given to access to the UHMIS statewide. Users will have to initial each item below to indicate they understand and accept the proper use of your User ID and password. Failure to uphold the confidentiality standards set forth below may result in a breach of client confidentiality. By initialing below and by signing this form UHMIS you are agreeing to uphold all confidentiality standards.

_____User ID and password are for the user's use only and must not be shared with anyone.

_____Users take all reasonable means to keep their password physically secure.

_____Users must understand that the only individuals who can view information in UHMIS are authorized users and the clients to whom the information pertains.

_____Users can only view, obtain, disclose, or use the database information that is necessary to perform their job, and which complies with clients' signed permission to release information.

_____If a user is logged into the UHMIS and must leave the work area where the computer is located, they must log-off of the software before leaving the work area. Users will not leave a computer unattended that has the HMIS software "open and running".

_____Users or the agency will keep hard copies of appropriate UHMIS information/documentation in a secure place. All client information will be kept secure by ensuring that all hard copies of client forms are locked and secure when unattended. When hard copies of the UHMIS information are no longer needed they will be archived for up to seven years. Beyond that, hard copies of the records must be properly destroyed to maintain confidentiality.

_____If a user notices or suspects a security breach; they must immediately notify the Agency Administrator for UHMIS or the System Administrator.

_____Users will not knowingly enter false or misleading client information into HMIS under any circumstances.

_____Users will ensure that they are making the best effort to collect any and all necessary back up documentation for client level information.

User Code of Ethics
A. UHMIS Users must treat partner agencies with respect, fairness and good faith.
B. Each UHMIS User should maintain high standards of professional conduct in the capacity as a UHMIS User.
C. The UHMIS User has primary responsibility for his/her client(s).
D. UHMIS Users have the responsibility to relate to the clients of other partner agencies with full professional consideration.

I understand and agree to comply with all the statements listed above.

_____   _____
UHMIS User Signature   Date

_____   _____
Agency Director   Date

UTAH HOMELESS MANAGEMENT INFORMATION SYSTEM RESEARCH ACCESS AGREEMENT

Purpose

The purpose of this document is to provide an agreement as well as guidelines to be followed between the State Community Services Office (SCSO) UHMIS Administration and _____, (referred

(Person or Entity)

to as researcher) in regards to the access of client level information from the Utah Homeless Management Information System.

Access

It is understood that researcher will have access to **de-identified** client level information with a unique Client ID. The specific information that can be utilized will be:

- De-identified Universal Data Element Fields (as per the March 2010 Data Standards)
- Program Data Element Fields (as per the March 2010 Data Standards)
- Program entry and exit dates
- History of Client Services received

Guidelines

Listed below are the guidelines to be followed by any researchers requesting UHMIS data:

- Researcher will provide a specific list of information they are requesting and the purpose of the research they are conducting.

- UHMIS Administration will provide de-identified information to researcher as needed for the research purposes as per the request made by researcher if approved.

- If required, UHMIS Administration will link individual level data from UHMIS to data collected indirectly by researcher and will provide combined data with all clients' identifying information removed from the dataset.

- If researcher requires additional follow-up, it is understood that the request will have to go through the UHMIS Administrator to get additional de-identified data.

- Researcher will follow all terms outlined in the UHMIS Security Privacy Policy, and will not provide client level data to any other entities or persons.

- Researcher will provide publishing credit to SCSO as the source of data for any results or findings.

- Researcher understands their responsibility to maintain the overall security of the data.

- UHMIS Administration has the right to revoke access and/or dissemination rights to data.

By signing this agreement researcher understands the responsibility to uphold and follow the guidelines listed above.

_____   _____

Researcher Signature   Date

_____   _____

UHMIS Administrator   Date

UTAH HOMELESS MANAGEMENT INFORMATION SYSTEM PRIVACY POSTING

PLEASE READ CAREFULLY

We collect personal information directly from you for reasons that are discussed in our privacy statement. We may be required to collect some personal information by law or by organizations that give us money to operate this program. Other personal information that we collect is important to run our programs, to improve services for homeless persons, and to better understand the needs of homeless persons. We only collect information that we consider to be appropriate.

If you have any questions or would like to see our privacy policy, our staff will provide you with a copy.

UTAH HMIS

UTAH HOMELESS MANAGEMENT INFORMATION SYSTEM
Informed Consent Release Form

PLEASE READ THE FOLLOWING STATEMENTS.

MAKE SURE YOU HAVE HAD THE CHANCE TO HAVE YOUR QUESTIONS ANSWERED.

_____ is part of the Utah Homeless Management Information System (UHMIS).
(Agency Name)

UHMIS is a system that uses computers to collect information about homelessness. The reason for UHMIS is to track funding for homeless programs given by many funders. The goal is to simplify service delivery to people in need.

UHMIS operates over the internet and uses many security protections to keep your information safe. Many service providers across Utah use UHMIS, so your information will be shared with other service providers that provide similar services. Information collected is housed in a secure server located at Data System International (DSI), in Sandy, Utah. DSI employees have access to this server and the data housed there, but only for network support and maintenance purposes. UHMIS staff and approved Utah State Community Services Office (SCSO) staff collect and use only information that is needed for reports on homelessness to help inform policy decisions. Every person with access to this information must sign and comply with all confidentiality agreements.

To better provide services to you in the best way possible _____is asking your
(Agency Name)
permission to share your information with the other approved UHMIS participating agencies in Utah. This will include sharing the following information about you and any dependant minor children with you:

- **Name, gender, SSN, birth date**

By signing this form you are letting us share your information, and the information of your dependent children under the age of 18 with other UHMIS participating agencies. This information will be accessible for seven years from the last date of service.

You may cancel this consent at any given time by written request to this agency. The cancellation will not be applied to records already collected from you. If you choose to not give consent, it **does not** make you ineligible to receive services unless you are applying for the Homeless Prevention and Rapid Re-housing Funding (HPRP or TANF).

Your Rights
- You have the right to get services even if you choose **NOT** to participate in the UHMIS.
- You have the right to ask who has seen your information.
- You have the right to see your information and to change it if it's not correct. But you must show documentation.

A list of participating agencies is available from your case manager or online at http://hmis.utah.gov. If you don't want your information shared with a specific agency, please let your case manager or intake worker know. He/she can then take the proper action to honor your request.

_____   _____

SIGNATURE OF CLIENT (AND/OR GUARDIAN)   DATE

_____   _____

PRINTED NAME OF CLIENT   DOB OF CLIENT

_____

SIGNATURE OF INTAKE WORKER/CASE MANAGER

UTAH HOMELESS MANAGEMENT INFORMATION SYSTEM GRIEVANCE FILING FORM

If you think we may have violated your privacy rights or you disagree with a decision we made about access to your "Protected Information" you may complete this form.

It is against the law for any agency to take retaliatory action against you if you file this grievance. You can expect a response within 30 days via the method of your choice.

Grievance must be submitted in writing to:

> **State Community Services Office**
> Attn: HMIS Lead Agency Management
> 1385 South State, Fourth Floor
> Salt Lake City, UT 84115

Please provide information regarding the violation.

Date of offense: _____

Name of **Individual** who violated your privacy rights**:** _____

Name of the **Agency** that violated your privacy rights**:** _____

Provide a description of the grievance:

_____

_____

_____

_____

Please list your contact information:

Name:_____   **Phone #:**_____

Mailing Address:_____   What is the best method to contact you:

_____   ☐ Phone   ☐ Mailing Address

_____   ☐ E-mail

E-mail:_____

HMIS Staff Only_____

Date Received:_____   Date Reviewed:_____

Recommendation to Agency:_____

_____

_____

_____

UTAH HOMELESS MANAGEMENT INFORMATION SYSTEM SECURITY CHECKLIST

Name _____

Email Address _____

Organization _____

Date of the Review _____

A.	CHO Security Office Section	Yes	No	Comments to Improve/Fix
1.	Do you have a signed copy of the "Agency Partner Agreement for Utah Homeless Management Information System" for your agency?			
2.	Do you have a signed copy of a "UHMIS End-User Agreement" for each authorized user within your organization?			
3.	Have all employees entering/viewing HMIS data attended the UHMIS end user training?			
4.	Have you reviewed the policies and procedures manual (December 2013 Version) with in the past year?			
5.	Has your agency conducted a background check on the CHO security officer?			
6.	Does your agency only collect, enter and extract HMIS data that are relevant to the delivery of homeless services?			
7.	Does your agency limit access to information provided by the Utah HMIS database to its own employees specifically for verifying eligibility for service or entering records into the system of service provided?			
8.	Do you have a written policy to keep track of UHMIS users who leave the agency?			
9.	Do you notify the UHMIS lead security officer within two businesses days of any UHMIS user that needs their user account deactivated?			
10.	Have you deactivated all user accounts that need to be deactivated?			

11. Is the UHMIS privacy policy posted in a common area viewable by those receiving services?			
12. Does your agency collect signed "UHMIS Informed Consent Release Form" prior to the client's information being entered into the UHMIS?			
13. Does your agency have a Quality Assurance Plan that to ensure that the UHMIS Informed Consent Release Form and all of the universal data elements are gathered?			
14. If data is extracted from the database and stored outside the private local area network, is it properly protected via encryption or by adding a file-level password?			
15. Do computers/phones/tablets used to access the HMIS have a locking screen saver? (Terminals must be locked when left unattended.)			
16. Are the computers/phones/tablets used to access the UHMIS password protected?			
17. Do the terminals that access the UHMIS system have virus protection with automatic updates and individual or network firewalls?			
18. Are the screens of the terminals to access UHMIS kept out of the view of non-authorized UHMIS users?			
19. Have there been any Security Incidents in the past year, as defined in the HMIS Security Plan?			

Comments:

UTAH HOMELESS MANAGEMENT INFORMATION SYSTEM DATA SHARING
MEMORANDUM OF UNDERSTANDING BETWEEN:

The Salt Lake and Tooele Counties Continuum of Care

The Mountainland Continuum of Care

The Balance of State Continuum of Care

and

The State Community Service Office (SCSO), Housing and Community Development Division

of the State of Utah Department of Workforce Services (DWS)

A.   Purpose and Scope

The purpose of this Memorandum of Understanding is to confirm agreements between the Salt Lake and Tooele Counties (SLC) Continuum of Care (CoC), the Mountainland (Mtl) CoC, the Balance of State CoC and the State Community Service Office (SCSO), Housing and Community Development Division of the State of Utah Department of Workforce Services (DWS) in connection with the State of Utah Homeless Management Information System (UHMIS). As such, the Memorandum of Understanding sets forth the general understandings, and specific responsibilities of each party relating to key aspects of the governance and operation of UHMIS.

This consolidated and revised agreement is effective on January 27, 2014.

B.   Background

The State of Utah Homeless Management Information System (UHMIS) is a collaborative project of three CoCs within the State of Utah, namely Salt Lake and Tooele Counties, Balance of State, Mtl, SCSO, DWS, and participating Partner Agencies. HMIS is a computerized data collection application designed to capture information about homeless people and homeless programs over time. HMIS is mandated by the U.S. Department of Housing and Urban Development (HUD) under the HEARTH Act for all communities and agencies receiving HUD CoC and Emergency Solutions Grant (ESG) homeless assistance funds. HMIS is essential to efforts to streamline client services and inform public policy. Through HMIS, homeless people 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 State of Utah and each Continuum, 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 parties to this Memorandum of Understanding (MOU) share a common interest in collaborating to end homelessness and successfully implementing and operating HMIS in the State of Utah.

The three Continua of Care goal is to collaboratively provide a range of homeless housing and services. The continuum of care system components includes prevention, emergency shelter, transitional housing, permanent housing and permanent supportive housing. Outreach efforts and specialized supportive services actively identify and support homeless individuals and families and work with them to access mainstream resources. 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.

C. **General Understandings**

1. Governance
   The State of Utah CoCs are the lead planning groups of the HUD funded efforts to end homelessness and for implementing and operating a homeless system within their jurisdictions. As such and per HUD policy, the CoCs are responsible for HMIS project oversight and implementation, which encompasses:

   a) Planning,
   b) Administration,
   c) HMIS budget approval and oversight,
   d) Grant monitoring and work plan submission approval,
   e) Software selection,
   f) Managing of HMIS data compliance with HMIS data standards,
   g) Reviewing and approving all policies, procedures and data management plans contributing to HMIS Organizations.

   The CoCs oversight and governance responsibilities are carried out by its Steering Committee. The general decision making process is as follows:

   a) Draft policies, procedures, data management plans and other work will be reviewed, amended, and preliminarily approved by the Steering Committee.
   b) The CoC representatives on the Steering Committee are responsible to share draft policies, procedures, data management plans and other work with their perspective CoCs for CoC feedback and approval.
   c) The Steering Committee may give final approval of policies, procedures, data management plans and other work after receiving feedback and approval from each of the three CoCs.
   d) No policy, procedure, data management plan or other work may be approved by the Steering Committee without confirmation and approval by all three CoCs.

2. Steering Committee & Information Committee
   The State HMIS Steering Committee is made up of representation of all three CoCs for the State of Utah as well as ESG representation, local leaders and the Lead Agency HMIS staff. The role and responsibility of the Steering Committee is defined in the Governance in section C.1.

   The role and responsibility of the Information Committee is to provide analysis of trends and performance of the homeless system and detailed HMIS data reports as requested by each CoC objectives. This Committee will inform the Steering Committee and the SHCC of homeless data which may be collected outside of the HMIS system.

3. Lead Agency Designation
   The three CoCs designate SCSO, DWS to manage the HMIS operations on its behalf and to provide HMIS project administration functions including staffing with State employees and managing budget and grant requirements.

4. Compliance with HMIS Standards
   It is the responsibility of the CoCs to ensure the HMIS lead agency is operating the HMIS project in compliance with the HUD technical standards, HMIS data quality standards and other applicable laws. The parties agree to update this MOU and other HMIS operational documents, including policies and procedures in order to comply with any updates to these standards established in notices or other guidance, within HUD specified timeframes for such changes. Oversight will be provided by the HMIS Steering Committee.

5. Contributing HMIS Organizations (CHO)
   A CHO is defined as an organization (inclusive of the HMIS Lead) that operates a provider program and a program level, HMIS compliant system, whether or not it is a member of a CoC or receives any federal (HUD), State, County or City funding

that contributes Protected Personal Information or other client level data to the HMIS database. The CHOs must enter into Participation Agreements in order to contribute such data to HMIS. The authority to enter into the Participation Agreement with the CHO for the purpose of insuring compliance with all applicable HUD and ESG HMIS requirements, including the operation of a program level HMIS compliant system, rests with the HMIS Lead Agency.

6. Funding
   a. HUD Grant
      i. HMIS activities are covered by HUD CoC grants and HUD-required local match funds. The terms and uses of HUD funds are governed by the HUD CoC grant agreement and applicable rules.

   b. HMIS Cash Match
      i. The HUD CoC grant comes with a cash match requirement. As detailed below, SCSO is retaining responsibility for the commitment of the local match for HMIS.

   c. Fees
      i. No fees will be charged to any CHO wishing to provide data to HMIS. CHOs are required to pay their own costs associated with establishing and operating their own program level, HMIS complaint system in accordance with the terms of participation Agreement and adhere to HMIS data security standards.

7. Software and Hosting
   The three Continuum of Care for the State of Utah have selected a single software product—ClientTrack—to serve as the sole UHMIS software application for the State of Utah. All Partner Agencies agree to use ClientTrack for all HUD CoC and ESG funded programs with the exclusion of Domestic Violence Programs.

8. Compliance with Homeless Management Information System Standards
   The HMIS is operated in compliance with HUD HMIS Data and Technical Standards and other applicable laws. The parties anticipate that HUD will approve the new HMIS standards and guidelines and the parties agree to make changes to this MOU, other HMIS operational documents, and HMIS practices and procedures to comply with the expected revisions, within the HUD-specified timeframe for such changes.

9. Local Operational Policies and Agreements
   The HMIS continues to operate within the framework of agreements, policies, and procedures that have been developed and approved over time by the CoCs through its HMIS Steering Committee and Information Committee. These agreements, policies and procedures include but are not limited to the Policies and Procedures Manual, Privacy Policies and Notices, Client Consent Forms, Client Release of Information (ROI) Forms and Procedures, Standardized Information Collection Forms (Intake and Exit), Partner Agency Agreements, and User Agreements. Changes to the policies and procedures may be made from time to time by the CoCs, through its HMIS Steering Committee, to comply with the HMIS Standards or otherwise improve HMIS operations. It is expected that the CoCs may want to make some changes to the policies and procedures to accommodate its unique approach to managing and administering HMIS with the new HUD standards for centralized intake and coordinated Assessment. During any transition, all existing HMIS policies and procedures will remain in force until such time as the CoCs and the HMIS Steering Committee and Information Committee agree to such changes.

10. **Specific Responsibilities of the Parties**

   1. The Salt Lake and Tooele Counties CoC, Mountainland CoC, and Balance of State CoC

   The Salt Lake and Tooele Counties, Mtl, and the Balance of State CoCs make up the HMIS governance body, providing oversight, project direction, policy setting, and guidance for the HMIS project. The three CoC will exercise all its responsibilities for HMIS governance through its HMIS Steering Committee members with support from the Information Committee.

A. These responsibilities include:

    a) Responsible for ensuring and monitoring compliance with the HUD HMIS Standards.

    b) Responsible for monitoring and assessing the effectiveness of the designated UHMIS agency.

    c) Designate the HMIS Lead Agency and the software to be used for HMIS, and approve any changes to the HMIS Lead Agency or software.

    d) Conduct outreach to and encourage participation by all homeless assistance programs and other mainstream programs serving homeless people.

    e) Develop and approve all HMIS operational agreements, policies, and procedures through the Steering Committee.

    f) Inform elected officials, government agencies, the nonprofit community, and the public about the role and importance of HMIS and HMIS data.

    g) Guide data quality and reporting efforts, as well as assist with holding CHOs accountable for data quality and agreements to improve these elements.

    h) Promote 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.

    i) Work to insure that participating CHOs provide all necessary information for compilation of the CoC Housing Inventory Chart, and support SCSO/HMIS in preparing the Annual Homeless Assessment Report (AHAR).

    j) Work to ensure participating CHOs are effectively working on performance measurement standards set by the CoC. Support the efforts of the HMIS team, HMIS steering Committee and Information Committee with participating CHOs on improving performance and data quality.

    k) Work with HMIS team to set milestones and goals through the Steering Committee.

2. <u>The State Community Services Office (SCSO)</u>

SCSO serves as the lead agency for the HMIS project, managing and administering all HMIS operations and activities. SCSO exercises these responsibilities at the direction of the State of Utah CoCs.

A. General Responsibilities:

    a) Serve as the liaison with HUD regarding the HMIS for all three Continuums in the State of Utah.

    b) Serve as the liaison with the software vendor. SCSO is responsible for a successful HMIS project, including data, software vendor contract and licensing, security arrangements, and contractor agreements.

    c) Lead the HMIS Information Committee.

    d) Provide overall staffing for the project.

    e) Participate in the Steering Committee.

    f) Comply with HUD HMIS Standards (including anticipated changes to the HMIS Standards) and all other applicable laws. Setup and maintenance of HMIS database in accordance with the HEARTH Act.

    g) Annually prepare all HUD McKinney-Vento CoC Supportive Housing NOFA application for HMIS funding within the State of Utah, applying for renewal funds each year, and administering the HUD HMIS grants. Grants and quarterly reports including detailed budget expenditures will be given to Steering Committee for review and approval prior to submission to HUD.

    h) Provide all required match funds for HMIS grants. Lead the effort to engage other participating agencies in funding a portion of HMIS (i.e. Veterans, ESG, etc.).

    i) Provide required trainings for all end users and administration and manage end user licenses (per terms of grant agreement with HUD).

    j) Create project forms and documentation in accordance with HUD HMIS guidelines.

    k) Provide and maintain the project website.

    l) Prepare project policies and procedures, UHMIS Standard operating Policies and Procedures (approved by the HMIS Steering Committee with support from the Information Committee).

    m) Obtain and maintain signed Partner Agency MOUs including privacy and security agreements.

B. Administering HMIS vendor contract with Data System International (ClientTrack) responsibilities include:

a) Server security, configuration, and availability.
b) Setup and maintenance of hardware HMIS.
c) Maintenance of software.
d) Configuration of network and security layers.
e) Anti-virus protection for server configuration.
f) System backup and disaster recovery (disaster recovery provided by ViaWest, central server provider).
g) Take all steps needed to secure the system against breaches of security and system crashes.
h) Ensure system uptime and monitoring system performance.
i) Protect confidential data (in compliance with HUD Standards, local privacy policies, and other applicable law), and abide by any restrictions clients have placed on their own data.
j) Develop and implement security and confidentiality plans if required by the revised HUD HMIS Standards.

C. Administering HMIS end users, including:

a) Add partner agency programs to HMIS these include: HUD CoC funded programs, Emergency Solutions Grant (ESG) funded programs, VA Grant Per Diem (GPD), VASH, SSVF, HOPWA and State Funded programs for the homeless.
b) Manage user licenses

D. Training

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) Conduct confidentiality, privacy and security training
c) Provide ClientTrack software training for agency administrators and end users
d) Outreach to users/end user support
e) Provide and coordinate technical assistance and support
f) Respond to helpdesk issues reported in ClientTrack
g) Conduct quarterly User Group trainings
h) Develop and support comprehensive training materials, training manuals and website resources
i) Ensure HMIS training is conducted with every new user before giving access to the database.

E. Data Quality

a) Ensure all client and homeless program data are collected in adherence to the HUD HMIS Data Standards. These include the Universal data elements and program specific data elements.
b) Establish HMIS data quality benchmarks with the direction of the Steering Committee.
c) Monitor data quality and generate agency level data quality reports quarterly for each CoC.
d) Provide specific data quality training.
e) Preparing and implementing a data quality plan if required by the revised HUD HMIS Standards.
f) Carry out aggregate data extraction and reporting including the HMIS data needed for an unduplicated accounting of homelessness including the annual Point in Time.
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).
h) Ensure that HMIS can generate reports for unduplicated client records.

F. Satisfactory Assurances Regarding Confidentiality and Security:

HMIS will designate a member of the team to act as the Security officer for the 3 CoCs. Their role and responsibility is to work with the participating CHOs, the Steering Committee and the Information Committee to ensure that those individuals entering client information enter into HMIS are properly trained and adhering 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. SCSO HMIS staff hereby agrees that it will use protected client information only for purposes permitted by agreement with the CoCs or with written approval for Research purposes. This information will be used by the Information Committee to produce the State Annual Homeless Report as well as the Point-in-Time. SCSO agrees it will make use of all safeguards required by HUD Privacy Standards, HIPAA Privacy Rule and, where appropriate, other law, and local HMIS privacy and security policies and procedures in order to prevent any unauthorized disclosure of protected client information.

G. Period of Agreement and Modification/Termination

1. Period of Operation and Termination: This MOU will become effective upon signature of the parties and shall remain in effect until terminated by the parties. Each party shall have the right to terminate this agreement as to itself only upon 90 days prior written notice to The SCSO, DWS. Violation of any component may be grounds for immediate termination of this Agreement.

2. Amendments: Amendments, including additions, deletions, or modifications to this MOU must be agreed to by all parties to this Agreement.

The signatures of the parties indicate their agreement with the terms and conditions set forth in this document.

The Salt Lake and Tooele Counties Continuum of Care

By_____   Date_____

The Mountainland Continuum of Care

By _____   Date _____

The Balance of State Continuum of Care

By _____   Date _____

The State Community Service Office, Housing and Community Development Division of the State of Utah Department of Workforce Services

By_____ Date_____

Lloyd S. Pendleton,

HMIS Director

Housing and Community Development Division

State of Utah Department of Workforce Services

UTAH HOMELESS MANAGEMENT INFORMATION SYSTEM STEERING COMMITTEE BY-LAWS

Background

The Utah Homeless Management Information System (HMIS) Steering Committee is an *approval/advisory* body that supports and enhances the overall mission of the Utah HMIS Lead Agency by advising HMIS Lead Agency staff on functions related to HMIS Lead Agency policies and guidelines and approving policies and procedures regularly.

Utah Homeless Management Information System Project Purpose

The HMIS is an on-line database system that serves agencies providing shelter, housing and services to homeless people and those at risk of homelessness across the state of Utah. The purpose of the project is to help provider agencies improve their services, to give access to the information necessary for providers to obtain funding for homelessness services, and to improve public policy toward homelessness.

Steering Committee

1. *Duties and Powers*

    The Steering Committee members shall be responsible for providing advice and counsel to HMIS staff and for responding to issues presented for consideration by the Director of HMIS. Specific duties include but are not limited to:
    i. Provide input on the various topics covered;
    ii. Participate in decision-making and recommend policy and make procedures;
    iii. Support coordination of statewide activities;
    iv. Assist in the creation of printed materials, brochures, and mailings;
    v. Review HMIS budget before each SHP grant submission annually; and
    vi. Disseminate information about the committee and the HMIS and gain consensus from Continua.
    vii. HMIS Staff will provide support to CoC representatives.

2. *Composition*

    The Steering Committee will be composed of 14-17 members. Seven members will be representatives from each of the state's three Continua of Care; five will be representatives from the Veterans Administration, PATH - Department of Human Services, ESG grantees including local and state governments. The HMIS Staff will select two HMIS End-Users from the HMIS End-User Group as ex-officio members. The HMIS Lead Agency may appoint other representatives as needed who are familiar with the challenges of a multi-continuum HMIS implementation and meeting the data needs of local, state, and federal funders.

3. *Resignation and Removal*

    A committee member may resign from the Advisory Committee by submitting written notice to the Chair or the Director of HMIS. A member may be removed by a two-thirds vote from the whole committee.

4. *Meetings*

    Meetings will be held ~~quarterly~~ every other month for at least the first year. Meetings will be attended by Committee members, the Director of HMIS, and the HMIS Lead Agency Coordinator. Meeting dates will be set by the Steering Committee during the last meeting of each calendar year. Members are expected to attend a minimum of 75% of the regularly scheduled quarterly meeting with at least two of the meetings attended in person.

5. *Quorum/Voting*

    Quorum consists of 51% of current members. Majority vote carries with 51%. Funders may send a representative to vote on their behalf.
    - Vote Tally

- o HMIS Staff – Two Votes
- o Balance of State and Mountainland Continua of Care – Two Votes Each (4 Total)
- o Salt Lake/Tooele Continuum of Care – Three Votes
- o Funders – One Vote Each (8 Votes Total)
  - ▪ ESG State, ESG SLCo, ESG SLC, ESG Provo, HOPWA SLC, HOPWA State, PATH, VA
- o 17 Votes Total

Officers

1. The Chair of the Steering Committee shall preside at all meetings of the Steering Committee. The Chair shall lead the committee in its duties and responsibilities. In the absence of the Chair, the Vice-Chair (or Chair-Elect) will assume the responsibilities of the Chair.
2. The Vice-Chair shall assist the Chair as necessary, leading the committee in its duties and responsibilities in the absence of the Chair, as well as performing such duties as may be assigned by the Chair.
3. The Secretary shall assist the Committee and the Director of HMIS and Special Projects in documenting and dispersing that documentation of the proceedings of the meetings and other documentation.

Elections and Appointments

1. Appointments

     Continuum of Care members of the Steering Committee will be elected by their CoC annually. These appointments will occur before the first quarterly meeting of the HMIS contract year, July 1st. Funders determine their representatives annually. Committee participation is not reimbursable; however, committee member participation will be used as leveraging for HMIS Lead Agency funding.

2. Elections for Officers

     Annually, at the last meeting of the year (May or June), the Steering Committee shall elect the three officers. The newly elected officers shall assume office at the close of that meeting. *There will be a term limit for elected officers of two years, with the Chair-Elect next in line to become Chair.*

Amendments

These Bylaws may be amended, repealed, or modified by the affirmative vote of a majority of the Steering Committee at a regularly scheduled meeting provided the proposed changes have been mailed to all members of the Advisory Committee Members two weeks in advance of the meeting. Copies of any such revised Bylaws shall be submitted to the Director of HMIS.

2018 HDX Competition Report

PIT Count Data for UT-504 - Provo/Mountainland CoC

Total Population PIT Count Data

	2016 PIT	2017 PIT	2018 PIT
Total Sheltered and Unsheltered Count	178	171	173
Emergency Shelter Total	76	67	64
Safe Haven Total	0	0	0
Transitional Housing Total	61	63	64
Total Sheltered Count	137	130	128
Total Unsheltered Count	41	41	45

Chronically Homeless PIT Counts

	2016 PIT	2017 PIT	2018 PIT
Total Sheltered and Unsheltered Count of Chronically Homeless Persons	9	8	23
Sheltered Count of Chronically Homeless Persons	5	4	7
Unsheltered Count of Chronically Homeless Persons	4	4	16

2018 HDX Competition Report

PIT Count Data for UT-504 - Provo/Mountainland CoC

Homeless Households with Children PIT Counts

	2016 PIT	2017 PIT	2018 PIT
Total Sheltered and Unsheltered Count of the Number of Homeless Households with Children	**23**	**15**	**19**
Sheltered Count of Homeless Households with Children	23	15	19
Unsheltered Count of Homeless Households with Children	0	0	0

Homeless Veteran PIT Counts

	2011	2016	2017	2018
Total Sheltered and Unsheltered Count of the Number of Homeless Veterans	**12**	**3**	**3**	**5**
Sheltered Count of Homeless Veterans	5	2	0	2
Unsheltered Count of Homeless Veterans	7	1	3	3

2018 HDX Competition Report

HIC Data for UT-504 - Provo/Mountainland CoC

HMIS Bed Coverage Rate

Project Type	Total Beds in 2018 HIC	Total Beds in 2018 HIC Dedicated for DV	Total Beds in HMIS	HMIS Bed Coverage Rate
Emergency Shelter (ES) Beds	97	36	61	100.00%
Safe Haven (SH) Beds	0	0	0	NA
Transitional Housing (TH) Beds	64	26	38	100.00%
Rapid Re-Housing (RRH) Beds	117	0	117	100.00%
Permanent Supportive Housing (PSH) Beds	200	8	192	100.00%
Other Permanent Housing (OPH) Beds	2	0	2	100.00%
Total Beds	480	70	410	100.00%

2018 HDX Competition Report

HIC Data for UT-504 - Provo/Mountainland CoC

PSH Beds Dedicated to Persons Experiencing Chronic Homelessness

Chronically Homeless Bed Counts	2016 HIC	2017 HIC	2018 HIC
Number of CoC Program and non-CoC Program funded PSH beds dedicated for use by chronically homeless persons identified on the HIC	91	54	85

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

Households with Children	2016 HIC	2017 HIC	2018 HIC
RRH units available to serve families on the HIC	25	22	34

Rapid Rehousing Beds Dedicated to All Persons

All Household Types	2016 HIC	2017 HIC	2018 HIC
RRH beds available to serve all populations on the HIC	103	81	117

2018 HDX Competition Report

FY2017 - Performance Measurement Module (Sys PM)

Summary Report for UT-504 - Provo/Mountainland CoC

Measure 1: Length of Time Persons Remain Homeless

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

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

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

	Universe (Persons)		Average LOT Homeless (bed nights)			Median LOT Homeless (bed nights)		
	Submitted FY 2016	FY 2017	Submitted FY 2016	FY 2017	Difference	Submitted FY 2016	FY 2017	Difference
1.1 Persons in ES and SH	1365	1210	12	11	-1	4	4	0
1.2 Persons in ES, SH, and TH	1413	1235	28	24	-4	4	4	0

b. This measure is based on data element 3.17.

This measure includes data from each client's Living Situation (Data Standards element 3.917) response as well as time spent in permanent housing projects between Project Start and Housing Move-In. This information is added to the client's entry date, effectively extending the client's entry date backward in time. This "adjusted entry date" is then used in the calculations just as if it were the client's actual entry date.

 The construction of this measure changed, per HUD's specifications, between FY 2016 and FY 2017. HUD is aware that this may impact the change between these two years.

FY2017 - Performance Measurement Module (Sys PM)

	Universe (Persons)		Average LOT Homeless (bed nights)			Median LOT Homeless (bed nights)		
	Submitted FY 2016	FY 2017	Submitted FY 2016	FY 2017	Difference	Submitted FY 2016	FY 2017	Difference
1.1 Persons in ES, SH, and PH (prior to "housing move in")	1371	1240	60	104	44	5	8	3
1.2 Persons in ES, SH, TH, and PH (prior to "housing move in")	1419	1265	80	120	40	5	9	4

2018 HDX Competition Report

FY2017 - Performance Measurement Module (Sys PM)

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

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

 After entering data, please review and confirm your entries and totals. Some HMIS reports may not list the project types in exactly the same order as they are displayed below.

	Total # of Persons who Exited to a Permanent Housing Destination (2 Years Prior)	Returns to Homelessness in Less than 6 Months		Returns to Homelessness from 6 to 12 Months		Returns to Homelessness from 13 to 24 Months		Number of Returns in 2 Years	
		FY 2017	% of Returns	FY 2017	% of Returns	FY 2017	% of Returns	FY 2017	% of Returns
Exit was from SO	1	0	0%	1	100%	0	0%	1	100%
Exit was from ES	398	102	26%	37	9%	40	10%	179	45%
Exit was from TH	33	4	12%	1	3%	2	6%	7	21%
Exit was from SH	0	0		0		0		0	
Exit was from PH	112	10	9%	5	4%	8	7%	23	21%
TOTAL Returns to Homelessness	544	116	21%	44	8%	50	9%	210	39%

Measure 3: Number of Homeless Persons

Metric 3.1 – Change in PIT Counts

2018 HDX Competition Report
FY2017 - Performance Measurement Module (Sys PM)

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

	January 2016 PIT Count	January 2017 PIT Count	Difference
Universe: Total PIT Count of sheltered and unsheltered persons	178	171	-7
Emergency Shelter Total	76	67	-9
Safe Haven Total	0	0	0
Transitional Housing Total	61	63	2
Total Sheltered Count	137	130	-7
Unsheltered Count	41	41	0

Metric 3.2 – Change in Annual Counts

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

	Submitted FY 2016	FY 2017	Difference
Universe: Unduplicated Total sheltered homeless persons	1455	1272	-183
Emergency Shelter Total	1410	1247	-163
Safe Haven Total	0	0	0
Transitional Housing Total	115	86	-29

2018 HDX Competition Report
FY2017 - Performance Measurement Module (Sys PM)

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

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

	Submitted FY 2016	FY 2017	Difference
Universe: Number of adults (system stayers)	74	51	-23
Number of adults with increased earned income	2	4	2
Percentage of adults who increased earned income	3%	8%	5%

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

	Submitted FY 2016	FY 2017	Difference
Universe: Number of adults (system stayers)	74	51	-23
Number of adults with increased non-employment cash income	14	23	9
Percentage of adults who increased non-employment cash income	19%	45%	26%

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

	Submitted FY 2016	FY 2017	Difference
Universe: Number of adults (system stayers)	74	51	-23
Number of adults with increased total income	14	25	11
Percentage of adults who increased total income	19%	49%	30%

FY2017 - Performance Measurement Module (Sys PM)

Metric 4.4 – Change in earned income for adult system leavers

	Submitted FY 2016	FY 2017	Difference
Universe: Number of adults who exited (system leavers)	134	93	-41
Number of adults who exited with increased earned income	31	19	-12
Percentage of adults who increased earned income	23%	20%	-3%

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

	Submitted FY 2016	FY 2017	Difference
Universe: Number of adults who exited (system leavers)	134	93	-41
Number of adults who exited with increased non-employment cash income	33	30	-3
Percentage of adults who increased non-employment cash income	25%	32%	7%

Metric 4.6 – Change in total income for adult system leavers

	Submitted FY 2016	FY 2017	Difference
Universe: Number of adults who exited (system leavers)	134	93	-41
Number of adults who exited with increased total income	58	44	-14
Percentage of adults who increased total income	43%	47%	4%

2018 HDX Competition Report
FY2017 - Performance Measurement Module (Sys PM)

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

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

	Submitted FY 2016	FY 2017	Difference
Universe: Person with entries into ES, SH or TH during the reporting period.	1388	1229	-159
Of persons above, count those who were in ES, SH, TH or any PH within 24 months prior to their entry during the reporting year.	272	311	39
Of persons above, count those who did not have entries in ES, SH, TH or PH in the previous 24 months. (i.e. Number of persons experiencing homelessness for the first time)	1116	918	-198

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

	Submitted FY 2016	FY 2017	Difference
Universe: Person with entries into ES, SH, TH or PH during the reporting period.	1550	1471	-79
Of persons above, count those who were in ES, SH, TH or any PH within 24 months prior to their entry during the reporting year.	304	361	57
Of persons above, count those who did not have entries in ES, SH, TH or PH in the previous 24 months. (i.e. Number of persons experiencing homelessness for the first time.)	1246	1110	-136

2018 HDX Competition Report

FY2017 - Performance Measurement Module (Sys PM)

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

This Measure is not applicable to CoCs in FY2017 (Oct 1, 2016 - Sept 30, 2017) reporting period.

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

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

	Submitted FY 2016	FY 2017	Difference
Universe: Persons who exit Street Outreach	47	84	37
Of persons above, those who exited to temporary & some institutional destinations	0	0	0
Of the persons above, those who exited to permanent housing destinations	0	0	0
% Successful exits	0%	0%	0%

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

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FY2017 - Performance Measurement Module (Sys PM)

	Submitted FY 2016	FY 2017	Difference
Universe: Persons in ES, SH, TH and PH-RRH who exited, plus persons in other PH projects who exited without moving into housing	1430	1248	-182
Of the persons above, those who exited to permanent housing destinations	608	483	-125
% Successful exits	43%	39%	-4%

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

	Submitted FY 2016	FY 2017	Difference
Universe: Persons in all PH projects except PH-RRH	233	248	15
Of persons above, those who remained in applicable PH projects and those who exited to permanent housing destinations	188	214	26
% Successful exits/retention	81%	86%	5%

2018 HDX Competition Report
FY2017 - SysPM Data Quality

UT-504 - Provo/Mountainland CoC

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

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

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

2018 HDX Competition Report

FY2017 - SysPM Data Quality

	All ES, SH				All TH				All PSH, OPH				All RRH				All Street Outreach			
	2013-2014	2014-2015	2015-2016	2016-2017	2013-2014	2014-2015	2015-2016	2016-2017	2013-2014	2014-2015	2015-2016	2016-2017	2013-2014	2014-2015	2015-2016	2016-2017	2013-2014	2014-2015	2015-2016	2016-2017
1. Number of non-DV Beds on HIC	49	47	55	61	33	60	49	37	201	194	162	196	57	19	103	81				
2. Number of HMIS Beds	49	47	55	61	33	60	49	37	197	190	162	196	0	19	103	81				
3. HMIS Participation Rate from HIC (%)	100.00	100.00	100.00	100.00	100.00	100.00	100.00	100.00	98.01	97.94	100.00	100.00	0.00	100.00	100.00	100.00				
4. Unduplicated Persons Served (HMIS)	1011	1457	1401	1163	107	130	117	82	288	247	226	249	177	188	207	253	0	32	52	97
5. Total Leavers (HMIS)	990	1416	1371	1140	59	83	92	58	120	74	83	102	148	128	160	183	0	8	44	82
6. Destination of Don't Know, Refused, or Missing (HMIS)	890	120	105	41	6	21	6	3	5	0	16	4	57	77	0	1	0	7	42	82
7. Destination Error Rate (%)	89.90	8.47	7.66	3.60	10.17	25.30	6.52	5.17	4.17	0.00	19.28	3.92	38.51	60.16	0.00	0.55		87.50	95.45	100.00

2018 HDX Competition Report
Submission and Count Dates for UT-504 - Provo/Mountainland CoC

Date of PIT Count

	Date	Received HUD Waiver
Date CoC Conducted 2018 PIT Count	1/24/2018	

Report Submission Date in HDX

	Submitted On	Met Deadline
2018 PIT Count Submittal Date	4/30/2018	Yes
2018 HIC Count Submittal Date	4/30/2018	Yes
2017 System PM Submittal Date	5/30/2018	Yes