

2022 Program Review and Certification Self-Certification Standards

| Standard A8 | Guideline A8 | Monitoring Method | Conclusion | Certifying Official | Tier | Program Type |
|---|---|--------------------|--|---------------------|------|--------------|
| The agency must be a registered 501(c)3 or 501(c)4. | <input type="checkbox"/> Up-to-date 501(c)3 or 501(c)4 documents are kept on file | Self-certification | Compliant Compliant with conditions Non-compliant N/A | | 3 | All programs |

| Standard A9 | Guideline A9 | Monitoring Method | Conclusion | Certifying Official | Tier | Program Type |
|--|---|--------------------|--|---------------------|------|--------------|
| The governing board is informed about the needs of homeless persons at least annually. | <input type="checkbox"/> Board minutes or other documentation reflect recent opportunities for board members to gather information about the homeless population. <input type="checkbox"/> Examples include presentation of results from focus groups, arranging a resident panel discussion, or participating in the annual Board2Board dialogue. | Self-certification | Compliant Compliant with conditions Non-compliant N/A | | 3 | All programs |

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| Standard A10 | Guideline A10 | Monitoring Method | Conclusion | Certifying Official | Tier | Program Type |
|--|--|--------------------|--|---------------------|------|--------------|
| The agency has a policy that prohibits sexual harassment which is applicable to staff, trustees, volunteers, vendors, and clients. | <input type="checkbox"/> The agency has a process for communicating and educating staff, trustees, volunteers, vendors, and clients on the policy. | Self-certification | Compliant Compliant with conditions Non-compliant N/A | | 3 | All programs |

| Standard A11 | Guideline A11 | Monitoring Method | Conclusion | Certifying Official | Tier | Program Type |
|---|--|--------------------|--|---------------------|------|--------------|
| Staff receive training in the following areas: (1) Emergency evacuation procedures; (2) Universal Precautions; (3) CPR and First Aid; (4) Non-violent crisis intervention; (5) Ethical client practices; (6) Cultural competency and diversity, including training specific to any target population(s) served; (7) Recognition and reporting of child and elder abuse; (8) Agency operating procedures; (9) Relevant community resources and social service programs; | <input type="checkbox"/> The agency has a policy for ensuring that each new employee receives initial training within the first 6 months of employment or probationary/orientation period (whichever comes first) and that employees maintain certification where applicable. <input type="checkbox"/> If the training is not certified by an external body (e.g., first aid), employees should receive training at least once every two years. <input type="checkbox"/> The agency has a tracking system that identifies when each employee needs to receive training again and documentation of licensure for positions that require | Self-certification | Compliant Compliant with conditions Non-compliant N/A | | 3 | All programs |

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|---|--|--|--|--|--|
| <p>(10) Customer service techniques; (11) Evidence-based practices relevant to project type (12) Evidence-based practices relevant to population(s) served by the project. (13) Homeless Crisis Response System Overview</p> | <p>licensed or credentialed staff.</p> <ul style="list-style-type: none"> <input type="checkbox"/> If serving youth, staff must be trained in Positive Youth Development. | | | | |
|---|--|--|--|--|--|

| Standard A12 | Guideline A12 | Monitoring Method | Conclusion | Certifying Official | Tier | Program Type |
|---|--|---------------------------|---|---------------------|----------|---------------------|
| <p>The agency has an organizational chart and written personnel policies detailing employee responsibilities, rights, roles, benefits, job description, attendance requirements, grievance procedures, hiring and termination procedures, annual employee review protocol, hours of operation, confidentiality and the agency's compensation and benefits plan.</p> | <ul style="list-style-type: none"> <input type="checkbox"/> The agency has a written personnel policy and procedure manual and a process for disseminating it to employees upon employment and when there are policy revisions. <input type="checkbox"/> The manual is available for review and regularly updated. <input type="checkbox"/> Agency has an organizational chart. | <p>Self-certification</p> | <p>Compliant</p> <p>Compliant with conditions</p> <p>Non-compliant</p> <p>N/A</p> | | <p>3</p> | <p>All programs</p> |

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| Standard A13 | Guideline A13 | Monitoring Method | Conclusion | Certifying Official | Tier | Program Type |
|--|--|--------------------|--|---------------------|------|--------------|
| Staff attends applicable system and partner meetings, trainings, and capacity building activities. | <input type="checkbox"/> Staff can describe attendance at meetings convened by CSB. <input type="checkbox"/> Examples of meetings include Adult System Operations Workgroup, Family System Operations Workgroup, Permanent Supportive Housing Roundtable, Veteran System Operation Workgroup, YHDP partner meetings, Prevention Operations Workgroup, HMIS Administrators Group , coordinated planning activities, and focus groups. | Self-certification | Compliant Compliant with conditions Non-compliant N/A | | 3 | All programs |
| Standard A14 | Guideline A14 | Monitoring Method | Conclusion | Certifying Official | Tier | Program Type |
| All staff and volunteers are identifiable to clients and visitors. | <input type="checkbox"/> Easy identification can be achieved by staff nametags, shirts, or uniforms. | Self-certification | Compliant Compliant with conditions Non-compliant N/A | | 3 | All programs |

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| Standard D15 | Guideline D15 | Monitoring Method | Conclusion | Certifying Official | Tier | Program Type |
|--|--|--------------------|---|---------------------|------|--------------|
| <p>The agency does not do business with the enemy, as defined in 2 CFR 200.215.</p> <p>The agency does not contract with or procure services from telecommunications and video surveillance vendors listed in 2 CFR 200.216.</p> | <p>The agency ensures it does not do business with the enemy or purchase goods or services from telecommunications and video surveillance vendors that are prohibited.</p> | Self-certification | <p>Compliant</p> <p>Compliant with conditions</p> <p>Non-compliant</p> <p>N/A</p> | | 3 | All programs |

| Standard E15 | Guideline E15 | Monitoring Method | Conclusion | Certifying Official | Tier | Program Type |
|---|---|--------------------|---|---------------------|------|--|
| <p>At least one staff person with verifiable training in emergency first aid, emergency evacuation, and CPR is on duty at all times.</p> <p>Formerly Standard E14</p> | <ul style="list-style-type: none"> <input type="checkbox"/> Management can identify staff members trained in first aid, CPR, and emergency evacuation scheduled for each shift. <input type="checkbox"/> Training logs, certificates of completion, and recent shift scheduled are available. | Self-certification | <p>Compliant</p> <p>Compliant with conditions</p> <p>Non-compliant</p> <p>N/A</p> | | 3 | All programs where on-site services are provided |

| Standard E16 | Guideline E16 | Monitoring Method | Conclusion | Certifying Official | Tier | Program Type |
|---|---|--------------------|--|---------------------|------|--------------|
| <p>Access to programs must be provided in accordance with the coordinated access policies and procedures in the HCRS P&Ps. Coordinated access</p> | <ul style="list-style-type: none"> <input type="checkbox"/> Written policies and procedures describe the standardized assessment process and any variations for different populations. | Self-certification | <p>Compliant</p> <p>Compliant with conditions</p> <p>Non-compliant</p> | | 3 | All programs |

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|---|---|--|-----|--|--|--|
| <p>policies and procedures adhere to the federal requirements in HUD Notice CPD-17-01 Notice Establishing Additional Requirements for a Continuum of Care Centralized or Coordinated Assessment System.</p> | <ul style="list-style-type: none"> <input type="checkbox"/> Written policies include procedures regarding data collection and privacy. <input type="checkbox"/> The CPOA covers all of Columbus and Franklin County; is easily accessed; is well-advertised; includes a comprehensive and standardized assessment tool; provides an initial, comprehensive assessment for housing and services; and includes a specific policy regarding those fleeing or attempting to flee domestic violence, dating violence, sexual assault, or stalking. Access points are accessible to persons with disabilities and limited English proficiency. <input type="checkbox"/> The CPOA offers the same assessment approach at all access points, but may include variations to meet the specific needs of adults without children, adults accompanied by children, unaccompanied youth, pregnant/parenting youth, households fleeing domestic violence, persons at risk of homelessness, | | N/A | | | |
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| | <p>and veterans, if these variations would facilitate access and improve the quality of information gathered through the assessment.</p> <ul style="list-style-type: none"> <input type="checkbox"/> Assessments include culturally and linguistically competent questions for all persons that reduce barriers to housing and services for special populations. <input type="checkbox"/> The coordinated entry process prioritizes households for housing and services. CPOA and shelters have a uniform and coordinated referral process for all beds, units, and services. | | | | |
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| Standard E17 | Guideline E17 | Monitoring Method | Conclusion | Certifying Official | Tier | Program Type |
|--|--|---------------------------|---|---------------------|----------|---------------------|
| <p>If the program holds funds or possessions on behalf of clients, the written policy describes how and when the funds or possessions will be promptly returned upon the client's request.</p> | <ul style="list-style-type: none"> <input type="checkbox"/> The program has a written recordkeeping system for tracking receipt and return of funds or possessions held on behalf of clients. <input type="checkbox"/> The program has records of accountability for any money management / payee programs for clients' funds or possessions | <p>Self-certification</p> | <p>Compliant</p> <p>Compliant with conditions</p> <p>Non-compliant</p> <p>N/A</p> | | <p>3</p> | <p>All programs</p> |

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| | <p>turned over to the program for safekeeping.</p> <p><input type="checkbox"/> There is an easily accessible process for getting funds/possessions back from program staff.</p> | | | | |
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| Standard F10 | Guideline F10 | Monitoring Method | Conclusion | Certifying Official | Tier | Program Type |
|--|---|---------------------------|---|---------------------|----------|---|
| <p>Clients are informed about and participate in a residents' council that meets at least quarterly.</p> | <p><input type="checkbox"/> Staff assists with convening a residents' council or regular meeting of tenants for a particular project (single site or scattered sites).</p> <p><input type="checkbox"/> Staff encourages tenants to participate in the council, which can address a variety of topics, including facility and program concerns.</p> <p><input type="checkbox"/> Staff keeps notes from council meetings that are available for review.</p> | <p>Self-certification</p> | <p>Compliant</p> <p>Compliant with conditions</p> <p>Non-compliant</p> <p>N/A</p> | | <p>3</p> | <p>All programs where tenants sign leases</p> |

| Standard F11 | Guideline F11 | Monitoring Method | Conclusion | Certifying Official | Tier | Program Type |
|---|--|---------------------------|--|---------------------|----------|---------------------|
| <p>Clients are informed of CSB's Citizens Advisory Council (CAC) and the Youth Action Board (YAB, for youth aged 18-24) and encouraged to participate. Agencies work to ensure at least</p> | <p><input type="checkbox"/> Staff informs clients upon entry into the program that they are eligible to participate in the CAC and YAB, as applicable, and provides information regarding involvement.</p> | <p>Self-certification</p> | <p>Compliant</p> <p>Compliant with conditions</p> <p>Non-compliant</p> | | <p>3</p> | <p>All programs</p> |

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|--|--|--|-----|--|--|--|
| <p>one resident per program participates in monthly CAC and YAB meetings, as applicable.</p> | <ul style="list-style-type: none"> <input type="checkbox"/> The agency posts information on the CAC and YAB in single site supportive housing buildings and shelters. <input type="checkbox"/> Staff periodically remind tenants about the CAC and YAB and encourage participation. <input type="checkbox"/> Staff assists clients with transportation to CAC and YAB meetings. | | N/A | | | |
|--|--|--|-----|--|--|--|

| Standard F12 | Guideline F12 | Monitoring Method | Conclusion | Certifying Official | Tier | Program Type |
|--|--|--------------------|---|---------------------|------|--------------|
| <p>The agency has a written policy, procedure and process for reporting child and elder abuse.</p> | <ul style="list-style-type: none"> <input type="checkbox"/> The agency has a written policy and procedure for reporting. <input type="checkbox"/> The agency disseminates the policy and procedure to all staff and ensures that agency staff is trained in the procedure. <input type="checkbox"/> Staff can describe how they ensure the policy and procedure is implemented and effective. | Self-certification | <p style="text-align: center;">Compliant</p> <p style="text-align: center;">Compliant with conditions</p> <p style="text-align: center;">Non-compliant</p> <p style="text-align: center;">N/A</p> | | 3 | All programs |

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| Standard I1 | Guideline I1 | Monitoring Method | Conclusion | Certifying Official | Tier | Program Type |
|--|--|---------------------------|---|---------------------|----------|---|
| <p>The agency works with stakeholders in a good faith effort to develop a partnership with neighbors, neighborhood organizations and agencies, neighborhood businesses, and other groups. The agency or program has initiated Good Neighbor Agreement (GNA) discussions and executed a written agreement, or every reasonable effort has been made to execute a written agreement.</p> | <ul style="list-style-type: none"> <input type="checkbox"/> The agency has a GNA for each single site PSH or TH complex or shelter funded by CSB and/or HUD (sponsor based or project based). <input type="checkbox"/> GNAs are encouraged but not required for sponsor-based scattered sites PSH or TH programs with multiple units in one neighborhood. If there are neighborhood concerns or issues, however, CSB will ask that the program engage in good neighbor work. <input type="checkbox"/> GNAs are reviewed with neighbors and neighborhood representatives and updated at least every three years. <input type="checkbox"/> Neighbors include owners and tenants for business, residences and institutions. Neighborhood representatives include the Area Commission, the neighborhood association, | <p>Self-certification</p> | <p>Compliant</p> <p>Compliant with conditions</p> <p>Non-compliant</p> <p>N/A</p> | | <p>3</p> | <p>PSH (single site), TH (single site), Shelters, projects with neighborhood issues</p> |

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| | <p>and any other prominent groups active in the area.</p> <p><input type="checkbox"/> If the program is unable to negotiate a signed GNA, letters, meeting minutes and other correspondence shows good faith efforts to work with the neighborhood and obtain a signed GNA. The agency documented the reasons neighbors refused to sign a GNA.</p> | | | | | |
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| Standard I2 | Guideline I2 | Monitoring Method | Conclusion | Certifying Official | Tier | Program Type |
|--|---|---------------------------|---|---------------------|----------|--------------------------|
| <p>The Agency establishes, monitors, and complies with neighborhood safety, security, codes of conduct, and property management standards.</p> | <p><input type="checkbox"/> Staff are aware of neighborhood expectations regarding code of conduct and property management. If applicable, these Standards are incorporated into the GNA.</p> <p><input type="checkbox"/> Staff and residents uphold neighborhood standards (e.g., participation in neighborhood block watch)</p> | <p>Self-certification</p> | <p>Compliant</p> <p>Compliant with conditions</p> <p>Non-compliant</p> <p>N/A</p> | | <p>3</p> | <p>PSH, TH, Shelters</p> |

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| Standard I3 | Guideline I3 | Monitoring Method | Conclusion | Certifying Official | Tier | Program Type |
|--|---|--------------------|--|---------------------|------|--|
| Board members and/or agency staff participates in appropriate neighborhood associations. | <input type="checkbox"/> The agency has a list of neighborhood associations in which its board and/or staff participate. Written meeting notes are available. <input type="checkbox"/> The agency can identify by name and title the contact persons for each group. | Self-certification | Compliant Compliant with conditions Non-compliant N/A | | 3 | PSH, TH, Shelters, projects with neighborhood issues |

| Standard I4 | Guideline I4 | Monitoring Method | Conclusion | Certifying Official | Tier | Program Type |
|--|--|--------------------|--|---------------------|------|--|
| The agency has identified current, appropriate stakeholders pertinent to the area, including residential, commercial, industrial, or institutional stakeholders. | <input type="checkbox"/> Staff can provide a list of neighborhood stakeholders, including adjacent property owners and tenants; neighborhood and civic organizations; and others who reside or work in the neighborhood. | Self-certification | Compliant Compliant with conditions Non-compliant N/A | | 3 | PSH (single site), TH (single site), Shelters, projects with neighborhood issues |

| Standard J14 | Guideline J14 | Monitoring Method | Conclusion | Certifying Official | Tier | Program Type |
|--|--|--------------------|--|---------------------|------|--|
| The agency and any housing units comply with all applicable building, housing, zoning, environmental, fire, health, safety, and life safety codes, Americans with Disabilities Act policies, Section 504 of the Rehabilitation | <input type="checkbox"/> The agency has occupancy permits available for review. <input type="checkbox"/> The agency can document that use of buildings is consistent with zoning. <input type="checkbox"/> The agency can show proof that building(s) passed the fire safety inspection. | Self-certification | Compliant Compliant with conditions Non-compliant N/A | | 3 | PSH, TH, RRH, Shelters, and any location where on-site services are provided |

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|--|---|--|--|--|--|
| Act, and fair housing laws. Site-based programs with clients have Building and Occupancy Permits posted. | <input type="checkbox"/> The agency can describe plans for accommodating persons with disabilities. Examples include providing qualified sign language interpreters and materials in formats such as Braille, audio, or large type. | | | | |
| | <input type="checkbox"/> The agency can state if it has any pending litigation or investigation for civil rights or fair housing complaints. | | | | |
| | <input type="checkbox"/> The agency can confirm that all programs comply with the new construction, reasonable accommodation, and rehabilitation requirements of Section 504 of the Rehabilitation Act. | | | | |

| Standard J15 | Guideline J15 | Monitoring Method | Conclusion | Certifying Official | Tier | Program Type |
|---|---|--------------------|---------------------------|---------------------|------|--------------|
| Shelter and TH clients may use the shelter or TH facility as a legal residence for the purpose of voter registration. | <input type="checkbox"/> Staff encourages clients to register to vote and provides information to clients on voting rights. This information can be disseminated as part of the intake process. | Self-certification | Compliant | | 3 | TH, Shelters |
| | <input type="checkbox"/> Voter registration forms are available on-site. | | Compliant with conditions | | | |
| | | | Non-compliant | | | |
| | | | N/A | | | |

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| Standard J16 | Guideline J16 | Monitoring Method | Conclusion | Certifying Official | Tier | Program Type |
|--|---|---------------------------|---|---------------------|----------|---|
| <p>The agency implements Universal Precautions Procedures as required by Occupational Safety and Health Administration (OSHA), is in compliance with applicable standards, and has written plans for identification, treatment, and control of medical and health conditions. The agency consults with the Columbus Health Department or other appropriate entities on sanitation, communicable diseases, hazardous material storage and use, and food handling.</p> | <ul style="list-style-type: none"> <input type="checkbox"/> Facilities show compliance with OSHA standards. <input type="checkbox"/> The agency has letters, certifications, or other written evidence that it has consulted with the appropriate certifying agencies regarding the referenced topics. <input type="checkbox"/> Appropriate agencies include the Ohio Department of Health, Franklin County Department of Health, Columbus Health Department, OSHA, and the Mid-Ohio Food Collective. <input type="checkbox"/> The agency has written policies and procedures for detecting, controlling, and reporting communicable diseases according to Ohio Department of Health, Franklin County Public Health, and Columbus Public Health communicable disease reporting requirements located at https://idrsinfo.org/. | <p>Self-certification</p> | <p>Compliant</p> <p>Compliant with conditions</p> <p>Non-compliant</p> <p>N/A</p> | | <p>3</p> | <p>Site-based PSH, TH, and Shelters</p> |

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|--|---|--|--|--|--|--|
| | <ul style="list-style-type: none"> <input type="checkbox"/> The agency reports communicable diseases to public health officials and CSB (via a major/unusual incident report) when detected by the end of the next business day. The policy and procedure includes or references procedures concerning universal precautions. <input type="checkbox"/> The agency documents reports provided to public health officials and CSB when reportable communicable diseases are detected. <input type="checkbox"/> Cleaning supplies and other toxic chemicals are kept in areas not accessible to residents without staff assistance. The facility has spill kits or other appropriate protocol for handling toxic substances, such as drain opener, oven cleaner, or bleach. | | | | | |
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| Standard J17 | Guideline J17 | Monitoring Method | Conclusion | Certifying Official | Tier | Program Type |
|--|---|--|--|---------------------|------|--|
| Food preparation areas must contain suitable space and equipment to store, prepare, and serve food in a safe and sanitary manner. If the program provides storage for a food pantry, there is evidence that the Mid-Ohio Food Collective has determined that adequate provisions have been made for sanitary handling and safe storage of foods. | <input type="checkbox"/> Letters, reports, or other documentation from an appropriate review and certifying body are available for review. <input type="checkbox"/> If the facility is not required to have a food license, the appropriate agency is consulted at least biannually. <input type="checkbox"/> Agencies that provide supportive housing for persons with disabilities must provide meals or meal preparation facilities for clients. | Self-certification For ESG-funded shelters, CSB completed a habitability inspection. | Compliant Compliant with conditions Non-compliant N/A | | 3 | PSH, TH, RRH, Shelters that provide on-site meals or food pantries |

| Standard J18 | Guideline J18 | Monitoring Method | Conclusion | Certifying Official | Tier | Program Type |
|---|--|--|--|---------------------|------|--|
| Exits, steps, and walkways are clear of debris, ice, snow, and other hazards. There is a process in place to maintain clear walkways. Steps have treads or similar accommodation to prevent slipping. | <input type="checkbox"/> All steps and stairways have handles and treads. All walkways are kept in safe conditions regardless of the season. The facility has a plan for ensuring that debris is regularly removed from walkways. <input type="checkbox"/> Scattered Site programs use landlords who ensure walkways are kept in safe conditions. | Self-certification For ESG-funded shelters, CSB completed a habitability inspection. | Compliant Compliant with conditions Non-compliant N/A | | 3 | PSH, TH, RRH, Shelters, and any location where on-site services are provided |

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| | <input type="checkbox"/> The program advocates for clients regarding these issues, as needed. | | | | |
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| Standard J19 | Guideline J19 | Monitoring Method | Conclusion | Certifying Official | Tier | Program Type |
|--|--|--------------------|--|---------------------|------|------------------------------------|
| Staff has keys to all locks in the facility. In independent units, clients are responsible for locking their unit, but staff maintains the ability to access the units at all times. | <input type="checkbox"/> Residents are not able to lock staff out of the unit, nor are staff able to lock residents in. <input type="checkbox"/> Staff has a plan and procedure that does not violate landlord-tenant law for entering units, as appropriate, in case of emergency. | Self-certification | Compliant Compliant with conditions Non-compliant N/A | | 3 | Site-based PSH, TH, Shelters |

| Standard J20 | Guideline J20 | Monitoring Method | Conclusion | Certifying Official | Tier | Program Type |
|--|--|--------------------|--|---------------------|------|------------------------------------|
| The agency has done radon testing and made any necessary changes in buildings where clients have access to the basement. | <input type="checkbox"/> Written evidence of testing results and remediation activities, such as reports or other correspondence, is available for review. | Self-certification | Compliant Compliant with conditions Non-compliant N/A | | 3 | Site-based PSH, TH, Shelters |

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| Standard K4 | Guideline K4 | Monitoring Method | Conclusion | Certifying Official | Tier | Program Type |
|---|---|--------------------|--|---------------------|------|--------------|
| The agency has a quality assurance process to minimize incomplete, inaccurate, and fraudulent DCA applications. | <input type="checkbox"/> Staff can provide policies and procedures on DCA application processing. <input type="checkbox"/> Staff can describe the quality assurance process. | Self-certification | Compliant Compliant with conditions Non-compliant N/A | | 3 | All programs |

| Standard M21 | Guideline M21 | Monitoring Method | Conclusion | Certifying Official | Tier | Program Type |
|--|---|--------------------|--|---------------------|------|--------------|
| The agency applies system security provisions to all the systems where PPI is stored, including but not limited to, the agency's networks, desktops, laptops, mini-computers, mainframes, and servers. Formerly Standard M20 | <input type="checkbox"/> The agency's IT specialist can confirm that these system security provisions are in place. | Self-certification | Compliant Compliant with conditions Non-compliant N/A | | 3 | All programs |

| Standard M22 | Guideline M22 | Monitoring Method | Conclusion | Certifying Official | Tier | Program Type |
|--|--|--------------------|--|---------------------|------|--------------|
| The agency secures HMIS and stored HMIS data with a user authentication system consisting of a user name and a password. Formerly Standard M21 | <input type="checkbox"/> Written policy is available for review. <input type="checkbox"/> IT specialist can confirm compliance. | Self-certification | Compliant Compliant with conditions Non-compliant N/A | | 3 | All programs |

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| Standard M23 | Guideline M23 | Monitoring Method | Conclusion | Certifying Official | Tier | Program Type |
|--|---|--------------------|---|---------------------|------|--------------|
| <p>The agency protects HMIS from malicious intrusions behind a secure firewall.</p> <p>Formerly Standard M22</p> | <ul style="list-style-type: none"> <input type="checkbox"/> Each individual station has its own firewall or there is a firewall between each workstation and any system, including the Internet and other computer networks located outside of the agency. <input type="checkbox"/> The agency has a policy for review. <input type="checkbox"/> IT specialist can confirm compliance. | Self-certification | <p>Compliant</p> <p>Compliant with conditions</p> <p>Non-compliant</p> <p>N/A</p> | | 3 | All programs |

| Standard M24 | Guideline M24 | Monitoring Method | Conclusion | Certifying Official | Tier | Program Type |
|--|---|--------------------|---|---------------------|------|--------------|
| <p>If an agency uses public forums for data collection or reporting, at a minimum, HMIS must be secured to allow only connections from previously approved computers and systems through Public Key Infrastructure (PKI) certificates, extranets that limit access based on the Internet Provider (IP) address, or similar means.</p> <p>Formerly Standard M23</p> | <ul style="list-style-type: none"> <input type="checkbox"/> The HMIS system provides automatic compliance with this standard. | Self-certification | <p>Compliant</p> <p>Compliant with conditions</p> <p>Non-compliant</p> <p>N/A</p> | | 3 | All programs |

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| Standard M25 | Guideline M25 | Monitoring Method | Conclusion | Certifying Official | Tier | Program Type |
|--|--|--------------------|---|---------------------|------|--------------|
| <p>If the agency copies HMIS data on a regular basis to another medium (e.g., external hard drive) it stores the medium in a secure off-site location where the required privacy and security standards also apply.</p> <p>Formerly Standard M24</p> | <ul style="list-style-type: none"> <input type="checkbox"/> Agency backup information is securely stored. <input type="checkbox"/> IT specialist can confirm compliance. | Self-certification | <p>Compliant</p> <p>Compliant with conditions</p> <p>Non-compliant</p> <p>N/A</p> | | 3 | All programs |

| Standard M26 | Guideline M26 | Monitoring Method | Conclusion | Certifying Official | Tier | Program Type |
|--|--|--------------------|---|---------------------|------|--------------|
| <p>If the agency stores data in a central server, mini-computer, or mainframe, it stores the central server, mini-computer, or mainframe in a secure room with appropriate temperature control and fire suppression systems.</p> <p>Formerly Standard M25</p> | <ul style="list-style-type: none"> <input type="checkbox"/> IT specialist can demonstrate compliance. | Self-certification | <p>Compliant</p> <p>Compliant with conditions</p> <p>Non-compliant</p> <p>N/A</p> | | 3 | All programs |

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| Standard M27 | Guideline M27 | Monitoring Method | Conclusion | Certifying Official | Tier | Program Type |
|--|--|--------------------|--|---------------------|------|--------------|
| Surge suppressors must be used to protect systems used for collecting and storing all of the HMIS data. Formerly Standard M26 | <input type="checkbox"/> IT specialist can confirm compliance. | Self-certification | Compliant Compliant with conditions Non-compliant N/A | | 3 | All programs |

| Standard M28 | Guideline M28 | Monitoring Method | Conclusion | Certifying Official | Tier | Program Type |
|--|---|--------------------|--|---------------------|------|--------------|
| Agencies that have systems that have access to any HMIS data maintain a user access log and logs are checked regularly. Formerly Standard M27 | <input type="checkbox"/> The HMIS system provides automatic compliance with this standard. | Self-certification | Compliant Compliant with conditions Non-compliant N/A | | 3 | All programs |

| Standard M29 | Guideline M29 | Monitoring Method | Conclusion | Certifying Official | Tier | Program Type |
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| The agency applies application security provisions to the software during data entry, storage, review and any other processing function. Formerly Standard M28 | <input type="checkbox"/> The HMIS system provides automatic compliance with this standard. | Self-certification | Compliant Compliant with conditions Non-compliant N/A | | 3 | All programs |

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| Standard M30 | Guideline M30 | Monitoring Method | Conclusion | Certifying Official | Tier | Program Type |
|---|--|--------------------|---|---------------------|------|--------------|
| <p>The agency stores all HMIS data in a binary format.</p> <p>Formerly Standard M29</p> | <p><input type="checkbox"/> If the agency uses one of several common applications (e.g., Microsoft Access, Microsoft SQL Server, and Oracle), it is already storing data in binary format, and no other steps are necessary.</p> | Self-certification | <p>Compliant</p> <p>Compliant with conditions</p> <p>Non-compliant</p> <p>N/A</p> | | 3 | All programs |

CSB reviews Tier 1 standards annually and 2 standards every 4 years. For years when CSB does not review Tier 2 standards, agency staff certifies compliance with both Tier 2 and Tier 3 standards in the 'Certifying Official' column.