

# **ROCC HMIS P&P Packet**

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# What is a Continuum of Care (CoC)?

## What is the ROCC?

Per HUD the Continuum of Care (CoC) is designed to...

*Promote communitywide commitment to the goal of ending homelessness; provide funding for efforts by nonprofit providers, and State and local governments to quickly rehouse homeless individuals and families while minimizing the trauma and dislocation caused to homeless individuals, families, and communities by homelessness; promote access to and effect utilization of mainstream programs by homeless individuals and families; and optimize self-sufficiency among individuals and families experiencing homelessness.*

In other words, a CoC is a group comprised of homeless service providers, public housing agencies, veteran services, advocates, victim service providers, and others dedicated to carrying out the responsibilities of ending homelessness as prescribed by [the CoC Program Interim Rule](#). The responsibilities include:

- designing and managing a Homeless Management Information System (HMIS),
- CoC planning and operation,
- and designing and implementing the process associated with applying for CoC program funds, among others.

Oregon currently has seven Continuums of Care serving our homeless population. The [Rural Oregon Continuum of Care](#) (ROCC) is the largest CoC in Oregon and encompasses 26 rural counties across the state. Given the size, the ROCC is broken out into 6 “regions” (see below).



## **What is a Continuum of Care (CoC)?**

### **What is the ROCC?**

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ROCC Coordinators Jessi Adams and Caleb Green work to coordinate committees, facilitate planning needs, coordinate the annual HUD CoC Grant, and generally assist with needs from the member homeless service providers.

The HMIS Lead, David Mulig, drives the ROCC forward on HMIS requirements, reporting, and technical assistance and training to the member providers.

If you have further questions about the ROCC and its functions, please reach out to Caleb Green.

#### *Contact Information:*

Jessi Adams  
ROCC Lead  
[Jessi@caporegon.org](mailto:Jessi@caporegon.org)  
503-314-0529

Caleb Green  
ROCC Training and  
Technical Assistance  
Coordinator  
[Caleb@caporegon.org](mailto:Caleb@caporegon.org)  
503-867-0682

David Mulig  
HMIS Lead  
[David@caporegon.org](mailto:David@caporegon.org)  
541-842-0087

# ROCC Homeless Management Information System ServicePoint

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## **HOMELESS MANAGEMENT INFORMATION SYSTEM (HMIS)**

A Homeless Management Information System is a local information technology system used to collect client-level data and data on the provision of housing and services to homeless individuals and families and persons at risk of homelessness. Each Continuum of Care (CoC) is responsible for selecting an HMIS software solution that complies with HUD's data collection, management, and reporting standards. For our CoC OR-505, we use **ServicePoint**, a system managed through the vendor Wellsky.

## **HMIS DATA**

CoCs are charged with designing a local “system” to assist sheltered and unsheltered people experiencing homelessness and providing the services necessary to help them access housing and obtain long-term stability. More broadly, CoCs are to promote community-wide planning and strategic use of resources to address homelessness; enhance coordination and integration with mainstream resources and other programs targeted to people experiencing homelessness; and improve data collection and performance measurement.

## **HMIS DATA QUALITY**

To evaluate data quality, four annual HUD data projects requires each CoC to send data directly from HMIS. They are System Performance Measures (SPM), Longitudinal Systems Analysis (LSA), Annual Point-In-Time (PIT) and Annual Housing Inventory Count. Data for each are exported to HUD for review and HUD officials will contact CoCs for data clarification and/or corrections as needed.

### **(1) System Performance Measures (SPM):**

A critical aspect of our work is a focus on viewing the local homeless response as a coordinated system of homeless assistance options as opposed to homeless assistance programs and funding sources that operate independently in a community. To facilitate this perspective HUD requires communities to measure their performance as a coordinated system, in addition to analyzing performance by specific projects or project types.

To do this, HUD uses HMIS data to evaluate each CoCs system performance in two areas:

1. **HUD UDEs (Universal Data Elements)** - Universal Data Elements are those data elements required by all programs regardless of project type. They include demographic data and other data pieces such as living situation at entry, housing move-in dates, household structure to list a few. In addition, projects such as Runaway Homeless Youth and VA programs have a set of their own UDEs.
2. **Performance Measures** - The following are those measures calculated using HMIS data:
  - Length of Time Persons Remain Homeless
  - The Extent to which Persons who Exit Homelessness to Permanent Housing Destinations Return to Homelessness less than 6 months, within 6 to 12 Months to 24 months or more.
  - Number of Homeless Persons
  - Employment and Income Growth for Homeless Persons in CoC Program-funded Projects
  - Number of Persons who Become Homeless for the First Time

# ROCC Homeless Management Information System ServicePoint

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- Homelessness Prevention and Housing Placement of Persons
- Preventing Returns to Homelessness within 6, 12, 24 or Greater Months Among This Subset of Families and Youth
- Successful Placement from Street Outreach and in/or Retention of Permanent Housing

## **(2) Longitudinal System Analysis (LSA)**

The U.S. Department of Housing and Urban Development (HUD) submits an Annual Homeless Assessment Report based on the LSA to the United States Congress. This is a national-level report that provides information about homeless service providers, people and households experiencing homelessness, and various characteristics of that population. It informs strategic planning for federal, state, and local initiatives designed to prevent and end homelessness. Though much like System Performance Measures, the main difference in the LSA is that it further investigates a larger homeless patterns of system use.

## **(3) Annual Point-In-Time Count (PIT)**

CoCs must plan and conduct a Point-in-Time Count of homeless persons within the geographic area. HUD defines Point-in-Time Count as a “count of sheltered and unsheltered homeless persons carried out on one night in the last 10 calendar days of January or at such other time as required by HUD.”

CoCs must ensure that their count estimate accurately reflects what they believe to be the entire sheltered and unsheltered population for the CoC’s entire geographic area. For example, if a CoC only counts unsheltered people in selected areas, they need to consider whether there are likely unsheltered homeless persons in other areas of the CoC and, if so, how to account for them. This is particularly important when entire counties, communities, or larger geographic areas are not covered such as some of our rural counties within the ROCC.

## **(4) Housing Inventory Count (HIC)**

Coinciding with PIT, the HIC is a point-in-time inventory of projects within the CoC that provide beds and units dedicated to serving persons who are homeless. It is intended to provide HUD and CoCs with information about the shelter and housing capacity of homeless crisis response systems. It should reflect the number of beds and units available on the night designated for the count that are dedicated to serve persons who are homeless (and, for permanent housing projects, persons who were homeless at entry), per the HUD homeless definition.

# ROCC HMIS Training Process

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It is the responsibility of Agency Administrator to ensure that all new users at their site are trained to be able to use HMIS correctly and to meet and/or exceed the minimum benchmarks for HMIS data. Agency administrators may also request special training for an individual staff or a team and have it tailored specifically to their needs.

## *Process*

When an agency wants to add a new user, they, along with their supervisor, must sign the ROCC New User Agreement Form. This form is provided in this packet, is available on the ROCC website or can be requested by the HMIS Lead.

The new user must review, agree, and then sign their agreement to participate and follow the requirements outlined in the HMIS policy and procedures manual. The new user will have their direct supervisor approve the agreement and send it directly to the HMIS Lead or to the ROCC Training and Technical Assistance Coordinator (ROCC T/TA).

The HMIS Lead or ROCC T/TA will set the new user up in two training sites via the web. They conclude:

1. The [ServicePoint Training site](#) is where new and existing users can go to practice data entry without the fear of creating errors in the live data base.
2. The training site [Canvas](#) to access the required ROCC HMIS training videos, documents and instructions for completing the training.

Completion requires that each user create a fake household in the ServicePoint training environment and enroll them through completion in their agency projects. This gives new users the opportunity to enter data, practice the process and become familiarize with ServicePoint before accessing the Live Site.

Once the training is complete, the new user sends names or client ID of the fake client(s) to the HMIS Lead or ROCC T/TA who will review their work and answer questions. If everything looks satisfactory, the ROCC T/TA Coordinator will then add them to the Live Site informing their direct supervisor the process is complete.

It is the responsibility of the new user to complete the training at their own pace and notify the HMIS Lead or ROCC T/TA Coordinator once their work is completed. If they need extra assistance, they can always reach out for live one-on-one training.

## *Contact:*

ROCC T/TA Coordinator  
Caleb Green  
[Caleb@caporegon.org](mailto:Caleb@caporegon.org)  
503-867-0682

HMIS Lead  
David Mulig  
[David@caporegon.org](mailto:David@caporegon.org)  
541-842-0087

# ROCC Data Quality Management Plan

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## **INTRODUCTION**

The Rural Oregon Continuum of Care (ROCC), the HMIS Lead, and providers have created this Data Quality Management Plan (DQMP) to provide actionable, measurable steps to address data quality within the Homeless Management Information System (HMIS). Data quality within HMIS affects everything we do in our work to address and end homelessness, and its importance cannot be overstated.

While focusing on data quality for federally funded projects that enter data into HMIS is necessary to ensure accurate reporting for those grants, any project that enters data into HMIS contributes to the overall picture of homelessness within the ROCC, and therefore, is expected to participate in this DQMP.

The reasons why data quality is important are many, including but not limited to:

- Requirements based on funding the ROCC receives.
- Data quality, or lack thereof, can directly affect the funding opportunities for providers.
- Accurate reporting for federal, state, and local funding.
- The ability of the ROCC, and providers within the ROCC, to tell the story of homelessness as realistically and completely as possible; and
- The data entered in HMIS directly affects clients through the Coordinated Entry process and may determine which services they may or may not be eligible for.

The ROCC will work in conjunction with the HMIS Lead to ensure all providers have access to the tools they need to ensure high data quality, including training, data quality reports, encouragements to maintain a high level of data quality, and enforcements for non-responsiveness to data quality concerns. While the HMIS Lead is responsible for a large part of the overall DQMP, the ROCC will maintain a high level of involvement to ensure providers respond to data quality concerns and that the data quality within the HMIS is both acknowledged and addressed on an ongoing, iterative, continual basis and in an objective, data-driven manner.

The following addresses how the ROCC will both encourage and enforce the DQMP, with transparency about how a provider's data quality can bring about both incentives and consequences. The DQMP is then broken out into the various components of data quality as determined by the ROCC and documented in our Governance Documentation - Completeness, Timeliness, Accuracy, Consistency, and Bed Coverage/Utilization. Sections below include the baseline minimum requirements to maintain a sufficient level of data quality, and depending on the section, the baseline minimum requirement will be broken out by project type.

The DQMP is a living, evolving tool that will change as the community and its HMIS data needs change.

## **ENCOURAGEMENTS**

The ROCC works with the HMIS Lead to ensure providers have access to all the support and tools they need to ensure a high level of data quality in HMIS across the CoC. The ROCC will monitor data quality, in conjunction with the HMIS Lead, and the following encouragements and enforcements are in place to ensure providers understand the importance of data quality within HMIS.

1. The ROCC Board will ensure that data quality is on the meeting agenda, will review reports and will acknowledge providers meeting a high level of data quality both in the meeting minutes that are posted on the ROCC's website.
2. The ROCC will acknowledge the work of providers meeting a high level of data quality every quarter during the ROCC General Membership Meeting, via the ROCC e-newsletter, a formal letter to the agency



# ROCC Data Quality Management Plan

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- Executive Director, or other public forums requiring data quality review.
3. The ROCC will use data quality in HMIS during the annual rank and review process for ROCC dollars. To be eligible for ROCC dollars, projects will need to maintain a baseline threshold data quality requirement and will be awarded additional points for going above and beyond the baseline. Guidance on specifics of this process will be released each year with the local ROCC NOFA competition process.
  4. The ROCC and HMIS Lead will work with providers who do not currently use HMIS and talk through the reasons why they do not use HMIS for this work. Depending on the reasons, the ROCC and HMIS Lead will work with the providers to make HMIS a realistic option.

## **DATA QUALITY BENCHMARKS**

### **1. Data Completeness**

Data Completeness is usually one of the first pieces of overall data quality that is addressed because it is the simplest to measure - it is easy to report on what is or is not in HMIS, based on what is required to be in HMIS for any given project type.

Data Completeness looks at how much of the data fields for any given client, their project enrollment, and any required other provider, agency, or system data is complete to the degree to which all required data is known and documented. Data Completeness is reviewed on all HUD Universal Data Elements and specifically looks at missing or null values; “data not collected” values; and depending on the data field, “client doesn’t know”, “client refused”, and / or “other” values. HMIS reports identify the areas that need to be reviewed. It is the agency’s responsibility to gather as much information including by aiming to complete data.

Working with Agency Administrators, the HMIS Lead will help set up the Data Completeness reports in HMIS that can be run anytime or setup on a monthly or quarterly schedule. Those providers who fall below the baseline requirement for Data Completeness for their project type will be asked to clean up their data within two weeks after the end of the quarter. The ROCC recommends that agencies complete the data cleanup monthly to avoid difficulties meeting this timeline each quarter.

Review the encouragement section of this document to understand how the ROCC will acknowledge those agencies meeting and/or exceeding required expectations.

The ROCC agreed upon data quality benchmarks for a minimum 95% of data required for all project types: Coordinated Entry, Homeless Prevention, Rapid Rehousing, Permanent Supportive Housing and Transitional Housing. Street Outreach 95% requirement only applies after client has a Date of Engagement.

### **2. Data Accuracy**

Data Accuracy is not as easy to manage or monitor and requires specific reports that look at congruency between and among responses to data elements within the system, as well as checks between what the client has told an intake worker and what data is entered into HMIS. HUD and the ROCC’s goals are always 100% Data Accuracy.

To assist agency administrators, the HMIS Lead will provide a list of reports to run and review for data accuracy on a quarterly basis. The HMIS Lead will run the reports in tandem to assist those providers who are not meeting the benchmark for data accuracy and may ask to have the data clean up within a certain timeframe.

For consistent issues with data accuracy, agencies may be directed to complete a Data Quality Improvement Plan (DQIP) (see Data Quality Monitoring Visit Report and Data Quality Improvement Plan document).

The following are more specifics about how HUD describes data accuracy. The HMIS reports how data accuracy between and among data elements including:

# ROCC Data Quality Management Plan

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- Date of birth and project start date are not the same.
- Responses to [residence prior to project entry](#), length of time in previous place, approximate date homelessness started, number of times experiencing homelessness in the last three years, and number of months experiencing homelessness in the last three years do not conflict with each other)
- Disabling Condition (yes / no) and types of disabling conditions do not conflict.
- Health Insurance (yes / no) and sources of insurance do not conflict.
- Income (yes / no) and sources of income do not conflict.
- Non-Cash Benefits (yes / no) and sources of non-cash benefits do not conflict.
- Domestic violence victim / survivor and subsequent data elements are completed or if answered as no, the subsequent questions are not answered.
- Only one individual in a household is considered the Head of Household (HOH). A household must have one delineated and may not have more than one.
- Client location including the OR-505 CoC, County and City the client currently resides.
- All Veterans are of correct age; i.e. not younger than required age.

### **3. Data Timeliness**

Data entered in HMIS in a timely manner is necessary to ensure that clients receive the services they need in a quick and efficient manner. Additionally, timely data entry ensures that regular, accurate reporting can be done through HMIS. Users who enter data into HMIS earlier are less likely to make data entry errors and are more likely to focus on overall data quality. HUD recommends that projects data is entered into HMIS, at most, within 48 hours of collecting the information from the client.

The HMIS Lead will give Agency Administrators the reports to run to review Data Timeliness as part of the quarterly data review. It is recommended this occur monthly to avoid having many data corrections completed in the required two-week timeframe. Those providers who fall below the baseline requirement for Data Timeliness for their project type will be asked to work with the HMIS Lead to make sure that they can meet the Data Timeliness standard moving forward. For consistent issues with Data Timeliness, providers may be directed to create a Data Quality Improvement Plan (DQIP).

HMIS users of any Participating Agency must record individual client and household data, from initial intake, exit, service provision, or any other client interaction which necessitates any form of data entry into HMIS within three business days. The Program Entry Date must be the date of the initial intake and not the HMIS data entry date. The only exception is data entry for large mass emergency shelters extended to five business days for only basic HUD universal data elements and disability information.

#### **Data timeliness benchmarks:**

- Coordinated Entry, Homeless Prevention, Rapid Rehousing, Transitional Housing, Services Only and Street Outreach:
  - Live time or within 3 business days of contact with the client.
- Emergency Shelter
  - Live time or within 5 business days of contact with the client given that at time emergency shelters may have an influx of guests each evening.

### **4. User Access and Consistency**

Users with access to HMIS should be entering data on a regular and consistent basis, not only to prevent a backlog of data entry, but also to ensure users maintain familiarity with the HMIS and the workflows for which they are responsible.

## ROCC Data Quality Management Plan

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The HMIS Lead will monitor user log in and access to HMIS quarterly by running a report that shows when users last logged into the system. If users have not logged into HMIS within the last 45 days, they will be automatically locked out of the system. If the user responds that they do still need access, the HMIS Lead will contact the Agency Administrator with information pertaining to that users need in HMIS and to decide if remedial training is needed. If the HMIS Lead determines that a user does not meet data quality benchmarks, the HMIS Lead may require remedial training for the user.

If the user is non-responsive to any inquiries about their access to HMIS, the HMIS Lead will contact the Agency Administrator and the ROCC Lead for clarification. If the HMIS Lead is informed that the user is no longer an active participant in HMIS data entry, the user's license will be removed from HMIS. Should the HMIS not hear from either the user or the user's direct supervisor, the user license will be removed from the system. Agencies are responsible for the full cost of the HMIS license whether the user access HMIS or not.

### **DATA QUALITY MONITORING VISIT REPORT AND IMPROVEMENT PLAN**

The Data Quality Monitoring Visit Report will be used annually during agency monitoring to ensure that all HMIS participating agencies follow HMIS policies and procedures, agency agreements, user agreements, and any other documents governing the use of HMIS. If deficiencies are identified in any area during the monitoring visit, the Improvement Plan will be used to assist the agency in addressing issues using concrete, time-bound action steps.

If, at any time, the HMIS Lead has documented one or more ongoing issues related to data quality with a given agency (ongoing is defined as the issue lasting longer than a specific period as defined by the ROCC and HMIS Lead consecutively without resolution), an Improvement Plan will be implemented with the agency, with or without an accompanying monitoring visit.

Agencies currently on a Data Quality Improvement Plan will be shared with the ROCC Executive Committee with regular updates on progress.

*See Data Quality Monitoring Visit Report and Improvement Plan.*



## ROCC Homeless Management Information Systems (HMIS) Data Quality Monitoring Visit Report and Improvement Plan

Name of Agency:

Project Name(s):

Name(s) of Reviewers:

Date:

### Physical Security

Ascertain if the recipient has been compliant with HMIS requirements by adhering to the following:

a. Do the computers have an active and automatically updating antivirus software?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Yes	No	N/A
b. Do computers have a locked & password-protected screensaver?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Yes	No	N/A
c. Is there a secure internet?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Yes	No	N/A
d. Do computers use Windows 7 or later?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Yes	No	N/A

Comments:

## Project Compliance

a. If the agency has a website, are the current HMIS Policies and Procedures Published where clients can access them?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
b. Does the agency have HMIS Use Disclosure ROCC Release of Information on file for all clients?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
c. Is it the HMIS Use Disclosure present in 10 random file pulls?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
d. Is the ROCC Release of Information present in 10 random file pulls?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
e. All data completeness measures are within defined parameters (see HMIS Policy and Procedures Manual for details).	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
f. All data quality measures are within defined parameters (see HMIS Policy and Procedures Manual for details).	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Comments:			

## Data Collection

a. Is the agency capturing universal data elements on all clients?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
b. Is the agency capturing the required program-level data?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
c. Is data being entered in a timely manner (within 3 days)?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
d. All users have been trained on revised protocols and any new data standards by the system administrator.	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
e. All programs have a 95% or higher data quality score.	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
f. All users understand that clients cannot be denied services based on HMIS participation.	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Comments:			

### Upon completion of monitoring visit

Data Quality Improvement Plan Needed? \_\_\_\_\_Yes \_\_\_\_\_No

If yes, has plan been created? \_\_\_\_\_Yes \_\_\_\_\_No

## Data Quality Improvement Plan

Issue	Baseline Not Currently Being Met	How to Address	How Often and who is responsible	Date Completed
<p>[Example]</p> <p>Destination data completeness rate an issue for three consecutive reporting periods</p>	<p>Destination data completeness less than 95% (includes "no exit interview completed" responses)</p>	<p>In-person meeting with agency, HMIS Lead, and CoC to discuss what's happening "in real life" and "real world" implications of poor destination data completeness rates</p>	<p>Initially - ongoing, if needed (Agency, HMIS Lead, CoC)</p>	
		<p>Review paper intake / exit assessments to ensure necessary data elements are included on the forms</p>	<p>Initially (Agency, with input from HMIS Lead as needed)</p>	
		<p>Provide refresher training to HMIS users to ensure data entry for destination data is completed accurately</p>	<p>Ongoing, if needed (HMIS Lead)</p>	
		<p>Run data completeness report every two weeks</p>	<p>Ongoing (Agency and HMIS Lead)</p>	
		<p>Increase in destination data completeness for at least three consecutive months</p>	<p>Ongoing (Agency and HMIS Lead)</p>	

**DATA QUALITY IMPROVEMENT PLAN**

Date of Data Quality Improvement Plan (DQIP) Implementation: \_\_\_\_\_

Name of Organization:  
\_\_\_\_\_

Organization Contact and Information:  
\_\_\_\_\_

Name of Project(s) Included in DQIP

Organization Staff Responsible for DQIP:

_____ Staff Person	_____ Role
_____ Staff Person	_____ Role
_____ Staff Person	_____ Role

HMIS Lead Staff Responsible for DQIP:

_____ Staff Person	_____ Role
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CoC Staff Responsible for DQIP:

_____ Staff Person	_____ Role
_____ Staff Person	_____ Role



# ROCC HMIS Roles and Responsibilities

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*Background – The following is the Roles and Responsibilities of each partner working within the ROCC HMIS system regarding data entry, data quality, reporting, monitoring, etc. Partners include participating agencies and staff, Agency Administrators, HMIS Lead, ROCC Leads, OHCS Administrator, ROCC HMIS/ CE workgroup, and ROCC EC. Full descriptions of each partner can be found at the end of the document.*

## **DATA COLLECTION AND ENTRY**

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

## **HMIS OPERATIONS**

Develop and deliver training for new end users	HMIS Lead
Provide remedial or refresher training to end users	HMIS Lead
Develop and deliver training for medium to advanced-level users	HMIS Lead
Maintain documentation of completed training requirements	HMIS Lead, Agency Staff
Authorize/provide HMIS access or licenses to new end users	HMIS Lead
Remove HMIS access or licenses due to violation or end of employment at the HMIS-participating Participating agencies	HMIS Lead
Review HMIS data standards update for correctness and completeness	HMIS Lead, ROCC Leads, and ROCC EC
Manage project set up tasks	HMIS Lead
Provide troubleshooting/technical assistance via service desk activities.	HMIS Lead, ROCC Leads
Solicit feedback from HMIS stakeholders on HMIS policies and operations	HMIS Lead, ROCC Leads, ROCC EC
Provide communications about upcoming Participating agencies specific HMIS changes	HMIS Lead
Provide communications about CoC-wide or HUD-mandated HMIS changes	HMIS Lead
Document workflow needs by program	HMIS Lead, OHCS Administrator

## ROCC HMIS Roles and Responsibilities

Implement program-level workflow, features, and functionality	HMIS Lead, OHCS Administrator
Monitor the HMIS vendor against the terms and conditions of the contract	OHCS Administrator
Update and revise the HMIS vendor contract	OHCS Administrator
Review HMIS software functionality updates for correctness and accuracy	HMIS Lead
Test new features and functionality	HMIS Lead, ROCC Leads, OHCS Administrator

### **POLICIES AND PROCEDURES**

Develop data quality plans, policies, and procedures, including DQ benchmarks for timeliness, completeness, accuracy, and consistency	HMIS Lead, ROCC Leads
Approve data quality plans, policies, and procedures, including DQ benchmarks for timeliness, completeness, accuracy, and consistency	ROCC EC
Review data quality plans, policies, and procedures for appropriateness in relation to CoC needs	HMIS Lead, ROCC Lead, and ROCC EC
Implement DQ plans, policies, and procedures	HMIS Lead, ROCC Lead, and Participating agencies
Conduct monitoring and oversight of end users to ensure HMIS activities are implemented with fidelity to approved plans, policies, and procedures	HMIS Lead, ROCC Leads
Develop program- and user-level forms and documents (such as HMIS end user agreement or client releases of information)	HMIS Lead, ROCC Leads, and HMIS/ CE Workgroup
Define roles and responsibilities of HMIS end users	HMIS Lead, ROCC Leads, and HMIS/ CE Workgroup
Define roles and responsibilities of the HMIS decision-making entity across the CoC (e.g., executive board, designated committee, or work group)	HMIS Lead, ROCC Leads, and HMIS/ CE Workgroup
Define roles and responsibilities of HMIS Lead	ROCC EC
Review and approve HMIS data requests for external research/evaluation projects	HMIS Lead, ROCC Leads
Provide HMIS data to external researchers/evaluators	HMIS Lead
Participate in the HMIS Work Group	All agencies, HMIS Lead, ROCC Leads, OHCS Administrator

# ROCC HMIS Roles and Responsibilities

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## MONITORING AND REPORTING

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

# ROCC HMIS Roles and Responsibilities

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## Definitions -

### *Participating agencies –*

Local Homeless Service Provider including:

Agency admins

Follow this [link](#) to see a current list

Case Managers

Volunteers

### *HMIS Lead –*

CAPO-employed HMIS Admin, currently:

David Mulig – [David@caporegon.org](mailto:David@caporegon.org)

### *ROCC Leads –*

CAPO-employed CoC Coordinators, currently:

Jessi Adams – [jessi@caporegon.org](mailto:jessi@caporegon.org)

Caleb Green – [caleb@caporegon.org](mailto:caleb@caporegon.org)

### *ROCC EC –*

ROCC Executive Committee elected each year by ROCC members, currently:

Heather Johnson (Chair) – [hjohnson@cat-team.org](mailto:hjohnson@cat-team.org)

Denise Jerome – [djerome@capeco-works.org](mailto:djerome@capeco-works.org)

Dina Eldridge – [deldridge@communityservices.us](mailto:deldridge@communityservices.us)

Justina Fyfe – [Justina.fyfe@ucancap.org](mailto:Justina.fyfe@ucancap.org)

Laura Moore – [lmoore@orca.us](mailto:lmoore@orca.us)

### *OHCS Administrator –*

HMIS Administrator working at OHCS, currently:

Hunter Belgard – [hunter.belgard@oregon.gov](mailto:hunter.belgard@oregon.gov)

### *HMIS/ CE Workgroup –*

HMIS/ CE planning committee comprised of participating agency employees working in HMIS and lead by HMIS Lead.

# **ROCC HMIS**

## **Inter-Agency Data Sharing Agreement for Agencies**

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AGENCY NAME: \_\_\_\_\_

### **BACKGROUND INFORMATION:**

The ROCC Homeless Management Information System is a computer system that is used to collect and share information on homelessness throughout the 26 counties making up the ROCC geographic region. The information gathered by the ROCC HMIS allows agencies to coordinate services across counties for those seeking assistance when necessary. By sharing information with each other, agencies can streamline service delivery by tracking services and referrals provided to the persons they serve.

### **AGREEMENT:**

Agency agrees to share client data among participating agencies via the ROCC HMIS for the purposes outlined below. Generally, client information allowable across the ROCC consists of the basic data requirements to complete Coordinated Entry. This includes demographic information, homeless status and information on client vulnerability used to prioritize service. At the minimum, the client's name and SSN are shared to ensure duplicate entries into HMIS do not occur. Clients have the right to limit their information at any time. Details about limiting visibility is outlined in the ROCC HMIS Policy and Procedures manual.

Each participating agency must complete and comply with the Agency Participation Agreement and ROCC HMIS Policies and Procedures. Each individual HMIS User must complete and comply with the HMIS User Agreement and the ROCC HMIS Policies and Procedures. These documents are available on the ROCC website.

### **USES OF HMIS DATA:**

1. Coordinate services for families and individuals experiencing homelessness or other challenges across the ROCC geographic region.
2. Evaluate performance and progress toward community benchmarks to improve the programs and services available to ROCC county residents experiencing homelessness.
3. Understand the extent and the nature of homelessness and other issues across the ROCC.
4. Improve access to services for all homeless and other populations with the ROCC region. This includes ensuring that:
  - a. Services are targeted to those most in need, including "hard to serve" populations.
  - b. Clients receive the amount and type of services that "best fits" their needs and preferences.
  - c. Which in turn allows us to pursue additional resources for ending homelessness

### **CLIENT PROTECTION:**

Informed consent must be given by clients for their information to be shared among participating agencies in the ROCC HMIS using the ROCC Consent to Release of Information Client Agreement. Identifying client information will only be shared among agencies that have signed a data sharing agreement. At the time of informed consent, and at any point after, the client has the right to see a current list of the participating agencies. Additional agencies may join the ROCC HMIS and will be added to the list of HMIS participating agencies list.

As part of the informed consent process, clients must be informed that additional agencies may join the collaborative at any time and may have access to their information. HMIS Users will maintain HMIS data in such a way as to protect against revealing the identity of clients to unauthorized agencies, individuals, or entities. Clients have the right to request information about who has viewed or updated their record. Finally, clients may not be denied services based on their choice to withhold their consent.

For more details, see the ROCC Consent to Release of Information client agreement.

# **ROCC HMIS**

## **Inter-Agency Data Sharing Agreement for Agencies**

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By signing this form, on behalf of my agency, I authorize the ROCC to allow us to share information between other participating agencies using HMIS. We/I do hereby agree to follow all of the ROCC HMIS Policies and Procedures to share information between participating agencies.

Agreed to and signed by the following agency representative:

\_\_\_\_\_

Name

\_\_\_\_\_

Signature

\_\_\_\_\_

Date