HMIS Agency Administrators Meeting

October 6, 2016

Agenda

- 1. Celebrating 1 Year with Clarity!
- 2. CoC/Coordinated Entry/UPLIFT Updates
- 3. AHAR Reporting has begun: What to expect over the next few weeks
- 4. Discussion of new HUD Data Standards that took effect 10/1/16
- 5. Review of Changes to Clarity (not-related to Data Standards)
 - a. Updates to the Assessment Tab, history of assessments
 - b. Modified Intake of Date of Birth and Age Calculation
- 6. Continuous Data Quality Improvement Process: We're off and running!

Celebrating 1 Year with Clarity!

CoC/Coordinated Entry Updates

UPLIFT Updates

- Allocations in effect until 10/31
- Housing Status is now a required question every time you request UPLIFT
- Intake/Status/Exit forms have been updated on http://scc.hmis.cc/training/uplift/

AHAR

What is AHAR?

The Annual Homeless Assessment Report (AHAR) is a HUD report to the U.S. Congress that provides nationwide estimates of homelessness, including information about the demographic characteristics of homeless persons, service use patterns, and the capacity to house homeless persons. The report is based primarily on Homeless Management Information Systems (HMIS) data about persons who experience homelessness during a 12-month period.

- Breaks out data by individuals and families
- Veterans are also separated out
- We report on stays in emergency shelter, transitional housing, and permanent supportive housing
- Basic demographic information (age, gender, race, ethnicity, disability status, etc.)
- Prior living situation
- Length of stay

Bitfocus will Prepare Data for Submission

Reviewing DRAFT AHAR Reports

- Starting with Emergency Shelter, has begun analyzing draft AHAR reports.
- We will also analyze transitional and permanent supportive housing programs as well

Analyzing Data Quality

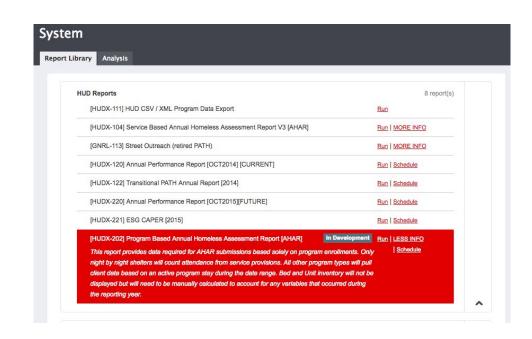
- Will look for timeliness (flagging clients who do not appear to have annual updates, when those are relevant)
- Identify relevant "data not collected," "client refused," "Client does not know values that exceed 5% threshold

What can agencies do to ensure data is accurate?

Run the AHAR report for programs at your agency.

For Transitional & Housing Programs use:

[HUDX-202] Program Based Annual Homeless Assessment Report [AHAR]

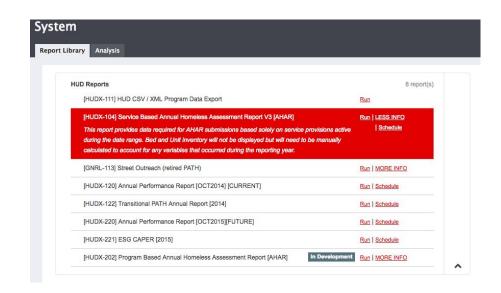


What can agencies do to ensure data is accurate?

Run the AHAR report for programs at your agency.

For Emergency Shelter Programs use:

[HUDX-104] Service Based Annual Homeless Assessment Report V3 [AHAR]



What else can agencies to do to prepare?

- Follow our new Continuous
 Data Quality Improvement
 Process
- In particular, the reports we've identified (and will review later in this meeting)

New HUD Data Standards

HMIS Data Standards Updates

- What are the HMIS Data Standards?
 - HUD's documentation of the information we are required to collect in HMIS
- Why are they important?
 - Used as a basis for reporting both on a program level (e.g. APR) and community-wide level (e.g. HUD System Performance Measures)
- HUD released an update to the HMIS Data Standards, which will take effect on **Oct 1**

Timeline and Other Notes

• Timeline:

- o 10/3: New questions in Clarity
- o 10/9: CSV 4.1 going offline
- o 10/10: Old dropdown options removed, adjustments to PATH/RHY service and referral categories will be made, CSV 5.1 online

• Other notes:

- Optional Primary Language question now collected at entry
- PDF versions of Intake, Status, and Exit forms are available at http://scc.hmis.cc/client-forms/

Next Steps

• For clients that enrolled on 10/1 and 10/2: Review their program enrollment information in Clarity

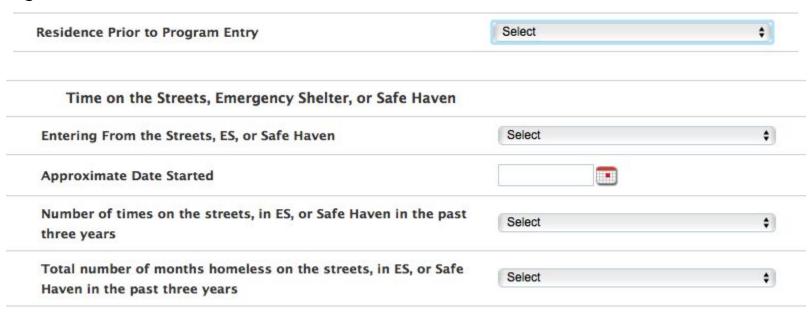
- For clients that enrolled before 10/1 and were still in the program on 10/1: The next time you are working with a client's program enrollment
 - Check the **Living Situation** section for accuracy
 - Update **Disabling Condition** for children in the household

What is Changing - Highlights

- Gender
 - "Other" will be replaced with "Doesn't identify as male, female or transgender"
- Disabling Condition
 - Used to be collected for only adults will now be required for everyone
- Health Insurance
 - Adding 2 new categories: "Indian Health Services" and "Other"
- Living Situation
 - Workflow for "Residence Prior to Entry" and "Time on the Streets, Emergency Shelter, or Safe Haven" is changing
 - Changes are meant to help capture Chronic Homeless status

What is Changing - Living Situation (3.917)

• Questions affected:



What is Changing - Living Situation (3.917A)

- For Emergency Shelter, Street Outreach, and Safe Haven programs, slight changes:
- "Residence Prior to Program Entry" will be renamed "Type of Residence"

Living Situation		
Type of Residence	Select	\$
Length of Stay in Prior Living Situation	Select	\$
Approximate Date Homelessness Started		
Number of times on the streets, in ES, or Safe Haven in the past three years	Select	•
Total number of months homeless on the streets, in ES, or Safe Haven in the past three years	Select	*]

What is Changing - Living Situation (3.917B)

- For other Programs (e.g. Transitional, RRH, HP, Service Only), additional questions asked based on Type of Residence
- When Type of Residence is...
 - A. Homeless Situation
 - B. Institutional Situation AND Length of Stay < 90 days AND Night before was on streets, ES or SH
 - C. TH/PH Situation AND Length of Stay < 7 days AND Night before was on streets, ES or SH

then...

What is Changing - Living Situation (3.917B)

• These Questions are required:



Program-Specific Changes

- Rapid Re-Housing Programs
 - Residential Move-In Date NO CHANGE TO DATA COLLECTION
- SSVF Programs
 - HP Screening Score removed
 - New fields added
- PATH Programs
 - New field added
 - Adjustments to Service and Referral categories happening on 10/10
- RHY Programs
 - Last Grade Completed new options added to dropdown

Changes to Clarity

Updates to the Assessment Tab

On the Assessments tab, the Assessment History section has been updated for

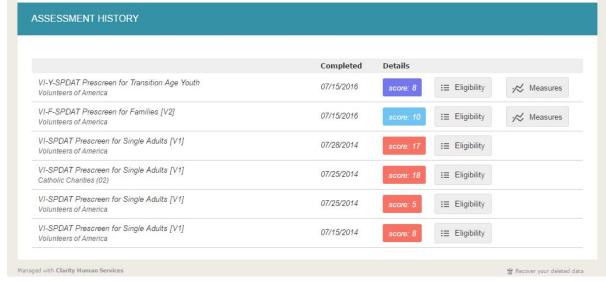
VI-SPDATs.

Scores now color-coded:

VI-SPDAT

VI-F-SPDAT

• VI-Y-SPDAT

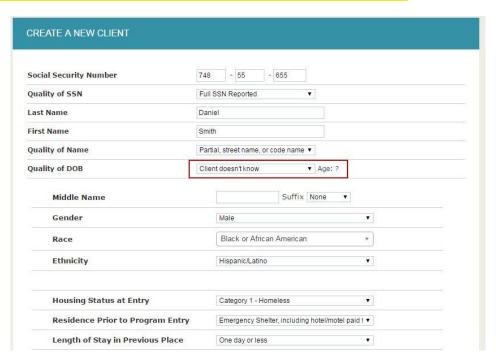


'View Eligibility Determination' link replaced by "Eligibility" button

Modified Intake of Date of Birth and Age Calculation

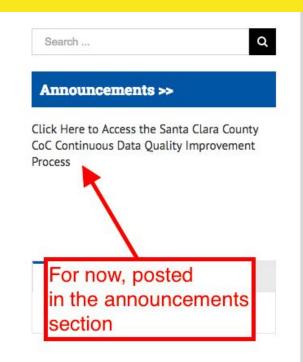
The order of the fields 'Date of Birth' and 'Quality of DOB' have been switched to improve workflow.

If the 'Quality of DOB' = 'Data not collected', 'Client refused', or 'Client doesn't know', the 'Date of Birth' field will be hidden, and 'Age: ?' will appear next to the 'Quality of DOB' field.



Continuous Data Quality Improvement

Final Continuous Data Ouality Process Policies Posted



Data Quality

Data quality is a term that refers to the reliability and validity of client-level in HMIS. It is measured by the extent to which data in the system reflects actual information in the real world. With good data quality, a Continuum of Care can accurately tell its story of the individuals and families it serves.

Continuous Data Quality Improvement

A continuous data quality improvement process facilitates the ability of the CoC to achieve statistically valid and reliable data. It sets expectations for both the community and the end users to capture reliable and valid data on persons accessing your agency's programs and services.

Roles & Responsibilities Bitfocus

Bitfocus will provide the following services to assist agencies in correctly entering data in HMIS, and in addressing data quality issues:

- Provide end user trainings and workflow documents.
- Work with agency management to identify at least one agency employee as an HMIS agency administrator.
- Produce data quality reports and information on how to correct any identified data quality issues.
- Provide technical assistance to agencies requesting assistance in identifying what steps need to be taken in order to correct data quality issues
- Provide other services as contracted with a CoC and/or agency.

Roles & Responsibilities Agencies

Agencies will take primary responsibility for entering, verifying, and correcting data entry:

- Agency staff will measure completeness by running APRs and other reports,
 then distribute those reports to staff tasked with improving data completeness
- It is the responsibility of Agency management to ensure staff tasked with correcting data quality issues do so in a timely manner.

Data Quality Standards

There are three general types of programs, each with a set of data elements that are required for every adult client. All required elements, regardless of program type, must have o% Null rates. Don't Know and Refused rates vary by program.

Timeline

Data quality reports should be run at least once per month throughout the year. In the weeks prior to submitting a report (e.g.: AHAR), data quality reports may need to be run on a daily basis.

Data Completeness

No Null (missing) data for required data elements. Don't Know or Refused responses should not exceed the allowed percentages (see below for details).

Minimizing Data Quality Issues

How you can minimize data quality issues:

- Enter client data as soon as possible. The more time passes between collecting data and entering the data in HMIS, the greater the odds there will be data quality issues.
 - Recommended Time Frames:
 - Transitional and Permanent Housing Programs: Enter all program entry/exit data within three (3) workdays.
 - Emergency Shelters and non-HUD: Enter check in/checkout within one (1) workday
 - Outreach: Create client profile, if necessary, within three (3) workdays. Record outreach services within one (1) workday.
- Whenever possible, consider entering data during client visits so that clients may help identify potential inaccuracies.
- Review Data Quality using APRs at least once a month. Correct all null values as soon as possible.

When to Correct Data Quality Issues

At a minimum, you should begin correcting data quality issues should least two (2) months before a report is submitted to the agency requesting the report.

In general, you should evaluate and correct data quality quarterly using the following schedule:

- First month of quarter: begin data quality review, focused on ensuring the correct number of clients are enrolled and there are no null values. Make corrections as needed. For example, ensure that no required information, such as veteran status, is missing.
- Second month of quarter: review data with relevant program managers and/or staff to verify accuracy of data compared other records. For example, ensure that veteran status data entered into Clarity is correct.
- Third month of quarter: assess agency workflow to identify process improvements that may help ensure high quality data is consistently entered into system.

Correcting Data Quality Issues

The following reports can help identify the majority of data quality issues:

- [HUDX-120] Annual Performance Report [OCT2014]
- [DQXX-110] Duplicate Clients
- [DQXX-103] Monthly Staff Report
- [DQXX-102] Program Data Review
- [DQXX-105] Monthly Agency Utilization Report