

EMERGENCY SOLUTIONS GRANT (ESG)

DCA HMIS Policy

2015-2016

Notwithstanding the HUD mandate for HMIS, the purpose of Georgia's collaborative HMIS project is to:

- Assist homeless persons to navigate the continuum of care
- Assist homeless service agencies with information allowing them to better serve consumers, and
- Assist homeless agencies, local, state and Federal entities with information on numbers of homeless persons, reasons for homelessness, services required, services received, gaps in services, etc.

**It is anticipated that HUD will issue new HMIS data and reporting standards during this grant year. At that time DCA will revise policies and procedures to become compliant with those changes. ESG sub-grantees are expected to comply with new standards and requirements within the timeframe established by DCA.

Participation Requirements

1. All DCA-funded ESG agencies must actively participate in HMIS by meeting the Implementation Requirements defined herein and in more detail in the Standard Operating Procedures Manual available at www.dca.ga.gov.
2. Sub-grantees must establish a unique project in HMIS for each DCA-funded ESG PROJECT TYPE, i.e. emergency shelter, prevention, rapid re-housing, etc. From year to year, agencies will need to retain the same project on HMIS, if they continue to receive funding for that project. For COMPASS ROSE users, all new projects will be created by Pathways Community Network Institute Technical Assistance staff, in accordance with your DCA ESG contract.
3. Emergency Shelter and Transitional Housing projects must also establish a housing inventory in HMIS for each project and keep this information updated and accurate. If a shelter or transitional housing project is a scattered site project with beds across multiple Continua, separate HMIS projects must be created for the beds in each Continuum.
4. All agencies must have at least one user designated as the Agency Administrator of HMIS and it is encouraged that you have more than one user on the system. In addition to recording data and agency configuration on HMIS, this user should be able to ensure data completion and data quality.
5. Authorization for HMIS should be attempted for 100% of persons who are "homeless" or at-risk of homelessness. Identical information must be kept in the hard copy file for consumers who refuse HMIS authorization.
6. Short term services-only projects are expected to enroll consumers into a project within HMIS. Services and referrals should also be entered into HMIS.
7. All housing projects are required to enroll consumers into the appropriate HMIS project within one week of project enrollment. Consumers must also be discharged from the appropriate HMIS project within one week of their actual discharge. Date of enrollment and discharge within the HMIS system should reflect the actual dates of project enrollment and project discharge. Agencies must enroll ALL family members into relevant projects (including children).
8. Efforts should be made to document all key service transactions provided to consumers.
9. If the sub-grantee is not able to serve a particular consumer, the sub-grantee must make every effort to record universal data elements for the household in HMIS and to make an appropriate referral to service providers based on the needs of the individual/family.
10. In the event of conflict between federal, state and local government and/or local Continuum of Care HMIS policy, the higher standard must be met.

Implementation Requirements

1. All agencies must comply with the policies and procedures outlined in the Georgia HMIS Standard Operating Procedures Manual (http://www.dca.ga.gov/housing/specialneeds/programs/documents/GaHMIS_SOPmanual.pdf)
2. All agencies must comply with the current HMIS Privacy, Confidentiality, and Security standards issued in the HUD Notice on 7/31/2004. These standards may change during the grant year, but currently require, but are not limited to:
 - Installing virus protection software, with an automatic update on every computer that accesses HMIS
 - Activating a locking screen saver on every computer that accesses HMIS
 - Developing a data privacy policy and notice
 - Posting the agency's privacy notice on its premises and website
 - Installing an individual or network firewall
 - Posting "purpose for data collection" signs at each intake desk
3. Documentation of consumer authorization/refusal must be maintained in each consumer file. Individuals refusing to authorize participation in HMIS should complete an Opt Out/Refusal form and information equivalent to the required HMIS data elements must be gathered and documented in the client file.
4. DCA staff will monitor HMIS participation through **periodic desk and/or onsite** monitoring, in addition to ongoing review of data in the HMIS. Data will also be reviewed within the reimbursement process where possible. DCA reserves the right to withhold payment until HMIS violations are corrected or required levels of data quality are achieved. For example, violations include, but are not limited to a percentage of "Missing" and "Don't Know/Refused" responses for universal and project level data elements above 5% for any element. It is your agency's responsibility to run data monitoring reports to ensure clean data prior to reimbursement request submissions.
5. Agencies must respond to DCA in writing when notified of HMIS Policy Violation within **10 working days** of receipt. Agencies should inform DCA of how they have responded to the violation. Failure to comply with HMIS requirements may result in DCA withholding payments until compliance is complete and documented, or termination of the grant(s). In addition, failure to comply with requirements may result in an agency being ineligible for funding or receiving a low HMIS performance score in the next grant year.
6. Future DCA funding levels will be based, in part, on HMIS performance. Considerations will include, but not limited to:
 - Level of system utilization including: having a clearly identifiable project name set up in HMIS, bed and unit inventory entered accurately into and maintained in HMIS. The ideal bed utilization is between 65% and 105%.
 - Number of households served in HMIS versus number of households projected in application
 - Completeness of universal and project level data elements, response to monitoring
 - Ensure data monitoring/data cleaning reports are run monthly and prior to reimbursement requests
 - Project enrollment and discharge
 - Service transactions and Referrals (consumers and non-consumers)
7. Sub-grantees with ESG funds approved for HMIS staff/fees or housing support (case management) may utilize those funds for HMIS data entry costs, HMIS costs including fees, basic software (virus protection/spyware, networking/firewall, operating system, productivity software such as MS Office, etc.), limited assistance obtaining HMIS technical assistance and training, user fees and Internet service if they have approval from DCA to do so.
8. Although DCA will make every effort to inform Agencies when this policy is revised, it is the responsibility of the sub-grantee to ensure they are in compliance with the current version of the HMIS Policy and Standard Operating Procedures. Updates are maintained on the ESG page of the DCA website at <http://www.dca.ga.gov/>
9. For guidance on required data elements refer to the HMIS Standards posted on the ESG page of the DCA website.
10. Family violence providers will submit HUD APR reports generated from their designated HMIS systems with reimbursement requests and annually. All data standards and data requirements apply.

**Training and technical assistance (TA) for HMIS is provided by Pathways Community Network Institute and can be accessed Monday-Friday from 8:30 A.M. through 4:30 P.M.*

"What gets measured gets done"