

**PFS PSH Pilot Program
Governance and Reporting Procedures**

<p>Overview</p>	<p>Governance for the Program is managed through a Governance Committee, established change management procedures, and reporting.</p> <p>Governance is led by the Executive Steering Committee. The Rhode Island Coalition to End Homelessness (“RICEH”) is responsible for scheduling all governance meetings, proposing an agenda in advance of the meeting, and circulating notes and follow-ups after the meeting. The composition, roles, and responsibilities of the Executive Steering Committee are detailed below.</p> <p>Change Management Procedures lay out the process and protocols for implementing changes to the Program. Change management procedures do not apply to program activity not governed by the Program Operations Model, the Program Financial Model, the Evaluation Plan, the Outcomes Payment Schedule, and the Governance and Reporting Procedures.</p> <p>Reports will be composed of key operational and evaluation interim metrics. Certain reports will be reviewed by the Executive Steering Committee to track progress of the Program.</p>
<p>COMMITTEE STRUCTURE</p>	
<p>Executive Steering Committee</p>	<p>Purpose: The Executive Steering Committee is responsible for setting the strategic direction, vision, and goals for the Program and monitors the Program’s compliance with the Program Operations Model, the Program Financial Model, the Evaluation Plan, Outcomes Payment Schedule, and the Governance and Reporting Procedures. Members of the Executive Steering Committee are also charged with serving as champions of PFS PSH within their home organizations and in the community.</p> <p>Key Responsibilities: The Executive Steering Committee has the following responsibilities:</p> <ul style="list-style-type: none"> • Set the strategic direction, vision, and goals for the Program. • Provide leadership to ensure that the Program remains on track to achieving established goals and outcomes <u>or</u> implement material project changes to bring the Program back on track. • Review and consider for approval proposed material amendments to the Program Operations Model, the Program Financial Model, the Evaluation Plan, the Outcomes Payment Schedule, the Governance and Reporting Procedures, and other Program-related contracts prior to approval by the applicable governing body, as needed. • Review and consider for approval corrective actions for Service Providers (as defined in Service Provider Agreements) prior to the implementation of such plans. • Review and consider for approval certain Project Change Requests, described further below, as forwarded by RICEH. • Review and consider for approval early termination of the Program and all related contractual agreements, including a proposed Project Termination Budget, in the event of the need for an early termination of the Program.

- Establish ad hoc operating committees, as necessary, including with representatives from organizations including but not limited to Service Providers.

Participants: The Executive Steering Committee shall be composed of representatives as follows:

- One (1) senior representative, Rhode Island Executive Office of Health and Human Services (“EOHHS”)
- One (1) designee, RICEH.
- One (1) designee, Rhode Island Bureau of Health, Developmental Disabilities, and Hospitals (“BHDDH”)
- One (1) designee, Rhode Island Department of Corrections (“DOC”)
- One (1) designee, Rhode Island General Assembly legislative staff
- At least two (2) individuals with lived experience of homelessness, high DOC involvement, and/or high Medicaid utilization

No more than 180 calendar days following the Program start date, EOHHS and RICEH shall appoint at least two (2) Rhode Island residents with lived experience of homelessness, high DOC involvement, and/or high Medicaid utilization to serve as representatives on the Executive Steering Committee. If two (2) individuals with relevant lived experience are not appointed for any reason, EOHHS and RICEH shall continue to make good faith efforts to seek out and appoint two (2) such individuals until these roles are filled.

Note that lived experience of homelessness, high DOC involvement, and high Medicaid utilization must be represented on the Executive Steering Committee even if this means that the Executive Steering Committee includes three (3) representatives with lived experience rather than two (2).

Additional Observation Seats: Any Executive Steering Committee member may request the attendance of a Service Provider representative at Executive Steering Committee meetings. With reasonable notice of the request and consistent with the terms of the Service Provider’s contracts, a representative of the Service Provider will attend such Executive Steering Committee meeting.

Any Executive Steering Committee member may request the attendance of the Independent Evaluator at an Executive Steering Committee meeting. With reasonable notice of request and consistent with the terms of the Evaluation contract, a representative of the Independent Evaluator shall attend such Executive Steering Committee meeting.

Meeting Frequency: Meetings will be held no less than semi-annually and as may be reasonably requested by RICEH from time to time. Meetings may take place in person, by telephone, or by videoconference.

	<p>With reasonable notice, which shall not be less than three (3) business days, any Executive Steering Committee member may call for a special Executive Steering Committee meeting through the Executive Steering Committee representative from RICEH to discuss an urgent matter. The notice for the special Executive Steering Committee meeting shall include the agenda and reason for the special meeting.</p> <p>Reporting: Semi-annually, the Executive Steering Committee will receive a program report from RICEH that incorporates information provided by the Service Providers and the Independent Evaluator. Data presented in the semi-annual program report will include, but not be limited to, the following: enrollment data, number of enrolled individuals engaged in a lease, housing stability rate, number of housed individuals leveraging PFS funds versus non-PFS housing voucher programs, change in days in community from baseline (for individuals with high DOC involvement), and change in the number of ED visits from baseline (for individuals with high Medicaid utilization).</p> <p>Voting: At least 50% of Executive Steering Committee members, <u>one of whom must be the EOHHS representative</u>, must be present at any of the Executive Committee meetings to make a quorum. Any action or decision taken by Executive Steering Committee requires the affirmative vote of a majority of quorum. In the event of a tie vote, EOHHS has the tie-breaker vote.</p>
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CHANGE MANAGEMENT PROCEDURES

<p>Overview and Process</p>	<p>The following describes a process to coordinate and control any changes to the responsibilities, terms, and procedures outlined for the Program. The goal is to ensure timely response to all proposed changes to the Program with reasonable input from the appropriate Program stakeholders.</p> <p>RICEH is responsible for leading the implementation of Change Management Procedures. Proposed changes must be put forward in the form of a Project Change Request (“PCR”)¹. RICEH may initiate a PCR; EOHHS or any other PFS PSH stakeholder entity may submit a PCR to RICEH. PCRs may only propose changes to the Program with regards to the Program Operations Model, the Program Financial Model, the Evaluation Plan, the Outcome Payment Schedule, and the Governance and Reporting Procedures. Approved PCRs are not to be considered amendments to the EOHHS-RICEH PFS PSH Agreement or the Agreements with Service Providers.</p> <p>If RICEH, at its sole discretion, determines that an approved PCR would materially impact Program structure or goals, RICEH will forward the PCR to the Executive Steering Committee and will convene special interim meeting(s) of the Executive Steering Committee as required. To take effect, any such PCR requires the approval of the Executive Steering Committee. PCRs expected to be forwarded to the Executive Steering Committee include, but are not limited to:</p>
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¹ The Project Change Request form will be provided to all Program partners, including but not limited to Service Providers, the Independent Evaluator, and all members of the Executive Steering Committee, within thirty (30) days of the start of service delivery.

- PFS PSH that would require amendments to any contract to take effect.
- Changes to the Program eligibility criteria.
- Material changes to the Program timeline.
- Material changes to the Program budget including, but not limited to, material changes that result from corrective actions related to Enrollment and Performance Metrics (as set forth below).
- Termination or replacement of a Service Provider, the Independent Evaluator, RICEH, or any other entity directly involved in Program implementation.
- Material changes to the definition, pricing, timing, or measurement of any payment outcomes.
- Changes to the membership or responsibilities of the Executive Steering Committee.
- Changes to the requirements for reporting to the Executive Steering Committee.

PCRs requiring Executive Steering Committee approval will be provided to the Executive Steering Committee with a recommendation from RICEH and EOHHS in a timely fashion. The Executive Steering Committee will review and make a decision within the timeframe requested in the PCR provided that such a timeframe includes at least ten (10) business days. The EOHHS Executive Steering Committee member is authorized to approve PCRs on behalf of EOHHS.

PCRs that RICEH determines will not have a material impact on Program structure or goals need not be forwarded to the Executive Steering Committee; however, these require affirmative approval from and signature by RICEH.

Regardless of the method of review selected by RICEH, the PCR form must be signed by the relevant parties and dated before it is considered approved. Some PCRs may also require approval from other Program stakeholders impacted by the change (e.g., Service Providers, Independent Evaluator), in which case the PCR will also require a signature from an authorized representative of the relevant stakeholder to take effect.

All decisions will be documented by RICEH in a change summary report that includes the PCR and any supporting documentation. Change summary reports will be forwarded to EOHHS and all impacted PFS PSH stakeholders.

Enrollment and Performance Metrics: If the Enrollment and Performance Metrics outlined below are below 50% of the targets to be achieved by the dates specified, RICEH will propose corrective action, including through PCRs, to attempt to improve performance. RICEH may also propose to take no corrective action depending on circumstances.

Corrective actions may include but are not limited to:

- Reductions or reallocations of PFS PSH slots (and corresponding funding) assigned to Service Providers.
- Transfer of enrolled individuals to a different Service Provider.
- Deployment of technical assistance for Service Providers.

- Termination of underperforming Service Provider contracts.

Metric	PFS PSH Targets
Enrollment	Cumulative enrollment is on track based on targets identified in the Cumulative Enrollment and Lease-Up Schedule presented in the Program Operations Model
Lease Engagement	Cumulative number of individuals engaged in leases is on track based on targets identified in the Cumulative Enrollment and Lease-Up Schedule presented in Program Operations Model
Housing Stability Rate	80% Housing Stability for Housed Participants is achieved at the end of each quarter

KEY MATERIALS AND REPORTING

Key materials and submission of reports for the purposes of PFS PSH will be as follows:

Material/Report Name	Frequency	Distribution	Source
Program Reports	Semi-annually, in advance of semi-annual Executive Steering Committee meetings	Executive Steering Committee, EOHHS	RICEH
Evaluator Report	Quarterly, according to schedule put forth in Evaluation Plan	RICEH	Evaluator
Outcome Payment Invoices (including Evaluator Report)	Quarterly, within 15 business days after the receipt of each Evaluator Report	EOHHS	RICEH
Data Files	Quarterly, according to the schedule put forth in Evaluation Plan	RICEH	DOC, Medicaid
Outcomes File	Quarterly, according to the schedule put forth in Evaluation Plan	Evaluator	RICEH
Financial Report	Quarterly, within 30 business days of the close of each quarter	RICEH	Service Providers

Housing Match Funding Report	Quarterly, within 30 business days of the close of each quarter	RICEH	Service Providers
Service Delivery Match Funding Report	Semi-annually by July 31 st and January 31 st of each program year	RICEH	Service Providers
Semi-Annual Narrative Report	Semi-annually, by July 31 st and January 31 st of each program year	RICEH	Service Providers
Balance of Project Accounts <i>(including PFS account and Outcome Funds account)</i>	Quarterly, within 60 business days of the close of each quarter	EOHHS	RICEH
Balance of Project Accounts <i>(including PFS account and Outcome Funds account)</i>	Semi-annually, in advance of semi-annual Executive Steering Committee meetings	Executive Steering Committee, EOHHS	RICEH