

HMIS Agency Administrators Meeting

September 1, 2016

Agenda

1. CoC/Coordinated Entry updates
 - a. Upcoming CCP Training
2. UPLIFT Updates
3. New HUD Data Standards take effect 10/1/16
4. HUD System Performance Measures Report Review
 - a. And a HUGE thank you for all the work you've done to help clean up data
5. Continuous Data Quality Improvement Process

CoC/Coordinated Entry Updates

CCP “Bootcamp”

September 27-30, 2016

Will Include:

1. CCP Training
 2. Intensive, Hands On,
One-on-One mentoring
 3. Data Clean UP
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UPLIFT Updates

**New HUD Data Standards
Take Effect 10/1/16**

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**

What this means for you


- Between now and Oct 1, you may see some minor changes to some questions in Clarity - these will not affect your ability to enter data using existing Intake forms
- On Oct 1, any new required questions will appear in Clarity

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:

Residence Prior to Program Entry	<input type="text" value="Select"/>
Time on the Streets, Emergency Shelter, or Safe Haven	
Entering From the Streets, ES, or Safe Haven	<input type="text" value="Select"/>
Approximate Date Started	<input type="text"/> 
Number of times on the streets, in ES, or Safe Haven in the past three years	<input type="text" value="Select"/>
Total number of months homeless on the streets, in ES, or Safe Haven in the past three years	<input type="text" value="Select"/>

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	<input type="text" value="Select"/>
Length of Stay in Prior Living Situation	<input type="text" value="Select"/>
Approximate Date Homelessness Started	<input type="text" value="__/__/__"/> 
Number of times on the streets, in ES, or Safe Haven in the past three years	<input type="text" value="Select"/>
Total number of months homeless on the streets, in ES, or Safe Haven in the past three years	<input type="text" value="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:


Approximate Date Homelessness Started

Number of times on the streets, in ES, or Safe Haven in the past three years

Total number of months homeless on the streets, in ES, or Safe Haven in the past three years

Program-Specific Changes

- Rapid Re-Housing Programs
 - Residential Move-In Date
- SSVF Programs
 - HP Screening Score removed
 - New fields added
- PATH Programs
 - New field added
 - Adjustments to Service and Referral categories
- RHY Programs
 - Last Grade Completed - new options added to dropdown
 - Adjustments to Referral categories

HUD System Performance Measure Report submitted!



Some HUD SPM Report Highlights

Metric 1.1: Change in the average and median length of time persons are homeless in ES and SH projects.

Metric 1.2: Change in the average and median length of time persons are homeless in ES, SH, and TH projects.

a. This measure is of the client's entry, exit, and bed night dates strictly as entered in the HMIS system.

		Universe (Persons)		Average LOT Homeless (bed nights)			Median LOT Homeless (bed nights)		
		Previous FY	Current FY	Previous FY	Current FY	Difference	Previous FY	Current FY	Difference
1.1	Persons in ES and SH		4951		44			15	
1.2	Persons in ES, SH, and TH		6579		145			48	

This measures clients who exited SO, ES, TH, SH or PH to a permanent housing destination in the date range two years prior to the report date range. Of those clients, the measure reports on how many of them returned to homelessness as indicated in the HMIS for up to two years after their initial exit.

	Total # of Persons who Exited to a Permanent Housing Destination (2 Years Prior)	Returns to Homelessness in Less than 6 Months (0 - 180 days)		Returns to Homelessness from 6 to 12 Months (181 - 365 days)		Returns to Homelessness from 13 to 24 Months (366 - 730 days)		Number of Returns in 2 Years	
		# of Returns	% of Returns	# of Returns	% of Returns	# of Returns	% of Returns	# of Returns	% of Returns
Exit was from SO	13	2	15%	1	8%	0	0%	3	23%
Exit was from ES	809	100	12%	31	4%	47	6%	178	22%
Exit was from TH	436	8	2%	7	2%	10	2%	25	6%
Exit was from SH	2	0	0%	0	0%	0	0%		
Exit was from PH	277	1	0%	3	1%	0	0%	4	1%
TOTAL Returns to Homelessness	1537	111	7%	42	3%	57	4%	210	14%

Metric 3.1 – Change in PIT Counts

This measures the change in PIT counts of sheltered and unsheltered homeless person as reported on the PIT (not from HMIS). If a CoC did not conduct an unsheltered count in a particular FY, then the next-most recent unsheltered data are used.

	Previous FY PIT Count	2015 PIT Count	Difference
Universe: Total PIT Count of sheltered and unsheltered persons	7567	6556	-1011
Emergency Shelter Total	819	807	-12
Safe Haven Total	9	9	0
Transitional Housing Total	1065	1113	48
Total Sheltered Count	1893	1929	36
Unsheltered Count	5674	4627	-1047

2016 HUD SPM – as submitted

2016 HUD SPM - as submitted

Continuous Data Quality Improvement

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 0% 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