

HMIS: Project Structure Examples

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California

The Community Technology Alliance (CTA) serves as the contracted HMIS technical lead for four separate CoCs in California – Santa Clara, Monterey/San Benito, Napa, and Santa Cruz. Each CoC has designated their respective counties as CoC “lead” or collaborative applicant. Additionally, each CoC has also designated their respective counties as the HMIS “lead”. Each HMIS lead entity then subcontracts with CTA to provide system administration and HMIS support services to the CoC. CTA leads HMIS planning and rollout services; provides training and management support to each CoC; and administers HMIS reporting functions such as APR, AHAR, PIT, and HIC. CTA helps collect, report, analyze and share HMIS data so that CoC partners can use it to make informed decisions about service delivery strategies, priorities, and goals.

As the technical lead for HMIS, CTA’s responsibilities including the following:

1. Manage the implementation and on-going usage of the HMIS system on behalf of the entire region. Act as a single point of contact between the different CoCs and the software vendor and platform service provider, Bowman Systems
 - a. Work with local Continuum of Care HMIS leads to plan and implement the system within their continuums
 - b. Provide technical assistance to the CoC HMIS leads. Facilitate problem resolution in the event continuums are experiencing difficulties with the software and or system. Whenever possible, resolve issues with the local CoC HMIS lead that cannot be independently resolved directly with Bowman first.
 - c. Facilitate regional forum(s) when and if they become necessary to ensure the agreement on standard application configuration and usage, to enforce regional agreements, and to inform stakeholders on the changes to the HMIS system.
2. Perform application administration tasks as necessary for the setup and ongoing operations of the system, including
 - a. Centrally manage the system-wide configuration on behalf of the COC, including:
 - i. Initial application setup and the first level, cross continuum structure with the system.
 - ii. Configuration of standard pick lists provided with the product.
 - iii. Configuration of standard client assessments provided with the product.
 - b. Procure, allocate and administer user license allocation across the various CoCs
 - c. Manage user accounts, logins, and passwords for CoC teams.
 - d. In coordination with each local HMIS lead, create and manage agency-specific application configurations, on behalf of individual agencies with the system and including client assessment forms, data fields and/or pick lists.
 - e. In coordination with local CoC HMIS leads, advise on the creation and management of all custom data importation and exportation routines necessary to integrate external data into the HMIS system, and advise on the exporting of internal data from within the HMIS system, as required on behalf of individual agencies, CoCs, or other outside policy makers and funders (such as the potential inclusion of HMIS data in a broader regional data warehouse).
 - f. Manage the creation and posting of system-wide news bulletins within the software as necessary.
 - g. Audit usage of the application in order to ensure that appropriate standard policies and procedures are agreed upon, in place and followed.

- h. Monitor system usage over time in order to ensure that appropriate capacity planning is in place to proactively plan for future system growth expansion.

As the HMIS Lead Organization, each separate CoC is still the organization that enters into grant agreements with HUD for the HMIS and is responsible for the following tasks:

1. Facilitate CoC-wide strategic planning around the HMIS system.
2. Establish and maintain policies and procedures across the CoC governing HMIS access, use, and data dissemination; such as standardized client intake, user agreements and other forms. Review and monitor adherence across agencies to ensure security, confidentiality and quality of the information with the system.
3. Manage the implementation and on-going usage of the HMIS system on behalf of the CoC. Act as a single point of contact between provider agencies with the COC and the Regional HMIS Administrative Lead (CTA).
 - a. Coordinate funding sources and manage budget and cash flow to ensure the necessary financial resources with the CoC needed to support the local implementation and pay central suppliers for the on-going operations of the system
 - b. Participate in regional forms to ensure regional standards meet the needs of the local CoC.
 - c. Work with local agency administrators and/or end users to plan and implement the system within their agencies. Ensure all HMIS users are properly trained including initial training and ongoing outreach and support, such that they are able to do end user level training, as well as data analysis and reporting as required by the agency.
 - d. Provide technical assistance with the continuum. Facilitate problem resolution if agencies experience difficulties with the software or system. Resolve issues locally, whenever possible, and escalate problems to the regional team when necessary.
 - e. Perform data analysis and reporting as required to meet reporting requirements and to ensure appropriate data quality standards on the continuum-wide date.
 - f. Facilitate stakeholder form(s) within the continuum to keep participants informed on the changed to the HMIS system and the corresponding operational policies and procedures.
4. Perform continuum-wide application administration tasks as necessary for the ongoing operations and as allowed by the software, including:
 - a. Perform initial agency setup and configuration with the system.
 - b. Manage user accounts, logins and passwords for local agency administrators.
 - c. Provide standard and/or custom reporting across the continuum, as required.
 - d. Audit usage across the continuum and ensure that standard policies and procedures are followed.
 - e. Manage the creation and posting of continuum-wide news bulletins within the software as necessary.
 - f. Coordinate the process by which local agency configurations are gathered and submitted to the regional HMIS administration team.

Eleven County Regional HMIS System

MEMORANDUM OF UNDERSTANDING (MOU)

Between and Amongst

**Alameda County wide Continuum of Care,
Contra Costa County Continuum of Care,
Marin County Continuum of Care,
County of Monterey Continuum of Care,
Napa County Continuum of Care,
San Francisco County Continuum of Care,
San Mateo County Continuum of Care,
Santa Cruz County Continuum of Care,
Solano County Continuum of Care
Sonoma County Continuum of Care,
and Community Technology Alliance**

Background and Purpose

Following a Congressional mandate, communities that receive Department of Housing & Urban Development (HUD) funding for homelessness-related services must begin to use a computerized system to collect and manage data on their homeless clients by 2004. HUD refers to this system as “Homeless Management Information System” (HMIS).

In response to this mandate, the Continuums of Care within the eleven counties of the greater San Francisco and Monterey Bay Area are in the process of planning and/or implementing HMIS systems within their jurisdictions. These counties have come together as a group (known as the Bay Area Counties Homeless Information Collaborative, or “BACHIC”) to leverage learning and expertise across the multiple communities.

As part of the BACHIC collaboration, Community Technology Alliance (CTA) has been enlisted, through a grant from the Charles and Helen Schwab Foundation, to facilitate the creation of a “Regional HMIS” system that brings county HMIS data together for a composite picture of the homeless population and services across the BACHIC region.

As defined by HUD’s original mandate, HMIS is a computerized data collection tool designed to capture client-level information over time on the characteristics and service needs of men, women, and children experiencing homelessness. The primary purpose of the system is to gather and aggregate data on homelessness at local and national levels to accurately describe the scope of the problem and provide the information needed to design effective efforts to ameliorate it.

HUD envisions that by implementing an HMIS system within each Continuum of Care, homeless individuals, agency directors and program managers, as well as public policy makers will all benefit. The Regional HMIS intends to leverage the core continuum-level systems to provide a richer, fuller regional picture of the homeless population and the services they receive, better enabling agencies to collaborate across continuum boundaries, and allowing public policy makers to address homelessness issues on a regional basis.

Overall Vision:

The vision of the Regional HMIS is to enhance collaboration and data collection capabilities, leading to a better understanding of the homeless population in the region. The Regional HMIS will be a rich repository of information that will provide data which will be utilized to analyze trends, gaps in services, and mobility patterns among homeless people, and inform homeless funding and policy directions. The Regional HMIS will give policy makers, service providers and funders a better understanding of homelessness within our region. The analysis of regional data will allow for better planning and resource management and an increased ability to address the present and future needs of homeless people in the BACHIC region.

Benefits of the Regional HMIS:

Coordinating efforts across the broader San Francisco and Monterey Bay region will leverage individual Continuums of Care HMIS systems into a more complete regional system that will better serve the needs of all the constituencies involved. The primary benefits foreseen in working with data at a regional level include:

- 1 The ability to bring together a consolidated, non-duplicated picture of homelessness across the region in order to better understand the characteristics and mobility patterns of the homeless population and how this affects individual communities and agencies within the region.
- 2 The ability to identify the prevalence of chronic homelessness across county boundaries thereby enabling service agencies to offer and provide more appropriate services to the affected homeless population.
- 3 The ability to provide funders of homeless service agencies a better regional picture of the needs of homeless individuals and families, and the ability to better target their investments in housing and homeless services..

Project Phasing

The Regional HMIS is conceived as a two-phase project. Phase One, the planning phase, began in 2003 and is expected to be completed by December 31, 2004. Phase Two, the implementation phase, is projected to begin in 2005. This MOU covers the first phase. Based on the results of the planning phase, a new MOU will be drafted and signed to guide the implementation phase.

Approach:

Throughout the BACHIC counties various HMIS approaches are being taken. As a result of this heterogeneity, it has been agreed that a separate, regional database, which incorporates a composite snapshot of all the respective local systems will be developed. This approach was approved by all members of the BACHIC group at a meeting on February 20, 2004.

The data elements that will initially be included in the Regional HMIS will be the Universal and Program data elements defined in the HUD HMIS data standard (which, as of the date of this MOU have yet to be finalized). A poll of all participating communities at the April 16th, 2004 BACHIC meeting indicated that all eleven counties plan to collect this data. An additional two data elements will also be added that will allow for the tracking of the numbers of chronically homeless persons.

Each county is following its own timeline for HMIS implementation. As a result, the amount and type of data available from each county will vary over time. Data will only be included in the regional database after a sufficient number of counties have established processes to accurately collect the data on a local level. It is important that common collection methodologies are used. As counties expand the amount of data that is stored in their local HMIS systems, the regional system will be able to expand the amount of data collected regionally.

Guiding Principles

At its meeting on February 20, the BACHIC Group understood and agreed the following as minimum guiding principles:

1. Community Technology Alliance (CTA) will on behalf of the BACHIC Group implement and administer the Regional HMIS.
2. Funding from the Charles and Helen Schwab Foundation will support the Regional HMIS through December 31, 2004, and possibly in 2005, but this funding is time-limited. All parties understand that long-term sustainability of the Regional HMIS and its continued implementation and administration by CTA depends on successfully implementing a fundraising strategy that will secure ongoing support of the initiative. These efforts will include pursuing grants from public and private sources.
3. The BACHIC counties agree to participate in a joint fundraising effort. A fundraising sub-committee shall be established to spearhead these efforts.
4. All parties recognize that the long-term viability of the project may depend on each participating community making an ongoing financial commitment to the project. As a first step to exploring this option, the group shall work to establish a budget for the project and to determine the cost to each community.
5. The individual Continuums of Care retain responsibility for their strategic HMIS planning within their county. They are ultimately responsible for the deployment of the system within their respective community.
6. Each Continuum of Care, and their respective agencies, retains ownership of any and all data entered into the Regional HMIS system on their behalf. Each Continuum of Care will be responsible for developing and implementing policies and procedures regarding what individuals or organizations from their community will have access to their data in the warehouse, how it may be accessed, and how it may be used. CTA will not disclose, or release any county specific information in the system to a third party, except under direction of the owning Continuum of Care.
7. Each Continuum of Care will be responsible for its own data analysis relating to its own specific community. CTA will be responsible only for the analysis of regional aggregate data.
8. CTA will work with BACHIC to devise guidelines on data requirements and other administrative needs.
9. CTA and BACHIC agree to work on a standard transference of data between the counties' HMIS systems and the regional data warehouse and the security involved with this transference. This standard will include the frequency with which data will be provided to CTA.
10. HUD's Universal Data Elements and Program Level Data Elements will form the basis of collected data.
11. Additional data elements related to chronic homelessness will be included in the Regional HMIS.
12. All parties will work together to decide guiding principles and conditions governing release, analysis, and reporting of aggregate regional data.
13. As joint partners of the Regional HMIS system, BACHIC Counties agree to participate in a joint steering committee forum, which will meet on a periodic basis to review program status and

provide guidance around strategic issues that arise with the system.

14. This Memorandum of Understanding is an evolving document and will be subject to periodic changes.

The undersigned Continuum of Care representatives, on behalf of their respective counties, agree to form and participate in a shared Regional HMIS system.

Period of Agreement

This MOU will become effective upon signature of all parties and shall remain in effect until December 31, 2004

Signatures	Date	Signatures	Date
_____ Megan Schatz Continuum of Care Coordinator Alameda County-wide Continuum of Care	_____	_____ Cynthia Belon Director of Homeless Programs Contra Costa County	_____
_____ Jennifer Puff Coalition of Service Providers Marin County	_____	_____ Tom Melville Coalition of Homeless Services County of Monterey Continuum of Care	_____
_____ Annette Kramer Coalition of Service Providers Napa County	_____	_____ Dariush Kayhan Continuum of Care Coordinator San Francisco County	_____
_____ Judy Davila Office of Homelessness San Mateo County	_____	_____ Nora Kranzler Continuum of Care Coordinator Santa Cruz County	_____
_____ Debra Williams Community Action Agency Solano County	_____	_____ Kathleen Kane Continuum of Care Coordinator Sonoma County	_____
_____ Ray Allen Executive Director Community Technology Alliance	_____		

State of Connecticut

Since 2004, the Connecticut Coalition to End Homelessness (CCEH) has served as the HMIS Lead Agency for the state of Connecticut's HMIS implementation. For the first four years of the implementation, all staffing, governance, and technical work related to HMIS was done by CCEH.

In 2008, CCEH opted to seek both additional funding for HMIS from its state partners and developed a new structure for the management and day to day operations of its HMIS. CCEH partnered with Nutmeg Consulting LLC, an organization with the technical expertise necessary to be responsible for day to day operations of the HMIS, while CCEH would maintain a critical role as the manager the project. **As the technical lead for HMIS, Nutmeg's responsibilities include:**

1. Training and end user support
2. Communication with HMIS vendor about technical issues
3. Run and distribute data quality reports
4. Support the use of HMIS for the following HUD reports: HIC, PIT (sheltered), AHAR, NOFA, APRs and CAPER
5. Support the use of HMIS for required state reporting
6. Support the use of HMIS to meet requirements of other federal partners (e.g. VA)
7. Participate in HMIS Steering Committee meetings, and related regional HMIS meetings

As the HMIS Lead Organization, CCEH is still the organization that enters grant agreements with HUD for the HMIS and is responsible for the following tasks:

1. Submit HUD applications for HMIS funding, and appropriate APRs
2. Prepare and manage HMIS budget
3. Contract with HMIS vendor and handle all contract negotiations
4. Manage relationships with funders and key partners (e.g. state funders, interagency council, CoCs)
5. Organize and staff the HMIS Steering Committee and any related data committees
6. Use HMIS for research and analysis on homelessness in CT
7. Advocate for additional HMIS funding

To support these efforts, Connecticut also asks each CoC to identify a Local System Administrator who is responsible for providing some local support and reporting to the community. The following MOU summarizes the role of CCEH, the CoC and the Local System Administrators.



CT HMIS Memorandum of Understanding
CCEH and Participating CoCs

Effective June 2008

The CT Coalition to End Homelessness (CCEH) will:

- Oversee and coordinate all aspects of the CT HMIS Project's implementation and development;
- Serve as the primary contact with the CT HMIS vendor (Bowman Internet Systems);
- Monitor Bowman Internet Systems' performance under their contract with CCEH;
- Provide ongoing training and technical support on the use of ServicePoint;
- Oversee system administration, especially as it relates to external security protocols;
- Oversee and coordinate the activities of the Local System Administrators;
- Provide ongoing support, training, technical assistance to and function as a resource to the Local Systems Administrators and the Site Technical Coordinators.
- Provide CoC's with information needed from CT HMIS for the completion of the HUD SuperNOFA, including the Chart M-4 and Chart M-5. In addition, CCEH will provide CoC's with information needed for their Housing Inventory Charts.

The Continuum of Care will:

- Identify at least one person (either paid or volunteer) to act as a Local System Administrator for the CT HMIS project. The person designated to act as the Local System Administrator for their CoC, must be a licensed user of CT HMIS, but it is not required that the person has a strong technical background.
- In cases where the CoC has not been able to secure funding for a Local System Administrator, then that CoC will appoint a volunteer point of contact to work with CCEH to fill that role and ensure a full implementation and management of CT HMIS.

The Local Systems Administrator will:

- Regularly attend CT HMIS Steering Committee meetings held by CCEH.
- Regularly attend Local Systems Administrator meetings or conference calls held by CCEH.
- Bring CT HMIS monthly data quality reports to CoC meetings each month and update the CoC on the data quality status of its agencies and programs.

- When possible, serve as a liaison/primary contact between local end-users in their CoC and CCEH on issues related to CT HMIS.
- Notify local users and administrators of statewide training and technical assistance.
- Assist participating agencies in their CoC to understand and implement requirements related to security.
- Work with CoC's to develop action plans to get to acceptable levels of data quality, and to make CT HMIS a useful tool for their community.

By signing below I agree to the stipulations of this Memorandum of Understanding.

Executive Director of CT Coalition to End Homelessness

Signature _____ Date _____

Print Name _____

CoC Chair or Co-Chairs

CoC Co-Chair Signature _____ Date _____

Print Name and Title _____

Name of Agency _____

Mailing Address _____

Email _____

CoC Co-Chair Signature _____ Date _____

Print Name and Title _____

Name of Agency _____

Mailing Address _____

Email _____

Local Systems Administrator

Local System Administrator Signature _____ Date _____

Print Name and Title _____

Name of Agency _____

Mailing Address _____

Email _____

Please provide the following for CT HMIS records

Two originals of this form mailed to CCEH for Executive Director's signature, one of which will be returned to CoC for its records

Michigan

The State of Michigan has adopted a multi-jurisdictional HMIS implementation model. All CoCs in the State of Michigan agree to adopt the Michigan Statewide shared HMIS platform vendor, Bowman Systems Inc. ServicePoint. Each CoC agrees that administration of the shared platform will be provided by the Michigan Coalition Against Homelessness (MCAH) under contract with the Michigan State Housing Authority (MSHDA). The CoCs further agree to operate the local CoC Implementation in compliance with HUD Data Standards and the Michigan Statewide Operating Policies and Procedures.

Michigan Statewide HMIS Joint Governance Charter

Objective: The Charter is designed to provide a frame for Michigan’s multi-jurisdiction HMIS implementation as presented in Section 508.7 of the Federal Register / Vol. 76, No. 237 Homeless Management System Requirements. It is recognized that operation of the Statewide HMIS requires ongoing collaboration from member Continuum of Cares through participation in monthly System Coordination Meetings known as the “Monthly System Administrator Call-In”.

CoC: _____ agrees to adopt the Michigan Statewide shared HMIS platform vendor, Bowman Systems Inc. ServicePoint. The CoC agrees that administration of the shared platform will be provided by the Michigan Coalition Against Homelessness under contract with the Michigan State Housing Authority. The CoC further agrees to operate the local CoC Implementation in compliance with HUD Data Standards and the Michigan Statewide Operating Policies and Procedures.

Roles and Responsibilities:

Michigan State Housing Development Authority

- Grantee for the Michigan Statewide HMIS Implementation.
- Sub-contract for administration of the Statewide platform.
- Ongoing contract compliance.

Michigan Coalition Against Homelessness:

- Management of the Statewide Vendor Contract.
- Host the Statewide coordination meeting – the Monthly SA Call-In.
- Define privacy and security protocols that allow for the broadest possible participation.
- Provide Statewide Operating Policies and Procedures that represent the minimum standards for participation. Local CoCs may add additional requirements as negotiated locally.
- Provide for system administration and analyst staffing of help desk services between 9am and 5pm workdays and after-hours emergency response.
- Provide training and ongoing collaboration regarding cross-jurisdiction system operation, measurement and research activities including:
 - Negotiation and training basic workflows for all users and specialized workflows for cross-jurisdiction funding streams.
 - HUD mandated activities including HAG, PIT, HIC, APR and the AHAR.
 - Annual publication of Statewide and Regional unduplicated homeless counts.
 - Research projects that involve statewide data sets such as SHADoW.
 - Maintain a suite of data quality, demographics, and outcome reports available to all CoCs on the System.
 - Support for local Continuous Quality Improvement efforts.

Independent Jurisdiction CoC and Local Lead HMIS Agency:

- Plan the local HMIS implement to maximize the greatest possible participation from homeless service providers.
- Fund the cost for local licenses to the Statewide System via contracts with Bowman Systems.
- Comply with Michigan Statewide Privacy Protocols as specified in the QSOBAAs, Participation Agreements and the User Agreement Code of Ethics.

- Adopt and any additional standards of practice beyond those identified in the Statewide HMIS Operating Procedures.
- Staff at least one local System Administrator and assure that each participating agency has identified an Agency Administrator. The System Administrator will:
 - Complete demonstrate competence in Statewide required training in privacy, security and system operation (provider page, workflows and reports).
 - License local users and support data organization and completion of Provider Pages for participating agencies.
 - Assign licenses to Agency Administrators and/or users.
 - Host local HMIS operations meeting(s) or assure that Agency Administrators are attending the Statewide User Meetings.
 - Assure that all users are trained in privacy, security and system operation.
 - Participate in HUD mandated measurement including HAG, PIT, HIC, APRs and the AHAR as appropriate.
 - Participating in the annual count process and support publication of local reports.
 - Support the CoCs Continuous Quality Improvement efforts.

Signed: _____ Date: _____

HMIS Lead Agency: _____ Title: _____

Signed: _____ Date: _____

CoC Representative: _____ Title: _____

CoC: _____ agrees to adopt the

Agreement between MSHDA & MCAH

Michigan Statewide Homeless Information System

This agreement is made between the Michigan State Housing Development Authority (MSHDA) and the Michigan Coalition Against Homelessness (MCAH) as of the 1st day of February 2011 (the “Effective Date”) in order to provide ongoing operations and management of the Michigan Statewide Homeless Management Information System (MSHMIS).

Term of Agreement: February 1, 2012 – January 31, 2013

Services: MCAH will provide services related to the implementation and operations of MSHMIS. Specific roles and responsibilities of each party are articulated in the document (below). The Project Budget (attached to this Agreement) will serve as an initial spending outline for MCAH and MSHDA. This budget may be modified in accord with processes described in General Agreement below.

Fees: MSHDA agrees to pay MCAH for services rendered under this Agreement not to exceed \$. MCAH will submit reimbursement requests to MSHDA on a monthly basis, by the 15th of each month. MCAH will provide MSHDA with detailed invoice, cleared check copies and all supporting documentation of grant expenditures upon submission of monthly check request. MCAH will maintain copies of receipts and a spreadsheet of grant expenditures for HUD/MSDHA audit purposes.

General Agreements:

MCAH and MSHDA agree as follows:

1. MCAH will provide MSHDA quarterly detailed financial and progress reports. These reports will provide grant-to-date comparisons of actual expenses vs. projected expenses and accomplishments relative to objectives. They will also identify any specific challenges in MSHMIS implementation, clear identification of barriers or obstacles to fulfillment of objectives, and any recommendations for either programmatic or budgetary change.
2. MCAH and the project administrator designated by MSHDA will meet quarterly to review and (if necessary) adjust budget and work plans agreed upon. Budget revisions may be proposed by either party in order to address unanticipated program needs or emerging priorities.
3. MCAH will not make or enter into any subcontracts with budgetary shifts exceeding \$5,000 without prior written approval from MSHDA.
4. MCAH will not exceed any budgeted expenses by more than 10% from an approved line item category without prior written approval from MSHDA.
5. MCAH will provide to MSHDA a complete and accurate Annual Progress Report (in full accord with the federal Department of Housing and Urban Development (HUD) Supportive Housing Program requirements) within 60 days of the HUD operating year-end date (i.e. March 31) for Operating Year (OY) 2012.
6. MCAH will assure that reimbursements for travel and related expenses (e.g. mileage, lodging, and per diem) are consistent with rates and rules as published and updated by the State of Michigan.

FY 2011 Objectives:

During OY 2012, MCAH will:

1. Continue to support the move to the HARA model.
2. Implement MCAH's new support model including employment of SAI staff.
3. Provide training and training tools on automating the referral process for SPE's.
4. Train CQI processes to all Regions and at least 15 CoCs during the year.
5. Provide technical assistance to help agencies and CoC leadership understand how to interpret the outcome reports.
6. Provide aggregated data of state wide and regional outcome information to be published on an annual basis.
7. Continue to upgrade the 5.0 platform upgrades.
8. Improve grant compliance functionality by through routine audit of grant recipients through use of automated Reports and other data quality tools.
9. Train lead ESG agencies on HMIS workflow and preparation for quarterly progress reports.
10. Complete the HMIS compliance Balance of State CoC's provider page audits on and develop a strategy for ongoing quality improvement.
11. Provide data support to Michigan's Campaign to End Homelessness.

General Scope of Services:

MSHDA agrees that it will:

1. Provide overall programmatic leadership and budget/fiscal oversight of MSHMIS. This will include:
 - a. Executing and maintaining a grant agreement with HUD to serve as the lead organization regarding MSHMIS.
 - b. Maintain a contract with Bowman Information Systems (BIS) as the primary vendor for MSHMIS technical supports.
 - c. Coordinating efforts with MCAH on issues critical to the successful maintenance of the MSHMIS project, including:
 - i. Articulation and enforcement of expectations for participation both by local Continua of Care and funded homeless and housing services providers.
 - ii. Enforcement of established rules of participation in regards to both local Continua of Care and MSHMIS participants.
 - iii. Assuring timely license activation by BIS.
 - d. Providing general management oversight of the MSHMIS implementation through routine and timely monitoring of achievements of established objectives.
2. Provide all matching funding as required by HUD to maintain the operations of the MSHMIS at agreed upon levels.
3. Facilitate access to other State systems and departments as may be necessary to assure successful MSHMIS continuation.

MCAH agrees that it will:

1. Recruit, hire and supervise all staff needed to assure successful continuation of MSHMIS – in accord with budgeted assumptions outlined in the project budget.
2. Serve as the primary contact with BIS regarding use of the *ServicePoint* software.
3. Contract with BIS to support the purchase of licenses and other services for communities and agencies that exceed the levels allocated to each locality through available HUD Balance of State (BOS) funding.
4. Assure that data gathered through MSHMIS meets or exceeds HUD’s published minimum data standards.
5. Assure the security, privacy, and integrity of data gathered and entered into MSHMIS.
6. Enter into any necessary sub-agreements related to MSHMIS implementation, in accord with any relevant HUD and/or MSHDA procurement principles.
7. Provide training for MSHMIS participants on all MSHMIS upgrades.
8. Provide ongoing user support and “help-desk” support.
9. Work with BIS and MSHMIS participants to facilitate and properly document any customizations related to the statewide report.
10. Maintain standard reports/queries that will support use of MSHMIS at the state, Continuum, and MSHMIS participant levels.
11. Maintain active communications with Continuum of Care planning bodies (and their partnering agencies) participating in MSHMIS implementation.
12. Provide MSHDA with routine documentation necessary to coordinate services and ensure accountability with BIS and MSHMIS participants. At minimum this documentation will include:
 - a. Review of Bowman invoices for accuracy prior to MSHDA processing.
 - b. Documentation related to any requested customizations over five-thousand dollars (\$5,000).
13. Provide MSHDA with specified reports and other documentation related to the execution of this contract – which will include, but not limited to:
 - a. Monthly financial reimbursement requests.
 - b. Quarterly Performance reports addressing progress on all planned deliverables and clear identification of any barriers or obstacles to fulfillment of performance objectives.
 - c. Annual Independent Audit in accord with established OMB A-133 regulations.
14. MCAH acknowledges that MSHDA has entered into a contract with BIS regarding the provision of software, hosting of data, and maintenance of the data system to assist in implementing MSHMIS. MCAH and MSHDA agree that no terms in this Agreement are intended to be in contradiction to the terms of that contract.
15. MSHDA makes no warranties, expressed or implied. MCAH, at all times, will indemnify and hold MSHDA harmless from any damages, liabilities, claims, and expenses that may be claimed against the MCAH; or for injuries or damages to the MCAH or another party arising under this Agreement; or arising from any acts, omissions, neglect, or fault of MCAH or its agents, employees, licensees, or clients; or arising from MCAH’s failure to comply with laws, statutes, ordinances, or regulations applicable to it or the conduct of its business. MCAH will also hold MSHDA harmless for loss of damage resulting in the loss of data due to delays, nondeliveries, mis-deliveries, or service interruption caused by Bowman Information Systems, by MCAH’s, or a Continuum of Care area’s, or local agency’s negligence or errors or omissions, as well as natural disasters, technical difficulties, and/or acts of God. MSHDA shall not be liable to MCAH for damages, losses, or injuries to MCAH or another party than if such is the result of gross negligence or willful misconduct of MSHDA. MSHDA agrees to hold MCAH harmless from any damages, liabilities, claims or expenses cause solely by the negligence or misconduct of MSHDA.

16. MCAH agrees to keep in force a comprehensive general liability insurance policy with combined single limit coverage for theft or damage of MCAH's MSHMIS-related hardware and software, as well as coverage of MCAH's indemnification obligations under this agreement.

Provisions of paragraph 16 shall survive any termination of the Agreement.

IN WITNESS WHEREOF, the parties have entered into this Agreement effective the Effective Date.

Michigan State Housing Development Authority

Michigan Coalition Against Homelessness

State of Ohio*

The Ohio Department Services Agency (ODSA) is the HMIS lead entity for the BoS CoC in Ohio. ODSA secures project funding by preparing and executing a grant agreement with HUD for a dedicated HMIS grant through the CoC Program. ODSA then subcontracts with COHHIO for HMIS project support services, training, and end user support. COHHIO manages the HMIS governing group on behalf of ODSA. ODSA is able to leverage the State's technology and database management infrastructure to provide comprehensive system administration services and more sophisticated analytical reporting capacity. The ODSA-COHHIO partnership enables a more distinct and transparent separation of duties from those provided by ODSA (project funding, governance, and system administration) in relation to those functions performed by COHHIO (initial project set up, end user training and support, reporting and analysis support for end users).

ODSA provides some additional project funding beyond the HUD grant. ODSA also provides some in-kind match via staff support for the project.

COHHIO and ODSA have established a "Core Group" of statewide advocates, homeless providers, funders and public officials. The Core Group manages and governs HMIS; it's generally a collaborative meeting and reflects the collaborative approach to managing HMIS. ODSA evaluates COHHIO's performance via COHHIO's annual grant agreement renewal and through semi-annual reporting.

***NOTE**

ODSA and COHHIO are in the midst of establishing a new governance charter and executing all new partnership agreements and contracts. Because the document is being developed currently, neither party felt comfortable sharing examples of that might not reflect the final product.

Greater New Orleans HMIS

The Greater New Orleans Homeless Management Information System is managed by UNITY, an area non-profit that provides an array of housing and services to people experiencing homelessness. As the HMIS Lead Agency, UNITY is charged with completing the annual funding application and reporting to HUD, as well as connecting the data generated from HMIS to community efforts to end homelessness, such as the Continuum of Care and area Ten Year Plan to End Homelessness.

UNITY subcontracts with VIA Link to provide technical support for its HMIS. For the last several years, VIA Link primarily relied on the efforts of one staff person to implement the HMIS and provide all training, technical support, and report generation for the system. Recently, UNITY was able to secure additional HUD funding for the HMIS and allocated those dollars to add some staff capacity for VIA Link's HMIS work. The additional staff are primarily focused on improving data quality of the HMIS information by both providing more on-site technical assistance to agencies, and entering data for high-volume shelters.

VIA Link is the primary point of contact with its HMIS vendor (Bowman), and UNITY contracts directly with the vendor to provide the HMIS to the community. While UNITY relies heavily on VIA Link for the technical support and report generation of the HMIS, they take the lead on public communication about the results. Recently, UNITY began convening a quarterly reporting forum to share the results with all agencies participate in the HMIS. UNITY facilitates these reporting forums and takes the lead in explaining the reports to agencies. VIA Link attends and actively participates in the forum, but again UNITY helps bridge the gap that can sometimes exist between the agencies entering data into the system and the technical organization that is charged with supporting them.

UNITY does not have any staff dedicated to the HMIS project, but several management staff work directly with VIA Link to manage the HMIS project. UNITY meets regularly with VIA Link (ideally monthly) to check in on the progress of the implementation and discuss any current issues or challenges with the HMIS. These meetings have proven to be a successful way of ensuring that both the HMIS lead and the technical staff are on the same page about the current priorities and activities of the HMIS.