

Meeting Minutes HMIS All Agencies Administrators Meeting

August 30, 2022 9:00 am - 10:30 am

Location: Virtual

Attendees: CHN – Katie, Stan; Equitas - Kelsey; GCH – Jayde, Kevin; HFF – Melissa, Crystal, Tiffany; Homefull – Jen; HH – Kyra, Erin; LSS – Cara, Joy; MH - Jennifer; NCR - Marsha; Netcare -Tara; SE –Tyler; TSA – Brittani, Josue; VA – Mary, Bonnie; VOA – LaRaun, Betsy; YMCA – Cheri, Kevin; YWCA – Amber, Betty; CSB- Lianna Barbu, Thaddeus Billman, Travis Theders, Jeremiah Bakerstull, Katie Goehring

A. Welcome and Flow

a. Travis went over the agenda of the meeting and introductions.

B. Data Quality: Short-Term Disability Data and Late Data Changes

- a. Thaddeus reviewed the disability data (short-term and long-term) collected since May.
 - 1. The error rate in general disability data has steadily improved, down about 3%.
 - 1) An error would be a mismatch in the data collected, such as long-term disability being marked, but no disability type provided or vice versa.
 - 2. Overall, the short-term disability data hasn't improved consistently since the last admin meeting. The data is either not being reported at all, or it is being categorized incorrectly as a long-term disability.
 - 1) For shelters, (other than the YMCA and YWCA with 20-30%) short term disability is around 0%, which must be inaccurate.
 - 2) For TH, the rate is 0%, which is to be expected for this program type.
 - 3) For RRH programs, some agencies have improved data entry, which points to more consistent use.
 - 4) For HP, the rate of short-term disability is close to 0%, which is expected.
 - 5) For Outreach, the short-term rate is also around 0%, this is expected due to the population served.
 - 6) For PSH, the short-term rate is close to 0%, which is expected due to a long-term disability being required for program entry.
 - 3. Lianna asked ES partners for their insights into the discrepancy in short term disability data collection. Feedback indicated that some internal training in how the disability question is asked may be needed and that the question is confusing to the clients as the short term disability as a concept is not fully understood.
 - 4. CSB will continue to monitor and report on this data during HMIS admin meetings until there is visible improvement.
 - 5. The HUD definition of long-term disability is below. This definition is also in the data dictionary, which is available on the CSB website.
 - 1) A physical, mental, or emotional impairment which is
 - a. expected to be of long-continued and indefinite duration,
 - b. substantially impedes an individual's ability to live independently, and
 - c. of such a nature that such ability could be improved by more suitable housing conditions;
 - 2) A developmental disability as defined in section 102 of the Developmental Disabilities Assistance and Bill of Rights Act; OR
 - 3) The disease of acquired immunodeficiency syndrome or any conditions arising from the etiological agency for acquired immunodeficiency syndrome.
 - 4) An example would be a mental health disability that inhibits a client from maintaining housing or employment without supportive services.

- b. Thaddeus went over the trends of late data entry. This data is now reported on quarterly with an expectation of continuous improvement.
 - 1. Generally, data entry timeliness has improved across the system.
 - 1) For ES, the expectation is that the client should be entered by 9am the following morning. For the analysis of the delay, 4 days were used to allow for potential data delays due to weekends.
 - 2) All other programs have through the 4th day of the following month to enter all data.
 - 2. CSB also monitors late data changes after the QA period for clients who have exited.
 - 1) Late changes call the overall data accuracy into question.
 - 2) Additionally, late changes inhibit the ability to accurately report out on data collected.
 - 3. To obtain specific information about which users are responsible for these errors, Admins should email <u>hmis@csb.org</u> to ask for the information privately.

C. QA and Looker Limitations

- a. Jeremiah explained the current software limitations for the QA report.
 - 1. Unfortunately, a report on Looker can't exceed 25 tiles. This is a limitation/recommendation from Looker's software that BitFocus uses.
 - 2. There may be a solution in the future, but nothing in the immediate.
 - 3. Consequently, the QA process will still be separated into 3 reports.
- b. Lianna reminded the Admins to submit any issues or specific concerns to <u>hmis@csb.org</u> as the inbox is monitored by the entire D&E team.
- c. Jeremiah encouraged the Admins to attend next week's HMIS office hours for additional reporting questions.
- d. The new QA schedule has been released. It is on CSB's website here.
- e. Lianna acknowledged the challenges in running 3 reports for QA for each project.

D. Rapid Re-Housing & Homelessness Prevention loss of housing

- a. Travis discussed the HUD changes to how loss of housing should be recorded within HMIS for RRH programs. This change should impact currently open clients and changes going forward.
 - 1. In the event that the client vacates a housing situation and the project stops paying rental assistance, staff should exit the client from the project on the day the client lost their housing
 - Then staff should immediately create a new enrollment record for the client on the same or following day with a blank housing move-in date until a new unit has been found.
 This will ensure that the client's history of housing is preserved.
- b. Thaddeus spoke to the impact of this change on Successful Housing Outcomes and Average Length of Engagement.
 - 1. There are no internal changes for how CSB reports on this information because CSB uses one instance per reporting period, typically the last entry.
 - 1) Length of shelter stay or length of participation is cumulative.
 - 2) Successful housing outcomes will not change because a client isn't exited.
 - 2. For HUD's purposes, this change will decrease the time to house a client.
- c. For Prevention projects, loss of housing should be documented as a separate entry. The clients should be enrolled in a RRH or ES program until they obtain a new unit. Once they are in a new unit, the clients should be enrolled in the HP program as a new project entry.
- d. Travis and Thaddeus answered a few questions that Admins had.
 - 1. For exit destination and reason for leaving, HMIS users should provide the accurate answer for their client's particular situation.
 - 2. For PR&C, a note in the file to note the loss of housing is sufficient. Travis will work with Admins to ensure that the appropriate program entry record is pulled for review.
 - 3. RRH eligibility won't be impacted because they are staying somewhere temporarily.
 - 4. Eligibility for PSH won't be impacted because the new record is made immediately after the previous record is closed.

e. Travis encouraged the Admins to reach out if they have clients in this situation and need additional assistance through the https://www.heimain.com additional assistance through the https://wwww.heimain.com additional assistance through the https://www.heimain.com additional assistance theim

E. HUD FY2024 Data Standards

- a. HUD has opened a comment period for FY24 Data Standard Changes. Changes are due by the end of the year, 12/31/2022.
- b. Travis went over a document of the changes CSB's team is proposing. These proposed changes include:
 - 1. Clarification of Prior Residence data field name to be "where did you sleep last night?"
 - 2. Coordinated Entry Assessment and Coordinated Entry Event fields are ineffective
 - 3. Gender field inconsistencies. The field should not be multi-select since there is an option for "A gender other than singularly male or female (e.g., non-binary, genderfluid, agender, culturally specific gender)."
- c. Thaddeus and Lianna reminded the Admins that suggestions can be about adding or removing data elements altogether, as well as suggesting changes to wording.
- d. Administrators did a breakout session and discussed suggested data changes for FY24. Travis added these suggestions to the document he provided.
 - 1. Kelsey and Melissa noted the difficulty in collecting short-term disability information. They suggested changing how collection of this data is structured in HMIS.
 - 2. Cheri suggested removing number of hours worked in employment fields.
 - 3. Amber and Josue suggested reworking race/ethnicity fields, especially for Hispanic populations, to more closely match the census fields.
 - 4. Cheri recommended removing "does the client have a disabling condition?" from the intake assessment.
 - 5. Josue suggested adding an option for the SSN data field for "client doesn't have a SSN" for clients who are non-citizens.
- e. Travis will update the document and share it with the Admins.

F. LSA Data Preparations

- a. Travis has started preparations for HUD's LSA. The submission period is reported to begin in early November, it will likely be delayed to late November.
- b. He will continue to email Admins about corrections, especially for overlapping program entries.
- c. Additionally, HUD will likely monitor new errors that Travis will alert Admins about as they appear.

G. The next Admin meeting is scheduled for Wednesday, December 7th, 9 – 10:30 AM.