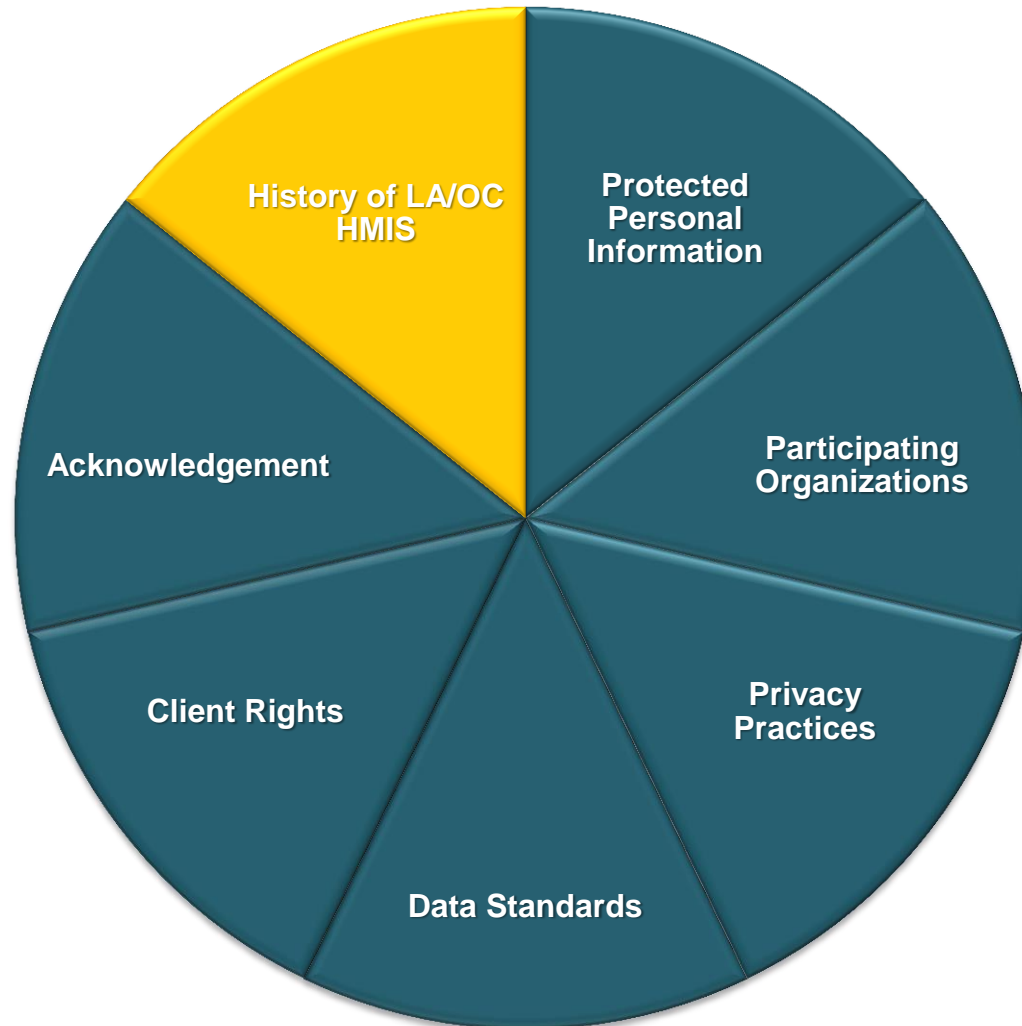# Homeless Management Information System (HMIS)

HMIS 10 - Policies & Procedures of HMIS

Overview

I. **History of LA/OC HMIS**

II. **Protected Personal Information (PPI)**

III. **Participating Organizations**

IV. **Privacy Practices**

V. **Data Standards**

VI. **Client Rights**

VII. **Acknowledgement**

> In 2001 Congress directed the U.S. Department of Housing and Urban Development (HUD) to improve data collection regarding the use of homeless programs.

> In response, HUD began requiring the use of a Homeless Management System (HMIS).

The LA/OC Collaborative includes four Continua of Care:

**Glendale
Pasadena
LA County (LAHSA)
Orange County**

Continuum of Care (CoC): an integrated system of care that guides and tracks homeless individuals & families through a comprehensive array of housing & services designed to prevent and end homelessness.

The implementation of the LA/OC HMIS is led by the LA/OC Collaborative. The central purpose of this collaborative is to use the HMIS database to:

Advance the provision of quality services for homeless and at risk homeless persons.	Improve data collection	Promote more responsive policies to prevent and end homelessness in the Los Angeles and Orange Counties.

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LAHSA

HOMELESS MANAGEMENT INFORMATION SYSTEM
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HMIS

The **LA/OC HMIS** database securely records information about clients who access housing and homeless services within the Greater Los Angeles and Orange Counties.

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INFORMATION
SYSTEM**

Resource Center

Participating organizations share information within the HMIS database with other organizations that also use the system.
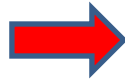
This information is utilized to provide supportive services to our clients and their household members.

Protected Personal Information (PPI) is confidential personal information that we collect about our clients and their families.

This information is collected and entered into the LA/OC HMIS database. We are required to protect the privacy of our clients PPI by complying with the privacy practices described in our privacy notice.

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Before we collect PPI our clients are asked to sign a *Consent to Share Protected Personal Information* form.

This form lists the type of information we would typically obtain and enter into the system.

You cannot be denied services if you do not sign this form.

GREATER LOS ANGELES & ORANGE COUNTY
HOMELESS MANAGEMENT INFORMATION SYSTEM (LA/OC HMIS)

CONSENT TO SHARE PROTECTED PERSONAL INFORMATION

The LA/OC HMIS is a local electronic database that securely record information (data) about clients accessing housing and homeless services within the Greater Los Angeles and Orange Counties. This organization participates in the HMIS database and shares information with other organizations that use this database. This information is utilized to provide supportive services to you and your household members.

What information is shared in the HMIS database?
We share both Protected Personal Information (PPI) and general information obtained during your intake and assessment, which may include but is not limited to:

- Your name and your contact information
- Your social security number
- Your birthdate
- Your basic demographic information such as gender and race/ethnicity
- Your history of homelessness and housing (including your current housing status, and where and when you have accessed services)
- Your self-reported medical history, including any mental health and substance abuse issues
- Your case notes and services
- Your case manager's contact information
- Your income sources and amounts; and non-cash benefits
- Your veteran status
- Your disability status
- Your household composition
- Your emergency contact information
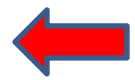- Any history of domestic violence
- Your photo (optional)

How do you benefit from providing your information?
The information you provide for the HMIS database helps us coordinate the most effective services for you and your household members. By sharing your information, you may be able to avoid being screened more than once, get faster services, and minimize how many times you tell your 'story.' Collecting this information also gives us a better understanding of homelessness and the effectiveness of services in your local area.

Who can have access to your information?
Organizations that participate in the HMIS database can have access to your data. These organizations may include homeless service providers, housing groups, healthcare providers, and other appropriate service providers.

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Verbal Consent

➢ **If a participating organization is gathering PPI during a phone screening, street outreach or community access center sign-in, verbal consent can be used to share the information in HMIS.**

➢ **If verbal consent is obtained, we will request written consent during the initial assessment.**

➢ **If the client does not appear for the initial assessment, their information will remain in HMIS until they revoke their consent in writing.**

How do our clients benefit from providing their information?

By providing their information they will be contributing to efforts to prevent and end homelessness in LA/OC.

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Resource Center

➢ **The information will also help us to provide more effective services for our clients and their household members.**

➢ **We must enhance our understanding of homelessness in order to improve the available services in our clients' local areas**.
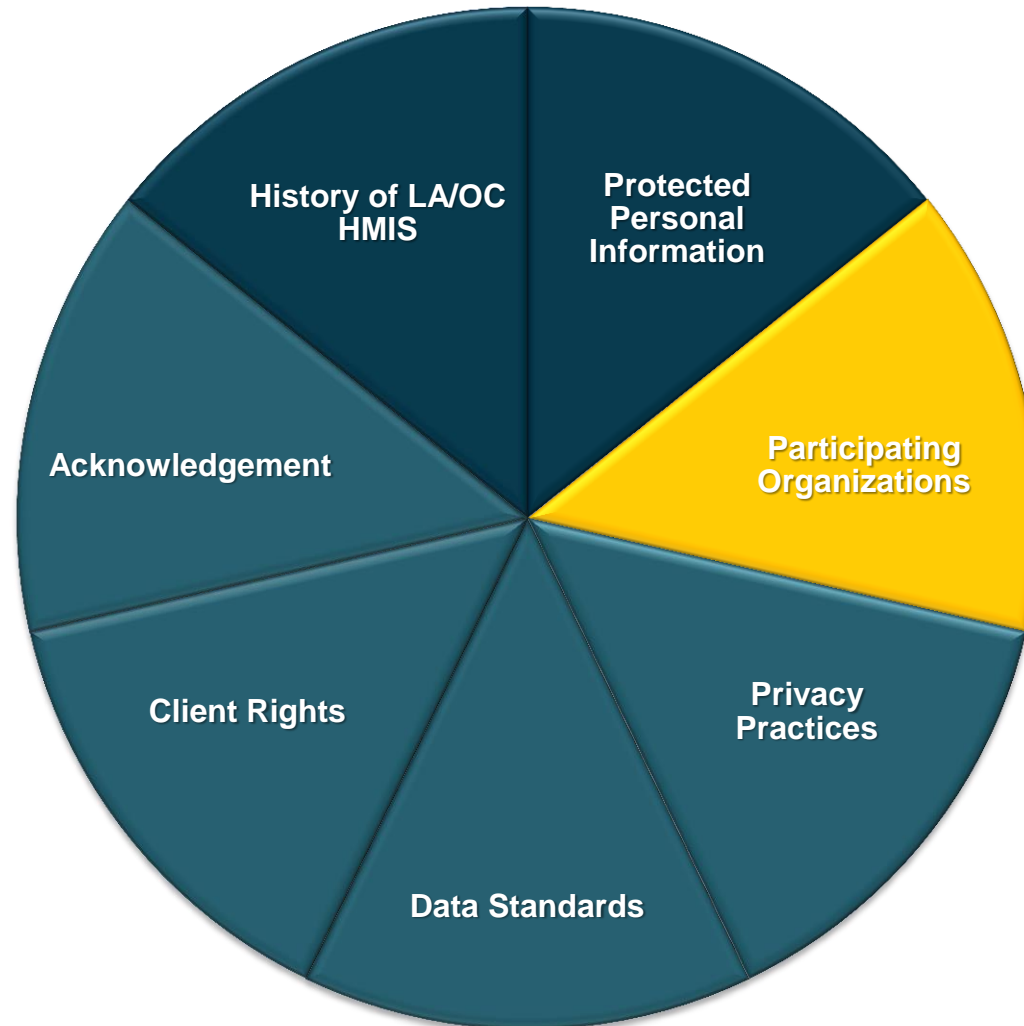
A participating organization is any organization that operates a project that either contributes data to an HMIS or has direct access to PPI in HMIS.

There are <u>two</u> types of participating organizations.

Organizations that collect and share information within the system.

Organizations that have been assigned access-only.

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Which organizations collect and share PPI using the LA/OC HMIS?

All providers funded by any of the HMIS federal partners should have their programs implemented on HMIS. These program types include:

➢ Coordinated Assessment
➢ Day Shelter
➢ Services Only
➢ Street Outreach
➢ Emergency Shelters
➢ Transitional Housing
➢ PH-Housing Only
➢ PH-Housing with Services (no disability required for entry)
➢ PH-Permanent Supportive Housing (disability required for entry)
➢ PH-Rapid Re-Housing
➢ Homelessness Prevention
➢ Safe Haven

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Access-Only Organizations

Access-Only Organizations assign access-only staff persons who are entrusted to access (but not contribute) Protected Personal Information from the LA/OC HMIS. Below are two examples of access-only organizations:

➢ L.A. Care
➢ Department of Veterans Administration

Note: Although access-only users do not collect or enter any information into the LA/OC HMIS they are still required to abide by all policies and procedures, which include protecting and maintaining the confidentiality of PPI.

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HOMELESS MANAGEMENT INFORMATION SYSTEM
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What are the steps to implement a program into the HMIS?

➢ **HMIS Participating Organization Agreement**
  - All participating organizations must submit this form prior to gaining access to the system.
  - This form outlines the guidelines for using HMIS including the responsibilities of the organization with regards to client rights and data use.

➢ **Staff Training**
  - The staff persons who will be using the system must also attend training on system navigation and functionality.
  - Trainings are offered in a variety of formats including instructor-led courses and online webinars.

➢ **HMIS User Agreement**
  - All HMIS users must sign a User agreement once they complete the required training.
  - The user agreement reviews client rights and confidentiality requirements for HMIS users.

➢ **User Account Creation**
  - After all steps have been completed HMIS User Accounts will be assigned to each user.
  - HMIS users will now have authorization to either enter or view PPI (if working with an access-only organization).

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Appendix A: HMIS Participating Organization Agreement

GREATER LOS ANGELES & ORANGE COUNTY
HOMELESS MANAGEMENT INFORMATION SYSTEM (LA/OC HMIS)

PARTICIPATING ORGANIZATION AGREEMENT

I. Purpose
The HMIS is a HUD-mandated information technology system that is designed to capture client-level information over time, on the characteristics and service needs of homeless persons. Client data is maintained on a central server, which will contain all client information in an encrypted state. HMIS integrates data from all homeless service providers and organizations in the community and captures basic descriptive information on every person served. Participation in LA/OC HMIS allows organizations to share information with other participating organizations to create a more coordinated and effective delivery system.

The LA/OC HMIS is the secured electronic database for the Greater Los Angeles and Orange Counties and is a valuable resource for local communities. The LA/OC HMIS Collaborative consists of four separate Continuums of Care (CoC). The continuums are: Los Angeles City and County; Santa Ana/Anaheim/Orange County; Glendale; and Pasadena.

The LA/OC HMIS Collaborative's goal is to provide a comprehensive case management system to advance the provision of quality services for homeless persons, improve data collection, and promote more responsive policies to end homelessness in the Greater Los Angeles and Orange Counties.

II. Agreement and Understanding
This Agreement authorizes this Participating Organization (Organization) to designate HMIS Users (User). A User is a staff person entrusted to enter Protected Personal Information (PPI) into the LA/OC HMIS, on behalf of this Organization. In order to allow a User to access the LA/OC HMIS, a User Agreement must be signed by the User, the HMIS Administrator, and this Organization's Authorized Representative.

III. Confidentiality and Informed Consent

Confidentiality: This Organization must require all Users to abide by its organization's policies and procedures; uphold all privacy protection standards established by the LA/OC HMIS Collaborative Policies and Procedures; and comply with all relevant federal and State of California confidentiality laws and regulations that protect client records. Except where otherwise provided for by law, this Organization shall ensure that confidential client records are released with the client's written consent.

Written Consent: To obtain written consent, prior to each client's assessment, each client must be informed that the client's information will be entered into an electronic database called HMIS. The terms of the *Consent to Share Protected Personal Information* form must also be explained to each client. Clients who agree to have their PPI entered into the LA/OC HMIS must sign the *Consent to Share Protected Personal Information* form.
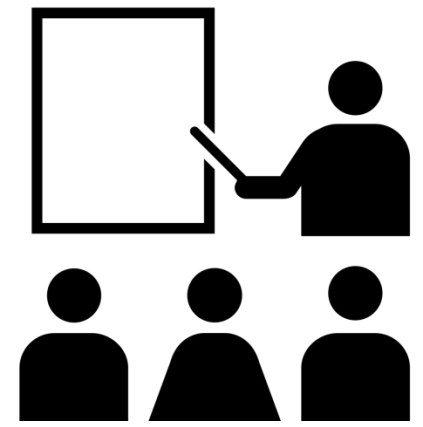
Step 1

Submit a signed and dated greater Los Angeles HMIS *Participating Organization Agreement* Form. Access-Only Organizations must submit the *Access-Only Organization Agreement*.
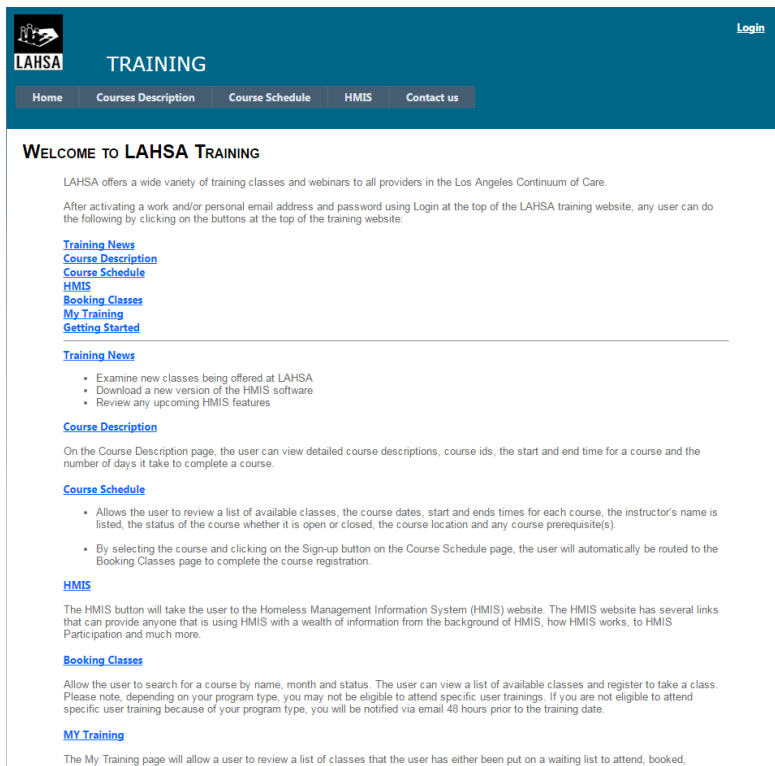
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HOMELESS MANAGEMENT INFORMATION SYSTEM
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HMIS

Staff training on system navigation and functionality.

Step 2

All users must complete required training and any additional training relevant to their position prior to gaining access to LA/OC HMIS.

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HOMELESS MANAGEMENT INFORMATION SYSTEM
Resource Center

All training info is available on LAHSA's HMIS training website at http://training.lahsa.org.

Trainings are hosted regularly throughout the year and they include:

➢ One-on-One Support and Assistance
➢ Specialized program-type trainings
➢ Individualized computer stations
➢ Hands-on experience through HMIS test environment

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All users must submit a signed and dated *HMIS User Agreement* form. Access-only users must submit the *Access-Only User Agreement.*

Step 3

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Appendix B: HMIS User Agreement
GREATER LOS ANGELES & ORANGE COUNTY
HOMELESS MANAGEMENT INFORMATION SYSTEM (LA/OC HMIS)

USER AGREEMENT
_____

I. Purpose

The LA/OC HMIS is the secured electronic database for the Greater Los Angeles and Orange Counties and is a valuable resource for local communities. The LA/OC HMIS Collaborative consists of four separate Continuums of Care (CoC). The continuums are: Los Angeles City and County; Santa Ana/Anaheim/Orange County; Glendale; and Pasadena.

The LA/OC HMIS Collaborative's goal is to provide a comprehensive case management system to advance the provision of quality services for homeless persons, improve data collection, and promote more responsive policies to end homelessness in the Greater Los Angeles and Orange Counties.

II. Agreement and Understanding
This Agreement authorizes you, an HMIS User (User), to enter Protected Personal Information (PPI) into the LA/OC HMIS, as authorized by your organization and the CoC HMIS Administrator. You must complete the necessary training(s) prior to receiving a unique HMIS User Identification (User ID) and password.

II. Client Confidentiality and Informed Consent

Confidentiality: This User must abide by its organization's policies and procedures; uphold all privacy protection standards established by the LA/OC HMIS Collaborative Policies and Procedures; and comply with all relevant federal and State of California confidentiality laws and regulations that protect client records.

Written Consent: To obtain written consent, prior to each client's assessment, Users must inform each client that the client's information will be entered into an electronic database called HMIS. Users must also explain the terms of the *Consent to Share Protected Personal Information* form. Each client who agrees to have his or her PPI entered into the LA/OC HMIS must sign the *Consent to Share Protected Personal Information* form.

Verbal Consent: Verbal consent to enter PPI into the LA/OC HMIS may be obtained during circumstances such as phone screenings, street outreach, or community access center sign-ins. Users must inform each client that the client's information will be entered into the HMIS database. Users must also explain the terms of the *Consent to Share Protected Personal Information* form. The client's written consent must be obtained once the client appears for his or her initial assessment.

III. Client Rights
- A client may not be denied services for failure to provide consent for LA/OC HMIS data collection.
- A client has the right to inspect, copy, and request changes in their LA/OC HMIS records.
- A client's consent may be revoked by that client at any time through a written notice or by completing the Revocation of Consent form.
- A copy of the Privacy Notice must be provided at the time the client requests.
- Each client has the right to receive the following, no later than five (5) business days of a written request:

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HOMELESS MANAGEMENT INFORMATION SYSTEM
Resource Center
HMIS

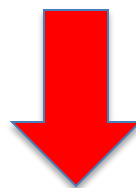## HMIS User Account Creation

Step 4

Each user will create a unique User ID and password. Passwords must meet the following criteria:

➢ Be at least eight (8) characters long and no more than sixteen (16) characters in length
➢ Be alphanumeric
➢ Be at least one (1) upper case, one (1) lower case letter and at least one (1) symbol

Note: Each user must also complete an enforced password reset every one-hundred eighty days (180) days.

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User access within HMIS

Once a user has successfully created an account they are assigned both an HMIS *role* and a security level *(group).* This will determine the type of access a user will have within the database.

ROLE

HMIS roles are assigned based on the staff's title and/or job functionality within their organization. The following are examples of roles and their corresponding page access within HMIS:

Case Manager (LA_CES_Standard)	**Outreach Worker** (LA_CES_Outreach)	**Housing Provider** (LA_CES_Housing_Provider)	**Mark for Delete** (Mark for Delete)
➢ Client and enrollment search ➢ Program Entry ➢ Case Notes ➢ Annual Assessments ➢ Services ➢ Unit/bed Assignments ➢ Program exit and follow-up	➢ Client and enrollment search ➢ Location and services ➢ Client intake ➢ Program entry ➢ Supplemental assessment ➢ Case note ➢ Services ➢ Program exit and follow-up	➢ Housing Resource	➢ Mark for delete and disassociate client

HFSS Case Manager (LA_CM)	**Export Schedule (LA_HPRP Export)**
➢ (Access to pages listed under Case Manager) ➢ Appointments ➢ Supplemental assessments	➢ Export schedule v5 for SSVF and RHY.

GROUP

HMIS group permissions allows for additional security to manage the level of data that is shared within your organization. By default, a newly implemented agency will have two groups:

Agency Administrator	User Group
➢ Allows full access to all programs and client files within the agency ➢ Cannot be modified	➢ Allows access to specific programs by default ➢ Access can be adjusted as necessary

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HOMELESS MANAGEMENT INFORMATION SYSTEM
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Example

A user designated as an Agency Administrator would have access to the Mark for Delete page in HMIS.

The Mark for Delete process allows Agency Administrators to:

➢ Remove duplicate entries within HMIS
➢ Remove enrollment into incorrect programs
➢ Remove enrollment into a program due to ineligibility
➢ Re-open past enrollment to correct other data entry errors

HMIS users who aren't identified as Agency Administrators in the system are not permitted to access this process.

Note: Agency Administrators also have access to <u>all</u> programs within the system while HMIS users assigned to the user group are given access to <u>specific</u> programs.

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What happens when a user no longer works for the participating organization?

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Resource Center

LOS ANGELES/ORANGE COUNTY
HOMELESS MANAGEMENT INFORMATION SYSTEM (HMIS)

Termination of Employee

This Termination of Employment form is to notify the HMIS Administrator that the following employee will no longer work for the organization and thus all access needs to be removed exclusively from the HMIS system.

Agency/Organization: _____

Name of Employee: _____

Effective Date of Termination: _____

Authorized by: _____

Please send signed form to HMISSupport@lahsa.org for processing.

_____

HMIS Administrator Use Only:

Status: [ ] Completed   [ ] Pending

Date of Completion: _____

Completed by: _____

The HMIS Administrator will terminate user access upon notification and receipt of this *Termination of Employee* Form from the Organization Administrator.

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HOMELESS MANAGEMENT INFORMATION SYSTEM
Resource Center

All HMIS users and participating organizations must sign this *privacy agreement* to maintain the security and privacy of client information.

GREATER LOS ANGELES & ORANGE COUNTY HOMELESS MANAGEMENT INFORMATION SYSTEM (LA/OC HMIS)

PRIVACY NOTICE

THIS PRIVACY NOTICE EXPLAINS UNDER WHAT CIRCUMSTANCES WE MAY SHARE AND DISCLOSE YOUR INFORMATION FROM THE LA/OC HMIS. THIS NOTICE ALSO EXPLAINS YOUR RIGHTS REGARDING YOUR CONFIDENTIAL INFORMATION.

PLEASE READ IT CAREFULLY.

(Organization Name Here) collects and shares information about individuals who access our services. The information is confidentially stored in a local electronic database called the Greater Los Angeles/Orange County Homeless Management Information System (LA/OC HMIS). The LA/OC HMIS securely records information (data) about persons accessing housing and homeless services within the Los Angeles and Orange Counties.

We ask for your permission to share confidential personal information that we collect about you and your family. This confidential information is referred to as Protected Personal Information (PPI). We are required to protect the privacy of your PPI by complying with the privacy practices described in this Privacy Notice.

Why We Collect and Share Information

The information we collect and share in the HMIS helps us to efficiently coordinate the most effective services for you and your family. It allows us to complete one universal intake per person; better understand homelessness in your community; and assess the types of resources needed in your local area.

By collecting your information for HMIS, we are able to generate statistical reports requested by the Department of Housing and Urban Development (HUD).

The Type of Information We Collect and Share in the HMIS

Each HMIS user or participating organization that violates the agreement may have access rights terminated and may be subject to further penalties.

PPI is also protected by passwords and encryption technology.

HMIS will also automatically lock you out after 10 mins of inactivity.
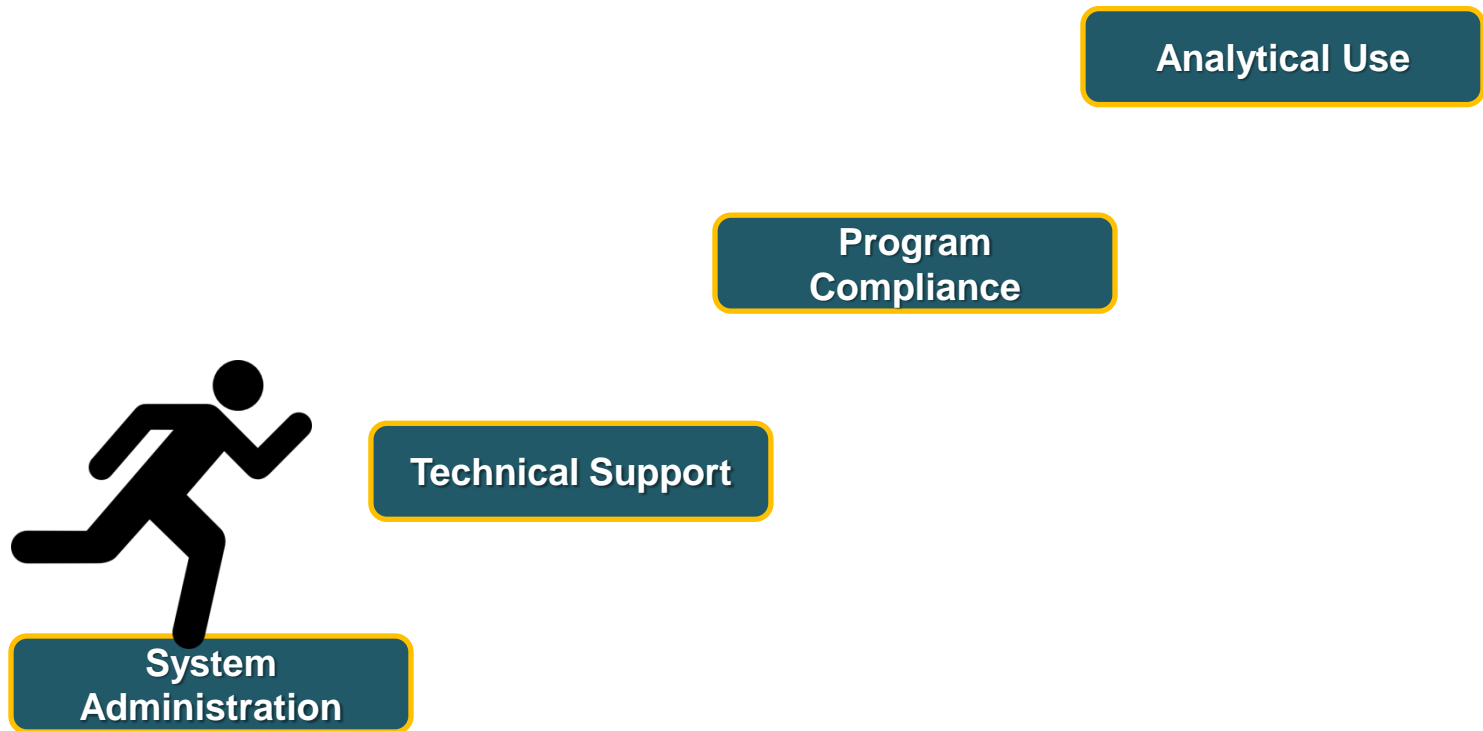
Under what circumstances do we share client information?

After obtaining the required consent, PPI can be used or disclosed for any of the following purposes:

Analytical Use

Program Compliance

Technical Support

System Administration

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HOMELESS MANAGEMENT INFORMATION SYSTEM
Resource Center

More specifically, unless restricted by other laws, the information we collect can be shared and disclosed under the following circumstances:

➢ To provide or coordinate services
➢ For payment or reimbursement of services for the participating organization
➢ For administrative purposes, including but not limited to HMIS Administrator(s) and developer(s), and for legal, audit personnel, and oversight and management functions
➢ For creating de-identified PPI
➢ When required by law or for law enforcement purposes
➢ To prevent a serious threat to health or safety
➢ As authorized by law, for victims of abuse, neglect, or domestic violence
➢ For academic research purposes

Note: Other uses and disclosures of PPI can be made with the clients written consent.
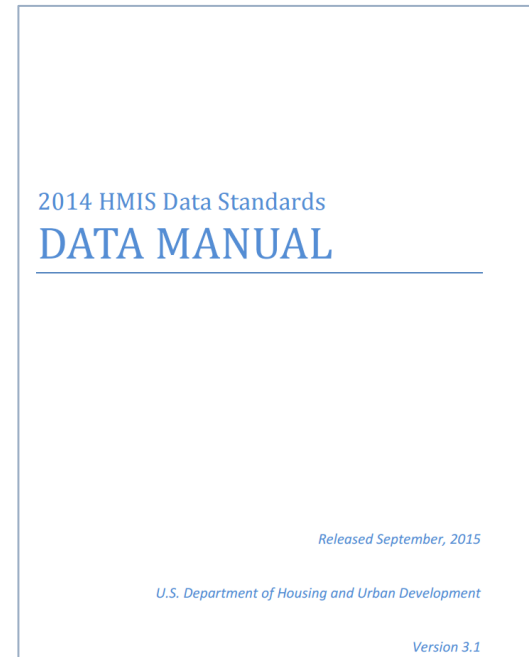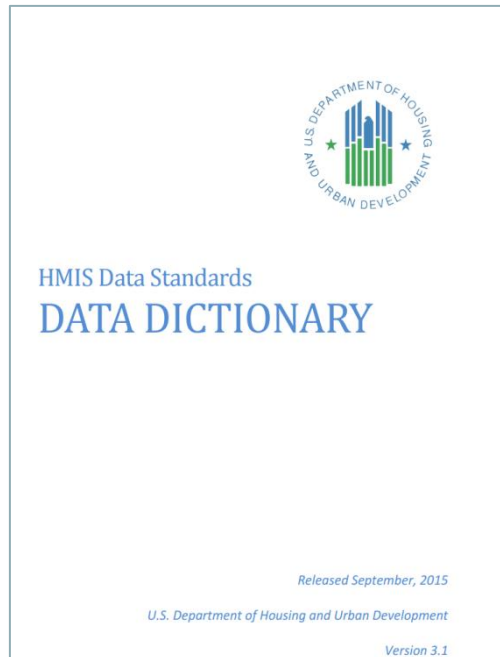
Solid data enhances the ability of a community to understand the scope of a problem.

Both the *2014 HMIS Data Dictionary* and *Data Manual,* published by both HUD and HMIS federal partners, outline the requirements and federal expectations for collecting data using the HMIS.

HMIS Data Standards
DATA DICTIONARY

Released September, 2015

U.S. Department of Housing and Urban Development

Version 3.1

2014 HMIS Data Standards
DATA MANUAL

Released September, 2015

U.S. Department of Housing and Urban Development

Version 3.1

The 2014 Data Dictionary and Manual can be found at
https://www.lahsa.org/hmis/documents

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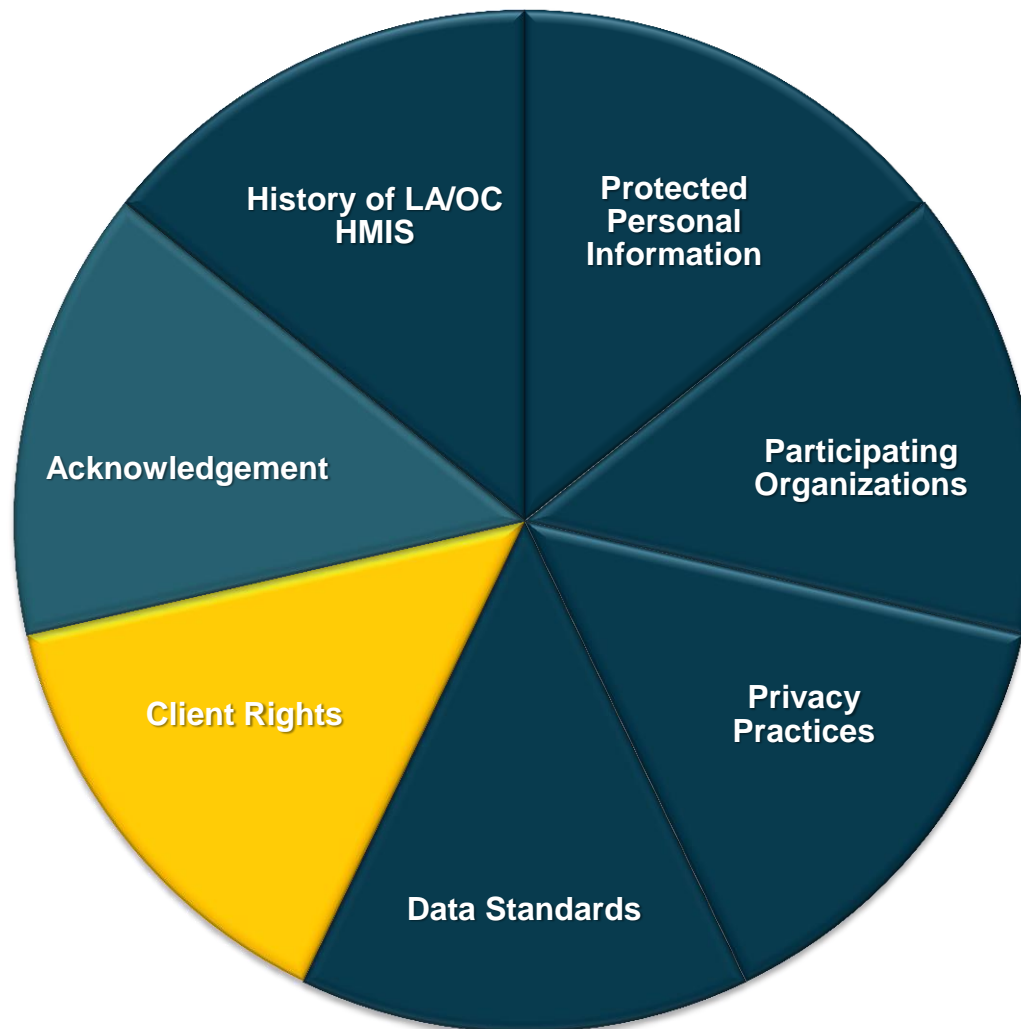**HOMELESS MANAGEMENT INFORMATION SYSTEM**
Resource Center

Universal Data Elements

➢ **HMIS Universal data elements are elements required to be collected by all projects participating in HMIS, regardless of funding source.**

➢ **Users must enter all data elements and program-specific data elements into the database within (3) days of intake.**
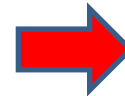
Name
Social Security Number
Date of Birth
Race
Ethnicity
Gender
Veteran Status
Disabling Condition
Residence Prior to Project Entry
Project Entry Date
Project Exit Date
Destination
Personal ID
Household ID
Relationship to Head of Household
Client Location
Length of Time on Street, in an ES or Safe Haven

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LA/OC HMIS Client Rights are outlined in our client rights brochure.

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HMIS

What Is HMIS?

The Homeless Management Information System (HMIS) is a web-based information system. Organizations that serve homeless and at-risk individuals in the Greater Los Angeles and Orange counties need to compile information about the persons they serve.

Why Gather and Maintain Data?

HMIS will gather and maintain unduplicated statistics on a regional level to provide a more accurate picture of our region's homeless and at-risk population. HMIS will also help us understand client needs, help organizations plan appropriate resources for the clients they serve, inform public policy in an attempt to end homelessness, streamline and coordinate services and intake procedures to save client's valuable time, and so much more

Consent

Written Client Consent

Each client must complete a Client Consent to Share Information Agreement allowing release of demographic information to the HMIS. Clients will be required to complete a signed form to be kept on file with the service provider. A copy will be provided to the client.

Last updated 10/07/2015

Client Rights

Common Client Questions:

Who can access my information?

- Only staff who work directly with clients or who have administrative responsibilities can look at, enter, or edit client information, including all authorized organizations participating in the LA/OC Continuum of Care.

Who will receive my information?

- No information will be released to another individual without your consent.

- Information is stored in an encrypted central database. Only organizations that have signed an HMIS Organization Agreement will have access to HMIS data.

Don't I have a right to privacy?

- Clients do have the right to privacy, and also the right to confidentiality. You are entitled to a copy of the privacy notice upon request.

- Clients have the right to know who has modified their HMIS record.

- You also have the right to request access to your HMIS client records, printed copy of this data, and access to available audit reports. You may not see other clients' records, nor

What if I don't want to provide information?

- Clients have the right not to answer any questions, unless entry into a program requires it.

What if I believe my rights have been violated?

- Clients have the right to file a grievance with the organization or with the HMIS Administrative Office. Grievances must be filed through written notice. Clients will not be retaliated against for filing a complaint.

Grievance

If you feel a violation of your rights as a client has occurred, please contact your organization's HMIS Administrator.

The Continuum of Care HMIS Administrative Office can be notified of violations through written notice.

All participating organizations are responsible for ensuring that security procedures are followed and client rights are respected throughout the organization's HMIS participation.

Consent

GREATER LOS ANGELES & ORANGE COUNTY
HOMELESS MANAGEMENT INFORMATION SYSTEM (LA/OC HMIS)

CONSENT TO SHARE PROTECTED PERSONAL INFORMATION

The LA/OC HMIS is a local electronic database that securely record information (data) about clients accessing housing and homeless services within the Greater Los Angeles and Orange Counties. This organization participates in the HMIS database and shares information with other organizations that use this database. This information is utilized to provide supportive services to you and your household members.

What information is shared in the HMIS database?
We share both Protected Personal Information (PPI) and general information obtained during your intake and assessment, which may include but is not limited to:

- Your name and your contact information
- Your social security number
- Your birthdate
- Your basic demographic information such as gender and race/ethnicity
- Your history of homelessness and housing (including your current housing status, and where and when you have accessed services)
- Your self-reported medical history, including any mental health and substance abuse issues
- Your case notes and services
- Your case manager's contact information
- Your income sources and amounts; and non-cash benefits
- Your veteran status
- Your disability status
- Your household composition
- Your emergency contact information
- Any history of domestic violence
- Your photo (optional)

How do you benefit from providing your information?
The information you provide for the HMIS database helps us coordinate the most effective services for you and your household members. By sharing your information, you may be able to avoid being screened more than once, get faster services, and minimize how many times you tell your 'story.' Collecting this information also gives us a better understanding of homelessness and the effectiveness of services in your local area.

Who can have access to your information?
Organizations that participate in the HMIS database can have access to your data. These organizations may include homeless service providers, housing groups, healthcare providers, and other appropriate service providers.

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As mentioned before, prior to providing any information our clients are asked to sign a consent form that explains the type of information we collect and how the information is protected.

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HOMELESS SERVICES AUTHORITY
Working Together to End Homelessness in Los Angeles

HOMELESS MANAGEMENT INFORMATION SYSTEM
Resource Center

Revocation of Consent

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Appendix F: Revocation of Consent

GREATER LOS ANGELES & ORANGE COUNTY
HOMELESS MANAGEMENT INFORMATION SYSTEM (LA/OC HMIS)

REVOCATION OF CONSENT

By signing below, I revoke my consent to share my Protected Personal Information (PPI) in the LA/OC HMIS.

I understand that this revocation authorizes the removal of my PPI from the shared HMIS database and will prevent further PPI from being added. I understand that the PPI that I previously authorized to be shared cannot be entirely removed from the HMIS database and will remain accessible to the limited number of organization(s) that provided me with direct services.

Client Name: _____ DOB: _____ Last 4 digits of SS_____

Signature _____ Date _____

Head of Household (Check here) ☐
Minor Children (if any):
Client Name: _____ DOB: _____ Last 4 digits of SS_____
Client Name: _____ DOB: _____ Last 4 digits of SS_____
Client Name: _____ DOB: _____ Last 4 digits of SS_____
Client Name: _____ DOB: _____ Last 4 digits of SS_____

_____   _____
Print Name of Organization   **Print Name of Organization Staff**

_____   _____
Signature of Organization Staff   **Date**

Our clients can revoke their consent at any time either in writing or by completing the *Revocation of Consent* form. Upon receipt of the form we can remove the PPI from the shared HMIS database and prevent further information from being added.

Filing a Grievance

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Appendix H: Grievance Form

GREATER LOS ANGELES & ORANGE COUNTY
HOMELESS MANAGEMENT INFORMATION SYSTEM (LA/OC HMIS)

GRIEVANCE FORM

If you feel a violation of your rights as an HMIS client has occurred or you disagree with a decision made about your "Protected HMIS Information" you may complete this form. Complete this form only after you have exhausted the grievance procedures at your organization. **It is against the law for any organization to take retaliatory action against you if you file this grievance. You can expect a response within 30 days via the method of your choice.**

Grievances must be submitted in writing to:
[Enter Address]

Date of offense: _____

Name of Individual who   Name of Organization who
violated your privacy rights.   violated your privacy rights.

Brief description of grievance (what happened):

Best way to contact you: _____

Your name: _____

Your phone: _____

Your mailing address: _____
_____

CoC response date: _____

Recommendation to Organization:

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

Last updated on: 10/29/2015

➤ **If any HMIS client feels that their rights have been violated they may complete a *grievance form*. Once the form is submitted, clients can expect a response within 30 days.**

➤ **We ask that this form is completed only after clients have exhausted the grievance procedures at their organizations.**

➤ **It is against the law for any organization to take retaliatory action if a grievance has been filed.**

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Los Angeles
HOMELESS SERVICES AUTHORITY
LAHSA Working Together to End Homelessness in Los Angeles

HOMELESS MANAGEMENT
INFORMATION
SYSTEM
Resource Center

Each LA/OC HMIS user is required to read the complete LA/OC HMIS Policies and Procedures document. Upon completion they must sign this *Acknowledgement form*. The form should be signed and submitted to LAHSA.Training@lahsa.org.

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Acknowledgement

I acknowledge that I have received a written copy of the LA/OC HMIS Collaborative Policies and Procedures Manual. I understand the terms of the LA/OC HMIS Policies and Procedures and I agree to abide by them. I understand that any violation of the policies or procedures could lead to my HMIS account being locked or even criminal prosecution.

Organization Name:_____

Printed Name:_____

Signature:_____

Date:_____

To locate the HMIS Policies & Procedures document and the acknowledgement form go to hmis.lahsa.org and follow the instructions listed below.

➢ Click provider tools.
➢ From the drop down menu, select documents.
➢ Select Policies and Standards.
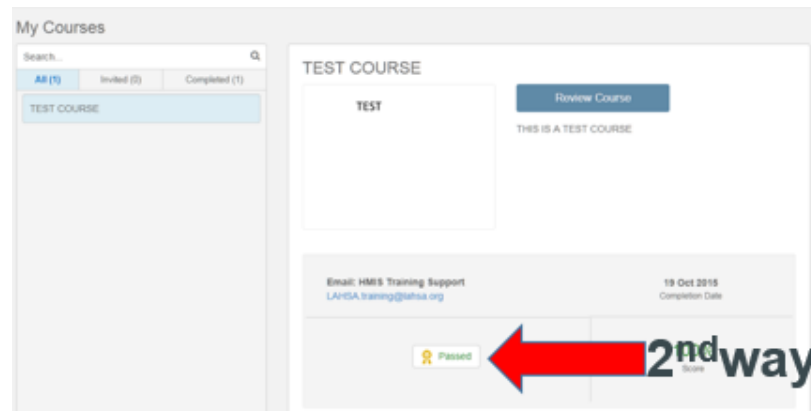➢ Open the LA/OC HMIS Policies and Procedures document.
➢ The Acknowledgement Form is the very last page.

Please also send a copy of your *Certification of Completion* to LAHSA.Training@lahsa.org. You can download the certificate by:

Downloading the certificate upon completion of the online training. ⟶

You've finished
TEST COURSE

You met the requirements for this course.

Your score: **100%** [View Certificate] **1st way**
Untitled Quiz 1 **100%**
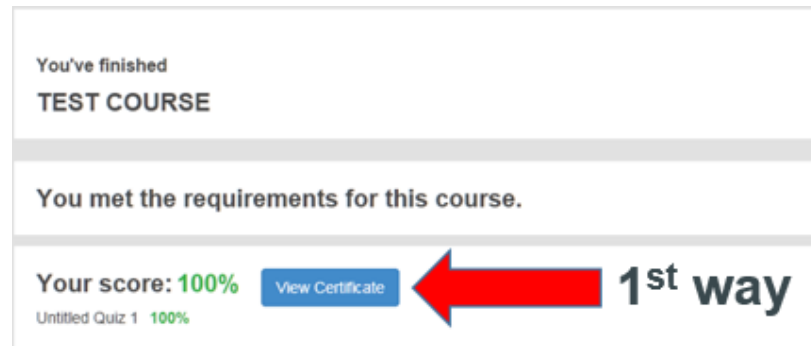
Visiting the Mindflash homepage and selecting the *Passed* icon to view and download the certificate. ⟶

My Courses

Search...

All (1)   Invited (0)   Completed (1)

TEST COURSE

TEST COURSE

TEST   [Review Course]

THIS IS A TEST COURSE

Email: HMIS Training Support   19 Oct 2015
LAHSA.training@lahsa.org   Completion Date

[Passed] **2nd way**
Score

HMIS Contact Info

HMIS Contact Information		
Primary Contact	**Contact Email**	**Reason**
Lizet Gonzalez, HMIS Technical Support	HMISSupport@lahsa.org	General technical support for HMIS issues related to user access, troubleshooting, information requests, system functionality errors, etc.
HMIS Training	LAHSA.Training@lahsa.org	Training-related questions, submission of HMIS agreements and forms.