Pinellas Continuum of Care (CoC) Board of Directors Meeting and Orientation
Friday, May 2, 2024, 9:00am – 12:00pm
Habitat for Humanity, Homeowner Education Center: 13355 49th St. N., Clearwater
Zoom Link: Click Here | **Meeting ID:** 848 5072 2473| **Passcode:** 596292| **Dial-In:** 305-224-1968

The Pinellas Continuum of Care is dedicated to ensuring homelessness is rare, brief and a one-time experience.

Time	Topic	Category	Lead
9:00am	Welcome and Introductions	Information	Kathleen Beckman, CoC Chair
9:10am	Consent Agenda • CoC Board Member Attendance • March 2024 CoC Board Meeting Minutes • April 2024 CoC Membership Meeting Minutes • Confirmation of Gary Small's Appointment to Vacant Lived Experience Board Seat	Action	Kathleen Beckman, CoC Chair
9:15am	HMIS Policies and Procedures	Action	Imani Smith, HLA
9:25am	Coordinated Entry Mobility Transfer Policy	Possible Action	Daisy Corea, MPA
9:40am	The Board of Directors	Information	Kathleen Beckman, CoC Chair
9:50am	Charter Review	Information	Charlie Gerdes, Attorney
10:10am	Roberts' Rules of Order Review	Information	Charlie Gerdes, Attorney
10:25am	Council and Committee Review	Information	Board, Council, and Committee Leadership
10:40am	Questions and Answers	Discussion	Kathleen Beckman, CoC Chair
10:50am	FSS 125.0231: Anti-Camping Law	Discussion	Daisy Corea, MPA, HLA CEO
11:15am	Closing and Adjournment	Action	Kathleen Beckman, CoC Chair

Pinellas Continuum of Care Board of Directors Meeting Attendance

Member	Jan	Mar	May	Jul	Sep	Nov
CM Kathleen Beckman	X	X				
CM Deborah Figgs-Sanders	X	X				
April Lott	X	X				
Kevin Marrone	X	X				
Sean King	Virtual	Virtual				
Sam Picard	X	X				
Ann Marie Winter	X	X				
Theresa Jones	X	X				
Esther Matthews	-	X				
Chuck Lane	X	X				
Commissioner Donna Holck	Absent	Absent				
Camille Henry	X	X				
Jeanine Evoli	X	X				
Michael Chretien	X	X				
Elise Minkoff	X	X				
Danielle Thomas	X	X				
Commissioner Rene Flowers	Virtual	Virtual				
Lt. Zach Haisch	X	X				
Lariana Forsythe	X	X				
Michael Jalazo	X	X				
Blossom Kapper	X	X				
Ross Silvers	X	X				
Sara Madden	X	X				
Caprice Edmond	-	Stephanie Long				

Pinellas Continuum of Care Board of Directors Meeting Minutes
April 5, 2024, 9:00am – 11:00am
Habitat for Humanity and Virtual
[Click Here to View Recording](#)

Attendees		
CoC Chair Kathleen Beckman	CM Deborah Figgs-Sanders	April Lott
Kevin Marrone	Danielle Thomas	Michael Jalazo
Chuck Lane	Jeanine Evoli	Camille Henry
Sam Picard	Michael Chretien	Elise Minkoff
Ross Silvers	Esther Matthews	Sara Madden
Theresa Jones	Ann Marie Winter	Lt. Zach Haisch
Lariana Forsythe	Stephanie Long	CM Maribeth Wetzel
Lisa DePaolo	Gary Small (guest)	
Virtual Attendees		
Sean King	CM Rene Flowers	Amy Foster
Helen Rhymes	Yvonne Morales	
HLA Board and Staff Attendees		
Pamela Qualls	Victoria Kelly	Cindy Kazawitch (virtual)
Lara Wojahn (virtual)		

Welcome (presented by CoC Chair Kathleen Beckman)
- CoC Chair Kathleen Beckman called the meeting to order at 9:01am.

Overview of Board Meetings (presented by CoC Chair Kathleen Beckman)
- Members of the CoC Board of Directors (BOD) are elected and appointed leaders who make policy decisions on behalf of the CoC — evaluating needs, implementing strategic responses, and measuring results. Members include diverse service providers and elected officials.
- Meeting agendas are provided approximately a week prior to the meeting and include attendance, minutes, items from councils and committees, and important updates and items for discussion or approval. During meetings, members sign-in and collect a printed agenda; the CoC Chair or Vice Chair calls the meeting to order at 9am, and members share success stories. Consent Agendas are reviewed, actions and information items are discussed, there is an opportunity for public comment, and the meeting adjourns at 11am.
- Meetings follow Roberts' Rules of Order, which means official action is only taken when quorum is achieved. Quorum requires at least 51% of members be present. As of February 2024, CoC Board quorum is 14. If quorum is not achieved, present members may make formal recommendations to be included in the next meeting's Consent Agenda. Consent Agenda items may be approved as a unit or discussed individually. Regarding motions (action), Roberts' Rules state that motions require firsts and seconds, which are made by Board members. Once a motion is seconded, Board members will approve / deny the motion by indicating if they are in favor of or opposed to the motion. Motions are required for official action, such as adding agenda items, approving items, adding or striking language to or from documents, policies, etc.
  o The role of designees is discussed. The CoC's attorney, Charlie Gerdes, will be consulted.
- Board meetings occur on Fridays January 12th, March 1st, May 3rd, July 12th, September 6th, and November 1st at Habitat for Humanity in Clearwater. In-person attendance is required for quorum. Additionally, Board members must attend at least three board and two membership meetings annually.

Introductions and Success Stories (presented by CoC Chair Kathleen Beckman)
- Members are introduced.

- Ann Marie Winter shares a success story about a senior, "Gina," who was sleeping on the floor at her home with the St. Petersburg Housing Authority and could not afford to remove her items from storage. SPHA partnered with the Area Agency on Aging to retrieve her belongings so Gina is now sleeping in her own bed.
- Elise Minkoff with the Pinellas County Housing Authority shares upcoming senior housing at Rainbow Village.
- Lariana Forsythe discusses the first phase of the CASA Tiny House program will be occupied in a few weeks. This was done in partnership with PERC.
- Kevin Marrone shares partnership with Boley and the St. Petersburg Housing Authority's voucher-based program at Whispering Pines. Boley hopes to open these 20 units on April 1st. Boley is also partnering with Maximo Elementary School through the St. Petersburg Housing Authority to address student and family homelessness.
- Board members wish Michael Chretien a happy birthday.
- Commissioner Maribeth Wetzel states this will be her final meeting, as she will no longer represent the City of Treasure Island. Board members wish Commissioner Wetzel well and encourage her to continue participating in the CoC.
- April Lott shares a collaborative effort to help a wheelchair-bound individual with a support animal who recently received a voucher and is now in an apartment and doing well. The client says "I never thought I would be worthy of a home" and is very appreciative. Ms. Lott requests assistance furnishing this unit.

Consent Agenda (presented by CoC Chair Kathleen Beckman)
- The Consent Agenda includes 2024 meeting attendance and January 2024 meeting minutes.
- Esther Matthews notes that she did not receive an email invitation, which has since been corrected.
- Theresa Jones states that Councilmember Deborah Figgs-Sanders was listed as a virtual attendee in the minutes but attended in-person.

Theresa Jones motions to approve the Consent Agenda; Ann Marie Winter seconds; motion passes unanimously.

Advocacy (presented by CoC Chair Kathleen Beckman)
- Florida Senate Bill 1530 and House Bill 1365 is currently being considered. This would prohibit municipalities from allowing sleeping on public property without a certification from DCF. This bill would allow for a person or business to sue local governments for violating this law. As such, counties and municipalities are authorized to create designated camping zones that must adhere to strict requirements including 24/7 security, running water, and bathrooms; prohibition of drug and alcohol use; provide behavioral and substance use treatment services; be in place for no longer than one-year; and be in non-residential areas. HLA was contacted by media, so the HLA Board of Directors has released a statement focusing on education and urging lawmakers to consider alternatives. This statement was reviewed by the CoC Board, but it was not released by the CoC.
- The CoC has an Advocacy Committee that has not been formed. Chair Beckman requests those who are interested in joining or leading this committee contact her or the HLA. The CoC Charter states that the Advocacy Committee "will develop an annual HLA advocacy agenda to be approved by the Board, advocate on behalf of the Pinellas CoC; and address any advocacy issues that may arise throughout the year."
- Committee members discuss lobbyists, noting that statewide organizations have lobbyists. The statewide organization has not released a statement as of this meeting. Theresa Jones shares her advocacy at the state level.
- Michael Jalazo discusses the CoCs who have come out in favor of this legislation, thinking this would increase supportive services. Kevin Marrone discusses the lack of funding and of specificity in language, suggesting we must review utilization.

- Ann Marie Winter suggests the CoC write a letter to send to elected officials. Pamela Qualls notes that not all CoC Board members agree with the statement.
- Amy Foster says that some advocacy groups who would normally fight this are not because they are hoping to sue the government, citing conversations with the Southern Poverty Law Center. Ms. Foster notes that this bill does not impact private land, stating that encampments on private property are becoming more common. Ms. Foster clearly that there is inadequate shelter, such as shelter for non-ambulatory individuals and seniors.
- Esther Matthews asks what the push for the Advocacy Committee is, whether they will advocate at the state and national levels, or if they will bring more issues to the board. Michael Jalazo indicates this conversation originated from a desire to create materials to share with elected officials, noting the conversation has changed over the last year. Councilmember Deborah Figgs-Sanders discusses the origination of the Advocacy Committee, which was created to provide resources and information to elected officials. Councilmember Figgs-Sanders notes the importance of an Advocacy Committee and a need to decide on a purpose before forming this committee. Councilmember Figgs-Sanders suggests this group focus on providing important information to local elected officials for consideration in policymaking and budgeting.
- Advocacy Committee membership requires CoC membership, though any member of the public may participate in meetings. Esther Matthews points to membership dues being prohibitive for membership. The Executive Committee notes membership scholarship are available.
- Commissioner Rene Flowers discusses the fear of retaliation that some organizations may feel. Commissioner Flowers suggests speaking with a Senator or House Representative to file a bill to address funding or a pilot program for persons 65+, and the advocacy would come from the elected official, eliminating the fear of retaliation. Commissioner Flowers considers the importance of weighing the fear of retaliation and the need to advocate.
- Board members discuss the state anti-camping legislation, advocacy, and shelter availability. Councilmember Figgs-Sanders and Ann Marie Winter say that some individuals can and should take stances without fear of retribution. April Lott points to disagreement on the stance.
- Board members discuss the impact of proposed legislation on people who cannot get into shelter, are wheelchair-bound, etc. and how that may lead to criminalizing homelessness. Lt. Zach Haisch notes that all arresting officers have discretion when making arrests.
- Vacant building space is discussed, but there is a lack of community support. Board members also discuss the stigma that people experiencing homelessness face and that there are members of the community who believe people should be arrested for homelessness.
- Board members agree to establish an Advocacy Committee to address issues impacting Pinellas County.

Council and Committee Updates (presented by CoC Chair Kathleen Beckman)
- Funders' Council is still seeking a chair. There are 4 joint meetings with Providers' Council annually. The last meeting discussed workflow, priorities, and communication with funders. Chuck Lane with the City of Clearwater is serving as a liaison / lead in the absence of a chair. Chuck Lane discusses the importance of consistency between jurisdictions. April Lott suggests standardizing priorities and reporting requirements.
- Providers' Council discussed legislative issues during the last meeting, in addition to the recent issue at HEP. This discussion centered around screening and service / partnership processes.
- The Data and System Performance Committee will return to regularly presenting data to the board once data is made actionable. Total client inflow reduced 17% last quarter; 881 clients exited to unknown; ~5500 clients are served per month; Street Outreach increased service over same quarter last year by 21%, surveying ~1800 people; average of 112 days for rapid rehousing (RRH) client to move into housing; 82% of RRH clients exit to permanent housing. Board members discuss coordination to ensure targeted and prioritized funding. Sam Picard discusses community funding support flowing through the CoC.

- Diversity, Equity, and Inclusion Committee is searching for a chair and is looking for ways to make a meaningful impact over the next year. The Board would like this committee to invite the ACLU to do a presentation at a membership meeting.
- The Lived Experience Advisory Committee (LEAC) has chartered and elected leadership. This group wants to influence priorities and advocate for the needs of the people on the street. LEAC is eager to collaborate with providers and committees. April Lott asks if LEAC has discussed recent legislation. Michael Chretien points to the early stages of this committee. Ms. Lott suggests LEAC help advocate in the absence of an Advocacy Committee.

Public Comment (presented by CoC Chair Kathleen Beckman)
- Danielle Thomas discusses a new development, Bear Creek Commons, which will begin taking applications soon.

Closing and Adjournment (presented by CoC Chair Kathleen Beckman)
- The HLA's new CEO, Daisy Corea, will begin on March 25th.
- CoC Chair Kathleen Beckman adjourned the meeting at 11:01am.
- The next meeting is Friday, April 5, 2024.

Pinellas Continuum of Care Membership Meeting Minutes
April 9, 2024, 11:00am – 1:00pm
St. Petersburg Housing Authority and Zoom
Click Here to View Recording

In-Person Attendees		
CoC Chair Kathleen Beckman	CM Deborah Figgs-Sanders, Vice Chair	Kevin Marrone, Providers' Chair
Sam Picard	Gary Small	Michael Lundy, SPHA CEO
Collette Clarke	Gary Webb	Katie Hall
Erika Gist	Judith Warren	Zandra Eardley
Dolores Raffa	Dominique Randall	Daniel McDonald
Nick Fokianos		
Virtual Attendees		
Sean King	Elise Minkoff	Ann Marie Winter
Camille Henry	Theresa Jones	Michael Jalazo
Chuck Lane	Jeanine Evoli	Rebecca Backus
Patricia Toscano	Alejandra Arias	Meg Taylor
Cassandra White-Carson	Ric Cipriani	Renee Applegate
Timothy Calhoun, Jr.	Jodie White	Greg Williams
Katherine McMillan	Samantha Moullet	Dr. Monica Discolo
Christine Long	Guttenberg Pierre	Nick Bennett
Greg Williams	Joe Pondolfino	Kasey Nichols
Kathy Hamm	Ruth Pierce	Emma Lauderdale
Yantale Owens	Jessica Kushner	Melody Hefner
Julie Wade	Andy Francis	Veronica Burnam
K. Yeazell		
HLA Board and Staff Attendees		
Mick Constantinou, HLA Board Chair	Pamela Qualls, HLA Board Secretary	Lee Allen, HLA Board Member
Daisy Corea, MPA, CEO	Victoria Kelly	Heather Nix (virtual)

Welcome (presented by CoC Chair Kathleen Beckman)
- CoC Chair Kathleen Beckman called the meeting to order at 5:30pm.
- In-person attendees are introduced.

St. Petersburg Housing Authority (SPHA) (presented by Michael Lundy, SPHA CEO)
- SPHA is formed in 1937 and is a quasi-governmental agency, receiving funding from the Federal government, enacting legislation from the State, and serving the City of St. Petersburg. SPHA also serves 10-miles outside of city limits. SPHA – the second oldest Housing Authority in Florida – exists to provide affordable housing to the residents of St. Petersburg, serving over 4,000 families. There are several different type of units and vouchers managed by SHPA. SPHA also works with community partners to provide supportive services to residents in need; SPHA also has a social services department to provide wraparound services. The Housing Authority also manages 15-year homeownership programs and boasts a real estate development program.
- Mr. Michael Lundy shows photos of The Legacy at Jordan Park development, which opened in October 2023 and is 100% occupied. 206 Jordan Park Family Units were renovated, providing increased amenities to increase stability, community wellbeing, and security. Photos of the redevelopment of the former Ed White Hospital are also shown. These units will provide senior affordable housing, as well as serving as the SPHA's new headquarters, and an Evara Healthcare Clinic. SPHA is collaborating with affordable housing developer Blue Sky Communities on a new affordable housing residential community around 30th Ave. N. and 34th St.
- Mr. Lundy notes the importance of the SPHA Board and community in the agency's success.

State of Homelessness in Pinellas County (presented by Kevin Marrone, Providers' Council Chair, and Daisy Corea, MPA, HLA CEO)

- Kevin Marrone invites providers to join the Providers' Council at the May 2nd joint Providers' Council and Funders' Council meeting.
- The 2023 Pinellas County Point in Time (PIT) Report, the U.S. Department of Housing and Urban Development (HUD)'s 2023 Annual Homeless Assessment Report (AHAR), and the National Low Income Housing Coalition's Gap Report are reviewed. The PIT Report analyses homelessness in Pinellas County, showing trends in homelessness from 2016 onward. The AHAR analyses and compares data from national PIT Counts, identifying local and national trends. The Gap Report breaks down the availability of affordable housing across the country, comparing housing costs with income.
- Per the AHAR, Florida is home to 5% of people experiencing homelessness, 6% of people experiencing unsheltered homelessness, and 7% of Veterans experiencing homelessness. Overall homelessness increased 18.5% in Florida between 2022 and 2023, the 3rd largest increase nationally. Similarly, family homelessness increased 21.6%, the 4th largest increase. Conversely, overall homelessness has decreased 36% since 2007, the largest decrease across the country. Locally, the AHAR shows when compared to similar, "mostly urban Continuums of Care" throughout the United States, Pinellas County has the highest rate of Veterans experiencing homelessness, 2nd highest rate of families experiencing homelessness, 4th highest rate of individuals experiencing chronic homelessness, 5th highest rate of people overall experiencing homelessness, 5th highest rate of individuals experiencing homelessness, and 5th highest rate of Veterans experiencing unsheltered homelessness.
- The Gap Report uses Area Median Income (AMI) to evaluate cost (rent) burdens. AMI is calculated by HUD annually. The Gap Report shows that Tampa Bay is the 8th most severely cost burdened metropolitan area in the country. There are only 21 available and affordable units for every 100 extremely low-income households (30% of AMI or lower); this is lower than the average for Florida, which is 25 available and affordable units. This report also shows that 91% of extremely low-income households in Pinellas County were cost burdened, meaning they spend more than 30% on housing and utilities; 83% were severely cost burdened, meaning they spend more than 50% on housing and utilities. 89% of households under 50% of the AMI in Pinellas were cost burdened, and 50% were severely cost burdened. These numbers are higher than state averages.
- The 2023 Pinellas PIT showed a minimum of 2,144 people experiencing homelessness in Pinellas County on a single night. 646 of these individuals were unsheltered, and 1,498 were sheltered. At this same time, there were 1,986 Emergency Shelter, Transitional Housing, and Safe Haven beds in the county. Mr. Marrone notes that 2024 PIT data is currently being cleaned and will be available in the future.
- As of April 1, 2024, Pinellas Coordinated Entry (the "front door" for services) wait lists for unsheltered individuals, families, and Veterans awaiting Rapid Rehousing or Permanent Supportive Housing included 53 families, 207 individuals, and 39 Veteran individuals.
  - Attendees ask why so many beds were left vacant. Board members identify staffing capacity, availability of supportive services, physical capacities, and family compositions as the primary factors.
  - Attendees also ask how unsheltered people can access assistance. Board members point to the Coordinated Entry front doors, which are 2-1-1 Tampa Bay Cares, Street Outreach, and the HLA's Request Help form. Board members also point to the Homeless Resource Guide and CoC providers.
- The Supreme Court case of *Johnson v. Grants Pass* will be heard on April 22nd. This case, which started in Grants Pass, Oregon, will decide if cities can punish people for sleeping outside with items such as blankets, even when there is no safer option available. The HLA signed onto a healthcare amicus brief, citing the negative impact criminalizing homelessness can have on community and individual health. The case of *Martin v. Boise* previously stated that homeless persons cannot be punished for sleeping outside on public property when no adequate alternatives are available.

- Florida Senate Bill 15350 and House Bill 1365 were signed into law on March 20th. These laws state that effective October 1, 2024, counties and municipalities may not allow sleeping or camping on public property. Governments can create "safe sleeping" areas with various stipulations, including a DCF certification requirement; required security, running water, bathrooms, behavioral healthcare, and substance use treatment; drug and alcohol free; in place for no longer than one-year; and are in a non-residential area that will not negatively impact property values. Effective January 1st, residents and businesses can sue local governments for noncompliance. No state funding has yet been allocated for this mandate.
    - Participants wonder what the CoC will due in light of recent legislation. Board members state that over the coming months, they will meet with government partners, providers, and people who have experienced homelessness in our community.
    - Discussion about the effective dates of October 1st and January 1st are discussed. This Florida legislation will go into effect on October 1st; effective January 1st, residents and local businesses will be permitted to sue local governments for allowing sleeping or camping on public property.
    - Participants ask about HUD funding provided to local nonprofits. Board members point to the annual [HUD CoC Notice of Funding Opportunity (NOFO),](#) which helps fund emergency shelter, rapid rehousing, transitional housing, safe havens, and permanent supportive housing.
    - Participants ask how many organizations the CoC helps. Victoria Kelly states that the CoC includes dozens of member agencies who participate in a variety of ways, promising to review some of the benefits of memberships and ways to participate in the next section of the presentation. Kevin Marrone invites participants to participate in the [May 2nd](#) Providers' Council meeting.
    - Participants discuss the need for truly affordable housing for extremely low-income individuals and families. The Board also discusses the value of services such as permanent supportive housing, which are people who would be homeless but are not due to involvement in these programs and the need for additional HUD funds to support this.
    - Participants share personal experiences with homelessness and serving as a service provider, noting the value of smaller nonprofits helping households while they await larger services from the larger agencies and housing providers.
    - Theresa Jones, CoC Board Member, discusses her opposition to recent anti-camping legislation, stating that she now hopes the law's passing will encourage more of the Pinellas County municipalities to fund programs such as rapid rehousing.
    - Chair Kathleen Beckman thanks everyone who participated in the January Point in Time Count, inviting people to join the Point in Time Planning Committee. Chair Beckman also mentions that the 2024 PIT data will be available in July.

Continuums of Care (CoC) 101 (presented by CoC Chair Kathleen Beckman)
- CoCs are mandated by HUD and are designed to promote a community-wide commitment to the goal of ending homelessness; provide funding to quickly rehouse homeless individuals, families, persons fleeing domestic violence, and youth while minimizing the trauma and dislocation caused by homelessness; promote access to and effective utilization of mainstream programs by homeless individuals and families; optimize self-sufficiency among those experiencing homelessness; develop and implement a long-term plan to address homelessness, including housing and service gaps; and apply for HUD's annual CoC Program Notice of Funding Opportunity (NOFO).
- The Pinellas CoC has been operational for nearly 40 years. The vision of the CoC is to make homelessness in Pinellas County rare, brief, and a one-time experience. The CoC's mission is to coordinate community partners, systems, and resources to prevent, divert, and end homelessness in Pinellas County. The CoC uses a Coordinated Entry system to ensure equitable access to housing and services in Pinellas County. Coordinated Entry access points include 2-1-1 Tampa Bay Cares, Street Outreach, and the HLA's Request Help form.

- The CoC follows a Housing First approach, which prioritizes providing permanent housing to people experiencing homelessness. Housing First is guided by the belief that all people are "housing ready" and need basic necessities before attending to less critical tasks; it is based on the understanding the client choice is valuable in housing selection and supportive service participation. HUD rewards CoCs for following this model. The CoC is planning to host Housing First training in June 2024.
- The CoC is made up of members, who are people and organizations living in, working in, going to school in, and / or serving Pinellas County. Members include nonprofit and faith-based organizations, government agencies, elected officials, for-profit businesses, neighbors, students, and people who have experienced homelessness. CoC members elect and serve as CoC leadership; share resources and information, have access to an expanded pool of volunteers; attend networking events and training sessions; receive funding and advocacy alerts; and serve on critical boards, councils, and committees, including the:
  - Board of Directors: Makes policy decisions on behalf of the CoC by evaluating needs, implementing strategic responses, and measuring results. Members include elected and appointed leaders.
  - Executive Committee: Supervises the affairs of the CoC's Board of Directors; makes recommendations to the Board as necessary. Members include the CoC Chair, Vice Chair, and Secretary; Chairs of the Funders' and Providers' Council; and the immediate past chair.
  - Funders' Council: Advises the CoC Board on funding of homeless and at-risk services and coordinates local and community-wide planning.
  - Providers' Council: Advises the CoC Board on services for Pinellas residents experiencing and at-risk of homelessness; also highlights concerns and necessary actions.
  - Advocacy Committee: This committee is currently being formed to advocate on behalf of the CoC, develop an annual advocacy agenda, and address advocacy issues as they arise.
  - Data and System Performance Committee: Coordinates data from the Pinellas Homeless Management Information System (HMIS), reviews data and system performance measures, informs best practices, and recommends funding priorities.
  - Diversity, Equity, and Inclusion Committee: Provides insight into and develops strategies for promoting diversity, equity, and inclusion within the CoC.
  - Lived Experience Advisory Committee (LEAC): Advises CoC Board on services, programs, and the needs and concerns of individuals and families experiencing and at-risk of homelessness. Members include individuals who have a personal experience with homelessness.
  - Point in Time (PIT) Planning Committee: Advises the CoC Board on services and programs, as well as the needs and concerns of individuals and families experiencing and at-risk of homelessness.
- To join the CoC, visit www.PinellasHomeless.org/pinellascoc. Influenced by feedback provided during past membership meetings, new membership types, dues, scholarships, and sliding scales have been released:
  - Affiliate: Anyone working or living in Pinellas; $0 annual dues; are not eligible to vote
  - Youth Advocate: Anyone working or living in Pinellas who is 24 or younger; $0 annual dues; are eligible to vote
  - Community Advocate: Anyone living, working, or going to school in Pinellas; $20 annual dues; scholarships are available; eligible to vote
  - Lived Experience: Anyone who has experienced homelessness within the last 7 years and is living, working, or going to school in Pinellas; $20 annual dues; sliding fee scales are available; eligible to vote
  - Faith-Based Partner: Faith-based organizations serving Pinellas; $150 annual dues; sliding fee scales are available; eligible to vote
  - Nonprofit / Government Partner: Nonprofit and government agencies serving Pinellas County; $300 sliding fee scales are available; eligible to vote

- o Business Partner: For-profit businesses serving Pinellas County; $500 sliding fee scales are available; eligible to vote
- Members joining or renewing before May 30th will receive a CoC *Ending Homelessness Together* decal.

The Homeless Leadership Alliance of Pinellas (HLA) (presented by Daisy Corea, MPA, HLA CEO)
- The HLA serves as the Collaborative Applicant, Lead Agency, and HMIS Lead Agency for the CoC, and the HLA manages the Pinellas Coordinated Entry (CE) system. HLA has a separate Board, CEO, and staff. As the Lead Agency, the HLA provides CoC meeting support, ensures compliance, and applies for the CoC funding.
- As the Collaborative Applicant, the HLA applies for the annual HUD Homeless Notice of Funding Opportunity (NOFO). Projects eligible to participate in the HUD NOFO include permanent supportive housing, rapid rehousing, transitional housing, supportive services, and CoC planning and HMIS. For the Fiscal Year 2023 NOFO, Pinellas County was awarded $6,149,111.
- As the HMIS Lead Agency, HLA manages HMIS, the local database used to collect information about clients and housing services for individuals experiencing and at-risk of homelessness. View HMIS's CoC System Dashboard at www.PinellasHomeless.org/coc-system-dashboard.
- HLA manages the Pinellas Coordinated Entry (CE) system, the standard access, assessment, and referral process for housing and other services across agencies in the Pinellas CoC. CE is designed to ensure equitable service access, meaning those with the greatest need are served first. Individuals and families receive services through CE Access Points, including 2-1-1 Tampa Bay Cares, Street Outreach, and HLA's Request Help form. HLA also provides client services through housing navigation, rapid response community navigation, rapid response prevention and diversion, Veteran services, and workforce development.
  - o Participants ask for a list of resources, and the Pinellas Homeless Resource Guide is provided.
  - o Participants ask if Safe Harbor and Pinellas Hope are the only available shelters. Victoria Kelly states that as part of the CE system, individuals and families can access shelter through a CE Access Point. This system includes an assessment that helps households with the greatest needs and at the greatest risk be served first, ensuring equity in service. Board members also discuss Safe Harbor being considered an emergency shelter while funded as a jail diversion program, also noting services are provided at this location.
  - o Participants discuss the value of knowing what resources are available, which the Pinellas Homeless Resource Guide helps with.

CoC in 2024 (presented by Victoria Kelly, HLA)
- Participants are asked to share what they would like to see from the CoC, including activities the CoC should participate in and benefits that should be provided through membership. Participants share the following suggestions:
  - o Provide increased legislative updates, and interact frequently with legislatures
  - o Review the efficiency and effectiveness of the Coordinated Entry process
  - o Shelter Prioritization List assessment
  - o Inform unhoused and providers about information related to state legislation and how it will personally impact people. The unhoused are scared, and misinformation is being shared.
  - o Regular outreach events hosted by the HLA where different CoC providers can offer services in one space, similar to the VA's Stand Down for Homeless Veterans
  - o Increased help for nonprofits
  - o Increased disability awareness training
  - o Mental health wellness meetings
  - o Opportunities for housing
  - o Arts initiative for ending homelessness

      o   Educators discussing homelessness in schools

      o   Hire more people with lived experience

<u>Public Comment</u> (presented by Victoria Kelly, HLA)

- Members are encouraged to share updates at this time. Members are also encouraged to share program updates, resources, success stories, and volunteer opportunities with the HLA, who will share them with providers, the public, and volunteers.
- Kasey Nichols shares the Pinellas Lighthouse for the Blind and Tampa Lighthouse for the Blind, local nonprofits helping visually impaired people in Tampa Bay.

<u>Future Meetings</u> (presented by Victoria Kelly, HLA)

- The next CoC Membership meeting is August 13th at the Pinellas County Housing Authority (PCHA). This meeting will include an opportunity to tour an affordable housing property. The last meeting of 2024 will be November 12th.
- CoC Information Sessions covering topics such as resources for transportation, healthcare, Veterans, seniors, families, employment, and more – were hosted in February and March and will also take place virtually on Tuesdays May 14th, June 11th, July 9th, September 10th, October 8th, and December 10th. Information and materials from prior sessions are available here and here.

<u>Closing and Adjournment</u> (presented by CoC Chair Kathleen Beckman)

- CoC Chair Kathleen Beckman adjourned the meeting at 7:30pm.
- The next meeting is Tuesday, August 13, 2024 at the Pinellas County Housing Authority.

CoC Board of Directors Nomination for Gary Small

Lived Experience Seat

Requested Narrative

My interests are trying to help our / My community Homeless, Teens in Crisis and Elderly in Crisis get the help they desperately need, gain knowledge of available programs, educate them on who, where. And HOW to seek them out. Getting the food they need and any shelter options available to them. With the growing homeless and citizens at risk numbers growing and the housing market increases it seems to be a trend I think we can conquer ultimately, I spent almost 2 years homeless and have a intimate (recent) knowledge of homelessness, I am not homeless now I thank the Lord, but I am motivated more than some I have encountered out there. With People such as the COC and the HLA we can work together with Outreach and Church, state, and City to make homelessness a rarity, and less of a standard. Please consider my application and hopefully approve my nomination as I truly feel helping is my true calling in life. I do have much to offer and insight in the special needs our city, county and state needs to help those in crisis I am somewhat at a loss of words at this moment so please forgive me. Here is my cell phone number call me anytime 727 454 6804 or email me at garyhsmall1964@gamil.com THANK You..

Requested Biography or Resume

Hello my name is Gary Small Born July 21 1964 in Mound Park Hospital (Bayfront) I am 59 years old Single Divorced father of 3 with 3 grandkids 1 female adult 2 boys in high school. I Have lived 90% of my life in Pinellas County Florida, I don't own a home I have rented my whole life. I retired from auto mechanics (ASE Master Cert) after 35 years, I grew up working for my brother construction company gaining extensive experience in various fields of construction, I raised 3 kids on my own 1 son of my loins, 2 adopted girls I did my best raising them to be good people. My grandkids are from my son, my girls have yet to provide any grandkids. I go to Northside Baptist church and volunteer at their food bank twice a week helping to feed Gods people. I used to speak Spanish really well but I don't use it much these days so I'm pretty rusty but will to take a refresher course at Clearview adult education Center on 38th Avenue if it will helps. I don't smoke, drink, or use drugs, my kids and grandkids are my drug they are my life. Although serving Gods people are a close runner up. I wasn't prepared to write a detailed Bio on myself so forgive my short story. Gary Small..

Pinellas Continuum of Care - BOD Nomination Form   COMPLETE   #30

Please complete the application below to apply or nominate someone for a seat on the Pinellas Continuum of Care (CoC) Board of Directors.

Current CoC Board Members needing to renew their Board Membership should visit www.bit.ly/BODrenewal.

Valid 2023 CoC membership is required for Board eligibility. If you have not joined or renewed your CoC Membership this calendar year, please first do so utilizing the forms at www.PinellasHomeless.org/pinellascoc.

CoC Board of Directors Policies:
-- CoC Board members are required to live or work in Pinellas County.
-- Elected Board Members may serve (3) 2-year terms up to a maximum of 6 consecutive years (including partial terms) before rotating off for at least 1 year.
-- Appointed Members are not subject to term limits, but an annual Vote of Confidence must be held.
-- Organizations may only have 1 Elected Member on the CoC Board of Directors. Please note that this does not apply to the (Formerly) Homeless Board Seat.
-- Individuals holding the (Formerly) Homeless Board seats must have experienced homelessness within the last 7 years.

If you have questions, please email VKelly@HLAPinellas.org.

CREATED

PUBLIC
Feb 24th 2024, 1:56:22 pm

IP ADDRESS

Unavailable

Name

Gary Small

Cell Phone Number

██████████

Email Address

██████████████████

Title and Employer (if retired, last employer & profession)

retired- ASE Master Tech Firestone, Olin Mott, Doug Schooley automotive and Machine

Address (work address is preferable)

████████████████████

Florida

Kenneth City 33

United States

14

Nominator's Information: Name and Company

(No response)

Do you live or work in Pinellas County?

Both Live and Work in Pinellas County

Are you a current member of the Pinellas CoC? Please note that membership follows the calendar year.

Yes, I / my organization joined or renewed in 2023

Seat Category for Nomination (check all seats that you are open to holding; please note that some seats may not be open, as terms are staggered to ensure Board stability):

At-Large (3 elected seats), Homeless/Formerly Homeless (2 elected seats)

Please list current and past affiliations with professional and community organizations/foundations for the last five (5) years. Please include the name of the organization, dates of affiliation, your role and current status.

Current HLA member, current COC member, and and current Northside Baptist food panty Volunteer, I help out at Feeding Pinellas at 63rd street and 54th Avenue North

What skills, knowledge and experience do you bring to the Continuum of Care? What is your interest in homelessness in Pinellas County.

Advocacy: Interested
Board Development (recruitment, training, evaluation): Interested
Community Outreach: Very Experienced
Data Analysis / Quality Assurance: Interested
Diversity, Equity, and Inclusion: Interested
Domestic Violence / Survivor's Services: Some Experience
Emergency Management: No Experience
Employment / Labor / Workforce Development: Interested
Finance Management: No Experience
Fundraising: No Experience
Grant Research, Writing or Management: Interested
Government / Public Policy : Interested
Heath Care / Mental Health Services: No Experience
Homeless Issues: Very Experienced
Housing / Real Estate:
Human Resources (hiring, managing or evaluating employees):
Information Technology: Very Experienced
Leadership (served in a leadership capacity at other organizations, committee participation, etc.): Some Experience
Legal Services: No Experience
LGBTQIA+ Services: No Experience
Marketing: No Experience
Media/Public Relations/Communications: Interested
Nonprofit Management: No Experience
Project Management: No Experience
Public Speaking: Interested
Senior Services: Some Experience
Social / Human Services: Interested
Special Event Planning: No Experience
Strategic Planning: No Experience
Veteran Services: No Experience
Volunteer Recruitment or Management: Interested
Youth Services: Some Experience

15

For any items above where you are either very experienced or have some experience, please provide additional details.

I have conducted My own outreach along 34th street north feeding homeless elderly and talking with them to steer them in the appropriate direct for services they need most and where to find these services, most have no idea these services exist or where to go to access them, provide emergency food as my resources are available, i want to do all i can to help end hunger and homelessness in our area and state, right now knowledge of programs and where to go is something i find people just don't have this information. I'm sure there are many ways i can be of Benefit Your BOD if i am given the chance.

Please attach a short narrative (less than one page) summarizing your interest in joining the Board of Directors of the Pinellas Continuum of Care.

gary.docx

Please attach a personal biography or resume to accompany your Board of Directors application.

gary_bio.docx

Please provide two personal or professional references, including their names, your relationship to each, their email addresses and best contact phone number(s).

Christopher Lapointe, friend of 30 years plus [Tina Lockhart friend of 20 years [

All Pinellas Continuum of Care Board of Directors members are required to serve on a committee. Are you willing to serve on a committee?

Yes

The board meetings are BIMONTHLY on the first Friday of the month from 9:00am to 10:30am, and in-person participation is required for quorum. Are you able to commit to this schedule?

Yes

By typing your name below, you certify that the above and any information attached to this application is true and accurate.

Gary H Small

16

Pinellas
Continuum
of Care
Ending Homelessness Together
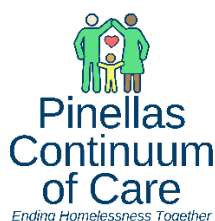
2024 HMIS P & P Revisions

General Changes and Updates

- Staff titles and grammar changes were made/updated.
- Checked all links and updated when necessary throughout the document for ease of use for the reader.
- Updated WellSky's module name from "ServicePoint" to "Community Services."

HUD HMIS Data and Technical Standards Final Notice – Page 3

- Updated the HUD HMIS Data and Technical Standards Final Notice to include changes made in the HUD HMIS Data Standards Manual Version 1.1.

Domestic Violence Shelters and Programs – Page 3

- Added more information regarding Victim Service Providers and comparable databases.
- Updated "victim" to "survivor" in accordance with HUD's client-focused approach in the 2024 HUD Data Standards.
- Added contact for 24-Hour Domestic Violence Hotline.

Policy 1-6: User – User Responsibility – Page 12

- Added the word "completing." The sentence now reads: Attending and completing all required Pinellas HMIS trainings.
- Added the term "data quality." The sentence now reads: Adhering to data entry and data quality requirements.

Policy 1.9 - Required Licensing Fees – Additional Licenses – Page 15

- Added clarification about purchasing additional HMIS licenses during the billing cycle and invoicing.

Policy 2-6: Confidentiality – Page 27

Recommended by Data and System Performance Committee (DSP) for clarity.

- Updated Pinellas HMIS Corrective Action further explains the difference between low, medium, and critical data risks.
- Added a sentence to the preamble to mention Data Quality.
- Added "Security Officer" to the end of the Critical Risk statement.
- Added the statement to Medium Risk that adds another escalation for data quality issues.
- Added a statement to Low Risk to better match what is stated in the Data Quality Plan's proposed changes.
- Added a full statement before the action steps that outlines DSP's involvement in an escalated Data Quality Corrective Action Plan.

- Deleted the statement "aside from data quality certification issues," from the HMIS Governance statement that directly follows the new Data Quality statement.
- Added HMIS Lead to various action steps to bring it more in line with Data Quality instead of exclusively focusing on Data Security.

Policy 2-11: Pinellas HMIS Grievance – Page 35

- Added the HLA Chief Administrative Officer as another level of communication in the grievance procedure.

Policy 4.2 Data Quality Monitoring – Page 48

- Replaced the "Data Completeness report" to the "Data Quality Certification report" for monthly submission by agencies.

Policy 5-1: Technical Support – Page 50

- Under chain of communication added 5. HLA Chief Administrative Officer.

Policy 6-1: Pinellas HMIS Training Descriptions – Page 52

- Replaced "HMIS Advanced Report Training" to "HMIS Intermediate Report Training."
- Updated HMIS Annual Refresher timeline for clarification on when end-users are enrolled into courses and when they are due. End-users offered feedback regarding the submission date and HMIS created a more flexible timeline to complete courses.
    - Used to read that end-users were enrolled in October and courses were due in November.

Pinellas Continuum of Care
Ending Homelessness Together

2024 HMIS Data Quality Plan Revisions

Provider Accountability – Page 6

- Reformatted paragraph into a step-by-step process for clarity
- In step 2, a timeframe of "three months" was added as a determining factor in proceeding with corrective action.
- Moved the section discussing communication from between steps 2 and 3, then placed it at the end of this section.

CoC Data Quality Benchmarks – Page 8

- Replaced previous benchmarks with the updated 2024 Benchmarks.
  - Benchmarks approved by the CoC Board in January 2024.

Homeless Management Information System (Pinellas HMIS)

Policies and Procedures

Table of Contents

OVERVIEW AND INTRODUCTION

These Policies and Procedures were developed to guide the operation of the Pinellas Homeless Management Information System (Pinellas HMIS). The Pinellas HMIS is a tool to help housing and homeless providers track individuals and families who are homeless or at risk of becoming homeless, to assure they have access to housing and supportive services that are appropriate to their housing, health, and human service needs.

The Pinellas HMIS Governance Committee oversees and guides the development and management of the Pinellas HMIS. The Pinellas HMIS Governance Committee is comprised of the Executive Committee of the Homeless Leadership Alliance of Pinellas, Inc. Through the direction of these dedicated members, these Policies and Procedures reflect the community's stance on the operation of the Pinellas HMIS. The Homeless Leadership Alliance of Pinellas, Inc. is the Lead Agency for Pinellas HMIS and convenes the Pinellas HMIS Governance Committee.

The Pinellas HMIS Governance Committee has as guiding principles that the Pinellas HMIS:

- Minimizes risk and maximizes benefits for homeless individuals and families
- Is designed to respect and meet the needs of consumers
- Is a reliable, flexible, and consistent technological system to benefit persons who are homeless or at risk of becoming homeless by providing data that:
  - Captures accurate local and regional information about characteristics and service needs, and
- Prioritizes data security that balances:
  - Confidentiality, so that only authorized people see the data;
  - Integrity, so that data is not modified in any way; and
  - Availability, so that data is accessible to those who use it when they need it.

Clients must give Informed Consent or Release of Information (ROI) to having their data entered into the Pinellas HMIS. They must also authorize the sharing of their data and may specify with whom it may be shared via the ROI. They may decide not to share their data and they may not be denied Member Agency services for lack of participation. However, it will not place the client on the Coordinated Entry list if the information is not entered into Pinellas HMIS.

Pinellas HMIS is also used to inform public policy makers about the extent and nature of homelessness in Pinellas County. The Pinellas Continuum of Care endorses the philosophy of Housing First and believes it will greatly assist in the goal of making homelessness rare, brief, and a one-time experience when data is used to drive decisions. This is accomplished through analysis of data that is grounded in lived experiences of homeless persons and the service providers who assist them in shelters and homeless assistance programs. Information is gathered via consumer interviews conducted by service consumers which is then analyzed. The resulting statistics are used to develop an unduplicated count; aggregated (void of any identifying client level information); and made available to policy makers, service providers, advocates, and consumer representatives. Pinellas HMIS regulates Pinellas HMIS licenses for community stakeholders serving homeless persons, also known as Covered Homeless Organizations (CHO) or Member Agencies (MA). Many MA or CHO's do not receive CoC funding and participate in HMIS voluntarily. All CoC funded, contracted agencies are required to participate in Pinellas HMIS.

The Pinellas HMIS utilizes web-based software from WellSky. Through this software, homeless service organizations across the Continuum of Care (CoC) can capture information about the clients they serve. Pinellas HMIS staff provides technology, training, and technical assistance to users of the system.

For individuals and families
- Decrease in duplicative intake and assessments
- Streamline referrals
- Case management coordination
- Improved benefit eligibility determination

For case managers
- Use of web-based software to assess clients' needs and to inform clients about services offered on site or available through referral
- Use of on-line resource information to learn about resources that help clients find and keep permanent housing or meet other goals clients have for themselves
- Improve service coordination when information is shared among case management staff within one agency or with staff in other agencies (with written client consent) who are serving the same clients

For agency and program managers
- Improve data used for preparing reports to funding entities, boards, stakeholders and advocacy for additional resources
- Enhance coordination of services, internally among agency programs and externally with other service providers
- Aggregate information that can be used in program design and implementation through a more complete understanding of clients' needs and the ability to track client outcomes
- Capacity to automate the generation of numeric statistics for use in HUD APRs

For community-wide Continuum of Care and policy makers and other advocates
- Understand the extent and scope of homelessness
- Identification of service gaps
- To help address community-wide issues
- Enable McKinney-Vento funded organizations to meet the congressional mandate specified in the HUD Data and Technical Standards Final Notice
- Utilization of aggregated information for system design
- Gather unduplicated count of clients
- Access to aggregate reports
- Utilization of the aggregate data to inform policy decisions aimed at addressing homelessness at local, state and federal levels, in hopes to make homelessness within the CoC rare, brief, and a one-time experience

HANDBOOK FORMAT

This handbook contains the most current information on the operation of the Pinellas HMIS. It is expected that information will be added, removed and altered when necessary and for this reason the Handbook is in modular form so that outdated information may be easily removed and updated information added. For ease-of-use pagination is by Section and Policy Number.

ACKNOWLEDGEMENTS

This Pinellas HMIS Operating Procedures Handbook draws the work of Blue Ridge Homeless Management Information System Steering Committee and the New Hampshire Homeless Management Information System. We thank them for their hard work and generosity in letting us adapt their documentation for our use. *-August, 2017*

HUD HMIS DATA AND TECHNICAL STANDARDS FINAL NOTICE

As per HUD HMIS Data Standards Manual Version 1.1 (2023, June):

A Homeless Management Information System (HMIS) is the information system designated by a local Continuum of Care (CoC) to comply with the requirements of CoC Program interim rule 24 CFR 578. It is a locally implemented data system used to record and analyze client, service, and housing data for individuals and families who are homeless or at risk of homelessness. The U.S. Department of Housing and Urban Development (HUD) through the Office of Special Needs Assistance Programs (SNAPS) partners with other federal agencies to establish the requirements for HMIS to ensure that there is a comprehensive data response to the congressional mandate to report annually on national homelessness. It is used by all projects that target services to persons experiencing homelessness within SNAPS and the office of HIV-AIDS Housing. It is also used by other federal partners from the U.S. Department of Health and Human Services (HHS) and the U.S. Department of Veterans Affairs (VA) and their respective programs to measure project performance and participate in benchmarking of the national effort to end homelessness. The HMIS Data Standards were first published by HUD in 2004 as the HMIS Data and Technical Standards. The HMIS Data Standards were first published by HUD in 2004 as the HMIS Data and Technical Standards. HUD, in collaboration with its federal partners, has continued to update the HMIS Data Standards regularly thereafter. Each updated document supersedes the previously released HMIS Data Standards. A complete historical archive of previous data standards can be found on the HUD Exchange Data Standards page.

DOMESTIC VIOLENCE SHELTERS (VSP) AND PROGRAMS

A Victim Service Provider (VSP) is defined as a private nonprofit organization whose primary mission is to provide services to victims of domestic violence, dating violence, sexual assault, or stalking. Providers include rape crisis centers, domestic violence shelter and transitional housing programs, and other programs. A VSP is a designation at the agency level, not the project level (see 24 CFR 578.3).

VSPs are prohibited from entering into HMIS and must enter into a comparable database. This

includes those agencies who meet the definition above and those who receive funds through HHS Family Violence Prevention and Services Act (FVPSA), DOJ Office of Victims of Crime (OVC), or DOJ Office of Violence against Women (OVW), and who use those funds to help support projects serving survivors of domestic violence, dating violence, sexual assault, or stalking.

A comparable database is a relational database that meets all HMIS Data Standards and does so in a method that protects the safety and privacy of the survivor. A relational database is a collection of information that organizes data points with defined relationships for easy access and reporting. Excel and Google Sheets (spreadsheets) are not relational databases and do not meet the standards to be considered HMIS comparable in nature. HMIS Data Standards means that the comparable database must be able to collect all fields (data elements) required for an HMIS by the kind of project it is (e.g., Emergency Shelter, Rapid Re-housing). It must also allow the user to enter specific data at multiple data collection stages (record creation, project start, status update, annual assessment, and project exit) to support reporting and performance measurements required by HUD for all CoC and ESG program recipients and subrecipients.

If an organization's primary mission is other than those listed above, they may participate in the Pinellas HMIS. If an organization's primary mission is other than those listed above and they encounter a survivor of domestic violence, they can provide the contact for the 24-Hour Domestic Violence Hotline (727) 895-4912.

Policy 1-1: Pinellas HMIS Contract Requirements

The Pinellas County Continuum of Care is a governing body made up of elected officials, community leaders, and local non-profit organizations, who created and implemented a ten-year plan to end homelessness in 2008. As stated in the Pinellas County Continuum of Services plan, Opening Doors of Opportunity: A 10-Year Plan to End Homelessness, on Pg. 10 under the section of Coordination & Partnerships: "Incorporate a system for universal intake, assessment and referral with centralized technology and data systems, such as through the Homeless Management Information System (HMIS)."

The Homeless Leadership Alliance of Pinellas, Inc. (HLA) has been designated as the "Collaborative Applicant" by the Pinellas CoC, and as such is the sole eligible applicant for HUD CoC Planning Grant funds and manages the required HUD process on behalf of the CoC. The HLA has also been designated as the "HMIS Lead Agency" and as such is the sole eligible applicant for HUD CoC HMIS project grant funds, and manages the HMIS as required by HUD, ensuring the CoC is in compliance with all applicable HUD rules and regulations.

The HLA will contract for and administer the following:

- Server based software license (Production and Training Systems)
- User licenses issued
- Training for software implementation
- Annual support agreement
- Disaster Protection and Recovery Support
- System-wide reporting

Member Agencies shall sign a Participation Agreement and agree to comply with the policies and procedures approved by the Pinellas HMIS Governance Committee as well as comply with the stated requirements and will be granted access to the Pinellas HMIS software system after:

- The Participation Agreement (PA) has been signed with the HLA, and
- Member Agencies put into place the stated requirements in the PA.
- Users complete a Level II Background Screening; attend a User Training session; and the agency has completed an onboarding discussion.
  - All Pinellas HMIS users need to complete and pass a Level II background screening, prior to attending his or her first Pinellas HMIS training. Pinellas HMIS must ensure that each Member Agency conduct a Level II background screening for all users in the system. Additionally, the Florida Legislature passed a law, effective August 1, 2010, that places new requirements on persons who work with vulnerable populations; 2011 Florida Statute, Section 435 requires that employees and volunteers who work with vulnerable populations undergo and pass a Level II background screening including fingerprinting prior to beginning work. Pinellas HMIS is a shared client information system, each potential user must have completed and passed a Level II background screening prior to attending their first Pinellas HMIS training.

    By law, the HLA cannot ask for a copy of the results as proof of completion, therefore, each organization must attest to Pinellas HMIS compliance by submitting the background screening date of clearance.

Policy 1-2:   Pinellas HMIS Governance Committee

An HMIS Governance Committee, convened by the CoC Data & System Performance Committee (DSP), representing stakeholders in the HMIS project, will advise all project activities. The committee schedule is set by the CoC's HMIS Governance Committee (a current Pinellas HMIS Governance Committee Membership List may be obtained from the Continuum of Care).

Governance Procedures

The Pinellas HMIS Governance Committee serves as the decision-making body and provides advice and support to the Continuum of Care. As a sub-committee of the CoC DSP, the HMIS Governance Committee follows the protocol of the CoC.

The Pinellas HMIS Governance Committee will take actions that ensure adequate privacy protection provisions in project implementation.

The Pinellas HMIS Governance Committee has decision making authority in the following areas:

- Determining the guiding principles that should inform the implementation activities of the Pinellas HMIS, including participating organizations, consumer involvement and service programs;
- Selecting the minimal data elements to be collected by all programs participating in the Pinellas HMIS project;
- Defining criteria, standards, and parameters for the release of aggregate data;
- Recommending the software vendor to the governing organization;
- Recommending priorities to the Continuum of Care for identification of funding streams for the CoC and HMIS.

Policy 1-3: Pinellas HMIS Management

The CEO of the HLA is responsible for oversight of all contractual agreements with funding entities, as recommended by the CoC and the Pinellas HMIS Governance Committee.

Pinellas HMIS Management Procedures:

The HLA is responsible for the day-to-day operation and oversight of the system. Decisions made or actions by the HLA or Pinellas HMIS staff which do not satisfy an interested party, which may be an agency(ies) or a client(s), may be brought before the Pinellas CoC Grievance Committee as grievances for review. The CoC Grievance Committee members shall not have a conflict of interest for the grievance they are adjudicating.

HLA responsibilities for the operation and oversight of the system include:

- Management of technical infrastructure;
- Planning, scheduling, and meeting project objectives;
- Coordinating training and technical assistance including an annual series of training workshops for end users and Agency Administrators;
- Establishing a fee schedule for Pinellas HMIS licenses
- Annual and quarterly reporting to include but not limited to:
  - Longitudinal Systems Analysis (LSA) (replaces AHAR)
  - Homeless Point in Time Count (PIT)
  - Housing Inventory Chart (HIC)
  - System Performance Measures (SPM)
  - HUD Notice of Funding Availability (NOFA) Application; and
- Implementing software enhancements recommended by the Pinellas HMIS Governance Committee.

Client Privacy and Data Security
Client privacy and data security are paramount to a successful and collaborative community information system like the Homeless Management Information System (Pinellas HMIS). The Pinellas HMIS staff spend much time working with our vendor as well as each Pinellas HMIS Member Agency to protect client data and privacy within the network. Pinellas HMIS continues to refine its policies and procedures to protect the confidentiality of client data and strengthen the network. All concerns, complaints and handling of privacy will be handled by the Pinellas HMIS Privacy Officer.

Pinellas HMIS Privacy Officer
HLA has assigned a Privacy Officer for Pinellas HMIS who will outline network risk, monitor client privacy in the system, work on policy and procedure creation to protect client data, work with the Pinellas HMIS trainer to improve privacy trainings, and field complaints regarding Privacy and Security violations. The Pinellas HMIS Privacy Officer is the HMIS Trainer Training & Support Coordinator. All concerns about privacy should be sent to https://pinellashmis.zendesk.com/hc/en-us.

Pinellas HMIS Data Security Officer
HLA has assigned a Data Security Officer for Pinellas HMIS who will monitor system and data security, work to improve security within the network members, and work with the Pinellas HMIS trainer to strengthen training around system and data security. All concerns about privacy should be sent to https://pinellashmis.zendesk.com/hc/en-us.

Policy 1-4:   Member Agency Responsibility

Each Member Agency will be responsible for oversight of all agency staff that generate or have access to client-level data stored in the system software to ensure adherence to the Health Insurance Portability and Accountability Act of 1996 (HIPAA), HUD Department of Housing and Urban Development Docket No. FR-4848-N-02: Homeless Management Information Systems (HMIS); Data and Technical Standards Final Notice and all State and Federal regulations as well as to ensure adherence to the Pinellas HMIS principles, policies and procedures outlined in this document.

Member Agency Responsibility Procedures

The Member Agency:

- Holds final responsibility for the adherence of the agency's personnel to the HIPAA, HUD Department of Housing and Urban Development Docket No. FR-4848-N-02 Homeless Management Information Systems (HMIS); Data and Technical Standards Final Notice and all State and Federal regulations as well as ensuring adherence to the Pinellas HMIS principles, policies and procedures outlined in this document;
- Is responsible for all activity associated with agency staff access and use of the Pinellas HMIS data system;
- Is responsible for establishing and monitoring agency procedures that meet the criteria for access to the Pinellas HMIS System, as detailed in the policies and procedures outlined in this document;
- Will put in place policies and procedures to prevent any misuse of the database system by designated staff;
- Ensures Pinellas HMIS bed inventory be maintained in real-time: **All Housing Providers** are required to maintain a current bed inventory and notify Pinellas HMIS staff five (5) business days in advance of a change to any beds at the facility; Pinellas HMIS will maintain the bed inventory within Pinellas HMIS
- Agrees to allow access to the Pinellas HMIS System only to staff who have completed and passed a Security Awareness Training, HIPAA Training, Level II Background Screening, and been trained in the Pinellas HMIS system and who have a need for access. Need exists only for those shelter staff, volunteers, or designated personnel who work directly with (or who supervise staff who work directly with) clients or have data entry or technical responsibilities.

The Member Agency oversees the implementation of internal data security policies and standards and :

- Assumes responsibility for integrity and protection of client-level data entered into the Pinellas HMIS system;
- Ensures organizational adherence to the Pinellas HMIS Policies and Procedures;
- Communicates control and data protection requirements to Agency Administrators and users;
- Authorizes data access to agency staff and assign responsibility of the data;
- Monitors compliance and periodically review control decisions;
- Ensures that data is collected in a way that respects the dignity of the participants;
- Ensures that all data collected must be relevant to the purpose for which it is used that the data is entered accurately and on time;
- Provides prompt and timely communications of new programs or project to be added or deleted, data issues, changes in license assignments and user accounts, and software to the Pinellas HMIS HelpDesk; and
- Immediately notifies immediately the Pinellas HMIS System Administrator of any issue relating to system security or client confidentiality.

Policy 1-5: Member Agency Pinellas HMIS Agency Administrator

Every Member Agency shall designate one person to be the Agency Administrator who holds responsibility for the coordination of the system software in the agency. The Agency Administrator role is to act as the liaison between the partner agency and Pinellas HMIS staff. Agency Administrators ensure compliance with HMIS policies within their agency and provide support for HMIS use within their agency, including planning for HMIS knowledge transfer prior to staff's departure from the agency. The Agency Administrator manages data collection and data quality as outlined in the Data Quality Plan.

Pinellas HMIS Agency Administrator Procedures

A successful Agency Administrator possesses the following skills:

- Must be computer literate.
- Thorough knowledge of ServicePoint and training can be requested in the event that the Agency Administrator is not familiar with ServicePoint.
- Knowledgeable about the agency's programs and their respective grants.
- Knowledgeable about HUD regulations and reporting requirements across the agency's programs.
- Ability to coordinate multiple projects and meet deadlines.
- Compliance with HUD and local governing agency/entity regulations and standards.
- Should have at least intermediate Excel skills (such as filtering, formatting, simple equations, etc.)

The Agency Administrator will be responsible for duties including:

- Editing and updating Member Agency information;
- Immediately notifying Pinellas HMIS of any new funding, report requirements, and/or projects that need to be built into HMIS. Agency Administrators must submit a Pinellas HMIS Project Setup Form to the Pinellas HMIS Help Desk for each new program;
- Ensuring that access to the Pinellas HMIS is requested for authorized staff members only after:
  a) Confirming the agency's license count. If additional licenses are needed, the Agency Administrator will submit a license request to the Pinellas HMIS Help Desk.
  b) Submitting all completed new end user paperwork. Important fields include the permission level, level 2 background clearance date, primary provider and other programs the end user enters data for, as well as Agency Administrator and end user signature(s).
- Immediately notifying the Pinellas HMIS Help Desk of any HMIS end-users who should no longer have access to HMIS, whether due to changing job responsibilities or departure from the agency;
- Serving as point-person in communicating with Pinellas HMIS staff for data cleanup, training requests, additional license requests, report questions, etc.;
- Facilitating timely reporting from the Member Agency that they represent (unless the Member Agency has designated another person for this function);
- Working cooperatively with Pinellas HMIS staff including checking and responding to data cleanup and data confirmation requests from Pinellas HMIS staff members in a timely manner;

- Attending no less than three quarterly Pinellas HMIS Agency Administrator Meetings held by Pinellas HMIS annually
  - If the Agency Administrator is unable to attend a meeting, they must send an alternate that is registered as Agency Administrator back up with Pinellas HMIS
- Ensure that the most current HMIS Privacy Notice is posted in a visible area and/or verbally communicated with the client in the event of an emergency preventing face-to-face contact in a language that is understood by clients;
- Enforce data collection, entry, and quality standards ensuring completeness, timeliness, and integrity of data following the guidelines in the Data Quality Plan by regularly running data quality reports using the reporting tools located in ServicePoint;
- Correct data quality issues as soon as possible and report unresolved issues to the Pinellas HMIS Help Desk; and
- Provide the monthly Data Quality & Certification form and required documentation on or prior to the due dates listed on the Pinellas HMIS calendar.

The Agency Administrator is also responsible for the implementation of Data Security Policy and Standards, including:

- Following the Pinellas HMIS Security and Privacy Plans;
- Administering agency specified business and data protection controls;
- Administering and monitoring access control;
- Providing assistance in and/or coordinating the recovery of data, when necessary;
- Detecting and responding to violations of the Policies and Procedures or agency procedures; and
- Completing DCF's Security Awareness and HIPAA Basics training and send HMIS their certificates annually.

The HMIS Staff will coordinate training and technical assistance for Agency Administrators.

Agency Administrators not in compliance with the Member Agency Administrator policy and procedures risk having their Pinellas HMIS access suspended. Suspended licenses will not be re-activated until Agency Administrators review all materials pertaining to the specific suspension on the Pinellas HMIS Help Desk.

Policy 1-6: User

All individuals at the Member Agency levels who require access to Pinellas HMIS will be granted such access after training and agency authorization. Individuals with specific authorization can access the system software application for the purpose of conducting data management tasks associated with their area of responsibility.

User Procedures

The Pinellas HMIS Staff authorizes the use of the Pinellas HMIS to users who have received appropriate training, and who need access to the system for technical administration of the system, data analysis and report generation, or other essential activity associated with carrying out Pinellas HMIS responsibilities.

The Member Agency authorizes the use of the Pinellas HMIS only to users who need access to the system for data entry, editing of client records, viewing of client records, administration or other essential activity associated with carrying out Member Agency responsibilities:

User Responsibility

Every Pinellas HMIS End User is responsible for the following:

- Adhering to all of the policy and procedures outlined in this document.
- Attending and completing all required Pinellas HMIS trainings.
- Entering quality data in a timely and accurate manner.
- Adhering to data entry and data quality requirements.

Users are any persons who were trained and have an active license in Pinellas HMIS. They must be aware of the data's sensitivity and take appropriate measures to prevent unauthorized disclosure. Users are responsible for protecting institutional information to which they have access and for reporting security violations. Users must comply with the data security policy and standards as described and stated by the agency and HUD baseline requirements stated in the Final Notice Docket No. FR-4848-N-02. Users are accountable for their actions and for any actions undertaken with their usernames and passwords. Users must advise the Agency Administrator and the Pinellas HMIS System Administrator if their passwords are compromised.

Contractors, volunteers, interns and others who function as staff, whether paid or not, are bound by the same User responsibilities and rules set forth in this manual.

Policy 1-7: Training

Pinellas HMIS staff will coordinate ongoing training schedules for Agency Administrators and Users. The schedule of trainings will be determined on an as-needed basis. All users can request a training by contacting Pinellas HMIS at https://pinellashmis.zendesk.com/access/unauthenticated.

Pinellas HMIS Trainings Offered
Overview of the Pinellas HMIS User:

- Basic: Introduction to the Pinellas HMIS System (End User Training)
- Introduction to the Pinellas HMIS Member Agency Project workflow
- Review of applicable policies and procedures
- Logging on to the Pinellas HMIS System
- Entering client information including demographics, placements and services, HUD data and case management

Program Management Training
Overview of the Pinellas HMIS Project (Agency Administrator):

- Review of Member Agency technical infrastructure including roles and responsibilities
- Review of security policies and procedures
- Overview of Pinellas HMIS agency administrative functions
- Entering and updating information pertaining to the Member Agency
- Review of Pinellas HMIS technical infrastructure
- Reporting with the Pinellas HMIS
    - Introduction to reports
    - Using existing reports
    - Creating new reports
    - Exporting information to other software applications (i.e. Excel and PDF)

Pinellas HMIS Training Process
All end-users are required to have basic computer competency prior to attending any Pinellas HMIS training. End-users should be able to turn on/off a computer, use a mouse and keyboard, launch a browser, enter a URL, and navigate the World Wide Web. End-users who cannot complete these tasks should be sent to a basic computer competency prior to be scheduled for Pinellas HMIS training.

Pinellas HMIS staff will schedule individual training follow-up sessions with each user after the initial training. Failure to attend this follow-up four weeks after the initial follow-up date will result in a profile deactivation until the follow-up is completed. Follow-up to training is done on a one-on-one basis post training to allow for a personalized follow-up, additional assistance, and feedback.

Each HMIS user is required to complete an annual refresher training; HIPAA; and Security Awareness Training; Pinellas HMIS Privacy & Security; and HMIS Data Entry courses; reminders will be sent by Pinellas HMIS staff at least 30 days prior to expiration date. Failure to complete the refresher trainings will result in an inactive license status until the trainings are completed.

Policy 1-8: Amending Pinellas HMIS Policies and Procedures Policy

The HLA reserves the right to change privacy practices and the terms of the Pinellas HMIS Policies and Procedures at any time, including protected personal information (PPI) created or received before the amendment(s), provided such changes are permitted by applicable law.

Amending Procedures

- The CoC's HMIS Data and System Performance Committee is responsible for reviewing these policies and procedures annually. Suggested amendments from this committee will be forwarded to the Pinellas HMIS Governance Committee.
- The Pinellas HMIS Governance Committee is responsible for reviewing and approving these policies and procedures annually.
- Prior to the Pinellas HMIS Policies and Procedures being approved by the CoC Board of Directors, feedback is sought from both the Funder's and Provider's Councils.
- Revisions to any Pinellas HMIS-related policy will be noted as revisions with an effective date.
- Final approval of these Policies and Procedures are approved annually by the CoC Board of Directors at their May board meeting.
- The Pinellas policy and procedures are made available on the Pinellas HMIS HelpDesk at https://pinellashmis.zendesk.com/hc/en-us. Previous editions will be maintained electronically and provided upon request.

Policy 1-9: Required Licensing Fees

Pinellas HMIS staff will monitor and review all user licenses, license usage, and set licensing fees for the Pinellas HMIS annually.

HMIS license costs are often an allowable expense for many federal and local grants that require data entry into an HMIS. Check with your funder or contract to confirm if this is an eligible expense for your agency**.**

Licensing Fee Procedures

The Pinellas HMIS shall evaluate licensing fees annually and discuss proposed changes with local funding entities. Any price changes for Pinellas HMIS Member Agencies will take effect during the next annual billing cycle, which begins October 1st. The deadline to pay invoices will be 30 days following the invoice date. Any revisions to agency license pools need to be made by the agency administrator before October 1st.

Each HMIS Member Agency is required to pay any associated fees listed below for licenses requested. The fees listed below are non-negotiable.

Unsubsidized License Fees

Item	Description	Fee
New License	There is a vendor one-time setup fee ($145.50) for new licenses and the annual license vendor fee ($254.50). This includes an advanced reporting license. Fees are per new license.	*$400/license**
Annual License Renewal	There is an annual vendor license fee ($254.50). This includes an advanced reporting license. Fees are per license.	*$254.50/license**
Administrative Fee	All licenses will include an additional annual admin fee of $50 per license.	*$50/license**

*Fees are subject to change based on vendor pricing changes.

Subsidized License Fees
Subsidized licenses are paid for by grants received by the HMIS Lead and are made available for agencies to participate in HMIS. Agencies who are granted the use of subsidized licenses are responsible for paying the administrative fee per license.

Item	Description	Fee
Administrative Fee	Subsidized licenses (Policy 1-10) also incur an annual admin fee of $50 per license.	*$50/license**

Additional Licenses
If Member Agencies need additional HMIS licenses, the Member Agency Administrator can make a request for additional non-subsidized licenses through the HLA Pinellas HMIS Help Desk (https://pinellashmis.zendesk.com/access/unauthenticated). If a non-subsidized license is purchased after the annual billing cycle begins (October 1st), then the license fee will be prorated and an invoice will be generated for payment. Licenses will be provided to the agency once payment has been processed.

Policy 1-10: Subsidized Licenses

HMIS Member Agencies may be eligible to use subsidized licenses when available. Subsidized licenses waive the New License fees and/or the Annual License Renewal fees; however the Administrative Fee (as outlined n Policy 1-9 above) is applicable to all HMIS licenses and paid for by the Member Agency using the license.

Subsidized License Objective
If subsidized licenses are available, a qualifying HMIS Member Agency may receive up to three (3) subsidized licenses. Subsidized licenses are granted upon a case-by-case basis, subject to availability. Appeals will be reviewed by the HMIS Governance Committee.

Eligibility

New HMIS Member Agencies and existing HMIS Member Agencies that are starting new projects may be eligible for subsidized licenses for those projects if the project meets the following criteria: *the Project has data that fulfills a specific CoC need (i.e., diversion/prevention, target population, missing geographic region, etc.); the Agency has a primary organizational mission to end homelessness; the Project has a primary organizational mission of serving those defined by HUD as Category 1 – Literally Homeless; or the Project is required to enter data into HMIS by a funding entity.*

The types of projects that are prioritized for subsidized licenses may change based on changing CoC needs, changes in funding used by Pinellas HMIS to purchase subsidized licenses, and other factors. Projects whose data is included in HUD reports and local prioritization receive priority consideration. This includes

- **Homeless Diversion/Prevention** - financial assistance and case management providers who help at-risk and homeless individuals and families (defined by the HEARTH Act) remain out of the homeless system of care, retain housing, or quickly exit homelessness to permanent housing.
- **Housing/Shelter** - homeless emergency shelters, transitional housing, or permanent supportive housing whose data are included on the Housing Inventory Count (HIC).
- **Homeless Street Outreach** - teams who contact and engage with homeless clients on the street, places not meant for habitation, or other homeless locations.

New Pinellas HMIS Member Agencies will be assessed for licensing fees prior to gaining access to Pinellas HMIS. Existing Member Agencies will be assessed for licensing fees when new licenses are requested.

Member Agencies who are currently receiving subsidized licenses and no longer meet the criteria for receiving subsidized licenses (eligible projects ending, mission change, service changes, etc.) will be notified via email prior to the new contract year and an invoice for payment of existing licenses will be sent in the new contract year for the Annual Renewal cost. Licenses will not be allocated, and staff training will not be scheduled until payment is received by HLA.

Policy 1-11: Custom Reporting and Custom Assessment Work

Pinellas HMIS software is packaged with a range of standard HMIS reports, data elements, and assessments. Pinellas HMIS staff are equipped to help identify the appropriate resources for HMIS Member Agencies. If the existing resources do not meet a Pinellas HMIS Member Agency's need, Pinellas HMIS Member Agencies are able to request Custom Reports and Custom Assessments be created for them by the Pinellas HMIS System Administrator, Data Analyst, or other Pinellas HMIS staff.

Depending on the scope of work, these requests may be accepted or declined by Pinellas HMIS staff or referred to the Pinellas HMIS vendor. Requests that fall within the normal scope of Pinellas HMIS duties do not incur any additional fees. Requests beyond normal scope, or requests referred to the HMIS vendor, do incur fees as outlined below.

Custom Report and Assessment Fee Schedule

Data Analyst or System Administrator Custom Reporting	There is a fee of $25 per hour for support from either the Data Analyst or Pinellas HMIS System Administrator to create any new reports or customization to an assessment or workflow that goes beyond the normal scope of HMIS duties.	$25/hour for Pinellas HMIS System Administrator (minimum of 2 hours)*
Data Analyst or System Administrator Custom Assessments or Workflows	There is a fee of $25 per hour for support from either the Data Analyst or Pinellas HMIS System Administrator to create any customized assessments or workflows that go beyond the normal scope of HMIS duties.	$25/hour for Pinellas HMIS System Administrator (minimum of 2 hours)*
Vendor Assisted Reports, System Changes, or Technical Assistance	In the event the Pinellas HMIS System Administrator is unable to create a report it will be escalated to the vendor at their rate of $125 an hour. Fees are per report at the current HMIS or vendor rate. Rates subject to change without notice. Will require upfront deposit to spec out report. Upfront deposit goes towards balance of report project.	$125/hour** Vendor

* Two-hour minimum includes planning, creation, testing, and quality assurance
** Fees are subject to change based on vendor pricing changes

What is considered normal scope for assessments?
HMIS Member Agencies are encouraged to align their data collection needs with the data currently collected, or available, in HMIS to improve the sharing of data between agencies and reduce system bloat caused by having multiple versions of the same data element.
If the assessments and data elements needed, or the scope of data needed, requires significant custom assessment work beyond what is currently available in Pinellas HMIS, the work will be beyond normal scope and will incur the fee, or fees listed above.

Below are characteristics of custom assessment work that goes beyond normal scope and incurs the applicable fee.

- Creating Agency-specific assessments that require the creation of ten or more new assessment questions or five or more sub-assessments.
- Creating custom workflow beyond the standard Entry/Exit or Service workflows where HMIS staff must determine when and how to collect data for agency requests.

What is considered normal scope for custom reports?

HMIS Member Agencies are encouraged to make use of the existing Provider Reports, local Custom Reports, and HMIS Vendor Reports that are made available. However, due to the range of local reporting needs and funder requirements, existing reports may not provide the needed information. In this instance, HMIS Member Agencies are encouraged to request reports from the Data Analyst or Pinellas HMIS System Administrator.

If the report is considered within normal scope by Pinellas HMIS staff, based on the criteria below, the report will incur no charge. However, reports determined to be beyond the normal scope will incur the applicable charges. Beyond normal scope is

Below are characteristics of reports that go beyond normal scope and incur the applicable fee.

- Reports that require the use of more than one visualization and extensive formatting to present data to an audience.
- Reports that require the use of one or more complex calculations.
  - Complex calculations are those that require the use of multiple Queries in SAP Business Objects (also known as ART) and include, but are not limited to, Newly Identified as Homeless, Returns to Homelessness, and Changes in Income, Non-Cash Benefits, or Health Insurance.
- Reports that require the use of more than ten simple calculations.
  - A simple calculation requires the creation of custom objects (Dimensions, Measures, or Details) within SAP Business Objects (also known as ART). This includes, but is not limited to, Length or Enrollment/Stay, Chronically Homeless, Household Type, and any Counts.

Agencies that submit multiple report requests may also incur fees for reporting needs beyond the normal scope. Agencies are allowed to request two (2) basic reports per Fiscal Year (October 1 to September 30). To account for the Agencies that may have additional basic reporting needs due to having additional HMIS projects, agencies are allowed to request an additional report for every ten projects that are actively entering data into Pinellas HMIS to a maximum annual number of 6 basic reports.

A project is considered to be actively entering data if clients are currently enrolled in the project or if clients have received services, recorded in HMIS, in the past 30 days**.**

Number of Active HMIS Projects for the Agency	Number of Basic Reports per Fiscal Year
0-9	2
10-19	3
20-29	4
30-39	5
40+	6

Please note: requesting updates or additions to existing custom reports may count as beyond the normal scope or as an additional report request depending on the frequency and complexity of the request.

Policy 2-1: HMIS Participation and Implementation Requirements

All prospective health and human service providers who join Pinellas HMIS must sign and agree to abide by the terms of all agency and user-related Pinellas HMIS forms, registration forms, and all policies and procedures.

Participation Requirements
Any 501(c)3 organization that provides a health and/or human service may qualify to participate in Pinellas HMIS. To participate in Pinellas HMIS Member Agencies must sign and agree to abide by the terms of all agency and user related Pinellas HMIS forms and policies and procedures outlined in this document. Participation is voluntary, but strongly encouraged. A fee may be assessed per user to access and enter data into Pinellas HMIS.

- Any 501(c)3 organization whose primary mission involves solving homelessness is strongly encouraged to actively enter data in the Pinellas HMIS.
- All Member Agencies which receive funding from the United States Housing and Urban Development Department (HUD) are mandated to participate in Pinellas HMIS by contract with HUD. Additionally, all Member Agencies which receive funding from the HLA, a local municipality or Pinellas County Government are required participate in Pinellas HMIS as outlined in their contract.

- A service provider whose primary mission is not homeless related, but who provides a basic need, prevention, diversion, or wrap around service is strongly encouraged to actively enter data in the Pinellas HMIS.

Pinellas HMIS Participation Agreement Procedures
COC Membership: Prior to becoming a Pinellas HMIS Member Agency, a prospective Member Agency must first become a member of the Pinellas County Continuum of Care (https://www.pinellashomeless.org/pinellascoc).

New Agency Request: Members of the Pinellas County Continuum of Care interested in becoming a Pinellas HMIS Member Agency must submit a request via the Help Desk to schedule and participate in an onboarding discussion (https://pinellashmis.zendesk.com/hc/en-us/articles/16786220971027-New-Agencies-Interested-in-Entering-Data-in-Pinellas-HMIS-).

Pinellas HMIS New Project Request Form: Prospective Pinellas HMIS Member Agencies should complete the online New Project Request Form for each project the agency intends to enter in Pinellas HMIS. Existing Pinellas HMIS Member Agencies will also need to complete this form to request additional projects be added for their use in Pinellas HMIS (https://pinellashmis.zendesk.com/hc/en-us/articles/16785113003667-Need-a-New-Project-in-HMIS-Use-the-Form-Linked-in-this-Article).

New Member Agency Meeting: Prior to signing any agreements for participation, a prospective Pinellas HMIS Member Agency must participate in an initial onboarding meeting. This meeting can be scheduled via the Help Desk (https://pinellashmis.zendesk.com/hc/en-us/requests/new).

Participants in this meeting should be the Pinellas HMIS staff, the prospective Pinellas HMIS Member Agency CEO/Executive Director or designee, and other Member Agency critical staff; which may include data entry staff, supervisors, managers, intake workers, case managers, or any staff they feel is necessary regarding Pinellas HMIS data entry, data quality, or the reporting process.

The goal of the meeting is to review the submitted Pinellas HMIS New Project Request Form(s); the required data elements; Pinellas HMIS Policy and Procedures; define entry requirements; and set Member Agency expectations. The onboarding meeting will also allow Pinellas HMIS staff to properly assess the prospective Pinellas HMIS Member Agency's workflow, user needs, specific implementation issues, and any constraints or risks that will need to be mitigated by the prospective Pinellas HMIS Member Agency prior to receiving access.

After the onboarding meeting, the prospective member Agency may need to submit additional Pinellas HMIS New Project Request Forms. This form is also to be completed by existing Pinellas HMIS Member Agencies when it is necessary for them to request additional projects be added to Pinellas HMIS.

Identification of a Member Agency Administrator: All Pinellas HMIS Member Agencies shall designate one person to be the Agency Administrator who holds responsibility for the coordination of the system database in the agency. For Member Agencies with more than five employees and licensed Pinellas HMIS users, the Member Agency must assign both an Agency Administrator and a back-up Agency Administrator to coordinate Pinellas HMIS activities for their organization. Agency Administrator role and responsibilities can be found in Policy 1-5.

Security Assessment: Organizations new to the Pinellas HMIS system will need to attend a meeting which would include the Agency CEO/Executive Director or designee, Program Manager/Administrator (if applicable) and Agency Administrator with Pinellas HMIS staff member to assess and complete Agency Information Security Protocols. Agency IT staff may be asked to participate as necessary.

Additionally, the privacy and confidentiality of client information in Pinellas HMIS is essential. It is the Member Agency's responsibility to ensure that personnel complete a Level II Background Screening on all end users. Pinellas HMIS access will not be granted for any individual who has entered a plea of *nolo contendere* (no contest); or been found guilty of any fraud (including identity theft or computer related crimes); or stalking-related felony crimes punishable by imprisonment of one year or more in any state. HLA, as the Pinellas HMIS Lead Agency, is not allowed to view Member Agency personnel's Level II Background Screenings therefore a date of clearance is requested and noted upon submission of the Pinellas HMIS User Permission Request form. Member Agency must complete an annual security review to ensure the implementation of the security requirements for the Pinellas HMIS.

Training: The Member Agency Administrator and designated Pinellas HMIS users are required to attend training(s) prior to accessing HMIS. All Pinellas HMIS user paperwork must be completed in its entirety and signed by the Member Agency CEO/Executive Director or Agency Administrator prior to Member Agency staff attending any trainings.

Client Data: Member Agencies must secure written permission from the client to enter the client's data into the Pinellas HMIS by securing signed Informed Consent or Release of Information from the client allowing permission to share personal information with other member agencies. Data is also collected and shared when verbal consent is obtained—specifically in the case of the Diversion Teams, the Street Outreach and 211 Homeless Helpline. In the event of a declared emergency, verbal consents can be obtained from clients for all partner agencies with the approval of the Continuum of Care (CoC). The most current Privacy Notice can be found on the Pinellas HMIS Help Desk.

Member Agencies will provide written explanation to each client of how information is to be used and stored and on the client's recourse if s/he feels data is misused, e.g., grievance policy. Any incident regarding compromise of client confidentiality must be reported to the Pinellas HMIS staff immediately.

HMIS Signage: The HUD Data and Technical Standard requires as a baseline requirement that every Member Agency post the **Privacy Notice** at each intake desk (or comparable location) that explains generally the reasons for collecting protected personal information (PPI). In the event of a declared emergency, the Privacy Notice can be verbally communicated in a language that is understood by the client when face-to-face contact is not possible. Protected Personal Information (PPI) is defined by HUD as "Any information maintained by or for a Covered Homeless Organization about a living homeless client or homeless individual that: (1) Identifies, either directly or indirectly, a specific individual; (2) can be manipulated by a reasonably foreseeable method to identify a specific individual; or (3) can be linked with other available information to identify a specific individual."

Death, Disaster, Public Health Emergencies, or Public Safety: Data within Pinellas HMIS may be used to assist officials during times of death, disaster, public health emergencies, or public safety where clients are at risk. During these instances, the Pinellas HMIS staff will work closely with organizations, public officials, funders, and/or law enforcement to assist clients who are at risk. The Pinellas HMIS staff will only validate information presented to the staff and provide local contact information for the service provider(s) that were in direct contact during a particular service date(s).

Pinellas HMIS staff will not print off, give an electronic copy of, or disclose any other personal information without a subpoena. However, in cases of death, Pinellas HMIS will disclose any next of kin information in the system in addition to provide local contact information for the most recent service provider serving the client.

Policy 2-2: Data Security Responsibility

The HLA will manage the contractual relationship with a third-party software development corporation who will in turn continue to develop, implement and maintain all components of operations of the web-based system including a data security program.

Data Security Procedures

The Pinellas HMIS Governance Committee will:

- Define the data security program;
- Implement its standards; and
- Promote awareness of the program to all interested parties.

Access to areas containing Pinellas HMIS material, equipment, data, and software will be secured. All client-identifying information will be strictly safeguarded in accordance with appropriate technical safeguards. All data will be securely protected to the maximum extent possible.

The scope of security includes:

- Technical safeguards;
- Physical safeguards, including, but not limited to locked doors;
- Network protocols and encryption standards such as https/ssl encryption (an indicator of encryption use) and client data security (Data Encryption);
- The use of system auditing tools to ensure system oversight, investigate privacy or security breaches, and filed client grievances; and
- Server and client-side certificates.

Pursuant to 42 and 45 CFR notwithstanding, Pinellas HMIS is an open or shared HMIS system. The default visibility settings for clients will be set to OPEN for all Pinellas HMIS clients that are not registered or receiving services from any 42 or 45 CFR facility or program. If a client is enrolled in a 42 or 45 CFR covered entity program, the Member Agency Administrator will notify Pinellas HMIS of program visibility settings which will be set in accordance to applicable laws.

Member Agencies are responsible for:

- Ensuring virus protection is updated
- Maintain a system firewall
- Protect physical access to computers with access to Pinellas HMIS data

Policy 2-5: Client Consent for Electronic Data Sharing

All Pinellas HMIS users will adhere to the basic business practices under the Health Insurance Portability and Accountability Act of 1996 (HIPAA) as it relates to client confidentiality, privacy, and security.

Informed Consent and Release of Information
Pinellas HMIS requires a client's signature on the Pinellas HMIS Informed Consent and Release of Information or provide verbal consent prior to their information being entered into Pinellas HMIS. Informed consent must be based upon a clear appreciation and understanding of the facts, implications, and consequences of maintaining an individual's information within Pinellas HMIS. This includes the sharing of this information with other Member Agencies, to include but not limited to the Pinellas CoC and Homeless Leadership Alliance of Pinellas (HLA). To give informed consent, the individual concerned must have adequate reasoning.

The individual has the right to not share certain data elements with other Member Agencies and this preference would be indicated on the Pinellas HMIS Informed Consent and Release of Information. The signed form would then be submitted by the Member Agency obtaining the release to Pinellas HMIS through the Pinellas HMIS Help Desk ticketing. Once Pinellas HMIS receives the form with sharing restrictions indicated, the visibility of the client's data is updated according to the individual's permissions.

Should there be person-to-person contact that is non-Street Outreach related, i.e., intake, case management, service setting, the original signed Pinellas HMIS Informed Consent and Release of Information should be kept by the Pinellas HMIS Member Agency and protected from theft or loss. The form must be completed by each member of the household receiving services who is over the age of 18. The head of household (HOH) may sign for any children or members of the household under the age of 18 on the same form. Once the signed Pinellas HMIS Informed Consent and Release of Information is obtained, it must be recorded in Pinellas HMIS and is valid until the client revokes or chooses to change their consent.

Client procedures from each Member Agency, including the Pinellas HMIS Informed Consent and Release of Information, must be on file at each agency.

Each Member Agency must publish the most current Pinellas HMIS Privacy Notice, describing policies and practices for the processing of National Privacy Requirements as set forth under the Health Insurance Portability and Accountability Act of 1996, 45 C.F.R., Parts 160 & 164 and corresponding regulations established by the U.S. Department of Health and Human Services is required to operate in accordance with HIPAA regulations and must provide a copy of this Privacy Notice to any individual upon request. If the Member Agency maintains a web page, the current privacy notice must be posted. An amendment to the privacy notice regarding use or disclosure will be effective with respect to information processed before the amendment, unless otherwise stated. All amendments to the Privacy Notice will be consistent with the requirements of these privacy standards. Pinellas HMIS will maintain permanent documentation of all privacy notice amendments.

Member Agencies are obligated to provide reasonable accommodation for persons with disabilities throughout the data collection process. This may include but is not limited to, providing qualified sign language interpreters, readers, or materials in accessible formats such as Braille, audio, or large type, as needed by the individual with a disability. In addition, Member Agencies that are recipients of federal financial assistance shall provide required information in languages other than English that are common in the community, if speakers of these languages are found in significant numbers and come into frequent contact with the program.

The HMIS Privacy Notice will specify the purposes for which the agency collects data and describes uses and disclosures. A Member Agency may use or disclose client data from the Pinellas HMIS only if the use or disclosure is allowed by the HUD's HMIS Data and Technical Standards Final Notice (§ 4.1.3) and is described in the Privacy Notice. HIPAA regulations receive precedence over the HMIS Data and Technical Standards Final Notice.

A Member Agency must allow an individual to inspect and to have a copy of any data about the individual. A Member Agency must offer to explain any information that the individual may not understand. While a Member Agency must consider any request by an individual for correction of inaccurate or incomplete data pertaining to the individual, the Member Agency is not required to remove any information but may alternatively choose to mark information as inaccurate or incomplete and may supplement it with additional information.

A Member Agency, in accordance with HUD's HMIS Data and Technical Standards Final Notice, may reserve the ability to rely on the following reasons for denying an individual inspection or copying of the individual's protected personal information (PPI): (1) Information compiled in reasonable anticipation of litigation or comparable proceedings; (2) information about another individual (other than a health care or homeless provider); (3) information obtained under a promise of confidentiality (other than a promise from a health care or homeless provider) if disclosure would reveal the source of the information; or (4) Information, the disclosure of which would be reasonably likely to endanger the life or physical safety of any individual. Also, a Member Agency may reject repeated or harassing requests for access or correction and if denied an individual's request for access or correction must explain the reason for the denial to the individual and must include documentation of the request and the reason for the denial as part of the PPI about the individual.

Client interactions are a fundamental component of the informed consent process. Pinellas HMIS Policy requires written and/or verbal consent as outlined in the Privacy Notice. During a State of Emergency in Pinellas County, verbal consent can be obtained from clients for all partner agencies with the approval of the Continuum of Care (CoC). Except for first party access to information and any required disclosures for oversight of compliance with Pinellas HMIS Privacy and Security Standards, all users and disclosures are permissive and not mandatory. Uses and disclosures not specified in the HMIS Privacy Notice can be made only with the consent of the individual or when required by law. Data may be shared without the client's consent in instances of serious threats to health or safety if it is believed 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 (HUD's HMIS Data and Technical Standards Final Notice § 4.1.3).

Oral Explanation of Pinellas HMIS and Verbal Consent
Oral Explanation: All clients will be provided with an oral explanation of the Pinellas HMIS and terms of consent by the Member Agency. The Member Agency is responsible for ensuring that this procedure takes place **prior** to every client interview or entry into Pinellas HMIS.

The oral explanation must contain the following information:

1. What the CoC uses Pinellas HMIS for:
   - Understanding Member Agency's clients' needs;
   - Assisting in planning for appropriate resources to better serve consumers; and
   - Informs public policy to end homelessness.

2. The Pinellas HMIS is a computer-based information system that Member Agencies across the county use to capture information about the persons they serve.
   - Client information is transferred in an encrypted format to the Pinellas HMIS database.
   - Clients have the right to not answer any question, **unless entry into a Member Agency program requires it.**
   - Clients have the right to know who has added to, deleted, or edited their Pinellas HMIS electronic client record.

3. Only Member Agency staff who work directly with clients and/or have administrative responsibilities can look at, enter, or edit client records.

4. Benefits for clients:
   - Allows case manager to tell the client what services are offered on site or by referral through the assessment process
   - Assists the case manager and client in obtaining other resources that will help them find and keep permanent housing

The use of **verbal consent** by the client is currently only allowable by approved HMIS projects and notated on the current Privacy Notice. During a State of Emergency, where the ability to meet face-to-face with clients may pose a threat to health and safety, the CoC will expand the use of the verbal consent to other providers. A verbal consent shall be recorded in HMIS and is **valid for one (1) year**.

Verbal Client Consent to Share Data
Each Client whose record is being shared electronically with another Member Agency must agree via verbal consent to have their data shared. A client must be informed what information is being shared and with whom it is being shared. A client must also be informed of the expiration date of the consent. The program types approved for the use of verbal consent can be found on the most current Privacy Notice.

Written Client Consent to Share Data
Each Client whose record is being shared electronically with another Member Agency must agree to share their information by signing a Pinellas HMIS Informed Consent and Release of Information. If the client opts to restrict any of their information the client should indicate this on the signed form which the Member Agency would then send to Pinellas HMIS to restrict visibility in the system. A client must be informed what information is being shared and with whom it is being shared. A client must also be informed of their ability to change, or revoke, their consent in the future.

Policy 2-6: Confidentiality

All standards described in this manual pertain to any homeless assistance organization that records, uses or processes personally identifying information (PII) for Pinellas HMIS. One exception exists to this policy: any Member Agency covered under HIPAA is not required to comply with the standards in this manual if the Member Agency determines that a substantial portion of its PII about homeless clients or homeless individuals is protected health information (PHI) as defined in the HIPAA rules (Section 4.1.2, 2004 HMIS Data and Technical Standards).

Confidentiality Procedures

Member Agencies must comply with HIPAA rules instead of Pinellas HMIS policies if it determines that a substantial portion of its PII about homeless clients or homeless individuals is protected health information as defined in the HIPAA rules. Exempting HIPAA covered entities from the HMIS privacy and security rules avoids all possible conflicts between the two sets of rules.

Informed consent includes both an oral explanation and written client consent for each client. All Pinellas HMIS Member Agencies must obtain consent from all clients for whom they are entering or accessing client data into HMIS. Data is also collected and shared when verbal consent is obtained specifically in the case of the Diversion Teams, Street Outreach, and 211 Homeless Helpline. In the event of a declared emergency, verbal consent can be obtained from clients for all partner agencies with the approval of the Continuum of Care (CoC).

All records dealing with clients must be treated as confidential. All Pinellas HMIS users and Agency Administrators are responsible for maintaining the confidentiality of information relating to client information entered into Pinellas HMIS. Failure to maintain confidentiality may result in termination of Pinellas HMIS licenses for the organization.

Pinellas HMIS Corrective Action

Data Security is the highest priority of Pinellas HMIS, but Data Quality is also an essential function of the CoC required for service coordination and improving program performance. Per the U.S. Department of Health and Human Services (2013), a breach is, generally, an impermissible use or disclosure under the HIPAA Breach Notification Rule, 45 CFR §§ 164.400-414 that compromises the security or privacy of the protected information. An impermissible use or disclosure of protected information is presumed to be a breach unless the covered entity or business associate, as applicable, demonstrates that there is a low probability that the protected information has been compromised based on a risk assessment of at least the following factors:

1. The nature and extent of the protected information involved, including the types of identifiers and the likelihood of re-identification;
2. The unauthorized person who used the protected information or to whom the disclosure was made;
3. Whether the protected information was acquired or viewed; and
4. The extent to which the risk to the protected information has been mitigated.

Critical Risk includes data breach, repeated Medium Risk (3 within 30 days), failure to complete Releases of Information and report Domestic Violence to the HMIS Lead or Security Officer.

Medium Risk includes inaccurate bed count, duplicative entries for clients, accessing inappropriate client records, continually entering benchmark or HUD Universal Data Elements incorrectly for three or more months, failure to notify HMIS Staff of staff departure, etc.

Low Risk includes unresponsiveness to HMIS staff requests, failure to accurately submit the monthly data quality certifications in a timely manner for three or more months consecutively.

Upon notification of a procedural violation, HMIS staff will investigate within one business day and if confirmed, will report to the Security Officer/HMIS Lead who implements action.

In emergency situations, i.e., security breach, imminent danger to the database or other Critical Risk, the Security Officer immediately contacts and reports to the HLA CEO, who has final authority for the impending action. HMIS Governance is notified within one business day of a critical risk.

In instances involving data quality certification issues, the Data and System Performance committee is notified at the next scheduled committee meeting with regard to the risk assessment completed by the HMIS Lead. This would include the action steps required for the Corrective Action Plan. Communication leading up to a training or corrective action plan will be handled on a case-by-case basis.

In all other instances, HMIS Governance is notified at their next scheduled meeting and the HMIS Security Officer implements a course of action outlined in the following steps:

Action Step 1: Consultation with the Provider Agency
Action Step 2: Notification of HLA CEO
Action Step 3: Written warning
Action Step 4: Sanctions
Action Step 5: Probation
Action Step 6: Suspension
Action Step 7: Termination

Action Step 1: Consultation with the Provider Agency.

   a) Security Officer/HMIS Lead contacts the Provider Agency Administrator and discusses the inappropriate practice.
   b) Security Officer/HMIS Lead and Provider Agency Administrator itemize specific requirements for corrective action.
   c) Security Officer/HMIS Lead and Provider Agency Administrator identify a time frame for implementation and completion of the corrective measure(s).
   d) Provider Agency Administrator coordinates further training if deemed necessary.
   e) Security Officer/HMIS Lead documents conversation and reports this information to the HMIS Data & Support Specialist for tracking purposes.
   f) Alerts the HMIS Team to begin monitoring the inappropriate practice, which remains in place until resolution.
   g) HMIS Data & Support Specialist informs the Security Officer/HMIS Lead when the corrective action is resolved.
   h) Security Officer/HMIS Lead notifies Provider that the corrective action is resolved.

Action Step 2: Notification of HLA CEO

   a) Security Officer contacts the HLA CEO and reports on the ongoing corrective action.

Action Step 3: Written Warning

a) If any corrective measures do not happen, or if inappropriate practices continue over multiple months, then the Security Officer/HMIS Lead implements a warning procedure.
b) The Security Officer or an appropriate HMIS staff member (under the Security Officer's instruction or, in the case of a Data Quality issue, the HMIS Lead) sends a notice to the Provider Agency Administrator which includes:
  - An explanation of violations and itemizes specific requirements for improvement as defined through a Corrective Action Plan.
  - A time frame for implementation and completion of the corrective measure(s).
  - A training or technical assistance plan, if deemed necessary.
  - Further HMIS actions if the inappropriate practice(s) continue.
c) The technical support staff archives a copy of the warning in the Provider Agency's file.

Action Step 4: Sanctions

a) If the Provider Agency fails to provide satisfactory responses to the warning within the allotted time period, as defined in the Corrective Action Plan, then the Security Officer reviews all previous correspondences and/or Provider Agency corrective action responses and determine sanctions based on the evidence.
a) The Security Officer notifies the Provider Agency of impending sanctions, the effective date and a copy of the original notice.
b) The HMIS Data & Support Specialist archives a copy of the sanctions notification in the Provider Agency's file.

Any Agency User found to be in violation of security protocols may be sanctioned accordingly.

Sanctions may include but are not limited to: submission of a plan of correction, a formal letter of reprimand, suspension of HMIS privileges, revocation of HMIS privileges, termination of the HMIS Participation Agreement, and civil or criminal prosecution.

A revoked Agency User may be subject to discipline by the Agency pursuant to the Agency's personnel policies.

Action Step 5: Probation

a) If the Provider Agency fails to provide satisfactory responses to the sanctions within the allotted time period, then the Security Officer reviews all previous correspondence and Provider Agency corrective action responses and determine warranted probation.
b) The Security Officer notifies the Provider Agency of impending probation and the effective date.
c) Security Officer assigns designated HMIS staff to work with and monitor resolution of identified areas of violation.

The **notification**:

a) Explains the violation(s) and itemizes specific requirements for improvement.
b) Identifies assigned HMIS staff, who will work collectively with the Agency Administrator and Executive Director, to determine the reason(s) for ineffective corrective measures and create a timeline for effective resolution.
c) Includes a copy of the Security Officer's review of the Provider Agency's issues.
d) Explains the change in provider status to Probationary Provider Agency.

e) The probationary period remains effective until all corrective measures meet the Security Officer's approval and will not persist past one hundred and eighty (180) days from the notification date.
f) The HMIS Data & Support Specialist archives a copy of the probation notification in the Provider Agency's file.

Action Step 6: Suspension

a) If the Probationary Provider Agency's inappropriate practice(s) continues or reoccurs, and there is no resolution with the Security Officer and HMIS staff then the Security Officer begins the suspension process.
b) The HMIS Lead:
   1) Notifies the Provider Agency of impending suspension and the effective date
   2) Assigns appropriate HMIS staff to facilitate data identification and data transfer to another database.
   3) Immediately inactivates all Provider Agency End-user database access
   4) Only reactivates End-user access after receiving written permission via email or fax from HMIS Governance.

   The **notification**:

   1) Identifies assigned HMIS staff, who will work collectively with the Provider Agency Administrator and Executive Director, to identify and transfer database elements needed for the Provider Agency to continue conducting business.
   2) Includes an updated copy of the Security Officer's review and decision to suspend Provider Agency's HMIS access.
   3) Explains the change in provider status to Suspended Provider Agency and the suspension of all End-user database access.
   4) Explains the requirement of a mandatory meeting to address the resolution of inappropriate practices. The HMIS Security Officer coordinates the meeting time and place with all participants, which include the Agency Administrator and/or the Executive Director.

c) The HMIS Data & Support Coordinator archives a copy of the suspension notification in the Provider Agency's file.

Action Step 7: Termination

a) If the Probationary Provider Agency refuses to attend the mandatory meeting or comply with HMIS Policy and Procedures, then HMIS Governance issues an order to the Security Officer to permanently terminate the Provider Agency access to the HMIS database.
b) Data Transfer
   - The Terminated Provider Agency
     1. Must submit a request for their data within 60 days of termination.
     2. Assumes responsibility for cost of data transfer to another database.
     3. Pays the HLA accountant prior to data delivery.

Policy 2-7: Information Security Protocols

To protect the confidentiality of the data and to ensure its integrity at the site whether during data entry, storage and review or any other processing function, a Member Agency must develop rules, protocols or procedures.

Information Security Protocol Procedures

A Member Agency, at a minimum, must address all rules, protocols, or procedures as follows:

- Assignment of user accounts
- Unattended workstations
- Physical access to workstations
  - The implementation of hardware and/or software firewall to secure local systems/networks from malicious intrusion
- Use of Antivirus Software, including the automated scanning of files as they are accessed by users on the system where the Pinellas HMIS application is used as well as assuring that all client systems regularly update virus definitions from the software vendor
- Computer Operating Systems are regularly updated for security and critical updates provided by the software vender
- Use of Anti-Spy ware, including the automated scanning of files as they are accessed by users on the system where the Pinellas HMIS application is used as well as assuring that all client systems regularly update virus and spy ware definitions from the software vendor
- Password complexity, expiration, and confidentiality
- Policy on users not sharing accounts
- Client record disclosure
- Report generation, disclosure, and storage

Policy 2-8: Connectivity

It is the responsibility of the Member Agency to obtain, at minimum, a Broadband Internet connection. T-Lines, Optical Carriers, DSL, Satellite, Integrated Services Digital Networks, and cable internet connections as also acceptable. Free or public wireless hotspots should not be used while accessing Pinellas HMIS or any confidential information obtained from Pinellas HMIS.

Connectivity Procedures

Because vast amounts of data are transmitted, to avoid staff frustration and to be efficient, obtaining and maintaining a broadband (high-speed) Internet connection (greater than 56K/v90) is required. Suggestions include DSL (Digital Subscriber Line), Cable Access, Fiber Optic, or Satellite Downlink.

Policy 2-9: Maintenance of Onsite (Agency) Computer Equipment

The CEO/Executive Director or designee of each Member Agency is responsible for the maintenance and disposal of on-site computer equipment and data used for participation in the Pinellas HMIS.

Computer Equipment Maintenance Procedures

1. **Computer Equipment**: The Member Agency is responsible for maintenance of on-site computer equipment. This includes purchase of and upgrades to all existing and new computer equipment for utilization in the Pinellas HMIS Project.

2. **Backup**: While the Pinellas HMIS system is an internet based, system, and thus all application-level data backups are the vendor's responsibility, each local system is also subject to failure. The Member Agency is responsible for supporting a backup procedure for each computer connecting to the Pinellas HMIS. A backup procedure may include archival of old existing data, and other general backups of user documents and files.

3. **Internet Connection**: The Member Agency is responsible for troubleshooting problems with Internet Connections.

4. **Data Disposal**: The Member Agency agrees to dispose of documents that contain identifiable client level data in a manner that will protect client confidentiality. Methods may include:

   - Shredding paper records;
   - Deleting any information from media and destroying the media before disposal; and/or
   - Triple formatting hard drive(s) of any machine containing client-identifying information before transfer of property and/or destruction of hard drive(s) from any machine containing client-identifying information before disposal.

5. **Data Retention**: Protected Personal Information (PPI) that is not in current use seven years after the PPI was created or last changed must be deleted unless a statutory, regulatory, contractual, or other requirement mandates longer retention. Care must be taken to assure the guidelines associated with data disposal are properly followed.

Policy 2-10: Universal and Program-Specific Data Elements

The Pinellas HMIS requires each HMIS Member Agency to enter client level data based on a set of predefined data standards. All Member Agency providers are encouraged to record all Universal and Program-Specific Data Elements (UDE & PSDE) for all clients entered into Pinellas HMIS even if not required for funding.

Universal Data Element (UDE) Procedures

Pinellas HMIS data standards are based on the most current revision of the HUD Homeless Management Information System (HMIS) Data Standards. Each Member Agency is responsible for ensuring that a minimum set of data elements, referred to as the HUD Universal Data Elements (UDEs) as defined by the most current HUD HMIS Data Standards Manual, will be collected and/or verified from all clients at their initial program enrollment or as soon as possible thereafter. Member Agencies are required to enter data into the HMIS as specified in Section 9. HMIS Data Quality Policies and Procedures. The UDEs are all included collectively on the Client Profile, Assessment, and HUD Entry and Exit assessments, which are on the Community Services Entry and Exit screens, respectively. Member Agencies must report client-level UDEs using the required response categories detailed in the "Required Response Categories for Universal Data Elements" section of the most current HUD HMIS Data Standards Manual. The most current version of this document can be found on the **HUD Exchange**.

Every program entering data into Pinellas HMIS is graded based on the following elements: quality, completeness, consistency, accuracy, and timeliness. Data is to be entered into Pinellas HMIS within 72 hours of client receiving services, unless an exemption has been approved by the Pinellas HMIS Manager and later ratified by the Pinellas HMIS Governance Committee, additionally, projects are to strive for 95% or higher completeness rating.

Program-Specific Data Element (PSDE) Procedures

Optional PSDE are a valuable area of the client record and part of case management. The collection of these data elements are often required by Federal Agencies providing funding to a project, as detailed in the relevant funding-specific HMIS Project Manual or as outlined in the most recent version of the HUD Data Standards, found on the **HUD Exchange.** In instances where these are not required, these elements are encouraged to be completed for each client especially if the client is in a housing or financial assistance program. The more complete the client record, the better the information available is to help the client more effectively.

Policy 2-11: Pinellas HMIS Grievance

The Pinellas HMIS Governance Committee holds the final authority for all decisions related to the governance of the Pinellas HMIS System. Decisions made or actions authorized by HLA regarding the Pinellas HMIS which do not satisfy an interested party, including those at the Continuum, agency or client levels, may be brought before the Pinellas CoC Grievance Committee for a decision in accordance with the Pinellas HMIS Grievance Procedure. The Pinellas CoC Grievance Committee members will be assigned by the Pinellas HMIS Governance Committee and members will not have a conflict of interest for the grievance they are to adjudicate.

Client Grievance Procedures

Clients of Member Agencies use the Member Agency's existing grievance procedures regarding unsatisfactory services or use and disclosure of Personal Protected Information (PPI) in the Pinellas HMIS, as these issues are most likely within a Member Agency. It is only when the issue involves the actions of the CoC's Pinellas HMIS operation that the Pinellas HMIS Grievance Procedure is to be used. Additionally, the Pinellas HMIS Grievance Procedure is not intended for use as an "appeal" for a local agency decision.

If a client wants to file a complaint:

1. The Client complaint is to be brought to the attention of the Member Agency's CEO/Executive Director or designee, who shall assist the client in the Grievance Procedure.
2. The complaint is to be stated in writing.
3. The complaint shall be returned to the Agency Administrator, who has the ability and authority to take corrective action.
4. The Client and the Member Agency's Agency Administrator meet with the appropriate Pinellas HMIS party to resolve the complaint.
5. The actions and resolutions shall be in writing.

If the matter cannot be resolved to the satisfaction of all parties, the Pinellas HMIS Governance Committee will convene the Pinellas CoC Grievance Committee, giving them information concerning all actions taken to date:

1. The complaint is forwarded to the Pinellas HMIS Director by the Member Agency's CEO/Executive Director or designee.
2. The Chief Administrative Officer will staff the complaint with the Pinellas HMIS System Administrator and the HLA CEO or designee and prepare a written summary to be forwarded to the Pinellas CoC Grievance Committee.
3. The Pinellas CoC Grievance Committee will meet, a minimum of 14 days, after being notified by the HLA regarding the formal complaint to hear the summary.
4. The Pinellas CoC Grievance Committee will resolve the complaint within five (5) working days after this meeting.
5. Should the client want to appeal the Pinellas CoC Grievance Committee's decision, the Pinellas CoC Grievance Committee will hear the appeal at its next scheduled meeting and resolve the complaint in the manner in which it makes its decisions. This decision is final.
6. All actions and resolutions will be in writing. Both the client and Pinellas HMIS Member Agency involved will have a copy describing the resolution of the complaint.

Grievance by Member Agencies or a Continuum of Care: Member Agencies are to first ascertain if the issue is at the Continuum of Care level and if so to resolve it at that level.

If a Member Agency, Continuum of Care, or any combination of such organizations has a complaint about a decision or an action of the Pinellas HMIS staff concerning the Pinellas HMIS or any issue about which the Pinellas HMIS has responsibility, they should first bring the matter to the attention of the Chief Administrative Officer who has the ability and authority to take corrective action as a verbal, informal Grievance Procedure.

Informal Grievance Procedure

The informal grievance procedure involves bringing the issue verbally to the Pinellas HMIS party who has the ability and authority to take corrective action. It is intended that a meeting between the parties shall resolve the issues.

Formal Grievance Procedure

If the matter is not resolved through the Informal Grievance Procedure to the satisfaction of the Member Agency or Continuum of Care, the Formal Grievance Procedure should be initiated.

1. The complaint should be in writing and submitted to the Pinellas HMIS Governance Committee who will convene the Grievance Committee.
2. The Grievance Committee will meet, at a minimum, of 14 working days to allow for quorum, after being convened and notified of the complaint and will consider information from all parties involved.
3. The Grievance Committee will hear the complaint from all parties.
4. The Grievance Committee will resolve the complaint within five (5) working days.
5. The actions and resolution of the grievance shall be in writing.
6. If the grieving party is not satisfied, the decision may be appealed to the Pinellas HMIS Governance Committee, who will hear and resolve the complaint at its next regularly scheduled meeting. This decision is final.

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Policy 3-1: Access Levels for System Users

User accounts will be created and deleted by Pinellas HMIS staff. There are different levels of access to the Pinellas HMIS. These levels are reflective of the access a user has to client level paper records. Access levels should be need based and any prospective Pinellas HMIS user should never have access or view detailed information on program and service participants with whom they were once friends or a fellow participant.

Access Level for System Users Procedures

A Member Agency must require each potential user of Pinellas HMIS (including employees, volunteers, affiliates, contractors and associates) to sign (upon hire, and when modified) a Pinellas HMIS End User Agreement and to acknowledge receipt of a copy of the most current Pinellas HMIS Privacy Notice and to pledge to comply with the privacy notice as issued.

Policy 3-2: Access to Data

Users will be able to view the data entered by Member Agencies in accordance with their respective Participant Agreement. Security measures exist within the Pinellas HMIS system which restricts agencies from viewing data not covered by the executed Participant Agreement.

Requests from Law Enforcement: The Pinellas HMIS staff will not print, give an electronic copy of, or disclose any personal information without a subpoena. Subpoenas are to be submitted to the Pinellas HMIS Manager and include requests for: Next-of-kin searches; searches for clients by family or friend; searches for clients who may be in danger or whose health may be at risk; and searches for clients in the interest of public safety where law enforcement has probable cause or an active warrant for his/her arrest, related to a violent crime and other felony crimes.

Access to Data Procedures

The Member Agencies must establish protocols for internal access to data. These access protocols must contain the following elements:

1. Physical security policies and procedures
2. User security training
   - User orientation
   - Periodic reminders of internal procedures
   - An industry recognized user authentication system
3. Access authorization policies and procedures
4. Access revocation policies and procedures
5. Incident reporting policies and procedures
6. Sanction policies and procedures
7. Termination procedures
8. Risk Assessment
9. Risk Management

Policy 3-3: Access to Client Paper Records

Each agency must secure any paper or other hard copy containing personal protected information that is either generated by or for the Pinellas HMIS, including, but not limited to reports, data entry forms, and signed consent forms.

Client Paper Records Procedures

All paper or other hard copy generated by or for the Pinellas HMIS that contains PPI must be directly supervised when the hard copy is in a public area. When agency staff is not present, the information must be secured in areas that are not publicly accessible. Written information specifically pertaining to user access, e.g., username and password, must not be stored or displayed in any publicly accessible location. All Pinellas HMIS paper records that contain client information must be destroyed seven (7) years after the client has left the program.

Policy 3-4: Unique User ID and Password

All Member Agency Pinellas HMIS user accounts will be the responsibility of their Agency Administrator; Pinellas HMIS staff will grant a unique user ID and password to all Member Agency users once the Agency Administrator acknowledges that they have a license available, submits the necessary paperwork, and the user attends their new user training.

User Id and password procedures

- Each user will be required to enter a Pinellas HMIS assigned User ID and Password in order to access the system. This information is given to the user once they attend the new user training.
- Upon initial access using the assigned information for access, the new user will be prompted to change the Pinellas HMIS assigned password. This is another security measure built into Pinellas HMIS. This user-created password must be no less than eight and no more than ten characters in length which will not be comprised of words, backward words, names, backward names or any identifiable acronym.
- The password must be alphanumeric.
- Users must use industry standard best practices when selecting their password including the following: Use lower- and upper-case letters; and do not use passwords containing the names of a spouse, child or pet (similar names or backward names, places or things) and do not use birthdates or other easy to guess items.
- Written information specifically pertaining to user access, e.g., username and password, may not be stored or displayed in any publicly accessible location.

Password Reset:
- Initially each user will be given a password for one time use only. The first password will be created by Pinellas HMIS staff and will be issued to the User.
- The Member Agency Administrator will reset a password if necessary.
- Unsuccessful logon: If a User unsuccessfully attempts to log in three times, the User ID will be "locked out" on the next attempt and access permission will be locked. The user will be unable to gain access until their password is reset either through their Agency Administrator or through the Pinellas HMIS HelpDesk ticketing system.

Policy 3-5: *User Inactivity*

To ensure consistent data entry and accurate data, it is important for End Users to actively use Pinellas HMIS. This assists the CoC in making data-driven decisions.

Subsidized Licenses

End Users who have not logged into the system for 30 days will be considered inactive and the End User and Agency Administrator are notified that the profile has been inactivated. The Member Agency Administrator can submit a Help Desk request to have access reinstated between 31st and 60th day. End User accounts not active for 60 days will need to complete the Talent Annual Refresher Training to be reinstated. After the 91st day of inactivity, the end user account will be removed from HMIS, and the Member Agency risks forfeiture of the license if the end user's profile was subsidized. The license will be temporarily unavailable until HMIS Governance makes the final decision of forfeiture.

Unsubsidized Licenses

End Users who have not logged into the system for 30 days will be considered inactive and the End User and Agency Administrator are notified that the profile has been inactivated. The Member Agency Administrator can submit a Help Desk request to have access reinstated between 31st and 60th day. End User accounts not active for 60 days will need to complete the Talent Annual Refresher Training to be reinstated. After the 91st day of inactivity, the end user account will be removed from HMIS. The inactivated license will be reinstated to the Member Agency for future usage.

Policy 3-6: *Right to Deny User and Member Agency Access*

The Member Agency or user access may be suspended or revoked for suspected or actual violation of the security protocols. Serious or repeated violation by users of the system may result in the suspension or revocation of an agency's access.

Right to deny user procedure:

1. Criminal or illegal activity in which a client's rights, privacy, safety, or security has been violated take precedence for resolution over all other data violations.
   a. Policies and Procedures concerning criminal and/or illegal activities are addressed in the Pinellas CoC Lead Agency System Policies and Procedures.
2. The agency and their Pinellas HMIS System Administrator will investigate all suspected violations of any security protocols.
3. Any user found to be in violation of security protocols will be sanctioned by his/her agency. Sanctions may include but are not limited to a formal letter of reprimand, suspension of system privileges, revocation of system privileges, termination of employment and/or criminal prosecution.
4. It is the responsibility of the Member Agency Administrator to report any violations within 24-business hours to the Pinellas HMIS System Administrator.
5. Pinellas HMIS may restrict access prior to completion of formal investigation if deemed necessary by the Pinellas HMIS System Administrator. If access is restricted, the Pinellas HMIS System Administrator or Performance Improvement Manager will notify the Member Agency CEO and the chair of the HMIS Governance committee of the restriction to consult with them about next steps.
6. Any agency that is found to have consistently and/or flagrantly violated security protocols may have their access privileges terminated.
7. If the Pinellas HMIS Member Agency violates any policies deemed of critical risk and fails to achieve resolution within a timeframe prescribed by the HLA, the Pinellas HMIS staff will permanently terminate the Member Agency from Pinellas HMIS. The Pinellas HMIS Member Agency's CEO/Executive Director will receive a written notice, via certified mail, regarding the Termination, reasons and effective date. A copy of the notification of the termination will be sent to all funders associated with the project in question. In the case there are data quality costs and/or transfer costs, the Member Agency may assume responsibility for payment.
8. All sanctions can be appealed to the Pinellas CoC Grievance Committee.
9. Member Agencies seeking to be returned to full active Pinellas HMIS status, after being terminated must complete a reinstatement process that includes full training for all users and Agency Administer; and a 12-month probationary period. Member agencies requesting their PHMS license be re-instated after license has been suspended by the HLA may be responsible for the cost to re-activate the license. This determination will be made by the Pinellas HMIS Governance Committee.

Policy 3-7: Data Access Control

Agency Administrators at Member Agencies and the Pinellas HMIS staff reserve the right to monitor access to Pinellas HMIS software.

Data Access Control Procedures

Agency Administrators at Member Agencies and the Pinellas HMIS staff will regularly review Pinellas HMIS user access privileges and deactivate users when users no longer require access. Pinellas HMIS staff will monitor all user licenses and usage quarterly, and review and set licensing fees for the Pinellas HMIS system annually.

It is the responsibility of the Pinellas HMIS Member Agency's Agency Administrator to notify Pinellas HMIS when licenses are not being used by agency staff, when there is a turnover or termination of agency staff that will impact the name on a license, and for purchasing additional licenses when needed. Pinellas HMIS Member Agencies are to notify Pinellas HMIS within five (5) business days of any licensing changes. Pinellas HMIS staff will run a Pinellas HMIS License Usage Report on a quarterly basis assisting Pinellas HMIS staff with the addressing the following:

- Pinellas HMIS Member Agency Administrators will be contacted when the system identifies a license that has not been used in the past 90-days. Pinellas HMIS Member Agency Administrators will have 48 hours to confirm with Pinellas HMIS if this license is still needed by the agency. If Pinellas HMIS does not receive a response from a Member Agency within the 48-hour timeframe, the license will be inactivated and put into the Pinellas HMIS License Pool.
- All requests for new or additional user licenses must be submitted in writing to the Pinellas HMIS HelpDesk ticketing system. Once notice has been received, Pinellas HMIS staff will advise if the Member Agency has an available license. If a license is not available, Pinellas HMIS staff will contact the vendor and purchase the licenses as well as notify the HLA Finance Director if license billing/invoicing is required. If additional licenses need to be purchased, licenses will be provided once payment is received.
- Agency Administrators at Member Agencies and Pinellas HMIS staff may implement discretionary access controls to limit access to Pinellas HMIS information based on application security designations. Examples of such designations include but are not limited to "Agency Administrator", "Case Manager", and "Volunteer."
- Agency Administrators at Member Agencies and Pinellas HMIS staff may audit unauthorized accesses and attempts to access Pinellas HMIS information. The access records shall be kept at least six months, and Agency Administrators and the Pinellas HMIS Systems Administrator may review the audit records for evidence of violations or system misuse.

Guidelines for data access control for the Member Agency: The federal regulations state that physical access to systems with access to computers that are used to collect and store HMIS data shall be staffed at all times when in public areas. When workstations are not in use and staff is not present, steps should be taken to ensure that the computers and data are secure and not publicly accessible. These steps should **minimally include:**

- Logging off the data entry system, shutting down the computer, and storing the computer and data in a locked room. This could be accomplished using an operating system with individual profiles and system security policies enabled
- Any passwords written down should be securely stored and inaccessible to other persons. Users should not store passwords on a personal computer for easier log on.

Policy 3-8: Using Pinellas HMIS Data for Research

Member Agencies in the Pinellas HMIS should collect personal client information only when appropriate to provide services and/or for other specific purpose of the organization and/or when required by law.

Pinellas HMIS Data for Research Procedures:

Purposes for which agencies collect protected personal information may include the following:

- To provide or coordinate services to clients;
- Locate other programs that may be able to assist clients;
- For functions related to payment or reimbursement from others for services that are provided;
- To operate the agency, including administrative functions such as legal, audits, personnel, oversight, and management functions;
- To comply with government reporting obligations when required by law; and
- For research purposes.

Pinellas HMIS Release of Data for Research Conditions

The Pinellas HMIS Governance Committee will review and respond to requests for the use of Pinellas HMIS data for research:

- No client protected personal information for any reason may be released to unauthorized entities.
- Only de-identified aggregate data will be released.
- Aggregate data will be available in the form of an aggregate report or as a raw data set. Parameters of the aggregate data, that is, where the data comes from and what it includes, will be presented with each report.
- Research results will be reported to the Pinellas HMIS Governance Committee for approval prior to publication by the HLA.
- Research will be shared with the appropriate agencies after publication.
- The HLA will be granted the rights to utilize all findings (results).

Policy 3-9: Pinellas HMIS Roles and Descriptions/System Administrator II

HLA, not limited to HMIS, staff facilitating case conferencing will be assigned as System Administrator Level II roles in order to review data related to clients' history within the Pinellas HMIS. This information will include, but is not limited to client program enrollments, services, and case plan notes.

Roles and general descriptions of the capabilities of each role are listed below.

- Read-Only Access Users: These users can view, but not edit any screens within the Clients module. User may access Reports.
- HMIS Case Manager (I, II or II): Users may access all screens and modules except "Administration." A Case Manager may access all screens within the Clients module, including viewing and editing Client Level information shared within HMIS.

- HMIS Agency Administrator: In addition to the level of access as a Case Manager, Agency Administrators may access all Community Services screens and modules available to their agency and projects (granted by the HMIS Lead Agency). Agency Administrators may access and reset users passwords in HMIS. This function is limited to users within that Administrator's agency.
- Executive Director: Users have the same access rights as an Agency Administrator but rank above the Agency Administrator.
- System Administrator (I or II): There are no system restrictions for this role. They have full HMIS access.

Policy 4.1: Pinellas HMIS Data Quality Policy

Pinellas HMIS Member Agency providers will work diligently to adhere to data quality standards set forth by the CoC to ensure that reports both at the provider level and the system level are complete, consistent, accurate, and timely.

Pinellas HMIS Data Quality Procedures

The HLA is responsible for implementing data standards in such a way that specifies the data quality standard to be used by all Member Agencies; provides a mechanism for monitoring adherence to the standard; and provides the necessary tools and training to ensure compliance with the standard. This includes strategies for working with agencies that are not in compliance with the Pinellas HMIS Data Quality standards.

Data Quality Standards

- All names provided will be accurate based on client self-report unless agency is able to verify name with social security card or other government-issued document;
- Blank entries in required data fields will not exceed the error rate for their project type as outlined in the **Pinellas HMIS Data Quality Plan**;
- Data inconsistencies or missing data will not exceed the HUD error rate for their project type as outlined in the **Pinellas HMIS Data Quality Plan**;
- All client data should be entered no later than 72 business hours after intake, assessment, or program or service entry or exit;
- In the event Pinellas HMIS users are not able to enter data in real time, data should be backdated to ensure that the data entered reflects the actual client service provision dates;
- All client data entered into Pinellas HMIS must match the Member Agency's client record/case file;
- Pinellas HMIS users should not assume client data or make changes to client data not reported by the client unless the information has been officially verified. Examples of verification include, but are not limited to, documents such as: Social Security Cards; Government-issued IDs; SSI/SSDI benefit letters; and/or letters of employment or paystub information;
- All Universal Data Elements must be obtained from each adult and unaccompanied youth who applies for services through the CoC. Most Universal Data Elements are also required for children age 17 years and under. More information on data collection for the Universal Data Elements can be found in the **HUD Data Standards Manual**;
- HLA staff, including, but not limited to, the Pinellas HMIS Staff and HLA Performance Improvement Manager, will conduct a monthly data review for all projects utilizing the Entry/Exit workflow;
  - o Any data errors or concerns that are identified during this monthly data review will be reported to the Member Agency's Agency Administrator for clarification or correction;
  - o Member Agencies must maintain a Completeness grade of 95% or above for client information entered into Pinellas HMIS;
  - o If the error rating for a project rises above the acceptable target error percentage (as outlined in the **Pinellas HMIS Data Quality Plan**), the HLA will create a training course of action for the agency's Pinellas HMIS users;
  - o If the error rating for a project continues to rise above the acceptable target error percentage (as outlined in the **Pinellas HMIS Data Quality Plan**), the HLA may implement corrective action, which would be monitored by the Data System and Performance Committee;

- Agency Administrators will receive training on how to run and read the reports necessary for completion of the Pinellas HMIS Data Certification process, as outlined in the **Pinellas HMIS Data Quality Plan**;
- Bed inventory should be consistently maintained and managed to reflect true occupancy rates. Changes to the Member Agency's bed inventory must be reported on the monthly HMIS Data Quality Certification;
- Inventories need to be sent to the Pinellas HMIS System Administrator within five (5) business days of any changes;
- Pinellas HMIS Staff will manage a centralized bed inventory;
- Agencies will be required to submit updated bed inventories to the Pinellas HMIS System Administrator quarterly, even if there have been no inventory updates;
- Any data errors identified by Pinellas HMIS staff that have been submitted to the Member Agency's Agency Administrators needs to be corrected within the time frame outlined by Pinellas HMIS staff;
- Pinellas HMIS end users must conduct a search for existing clients in the system before adding a new client into the system;
- All client data should adhere to the Pinellas HMIS style guidelines (https://pinellashmis.zendesk.com/hc/en-us/articles/115002836173-Pinellas-HMIS-Style-Guide);
- If a client stays in an Emergency Shelter for less than six (6) hours the data should not be entered into Pinellas HMIS. Same day enrollments and exits in Emergency Shelter with **no bed night stay should not be entered** in Pinellas HMIS;
- Member Agencies should inform Pinellas HMIS staff through the Pinellas HMIS HelpDesk if a client did not stay for 6 hours or longer or did not stay overnight so the data can be removed. Pinellas HMIS staff will periodically check for clients who meet the above criteria and remove the enrollment as the policy dictates.
- When duplicate information, such as duplicate client records, is found, the Member Agency will notify Pinellas HMIS immediately through the Pinellas HMIS HelpDesk.

Policy 4.2 Data Quality Monitoring

The Pinellas HMIS staff will perform weekly, monthly, quarterly, and annual data integrity checks on the Pinellas HMIS data.

Data Quality Monitoring Procedures

Programs should run their Pinellas HMIS Data Quality Certification reports on a weekly basis and the Annual Performance Report (APR) or equivalent annual report (example: Emergency Solutions Grant Consolidated Annual Performance and Evaluation Report (ESG-CAPER) monthly. Pinellas HMIS is responsible for reporting system errors and difficulties with HMIS working processes to the vendor/software provider. The vendor/software provider must make all functionality changes to the system and these changes are not able to be completed by Pinellas HMIS Staff.

Pinellas HMIS Staff will run HUD Universal Data Elements, Data Incongruities Reports, and other data quality reports as determined by the CoC to determine any patterns or data errors. On a monthly basis, Pinellas HMIS staff and programmatic HLA staff will review the Data Quality Certifications submitted by each Member Agency during Internal Data Review. If error ratings for a project rise above the acceptable target error percentage, Pinellas HMIS will create a training course of action for the Pinellas HMIS users and Member Agency Administrator. If error ratings for project continues to rise above the acceptable target error percentage, the Pinellas HMIS may implement corrective action, which would be monitored by the Data and System Performance Committee and reported to the Pinellas HMIS Governance Committee during their next regularly scheduled meeting. Pinellas HMIS is available to provide technical assistance upon request through the Pinellas HMIS HelpDesk ticketing system.

Pinellas HMIS staff will conduct weekly reviews for duplicate data entries into the system and merge client records. Pinellas HMIS users are encouraged to notify Pinellas HMIS staff when duplicative data is found by way of the HelpDesk ticketing system or through their designated Agency Administrator.

Pinellas HMIS will notify a Member Agency CEO/Executive Director if their Agency Administrators are not responsive to required corrective actions. If data quality issues or unresolved corrective actions continue, Pinellas HMIS will notify the HLA CEO, CoC Chair, and the Pinellas HMIS Member Agency CEO/Executive Director for resolution. If a resolution cannot be reached the non-compliance issue will be addressed at HMIS Governance.

Accountability for Data Quality

If during the HMIS monthly Internal Data Review a pattern(s) of error(s) is identified it will be reported to the (Member) Agency Administrator through email advising them that they will be required to correct the data and that a mandatory Pinellas HMIS training specific to the error/trend is conducted for their identified end user(s). These user(s) will be monitored monthly for compliance until the pattern has been resolved, technical assistance will be provided as needed.

A Member Agency may be considered to be out of compliance with their Pinellas HMIS Participant Agreement if they do not demonstrate a good faith effort to make necessary data corrections as soon as possible, but no later than (5) five days of notification (unless arrangements are made for an extension). Noncompliance to address data entry errors may result in a suspension of the Member Agency's Pinellas HMIS user licenses.

Policy 5-1: Technical Support

The Pinellas HMIS staff is responsible for providing technical support to Pinellas HMIS Member Agency Administrators and users. Technical support services are available to help users solve specific problems with a product, but do not include customization, reporting, or other support services.

Technical Support Procedures
Pinellas HMIS staff, in conjunction with Member Agency Administrators and/or contracted third parties, will coordinate technical support services on a planned schedule to:

- Assist Member Agencies on the use of Entry/Exit forms and other paperwork
- Conduct follow-up training if needed
- Coordinate follow-up data entry training if needed
- Review report generation
- Coordinate ongoing technical assistance as needed
- Assist agencies with network and end user computer security
- Create custom reports, in accordance with Pinellas HMIS Governance Committee guidelines

Member Agency Service Request: To effectively respond to service requests, the following methods of communicating a service request from a Member Agency to Pinellas HMIS staff have been developed:

1. Member Agency user informs their Agency Administrator of the problem.
2. Member Agency's Administrator attempts to resolve issue and if unable to resolve, contacts Pinellas HMIS staff to request service through the HelpDesk ticketing system.
3. Pinellas HMIS staff determines resources needed for the service request and if necessary, contacts vendor for support.
4. Pinellas HMIS staff will contact the Member Agency's Agency Administrator to work out a mutually convenient service schedule and resolution to issue or concern.

Chain of communication: *(Problems should be resolved in the order given to assure minimum time to resolution. Issues resolved at the higher level will be communicated back through the chain in reverse order.)*

1. End User
2. Member Agency Administrator
3. Pinellas HMIS HelpDesk
4. Pinellas HMIS System Administrator
5. HLA Chief Administrative Officer

Policy 5-2: Pinellas HMIS Staff Availability

Consistent with the user's reasonable service request requirements, HLA Pinellas HMIS staff is available for Technical Assistance, questions, and troubleshooting between the hours of 8:30 AM and 5:00 PM Monday through Friday.

Emergency Situations
Outside of normal business hours (8:30 AM to 5:00 PM Monday through Friday), users should contact the Pinellas HMIS HelpDesk and send a detailed message. Pinellas HMIS staff will respond within 24 business hours.

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Policy 6-1: Pinellas HMIS Training Descriptions

- Pinellas HMIS Agency Administrator Training
- Pinellas HMIS New User Training – Clients
- Pinellas HMIS New User Training – Shelters
- Pinellas HMIS Follow-Up Training
- Pinellas HMIS Basic Report Training
- Pinellas HMIS Intermediate Report Training
- Pinellas HMIS Annual Refresher Training Courses

Pinellas HMIS Agency Administrator Training

Prerequisite*:* An executed HMIS Agency Administrator Designation form must be on file with Pinellas HMIS identifying the Agency Administrator by the Member Agency prior to training. Prior to gaining Pinellas HMIS access as an Agency Administrator, the end user will be required to submit new user paperwork as well as a Security Awareness Certificate and a HIPAA Basics Certificate. The Agency Administrator must also receive the Pinellas HMIS New User trainings that apply to their agency's HMIS projects and be trained on Basic Reporting in order to complete the Pinellas HMIS Data Quality Certification process.

Every Agency Administrator must attend Agency Administrator Training. This training is specially designed to teach the Agency Administrator about how to communicate with the Pinellas HMIS staff and manage and monitor their HMIS data. This course covers license monitoring, new license requests, new user paperwork content, and the submission process for new user paperwork. Additionally, the class outlines the expectations required of Agency Administrators and how to request technical assistance from the Pinellas HMIS Staff. Annual Refresher Trainings and a Follow-Up Training are mandatory following this training.

Pinellas HMIS New User Training – Clients

Prerequisite*:* The Member Agency's Agency Administrator will be required to submit new user paperwork as well as a Security Awareness Certificate and a HIPAA Basics certificate for each user prior to training.

This class focuses on the basic data entry requirements for entering all clients into the Pinellas HMIS Clients module. Training includes a meeting on the current HMIS forms including Informed Consent and Release of Information, and HMIS Privacy Notice. During this training, end users will learn how to create and/or find clients in the system, follow the Entry/Exit workflow, and capture services. Training content can be modified to suit an agency's needs upon request. Annual Refresher Trainings and a Follow-Up Training are mandatory following this training.

Pinellas HMIS New User Training – Shelters

Prerequisite*:* The Member Agency's Agency Administrator will be required to submit new user paperwork as well as a Security Awareness Certificate and HIPAA Basics certificate for each user prior to training.

This class focuses on the basic data entry requirements for entering all clients into the Pinellas HMIS Shelters module. Training includes a meeting on the current HMIS forms including the Client Informed Consent and Release of Information, and HMIS Privacy Notice. During this training, end users will learn how to create and/or find clients in the system, check in and check

out a client and modify an existing shelter stay. Training content can be modified to suit an agency's needs upon request. Annual Refresher Training Courses and a Follow-Up Training are mandatory following this training.

Pinellas HMIS Follow-Up Training

Prerequisite: HMIS New User Training (Clients or Shelters)

This class focuses on a random sample of an end user's data entry and includes meeting on areas of improvement. Subsequent follow-up trainings may be required.

Pinellas HMIS Basic Report Training

Prerequisite: Must be an active Pinellas HMIS end user before receiving this training. This training is strongly encouraged for all Pinellas HMIS Agency Administrators.

This training is customized to meet the needs of the Agency or end user receiving the training. At a minimum, this training is an overview of the basic reporting tools available, how to access them, and how to run and save reports. This includes the data quality reports necessary to complete the Pinellas HMIS data certification process (see the **Pinellas HMIS Data Quality Plan** for more information) as well as provider reports including the Client Served Report, CoC-APR, and ESG CAPER. Other reports may be included at the request of the Agency or End User who requests the training.

Pinellas HMIS Intermediate Report Training

Prerequisite: Must be an active Pinellas HMIS end user, have completed a basic report training, and have a custom report license.

This is a supplemental training beyond the Pinellas HMIS Basic Report Training. The training includes the basic reporting principles and how to navigate the reporting tools. It will demonstrate the basics on how to create counts, charts, tables, and graphs within the available reporting tool. On-going assistance and support through the Pinellas HMIS HelpDesk will be available in order for a trained user to request a custom report if needed.

Pinellas HMIS Annual Refresher Trainings

Prerequisite: HMIS New User Training (Clients or Shelters)

HMIS users are required to complete the annual HMIS training series consisting of: DCF HIPAA Basics, and Security Awareness Courses; Pinellas HMIS Privacy & Security Course, as well as the HMIS Data Entry course. Failure to complete the above courses will result in an inactive license status until the trainings are completed. These trainings will be assigned to each end-user 30 days prior to the completion deadline. Enrolling end-users in virtual training will help agencies and end-users by keeping refresher trainings' schedules consistent and will allow agencies to internally coordinate staff calendars.

List of Revision Date, Additions, and Deletions to Pinellas HMIS P & Ps

Original Issue   March 2005

Revision 8   October 2012

Revision 9   August 17, 2017

Revision 10   June 7, 2018

Revision 11   June 25, 2018

Revision 12   March 18, 2019

Revision 13   March 25, 2020

Revision 14   February 10, 2021

Revision 15   February 4, 2022

Revision 16   October 1, 2022 (Licensing fees increased by vendor)

Revision 17   February 7, 2023

Revision 18   February 7, 2024

DRAFT

FACT Sheet: Pinellas Homeless Management Information System (Pinellas HMIS)

Information that you provide will be entered into a computer software program called Pinellas Homeless Management Information System (Pinellas HMIS). This is done for several reasons:

- To find out what is needed to end homelessness in Pinellas County;
- To provide better service(s);
- To receive federal funds.

IMPORTANT POINTS ABOUT HOW YOUR INFORMATION WILL BE USED

- Pinellas HMIS keeps a record of your contact with our agency.
- No information is shared **without your written permission.** A signed Informed Consent and Release of Information form will allow us to share client profile information with other Pinellas HMIS Member Agencies. This means that you will not have to provide the same information at more than one intake.

KNOW YOUR RIGHTS

You have the following rights:

- To review your electronic records within 48 hours.
- To have your record changed so that information is up-to-date and correct.
- To refuse consent and still receive services.
- To file a complaint about how the system was used.

To file a complaint, write to:

Pinellas HMIS Governance Committee
c/o Homeless Leadership Alliance of Pinellas, Inc.
Attn: Chief Administrative Officer
740 4th Street N, Suite 206
St. Petersburg, FL 33701

Security Officer

The Homeless Leadership Alliance of Pinellas, Inc. (HLA) Chief Program Officer designates a member of the Quality and Improvement Team as the Pinellas HMIS (Pinellas HMIS) Security Officer whose duties include:

- Review of the Security Plan annually and at the time of any change to the security management process, the data software, the methods of data exchange, and any Pinellas HMIS data or technical requirements issued by HUD. If changes are required to the Pinellas HMIS Security Plan, the Security Officer will work with the Pinellas HMIS and the Pinellas HMIS Governance Committee for review, modification, and approval.
- Confirmation that the HLA adheres to the Security Plan.
- Response to any security questions, requests, or security breaches to the Pinellas HMIS and communication of security-related Pinellas HMIS information to Member Agencies.

Each Member Agency (MA)'s Agency Administrator must serve as the MA's Pinellas HMIS Security Officer, whose duties include:

- Confirmation that the MA adheres to the Security Plan.
- Communication of any security questions, requests, or security breaches to the HLA Pinellas HMIS Security Officer, and security-related Pinellas HMIS information relayed from the Pinellas HMIS System Administrator to the Member Agency's end users.
- Participate in security awareness training annually.

Annual Security Certification

The HLA and each MA must complete an annual security review to ensure the implementation of the security requirements for the Pinellas HMIS which includes a completion of a security checklist, ensuring that each of the security standards is implemented in accordance with the Pinellas HMIS security plan. Each MA Agency Administrator will complete the Security Self-Certification each January using the attached form and submit the completed form to the HLA Security Officer no later than March 15 of each year.

Security Awareness Training and Follow-up

All users must receive security training prior to being given access to the Pinellas HMIS. The HLA has created an on-line security and privacy training module that is to be completed prior to being issued a password. The request for a new password requires a certification that the new user has completed the on-line training. In addition, the HLA shall provide security training no less than once per year.

Security Incidents

All Pinellas HMIS users are obligated to report to their agency MA Agency Administrator suspected instances of noncompliance with policies and procedures that may leave Pinellas HMIS data vulnerable to intrusion. Each MA is responsible for reporting any security incidents involving the real or potential intrusion of the Pinellas HMIS to the HLA. The HLA is responsible for reporting any security incidents involving the real or potential intrusion of the Pinellas HMIS to the HLA's Chief Executive Office and the CoC's HMIS Governance Committee.

Reporting Threshold

Pinellas HMIS end users must report any incident in which unauthorized use or disclosure of personable identifiable information (PII) has occurred and any incident in which PII may have been used in a manner inconsistent with the MA Privacy or Security Policies. It is the obligation of the MA to report all security breaches that have the possibility to impact the Pinellas HMIS to the Pinellas HMIS Director.

Reporting Process

Pinellas HMIS end users will report security violations to their MA Pinellas HMIS Security Officer. The MA Pinellas HMIS Security Officer will report violations to the HLA Pinellas HMIS Security Officer. Any security breaches identified by WellSky (Community Services) will be communicated to the HLA Pinellas HMIS Security Office and HLA Manager. The HLA Manager will review violations and recommend corrective and disciplinary actions to the Pinellas HMIS Governance Committee, as appropriate. Each Member Agency will maintain and follow procedures related to internal reporting of security incidents.

Audit Controls

WellSky maintains an accessible audit trail within Community Services/ServicePoint that allows the Pinellas HMIS System Administrator to monitor user activity and examine data access for specified end users. The Pinellas HMIS Data Manager and/or System Administrator will monitor audit reports for any apparent security breaches or behavior inconsistent with the Privacy Policy outlined in these policies and procedures.

System Security

Each MA is required to apply system security provisions to all the systems where personal identifiable information is stored, including, but not limited to, a MA's networks, desktops, laptops, smart phones, iPad and tablets, netbooks, mainframes, and servers.

User Authentication

A MA must secure Pinellas HMIS systems with, at a minimum, a user authentication system consisting of a username and a password. Passwords must be at least eight characters long and meet reasonable industry standard requirements.

Using default passwords on initial entry into the HMIS application is allowed so long as the application requires that the default password be changed on first use. Written information specifically pertaining to user access, e.g., username and password, may not be stored or displayed in any publicly accessible location. Individual users cannot log on to more than one workstation at a time or be able to log on to the network at more than one location at a time.

Virus Protection

It is necessary that MA's protect Pinellas HMIS systems from viruses by using commercially available virus protection software. Virus protection must include automated scanning of files as they are accessed by users on the system where the Pinellas HMIS application is housed. A MA's are to regularly update virus definitions from the software vendor.

Firewalls

A MA is also obligated to protect the Pinellas HMIS system from malicious intrusion with a secure firewall. Each individual workstation does not need its own firewall, if there is a firewall between that workstation and any systems, including the Internet and other computer networks, located outside of the organization. For example, a workstation that accesses the Internet through a modem would need its own firewall. A workstation that accesses the Internet through a central server would not need a firewall if the server has a firewall.

Physical Access to Systems with Access to Pinellas HMIS Data

A MA must staff computers stationed in public areas that are used to collect and store Pinellas HMIS data at all times. When workstations are not in use and staff is not present, steps should be taken to ensure that computers and data are secure and not usable by unauthorized individuals. After a short amount of time, workstations should automatically turn on a password-protected screen saver when the workstation is temporarily not in use. If staff from a Contributing HMIS Organization (CHO) will be gone for an extended period, staff should log off the data entry system and shut down the computer.

Hard Copy Security

A MA's staff is to secure any paper or other hard copy containing personal identifiable information (PII) that is either generated by or for Pinellas HMIS, including, but not limited to reports, data entry forms, and signed consent forms. Any paper or other hard copy generated by or for Pinellas HMIS that contains PII located in a public area must have an MA's staff present. When an MA's staff is not present, the information must be secured in areas that are not publicly accessible.

Hard copies of data stored or intended to be stored in Pinellas HMIS, regardless of whether the data has yet been entered into Pinellas HMIS, will be treated in the following manner:

1. Records shall be kept in individual locked files or in rooms that are locked when not in use.
2. When in use, records shall be maintained in such a manner as to prevent exposure of PII to anyone other than the user directly utilizing the record.
3. Employees shall not remove records or other information from their places of business without permission from appropriate supervisory staff unless the employee is performing a function which requires the use of such records outside of the MA's place of business and where return of the records by the close of business of would result in the undue burden on staff.
4. When staff remove records from their places of business, the records shall be maintained in a secure location and staff must not re-disclose the PII contained in those records except as permitted by these policies and procedures.
5. Faxes or other printed documents containing PII shall not be left unattended.
6. Fax machines and printers shall be kept in secure areas.
7. When faxing PII, the recipients should be called in advance to ensure the fax is properly managed upon receipt.
8. When finished faxing, copying, or printing all documents containing PII should be removed from the machines promptly.

Database Integrity

The MA may not intentionally cause corruption of the Pinellas HMIS in any manner. Any unauthorized access or unauthorized modification to computer system information, or interference with normal system operations, will result in immediate suspension of Pinellas HMIS licenses held by the MA, and suspension of continued access to the Pinellas HMIS by the MA.

Disaster Recovery

Pinellas HMIS data is stored by Mediware Information Systems in a secure and protected off-site location with duplicate back-up. In the event of disaster, the Pinellas HMIS System Administrator will coordinate with Mediware Information Systems to ensure the Pinellas HMIS is functional and that data is restored. The HLA will communicate to MA's when data becomes accessible following a disaster.

Contracts and other arrangements

The Pinellas HMIS Lead Agency shall retain copies of all contracts and agreements executed as part of the administration and management of the Pinellas HMIS or required to comply with HUD requirements for a five-year period.

Identification of Security Officer/Agency Administrator

Organization Name

Security Officer/Agency Administrator

Name Title Phone Email

Security Officer duties include, but are not limited to:

- ✓ Annually review the Security Certification document and test the Member Agency security practices for compliance.
- ✓ Using this Security Certification document, certify that the Member Agency adheres to the Security Plan or provide a plan for remediation of non-compliant systems, including milestones to demonstrate elimination of the shortfall over time. Communicate any security questions, requests, or security breaches to the Pinellas HMIS Director, System Administrator, and Security Officer.
- ✓ Communicate security-related Pinellas HMIS information to the organization's end users.
- ✓ Complete security training offered by the Pinellas HMIS Lead Agency.
- ✓ Additional duties specified in the Pinellas HMIS Participation Agreement.

Member Agency Security Officer signature indicating understanding and acceptance of these duties:

_____   _____
Signature   Date

Identification of Security Officer/Agency Administrator

Organization Name

Security Officer/Agency Administrator

Name Title Phone Email

Security Officer duties include, but are not limited to:

- ✓ Annually review the Security Certification document and test the Member Agency security practices for compliance.
- ✓ Using this Security Certification document, certify that the Member Agency adheres to the Security Plan or provide a plan for remediation of non-compliant systems, including milestones to demonstrate elimination of the shortfall over time. Communicate any security questions, requests, or security breaches to the Pinellas HMIS Director, System Administrator, and Security Officer.
- ✓ Communicate security-related Pinellas HMIS information to the organization's end users.
- ✓ Complete security training offered by the Pinellas HMIS Lead Agency.
- ✓ Additional duties specified in the Pinellas HMIS Participation Agreement.

Member Agency Security Officer signature indicating understanding and acceptance of these duties:

_____   _____
Signature   Date

Each Member Agency is required to meet the following security requirements. If the requirement cannot be met at the time of the initial certification, you must indicate a date not later than three months after the initial certification by which you will have met the requirement. At that time, you will be required to submit an updated version of this form demonstrating your compliance.

	Required policy	Meets Requirement (Yes/No)	If no, date by which compliance will be met
User Authentication	Does the agency abide by the Pinellas HMIS policies for unique user names and password?	All Pinellas HMIS users at the agency are aware that they should: NEVER share username and passwords ___Y___N NEVER keep usernames/ passwords in public locations ___Y___N NEVER use their internet browser to store passwords ___Y___N All users have signed a receipt of compliance for staff ___Y___N	
Hard Copy Data	Does agency have procedures in place to protect hard copy Personal Identifiable Information (PII) generated from or for the Pinellas HMIS?	Agency has procedure for hard copy PII that includes: (1) Security of hard copy files ___Y___N Locked drawer/file cabinet ___Y___N Locked office ___Y___N (2) Procedure for client data generated from the Pinellas HMIS Printed screen shots_____Y_____N HMIS client reports__Y_____N Downloaded data into Excel_Y_____N Copy of above procedures is available ___Y___N Agency trains all staff on hard copy procedures___Y_____N	
PII Storage	Does the agency dispose of or remove identifiers from a client record after a specified period of time? (Minimum standard: 7 years after PII was last changed if record is not in current use.)	Agency has a procedure ___Y___N Describe procedure:	

Virus Protection	Do all computers have virus protection with automatic update? (This includes non-Pinellas HMIS computers if they are networked with Pinellas HMIS computers.)	Virus software and version _____ Auto-update turned on ___Y___N Date last updated:__/____/ _____ Person responsible for monitoring/updating:	
Firewall	Does the agency have a firewall on the network and/or workstation(s) to protect the Pinellas HMIS systems from outside intrusion?	Single computer agencies: ___Y___N Individual workstation Version: _____ Networked (multiple computer) agencies: ___Y___N Network firewall Version: _____	
Physical Access	Are all Pinellas HMIS workstations in secure locations or are they manned at all times if they are in publicly accessible locations? (This includes non-Pinellas HMIS computers if they are networked with Pinellas HMIS computers.)	All workstations are: In secure locations (locked offices) or manned at all times ___Y___N Using password protected screensavers ___Y___N All printers used to print hard copies from the Pinellas HMIS are: In secure locations__Y____N Data Access: Users may access Pinellas HMIS from outside the workplace ___Y___N If yes, Agency has a data access policy Y_____N	
Data Disposal	Does the agency have policies and procedures to dispose of hard copy PII or electronic media?	Agency shreds all hardcopy PII before disposal____Y_____N Before disposal, the Agency reformats/degausses (demagnetizes): Disks__Y___N CDs____Y___N CDs Computer hard-drives_____Y_____N Other media (tapes, jump drives, etc.) ___Y___N	

| Software Security | Do all Pinellas HMIS workstations have current operating system and internet browser security? (This includes non-Pinellas HMIS computers if networked with Pinellas HMIS computers.) | Operating System (OS) Version: _____ All OS updates are installed_ Y____N Most recent version of Internet browser(s) are installed____Y____N | |

We affirm and certify the above information is true and that this Member Agency,

_____, is in full compliance with all requirements listed as "CHO" (Contributing HMIS Organization) responsibilities in the U.S. Department of Housing and Urban Development Homeless Management Information System (HMIS) Data and Technical Standards Final Notice and with the Pinellas County HMIS Policies and Procedures or will comply within the timeframes stated above. This certification is incorporated into the Pinellas HMIS Participation Agreement. Any misrepresentation of the foregoing may result in termination of the Participation Agreement.

_____   _____
Pinellas HMIS Security Contact Signature   Date

_____   _____
Executing Officer Signature   Date

Privacy Plan

Each Pinellas HMIS MA must have a Privacy Statement that describes how and when the MA may use and disclose clients' Private Personal Information (PPI). PPI includes name, Social Security Number (SSN), date of birth, zip code, project entry and exit, unique personal identification number (HMIS number) and project identification number.

MA's may be required to collect some PPI by law or may be required to collect data as a funding requirement. PPI is also collected by MA's to monitor project operations, to better understand the needs of people experiencing homelessness, and to improve services for people experiencing homelessness. MA's are only permitted to collect PPI only with a client's written consent.

MA's may use and disclose client PPI to:

1. Verify eligibility for services,
2. Provide clients with and/or refer clients to services that meet their needs,
3. Manage and evaluate the performance of programs,
4. Report about program operations and outcomes to funders and/or apply for additional funding to support agency programs,
1. Collaborate with other local agencies to improve service coordination, reduce gaps in services, and develop community-wide strategic plans to address basic human needs, and
5. Participate in research projects to better understand the needs of people served.

MA's may also be required to disclose PPI for the following reasons:
1. When the law requires it;
2. When necessary to prevent or respond to a serious and imminent threat to health or safety; and
3. When a judge, law enforcement or administrative agency orders it, MA's are obligated to limit disclosures of PPI to the minimum necessary to accomplish the purpose of the disclosure.

Uses and disclosures of PPI not described above may only be made with a client's written consent. Clients have the right to revoke consent at any time by submitting a request in writing. Clients also have the right to request in writing:

1. A copy of all PPI collected,
2. An amendment to any PPI used to make decisions about your care and services (this request may be denied at the discretion of the agency, but the client's request should be noted in the project records),
3. An account of all disclosures of client PPI,
4. Restrictions on the type of information disclosed to outside partners, and
5. A current copy of the MA's privacy statement.

All individuals with access to PPI are required to complete formal training in privacy requirements at least annually. MA Privacy Statements may be amended at any time. Amendments may affect information obtained by the agency before the date of the change. An amendment to the Privacy Statement regarding use or disclosure will be effective with respect to information processed before the amendment, unless otherwise stated. A record of all amendments to this Privacy Statement must be made available to clients upon request. This document should, at a minimum, reflect the baseline requirements listed in the HMIS Data and Technical Standards Final Notice, published by HUD in July 2004 and revised in March 2010. In any instance where this Privacy Statement is not consistent with the HUD Standards, the HUD Standards take precedence. Should any inconsistencies be identified, please immediately notify the Pinellas HMIS Lead Agency.

Pinellas Homeless Management Information System (HMIS) Data Quality Plan

TABLE OF CONTENTS

PURPOSE

This document describes the Homeless Management Information System (Pinellas HMIS) Data Quality Plan for Pinellas County. Adapted by a Plan developed from the Texas Balance of State Continuum of Care (CoC); it includes assurances and controls to maintain high data quality that meet requirements set forth by the U.S. Department of Housing and Urban Development (HUD) and responsibilities shared with the Homeless Leadership Alliance of Pinellas (HLA).

This Plan is to be updated annually, using the latest HUD HMIS Data Standards and CoC performance objectives.

BACKGROUND

Pinellas HMIS is a locally administered, electronic data collection system that stores longitudinal client-level information about the people who access homeless and housing services in the community. Each Continuum of Care (CoC) receiving HUD funding is required to implement HMIS to capture standardized data about everyone accessing the Homeless Crisis Response System. Furthermore, elements of HUD's annual CoC funding competition are directly related to a CoC's progress in implementing its HMIS.

Each and every Pinellas HMIS end user contributes significantly to the CoC. One project or one Pinellas HMIS end user with poor data quality can negatively impact the entire system.

HMIS data reported to federal funders provides estimates of the current state of homelessness across the country, and how the use of homeless assistance programs is reported to Congress. HMIS is used locally to inform state and local communities on how their specific homeless projects are performing and how information compares nationally. This also helps local communities to better allocate resources, and position programs to end homelessness.

The CoC's Data and System Performance Committee will recognize, quarterly, the work of providers meeting a high level of data quality to ensure Pinellas HMIS data quality is understood and applied. The CoC will work with local funders to also use data quality metrics when making funding allocation decisions to projects. The CoC will encourage local funders to include data quality within funding contracts and agreements with providers. The CoC will work with the Pinellas HMIS team and providers who do not currently use Pinellas HMIS to encourage data entry into Pinellas HMIS.

The CoC will work with Pinellas HMIS to monitor data quality at the end-user, project, agency, and system level. Data quality enforcements will depend on where data quality issues lie and could include:

- Locking specific providers or end-users out of Pinellas HMIS until they receive remedial or additional training from Pinellas HMIS.
- Remove the ability of a given end-user to access and enter data into Pinellas HMIS if data quality becomes a consistent issue that is not acknowledged or addressed.

UNIVERSAL DATA ELEMENTS

The data entered into Pinellas HMIS tells a story about the population experiencing homelessness. To end homelessness, the scope of the issue must first be recognized. How big is the problem, where is it hitting the most, what kind of projects are required. These questions and many more get answered thanks to the information collected and entered into Pinellas HMIS.

As of the 2018 Fiscal Year, HUD discontinued the use of the Annual Homeless Assessment Report (AHAR) data submission from HMIS in favor of the new Longitudinal System Analysis (LSA) report. The LSA reflects a major change in how annual HMIS client, project, and system level data is submitted to HUD. The LSA greatly expands the scope of the data submission, updates measures and categories to match current HUD parameters, aligns the submission with other HUD reporting, and puts a greater emphasis on the quality of a system's data when determining the usability of a submission when compared to the previous AHAR submission. Data contained within a CoC's LSA submission is included in the Annual Homeless Assessment Report (AHAR) that is written by HUD and submitted to Congress on an annual basis and may be considered for a CoC's annual HUD renewal funding through the Notice of Funding Availability (NOFA) process.

Universal Data Elements (REQUIRED)

Universal Data Elements (UDEs) for projects participating in HMIS:

3.01 Name	3.10 Project Start Date
3.02 Social Security Number	3.11 Project Exit Date
3.03 Date of Birth	3.12 Destination
3.04 Race and Ethnicity	3.15 Relationship to Head of Household
3.06 Gender	3.16 Enrollment CoC
3.07 Veteran Status	3.20 Housing Move-in Date
3.08 Disabling Condition	

Unless otherwise determined, the HUD UDEs are the minimum required data elements that must be collected and entered into Pinellas HMIS by participating agencies. The various federal partners (Health and Human Services, Veterans Affairs, etc) provide detailed instructions to grant recipients and require the collection of certain Program Specific Data Elements (PSDEs) by funded projects, as established in the HUD Data Standards and the respective federal partner HMIS project manuals. Other funders (local, state, etc) may also require the collection of existing PSDEs or other custom data elements by funded projects for reporting, eligibility, and benchmark purposes.

PROGRAM SPECIFIC DATA ELEMENTS (PSDEs)

Unlike UDEs, the Program Specific Data Elements are specialized for each Federal/State/local funding partner and their programs. A partner may require all of the fields or response categories in a data element or may specify which of the fields or response categories are required for their report. The list below are examples of required PSDEs by Federal Partners (see Data Standards or individual Program Manuals):

4.02 Income and Sources	4.03 Non-Cash Benefits

4.04 Health Insurance
4.05 Physical Disability
4.06 Developmental Disability
4.07 Chronic Health Condition
4.08 HIV/AIDS
4.09 Mental Health Disorder
4.10 Substance Use Disorder

4.11 Domestic Violence
4.12 Current Living Situation
4.13 Date of Engagement
4.14 Bed-Night Date
4.19 Coordinated Entry Assessment
4.20 Coordinated Entry Event

DATA QUALITY PLAN

This Plan focuses on the reliability and validity of client-level data collected in the HMIS. It is measured by the extent to which the UDEs entered in the system reflects actual information in the real world. With good data quality, the CoC can tell an accurate story about the population experiencing homelessness.

The Plan defines conditions, assigns responsibilities, and establishes standard procedures to maintain and/or improve quality. As a result, a data quality plan can better position the CoC to achieve strategic objectives. This is a collaboration between projects, funding partners, HMIS, and the CoC. The plan specifies metrics for relevant and measurable attributes utilized to assess data quality: **timeliness, completeness, accuracy, and consistency**.

Timeliness

Timeliness is closely associated with relevance and prevents duplication of services. If the data entry is delayed, the data may no longer be relevant for the needs of end users. Timely data entry reduces human error (relying on handwritten notes or memory) and ensures better management, either proactively (monitoring, increasing awareness, meeting funder requirements), or reactively (requests for information, responding to inaccurate information).

While every effort should be made to complete all data entry in electronic records at the time of service there are occasional circumstances that prevent that goal. To comply with reasonable quality standards, HMIS establishes the following policy regarding client record data entry:

- All HMIS Member Agency client data should be entered no later than 72 hours after intake, assessment, or program or service entry or exit. In the event Pinellas HMIS end users are not able to enter data in real time, the project entry date needs to be the date the actual service begins and **not** the date of data entry.

The HMIS staff will assess timeliness monthly, the HLA's Data and System Performance Committee quarterly.

Completeness

Complete HMIS data is required to fully understand the demographic characteristics and service use of clients in the Homeless Crisis Response System. It is also crucial to assist clients in finding the right services, projects and/or benefits to end their homelessness experience as quickly as possible.

Complete data facilitates accurate reporting and analysis on the nature and extent of homelessness, such as:

- Unduplicated counts of clients served locally
- Patterns of use of people entering and exiting the Homeless Crisis Response System
- Estimation of the effectiveness of the CoC Homeless Crisis Response System

Projects are required to enter 100% of the clients served into HMIS after consent has been provided by the client*

Missing data negatively affects the ability to provide comprehensive care to clients. Eligibility determination, for instance, is directly tied to the data provided. Therefore, all participants agree, upon HMIS implementation, to adopt and enforce intake and assessment procedures that align with data collection requirements to prevent incomplete data.

While the CoC's goal is to collect 100% of all data elements, this may not be possible in all cases. While "client doesn't know" and "client refused" are eligible responses to individual client intake and assessment questions, the CoC defines acceptable rates for total "unknown" responses at the program level based on data element and project type considerations.

*Use of Verbal Consent
While a signed Pinellas HMIS Informed Consent and Release of Information form is preferred, agencies may be allowed to utilize verbal consent based on the nature of the project or if a state of emergency is declared. Refer to the Pinellas HMIS Policies and Procedures for more information.

HMIS will review completeness of data monthly, HLA's Data and System Performance Committee quarterly.

Accuracy
The data in HMIS needs to exhibit a fair representation of reality as it relates to homeless clients and the projects that serve them. Thus, all data entered into HMIS must be a reflection of information provided by the client, as documented by the data collector or otherwise updated verbally by the client and documented for reference.

Recording inaccurate information is strictly prohibited. Organizations need to make every effort to record accurate data by implementing appropriate policies and procedures. The best way to measure accuracy of client data is to **verify** the information with more accurate sources, such as a social security card, birth certificate, or driver's license.

False or inaccurate information is less useful than incomplete information. It should be emphasized to clients and staff that it is better to enter "Client Doesn't Know", "Client Prefers Not to Answer" or "Data Not Collected", than to enter inaccurate information.

HMIS reviews accuracy monthly through multiple system and project-level reports such as the System Performance Measures, Monthly Data Dashboards, and Benchmark Reports.

Consistency

Consistency refers to the standard and uniform practice for implementation, data collection and data entry across all programs in HMIS. Inconsistency hinders an agency's ability to satisfy requirements as they relate to timeliness, completeness and accuracy.

To ensure quality, all prospective projects will implement HMIS, e.g., intake and assessment forms, eligibility requirements; and comply with the recommendations of HMIS consistent with best practice.

The HLA may delay or cancel implementation if the agency does not consistently participate in the process. Upon implementation, all HMIS users shall complete training before they may access HMIS and are required to attend annual training.

Consistency will be regularly monitored by HMIS. HMIS staff reviews and merges duplicated client records on a weekly basis, this also includes duplicate entries/exits. To resolve duplication, projects may need to provide additional information to HMIS in order to properly identify clients with incomplete data and rule out any false positives.

When first identified, records are audited to determine cause of duplication. Duplicative client records are merged by HMIS and any duplicative entry/exits are also removed A technical assistance reminder of HMIS best practices will be sent out to the end user; however, if duplication persists, the end user in question must participate in additional training from HMIS and their Agency Administrator will be notified.

Bed Utilization

For shelters and housing projects, one of the primary features of HMIS is its ability to record the number of client stays or bed nights in a housing project. A housing project's bed utilization rate is the number of beds occupied as a percentage of the entire bed inventory. The client must be checked into a bed or unit in HMIS. The client remains in that bed or unit until they are transferred to another bed or unit, or exited from the project.

A project's bed utilization rate is a great indicator of data quality. A low utilization rate could reflect low occupancy, but it could also indicate that data is not being properly entered in HMIS for every client served. A high utilization rate could reflect that the program is over capacity, but it could also indicate that clients have not been properly discharged from the program in HMIS.

Housing Program Type	Target Utilization Rate (%)	Acceptable Rate (%)
Emergency Shelter	75%	65%
Transitional Housing	95%	85%
Permanent Supportive	95%	85%
Safe Haven	95%	85%

Zip Code Data Entry into Pinellas HMIS

The Pinellas Continuum of Care is dedicated to making data-driven decisions that use a racial equity framework. In response to the growing housing availability crisis, the CoC needs to track and report where affordable and safe housing is being secured to rehouse households coming into the Homeless Crisis Prevention and Response System. This data will allow the CoC to identify geographic housing gaps to demonstrate how potential funding restrictions may be causing barriers to housing.

Zip code is required for:

- Homeless Prevention and Diversion services enter Pinellas HMIS, zip code data for all project participants. Zip codes are to be added under "Client's Information/Last Permanent Address."
- Permanent Housing and Permanent Supportive Housing, including Rapid Re-Housing providers, are to enter zip code data into the "Zip Code" field next to the "Housing Move-in Date."

Emergency Shelters, Safe Havens, Street Outreach, and Transitional Housing projects are encouraged to collect zip code data under "Client's Information/Last Permanent Address." However, zip code data is not a required field to be completed these projects.

PROVIDER ACCOUNTABILITY

Agency Administrators are required to submit certification to Pinellas HMIS stating the Data Quality Reports were reviewed, and any identified errors were corrected by their agency end users by the 7th of each month. The Pinellas HMIS staff will then run and review the reports to ensure data quality, for all projects.

1. If an error rating rises above the target percentage for a project, HLA will create a Training Plan of Action for the HMIS end user(s).
2. If the error rating for the project remains above the acceptable target error percentage for three months, HLA may implement a Training Plan and/or Corrective Action Plan, which would be monitored by the Data System and Performance Committee. The course of action taken, whether training or corrective action, will be handled on a case-by-case basis.
3. If an Agency is found to be non-compliant with a Training Plan and/or Corrective Action Plan, or if there are repeated data quality errors, the agency could be jeopardizing their project(s) funding and/or the CoC's funding, therefore the Agency would be brought to the HMIS Governance Committee to determine continuation of HMIS access and licensing status.

HLA staff will communicate with project managers, as well as organizational executive staff, as to the status of a project's training plan and potential need for corrective action due to on-going data quality concerns. A training plan consists of, but may not be limited to, supporting end users and agency administrators with the training, knowledge, reporting, and support needed to collect, enter, and maintain accurate data in the Homeless Management Information System software. **Pinellas HMIS reserves the right to request any HMIS end user to be re-trained. Non-compliance with the training request will revoke all login credentials.**

Data Quality Reports—Report names TBD based on updates to the Reporting tools available

The report for timeliness measures the difference between the date stamp on the Program Entry or Service Date displayed in Pinellas HMIS to the actual system date stamp that is recorded hen an end-user created the Project Entry or Service in the system. Data quality for timeliness is used to monitor the CoC benchmark for Timeliness (see page 3). The report for data completeness provides a measure of how complete the local CoC Data Quality Benchmarks are based on project type. The Data Quality Benchmarks are found below.

The reports used for certification may be a combination of vendor-created and locally-created reports. The specific report names are subject to change based on updates to the Reporting tools available or based on local need. Changes will be communicated to Agencies at least thirty (30) days prior to the change going live and relevant report training will be provided to Agency Administrators.

CONTINUUM OF CARE (CoC) REPORTS

Below are reports the HLA staff and Data and System Performance Committee utilizes when reviewing system performance and data quality.

Local Reports	Report Frequency	Data Source
CoC System Dashboard	Monthly	HMIS
USICH Veteran Benchmarks	Monthly	HMIS
CoC Performance Dashboard	Quarterly	HMIS
CoC Project Benchmarks	Quarterly	HMIS
System Performance Measures (SPMs)	Annually	HMIS
Annual Performance Reports (APR)	Annually	HMIS
Longitudinal System Analysis (LSA)	Annually	Stella P
Housing Inventory Count (HIC)	Annually	HMIS
Point-in-Time Count	Annually	HMIS (Sheltered count) Street Surveys (Unsheltered Count)

COC DATA QUALITY BENCHMARKS
Approved by the Data and System Performance Committee September 21, 2023

All UDE's must be obtained from each adult and unaccompanied youth who apply for services through the homeless assistance system. Most UDEs are also required for children aged 17 years and under.							
The target for all Data Elements is 100%. The acceptable Null/Missing target is 0%.							
Universal Data Element	**Permanent Housing (includes Permanent Supportive Housing, Rapid Rehousing, and PH)**	**Transitional Housing**	**Supportive Services Only**	**Emergency Shelter (Includes Bridging Families)**	**Homeless Prevention**	**Coordinated Entry**	**Street Outreach**
	Unacceptable "Client Doesn't Know", Client Prefers not to Answer"						
Name	0%	0%	0%	0%	0%	0%	10%
Social Security Number	5%	5%	5%	10%	5%	5%	50%
Date of Birth	1%	1%	1%	2%	1%	1%	10%
Race	1%	1%	1%	5%	1%	1%	10%
Gender	1%	1%	1%	1%	1%	1%	10%
Veteran Status	1%	1%	1%	1%	1%	1%	10%
Disabling Condition	1%	1%	1%	1%	1%	1%	10%
Exit Destination	2%	2%	2%	30%	2%	30%	30%
Relationship to Head of Household	0%	0%	0%	0%	0%	0%	0%
Client Location (Enrollment CoC)	0%	0%	0%	0%	0%	0%	0%
Housing Move-in Date	0%						
Prior Living Situation	0%	0%	0%	0%	0%	0%	0%
Length of Stay in Previous Place	0%	0%	0%	5%	0%	0%	10%
Approximate Date Homelessness Started	0%	0%	0%	5%	0%	0%	10%
Number of Times Homeless	0%	0%	0%	5%	0%	0%	10%
Number of Months Homeless	0%	0%	0%	5%	0%	0%	10%

Pinellas County Continuum of Care Data Quality Roles and Responsibilities

The different roles associated with HMIS data collection, operations, policy and procedure development, and DQ monitoring and reporting can all play a meaningful part upholding a CoC's Data Quality Management Program.

Data Collection and Entry

Role	Responsibility
Collect HUD assessment data from clients	Agency Projects
Enter HUD entry assessment data in HMIS	Agency Projects
Update HMIS to reflect change in income, benefits, etc.	Agency Projects
Collect HUD exit assessment data from clients (including exit destination)	Agency Projects
Enter HUD exit assessment data in HMIS	Agency Projects
Dismiss clients from programs in HMIS	Agency Projects
Make or change a bed/unit reservation for a client	Agency Projects
Notify HMIS to merge identified duplicate clients across the HMIS	Agency Projects
Secure paper forms according to privacy and confidentiality standards	Agency Projects
Maintain workstation security	Agency Projects

HMIS Operations

Role	Responsibility
Develop and deliver training for new end users	HMIS Lead Agency
Provide annual refresher training to end users	HMIS Lead Agency
Develop and deliver training for medium to advanced-level users	HMIS Lead Agency
Maintain documentation of completed training requirements	HMIS Lead Agency
Authorize/provide HMIS access or licenses to new end users	HMIS Lead Agency
Remove HMIS access or licenses due to violation or end of employment at the HMIS-participating agency	HMIS Lead Agency
Review HMIS data standards updates for correctness and completeness	HMIS Lead Agency
Manage project set up tasks	HMIS Lead Agency
Provide troubleshooting/technical assistance via service help desk activities	HMIS Lead Agency
Solicit feedback from HMIS stakeholders on HMIS policies and operations	HMIS Lead Agency
Provide communications about upcoming agency-specific HMIS changes	HMIS Lead Agency
Provide communications about CoC-wide or HUD-mandated HMIS changes	HMIS Lead Agency

Document workflow needs by program	HMIS Lead Agency
Implement program-level workflow, features, and functionality	HMIS Lead Agency
Monitor the HMIS vendor against the terms and conditions of the contract	HMIS Lead Agency
Update and revise the HMIS vendor contract	HMIS Lead Agency
Review HMIS software functionality updates for correctness and accuracy	HMIS Lead Agency
Test new features and functionality	HMIS Lead Agency

Policies and Procedures

Role	Responsibility
Develop data quality plans, policies, and procedures, including DQ benchmarks for timeliness, completeness, accuracy, and consistency	HMIS Lead Agency, CoC Lead Agency, and DSP Committee
Approve data quality plans, policies, and procedures, including DQ benchmarks for timeliness, completeness, accuracy, and consistency	HMIS Governance
Review data quality plans, policies, and procedures for appropriateness in relation to CoC's needs	DSP Committee
Implement DQ plans, policies, and procedures	CoC Board of Directors
Conduct monitoring and oversight of end users to ensure HMIS activities are implemented with fidelity to approved plans, policies, and procedures	HMIS and CoC Lead Agency(s)
Develop program- and user-level forms and documents (such as HMIS end user agreement or client releases of information)	HMIS Lead Agency
Define roles and responsibilities of HMIS end users	HUD
Define roles and responsibilities of the HMIS decision-making entity across the CoC (e.g., executive board, designated committee, or work group)	HMIS Governance
Define roles and responsibilities of HMIS Lead	HUD
Review and approve HMIS data requests for external research/evaluation projects	DSP Committee
Provide HMIS data to external researchers/evaluators	HMIS Lead Agency
Participate in the HMIS Work Group (Would also include training needs)	DSP Committee

Monitoring and Reporting

Role	Responsibility
Monitors data quality for completeness (client and program)	HMIS and CoC Lead Agency(s)
Monitor data quality for timeliness	HMIS and CoC Lead Agency(s)
Monitor data quality for accuracy	HMIS and CoC Lead Agency(s)
Monitor data quality for consistency	HMIS and CoC Lead Agency(s)
Analyze project-level and system-level trends in DQ performance	HMIS and CoC Lead Agency(s)
Running data quality/validation reports	HMIS Lead Agency and Provider Agency Administrators
Correct low quality data across the HMIS implementation	Provider Agency Administrators and HMIS Lead Agency
Correct low quality data at the program level	Provider Agency Administrators and HMIS Lead Agency
Communicate low data quality performance to appropriate stakeholders (e.g., discussing improvement strategies with agencies or elevating issues up to DQ enforcement entity/CoC when necessary)	HMIS and CoC Lead Agency(s)
Communicate high data quality performance to appropriate stakeholders (e.g., public recognition)	HMIS and CoC Lead Agency(s)
Evaluate current DQ monitoring processes and identify new protocols for continuous improvement	HMIS and CoC Lead Agency(s)
Evaluate current DQ incentives and enforcements and identify new resources for continuous improvement	HMIS and CoC Lead Agency(s)
Review HUD reports prior to submission	HMIS and CoC Lead Agency(s)
Submit HUD reports in Sage or HDX	HMIS and CoC Lead Agency(s)
Manage program-level reporting requirements by service and/or funder	CoC Lead Agency
Conduct Point in Time Count reports as required by the CoC	HMIS and CoC Lead Agency(s)
Provide Housing Inventory reports to the CoC	HMIS and CoC Lead Agency(s)
Develop and review data dashboards/visualizations, if applicable	HMIS and CoC Lead Agency(s)

1. Version One   10/02/2019
2. Version Two   1   2/12/2019
3. Reviewed   03/2021
4. Updated   02/18/2022
5. Annual Review   02/07/2023
6. Updated Benchmarks 02/08/2024

Proposed Coordinated Entry Mobility Transfer Policy

Summary / Highlights of Updated Coordinated Entry (CE) Mobility Transfer Policy:

The CE Mobility Transfer Policy has undergone significant updates to enhance clarity, efficiency, and equity in the transfer process. Here are the key highlights of the updated changes:

1**. Specific Rationale for Application:** The rationale for CE mobility transfer has been refined to provide specific guidance on when the transfer should apply. This includes transfers between different housing program models such as Rapid Re-Housing (RRH) to Permanent Supportive Housing (PSH), PSH to RRH, etc., as well as transfers within the same family shelter program.

2. **Updated Procedure for Service Need Changes:** The procedure for handling Mobility Request (MR) due to a change in service need has been revised. This ensures a streamlined process for addressing participants' evolving needs and circumstances.

3. **Introduction of Internal Transfer Only Policy:** A new Internal Transfer Only policy has been introduced for participants enrolled in a housing program or family shelter program who wish to transfer projects within the same agency and program model type. This facilitates smoother transitions and continuity of care for participants within the same agency.

4. **Creation of Internal Transfer Notification Wufoo Form:** To facilitate internal transfers, an Internal Transfer Notification Wufoo Form has been developed. This form streamlines the notification process, data quality with respect to proper enrollments, and ensures that the Sr. Manager of CE and HMIS System Administration are informed promptly.

5. **Update on Mediation Case Conference Meetings for MR: Tier** Three Mediation Case Conference Meetings are now required for specific scenarios involving Mobility Request. This ensures that complex cases receive thorough review with the appropriate players/providers.

6. **Enhanced Questions on MR Form:** The Mobility Request (MR) Form has been updated to include detailed questions about the history and background information on the household for which the MR is being requested. This additional information improves the assessment process and helps in making informed decisions regarding mobility transfers.

These updates aim to improve the effectiveness of the CE Mobility Transfer Policy, promote transparency and accountability amongst the CoC and CES, and ensure that participants receive the necessary support and services tailored to their needs.

Coordinated Entry Mobility Transfer

Coordinated Entry (CE) promotes housing stability for households and recognizes that circumstances may require a change in a current shelter or housing placement. This Transfer Policy applies to the following types of transfer through the Coordinated Access System:

- Rapid Rehousing to Rapid Rehousing
- Rapid Rehousing to Permanent Supportive Housing
- Permanent Supportive Housing to Permanent Supportive Housing
- Permanent Supportive Housing to Rapid Rehousing
- Family Shelter to Family Shelter

POLICY

Households eligible for a Mobility Transfer are prioritized for referral to another housing or shelter placement. The Mobility Policy should be used to transfer household(s) to a different program when it is in the best interest of the household(s). To be eligible, households must have a completed CE assessment entered in Pinellas HMIS with a score of more than 3 OR a documented Full SPDAT assessment(s) exhibiting a higher-level need for care. Households are potentially eligible for Mobility Transfer regardless of how they were referred to their current placement: **eligibility is not limited to those who were referred via Coordinated Entry Prioritization**. Current and former residents of housing programs that accept referrals from CE are eligible for mobility transfer. Household(s) may be eligible for a transfer if they experience any of the following:

- **IMMINENT SAFETY ISSUE** – An imminent safety issue that cannot be resolved through safety planning within the current placement. A household should contact 911 if they feel they are unsafe. CE will not approve a mobility request for safety if there is a severe safety risk that could endanger those in the new program. Safety issues related to domestic violence should be referred to domestic violence resources.
- **GEOGRAPHIC CHANGE** – Travel burden that results from a household's resource location (employment, education, childcare) such that it leads to housing instability.
- **CHANGE IN SERVICE NEED**– As demonstrated by a change in Full SPDAT score and vulnerabilities that were not present during the CE assessment (VI(F)SPDAT). A change in service request (increase) will be referred for Tier Three Mediation Case Conferencing before approval of the mobility request.

- **EXITING PROGRAM DUE TO AGE LIMITS WITHOUT A SAFE PLACE TO GO** – Aging out of a CE participating program OR aging out of a youth shelter program without a safe housing option available.
- **Change in Family Size** - A change in the number of household members that impacts the eligibility of current housing placement.

Procedures: *The following process must be followed for all mobility transfers*

1. The housing or shelter provider must send the completed Mobility Request (MR) form via Wufoo, documenting the reason for Mobility Transfer in full detail. The MR will be reviewed by the Senior Manager of Coordinated Entry. The household also needs to have a completed CE assessment entered Pinellas HMIS OR a documented Full SPDAT assessment(s) exhibiting a higher-level need for care. If the household is assessed and scores 0-3, the mobility request will not be approved. Mobility Requests must indicate steps taken by the housing provider staff to support the household and seek options that would keep the household housed, sheltered, and/or enrolled within their program, if possible. In addition, information about the proposed new housing or shelter placement, that would mitigate or eliminate a reemergence of the previous and/or current instability, or if ineligible exit them to a safe place.

   The CE Mobility Request form can be found at:
   https://hlapinellas.wufoo.com/forms/pinellas-coordinated-entry- mobility-request/

   a. **Internal Transfers Only:** Housing or Family Shelter providers have the autonomy to make internal transfers between projects at the **same agency within the same program model type**, as well as between Safe Haven and PSH models at the same agency. A CES approval is not required.
   Please note that an internal transfer from one program model type to another (e.g., RRH to PSH) requires CES approval
      i. To ensure such transfers are documented through CES, housing or shelter providers must complete the Internal Transfer Notification Form within 2 business days after determining that an internal transfer will occur. This form will include the date of transfer if known.
      ii. The form can be found at:
          https://hlapinellas.wufoo.com/forms/z90afxr0vjcr1v/
      iii. CE Staff will acknowledge receipt of the internal transfer notification form and will complete a CES referral in HMIS within 2 business days. *Providers do not need to wait for this referral* to be entered in HMIS by CE staff to transfer a household.
2. Family Shelter Mobility Transfer- CE staff will facilitate conversations with the household and family shelter provider to understand both perspectives of the mobility request and ensure the household wants to transfer shelter programs. This follow-up will be completed within:
   a. One business day when there is a safety concern.

        b.   Three business days when there is not a safety concern.

3.   Rapid Rehousing Mobility Transfer (increase in service)- CE staff will initiate a Tier Three Mediation Case Conference Meeting, with emphasis on the Mobility Request (example: RRH to PSH program transfer)

        a.   One business day when there is a safety concern.

        b.   Three business days when there is not a safety concern.

        c.   Meeting attendees should include the housing provider (required), Emergency Shelter staff (if applicable), Community and Veteran Navigators (if applicable), participant advocates, and CoC-funded PSH staff (required).

        d.   A copy of the Mobility Transfer Request Wufoo Form will be emailed to meeting attendees.

        e.   The current RRH provider must continue to support the household through the MR process until the household is successfully (re)housed in a PSH program.

4.   Permanent Supportive Housing Mobility Transfer (PSH to PSH)- CE staff will initiate a Tier Three Mediation Case Conference Meeting, with emphasis on the Mobility Request

        a.   One business day when there is a safety concern.

        b.   Three business days when there is not a safety concern.

        c.   Meeting attendees should include the housing provider (required), Emergency Shelter staff (if applicable), Community and Veteran Navigators (if applicable), participant advocates, and all CoC-funded PSH staff (required).

        d.   A copy of the Mobility Transfer Request Wufoo Form will be emailed to meeting attendees.

        e.   The current RRH provider must continue to support the household through the MR process until the household is successfully (re)housed in another PSH program.

5.   Family Shelter- *If* a Mobility Request is approved, the provider who submitted the MR is responsible for declining the shelter referral in HMIS with the appropriate referral outcome/reason.

        a.   Households approved for safety reasons will be prioritized over non-safety reasons.

                i.   ***If the Family Shelter Provider has capacity within their agency, immediate enrollment is permissible (see Internal Transfer Rule)***

        b.   The eligible household will be referred to an appropriate shelter as soon as possible.

        c.   CE staff will update necessary information in Pinellas HMIS.

6.   RRH or PSH- *If* a Mobility Request is approved, the provider who submitted the MR is responsible for declining the RRH/PSH referral in HMIS with the appropriate referral outcome/ reason, so the household can be returned to the Prioritization List (reactivated in the Priority Pool).

        a.   The eligible household will be referred to an appropriate program as soon as possible.

        b.   CE staff will update necessary information in Pinellas HMIS.

        c.   Household (s) who have been approved for mobility for safety reasons will be prioritized over non-safety reason mobility requests, followed by households in danger of losing their housing.

7.   CE staff will update the necessary information in Pinellas HMIS regarding all mobility

requests, if approved. If the approval for mobility transfer is to another shelter and/or housing provider, the eligible household will be reactivated in the Priority Pool and will be prioritized for the next referral.

8. If the household has been approved but there is currently no housing program/shelter available, the housing provider/shelter will continue supporting the household, develop a plan, and refer household(s) to needed services as necessary.

9. If denied mobility transfer through CE, the housing situation and housing plan will be determined between the housing provider and the household(s).

<p align="center">**Pinellas Continuum of Care**</p>

CE Mobility Request

<p align="center"><mark>**The request will NOT be considered unless the form is ENTIRELY complete.**</mark></p>

<p align="center">**Mobility Requests are not automatically approved, and approval is not a guarantee of placement within a certain timeframe.**</p>

Today's Date: _____

Name of staff completing form:	Staff contact information:

HOH Name:	HMIS ID:	HOH Date of Birth:	Household size:

For families: please describe the household's current custody of minors:

Current Program Enrollment:	If housed through RRH or PSH, date of move-in:

Household able to document chronic homelessness?	Household able to document disability? Need an ADA unit?:

Categories:

Imminent Safety Risk: An imminent safety issue that cannot be resolved through safety planning within the current placement. A household should contact 911 if they feel they are unsafe. CE will not approve a mobility request for safety if there is a severe safety risk that could endanger those in the new program. Safety issues related to domestic violence should be referred to domestic violence resources. OR when a household is at risk of violence and needs to be moved to a different location. Mobility Requests under this category will be prioritized. Note that disagreements between neighbors are expected to be mediated first.

Geographic Change: Travel burden that results from a household's resource location (employment, education, childcare) such that it leads to housing instability.

Change in Service Need: As demonstrated by a change in SPDAT score and vulnerabilities that were not present during the CE Assessment. When a program and a household agree that a household needs either a decrease or increase in services related to circumstances that have changed since enrollment in the original program. Examples could include a medical event or permanent disability, or a need for more intensive on-site case management support.

Exiting Program Due to Age Limits Without a Safe Place to Go: Aging out of a CE participating program OR aging out of a youth shelter program without a safe housing option available. This also applies to youths (under 18) who are aging out of shelter or other homeless services and will be experiencing homelessness upon program exit.

Change in Family Size/Household Type: When a household is anticipating a change in family size resulting in the household being over or under-occupancy for their unit. This also applies if a household is moving from one population to another, which impacts the eligibility of current housing placement (i.e. from being a single adult household to a family household with minors.)

Please identify the reason(s) for the Mobility Request:

Select all that apply

Imminent Safety Risk ☐   Exiting Program Due to Age Limits Without a Safe Place to Go ☐

Geographic Change ☐   Change in Family Size or Household Composition ☐

Change in Service Need ☐

Please complete each section that applies to the reason selected and provide a detailed narrative. *The narrative should explain why the request is being submitted and include any interventions attempted to prevent relocation.*

Imminent Safety Risk
An imminent safety issue that cannot be resolved through safety planning within the current placement. A household should contact 911 if they feel they are unsafe. CE will not approve a mobility request for safety if there is a severe safety risk that could endanger those in the new program. Safety Issues related to domestic violence should be referred to domestic violence resources.

---

1. Is a program transfer required to assure the safety of the resident? Yes ☐ No ☐
2. Were safety concerns present at intake? Yes ☐ No ☐
    a. Were safety concerns discussed with the household at the time of intake? Yes ☐ No ☐

    Please explain:

3. Please list any unsafe areas for the household:
4. If a transfer is achieved, are there ways to avoid a similar concern in the future? Yes ☐ No ☐

    Please explain:

5. Does the resident require a confidential housing resource? Yes ☐ No ☐
6. Is the resident able to remain in the current program until another resource is identified? Yes ☐ No ☐
    a. If not, what other housing options have been identified until a different housing program/shelter is available through coordinated entry?

Narrative:

Geographic Change (safety not an issue)
Travel burden that results from a household's resource location (employment, education, childcare) such that it leads to housing instability.

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1. Location or region requested:
2. Reason for requested change:
3. Is this change a temporary or long-term solution? Please explain:

Narrative:

Exiting Program Due to Age Limits Without a Safe Place to Go
Aging out of a CE participating program OR aging out of a youth shelter program without a safe housing option available. This also applies to youth (under 18) who are aging out of shelter or other homeless services and will be experiencing homelessness upon program exit.

1. Will the resident age out of the program within the next two months? Yes ☐ No ☐
    a. If yes, what is the date the resident must exit your program?
2. What other housing options have the young adult and provider reviewed or pursued?
3. If this is a transitional housing resource, has an extension been pursued with the funder?

Narrative:

Change in Service Need

1. Have the resident and housing/shelter provider discussed the change requested?
   Yes ☐ No ☐
2. Does the resident need an increased or decreased level of support?
   Increased ☐ Decreased ☐
   a. If Increase, please list all agencies/services involved with the household, their contact information, and their role in relation to the household:
   _____
3. Why is the current level of support not meeting the residents' needs?
4. Was the resident's level of service accurately captured during the initial housing assessment?
   Yes ☐ No ☐
   a. If not, what was inaccurate or omitted?
5. What interventions have been attempted or considered to maintain current program placement/ housing stability?
6. Did a specific incident initiate this request?
   Yes ☐ No ☐
   If yes, please explain:

Narrative:

Change in family size or household type

1. Is the resident pregnant? If yes, what is their due date?
   Yes ☐ No ☐   Due Date _____
2. Is the resident reuniting with their child(ren)?
   Yes ☐ No ☐
   a. Number of adults in the household:
   b. Number of children in the household:

Narrative:

HISTORY & BACKGROUND

1. Legal involvement:

        a.   In the past 3-5 years? Yes ☐ No ☐
        b.   In the past 1-2 years? Yes ☐ No ☐
        c.   In the past 6 months? Yes ☐ No ☐
              i.   Current? Yes ☐ No ☐

Narrative in detail (i.e.: who, type of involvement, when etc.):

2. DCF or Child Dependency Involvement:
        a.   Current? Yes ☐ No ☐
              i.   If no, approximate year and jurisdiction involved: _____

Narrative in detail:
3. Past evictions? Yes ☐ No ☐
        a.   Evicted by a HUD-based property? Yes ☐ No ☐
4. Are Any household members part of the lifetime sex offender registry? Yes ☐ No ☐

Please provide a summary of all pertinent information that may be needed to best understand this household's case:

If you are a PSH OR RRH Housing Provider, all Full SPDAT Assessments that have been completed with the household must be uploaded to this Wufoo form.

Mobility Request Review Decision Rubric

Category	Factors Present for Approval	
Imminent Safety Risk	• Household is experiencing *targeted* (specific to that person/household) violence and/or threats of violence AND the household's place of residence is known to the perpetrator. • The threat or possibility of self-harm, or chaotic substance use leading to a pattern overdose. • The housing/shelter provider has attempted to resolve safety concerns through safety planning, follow-up with other residents if applicable, and internal transfer if possible. *Disputes between neighbors that do not involve targeted violence or threats of violence do not rise to the level of a Mobility Request even though a resident may be fearful because of those interactions. The risk of losing housing does not rise to the level of imminent safety risk.*	
Change in Service (Increase)	• Outlined mental/behavioral health challenges, SUD challenges, medical events, or permanent disability. AND • Outlines more appropriate service matching and services offered that would better support the household. AND • The household has expressed a desire to transfer to a resource with more supportive services. AND • *Having a hard time in housing due to mental health/substance use/behavioral health but an absence of any sort of engagement or support from the provider does not rise to the level of a Mobility Request. Lease violations or not complying with the lease do not rise to the level of a Mobility Request.*	
Change in Service (Decrease)	• Outlines more appropriate service matching and services offered that would better support the household. AND • Household has expressed a desire to transfer to a resource with fewer supportive services.	
Change in Family Size/Household Type	• Household is either over maximum or under minimum occupancy per funder guidelines for their current placement. OR • Household is no longer the household type that their placement permits due to pregnancy or change in custody of minor(s). AND • The housing provider has taken steps to seek an internal transfer if possible.	

Geographical Change	• The household's eligibility for their current placement requires a physical move to another location due to employment, schooling, medical care, proximity to the caregiver, or proximity to family custody. *Change of preference on where to live, or the general "unsafe" feeling in a neighborhood does not rise to the level of a Mobility Request.*
Aging Out	• YA (18-24 years old) is within 30 days of aging out of a CE participating program. OR • Youth (17 years old) is housed in a youth shelter and will age out without a safe housing option available.

CoC Board of Directors Packet

Overview: The Pinellas Continuum of Care (CoC) coordinates the implementation of a housing and service system that meets the needs of all persons experiencing homelessness throughout its geography. The Homeless Prevention and Crisis Response System includes:

- Outreach, engagement, and assessment;
- Homelessness prevention and diversion strategies; and
- Shelter, permanent housing, and supportive services.

CoC Membership and Meeting Policies:

- Members must either serve or live in Pinellas County, Florida
- Membership follows the calendar year, running January 1st through December 31st
- CoC meetings follow Robert's Rules of Order
- Quorum for CoC meetings is 51% of voting members
- Members must attend a minimum of 50% of Membership meetings
- Members of the CoC Board of Directors may not miss more than 2 Board of Directors meetings
- CoC Membership Brochure
- CoC Meeting Calendar

Charters and MOU:

- CoC and HLA MOU
- CoC Charter
- Funders' Council Charter
- Providers' Council Charter
- Data and System Performance Committee Policies and Procedures
- Diversity, Equity, and Inclusion Policies and Procedures
- HMIS Governance Charter
- Lived Experience Advisory Committee (LEAC) Charter

CoC Membership Types: (scholarships are available for those who qualify)

- Affiliate: Anyone working or living in Pinellas; $0 annual dues; are not eligible to vote
- Youth Advocate: Anyone working or living in Pinellas who is 24 or younger; $0 annual dues; are eligible to vote
- Community Advocate: Anyone living, working, or going to school in Pinellas; $20 annual dues; scholarships are available; eligible to vote
- Lived Experience: Anyone who has experienced homelessness within the last 7 years and is living, working, or going to school in Pinellas; $20 annual dues; sliding fee scales are available; eligible to vote
- Faith-Based Partner: Faith-based organizations serving Pinellas; $150 annual dues; sliding fee scales are available; eligible to vote
- Nonprofit / Government Partner: Nonprofit and government agencies serving Pinellas County; $300 sliding fee scales are available; eligible to vote
- Business Partner: For-profit businesses serving Pinellas County; $500 sliding fee scales are available; eligible to vote

2024 CoC Membership Meeting Schedule:

- **Membership Meetings:** 9am–11am on Friday, Jan 12 & 5:30pm–7:30pm on Tuesdays, Apr 9, Aug 13, & Nov 12 **Locations:** Vary
- **Information Sessions:** 5:30pm–7pm on Tuesdays, Feb 13, Mar 26, May 14, Jun 11, Jul 9, Sep 10, Oct 8, & Dec 10
  Location: Virtual

2024 CoC Board, Council, and Committee Schedule:

- **Board of Directors:** Elected and appointed leaders who make policy decisions on behalf of the CoC — evaluating needs, implementing strategic responses, and measuring results.
  Future Meeting Schedule: 9am–11am on Fridays, Jul 12, Sep 6, & Nov 1
  Meeting Location: Habitat for Humanity – 13355 49th St. N., Clearwater
  Inquiries: Daisy Corea, MPA, HLA CEO, DCorea@HLAPinellas.org

- **Funders' Council:** Advises CoC Board on funding of homeless and at-risk programs and services, coordinating local and community-wide planning.
  Future Meeting Schedule: 1:30pm–3:30pm on Fridays, Jun 21, Aug 16, Oct 18, & Dec 13
  (1 will be an independent meeting held from 9am-11am)
  Meeting Location: Habitat for Humanity – 13355 49th St. N., Clearwater; Feb. 23rd is virtual
  Inquiries: Lara Wojahn, LWojahn@HLAPinellas.org

- **Providers' Council:** Advises CoC Board on funding of homeless and at-risk services system issues, concerns, and needed actions.
  Future Meeting Schedule: 1:30pm–3:30pm on Fridays, Jun 21, Aug 16, Oct 18, & Dec 13
  Meeting Location: Habitat for Humanity – 13355 49th St. N., Clearwater
  Inquiries: Victoria Kelly, VKelly@HLAPinellas.org

- **Advocacy Committee**: Advocates on behalf of the CoC, develops an annual advocacy agenda, and addresses advocacy issues as they arise.
  Future Meeting Schedule: TBD
  Inquiries: Victoria Kelly, VKelly@HLAPinellas.org

- **Data and System Performance (DSP) Committee:** Coordinates HMIS data, reviews system performance measures and data, informs best practices, and recommends funding priorities.
  Future Meeting Schedule: 9am–11am on Thursdays, May 16, Jun 20, Jul 18, Aug 15, Sep 19, Oct 17, Nov 21, & Dec 19
  Meeting Location: Allendale United Methodist Church – 3803 Haines Rd. N, St. Petersburg
  Inquiries: Lara Wojahn, LWojahn@HLAPinellas.org

- **Diversity, Equity, and Inclusion (DEI) Committee:** Provides insight into and develops strategies for promoting diversity, equity, and inclusion in the CoC.
  Future Meeting Schedule: 9am–11am on Tuesdays, May 21, Jun 18, Jul 16, Aug 20, Sep 17, Oct 15, Nov 19, & Dec 17
  Meeting Location: Allendale United Methodist Church – 3803 Haines Rd. N, St. Petersburg
  Inquiries: TV Le, TVLe@HLAPinellas.org

- **Lived Experience Advisory Committee (LEAC):** Advises CoC Board on homeless / at-risk services, concerns, and actions. Members include individuals who have experienced homelessness in Pinellas.
  Future Meeting Schedule: 5:30pm–7pm on Thursdays May 9, Jun 13, Jul 11, Aug 8, Sep 12, Nov 14, & Dec 12
  Meeting Location: Barabara S. Ponce Public Library – 7770 52nd St. N., Pinellas Park
  Inquiries: Victoria Kelly, VKelly@HLAPinellas.org

- **Point in Time (PIT) Planning Committee:** Plans annual Point in Time Count (PIT), designing surveys, coordinating volunteers, maintaining data quality, and evaluating programs.
  Future Meeting Schedule: 10am–11:30am on Tuesdays, Jul 9, Aug 6, Sep 3, Oct 1, Nov 5, & Dec 3
  Meeting Location: Allendale United Methodist Church – 3803 Haines Rd. N, St. Petersburg
  Inquiries: Victoria Kelly, VKelly@HLAPinellas.org

- **Youth Action Board (YAB):** Advises CoC Board on services for homeless / at-risk youths. Members include individuals under age 25 who have experienced homelessness in Pinellas.
  Future Meeting Schedule: TBD
  Inquiries: Victoria Kelly, VKelly@HLAPinellas.org

FL-502 – St. Petersburg, Clearwater, Largo/Pinellas County CoC Governance Charter

Table of Contents

Continuum of Care Background

The [Homeless Emergency Assistance and Rapid Transition to Housing Act of 2009](#) (HEARTH Act) amended the McKinney-Vento Homeless Assistance Act. The HEARTH Act amendments to the McKinney-Vento Homeless Assistance Act codified in law the role and functions of the Continuum of Care (CoC); thus each community must establish a CoC in compliance with the new CoC Program interim rule. HUD published the [Continuum of Care Program interim rule](#) (24 CFR Part 578) in the *Federal Register* on July 31, 2012. The rule now governs the CoC Program.

Overview

The FL-502 – St. Petersburg, Clearwater, Largo/Pinellas County Continuum of Care (herein referred to as the Pinellas Continuum of Care) coordinates the implementation of a housing and service system that meets the needs of all persons experiencing homelessness throughout its geography. The Homeless Prevention and Crisis Response System includes:

- Outreach, engagement, and assessment;
- Homelessness prevention and diversion strategies; and
- Shelter, permanent housing, and supportive services.

This Governance Charter outlines the roles and responsibilities of the Pinellas Continuum of Care, the Pinellas Continuum of Care Board, Continuum of Care Committees, the Continuum of Care Lead Agency, the Collaborative Applicant, and the Homeless Management Information System (HMIS) Lead Agency. Below is a brief description of each entity:

- The **Pinellas Continuum of Care General Membership** is a year-round planning body of representative stakeholders in the community's work toward ending homelessness. The CoC General Membership votes annually on CoC Board seats and at least once every 5 years on this CoC Charter, including a written process for selecting the Board in order to act on behalf of the CoC.
- The **Continuum of Care Board** is a group of elected and appointed leaders of the Continuum of Care who have authority to make policy decisions on behalf of the Continuum of Care. Their work includes gathering and analyzing information in order to determine the local needs of people experiencing homelessness, implementing strategic responses, and measuring results.
- The **Continuum of Care Committees** are the action planning components of the Continuum. Committees review and vet strategies developed by staff, analyze system issues and set priorities in conjunction with the Continuum of Care Board of Directors as well as using input from Provider and people with lived experience input.
- The **Continuum of Care Lead Agency** provides technical, administrative and meeting support to the Continuum of Care, Continuum of Care Board and the Committees.
- The **Collaborative Applicant** is designated by the Continuum of Care to prepare and submit

the Continuum of Care funding application to HUD each year.

- The **HMIS Lead Agency** is designated to provide oversight and implementation support to the Pinellas Continuum of Care's HMIS.

Additional roles and responsibilities for each of these entities can be found in Table 1.

This Governance Charter was developed by the members of the Pinellas Continuum of Care (CoC) in consultation with the CoC Lead Agency, the Collaborative Applicant, and the HMIS Lead Agency. The Pinellas Continuum of Care's primary responsibilities include but are not limited to the responsibilities outlined in 24 CFR Part 578.7 and 578.8 :

- Operate the CoC by holding meetings of the full membership at least semi-annually with published agendas;
- Make an invitation for new members at least annually;
- Adopt and follow a written process to select a board to act on behalf of the CoC. This process must be reviewed, updated, and approved every 5 years;
- Appoint committees and workgroups;
- Develop, follow and update annually a governance charter and with HMIS requirements as prescribed by HUD;
- Consult with recipients and subrecipients of funds to establish performance targets, monitor recipients and subrecipients performance, evaluate outcomes, and take corrective action with poor performers;
- Evaluate outcomes of projects funded under Emergency Solutions Grants (ESG) and report to HUD;
- Establish and operate a centralized or coordinated assessment system that provides an initial comprehensive assessment of the needs of individuals and families for housing and services;
- Establish and follow written standards for providing CoC assistance;
- Designate and operate the HMIS; review and approve a privacy plan, security plan, and data quality plan for the HMIS;
- Ensure consistent participation in HMIS by recipients and subrecipients of funds in compliance with requirements prescribed by HUD;
- Coordinate the implementation of a housing and supportive services system that meets the needs of homeless families and individuals;
- Plan for and conducts at least biennially a point in time count;
- Conduct an annual gaps analysis of homeless needs and services;
- Provide information to complete Consolidated Plans within the geographic area;
- Consult with State and local government to allocate ESG grants and reports on and evaluate the performance of ESG recipients and subrecipients.
- Design, operate, and follow a collaborative process for the development of applications and approve the submission of applications in response to a NOFA published by HUD and establish priorities for funding projects in the geographic area

I. Establishing the Pinellas Continuum of Care

Representatives from relevant organizations within a geographic area shall establish a Continuum of Care for the geographic area to carry out the duties outlined in this Governance Charter. The Pinellas Continuum of Care is a community group of stakeholders with a shared vision.

Membership in the Pinellas Continuum of Care

Membership in the Continuum of Care should ensure community wide commitment to preventing and ending homelessness and must represent the entire geographic area covered by the Pinellas Continuum of Care. The Pinellas Continuum of Care's mission is to coordinate all community partners, systems and resources available with the goal of helping individuals and families to prevent, divert, and end homelessness in Pinellas County.

The following parties are represented on the Pinellas Continuum of Care. An official membership list is documented and published by the CoC Lead Agency.

Non-Profit Homeless Assistance Providers	Social Service Providers
Victim Service Providers	Mental Health Agencies
Faith-Based Organizations	Hospitals & Healthcare Agencies
Governments	Business & Workforce Agencies
Universities	Affordable Housing Developers
Advocates	Law Enforcement
Public Housing Agencies	Veteran Service Organizations
School Districts	Persons who are/have experienced Homelessness

The Pinellas Continuum of Care invites new members to join at any time during the year. Annually, the Pinellas Continuum of Care will issue a public invitation for any interested person within the geographic area to become a member of the CoC. The membership year follows a calendar year and is January-December each year.

Membership must be established two weeks prior to the voting. Agencies must also designate their voting member two weeks in advance.

There is no minimum or maximum number of members on the Pinellas Continuum of Care. Grievances regarding membership denials will be addressed by the Grievance Committee as defined under CoC Charter section "Executive Committee – Grievance Committee".

Government Entities: In order to become a member of the Pinellas Continuum of Care, a representative of an agency must be located or provide services in the CoC's geographical area and complete a Pinellas Continuum of Care Member Application Form. Each governmental entity shall appoint an elected official with policy making authority. If the governmental entity does not complete a membership form and pay the annual fee, it's seat on the Board is forfeited until a completed membership form is submitted and the annual fee is made current and paid in full.

Agency/Organization Members: In order to become a member of the Pinellas Continuum of Care, a representative of an agency must be located or provide services in the CoC's geographical area and complete a Pinellas Continuum of Care Member Application Form. Each application will be reviewed and certified by the Continuum of Care Lead Agency and Secretary of the Continuum of Care Board, or another Pinellas CoC Board Member as designated by the Chair, following CoC approved application standards. Once the application form has been certified, the CoC Lead Agency will notify the person/agency of their acceptance or denial.

An agency, organization or government entity may apply after attendance at one Continuum of Care committee meeting. An agency/organization may identify two (2) persons who may vote on behalf of the agency/organization, but only one shall cast a vote. Only one (1) representative of an agency/organization may cast a vote on each action. If a Continuum of Care member is unable to routinely conduct business, the agency/organization should seek to assign representation to another individual. Agencies, organizations, and government entities only pay the membership once annually, regardless of the number of members they appoint to vote on behalf of the organization. Representatives must also complete member application or renewal forms.

Individual Members: An individual who does not work for or represent an agency/organization may be nominated and elected as a member of the Pinellas Continuum of Care to represent themselves. An individual must live or work in the CoC's geographical area and may apply to become a member after their attendance at one Continuum of Care meeting.

All members will be encouraged to join at least one CoC Committee. All CoC Committee members must be a member of the CoC.

Terms of Service

Members of the Pinellas Continuum of Care will retain their membership and voting status as long as they are in good standing. To remain in good standing, members must attend 50% of the regularly scheduled General Membership meetings within a calendar year. Attendance at meetings is tracked by member sign in. Members must also complete the annual written disclosure statement based on the Continuum of Care Conflict of Interest policy.

Meetings

The Pinellas Continuum of Care will hold at least two meetings of the full membership. Meeting dates, times and location will be made publicly available at least 4 weeks in advance. Meetings are open to the public and they are welcome to attend.

The agendas must be published at least one week in advance of the meeting date. Meeting materials that require a vote must be shared at least one week in advance of the meeting date following the same process mentioned above (Exceptions to this may occur during HUD CoC Funding Competition and when special meetings are called). Meeting minutes will be posted publicly within fourteen business days by the CoC Lead Agency.

Quorum

A majority of 51% of the Pinellas Continuum of Care membership constitute a quorum at all meetings of the Pinellas Continuum of Care. No new business will be conducted unless a quorum is present.

Decision-Making

Robert's Rules of Order will be followed to open and close each meeting and to bring a motion to the floor. Decisions shall be made by a vote of the majority of members present.

Code of Conduct / Conflict of Interest / Recusal Process for Continuum of Care Members

In accordance with HUD regulations (24 CFR 578.95), no member may participate in or influence decisions concerning the award of a grant or other financial benefits to the organization that the member represents or to themselves as individuals. Therefore, any individual participating in or influencing decision making must identify actual or perceived conflicts of interest as they arise and comply with the letter and spirit of this policy. Disclosure should occur at the earliest possible time and if possible, prior to the discussion of any such issue. Individuals with a conflict of interest should abstain from discussion and voting on any issue in which they may have a conflict. A Conflict of Interest Policy will be approved by the Continuum of Care annually.

Annual written disclosure statements will be provided to each voting member at the annual meeting. Voting Members will not be permitted to participate in a discussion or a vote until the statement is on file with the CoC Lead Agency. All voting members shall have the right to recuse themselves from voting on a matter without providing excuse.

Responsibilities

The Pinellas Continuum of Care has specific responsibilities as outlined in the Continuum of Care Interim Rule. The responsibilities required by the Continuum of Care Interim Rule are outlined in Table 1 of this Governance Charter. The Pinellas Continuum of Care retains all of the responsibilities listed, even if it designates eligible applicants other than itself to apply for funds. Responsibilities extend to approval of the Continuum of Care Program application for funding.

Additional responsibilities set forth by the Continuum of Care include:

- Receive community and public policy updates relevant to homelessness;
- Advocate on behalf of all persons experiencing homelessness, including the implementation of efficient and effective service provision regardless of funding sources;
- Review and act on the annual CoC-funding allocations;
- Review and act on additional HUD required activities.

II. Establishing the Pinellas Continuum of Care Board

The Pinellas Continuum of Care is required to establish a Board that is made up of the Continuum of Care and it must act on behalf of the Pinellas Continuum of Care.

Board Membership

These written procedures for selecting Board Members will be reviewed, updated and approved at least once every 5 years by the Pinellas Continuum of Care General Membership.

The Pinellas Continuum of Care Board shall consist of Continuum of Care Members and consists of no less than 19 or more than 31 members. The precise number for any given year will be announced with the annual call for nominees. No more than one staff person and/or Board Member of a single agency/organization may be an Elected Member of the Pinellas Continuum of Care Board, excluding persons who are elected under the "homeless or formerly homeless" Board seat. This seat will not be counted as a representative of a particular service provider. In all other cases, if during the term of an elected Board Member, the person leaves the agency/organization and moves to an agency already

represented on the board, that person must resign their position. If an appointed Board Member leaves the agency/organization that appointed them they automatically resign their board position. The designee must then appoint a new Board Member. CoC Board members are required to either live or work in the CoC's geographic area.

The Pinellas CoC Board Elected Members will serve three (3) two (2) year terms up to a maximum of six (6) consecutive years (including partial terms) before rotating off for at least one (1) year. Elected Member terms will be staggered such that approximately one-third (1/3) are up for election each year. There are no term limits for Appointed Members; however, each year the Appointed Member must receive a Vote of Confidence from the designated entity which appointed them, and from the Continuum of Care Board. Funder's and Provider's Council representatives are considered appointed members as well as elected officials and constitutional officers. All appointed members still must complete the CoC membership process in order to retain their seat on the Board.

Members of the Pinellas Continuum of Care Board represent local funders, government, service providers, consumers, and other community members whose interests relate to homeless services and housing systems. Specifically, the Pinellas Continuum of Care Board consists of the following:

No fewer than nineteen (19) and no more than thirty-one (31) persons and will be comprised of one (1) Board Chair, ten (10) Appointed Officials and the balance shall consist of eighteen (20) Community Leaders.
- **Community Leader** members include:
  - At-Large, three (3) positions; (Elected)
  - Business, two (2) positions; (Elected)
  - Faith-Based Organizations; one (1) position; (Elected)
  - Funders Council Chair, one (1) position; (Appointed)
  - Health Care/EMS/Fire, one (1) position; (Elected)
  - Homeless/Formerly Homeless, two (2) positions (Elected)
  - Local Housing Authority, two(2) positions; (Elected)
  - Providers Council Chair, one (1) position (Appointed)
  - Service Experts, three (3) positions appointed by the Providers Council. (Appointed)
  - Veteran or Veteran Organization (Elected)
  - Workforce Development or Transportation Representative (Elected)
  - Non-Entitlement Community, two (2) positions not already specifically noted in the Charter (i.e. Tarpon Springs) (Elected)

- Named designees for Appointed **Government Entities** include (All Appointed):
  - City of Clearwater;
  - City of Largo;
  - City of St. Petersburg;
  - City of Pinellas Park;
  - City of Tarpon Springs;
  - Juvenile Welfare Board;
  - Pinellas County Board of County Commissioners;
  - Pinellas County School Board;
  - Pinellas County Sheriff;
  - Public Defender

- Non-Voting Appointed Seats
  - The CEO of the CoC Lead Agency;
  - The CEO of the Collaborative Applicant;
  - The CEO of the HMIS Lead;
  - If the same agency is chosen that covers more than one of the above roles the
    - seat is filled by the CEO.

In managing the number and composition of Pinellas CoC Board members, the following will be true:
- The CoC Board Chair is elected by the CoC Board; with the Chair having a dedicated seat. The Board Chair must relinquish their current seat to avoid being in two Board seats and cannot be employed by an organization that primarily provides direct homeless services within the Pinellas Continuum of Care.
- Each seat has a vote as exercised by a named individual, and each individual may exercise only one vote.
- With the exception of short-termed vacancies, there will always be an odd number of Pinellas CoC Board members.
- The Pinellas CoC Board should represent a diverse set of service, population and program interests.
- Direct service providers can include those who do and do not receive federal funding; those serving individuals, families, youth, veterans or any other targeted population; a wide range of services such as outreach, shelter, transitional housing, rapid re-housing, permanent supportive housing, victim services, service only, etc.
- At-Large seats provide flexibility in maintaining an odd number of Pinellas CoC Board members while responding to community and strategic needs at any given time.
- 'Appointed Entities' must appoint an individual designee to represent the 'Appointed Entity' on the CoC Board. The appointment must be renewed by the submission of a Vote of Confidence on behalf of the 'Appointed Entity' to the Pinellas CoC Board.

The election process will include at least the following:
- Calls for nominations, vetting of nominations received, and ballot announcement will happen each calendar year.
- Nominees must be members and eligible to vote by demonstrating participation in the CoC by attending meetings and committees.
- Votes may be cast for up to the maximum number of seats within a category. Ballots that vote for more than the number of seats in a particular category will not be counted for that category only.
- Individuals receiving the highest votes for a given seat will be declared the winner.
- In the event of a tie for a specific seat, the individuals involved will have their names put on a second ballot for that seat. The individual receiving the highest vote for that seat will be declared the winner.

Board Officers

The officers of the Pinellas Continuum of Care Board are a Chair, Vice Chair and Secretary. No Board member may hold two positions simultaneously.

Election and Term
The Pinellas Continuum of Care Board will elect a chairperson, a vice chairperson and a secretary at the first meeting of the calendar year when applicable and there is a preference for one position that does not represent an agency or receive CoC funding, including recipients or subrecipients. Officers will serve three (3) year terms and terms of officer roles should be staggered for succession planning purposes. An officer cannot serve for more than two (2) consecutive terms in the same role.

Chair and Vice Chair
The Chair is responsible for scheduling meetings, ensuring that the CoC and CoC Board meets regularly or as needed, sets the agenda for meetings of the CoC Board, chairs the CoC Board meetings, designates a chair for the CoC membership meetings, and signs any required and/or necessary documents on behalf of the Pinellas Continuum of Care. In the absence of the Chair, the Vice Chair assumes the duties of the Chair. The Chair and Vice Chair shall perform other duties as the CoC may designate.

Secretary
The Secretary reviews and signs official documents for the Continuum of Care as required by protocol. The Secretary reviews and approves Continuum of Care applications for member status with the CoC Lead Agency. The Secretary shall perform other duties as the CoC may designate and shall chair CoC meetings in the case of the absence of the Chair and Vice Chair.

Executive Committee

Acts on behalf of the board when necessary. All decisions made by the Executive Committee are brought to the next board meeting for ratification when the Board is unable to meet in advance of a time-sensitive issue. Members of the Executive Committee will include the Chair, Vice Chair, Immediate Past Chair, Secretary, Funders Council Chair, and Providers Council Chair, and either of the two members of the Pinellas Continuum of Care's Board of Directors who are elected to the homeless or formerly homeless seats.

The Executive Committee will provide leadership to the following responsibilities: the Executive Committee can choose to form subcommittees consisting of other CoC Board members who shall report back to the Executive Committee. If the Executive Committee elects to form subcommittees, then the subcommittee recommendations are submitted to the Executive Committee for consideration and approval. Quorum for each committee is 51% with a minimum of three (3) members.

Accountability and Oversight of Collaborative Applicant, CoC Lead Agency and HMIS Lead Agency:
The Executive Committee will ensure that the activities outlined in the Memorandum of Understanding and the roles and responsibilities outlined in the Charter for the CoC Lead Agency, Collaborative Applicant, and HMIS Lead Agency, are being met by meeting quarterly (or as needed) to review workplan progress, priorities, coordination with Committees, and other activities as needed. Additionally, the committee will oversee the annual performance review of the CoC Lead Agency, Collaborative Applicant and HMIS Lead Agency.

CoC Nominating and Governance Subcommittee:
The Executive Committee will oversee CoC Nominating and Governance and shall perform an annual

review of the CoC Charter and make recommendations to the Board of Directors as deemed necessary. The Executive Committee will also serve as the strategic planning committee unless they appoint a separate sub-committee to address. Much of the strategic planning work will also be carried out by Providers and Funders Council.

CoC Review and Ranking Subcommittee:

The Executive Committee will oversee the appointment of the CoC Review and Ranking Subcommittee and process for the purposes of determining the scoring and priority ranking of each proposal to be submitted with the annual HUD CoC Notice of Funding Application. CoC Review and Ranking recommendations are presented to the CoC Board of Directors for approval.

Grievance Subcommittee:

The CoC Grievance Subcommittee acts on behalf of the Pinellas CoC Board to resolve grievances and determines the course of action to be taken. Membership consists of the Executive Committee Chair and Vice Chair, and three (3) additional members. The Grievance Committee creates a CoC funding appeal process; reviews and makes recommendations to Board on CoC funding appeals. The Grievance Committee resolves issues with respect to funding, HMIS issues, and denial of membership. The Grievance Committee will establish its own rules and procedures.

Vacancy, Removal and Resignation

Vacancy

In the event of an Elected Seat vacancy, the members of the Pinellas CoC Board will elect a successor to hold the vacant seat for the remainder of the term of the person vacating the seat. At the end of the term, a regular election will be held as described in this charter. In the event of an Appointed Seat vacancy, the Appointed Entity must appoint an individual designee to fill the vacant seat.

Removal

Members of the Pinellas CoC Board may remove a Board member (elected or appointed) who is absent for three (3) Board regularly scheduled meetings in any twelve-month period. The removal will be automatic unless voted otherwise by the CoC Board of Directors.

Pinellas CoC Board members (elected or appointed) may also be removed by a ¾ vote of the Pinellas CoC Board for cause including but not limited to:

- Failure to perform Board duties;
- Failure to comply with this Charter and/or applicable policies;
- Engaging in conduct that is in violation of the CoC's adopted conflict of interest policy;
- Engaging in behavior that causes harm to the reputation of the CoC.

Such seats will then be filled through the process described above under vacancies.

Resignation

Unless otherwise provided by written agreement, any member of the Pinellas CoC Board may resign at any time by giving written notice to the Chair. Any such resignations will take effect at the time specified

within the written notice; or, if the time is not specified in the written notice, it will take effect upon its acceptance by the Pinellas CoC Board.

Meetings

The Pinellas Continuum of Care Board will hold meetings no less than six (6) times per year. Attendance at meetings of the Pinellas CoC Board will be open to any interested person to observe. Two (2) weeks' notice will be given for regularly scheduled meetings of the Board with the agenda being published one week in advance. Board Minutes will be published on the CoC Lead Agency's website within 14 days. Special meetings may be called in emergency situations with three (3) days' notice; an agenda is not required for emergency meetings. CoC Board meetings will be held in person and televised via Zoom. Zoom will be utilized for televising meetings only and does not count for attendance or voting participation. Only one-way communication will be allowed through the platform.

Quorum

A majority or 51% of the Pinellas Continuum of Care Board filled seats constitute a quorum at all meetings of the Pinellas Continuum of Care Board, Councils, and Committees. No business will be conducted unless a quorum is present.

Decision-Making

Each CoC Board member is eligible to vote on decisions being made when present at the meetings.

Robert's Rules of Order will be followed to open and close each meeting and to bring a motion to the floor. The Continuum of Care Board will strive to make decisions through modified consensus. When consensus is not possible, decisions shall be made by a vote of the majority of voting members present.

Responsibilities

The Pinellas Continuum of Care gives authority to the Pinellas Continuum of Care Board for specific responsibilities. The responsibilities required by the Continuum of Care Interim Rule are outlined in Table 1 of this Governance Charter. Additional responsibilities required by the Continuum of Care Board include:

- Elect a Chairperson, Vice Chairperson and Secretary;
- All Board members are required to serve on at least one committee of the CoC;
- Establish policies for funding and resource allocation;
- Set priorities for the CoC and establish an annual workplan;
- Take action against poor performers by reviewing and acting on any programs that should be removed from HUD funding and any proposed funding reallocations;
- Review and make final determination on CoC-funding appeals;
- Assure that services provided by the HUD and DCF sub-grantees are meeting the needs of the local community and that critical issues are addressed.

III. Establishing the Pinellas Continuum of Care Committees

The Pinellas Continuum of Care may establish Committees, Subcommittees, or Work Groups that are made up of Continuum of Care members and/or employees of organizational members, to act on behalf of the Pinellas Continuum of Care. The Committees are the action planning components of the system. In these bodies, strategies are developed, deepened and expanded into timed work plans. These groups may also be directly responsible for specific strategies or exploring options to solve particular concerns. Unless authority is designated by the Continuum of Care, Committees make recommendations to the CoC Board for approval. It is recommended that each committee has a Chair, a Vice Chair, a Secretary, one board member appointed by the board, and one member of the CoC General Body elected by the committee. Committee chairs serve three (3) year terms, with the option of renewable terms. The secretary takes meeting minutes in accordance with Florida Sunshine law and submits to the committee for approval and once approved; submits to the Lead Agency as public record. Quorum for all committees is 51 percent. Committee agendas must be published one week in advance of the meeting.

Standing Committees are designated in this Charter. Committees may determine if they would like in person or Zoom for attendance and voting purposes. Ad hoc working groups or task forces may be formed and given specific responsibilities as needed by the Continuum of Care Chair. All committee responsibilities apply to ad hoc groups as well.

CoC Membership Committees:

Funders Council: The Funders Council members shall establish written policies and procedures for Council membership, size of the Council, operating rules, and the work of the Council not inconsistent with this Charter. Makes recommendations to the full CoC Board on funding of homeless/at-risk programs and services, either in response to CoC Board requests or on issues raised by Funders Council members.
- Makes recommendations on strategically aligning funding resources available for homeless/at-risk programs and services based on CoC Board approved priorities, to make the most effective use of scarce resources.
- Annually reviews and make recommendations to the CoC Board on the best use of funds from specific resources, based on the CoC Board approved priorities and activities that enable the Pinellas CoC system of services to meet and exceed applicable performance standards as approved by the CoC Board. Such resources include the HUD Continuum of Care, State of Florida homeless funding, and/or local public sources.
- Determine ways the local funders can coordinate funded services through common contract language, performance outcomes, and goals.
- Coordinate funding planning and recommendations with other community-wide funding and planning groups
-

Providers Council: Makes recommendations to the full CoC Board on homeless/at-risk services system issues, concerns and needed actions, either in response to CoC Board requests or on issues raised by Providers Council members. The membership of the Providers Council shall include representatives from homeless/at-risk service providers and other organizations that are actively involved in services that affect homeless/at-risk target groups in Pinellas

County. Providers Council members must be either an individual or organizational member of the Continuum of Care and act for the benefit of the homeless/at-risk services system as a whole, and not for individual organizations. The Providers Council members shall establish written policies and procedures for Council membership, size of the Council, operating rules, and the work of the Council not inconsistent with this Charter. These policies and procedures will be brought to the full CoC Board for ratification annually or when changes are made. The Providers Council shall have at least nine (9) members, and it shall set the maximum number of members itself. The Providers Council Chair has a dedicated seat on the CoC Board and three (3) additional Providers Council members in good standing are appointed by the Providers Council to sit on the CoC Board as Service Experts.

Joint Providers and Funders Council Meetings: It is the expectation that both Provider s and Funders Councils will meet jointly at least two (2) times a year.

Lived Experience Advisory Committee (LEAC): Makes recommendations to the full CoC Board on homeless/at-risk services system issues, concerns and needed actions, either in response to CoC Board requests or on issues raised by people with lived experience. The membership of the Lived Experience Advisory Committee shall include representatives that are experiencing homelessness or have experienced homelessness in Pinellas County. The Lived Experience Advisory Committee members may establish written policies and procedures for committee membership, size of the committee, operating rules, and the work of the committee not inconsistent with this Charter. Members of the committee and the committee itself may be exempt from CoC Membership requirements or other committee requirements contained in this Charter. However, at least one (1) CoC Board member should be in attendance of each meeting. The members of this committee are encouraged to attend additional CoC committee meetings.

Data and System Performance Committee: Coordinate HMIS data collection, review systems performance measures and review all PIT/HIC/AHAR data. Scan the environment for best practices and innovations and evaluate outcomes of the CoC overall and projects funded under HUD (CoC and ESG Programs). This committee has the authority to establish program subcommittees as appropriate. The committee recommends funding priorities to the CoC Board. This committee will also form a sub-committee to serve as HMIS Governance.

Point in Time (PIT) Count and Survey Planning Committee: This committee shall meet as determined by the committee. It is responsible for the design of the PIT surveys and processes, recruiting/training/deploying of all PIT volunteers and agency surveyors, providing data quality control, evaluating PIT and making changes for the next annual survey.

Advocacy Committee: This committee will develop an annual HLA advocacy agenda to be approved by the Board, advocate on behalf of the Pinellas CoC; and, address any advocacy issues that may arise throughout the year.

Diversity, Equity, and Inclusion Committee: The Diversity, Equity, and Inclusion Committee (DEI) shall provide insight and advice into promoting diversity, equity and inclusion in the CoC. The committee will consider and develop strategies for board consideration that foster greater participation and make the CoC more accommodating and reflective of members from diverse

backgrounds, perspectives and abilities. The committee will be aware of and ensure coordination and collaboration of diversity, equity and inclusion efforts throughout the CoC.

Pinellas Continuum of Care Committee Membership

Committee membership may include any Pinellas CoC member. However, at least one (1) committee member must come from the Pinellas CoC Board. Each committee will set its number and recruit members from the Continuum and larger community. All Committee members must be a member of the Continuum of Care. Committee membership will be submitted to the Board on an annual basis and changes in committee composition should be submitted to HLA Staff as they occur.

Each committee shall have:

- A Chair elected by the Pinellas CoC committee itself. If a vacancy occurs for more than 2 meetings, the Board Chair may elect to appoint someone.
- A Vice Chair elected by the Pinellas CoC committee itself
- A Secretary elected by the Pinellas CoC committee itself
- At least one member from the Pinellas Continuum of Care general membership that is not a Board member

The CoC Chair will ensure that each Board Member, through volunteerism and appointment, shall serve on a Pinellas Continuum of Care Committee.

Meetings

Each Committee will hold meetings at least two (2) times per year. All meetings are open to any interested party. Committees may determine if they would like in person or Zoom for attendance and voting purposes.

Quorum

A majority or 51% of the Committee membership constitute a quorum at all Committee meetings. No business will be conducted unless a quorum is present.

Decision-Making

Unless authority is otherwise designated to a Committee, the Pinellas Continuum of Care Committees will make recommendations to the CoC Board for approval.

The Continuum of Care Committee(s) will strive to make decisions through consensus. When consensus is not possible, decisions shall be made by a vote of the majority of members present.

If a Committee recommendation requires a formal decision-making process, there is no proxy voting for Continuum of Care Committees except as noted for general board meetings. Decision-making requires live conversation and active participation from all parties.

Responsibilities

The Pinellas Continuum of Care tasks the Pinellas Continuum of Care Committees with specific responsibilities. The responsibilities required by the Pinellas Continuum of Care are outlined in Table 1 of this Governance Charter. Additional responsibilities required by the Continuum of Care are:

- Recruit its members
- Select a chair or co-chairs
- Select a secretary
- Establish its policies and procedures, and provide them to the Pinellas CoC Board
- Record its minutes and attendance, and provide them to the CoC Lead Agency
- Ensure transparency of its process and meetings

IV.   Roles of the Designated Entities

Continuum of Care Lead Agency

The Pinellas Continuum of Care appoints the CoC Lead Agency that will complete designated work tasks assigned by the Pinellas Continuum of Care and will provide meeting support for the Pinellas Continuum of Care Board and committees. The CoC Lead Agency is responsible for working with the Chair to schedule meetings, develop agendas, issuing meeting materials and posting all relevant documents to the Pinellas Continuum of Care website. The CoC Lead Agency will provide recommendations to the Pinellas Continuum of Care Board for its final decisions. All responsibilities are documented in the Pinellas Continuum of Care Lead Agency Memorandum of Understanding.

The designation of the CoC Lead Agency is valid for a maximum of 3 years before the designation must be reviewed and renewed by the Pinellas Continuum of Care. The Pinellas CoC Board will review the performance of the CoC Lead Agency every three years with the first year being 2023. The review will be based on the roles and responsibilities included in the MOU. The designation may be terminated upon mutual agreement or for cause with a vote of 75% of the CoC Board of Directors.

Collaborative Applicant

The Continuum of Care designates a legal entity to serve as the Collaborative Applicant. The Collaborative Applicant is responsible for collecting and combining the required application information from all Continuum of Care Program funded projects within the geographic area. The Collaborative Applicant is also responsible for submitting the annual application to HUD for Continuum of Care Program funding and to apply for Continuum of Care Planning dollars. These and any additional responsibilities are documented in the Pinellas Continuum of Care Collaborative Applicant Memorandum of Understanding.

The designation of the Collaborative Applicant is valid for a maximum of 3 years before the designation must be reviewed and renewed by the Pinellas CoC Board. The Collaborative Applicant will submit the HUD Annual Performance Report and HUD Application for CoC Planning dollars to the CoC Board annually. The CoC Board will review the Collaborative Applicant's performance with the Continuum of Care at a CoC Board meeting after the Executive Committee conducts an initial review. The designation may be terminated earlier than the 3-year time period upon mutual agreement or for cause with a vote of 75% of the CoC membership.

The Collaborative Applicant must submit a final copy of the application to the Pinellas Continuum of Care after submission. Depending on the timing of the submission to HUD, the Pinellas Continuum of Care Board and Collaborative Applicant will create a timeline for submission to the Pinellas Continuum of Care.

HMIS Lead Agency

The Continuum of Care designates a legal entity to serve as the Homeless Management Information System (HMIS) Lead Agency. The HMIS Lead Agency will maintain the community's HMIS in compliance with HUD standards and coordinate all related activities including training, maintenance and the provision of technical assistance to contributing organizations. Responsibilities required by the Continuum of Care are outlined in Table 1 of this Governance Charter. These and any additional responsibilities are documented in the Pinellas Continuum of Care Homeless Management Information System Lead Agency Memorandum of Understanding. Designated responsibilities include developing an HMIS privacy plan, security plan, and data quality plan.

The designation of the HMIS Lead Agency is valid for a maximum of 3 years before the designation must be reviewed and renewed by the Pinellas Continuum of Care. Each year, the HMIS Lead Agency will submit the HUD Annual Performance Report and HUD Application for HMIS-dedicated grant to the CoC Board. The CoC Board will review the HMIS Lead Agency's performance with the Continuum of Care at a CoC Board meeting. The designation may be terminated earlier than the 3-year time period upon mutual agreement or for cause with a vote of 75% of the CoC Board of Directors.

Table 1. Responsibilities of Continuum of Care Entities

Responsibility Category	Responsibility	Responsible Party
Establishing CoC	Define membership of Continuum of Care	**Continuum of Care**
Establishing CoC	Invite new members	**Continuum of Care**
Operating CoC	Hold meetings of full membership, with published agenda, at least semi-annually	**Continuum of Care**
CoC Governance and Management	Establishing a Continuum of Care Board	**Continuum of Care**
CoC Governance and Management	Reviewing the Written Selection Process for the Board	**Continuum of Care**
CoC Governance and Management	Designate a Collaborative Applicant, CoC Lead Agency, and HMIS Lead Agency.	**Continuum of Care**
CoC Governance and Management	Designate Responsibilities to the CoC Board, CoC Lead Agency,	**Continuum of Care**

Responsibility Category	Responsibility	Responsible Party
	HMIS Lead Agency, and Collaborative Applicant.	
CoC Governance and Management	Apply for CoC Planning Funds	**Collaborative Applicant**
CoC Governance and Management	Appoint Committees / Sub-Committees	**Continuum of Care**
CoC Governance and Management	Develop a Governance Charter	**Continuum of Care**
CoC Governance and Management	Review and Approve the Governance Charter Annually	**Continuum of Care**
Overall and Project-Level Performance	Establish performance targets in consultation with recipients/sub- recipients	**CoC Lead Agency and Data and System Performance Committee**
Overall and Project-Level Performance	Monitor recipient/sub-recipient performance	**CoC Lead Agency**
Overall and Project-Level Performance	Evaluate outcomes for ESG and CoC Projects and report to HUD	**CoC Lead Agency; Data and System Performance Committee**
Responsibility Category	**Responsibility**	**Responsible Party**
Overall and Project-Level Performance	Take action against poor performing agencies	**CoC Board**
Overall and Project-Level Performance	Measure system performance	**CoC Lead Agency, HMIS Lead Agency, and Data and System Performance Committee**
Coordinated Assessment System	Operate a Coordinated Entry System	**CoC Lead Agency**
Coordinated Assessment System	Develop a policy for how Coordinated System and Housing and Service System will address needs of those fleeing domestic violence as defined by HUD	**CoC Board**
Designate an HMIS	Designate a Single HMIS for the entire CoC	**Continuum of Care, HMIS Governance**
HMIS Policies	Review, revise and approve the HMIS privacy plan, security plan and data quality	**Continuum of Care, HMIS Governance, HMIS Lead Agency**

	plan	
HMIS Compliance	Ensure HMIS is in compliance with HUD requirements	**Continuum of Care, HMIS Governance, HMIS Lead Agency**
HMIS Participation	Ensure consistent participation of recipients and sub-recipients in HMIS	**Continuum of Care, HMIS Lead Agency, Data and System Performance Committee**
HMIS Privacy and Security	Develop HMIS privacy plan, security plan and data quality plan	**HMIS Governance, HMIS Lead Agency, Data and System Performance Committee**
HMIS Agency Participation Agreements	Execute participation agreements with contributing HMIS	**HMIS Lead Agency**
HMIS User Agreements	Execute user agreements with all HMIS users	**HMIS Lead Agency**

Responsibility Category	Responsibility	Responsible Party
Plan for the CoC	Plan and Conduct a Point-in-Time Study	**CoC Lead Agency and Point in Time Count and Survey Planning Committee**
Plan for the CoC	Conduct an annual gaps analysis of homeless needs and services	**CoC Lead Agency, HMIS Lead Agency and Data and System Performance Committee**
Plan for the CoC	Consult with ESG Recipients	**CoC Lead Agency**
Plan for the CoC	Submit annual application to HUD for Continuum of Care Program funding	**Collaborative Applicant and CoC Board**
Plan for the CoC	Approve annual application to HUD for Continuum of Care Program funding	**Continuum of Care**
Plan for the CoC	Participate in the Consolidated Plan	**CoC Lead Agency**

V. Reviewing and Updating the Charter

Process for Updating the Charter

At least once every year, the Pinellas Continuum of Care must review this Governance Charter in consultation with the CoC Lead Agency, Collaborative Applicant and HMIS Lead Agency. Members of the Pinellas Continuum of Care, Pinellas Continuum of Care Board, Collaborative Applicant, Lead Agency, or HMIS Lead Agency may make suggestions to the Executive Committee for updating. It is the Collaborative Applicant's responsibility to review HUD rules, regulations, and guidance and to suggest updates to the Governance Charter. The updates must be presented on the agenda prior to the meeting. Updates to the Governance Charter require a 2/3's vote of the members of the CoC Board. Housekeeping changes that do not change the content or intent of the charter can be made once a year by the CoC Board.

Review and Updating History

Date Revision Approved	Summary	Summary of Vote
January 10, 2020	Section II – Board Membership – added 2 CoC Board seats designated specifically for Housing Authorities. The CoC Board now totals 27 members, 3 of which are Housing Authorities.	**MOTION:** Approve the recommendation of the Nominating Committee to increase Coc Board members from 25 to 27 by Amy Foster. A second is not required since the recommendation comes from the Nominating Committee. All in favor. None oppose. Motion passes. **MOTION:** Duggan Cooley moves to add the representative, Stephanie Owens, from the St. Petersburg Housing Authority to the Board. Seconded by Trenia Cox. All in favor. None oppose. Motion passes. **MOTION:** April Lott moves to move Stephanie Owens from a Business seat to a Housing Authority seat. Stephanie Owens agrees to vacate the Business seat and represent in the Housing Authority seat. Lariana Forsythe seconds. All in favor. None oppose. Motion passes.
July 9, 2021	CoC Membership Meetings changed from four per year to two per year CoC Board Membership – increased from 27 seats to 29. Reduced Housing Authority seats from three to two; added one At Large seat to increase from three to two; added a Veterans/Veterans Services seat; added a Workforce	

| | Development or Transportation seat. HMIS Governance and Strategic Planning moved to be subcommittees under Executive Committee. | | |

Date Revision Approved	Summary of Actions Taken	Motioned by	Seconded by	Pass/Fail

ROBERTS RULES CHEAT SHEET

To:	You say:	Interrupt Speaker	Second Needed	Debatable	Amendable	Vote Needed
Adjourn	"I move that we adjourn"	No	Yes	No	No	Majority
Recess	"I move that we recess until…"	No	Yes	No	Yes	Majority
Complain about noise, room temp., etc.	"Point of privilege"	Yes	No	No	No	Chair Decides
Suspend further consideration of something	"I move that we table it"	No	Yes	No	No	Majority
End debate	"I move the previous question"	No	Yes	No	No	2/3
Postpone consideration of something	"I move we postpone this matter until…"	No	Yes	Yes	Yes	Majority
Amend a motion	"I move that this motion be amended by…"	No	Yes	Yes	Yes	Majority
Introduce business (a primary motion)	"I move that…"	No	Yes	Yes	Yes	Majority

The above listed motions and points are listed in established order of precedence. When any one of them is pending, you may not introduce another that is listed below, but you may introduce another that is listed above it.

To:	You say:	Interrupt Speaker	Second Needed	Debatable	Amendable	Vote Needed
Object to procedure or personal affront	"Point of order"	Yes	No	No	No	Chair decides
Request information	"Point of information"	Yes	No	No	No	None
Ask for vote by actual count to verify voice vote	"I call for a division of the house"	Must be done before new motion	No	No	No	None unless someone objects
Object to considering some undiplomatic or improper matter	"I object to consideration of this question"	Yes	No	No	No	2/3
Take up matter previously tabled	"I move we take from the table…"	Yes	Yes	No	No	Majority
Reconsider something already disposed of	"I move we now (or later) reconsider our action relative to…"	Yes	Yes	Only if original motion was debatable	No	Majority
Consider something out of its scheduled order	"I move we suspend the rules and consider…"	No	Yes	No	No	2/3
Vote on a ruling by the Chair	"I appeal the Chair's decision"	Yes	Yes	Yes	No	Majority

The motions, points and proposals listed above have no established order of preference; any of them may be introduced at any time except when meeting is considering one of the top three matters listed from the first chart (Motion to Adjourn, Recess or Point of Privilege).

PROCEDURE FOR HANDLING A MAIN MOTION

NOTE: Nothing goes to discussion without a motion being on the floor.

Obtaining and assigning the floor

A member raises hand when no one else has the floor
- The chair recognizes the member by name

How the Motion is Brought Before the Assembly

- The member makes the motion: *I move that (or "to")* ... and resumes his seat.
- Another member seconds the motion: *I second the motion* or *I second it* or *second*.
- The chair states the motion: *It is moved and seconded that ... Are you ready for the question?*

Consideration of the Motion

1. Members can debate the motion.
2. Before speaking in debate, members obtain the floor.
3. The maker of the motion has first right to the floor if he claims it properly
4. Debate must be confined to the merits of the motion.
5. Debate can be closed only by order of the assembly (2/3 vote) or by the chair if no one seeks the floor for further debate.

The chair puts the motion to a vote

1. The chair asks: *Are you ready for the question?* If no one rises to claim the floor, the chair proceeds to take the vote.
2. The chair says: *The question is on the adoption of the motion that ... As many as are in favor, say 'Aye'.* (Pause for response.) *Those opposed, say 'Nay'.* (Pause for response.)   *Those abstained please say 'Aye'.*

The chair announces the result of the vote.

1. *The ayes have it, the motion carries, and* ... (indicating the effect of the vote) or
2. *The nays have it and the motion fails*

WHEN DEBATING YOUR MOTIONS

1. Listen to the other side
2. Focus on issues, not personalities
3. Avoid questioning motives
4. Be polite

HOW TO ACCOMPLISH WHAT YOU WANT TO DO IN MEETINGS

MAIN MOTION

You want to propose a new idea or action for the group.
- After recognition, make a main motion.
- Member: "Madame Chairman, I move that _____."

AMENDING A MOTION

You want to change some of the wording that is being discussed.
- After recognition, "Madame Chairman, I move that the motion be amended by adding the following words _____."
- After recognition, "Madame Chairman, I move that the motion be amended by striking out the following words _____."
- After recognition, "Madame Chairman, I move that the motion be amended by striking out the following words, _____, and adding in their place the following words _____."

REFER TO A COMMITTEE

You feel that an idea or proposal being discussed needs more study and investigation.
- After recognition, "Madame Chairman, I move that the question be referred to a committee made up of members Smith, Jones and Brown."

POSTPONE DEFINITELY

You want the membership to have more time to consider the question under discussion and you want to postpone it to a definite time or day, and have it come up for further consideration.
- After recognition, "Madame Chairman, I move to postpone the question until _____."

PREVIOUS QUESTION

You think discussion has gone on for too long and you want to stop discussion and vote.
- After recognition, "Madam President, I move the previous question."

LIMIT DEBATE

You think discussion is getting long, but you want to give a reasonable length of time for consideration of the question.
- After recognition, "Madam President, I move to limit discussion to two minutes per speaker."

POSTPONE INDEFINITELY

You want to kill a motion that is being discussed.
- After recognition, "Madam Moderator, I move to postpone the question indefinitely."

POSTPONE INDEFINITELY

You are against a motion just proposed and want to learn who is for and who is against the motion.
- After recognition, "Madame President, I move to postpone the motion indefinitely."

RECESS

You want to take a break for a while.
- After recognition, "Madame Moderator, I move to recess for ten minutes."

ADJOURNMENT

You want the meeting to end.
- After recognition, "Madame Chairman, I move to adjourn."

PERMISSION TO WITHDRAW A MOTION

You have made a motion and after discussion, are sorry you made it.
- After recognition, "Madam President, I ask permission to withdraw my motion."

CALL FOR ORDERS OF THE DAY

At the beginning of the meeting, the agenda was adopted. The chairman is not following the order of the approved agenda.
- Without recognition, "Call for orders of the day."

SUSPENDING THE RULES

The agenda has been approved and as the meeting progressed, it became obvious that an item you are interested in will not come up before adjournment.
- After recognition, "Madam Chairman, I move to suspend the rules and move item 5 to position 2."

POINT OF PERSONAL PRIVILEGE

The noise outside the meeting has become so great that you are having trouble hearing.
- Without recognition, "Point of personal privilege."
- Chairman: "State your point."
- Member: "There is too much noise, I can't hear."

COMMITTEE OF THE WHOLE

You are going to propose a question that is likely to be controversial and you feel that some of the members will try to kill it by various maneuvers. Also you want to keep out visitors and the press.
- After recognition, "Madame Chairman, I move that we go into a committee of the whole."

POINT OF ORDER

It is obvious that the meeting is not following proper rules.
- Without recognition, "I rise to a point of order," or "Point of order."

POINT OF INFORMATION

You are wondering about some of the facts under discussion, such as the balance in the treasury when expenditures are being discussed.
- Without recognition, "Point of information."

POINT OF PARLIAMENTARY INQUIRY

You are confused about some of the parliamentary rules.
- Without recognition, "Point of parliamentary inquiry."

APPEAL FROM THE DECISION OF THE CHAIR

Without recognition, "I appeal from the decision of the chair."

Rule Classification and Requirements

Class of Rule	Requirements to Adopt	Requirements to Suspend
Charter	Adopted by majority vote or as proved by law or governing authority	Cannot be suspended
Bylaws	Adopted by membership	Cannot be suspended
Special Rules of Order	Previous notice & 2/3 vote, or a majority of entire membership	2/3 Vote
Standing Rules	Majority vote	Can be suspended for session by majority vote during a meeting
Modified Roberts Rules of Order	Adopted in bylaws	2/3 vote

Frequently Used Acronyms and Definitions

211	211 Tampa Bay Cares (TBC) is an information and referral hotline for social services in Pinellas County.
Accessible Housing	Housing is accessible when public or common areas of the building can be approached, entered and used by someone with a physical disability. Accessible housing may have ramps, elevators and wider doorways to accommodate people with mobility improvements. Other accessibility features include wheelchair-accessible bathrooms and universal design features like lever door handles.
Adult Emergency Financial Assistance Program (AEFAP)	The Adult Emergency Financial Assistance Program (AEFAP) helps individuals and married couples without minor children by providing financial assistance to help prevent evictions, foreclosures, and unhealthy living conditions as well as things to keep people employed. Assistance is provided only once every twelve months.
Advocacy Committee	This committee develops an annual HLA advocacy agenda to be approved by the Board, advocates on behalf of the Pinellas CoC, and addresses any advocacy issues that may arise throughout the year.
Americans with Disabilities Act (ADA)	The 1990 Americans with Disabilities Act (ADA) is a broad civil rights law guaranteeing equal opportunity for individuals with disabilities in employment, public accommodations, transportation, state and local government services and telecommunications.
Annual Homeless Assessment Report (AHAR)	The U.S. Department of Housing and Urban Development's Annual Homeless Assessment Report to Congress.
Annual Median Income (AMI)	HUD calculations of the median income in an area that are presented by household size and adjusted each year. Many housing programs use percentages of AMI as the guidelines for income eligibility.

Annual Performance Report (APR)	HUD requires an annual progress report for all homeless projects.
Bay Area Legal Services (BALS)	Bay Area Legal Services
Blockbusting	Profiteering by inducing property owners to sell hastily and often at a loss by appeals to fears of depressed values because of threatened minority encroachment and then reselling at inflated prices.
Built for Zero	Built for Zero is a program of more than 80 communities working to achieve an end to homelessness that lasts and leaves no one behind. The goal is to achieve a milestone known as functional zero — an ongoing state where homelessness is continuously rare and brief. The Pinellas County CoC began working with Built for Zero in 2021.
Annual Renewal Demand (ARD)	Total dollar amount of all the CoC's projects that will be eligible for annual renewal funding.
CASA	Community Action Stops Abuse
Case Conferencing	A meeting at which all the parties involved in a case come together to discuss it and identify appropriate solutions.
Case Management	A voluntary and client-centered collaborative process of assessment, planning, facilitation, care coordination, evaluation, and advocacy for options and services to meet individual needs.
CDBG	Community Development Block Grant - A federal program that allocates money to local governments for low/moderate income community-based projects. These funds can then be spent on a wide variety of housing, infrastructure, human services, and economic development activities.
CDBG-CV	Community Development Block Grant – Coronavirus. Additional CDBG funding authorized by the CARES Act in March 2020.
Chronically Homeless	A person is considered chronically homeless if he/she has been continually homeless for a year or more or experienced 4 episodes of homelessness in the past 3 years and has a diagnosed disability.
Code of Federal Regulations (CFR)	The U.S. Department of Housing and Urban Development's Code of Federal Regulations.

Cold Night Shelter (CNS)	Emergency shelters active on nights that the temperature is expected to fall to 40 degrees or lower. Overnight guests are provided with a safe place to sleep, sleeping supplies, and food at 10 locations, including 2 dedicated family shelters, across Pinellas County. Cold Night Shelters are a volunteer-lead initiative that operate between November and March.
Collaborative Applicant	An entity that applies for HUD funding. The HLA serves as the collaborative applicant for the CoC. The Collaborative Applicant is responsible for collecting and combining the required application information from all Continuum of Care Program funded projects within the geographic area. The Collaborative Applicant is also responsible for submitting the annual application to HUD for Continuum of Care Program funding and to apply for Continuum of Care Planning dollars.
Community Law Program (CLP)	Community Law Program
Consolidated Plan	A locally developed plan that must be submitted to HUD as part of the eligibility process for certain HUD programs, including Community Development Block Grant and HOME Investment Partnership Program.
Continuum of Care (CoC)	Continuum of Cares (CoCs) are groups of stakeholders, service providers, and concerned citizens working together to promote communitywide commitment to the goal of ending homelessness. The CoC works to quickly rehouse homeless individuals and families while minimizing the trauma and dislocation caused to homeless individuals, families, and communities by homelessness; promotes access to and effect utilization of mainstream programs by homeless individuals and families; and optimizes self-sufficiency among individuals and families experiencing homelessness.
Continuum of Care (CoC) Board of Directors	The Pinellas Continuum of Care Board of Directors has 27 members. The Board includes nine elected officials and sixteen community leaders; (four service experts, two faith-based organizations representatives, two business representatives, a representative of the Juvenile Welfare Board, three Housing Authority representatives, one healthcare representative, one at-large representative and two homeless or formerly homeless representatives).
Coordinated Entry (CE)	A standardized access, assessment, and referral process for housing and other services across agencies in a community. Coordinated entry processes are intended to help communities prioritize assistance to ensure that persons who are most in need of assistance receive it in a timely manner. The HLA administers the Coordinated Entry Process on

behalf of the CoC. All CoC funded projects must receive their referrals via CE

CoPP	City of Pinellas Park
CoSP	City of St. Petersburg
Data and System Performance Committee (DSP)	The Data and System Performance Committee (DSP) coordinates HMIS data collection, reviews systems performance measures and reviews all PIT/HIC/AHAR data. They also scan the environment for best practices and innovations and evaluate outcomes of the CoC overall and projects funded under HUD.
Department of Children and Families (DCF)	A state agency that provides social services to children, adults, refugees, domestic violence victims, human trafficking victims, the homeless community, childcare providers, disabled people, elderly. DCF funds some HLA programs.
DCF Statewide Homeless Report	The Florida Council on Homelessness submits an annual report to the Florida Governor and Legislature summarizing recommended actions to reduce homelessness, as well as data concerning those persons currently experiencing homelessness in Florida.
Disability	An individual with one or more of the following conditions: A. A physical, mental, or emotional impairment, including impairment caused by alcohol or drug abuse, post-traumatic stress disorder, or brain injury that: (1) Is expected to be long-continuing or of indefinite duration; (2) Substantially impedes the individual's ability to live independently; and (3) Could be improved by the provision of more suitable housing conditions. B. A developmental disability, as defined in section 102 of the Developmental Disabilities Assistance and Bill of Rights Act of 2000 (42 U.S.C. 15002); or C. The disease of acquired immunodeficiency syndrome (AIDS) or any condition arising from the etiologic agency for acquired immunodeficiency syndrome (HIV).
Directions for Living (DFL)	Directions for Living
Diversion	An intervention for households who have lost their housing and are about to enter shelter or sleep outside. Services offered may include but are not limited to conflict mediation and financial assistance.

Diversity, Equity, and Inclusion Committee (DEI)	The Diversity, Equity, and Inclusion Committee (DEI) provides insight and advice on promoting diversity, equity, and inclusion in the CoC. The committee will consider and develop strategies for board consideration that foster greater participation and make the CoC more accommodating and reflective of members from diverse backgrounds, perspectives, and abilities. The committee will be aware of and ensure coordination and collaboration of diversity, equity, and inclusion efforts throughout the CoC.
Domestic Violence (DV)	Domestic violence and emotional abuse are behaviors used by one person in a relationship to control the other. Partners may be married or not married; heterosexual, gay, or lesbian; living together, separated, or dating.
Duplication of Benefits	A duplication occurs when a beneficiary receives assistance from multiple sources for a cumulative amount that exceeds the total need for a particular recovery purpose. The amount of the duplication is the amount of assistance provided in excess of need.
Emergency Shelter (ES)	Emergency Shelter
Emergency Housing Voucher (EHV)	Additional housing choice vouchers authorized by the American Rescue Plan in March 2021. Vouchers were given to public housing authorities to assist individuals and families who are homeless, at risk of homelessness, fleeing, or attempting to flee, domestic violence, or were recently homeless or have a high risk of housing instability.
Emergency Rental Assistance (ERA)	A federally funded program providing rental and utility assistance to tenants who have been affected, directly or indirectly, by COVID-19 who are at risk of being homeless. Eligible Pinellas County tenants: • Rent your home, apartment, or other residential dwelling in Pinellas County, Florida. • Earn an income at or below 80% of the area's median income (AMI). • Have qualified for unemployment, experienced a loss of income, incurred significant costs or faced financial hardships due to the COVID-19 Public Health Emergency. • Are at risk of losing their home, experiencing housing instability or are living in unsafe or unhealthy conditions.
Emergency Solutions Grant (ESG)	A federal program which provides funding for a variety of homeless services including homeless prevention and rapid re-housing. ESG was formerly known as Emergency Shelter Grants, with the name change occurring in 2009.

ESG-CV	Emergency Solutions Grant – Coronavirus. Additional CDBG funding authorized by the CARES Act in March 2020.
Eviction	The dispossession of the tenant from the leased unit as a result of the termination of tenancy. This includes expiration [of the lease or termination prior to the end of a lease term. Eviction prior to the end of the lease term usually results from tenant violations of the lease provisions, such as failure to pay0 rent or damage to the unit.
Eviction Diversion (ED)	Eviction Diversion is an intervention that involves legal aid and mediation to landlords and tenants involved in an eviction-related dispute. It can include payment of past-due rent to keep a tenant in a unit, and/or housing navigation services and financial provisions for relocation to a new unit.
Extremely Low Income	Households with incomes below 30 percent of area median income.
Fair Housing Act	Protects people from discrimination when they are renting or buying a home, getting a mortgage, seeking housing assistance, or engaging in other housing-related activities. Additional protections apply to federally-assisted housing. The Fair Housing Act prohibits discrimination in housing because of race, color, national origin, religion, sex, familial status, or disability. The Fair Housing Act covers most housing. In very limited circumstances, the Act exempts owner-occupied buildings with no more than four units, single-family houses sold or rented by the owner without the use of an agent, and housing operated by religious organizations and private clubs that limit occupancy to members.
Fair Market Rent (FMR)	HUD calculation of a mid-market rent for localities that are established by unit size and updated each year. FMR is sometimes used as a ceiling for allowable rent in Section 8 or other Tenant-Based Rental Assistance programs.
Family	A family includes, but is not limited to, regardless of marital status, actual or perceived sexual orientation, or gender identity, the following: • A single person, who may be an elderly person, displaced person, disabled person, near-elderly person, or any other single person; or, • A group of persons residing together, and such group includes, but is not limited to: ○ A family with or without children (a child who is temporarily away from the home because of placement in foster care is considered a member of the family);

o   An elderly family;
o   A near-elderly family;
o   A disabled family;
o   A displaced family; and,
o   The remaining member of a tenant family.

Federal Poverty Level (FPL)	A measure of income issued every year by the Department of Health and Human Services (HHS). Federal poverty levels are used to determine eligibility for certain programs and benefits.
Fiscal Year (FY)	The HLA's fiscal year is October 1 – September 30
Front Door	A centralized location(s) where individuals and families can access housing and supportive services.
FSI	Family Services Initiative - This project helps families with minor children prevent child protection investigations, homelessness, and further social service engagement by providing families with wrap-around services to meet families' basic needs.
F-SPDAT	Family- Service Prioritization Decision Assistance Tool
F-VI-SPADAT	Family Vulnerability Index - Service Prioritization Decision Assistance Tool
Funders Council	Makes recommendations to the full CoC Board on funding of homeless/at-risk programs and services, either in response to CoC Board requests or on issues raised by Funders Council members. Makes Recommendations on strategically aligning funding resources available for homeless/at-risk programs and services based on CoC Board approved priorities, to make the most effective use of scarce resources.
Grant Inventory Worksheet (GIW)	Document annually submitted to HUD confirming the amount of renewal funding to be requested by the CoC (lists the past CoC grants eligible for renewal in the upcoming competition year).
H2H	Hotel to Housing Programs
Harm Reduction	Anything done to eliminate or reduce the harmful or deadly consequences of a behavior.
Habitability Inspection	An inspection completed to determine whether or not a dwelling is habitable, meaning that it is suitable and fit for a person to live in (i.e., free of defects that endanger the health and safety of occupants)

HEARTH Act	Homeless Emergency Assistance and Rapid Transition to Housing - A federal act which amended and reauthorized the McKinney-Vento Homeless Assistance Act. The legislation increased priority on homeless families with children and significantly increased resources to prevent homelessness.
HEP	Homeless Empowerment Program
HIPPA	Health Insurance Portability and Accountability Act of 1996
HMIS	Homeless Management Information System - A federally and state mandated computerized database system for programs serving homeless persons, especially programs receiving certain federal homeless program funds. The HMIS system is intended to provide the data foundation for program outcome and evaluation monitoring.
HMIS Lead Agency	Entity designated by the CoC in accordance with HUD's CoC Program interim rule to operate the HMIS on the CoC's behalf. The HMIS Lead designated by the CoC may apply for CoC Program funds to establish and operate its HMIS
HOME Investment Partnerships Program (HOME)	A HUD grant program that provides housing subsidies to local and state governments who are recognized as participating jurisdictions. The money can be used to purchase, rehabilitate, or construct housing; it can be used to subsidize rents of tenants as well.
Homeless	HUD defines four categories of homelessness: 1. Literally Homeless - Individual or family who lacks a fixed, regular, and adequate nighttime residence 2. Imminent Risk of Homelessness - Individual or family who will imminently lose their primary nighttime residence within 14 days 3. Homeless Under Other Federal Statutes 4. Fleeing or Attempting to Flee Domestic Violence
Homeless Prevention	An intervention for households who currently have housing but are at high risk of homelessness. Services may include but are not limited to case management and financial assistance.
Household	All the people who occupy a housing unit. A household includes the related family members and all the unrelated people, if any, such as lodgers, foster children, wards, or employees who share the housing unit. A person living alone in a housing unit, or a group of unrelated people sharing a housing unit such as partners or roomers, is also counted as a household.

Housing Choice Voucher (HCV)	Rental subsidy program (also known as Section 8).
Housing First	Housing First is an approach to ending homelessness that centers on the concept that a homeless individual or household's first and primary need is to obtain stable housing, and that other issues that may affect the household can and should be addressed once housing is obtained.
Housing Inventory Count (HIC)	Continuum of Care (CoC) Homeless Assistance Programs Housing Inventory Count Reports provide a snapshot of a CoC's HIC, an inventory of housing conducted annually during the last ten days in January. The reports tally the number of beds and units available on the night designated for the count by program type.
Housing Navigation	Housing navigation is the practice of pairing a homeless individual, or an individual referred from Eviction Diversion, with a trained housing navigator. Together, they work to find, obtain, and make a plan to maintain housing. At the Homeless Leadership Alliance of Pinellas (HLA), housing navigation activities may include searching for housing, developing a housing plan, completing inspections, starting utility services, and moving into housing.
Housing Opportunities for People with AIDS (HOPWA)	The HOPWA Program was established by HUD to address the specific needs of persons living with HIV/AIDS and their families. HOPWA makes grants to local communities, states, and nonprofit organizations for projects that benefit low-income persons medically diagnosed with HIV/AIDS and their families.
Housing Quality Standards (HQS) Inspection	An inspection which all units must pass before assistance can be paid on behalf of a family and at least annually throughout the term of the assisted tenancy. HQS define "standard housing" and establish the minimum criteria for the health and safety of program participants.
HUD	U.S. Department of Housing and Urban Development - The federal department which allocates most funding pertaining to housing and homelessness.
Income-Based Rent	Income-based rent is set so that an eligible household would pay no more than 30% of their adjusted income toward housing costs, including utilities, each month. Unlike units with flat rents, the amount a household contributes towards housing costs may fluctuate with changes to household income, size, or circumstances.

Intake	The series of steps taken when a household or individual enters a new program. This often includes information gathering, HMIS data entry, and may include assessment.
Interdisciplinary Team (IDT) Staffing	A meeting between everyone involved with a case – including the client – to coordinate care, improve communication, encourage teamwork, and promote optimal care
JWB	Juvenile Welfare Board – A countywide special taxing district responsible for helping children lead healthy, successful, and satisfying lives.
Landlord	The owner of property (such as land, houses, or apartments) that is leased or rented to another.
Lead Agency	The Pinellas Continuum of Care appoints the CoC Lead Agency that will complete designated work tasks assigned by the Pinellas Continuum of Care and will provide meeting support for the Pinellas Continuum of Care Board and committees. All responsibilities are documented in the Pinellas Continuum of Care Lead Agency Memorandum of Understanding.
Lease	A written agreement between an owner and a household for the leasing of a decent, safe and sanitary dwelling unit to the household. The lease typically includes the amount of rent, down payment requirements and length of lease term. It may also contain other conditions of use, such as occupancy limits, restricting pets or prohibiting smoking.
Lived Experience Advisory Committee (LEAC)	A CoC committee that advises CoC Board on homeless / at-risk services, concerns, and actions. Members include individuals who have experienced homelessness in Pinellas.
Low Income	A household whose combined income does not exceed 80% of the median family income for the area
Low Income Housing Tax Credit (LIHTC)	A federal program which grants tax credits to investors in low-income housing projects.
Mainstream Provider	Agency or entity that can provide necessary services or assistance to persons served by coordinated entry. Examples of mainstream system providers include hospitals, mental health agencies, and schools.
Market Value	The most probable price that a property should bring in a competitive and open market. This is provided that all conditions requisite to a fair sale are present, the buyer and seller are knowledgeable and acting prudently, and the price is not affected by any undue stimulus.

McKinney-Vento Homeless Assistance Act	The McKinney-Vento Homeless Assistance Act authorizes the federal Education for Homeless Children and Youth Program and is the primary piece of federal legislation related to the education of children and youth experiencing homelessness.
Memorandum of Understanding (MOU)	A memorandum of understanding (MOU) is a written agreement between two or more parties that expresses their shared goal(s) and the action(s) to be taken by each party
Moderate/Medium Income	Households whose incomes are between 81% and 95% of the Area Median Income, as adjusted for household size.
National Alliance to End Homelessness (NAEH)	A nonpartisan, nonprofit organization whose sole purpose is to end homelessness in the United States. Using research and data to find solutions to homelessness, NAEH works with federal and local partners to create and implement a solid base of policy and resources that support those solutions.
NCS	Non-Congregate Shelter
Not In My Backyard (NIMBY)	The opposition of residents to the nearby location of something they consider undesirable.
Notice of Funding Opportunity (NOFO)	Notice of Funding Opportunity
Notice of Funding Availability (NOFA)	A NOFA is issued by a governmental body, foundation, etc. which is looking for organizations or individuals to submit proposals in response to a funding opportunity, generally a grant.
Neighborhood Stabilization Program (NSP)	HUD's Neighborhood Stabilization Program provides emergency assistance to state and local governments to acquire and redevelop foreclosed properties that might otherwise become sources of abandonment and blight within their communities.
Projects for Assistance in Transition from Homelessness (PATH)	Program to provide outreach and services to people with serious mental illness who are homeless, in shelter or on the street, or at imminent risk of homelessness.
Pinellas County Health and Human Services (PCHHS)	Pinellas County Health and Human Services

Personal Enrichment Through Mental Health Services (PEMHS)	Personal Enrichment Through Mental Health Services
Permanent Housing (PH)	A general name for a variety of housing projects which are ongoing and unending. Also see PSH.
Permanent Supportive Housing (PSH)	PSH is permanent housing, with indefinite leasing or rental assistance, paired with supportive services to assist homeless persons with a disability or families with an adult or child member with a disability achieve housing stability.
Personally Identifiable Information (PII)	Any representation of information that permits the identity of an individual to whom the information applies to be reasonably inferred by either direct or indirect means. Examples include a full name, Social Security number, driver's license number, bank account number, and email address.
Pinellas Board of County Commissioners (PCBCC)	Pinellas County Board of County Commissioners
Pinellas Community Foundation (PCF)	Pinellas Community Foundation
Pinellas County Property Appraiser's Office (PCPAO)	Pinellas County Property Appraiser's Office
Point In Time (PIT)	A HUD-mandated biennial count of persons experiencing homelessness on a specified day of the year intended to provide a snapshot report on the extent of homelessness.
Property Manager	An individual or company that is hired to oversee the day-to-day operations of a unit of real estate. Property owners and real estate investors typically hire property managers when they are unwilling or unable to manage the properties themselves.
Project-Based	Project-based housing assistance, as opposed to Tenant-based, is a broad category of affordable housing programs where the rental subsidy is tied to the apartment community or the individual unit. When a tenant moves out of a Project-based assistance unit, the tenant will no longer benefit from the unit's subsidy.

Providers Council	Makes recommendations to the full CoC Board on homeless/at-risk services system issues, concerns and needed actions, either in response to CoC Board requests or on issues raised by Providers Council members. The membership of the Providers Council shall include representatives from homeless/at-risk service providers and other organizations that are actively involved in services that affect homeless/at-risk target groups in Pinellas County.
Public Housing Authority (PHA)	A local quasi-governmental agency that typically owns and manages public housing units and may administer a Section 8 program.
Quarterly Performance Report (QPR)	QPRs contain project names, activity descriptions, project locations, national objectives, funds budgeted and expended, funding sources, numbers of properties and housing units, beginning, and ending dates of activities, and numbers of low- and moderate-income persons or households benefiting from the use of Neighborhood Stabilization Program funds.
Rapid Re-Housing (RRH)	Rapid re-housing is an intervention designed to help individuals and families to quickly exit homelessness and return to permanent housing. Rapid re-housing assistance is offered without preconditions and the resources and services provided are typically tailored to the unique needs of the household. The core components of a rapid rehousing program are housing identification; rent and move-in assistance (financial); and case management and services.
Reasonable Accommodation	A change, exception, or adjustment to a rule, policy, practice, or service that may be necessary for a person with a disability to have an equal opportunity to use and enjoy a dwelling, including public and common use spaces.
Redlining	A discriminatory practice that puts services (financial and otherwise) out of reach for residents of certain areas based on race or ethnicity. It can be seen in the systematic denial of mortgages, insurance, loans, and other financial services based on location (and that area's default history) rather than on an individual's qualifications and creditworthiness. Notably, the policy of redlining is felt the most by residents of minority neighborhoods.
Release of Information (ROI)	Client consent to release private or protected information.
Rent Reasonableness	A standard set by the U.S. Department of Housing and Urban and Development (HUD) to ensure that rental assistance payments made by housing agencies are reasonable in relation to comparable nearby units.

Request for Information (RFI)	A request for information is a common business process whose purpose is to collect written information about the capabilities of various suppliers. Normally it follows a format that can be used for comparative purposes. An RFI is primarily used to gather information to help make a decision on what steps to take next.
Request for Proposal (RFP)	An RFP is a request for organizations or individuals to submit proposals/bids to provide services or a product outlined in the RFP.
Request for Qualifications (RFQ)	A request for proposals to select a consultant or partner that focuses less on cost and more on experience. It may generate a list of bidders who are then used for an RFP process, or it may lead to a collaborative process to determine projects costs.
Right of First Refusal	A provision in an agreement that requires the owner of a property to give another party the first opportunity to purchase or lease the property before they offer it for sale or lease to others
Safe Haven (SH)	A safe haven is a form of supportive housing that serves hard-to-reach homeless persons with severe mental illness who are on the street and have been unable or unwilling to participate in supportive services.
Section 8	A federally funded rent-subsidy program for low-income households recently renamed the Housing Choice Voucher (HCV) program. Under Section 8, a tenant pays 30-40% of their monthly income for rent and the government pays the remainder, up to a set maximum Fair Market Rent. Section 8 subsidies can be tenant-based (awarded to a tenant household that can take them to any private landlord) or site-based/project-based (awarded to an owner who uses it on the same unit over time).
Security Deposit	Money that is given to a landlord, lender, or seller of a home or apartment as proof of intent to move-in and care for the domicile. Security deposits can be either be refundable or nonrefundable, depending on the terms of the transaction. A security deposit is intended as a measure of security for the recipient and can also be used to pay for damages or lost property.
Shelter Plus Care (S+C or SPC)	SPC provided rent subsidies to households that are homeless and in which at least one adult has a disability that prevents the person/household from being able to live independently.
Social Action Funding (SAF)	Social Action Funding

SSI/SSDI Outreach, Advocacy, and Recovery (SOAR)	SSI/SSDI Outreach, Advocacy, and Recovery: A technical assistance initiative that assists people who are homeless to successfully apply for Social Security Income (SSI) and Social Security Disability Incomes (SSDI). The initiative helps people who are eligible for such benefits to receive them sooner.
Social Security Disability Income (SSDI)	Social Security Disability Insurance is a payroll tax-funded federal insurance program of the United States government. It is managed by the Social Security Administration and designed to provide monthly benefits to people who have a medically determinable disability that restricts their ability to be employed.
SPDAT or "Full SPDAT"	Service Prioritization Decision Assistance Tool
SPL	The Shelter Prioritization List
Steering	The practice of influencing a buyer's choice of communities based upon one of the protected characteristics under the Fair Housing Act
Strategic Planning Committee	This committee shall make recommendations to the full CoC Board for the implementation of a Housing First approach for the homeless system of care in Pinellas County, with a goal of homelessness being rare, brief and non-recurring. This committee focuses on the development of strategic goals and planning for the CoC to provide a sense of direction and outlines measurable goals that will be the guide for driving day-to-day decisions of the CoC Board. Also responsible for developing a means for evaluating progress and changing approaches when moving forward.
Subsidy	A direct or indirect payment to an individual or family to assist with housing and basic needs.
Sunshine Law	The Pinellas Continuum of Care previously operated in accordance with Chapter 119, Florida Statutes – the "Sunshine Law" – and thus any materials given to Board Members or staff were considered public records and are retained and, upon request, made available to the public and media. HLA and the CoC operate in "the spirit of Sunshine."
Supplemental Nutrition Assistance Program (SNAP)	SNAP provides nutrition benefits to supplement the food budget of needy families so they can purchase healthy food and move towards self-sufficiency.
Supplemental Security Income (SSI)	The Supplemental Security Income (SSI) program provides monthly payments to adults and children with a disability or blindness have income and resources below specific financial limits. SSI payments

	are also made to people aged 65 and older without disabilities who meet the financial qualifications.
Supportive Services	Services that may assist homeless participants in the transition from the streets or shelters into permanent or permanent supportive housing, and that assist persons with living successfully in housing.
Supportive Services for Veteran Families (SSVF)	Supportive Services for Veteran Families was established by the United States Department of Veterans Affairs in 2011 to create public-private partnerships to rapidly re-house homeless Veteran families and prevent homelessness for very low-income Veterans at imminent risk due to a housing crisis.
SVdP	St. Vincent de Paul
Technical Assistance (TA)	Refers to the provision of support training to organizations that is intended to help the organization strengthen its ability to perform key tasks in the future.
Temporary Assistance to Needy Families (TANF)	The major welfare program that provides income support to poor families. Replaced AFDC (Aid to Families with Dependent Children).
Tenant-Based	Tenant-based housing assistance, as opposed to project-based, is a broad category of affordable housing programs where the rental subsidy is tied to the tenant, rather than the property. When a tenant moves out of a project, they will continue to benefit from the subsidy.
Transitional Housing (TH)	A general name for a variety of time-limited housing programs that are intended to help households ready themselves to move to permanent housing. HUD TH programs are limited to homeless households and are intended to serve households for no more than 2 years and usually have specific supportive services as a part of the program.
Trauma Informed Care	A trauma-informed approach to care acknowledges that health care organizations and care teams need to have a complete picture of a patient's life situation — past and present — to provide effective health care services with a healing orientation. Adopting trauma-informed practices can potentially improve patient engagement, treatment adherence, and health outcomes, as well as provider and staff wellness.

U.S. Department of Housing and Urban Development (HUD)	Federal agency responsible for administering housing and homelessness programs including the CoC and ESG Programs.
U.S. Department of Veterans Affairs (VA)	A federal government agency that provides benefits to veterans and their dependents, including health care, educational assistance, financial assistance, and guaranteed home loans.
U.S. Interagency Council on Homelessness (USICH)	The mission of the USICH is to coordinate the federal response to homelessness and to constellate a national partnership at every level of government and every element of the private sector to reduce and end homelessness in the nation.
Veterans Administration Supportive Housing (VASH)	HUD-VA Supportive Housing Program
Violence Against Women Act (VAWA)	U.S. federal legislation, initially passed in 1994, that expanded the juridical tools to combat violence against women and provide protection to women who had suffered violent abuses.
VI-SPDAT	Vulnerability Index - Service Prioritization Decision Assistance Tool
Warm Hand Off	A transfer of care between housing and/or supportive service providers.
Written Standards	A document synthesizing key elements of HUD regulations with the processes and priorities of the CoC to ensure that all projects that receive HUD and ESG funding are administered fairly and methodically.
Youth Action Board (YAB)	The Pinellas County Continuum of Care Youth Action Board (YAB) exists to provide youth review, input, and direction into CoC plans to prevent and end youth homelessness in Pinellas County, Florida. The YAB uses life experiences to find solutions for prevention and ending youth homelessness. The YAB's mission is to or at-risk of experiencing homelessness, to prevent them from becoming adults that experience homelessness.

What is the Continuum of Care (CoC)?

The Pinellas CoC is a diverse group of stakeholders with a shared vision of making homelessness rare, brief, and a one-time experience. The mission of the Pinellas CoC is to coordinate all community partners, systems, and resources available to prevent, divert, and end homelessness in Pinellas County.

Benefits of Membership

- Elect CoC leadership
- Participate in critical workgroups and events
- Access Homeless Management Information System (additional fees are required)
- Inclusion in the Homeless Resource Guidebooks
- Networking opportunities

- Participate in CoC Committees and Councils
- Updates, newsletters, and advocacy alerts
- Sharing events, volunteer opportunities, and program updates
- Educational opportunities and trainings
- Participate in Case Conferencing

Membership Types

*Scholarships and sliding fee scales are available

Lived Experience — Individuals who live, work, or go to school in Pinellas County and have experienced homelessness within the last 7 years; $0 annually

Youth Advocate — Individuals ages 24 and younger who live, work, or go to school in Pinellas County; $0 annually

Community Advocate — Individuals who live, work, or go to school in Pinellas County; $20* annually

Faith-Based Organization — Faith-based organizations serving Pinellas County; $150* annually

Nonprofit/Government Partner — 501(c)(3) organizations and government entities serving Pinellas County; $300* annually

For-Profit Business Partner — Revenue-based businesses located in Pinellas County; $500* annually

Affiliate — Individuals who live, work, or go to school in Pinellas County; ineligible to vote in CoC elections or serve on CoC Committees or Councils; $0 annually

Join the CoC today: www.PinellasHomeless.org/pinellascoc

158

CoC Councils and Committees

Board of Directors
Elected and appointed leaders who make policy decisions on behalf of the CoC — evaluating needs, implementing strategic responses, and measuring results.

Funders' Council
Advises CoC Board on funding of homeless and at-risk programs and services, coordinating local and community-wide planning.

Providers' Council
Advises CoC Board on funding of homeless and at-risk services system issues, concerns and needed actions.

Advocacy Committee
Advocates on behalf of the CoC, develops an annual advocacy agenda, and addresses advocacy issues as they arise. Meetings not yet scheduled.

Data and System Performance Committee
Coordinates HMIS data, reviews system performance measures and data, informs best practices, and recommends funding priorities.

Diversity, Equity, and Inclusion Committee
Provides insight into and develops strategies for promoting diversity, equity, and inclusion in the CoC.

Lived Experience Advisory Committee
Advises CoC Board on homeless / at-risk services, concerns, and actions. Members include individuals who have experienced homelessness in Pinellas.

Point in Time (PIT) Planning Committee
Plans annual Point in Time Count (PIT), designing surveys, coordinating volunteers, maintaining data quality, and evaluating programs.

Youth Action Board
Advises CoC Board on services for homeless / at-risk youths. Members include youths who have experienced homelessness. Meetings not yet scheduled.

Policies

- Membership follows the calendar year (January—December).
- Membership applications and fees are due annually and are non-refundable.
- One membership = one vote. Each organization may assign one voting member.
- Organizations may assign non-voting members to attend many CoC meetings and workgroups.
- The CoC practices Housing First, the belief that everyone is housing ready without preconditions.

Join the CoC today: www.PinellasHomeless.org/pinellascoc