



Bed Coverage 201

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Joan Domenech, CSH

Allyson Thiessen , CARES of NY, Inc



About NHSDC

The National Human Services Data Consortium (NHSDC) is an organization focused on developing effective leadership for the best use of information technology to manage human services. NHSDC provides information, assistance, peer to peer education and lifelong learning to its conference participants, website members and other interested parties in the articulation, planning, implementation and continuous operation of technology initiatives to collect, aggregate, analyze and present information regarding the provision of human services.

NHSDC holds two conferences every year that convene human services administrators primarily working in the homeless services data space together to learn best practices and share knowledge. The past 3 events have been put on with HUD as a co-sponsor. Learn more on at www.nhsdc.org and sign up for emails from NHSDC!

After this virtual conference is over, NHSDC will be sending out a survey to learn about your experience. Please help us by signing up for emails and participating in the survey!

Learning Objectives

- Understanding SNAPS data strategy and relationship to Bed Coverage
- Understand the core elements, definitions, and metrics of bed coverage
- Review strategies to increase bed coverage
- Discuss the connection between bed coverage and all other components of data quality

Meet the presenters: Fran Ledger

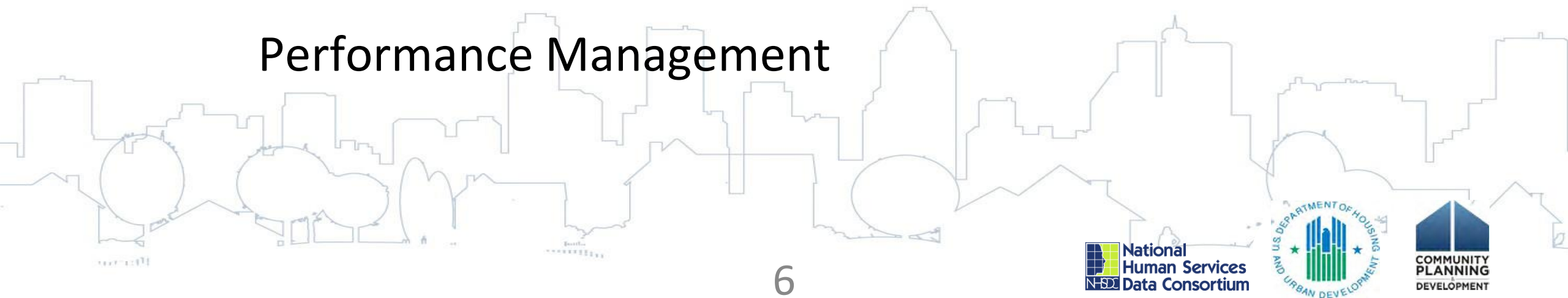
- Special Needs Assistance Specialist, U.S.
Department of Housing and Urban Development
- Some areas of work: HMIS Capacity Building; Data
Governance; HMIS Project Compliance; Disaster
Recovery

Meet the presenters: Allyson Thiessen

- HMIS Lead Agency and Administrator since 2006
- HMIS for 13 CoCs in NYS
- On Board of Directors for NHSDC
- HUD NOFA recipient to NYS bring Balance of State into collaborative HMIS

Meet the presenters: Joan Domenech

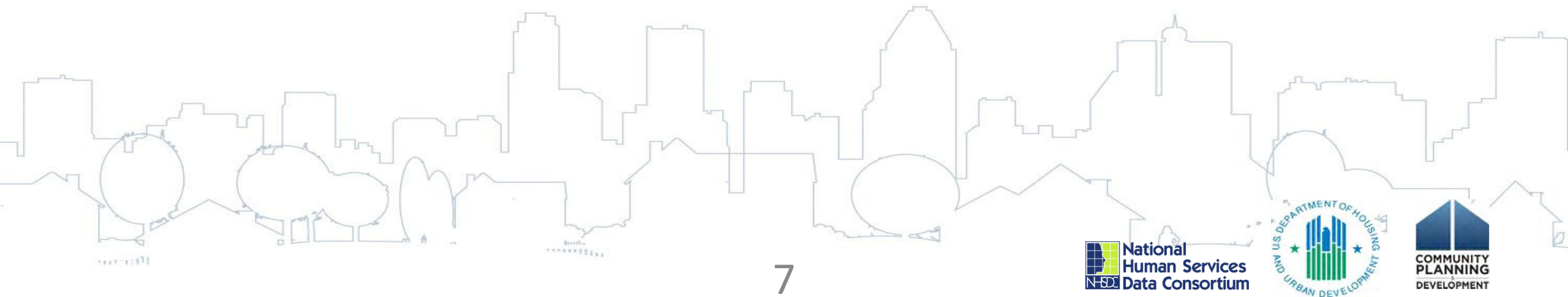
- Program Manager, Corporation for Supportive Housing (CSH)
- Some areas of work: CE, Data Quality, HMIS, Performance Management



Bed Coverage Rate – The Basics

The proportion of beds in a community that participate in HMIS

$$\text{Homeless Beds in HMIS} \div \text{Total Homeless Beds} = \text{Bed Coverage}$$



Bed Coverage Rate – The Basics (Example)

The proportion of beds in a community that participate in HMIS

$$45 \div 150 = \underline{30\%}$$

Homeless Beds
in HMIS

Total
Homeless Beds

Bed
Coverage

Some findings from HMIS APR analysis 2019

- Approximately 2/3 of all HMIS implementations have coverage rates at 80% or higher for each project type
- With the [CoC-level system performance measures data](#), HUD publishes HMIS bed coverage rate on ES-TH programs as well as the type of geography the CoC mainly serves (i.e., rural, urban) so CoCs can compare themselves to other communities if they desire.
- With the exception of HOPWA and HUD-VASH, the federal partner programs all indicate a utilization rate above 90%.

What's the Effect of Low HMIS Bed Coverage?

Low Coverage prevents many communities from understanding the true nature and extent of homelessness

- Prevents accurate Federal, State, and Local Reporting
- Prevents the development of a data informed decision-making culture



What's the Effect of Low HMIS Bed Coverage? continued

- Clients can get “lost” in the homeless services system
- If the community is using HMIS for Coordinated Entry, low bed coverage could have a significant effect on “inactivity” for the purposes of CE
- Difficult to look at overall client movement through the system and system effectiveness

Bed Coverage Challenges: Resource Limitations



Peer Learning

Not enough staff to do data entry

Common Projects: Emergency Shelters, Projects receiving other funds not CoC

What are some strategies you have used for this common challenge? Use the chat

Some strategies for “not enough staff to do data entry”



- Make it simple! Explain in plain language avoid technical term, jargons and acronyms
- Use technology solutions
- Be creative & collaborate on problem solving issues/ barriers
- Go the extra mile

Increasing HMIS Bed Coverage by Creating Partnerships



- Identify Common Goals
- Understand Value of Potential Partnership (on each side)
- “Sweeten the Pot”
- Have Clear Roles & Responsibilities
- Launch Partnership Activities
- Identify Short-term Wins

Common Bed Challenges & Strategies Handout Summary

Some common scenarios impacting bed coverage

- Not enough staff to do data entry
- Shelter may be dependent on volunteers
- HMIS doesn't collect data that seems useful to agency
- Not a requirement
- Technology Barriers

Some strategies

- *You can find ideas/strategies to try for each of these in the session handout*

Scenarios impacting bed coverage	Possible Strategies
<p>Not enough staff to do data entry <i>Common Projects: Emergency Shelters, Projects receiving other funds not <u>CoC</u></i></p>	<ul style="list-style-type: none"> • Simplify data entry. Have phased assessment only collect information needed at that point. This could include entering just enough information during a live-time shelter check in process to populate a shelter bed or unit list and then gathering and entering additional client information for clients in a given unit list later. • Explore with your HMIS vendor if there are any technology solutions to help alleviate data entry. For example a way to scan ids or other workflows to check in and out of shelter. • Suggest starting small- instead of trying to add all shelter projects prioritize one or two. You can either target the shelter that is affecting most the bed coverage or start with a shelter with less beds and have that initial experience to test it out, tackle any obstacles and then bring that experience to bigger shelters • Think about strategies to help provide them with trained data entry volunteers, interns, or staff. Some examples can be: <ul style="list-style-type: none"> • Collaborate with another HMIS participating project to do data entry on behalf of the non-HMIS project (sharing agreements, coordinated services agreements, etc.). • Partner with another entity, internal or external (consultant, graduate student, intern, etc.), to do data entry on behalf of the project.
<p>Shelter may be dependent on volunteers</p>	<ul style="list-style-type: none"> • Since volunteers have a high turnover create online data entry platform for training. This will alleviate HMIS staff time on training. Training platform should include data entry examples that are reviewed and pass a threshold score before granting trainees access to the system. <ul style="list-style-type: none"> ○ You can also explore what it would look like to have specific data entry volunteers and have more one on one training with those instead of trying to train every volunteer on data entry

Data Integration for Increased Bed Coverage



HUD-VASH Data from HOMES to be Provided to CoCs

- HUD and VA joint solution to providing client-level information from VA database to CoC's
- Data will be pulled from HOMES with the intent of importing into HMIS
- CoC's will likely have to work with their vendor on importing and mapping data

Find More Information

<https://www.hudexchange.info/news/hud-vash-data-from-homes-made-available-to-vamcs/>

"The most valuable resource that all teachers have is each other. Without collaboration our growth is limited to our own perspectives."

Robert John Meehan



CARES Regional HMIS Coverage and Scope

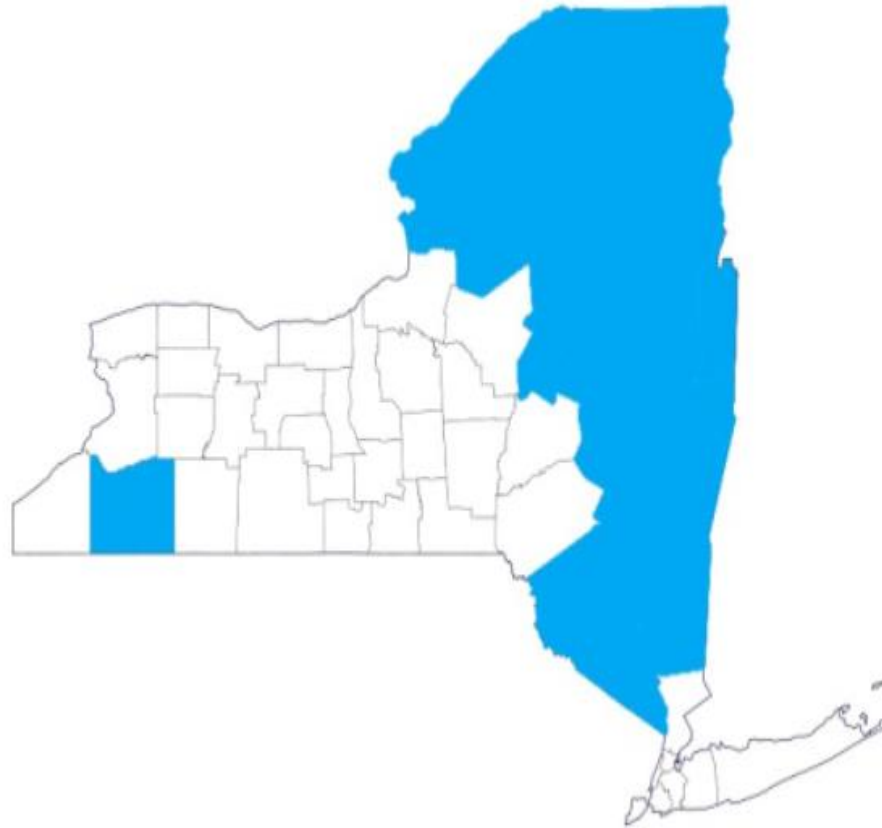
26,416 square miles

600 projects in 171 agencies

500+ users

13 CoCs

7 Staff



Training
Reporting
Technical Assistance
Data Management
Database maintenance
Project Management
Policies and Procedures
Monitoring
Grant Management

Participation Breakdown

98.9% HIC Coverage

Mandated Projects: 61%

- CoC-31%
- Federal Partner-30%

Voluntary Projects: 39%

- Private-37%
- Federal Partner-2%

Projects Represented in the CRHMIS:

Coordinated Entry
Day Shelter
Emergency Shelter
ESG
Homeless Prevention
HOPWA
Local/'Other'
PATH
PH-Housing Only
PH-PSH
PH-RRH
RHY
Services Only
SRO
Street Outreach
Transitional Housing
VA-Contract Residential Services (CRS)
VA-GPD
VA SSVF
VA-VASH



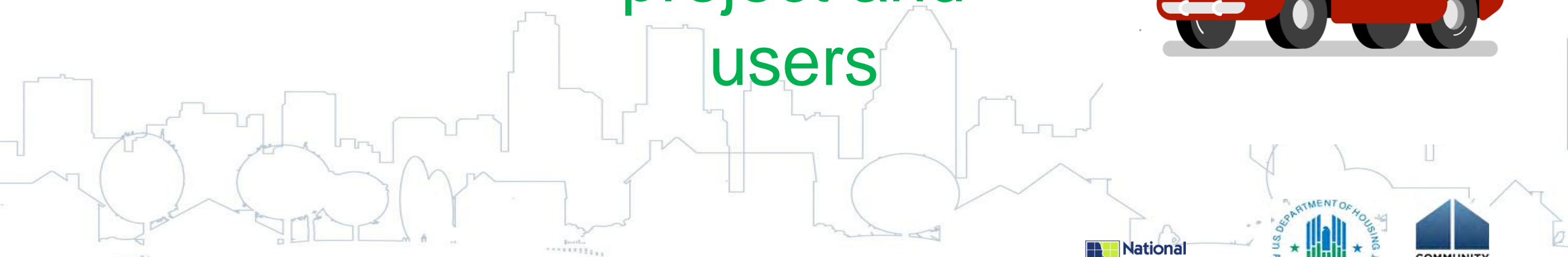
Relationship Building



Be Present and Patient

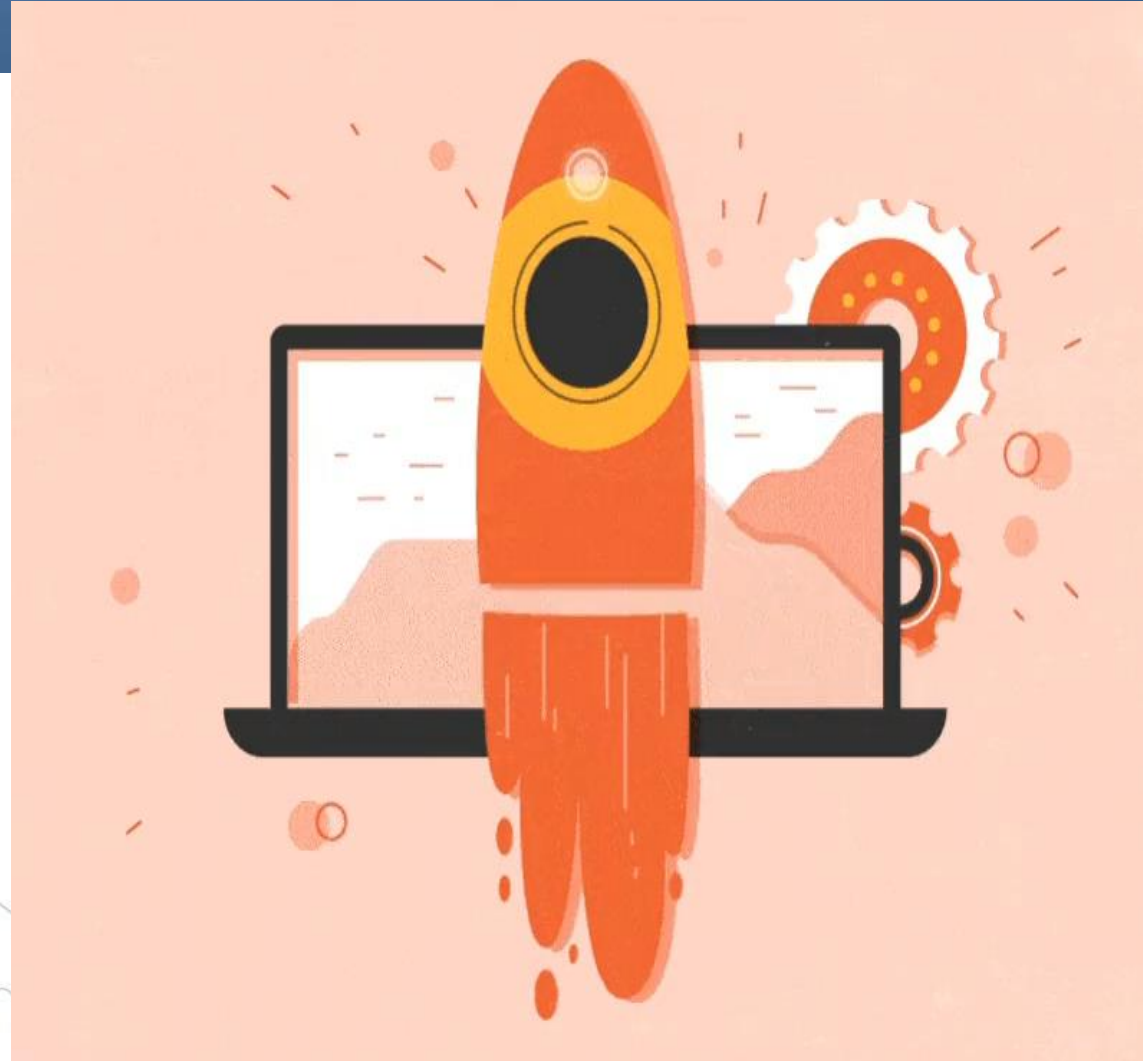


Take the time to
understand the
needs of the
project and
users



Go beyond what's required

- Workflow
- Data Integration
- Agency reporting
- Grant Writing
- Case management
- Collaboration



- Offer TA
- Customize reports
- Support non-HMIS software features
- Real-time support
- Get tours
- Attend Events

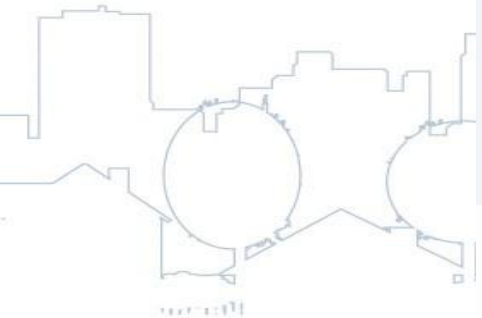
Break down barriers with the Collaborative Applicant

- HIC
- PIT
- Data Committees
- Strategic Planning
- Coordinated Entry



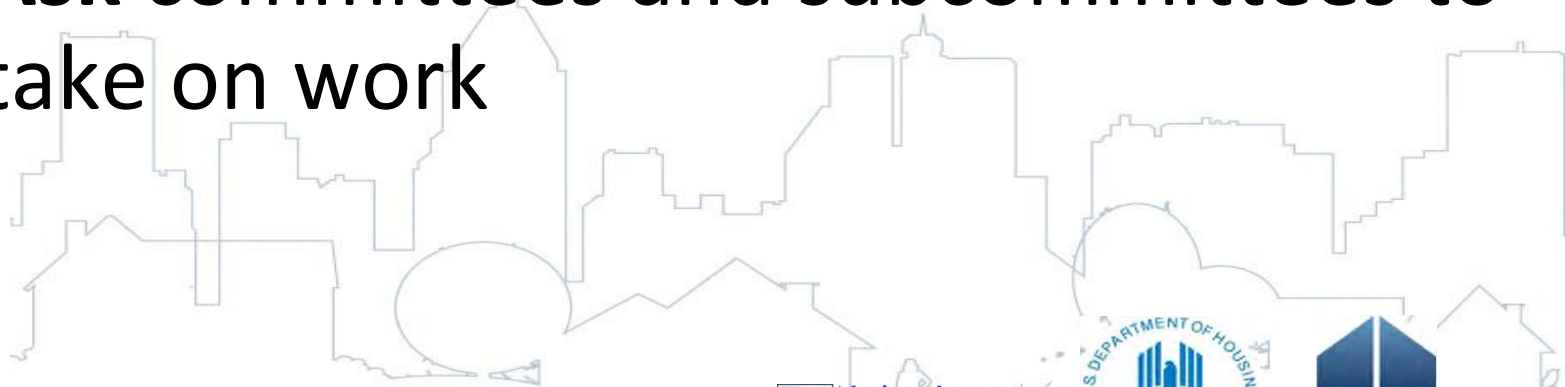
- Discharge Planning
- Rank and Review
- Systems Analysis
- CE Monitoring
- Racial Disparity
- Community Priorities
- Predictive Analytics

Design Reports WITH the Community, not FOR them



Become PART of the process;

- GET ON AGENDAS!
- Create and **volunteer** in workgroups and subcommittees
- **Offer** presentations and trainings
- **Ask** committees and subcommittees to take on work



Questions

Allyson Thiessen
www.caresny.org



Action Planning



- Clear goal
- Baseline
- Actions to help achieve goal
- Who is responsible for each action
- Timeline for each action
- Measure of success

IMPROVEMENT AREA GOAL: INCREASE ES BED COVERAGE TO 95%

BASELINE		OBJECTIVE	
25% ES bed coverage		Getting data collection, reporting requirements aligned & MOU stating the use of HMIS as a requirement	
STRATEGIC ACTIONS <i>[What will be done]</i>		RESPONSIBILITIES <i>[Who will do it]</i>	DELIVERABLE/ TIMELINE <i>[By When? Month/Date]</i>
Meet with local ES funders to agree on aligning data collection requirement & reporting Go beyond “making the pitch” get agreements in place		<ul style="list-style-type: none">• CoC lead: brings funders together• HMIS lead: maps data elements/ requirements	Have signed MOU’s by (date) that include language on aligned data collection , reporting and HMIS as a requirement.

CoC Lead and HMIS Lead Collaboration

- Are you having coverage conversations with the right people and workgroups?
- Are there clear roles and responsibilities around coverage?
- Are there clear goals around increasing Coverage?
- How are you tracking and holding yourself accountable?

Questions



HUD Certificate of Completion

Reminder: HUD is offering a Certificate-of-Completion for completing four of the seven sessions within the HMIS Foundations track.

To earn credit for completion of this session, please make sure you included your contact details when the session began.

Contact Information

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